

Council SUMMONS AND AGENDA

DATE: Thursday 28 September 2017

TIME: 7.30 pm

VENUE: Council Chamber, Harrow Civic Centre,
Station Road, Harrow, HA1 2XY

All Councillors are hereby summoned to attend the Council Meeting for the transaction of the business set out.



Hugh Peart
Director of Legal and Governance Services

Despatch Date: [20 September 2017]

Useful Information

Meeting details:

This meeting is open to the press and public.

Directions to the Civic Centre can be found at:
<http://www.harrow.gov.uk/site/scripts/location.php>.

Filming / recording of meetings

The Council will audio record Public and Councillor Questions. The audio recording will be placed on the Council's website.

Please note that proceedings at this meeting may be photographed, recorded or filmed. If you choose to attend, you will be deemed to have consented to being photographed, recorded and/or filmed.

When present in the meeting room, silent mode should be enabled for all mobile devices.

Meeting access / special requirements.

The Civic Centre is accessible to people with special needs. There are accessible toilets and lifts to meeting rooms. If you have special requirements, please contact the officer listed on the front page of this agenda.

An induction loop system for people with hearing difficulties is available. Please ask at the Security Desk on the Middlesex Floor.

Summons publication date: Wednesday 20 September 2017

PRAYERS

Reverend David Tuck, Priest-in-Charge, the Parish Church of St Alban's, North Harrow, will open the meeting with Prayers.

1. COUNCIL MINUTES (Pages 9 - 22)

That the minutes of the Annual meeting held on 18 May 2017 and of the Extraordinary meeting held on 13 June 2017 be taken as read and signed as correct records.

2. DECLARATIONS OF INTEREST

To receive declarations of disclosable pecuniary or non pecuniary interests, arising from business to be transacted at this meeting, from all Members of the Council.

3. PROCEDURAL MOTIONS

To receive and consider any procedural motions by Members of the Council in relation to the conduct of this Meeting. Notice of such procedural motions, received after the issuing of this Summons, will be tabled.

4. PETITIONS

To receive any petitions to be presented:

- (i) by a representative of the petitioners;
- (ii) by a Councillor, on behalf of petitioners;
- (iii) by the Mayor, on behalf of petitioners.

5. PUBLIC QUESTIONS *

A period of up to 15 minutes is allowed for members of the public to ask questions of members of the Executive, Portfolio Holders and Chairs of Committees, of which notice has been received no later than 3.00 pm two clear working days prior to the day of this Meeting. Any such questions received will be tabled.

6. LEADER AND PORTFOLIO HOLDERS' ANNOUNCEMENTS

To receive a presentation from the Leader of the Council and Portfolio Holders on business since the last ordinary meeting, followed by a question and answer session. The item is allotted 20 minutes.

7. SCRUTINY OF THE ACTION PLAN FOLLOWING OFSTED REPORT ON THE INSPECTION OF SERVICES FOR CHILDREN IN NEED OF PROTECTION, LOOKED AFTER CHILDREN AND CARE LEAVERS JANUARY 2017 (Pages 23 - 86)

Report of the Corporate Director, People

8. COMMUNITY SAFETY AND VIOLENCE VULNERABILITY AND EXPLOITATION STRATEGY (Pages 87 - 144)

Recommendation I: Cabinet
(13 July 2017)

9. CORPORATE PARENTING STRATEGY (Pages 145 - 148)

Recommendation I: Cabinet
(13 July 2017)

10. USE OF RETAINED RIGHT TO BUY RECEIPTS (Pages 149 - 152)

Recommendation I: Cabinet
(14 September 2017)

11. PENSION FUND COMMITTEE - ROLE OF CO-OPTEE (Pages 153 - 156)

Recommendation I: Pension Fund Committee
(28 June 2017)

12. IMPLEMENTATION OF THE MARKETS IN FINANCIAL INSTRUMENTS DIRECTIVE (MiFID II). (To Follow)

Recommendation I: Pension Fund Committee
(18 September 2017)

13. CONSTITUTIONAL AMENDMENTS - TERMS OF REFERENCE FOR THE HEALTH AND WELLBEING BOARD (Pages 157 - 174)

Report of the Monitoring Officer

14. APPOINTMENT OF CHAIR - TRAFFIC AND ROAD SAFETY ADVISORY PANEL

To receive nominations for the appointment of Chair of the Traffic and Road Safety Advisory Panel.

15. OUTSIDE BODIES

To consider proposals for changes in representation on the identified outside bodies as follows:

OUTSIDE BODY	REPRESENTATIVE TO BE REPLACED	NEW REPRESENTATIVE	POLITICAL GROUP HOLDING NOMINATION
Age UK	Councillor Kairul Kareema Marikar	Councillor Maxine Henson	Labour
Harrow in Europe Committee	Councillor Chika Amadi	Councillor Michael Borio	Labour
London Road Safety Council	Councillor Chika Amadi	Councillor Jerry Miles	Labour
Relate London North West	Councillor Chika Amadi	Councillor Anne Whitehead	Labour
Citizens' Advice Bureau	Councillor Barry Kendler	Councillor Maxine Henson	Labour

16. INFORMATION REPORT - DECISIONS TAKEN UNDER THE URGENCY PROCEDURE (Pages 175 - 180)

Report of the Monitoring Officer.

17. QUESTIONS WITH NOTICE *

A period of up to 15 minutes is allowed for asking written questions by Members of Council of a member of the Executive or the Chair of any Committee:-

- (i) of which notice has been received at least two clear working days prior to the day of this Meeting; or
- (ii) which relate to urgent matters, and the consent of the Executive Member or Committee Chair to whom the question is to be put has been obtained and the content has been advised to the Director of Legal and Governance Services by 12 noon on the day of the Council Meeting.

Any such questions received will be tabled.

18. MOTIONS

The following Motions have been notified in accordance with the requirements of Council Procedure Rule 15, to be moved and seconded by the Members indicated:

1. “Accessible London Underground stations Motion

To be moved by Councillor Krishna Suresh and seconded by Councillor Sue Anderson:

This Council notes:

- We would like to support the initiative of the Mayor of London, Sadiq Khan, to improve accessibility at Harrow on the Hill station as part of his £200m investment in improving step-free access on the London Underground over the next five years;
- Over 10.6 million journeys per year are made to and from Harrow on the Hill station on the Metropolitan line;
- Over 4 million journeys per year are made to and from Rayners Lane station on the Metropolitan and Piccadilly lines;

This Council believes:

- Improving accessibility at Rayners Lane station would enable even more Harrow residents and visitors to Harrow to travel independently, making travelling easier for a large number of people, especially those who are older, disabled or travelling with children in pushchairs;

This Council resolves:

To write to the Mayor of London, Sadiq Khan, and to the Rt Hon Chris Grayling MP, the Secretary of State for Transport, to pledge our support towards making Rayners Lane station accessible”.

2. “NJC pay Motion

To be moved by Councillor Kiran Ramchandani and seconded by Councillor Sachin Shah:

Harrow Council notes that:

- NJC basic pay has fallen by 21% since 2010 in real terms;
- NJC workers had a three-year pay freeze from 2010 to 2012;
- Local terms and conditions of many NJC employees have also been cut, impacting on their overall earnings;
- NJC pay is the lowest in the public sector;

- Job evaluated pay structure are being squeezed and distorted by bottom-loaded NJC pay settlements needed to reflect the increased National Living Wage and the Foundation Living Wage;
- There are growing equal and fair pay risks resulting from this situation.

This council therefore supports the NJC pay claim for 2018, submitted by UNISON, GMB and Unite on behalf of council and school workers and calls for the immediate end of the public sector pay restraint. NJC pay cannot be allowed to fall further behind other parts of the public sector. This council also welcomes the joint review of the NJC pay spine to remedy the turbulence caused by bottom-loaded pay settlements.

This council also notes the drastic ongoing cuts to local government funding and calls on the Government to provide additional funding to fund a decent pay rise for NJC employees and the pay spine review.

This council therefore resolves to:

- Call immediately on the LGA to make urgent representations to Government to fund the NJC claim and the pay spine review and notify us of their action in this regard
- Write to the Prime Minister and Chancellor supporting the NJC pay claim and seeking additional funding to fund a decent pay rise and the pay spine review
- Meet with local NJC union representatives to convey support for the pay claim and the pay spine review.”

3. “Making the next census count for our Armed Forces community Motion

To be moved by Councillor Sachin Shah and seconded by Councillor Sue Anderson:

This council notes:

1. The obligations it owes to the Armed Forces community within Harrow as enshrined in the Armed Forces Covenant; that the Armed Forces community should not face disadvantage in the provision of services and that special consideration is appropriate in some cases, especially for those who have given the most.
2. The absence of definitive and comprehensive statistics on the size or demographics of the Armed Forces community within Harrow. This includes serving Regular and Reserve personnel, veterans, and their families.

3. That the availability of such data would greatly assist the council, local partner agencies, the voluntary sector, and national Government in the planning and provision of services to address the unique needs of the Armed Forces community within Harrow.

In light of the above, this council moves to support and promote The Royal British Legion’s call to include a new topic in the 2021 census that concerns military service and membership of the Armed Forces community. We further call upon the UK Parliament, which will approve the final census questionnaire through legislation in 2019, to ensure that the 2021 census includes questions concerning our Armed Forces community.”

19. EXCLUSION OF THE PRESS AND PUBLIC

To resolve that the press and public be excluded from the meeting for the following item of business, on the grounds that it involves the likely disclosure of confidential information in breach of an obligation of confidence, or of exempt information as defined in Part I of Schedule 12A to the Local Government Act 1972:

<u>Agenda Item No</u>	<u>Title</u>	<u>Description of Exempt Information</u>
20.	Information Report – Severance Package of £100,000 or Greater	Information under paragraph 1 (contains information relating to any individuals).

20. INFORMATION REPORT - REMUNERATION PACKAGES AND SEVERANCE PAYMENTS OF £100,000 OR GREATER (Pages 181 - 188)

* Data Protection Act Notice

The Council will audio record items 5 and 17 (Questions with Notice) and will place the audio recording on the Council’s website, which will be accessible to all.

[Note: The questions and answers will not be reproduced in the minutes.]

COUNCIL 28 SEPTEMBER 2017

MINUTES

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COUNCIL (ANNUAL) MINUTES

18 MAY 2017

Present:

- * Councillor Mrs Rekha Shah (The Worshipful the Mayor)
- * Councillor Margaret Davine (The Deputy Mayor)

Councillors:

<ul style="list-style-type: none"> * Ghazanfar Ali * Richard Almond * Mrs Chika Amadi * Jeff Anderson * Sue Anderson * Marilyn Ashton * Mrs Camilla Bath * June Baxter * Christine Bednell * James Bond * Michael Borio * Simon Brown * Kam Chana * Ramji Chauhan * Niraj Dattani * Jo Dooley * Keith Ferry * Ms Pamela Fitzpatrick † Stephen Greek * Susan Hall * Glen Hearnden * Graham Henson * Maxine Henson * John Hinkley * Nitesh Hirani † Ameet Jogia * Manjibhai Kara * Barry Kendler * Jean Lammiman * Barry Macleod-Cullinane * Kairul Kareema Marikar 	<ul style="list-style-type: none"> * Ajay Maru * Jerry Miles * Mrs Vina Mithani * Amir Moshenson * Chris Mote * Janet Mote * Christopher Noyce * Phillip O'Dell * Paul Osborn * Nitin Parekh * Ms Mina Parmar * Varsha Parmar * Primesh Patel * Pritesh Patel † David Perry * Kanti Rabadia * Kiran Ramchandani * Mrs Christine Robson * Lynda Seymour * Aneka Shah-Levy * Sachin Shah * Norman Stevenson * Krishna Suresh * Sasi Suresh * Adam Swersky † Bharat Thakker * Antonio Weiss * Georgia Weston * Anne Whitehead * Stephen Wright
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* Denotes Member present
† Denotes apologies received

PRAYERS

The meeting opened with Prayers offered by Dr Vinod Kapashi, the Mayor's Chaplain and Spiritual Leader, Kenton Temple.

230. ELECTION OF MAYOR

RESOLVED: That Councillor Margaret Davine be elected Mayor of the London Borough of Harrow for the Municipal Year 2017/18.

231. MINUTE SILENCE

Members of Council stood and observed a minute silence for the late Councillor Mitzi Green and Mrs Mary Dorothea Carmody, former Mayoress.

232. ELECTION AND INVESTITURE OF DEPUTY MAYOR

RESOLVED: That Councillor Kairul Kareema Marikar be elected Deputy Mayor of the London Borough of Harrow for the Municipal Year 2017/18.

233. APPOINTMENT OF CHAPLAIN

The Mayor confirmed to Council that she had appointed Reverend David Tuck, Priest-in-Charge, the Parish Church of St Alban's, North Harrow as her Chaplain for her Mayoral Year.

234. CIVIC FUNCTIONS

RESOLVED: That the dates of the Civic Functions be noted.

235. DECLARATIONS OF INTEREST

Item 9 – Petition – Harrow Association of Disabled People Welfare Benefits Team

Councillor Ghazanfar Ali declared an interest in that he was a Council appointed representative on Harrow Association of Disabled People Committee. He would remain in the Chamber for the consideration of this item.

Councillor Sue Anderson declared a non-pecuniary interest in that she was a Friend of Harrow Association of Disabled People. She would remain in the Chamber for the consideration of this item.

Councillor Susan Hall declared a disclosable non-pecuniary interest and would leave the Chamber for the discussion and voting on this item.

Councillor Jean Lammiman declared an interest in that she was a Trustee of Harrow Association of Disabled People. She would remain in the Chamber for the consideration of this item.

Councillor Lynda Seymour declared a non-pecuniary interest in that her sister-in-law had received assistance from Harrow Association of Disabled People. She would remain in the Chamber for the consideration of this item.

Councillor Norman Stevenson declared an interest in that he was a Council appointed representative on Harrow Association of Disabled People Committee. He would remain in the Chamber for the consideration of this item.

Councillor Krishna Suresh declared an interest in that he was a Trustee of Harrow Association of Disabled People. He would remain in the Chamber for the consideration of this item.

236. PROCEDURAL MOTIONS

There were no procedural motions.

237. COUNCIL MINUTES

RESOLVED: That the minutes of the meeting held on 23 February 2017 be taken as read and signed as a correct record.

238. COUNCILLOR MITZI GREEN

Members paid tribute to the late Councillor Mitzi Green.

239. PETITION - HARROW ASSOCIATION OF DISABLED PEOPLE WELFARE BENEFITS TEAM

In accordance with the Council's Petition Scheme, Council received a petition containing over 2,000 signatures as follows

- (i) Petition submitted by Bill Phillips, Chair of Harrow Association of Disabled People, containing approximately 3,000 signatures stating

“The HAD Welfare Benefits team have decades of experience and success helping disabled people. Each year they assist over 1,000 people with disabilities in Harrow to claim more than £1,000,000 in benefits from the government; so they can then live their lives with independence and dignity. This service will cease if Harrow Council continues with its proposed cuts to voluntary sector funding.

We the undersigned demand that the Council continue the £27,000 pa required to directly fund the HAD Welfare Benefits team”.

- (ii) Debate was held on the content of the petition.

RESOLVED: That the petition referred to the Corporate Director of Resources and Commercial for consideration.

240. CABINET AND COMMITTEE MEMBERSHIPS

RESOLVED: That

- (i) it be noted that Councillor Keith Ferry was the Deputy Leader of the Council;**
- (ii) the Councillors appointed to Cabinet with the identified portfolios, as contained in the report, be noted;**
- (iii) the terms of reference for the Portfolio Holders attached at Appendix A to the report be agreed for inclusion in the Council's Constitution;**
- (iv) the determination of the allocation of places on the Council's Committees contained in the report and in accordance with the 'political balance' rules in the Local Government and Housing Act 1989 be agreed and Members be appointed to them, in accordance with the notification from Political Groups;**
- (v) the establishment and terms of reference of all of the Council's Committees and other bodies contained in Appendix B to the report be agreed;**
- (vi) the amendments to the terms of reference of the Health and Wellbeing Board approved by the Monitoring Officer be included in the Council's Constitution; and**
- (vii) the establishment and terms of reference of the Cabinet Advisory Panels and Consultative Forums, as set out in Appendix C to the report, be agreed.**

241. APPOINTMENT OF CHAIRS TO COMMITTEES

RESOLVED: That the following Councillors be elected as the Chairs of the relevant Committees:

Governance, Audit, Risk Management and Standards	Councillor Antonio Weiss
Health and Wellbeing Board	Councillor Sachin Shah
Licensing and General Purposes	Councillor Krishna Suresh
Overview and Scrutiny	Councillor Phillip O'Dell
Planning	Councillor Keith Ferry
Pension Fund	Councillor Nitin Parekh

242. APPOINTMENT OF REPRESENTATIVES TO OUTSIDE BODIES

RESOLVED: That the Outside Body appointments for the Municipal Year 2017/18 be approved, as set out in the Appendix to these minutes.

243. SCRUTINY ANNUAL REPORT 2016/17

RESOLVED: That the Scrutiny Annual Report 2016/17 be endorsed.

244. DATES OF COUNCIL MEETINGS 2017/18

RESOLVED: That the dates of the following Council meetings be confirmed:

28 September 2017

30 November 2017

22 February 2018

24 May 2018 (Annual)

(CLOSE OF MEETING: All business having been completed, the Mayor declared the meeting closed at 8.29 pm).

APPOINTMENTS TO OUTSIDE BODIES 2017/18

Name of body	No. reps.	Appointee (for 2017/18)	Deputies where applicable (for 2017/18)
(Brent and Harrow) Trading Standards Joint Advisory Board	3 (+ 3 deputies)	1. Cllr Keith Ferry 2. Cllr Varsha Parmar 3. Cllr Mrs Vina Mithani	1. Cllr Barry Kendler 2. Cllr Kairul Kareema Marikar 3. Cllr Susan Hall
Age UK Harrow	2	1. Cllr Kairul Kareema Marikar 2. Cllr Manjibhai Kara	N/A
Bentley Priory Nature Reserve Management Committee	4	1. Cllr Simon Brown 2. Cllr Kairul Kareema Marikar 3. Cllr Manjibhai Kara 4. Cllr Mrs Camilla Bath	N/A
Deputy Lord Lieutenant's Committee	4 (+ Mayor)	1. Vacancy 2. Vacancy 3. Cllr Chris Mote 4. Cllr Keith Ferry 5. Cllr Mrs Camilla Bath	N/A
Edward Harvist Charity Appointment from May 2014 for a 4-year term	1	1. Howard Bluston	N/A
Greater London Enterprise Ltd	1	1. Cllr Keith Ferry	N/A
Greater Stanmore Country Park Management Committee	2 Majority Party 1 Opposition	1. Cllr Keith Ferry 2. Cllr Sue Anderson 3. Cllr Mrs Camilla Bath	N/A
Harrow Association of Disabled People	2	1. Cllr Ghazanfar Ali 2. Cllr Norman Stevenson	N/A
Harrow Citizens' Advice Bureau	1 (+1 deputy)	1. Cllr Barry Kendler	1. Cllr Richard Almond
Harrow Heritage Trust Executive Committee	3	1. Cllr Simon Brown 2. Cllr Keith Ferry 3. Cllr Janet Mote	N/A

Name of body	No. reps.	Appointee (for 2017/18)	Deputies where applicable (for 2017/18)
Harrow in Europe Committee	5	1. Cllr Barry Kendler 2. Cllr Maxine Henson 3. Cllr Mrs Chika Amadi 4. Cllr Jean Lammiman 5. Cllr Manjibhai Kara	N/A
Harrow Nature Conservation Forum	3	1. Cllr Sue Anderson 2. Cllr Anne Whitehead 3. Vacancy	N/A
Harrow on the Hill Forum	6 (3 ward members 3 group members)	1. Cllr Glen Hearnden 2. Cllr Barry Macleod-Cullinane 3. Cllr June Baxter 1. Cllr Ghazanfar Ali 2. Cllr Sue Anderson 3. Cllr Susan Hall	N/A
Harrow Safer Neighbourhood Board	2 (PH + Shadow)	1. Cllr Varsha Parmar 2. Cllr Susan Hall	N/A
Harrow Weald Common Board of Conservators Appointment from May 2014 for a 4-year term	5 (3 Ward Members + 2 (1 from each Group))	1. Cllr Phillip O'Dell 2. Cllr Pritesh Patel 3. Cllr Ramji Chauhan 4. Cllr Stephen Greek 5. Cllr John Hinkley	N/A
Homes Limited	2 (Ward Cllrs)	1. Cllr Graham Henson 2. Cllr Maxine Henson	N/A
HOPE (Harrow) Harrow Family Learning Network	1 (+ 1 Deputy)	1. Cllr Janet Mote	1. Cllr Phillip O'Dell
John Pardoe Charity	4	1. Cllr Nitin Parekh 2. Cllr Mrs Camilla Bath 3. Cllr Christine Bednell 4. Cllr Jean Lammiman	N/A

Name of body	No. reps.	Appointee (for 2017/18)	Deputies where applicable (for 2017/18)
Joint Health Overview and Scrutiny Committee	2	1. Cllr Michael Borio 2. Cllr Mrs Vina Mithani	N/A
LBH Bus & Highways Liaison Meeting	4 (from different groups)	1. Cllr Jeff Anderson 2. Cllr Barry Kendler 3. Cllr Mrs Camilla Bath 4. Cllr John Hinkley	N/A
LBH Rail Liaison Meeting	4 (from different groups)	1. Cllr Sue Anderson 2. Cllr Phillip O'Dell 3. Cllr Mrs Camilla Bath 4. Cllr John Hinkley	N/A
League of Friends of Northwick Park Hospital	1 (+ 1 deputy)	1. Cllr Anne Whitehead	1. Cllr Mrs Rekha Shah
Lee Valley Regional Park Authority Appointment from May 2014 for a 4-year term	1	1. Cllr Paul Osborn	N/A
Local Government Association - General Assembly Meetings	4 (+ 4 deputies)	1. Cllr Sachin Shah 2. Cllr Keith Ferry 3. Cllr Susan Hall 4. Cllr Barry Macleod-Cullinane	1. Cllr Kiran Ramchandani 2. Cllr Sue Anderson 3. Cllr Paul Osborn 4. Cllr Stephen Greek
Local Government Information Unit	1	1. Cllr Kiran Ramchandani	N/A
London Councils' Children and Young People Lead Member	1	1. Cllr Mrs Christine Robson	N/A
London Councils' Crime & Public Protection Lead Member	1	1. Cllr Graham Henson	N/A
London Councils' Economic Development/Regeneration Lead Member	1	1. Cllr Keith Ferry	N/A
London Councils' Employment and Skills Lead Member	1	1. Cllr Glen Hearnden	N/A
London Councils' Grants Committee (Associated Joint Committee)	1 (+ 4 deputies)	1. Cllr Sue Anderson	1. Cllr Sachin Shah 2. Cllr Kiran Ramchandani 3. Cllr Graham Henson 4. Cllr Mrs Christine Robson
London Councils' Greater London Employment Forum	1 (+ 1 deputy)	1. Cllr Kiran Ramchandani	1. Cllr Graham Henson
London Councils' Greater London Provincial Council	1	1. Cllr Antonio Weiss	N/A

Name of body	No. reps.	Appointee (for 2017/18)	Deputies where applicable (for 2017/18)
London Councils' Health and Adult Services Lead Member	1	1. Cllr Simon Brown	N/A
London Councils' Housing Lead Member	1	1. Cllr Glen Hearnden	N/A
London Councils' Leaders' Committee (s101 Joint Committee)	1 (+ 2 deputies)	1. Cllr Sachin Shah	1. Cllr Keith Ferry 2. Cllr Kiran Ramchandani
London Councils' Pensions CIV (Sectoral Joint Committee)	1 (+1 deputy)	1. Cllr Nitin Parekh	1. Vacancy
London Councils' Planning/ Infrastructure Lead Member	1	1. Cllr Keith Ferry	N/A
London Councils' Transport & Environment Committee (Associated Joint Committee)	1 (+ 4 deputies)	1. Cllr Graham Henson	1. Vacancy 2. Vacancy 3. Vacancy 4. Vacancy
London Home and Water Safety Council (Port of London Authority)	1	1. Cllr Manjibhai Kara	N/A
London Road Safety Council	2	1. Cllr Mrs Chika Amadi 2. Cllr Manjibhai Kara	N/A
London Youth Games	1	1. Cllr Sue Anderson	N/A
Mayor of Harrow's Charity Fund Trustees	3 (+ 4 Burgesses)	1. Ann Groves 2. Alderman Keith Toms 3. Cllr Christine Bednell Burgesses: 1. Mrs G Branch 2. Mr O Cock 3. Mrs B Cripps 4. Vacancy	N/A
Middlesex Guildhall Collection and Trust Fund	3	1. Cllr Margaret Davine 2. Cllr Mrs Camilla Bath 3. Cllr Jean Lammiman	N/A
Relate London North West	2	1. Cllr Mrs Chika Amadi 2. Cllr Margaret Davine	N/A
Reserve Forces and Cadets Association for Greater London	1	1. Cllr Aneka Shah-Levy	N/A
Sir John Wolstenholme Charity	2	1. Cllr Mrs Camilla Bath 2. Cllr Christine Bednell	N/A

Name of body	No. reps.	Appointee (for 2017/18)	Deputies where applicable (for 2017/18)
Standing Advisory Council for Religious Education (SACRE)	3 (+3 deputies)	1. Cllr Ghazanfar Ali 2. Cllr Kairul Kareema Marikar 3. Cllr Mrs Camilla Bath	1. Cllr Mrs Chika Amadi 2. Cllr Simon Brown 3. Cllr Manjibhai Kara
Victoria Hall Trust Appointment from May 2014 for a 4-year term	1	1. Cllr Ghazanfar Ali	N/A
West House and Heath Robinson Museum Trust	1	1. Cllr Stephen Wright	N/A
West London Alliance	1 (Leader only)	1. Cllr Sachin Shah	N/A
West London Waste Authority	1	1. Cllr Graham Henson	N/A

COUNCIL EXTRAORDINARY MINUTES

13 JUNE 2017

Present: * Councillor Margaret Davine (The Worshipful the Mayor)
 * Councillor Kairul Kareema Marikar (The Deputy Mayor)

Councillors:	† Ghazanfar Ali	* Jerry Miles
	* Richard Almond	* Mrs Vina Mithani
	* Mrs Chika Amadi	† Amir Moshenson
	† Jeff Anderson	* Chris Mote
	* Sue Anderson	* Janet Mote
	* Marilyn Ashton	* Christopher Noyce
	* Mrs Camilla Bath	* Phillip O'Dell
	* June Baxter	* Paul Osborn
	* Christine Bednell	* Nitin Parekh
	* James Bond	* Ms Mina Parmar
	* Michael Borio	† Varsha Parmar
	* Simon Brown	† Primesh Patel
	* Kam Chana	* Pritesh Patel
	* Ramji Chauhan	* David Perry
	* Niraj Dattani	* Kanti Rabadia
	* Jo Dooley	* Kiran Ramchandani
	* Keith Ferry	* Mrs Christine Robson
	* Ms Pamela Fitzpatrick	* Lynda Seymour
	* Stephen Greek	* Aneka Shah-Levy
	* Susan Hall	* Mrs Rekha Shah
	* Glen Hearnden	* Sachin Shah
	* Graham Henson	* Norman Stevenson
	* Maxine Henson	* Krishna Suresh
	* John Hinkley	* Sasi Suresh
	* Nitesh Hirani	* Adam Swersky
	* Ameet Jogia	* Bharat Thakker
	* Manjibhai Kara	* Antonio Weiss
	* Barry Kendler	† Georgia Weston
	* Jean Lammiman	* Anne Whitehead
	* Barry Macleod-Cullinane	* Stephen Wright
	* Ajay Maru	

* Denotes Member present
† Denotes apologies received

PRAYERS

The meeting opened with Prayers offered by Reverend David Tuck, Priest-in-Charge, the Parish Church of St Alban's, North Harrow.

245. DECLARATIONS OF INTEREST

There were no declarations of interest.

246. MINUTE SILENCE

Members of Council stood and observed a minute silence in memory of those killed and injured during the recent atrocities in London.

The Mayor invited Councillor Jean Lammiman to pay tribute James MacMullan, a former pupil of Nower Hill High School and friend of her son, who had died in the attack.

247. PETITION - ONE SITE SOLUTION FOR PINNER WOOD SCHOOL

In accordance with the Council's Petition Scheme, Council received a petition containing over 2,000 signatures in relation to Pinner Wood School.

The Mayor indicated that she would allow the lead petitioner, Jenny McCann, to make a statement on behalf of the parents of Pinner Wood School rather than present the petition as the outcome sought had been achieved.

RESOLVED: That the petition be noted.

248. REQUISITION SUBMITTED BY ELECTED MEMBERS - PINNER WOOD SCHOOL

The requisition submitted by seven elected Members in relation to Pinner Wood School was debated.

The Mayor advised Council that a report on Pinner Wood School was due to be considered by Cabinet on 15 June 2017.

RESOLVED: That requisition in relation to Pinner Wood School be received and noted.

(CLOSE OF MEETING: All business having been completed, the Mayor declared the meeting closed at 8.25 pm).

**COUNCIL
28 SEPTEMBER 2017**

**SCRUTINY OF ACTION PLAN FOLLOWING
OFSTED REPORT ON THE INSPECTION OF
SERVICES FOR CHILDREN IN NEED OF
PROTECTION, LOOKED AFTER CHILDREN AND
CARE LEAVERS JANUARY 2017**

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REPORT FOR: Council Meeting

Date of Meeting: 28 September 2017

Subject: Scrutiny of action plan following Ofsted report on the inspection of services for children in need of protection, looked after children and care leavers January 2017

Responsible Officer: Chris Spencer,
Corporate Director People Services
Chris.spencer@harrow.gov.uk
0208 424 1356

Exempt: No

Wards affected: All

Enclosures: **Appendix 1: Ofsted Report on Harrow published 31.03.17**

Appendix 2: Harrow Children's Post Inspection Action Plan April 2017

Section 1 – Summary and Recommendations

Appendix 1 is the attached Ofsted report following the January 2017 statutory Inspection of services for children in need of protection, looked after children and care leavers, with the action plan required within 70 working days. The final OFSTED report was published 31/3/2017 and Appendix 2 is the action plan and subsequent progress that was submitted by the Council to OFSTED following receipt of the report and consideration of the 10 recommendations.

Recommendations:
Council is requested to:

Note and comment on the inspection report and associated action plan, with progress reports on 10 recommendations and to note that progress on the implementation of the action plan will be kept under review by elected Members and officers through Service Planning, Improvement Board, Overview and Scrutiny, and Corporate Parenting Panel processes, well as the Local Safeguarding Children Board and Health and Well-Being Board.

Reason: (For recommendations)

- Ofsted is the independent statutory regulator of children's services.
- Addressing the recommendations in the inspection report is not optional, and will be tested in future inspection activity.
- The Local Authority is required to provide an action plan to Ofsted within 70 working days of the published inspection report.

Section 2 – Report

Introduction

This statutory inspection of Children's Services supports delivery of the Council's vision: **Working Together to Make a Difference for Harrow**, and the Ambition Plan themes: **Protect the Most Vulnerable and Support Families**.

The related action plan identifies how the report recommendations have been implemented across Children's Services to further support children, young people and their families in Harrow achieve positive life outcomes. The People Services Directorate is ambitious to ensure that good outcomes are embedded across the whole directorate and that future activity is focussed on achieving an outstanding service. As the updated action plan is monitored through the Council Corporate performance process: it is covered in this report under performance

Background

1. The previous full inspection of children's services was in May 2012, under a different Ofsted framework, with both safeguarding arrangements and services to children looked after judged the Local Authority to be 'Adequate overall', with some elements of Good. It is widely recognised that the current Safeguarding Inspection Framework (SIF) is a tougher and more rigorous test than the previous inspection framework.
2. Statutory inspection of local authority functions is carried out by Ofsted under section 136 of the Education and Inspections Act 2006.

Re-inspection was expected within a 3 year cycle under a revised Ofsted Framework originally introduced in 2013, which was expanded subsequently into a 5 year programme. The current Ofsted inspection Framework uses a grading system of: Inadequate; Requires Improvement; Good; and Outstanding.

The judgement on Harrow Council with an outcome as 'Good' achieved one grade higher than previously, and demonstrates the continuing journey of improvement being achieved.

This outcome places Harrow in the top performance quartile of all local authorities across London and nationally. This outcome was achieved whilst maintaining Harrow's reputation for value for money, as evidenced by local authority comparator data, available through the Chartered Institute of Public Finance and Accountancy (CIPFA), the London Councils Social Care Finance Survey, and indicative 2017/18 benchmarking through Section 251 returns. This data places Harrow as spending lower per child than the average of its statistical neighbours. Children and Young People Services in Harrow really have achieved more with less than most other local authorities, both across London and from a national perspective.

3. The Single Inspection Framework [SIF] inspection considers the following:
 - children who need help and protection, including early help
 - children looked after, including: adoption, fostering, the use of residential care, children who return home, and achieving permanent homes and families for children and young people
 - young people leaving care or preparing to leave care
 - management and leadership
4. During the four week inspection, up to 11 inspectors focused on a wide range of issues:
 - the experiences of children and young people
 - the thresholds for providing help, care and protection to children and young people
 - evaluating the quality and impact of the help, care and protection given to children and young people and families
 - evaluating the quality and impact of the support to young people looked after, and routes out of the care system through adoption, and statutory care leavers provision

- evaluating the quality and impact of leadership and governance arrangements
 - meeting with children, young people, parents and their carers
 - shadowing social workers in their daily activities
 - observing a wide range of meetings, including child protection conferences and looked after children reviews
5. Inspectors looked closely at the experiences of children and young people who have needed or still need help and/or protection, as well as children and young people who are looked after and those leaving care as young adults. They tracked in the region of 200 individual cases and spoke with many social work staff, several children and young people, parents/carers, foster carers and adoptive parents and other professionals involved such as Health and Police. They considered how well the local authority knows itself and the difference being made to the life chances of vulnerable children and young people resident in Harrow.
 6. The local authority is required to prepare and publish a written statement of the action it intends to take in response to the report. A copy of this statement was sent to Ofsted at ProtectionOfChildren@ofsted.gov.uk within 70 working days of receiving the final report. [The Education and Inspections Act 2006 (Inspection of Local Authorities) Regulations 2007 www.legislation.gov.uk/uksi/2007/462/contents/made]

Current situation

1. Harrow's short notice full inspection of Children's Service started 16 January 2017 and completed onsite 09 February 2017. The inspection team involved 11 inspectors. Ofsted published their combined Harrow Local Authority and Local Safeguarding Children Board report 31 March 2017.
2. Harrow Local Authority was judged 'Good' overall, with services well matched to the needs of children and young people and their families in Harrow, which effectively reduced risk and improve their life outcomes. Inspectors identified strong and effective leadership having a positive impact on service design, development and delivery. Harrow was judged to know itself well, with a clear understanding of strengths and areas for development.
 3. At the time of inspection, Early Support Service transformation was in progress but still at an initial phase, following an extended consultation period. Inspectors acknowledged this and recognised the strong foundations underlying the restructure and relocation to community hubs, while identifying Early Support as a priority for continuing progress.

Early Support implementation continues to be rolled out, and during the inspection an Early Support Project Board was convened to oversee progress towards full operation from September 2017.
4. Inspectors recognised the investment made by the Council in creating additional social work posts to meet increasing demand. As a result, the report judged social work caseloads as manageable, enabling social

workers to visit children regularly. Inspectors also recognised the positive impact of Harrow's 'joined-up approach' to recruitment, retention and development and the importance of a sufficient, skilled and stable workforce to drive improvement, with appropriate management time and focus.

5. Commitment to performance management and quality assurance activity was identified across the organisation, which had enabled improvements to be achieved and sustained. The proposed action plan will further embed strong performance and address areas for development identified through the inspection process.

Failure to address these areas for development effectively risks future inspection adverse impact.

Legal Implications

Part 8 of the Education and Inspections Act 2006 provides the statutory framework of OFSTED inspections. Section 136 and 137 provide the power for OFSTED to inspect on behalf of the Secretary of State and requires the Chief Inspector to produce a report following such an inspection. Following receipt of the report, the local authority must prepare a written statement of (1) action which they propose to take in light of the report and (2) the period within which they propose to take that action.

Financial Implications

The risk of failing an Ofsted inspection is recognised to have considerable financial implications to the council. However, this inspection found all statutory requirements were met in full and the judgement on the Local Authority delivery of children's services was 'Good'. There are no additional implications arising from this inspection, as detailed in the published report.

Equalities implications / Public Sector Equality Duty

This report sets out the actions we are taking to secure further improvements, which when achieved will have a positive impact on all residents in Harrow and in particular children and young people.

Performance Issues

1. Following the published inspection report a action plan has been devised and implemented. Activity across all 10 recommendations has been achieved, and is subject of ongoing developmental actions and management oversight.
2. The first recommendation was aimed at ensuring that all children and their family needing an early help assessment and a package of support coordinated by a lead professional were able to receive one. This has been addressed by the Local Authority (LA) in partnership with the Harrow Safeguarding Children Board (HSCB) up-dating and implementing a revised early support pathway following the re-organisation of early support services. The pathway was subject of a comprehensive consultation with partner agencies, and was launched in June 2017. The new approach has dispensed with the Common

Assessment Framework (CAF) as a means of assessing young people and their families. Instead a Family Led Needs Analysis (FLNA) or Youth Led Needs Analysis (YLNA) has been piloted and introduced. This process values families identifying the things that they would want to change in order to be the young person / parent they want to become. When fully embedded, this will mean that families will not be subject of unnecessary assessment processes.

The new early support model is a non-statutory service that actively works with young people and their family to reach their goals and aspirations through positive activities, group work and direct work where required. Bespoke programmes which are time limited have been developed from themes identified through contacts via the Multi Agency Safeguarding Hub (MASH). The comprehensive early support offer has been communicated to professionals and families through a range of channels, and take up of services is increasing. Performance management data is under development across 3 case management systems: E-start, Framework I (Mosaic), and the Integrated Youth Support System (IYSS). An Integrated suite of performance management data currently under development will be available from September 2017. Current reach levels across early support hubs (Cedars and Hillview) demonstrate increasing activity, with 2,198 families attending sessions in June 2017 compared to 2,053 in January 2017. It is estimated that year end reach levels will be 9,200 families, which exceeds the previously highest level in 2014 (9,066). This is demonstrating that the reach of early support services is back to the level prior to the 2015 re-organisation, and testament to the success of the new operating model.

3. The second recommendation was aimed at ensuring that decision making within the Multi Agency Safeguarding Hub (MASH) is consistently timely, so that all children who are subject of a referral receive assessment and support in a timely manner. This has been addressed through a review and revision of the performance management framework in Framework I (Mosaic). As a result, daily tracking systems have improved management oversight. The impact has been a sustained improvement in MASH RAG performance April – July 2017. This has also supported the timely delivery of assessment activity in the First Response Team (FRT) with 97% of referrals being completed within 45 days in April-July 2017.
4. The third recommendation was aimed at ensuring that assessments and plans are consistently up to date, reflective of children's views and clear about what is expected of families. This has been addressed through the managers of the Independent Reviewing Officers (IRO's) and Child Protection Chairs (CPC's) focussing through supervision SMART planning. Internal SMART plan training is currently being commissioned to be delivered in the 3rd quarter, to include managers in the Children In Need and Children Looked After services. Plans are consistently up-dated following Child Protection Conferences, and Children Looked After Review's. Re-assessment practice is becoming embedded through Child In Need (CIN) Review meetings. Monitoring by IRO's and CPC's, and audit analysis demonstrate that young people

are encouraged to contribute to these processes and, satisfaction levels are high with regard to the quality of social work input, and that young people feel safe where they live.

5. The fourth recommendation was aimed at ensuring that child protection strategy discussions under S47 of the Children Act 1989 involve the full range of relevant agencies, so that the full range of relevant information informs assessment of risk. This recommendation has been addressed by the development in FRT of guidance and clear contact pathways for key agencies in Harrow. This has been adopted in CIN Service for the S47 investigations undertaken on open cases. As a result local data demonstrates that there has been an increase in key agencies participating during S47 investigations. From April – July 2017 there have been 309 S47 investigations. These investigations have been supported by 21 different agency categories, 3,532 occasions. On average 11.4 agencies contribute to a child protection investigation in Harrow.
6. The fifth recommendation was aimed at ensuring that Children Looked After (CLA) receive timely therapeutic support when they need it. This recommendation has been addressed through the commissioning and launch of the Harrow Horizons service in July 2017. Therapeutic services for CLA have also been further strengthened through a Tripartite Funding panel with Education and the Clinical Commissioning Group (CCG), which also considers young people placed out of borough. Specialist nurses for CLA are closely aligned with Children Adolescent Mental Health Service (CAMHS) to track and monitor CLA referrals.
7. The sixth recommendation was aimed at improving the quality of plans when children return to their families, so that there is clarity about what services will be provided, who will provide them, and by when and what they are aimed at achieving. This has been addressed by ensuring that all young people have a final review meeting so that discharge arrangements are considered and in place prior to moving back into the care of their family. During April – July 2017 no formal escalation by an IRO was required following a discharge review meeting. Of the 55 young people that left the care of the local authority during this period, 21 returned into the care of their family. None of the 21 young people have since been subject of a child protection plan, or have returned into care.
8. The seventh recommendation was aimed at ensuring professionals consistently implement actions required between review meetings for children looked after (CLA). This has been addressed by Supervising Social Workers (SSW) and IRO's ensure that foster carers are prepared and supported to participate in CLA review meetings. Social work managers will ensure that agreed actions are progressed between review meetings. A performance management report is currently being refined to capture SSW visiting arrangements, and will be in place by September 2017. The Advocacy service for young people is being re-commissioned (September 2017), and the scope of advocacy has been widened to include care leavers and parents

requiring support in CP and CLA cohorts. Review timeliness remains good, with 98% of reviews held between April – July 2017 being on time, and no formal escalations by IRO's required regarding significant delay in progressing care planning.

9. The eighth recommendation was aimed at ensuring the good support experienced by the vast majority of care leavers is extended to all care leavers, so that their needs are better met. This has been addressed through the timely completion of pathway planning, so that support for emotional well-being, education, employment, training, and accommodation needs is timely. Current outcomes indicate through key performance indicators reported to the Department for Education (DfE) that fewer care leavers in Harrow are not in employment, education or training (NEET) 28.3% compared to a national average of 37.9%. Also, higher numbers of care leavers in Harrow are in suitable accommodation with 95.7% compared to 83% nationally. Performance improvements have been supported through a commissioned service "Prospects" that support employment and training opportunities for care leavers, and extending the reach of the Virtual School for CLA nurse supporting care leavers.
10. The ninth recommendation was aimed at strengthening the quality of learning from audits through better involvement and use of feedback from children and their families. This has been addressed by revising the audit process to include direct feedback from young people and their family. Further action is required to fully embed this in audit practice. However, feedback and analysis themes from young people are included in quarterly analysis e.g. young people report dissatisfaction when they experience a change in social worker. Direct work skills of social workers is planned to be enhanced through the delivery of motivational interview technique and mental health training over the next 2 quarters.
11. The tenth, and final recommendation, was aimed at ensuring that there are improvements in the functioning of overview and scrutiny panel, to ensure that it is more sharply focussed on children and that its work has an impact on improving both services for children and the outcomes they achieve. Comprehensive response has been agreed with significant progress on track as planned. This is being addressed through the Centre for Public Sector Scrutiny (CFPS) which has been commissioned to conduct a review of scrutiny effectiveness in the LA. The review will report in September 2017. The membership of Overview and Scrutiny has recently been refreshed, and the work plan is being aligned to include key issues in Children's Services. Recent examples of how impact of the revised work plan, include scrutiny on budget pressures in relation to CLA placements, and families that have no recourse to public funds (NRPF). The Overview and Scrutiny process is being used to monitor this important OFSTED action plan.

Environmental Impact

There are no environmental impact considerations in this report.

Risk Management Implications

Risk included on Directorate risk register? Yes

Separate risk register in place? Yes – included in Corporate Risk Register

Statutory inspections carry considerable reputational and financial risk implications for the Council. As a consequence this has been a significant element of the directorate risk register and senior management priorities. The outcome of this inspection demonstrates this was a well considered and proportionate response. The future inspection regime under the new ILACS (Inspection of Local Authority Children's Services) will continue to form a significant feature of senior manager risk management attention and corporate support across the whole council.

Equalities implications

Was an Equality Impact Assessment (EIA) carried out? No

A specific EIA was not required in the planning and implementation of a statutory inspection of Children's Services.

This report sets out the actions we are taking to secure further improvements, which when achieved will have a positive impact on all residents in Harrow.

Council Priorities

This statutory inspection of Children's Services and the related action plan support delivery of the Council's vision:

Working Together to Make a Difference for Harrow

and meets the Ambition Plan theme:

Protect the Most Vulnerable and Support Families.

Section 3 - Statutory Officer Clearance

Name: Jo Frost.	<input checked="" type="checkbox"/>	on behalf of the* Chief Financial Officer
Date: 22/8/17		
Name: Sarah Wilson	<input checked="" type="checkbox"/>	on behalf of the* Monitoring Officer
Date: 22/8/17		

Ward Councillors notified:

NO

Section 4 - Contact Details and Background Papers

Contact: Paul Hewitt

Divisional Director, Children and Young People Services

Paul.hewitt@harrow.gov.uk, 020 8736 6978

Background Papers:

Ofsted Report -

https://reports.ofsted.gov.uk/sites/default/files/documents/local_authority_reports/harrow/051_Single%20inspection%20of%20LA%20children%27s%20services%20and%20review%20of%20the%20LSCB%20as%20pdf.pdf

Ofsted Framework and Evaluation Schedule: children in need of help and protection and care leavers and Local Safeguarding Children Boards [Feb 2017]

NOTE: Aug 2016 was the current edition at the inspection.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/590899/Framework_and_evaluation_schedule_-_Inspection_of_local_authority_children_s_services.doc

London Borough of Harrow

Inspection of services for children in need of help and protection, children looked after and care leavers

and

Review of the effectiveness of the Local Safeguarding Children Board¹

Inspection dates: 16 January 2017 to 9 February 2017

Report published: 31 March 2017

Children's services in Harrow are good		
1. Children who need help and protection		Requires improvement
2. Children looked after and achieving permanence		Good
	2.1 Adoption performance	Good
	2.2 Experiences and progress of care leavers	Good
3. Leadership, management and governance		Good

¹ Ofsted produces this report under its power to combine reports in accordance with section 152 of the Education and Inspections Act 2006. This report includes the report of the inspection of local authority functions carried out under section 136 of the Education and Inspections Act 2006 and the report of the review of the Local Safeguarding Children Board carried out under the Local Safeguarding Children Boards (Review) Regulations 2013.

Executive summary

Children in Harrow receive services that are well matched to their needs, reduce risk and improve their outcomes. This is because senior leaders and elected members provide strong and effective leadership, which has a positive impact on the way that services are designed, developed and delivered. The director of children's services, divisional director and chief executive have a clear understanding of both strengths and areas for development. They make good use of performance information and learning from audits to address shortfalls and raise standards, for example in their ongoing focus on improving the functioning of the multi-agency safeguarding hub (MASH). They recognise that greater use of feedback from children is needed to strengthen audits further. The local authority's overview and scrutiny panel lacks sufficient focus on children and is not consistently effective.

Social workers see children regularly. They use good direct work to come to know them well and build relationships of trust with them. This helps to improve the outcomes that children achieve. Social workers are able to do this because they have manageable caseloads. A strong focus on, and investment in, recruiting sufficient social workers makes this possible. This is also having a positive impact on reducing both a reliance on agency staff and the staff turnover. The professional development of social workers is supported by a well-planned and resourced training offer.

When children are referred to the local authority with a presenting risk of significant harm, action is quickly taken to ensure their safety. Thresholds are well understood and consistently applied. When children's level of need is lower, the MASH does not always handle these referrals as quickly as it should. While inspectors did not see any examples of children suffering harm as a result of this, some children do experience delay in receiving further assessment and services. Child protection strategy discussions take place promptly, but do not routinely involve key agencies beyond the police and local authority. There are a number of well-established and effective targeted early-help services to support children in Harrow. However, the number of children with additional needs who could benefit from an assessment and coordinated early-help response and are receiving one are low. The local authority is aware of this. The steps that it has taken to restructure and relocate its early-help services into community hubs, such as youth centres and children's centres, are well considered, but are at too early a stage to have had an impact.

Services for children and young people who go missing and those at risk of sexual exploitation are good and improving. Help and protection is effective and well coordinated for these children and young people. There is an effective structure of both strategic and operational meetings to develop services and track performance, and to monitor and intervene in the cases of individual children. A specialist team, including a child sexual exploitation coordinator, missing person's worker and gang worker, helps to ensure a focused and joined-up service for children. This work, in common with that to tackle female genital mutilation and radicalisation, is well integrated into broader safeguarding work. Disabled children receive a good service that considers their needs and manages transitions to adult services effectively.

Assessments of children's circumstances are almost all completed to a timescale that matches the seriousness and urgency of their needs, and identifies key-risk and protective factors. However, assessments for children in need and those on child protection plans are not always updated to reflect children's current circumstances and some assessments lack sufficient analysis, for example in consideration of culture and ethnicity. This makes it more difficult to ensure that plans reflect children's current circumstances and can be used to drive and measure progress.

Decisions for children to become looked after are made quickly and in their best interests. Children only become looked after when it is absolutely necessary. When legal proceedings are needed to secure their safety, assessments and support to children and their families are good and the progress swift. When the plan is for children to return home, most do so successfully. However, a few experience delay and a lack of clarity in the delivery of services to support their return home.

Children looked after receive a good service from social workers, who have high aspirations for them. Social workers help young children to understand difficult and complicated decisions about their lives, and demonstrate a real commitment to engaging young people who have ongoing high-risk behaviours. Children participate well in their reviews, and this means that plans and decisions are rooted in their wishes and feelings. In a few cases, social workers and independent reviewing officers (IROs) need to be better prepared for reviews and make sure that agreed actions are always tracked between review meetings. The health needs of children looked after, including those living outside the borough, are generally well considered, with very timely initial and review health assessments. However, some children do not receive therapeutic or emotional health services quickly enough.

When children cannot return to their birth families, new permanent homes are found as quickly as possible. Social workers pay close attention to getting this right for older children, disabled children, children from particular ethnic groups, and those with brothers and sisters. Children needing a range of possible alternative permanent families benefit from early parallel planning, careful matching with carers or adopters and good support plans. Adoption work is very strong. Children's arrangements are secure, and placement and adoption breakdowns are rare.

A large majority of care leavers receive good support that helps them to achieve well in their education and career aspirations, and in developing the skills that they need to live independently. Many achieve well and make a successful transition to adulthood. However, for a small minority there are delays in providing the support that they need in key areas, such as their emotional well-being, education, employment and training.

Children looked after and care leavers have a good understanding of their entitlements. They also receive helpful and clear information about advocacy and the independent visitors scheme. Alongside unaccompanied asylum-seeking children, they benefit from an impressive range of creative and innovative participation and engagement opportunities and an active Children in Care Council, 'Beyond limits'.

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The local authority

Information about this local authority area²

Previous Ofsted inspections

- The local authority operates one short-break children's residential home. It was judged to be outstanding at its most recent Ofsted inspection.
- The last inspection of the local authority's safeguarding arrangements was in May 2012. The local authority was judged to be adequate.
- The last inspection of the local authority's services for children looked after was in May 2012. The local authority was judged to be adequate.

Local leadership

- The director of children's services (DCS) has been in post since March 2014.
- The DCS is also responsible for adult services and public health services.
- The chief executive has been in post since November 2014.
- The chair of the Local Safeguarding Children Board (LSCB) has been in post since December 2016.

Children living in this area

- Approximately 57,000 children and young people under the age of 18 years live in Harrow. This is 23% of the total population in the area.
- Approximately 15% of the local authority's children aged under 16 years are living in low-income families.
- The proportion of children entitled to free school meals:
 - in primary schools is 9% (the national average is 15%)
 - in secondary schools is 12% (the national average is 13%).
- Children and young people from minority ethnic groups account for 69% of all children living in the area, compared with 21% in the country as a whole.
- The largest minority ethnic groups of children and young people in the area are Indian and other Asian.
- The proportion of children and young people with English as an additional language:
 - in primary schools is 66% (the national average is 20%)
 - in secondary schools is 60% (the national average is 16%).

² The local authority was given the opportunity to review this section of the report and has updated it with local unvalidated data where this was available.

- 87% of the school population is classified as belonging to an ethnic group other than White British. The top five most recorded community languages spoken in the borough are English, Gujarati, Tamil, Romanian and Arabic.

Child protection in this area

- At 31 December 2016, 1,753 children had been identified through assessment as being formally in need of a specialist children’s service. This is a reduction from 1,827 at 31 March 2016.
- At 31 December 2016, 228 children and young people were the subject of a child protection plan (a rate of 40 per 10,000 children). This is an increase from 195 (34 per 10,000 children) at 31 March 2016.
- At 31 March 2016, six children lived in a privately arranged fostering placement. This is a small increase from a low number at 31 March 2015.
- In the two years before inspection, three serious incident notifications have been submitted to Ofsted and two serious case reviews have been completed.
- No serious case reviews are currently ongoing.

Children looked after in this area

- At 31 December 2016, 200 children were being looked after by the local authority (a rate of 35 per 10,000 children). This is an increase from 180 (32 per 10,000 children) at 31 March 2016. Of this number:
 - 68 (34%) live outside the local authority area
 - 17 live in residential children’s homes, all of whom live out of the authority area
 - a very small number live in residential special schools³ which are out of the authority area
 - 136 live with foster families, of whom 36% live out of the authority area
 - a very small number live with their parents in the authority area
 - 23 children are unaccompanied asylum-seeking children.
- In the past 12 months:
 - there have been nine adoptions
 - 18 children became the subject of special guardianship orders
 - 144 children ceased to be looked after, of whom 6% subsequently returned to be looked after
 - 16 children and young people ceased to be looked after and moved on to independent living

³ These are residential special schools that look after children for 295 days or less per year.

- 53 children and young people ceased to be looked after and are now living in houses in multiple occupation. In all cases, providers who specialise in accommodation for young people supply this accommodation, and appropriate on-site or floating support is provided.

Recommendations

1. Ensure that all children and families who need an early-help assessment and a package of support coordinated by a lead professional are able to receive these.
2. Ensure that decision making within the multi-agency safeguarding hub is consistently timely, so that all children who are the subject of a referral receive assessment and support in a timely manner.
3. Ensure that assessments and plans are consistently up to date, reflective of children's views and clear about what is expected of families.
4. Ensure that strategy discussions involve the full range of relevant agencies, so that the full range of relevant information informs the assessment of risk.
5. Ensure that children looked after receive timely therapeutic support when they need it.
6. Improve the quality of plans when children return to their families from care, so that there is clarity about what services will be provided, who will provide them, by when and what they are aimed at achieving.
7. Ensure that professionals consistently implement actions required between review meetings for children looked after.
8. Ensure that the good support experienced by the vast majority of care leavers is extended to all care leavers, so that their needs are better met.
9. Strengthen the quality of learning from audits through better involvement and use of feedback from children and their families.
10. Improve the functioning of the overview and scrutiny panel to ensure that it is more sharply focused on children and that its work has an impact on improving both services for children and the outcomes that they achieve.

Summary for children and young people

- Services for children and young people in Harrow are good. Most children and young people have the support that they need when they need it.
- Social workers work hard to make sure that children and young people are safe. They visit children regularly and come to know them well. This helps them to know what type of support will be most helpful. There are plenty of different services that give good support to children and their families to help them to overcome their difficulties.
- There are some parts of the service that could do better. Managers and council leaders recognise this and are determined to improve services for children and families. Overall, they are doing a good job.
- When children are at immediate risk, social workers and other adults, such as police officers and teachers, work together well. They act quickly to protect children.
- Good support is provided to help to keep children and young people safe when they have been at risk of sexual exploitation or going missing, or have become involved with gangs.
- Sometimes, when children need help but are not at immediate risk, they do not have the assessments or help that they need quite as quickly as they could. The council knows this and is working hard to do better.
- Plans about how to make things better for children are not always as clear as they could be. It is important that everybody understands what has to change and what they are expected to do.
- Social workers work hard to find the right place for children to live if they cannot live with their own families. They want children looked after to be happy, to do well at school and to make successful moves into adulthood. They try hard to do this and to make sure that children's experiences of being looked after are positive.
- Foster carers and adopters are very positive about the support that they receive to help to make sure that children and young people are settled in their homes. Social workers pay good attention to things that may help children to settle in, like the religion of foster carers, the languages they speak and how near they live to children's schools.
- Young people leaving care receive a good service. Staff keep in touch with them and provide support to help them to keep healthy and be happy with where they live, and in education, training or a job. There is good support for those young people who choose to go to college or university, and they have practical and financial support to help them to succeed.
- There is a good range of different types of places to live that are available for young people who are ready to leave care. They have good help in learning how to live independently and manage their own lives.

<p>The experiences and progress of children who need help and protection</p>	<p>Requires improvement</p>
<p>Summary</p> <p>When children in Harrow are at risk of significant harm, the local authority acts quickly and effectively to address their needs and reduce risk. The multi-agency safeguarding hub provides an effective single point of contact that transfers child protection concerns promptly to the first response team (FRT) for assessment and intervention. Thresholds are well understood and are consistently applied. The vast majority of strategy discussions are timely, but rarely involve agencies other than the police and children’s social care. This limited involvement from other key agencies, such as health, means that decisions are not always informed by the full range of relevant information available.</p> <p>Children with lower levels of need do not routinely receive such a prompt response. Most decisions to transfer children’s cases to the FRT for a child in need assessment or to early-help services take longer than 24 hours. This means that some children do not have their needs assessed or receive services as quickly as they could. Performance management systems in the multi-agency safeguarding hub do not provide enough information to accurately track the progress of children’s cases to ensure the timeliness of assessments and service provision.</p> <p>There are a number of well-established and effective targeted early-help services to support children in Harrow. However, the number of children with additional needs who could benefit from an assessment and a coordinated early-help response from the local authority and partner agencies, and who are receiving one, are low. At the time of the inspection, a substantial redesign and reorganisation of these services were in the process of implementation, but were at too early a stage to have had an impact.</p> <p>Social workers see children regularly and know them well. Good direct work with children is used to gain an understanding of their wishes and feelings. This is a real strength of the service. This good knowledge of children’s wishes and feelings is not always fully reflected in written assessments. Although assessments identify risk factors and strengths, some lack sufficient depth and analysis, for example in the consideration of culture and ethnicity. Some assessments do not accurately identify all concerns or take enough account of historic factors. Plans, following assessment, are of variable quality. Poorer examples are not always sufficiently specific or clear about the outcomes that they aim to achieve, or about what is expected of families. This makes it more difficult to use plans to drive and measure progress.</p> <p>Work to protect children and young people from the risks associated with going missing, sexual exploitation and related concerns, such as gang affiliation, is good</p>	

and improving. Most children and young people receive a service that is well coordinated between agencies and reduces risk.

Inspection findings

11. The local authority acts quickly and effectively to protect children when they are at risk of significant harm. The multi-agency safeguarding hub (MASH) provides an effective single point of contact that transfers child protection concerns promptly to the first response team (FRT). This team holds strategy discussions and undertakes child protection enquiries when this is appropriate. Thresholds of need are well understood and consistently applied. However, children with lower levels of need do not always receive such a prompt response. Decisions to transfer children's cases to the FRT for a child in need assessment or to early-help service are appropriate, but most take longer than 24 hours. This means that some children do not have their needs fully assessed or receive services as quickly as they could. Delays in progressing referrals promptly are a long-standing concern identified by the Local Safeguarding Children Board (LSCB) case audits. Progress in improving this deficit is hampered by the existing performance systems in the MASH, as these do not give managers full or timely information to track the progress of children's cases accurately. (Recommendation)
12. Out of office hours, the emergency duty team provides an effective social work service. Timely and well-considered responses by this team ensure that children are kept safe. Effective on-call and management arrangements ensure that additional staffing can quickly be put in place to manage times of increased demand. Good communication with daytime teams ensures that children are quickly linked to services that match their needs.
13. Social workers visit children regularly and know them well. This means that children and their parents can build relationships of trust with social workers. This enables social workers to have a more accurate understanding of children's needs and to focus help appropriately, leading to improved outcomes for most children. Social workers have a strong focus on children, whose wishes and feelings are captured well through good direct work, observation and engagement in the majority of work with families. Children are sometimes taken out of lessons to facilitate direct work, despite feedback from children that they do not like it and that it has a negative impact on their relationships with friends and classmates. While there will be occasions on which this practice is unfortunately unavoidable, as standard practice it is unacceptable.
14. The number of children with additional needs who could benefit from an assessment and coordinated early-help response from the local authority and partner agencies and who are receiving this is low. It is of concern that no partner agencies, such as health organisations or schools, are undertaking the role of lead professional following those common assessment framework assessments that have been completed. Although early intervention workers

are quickly allocated to families and do undertake some good work, most assessments seen by inspectors were poor. Consequently, much early-help work lacks focus or a clear benchmark against which to measure progress. This means that help to some children and their families is not as effective as it could be. (Recommendation)

15. The local authority has carried out a detailed review of early-help services and is aware of these areas for development. At the time of the inspection, a substantial redesign and reorganisation of these services was in the process of implementation. The steps that the local authority has taken to restructure and relocate its early-help services into community hubs, such as youth centres and children's centres, are well considered, but at too early a stage to have had a measurable impact.
16. Although early-help services to children with multiple or more complex additional needs are not consistently well coordinated, the local authority does provide a number of well-established and successfully targeted early-help services. These include a domestic abuse group work programme for victims and their children, direct work with young people who are involved with gangs, and a volunteering scheme which increases young people's skills and confidence and enables them to mentor other young people. These services complement a strong children's centres offer and are leading to improved outcomes for children.
17. The threshold between children who could benefit from early-help services and those who need a statutory social work response is well understood and applied. This is also the case for the threshold between children who are in need and those at risk of significant harm who require a child protection response. However, the rationale for decision making is not always recorded clearly enough, particularly when strategy discussions lead to a decision not to proceed with child protection enquiries. Child protection strategy discussions are timely, but rarely involve agencies other than the police and the local authority. This limited involvement from other key agencies, such as health, means that decisions are not always informed by the full range of relevant information available. (Recommendation)
18. The quality of assessments is not consistently good. Although assessments routinely identify risk factors and strengths, many lack sufficient breadth of consideration and depth of analysis, for example in their consideration of the important role that culture and religion can play in children's sense of identity and belonging. Some do not accurately identify all concerns or take full account of historic factors. Chronologies are not consistently used to understand children's stories and the impact of patterns of risk. Although there is a new chronology template to support improved practice in this area, it is too new to have had an impact on all children's cases. (Recommendation)
19. While social workers have a strong focus on listening to children and understanding their wishes and feelings through strong direct work,

observation and engagement, messages from children do not always inform assessments and plans directly enough. When assessments are commissioned for children recently referred to the local authority, a sharp focus on timeliness is ensuring that almost all assessments are completed to a timescale that matches the seriousness and urgency of their needs. However, assessments for children in need and those on child protection plans are not always updated and so, in some cases, do not reflect children's current circumstances. This, in turn, means that plans do not always reflect their current needs. Plans are not always clear and specific enough. The outcomes that they are aimed at achieving are not always defined clearly enough, nor is it always clear what is expected of families. Most plans do not include contingency arrangements. (Recommendation)

20. Child in need meetings and child protection core groups are almost always held regularly, but discussions in these meetings do not always focus on agreed actions. As a consequence, plans are not used as well as they could be to either drive or measure progress. Good agency attendance at these meetings and social workers' sound knowledge of the families that they are working with help to limit the impact of these areas of weakness and ensure that, for most children, the involvement of the local authority in their lives is leading to improved outcomes.
21. Child protection conferences are well chaired. Although they are child centred and sensitive to families, they keep an appropriate focus on risk. Children have access to support from an advocate to attend these meetings, and inspectors saw evidence of this service being used to good effect. While the local authority has a systemic approach to monitoring children's attendance and engagement in conferences, it recognises that there are some children who are not benefiting from being as involved in their conferences as they could be. Child protection chairs add value, because of their ability to offer independent advice and improve practice. Multi-agency engagement in child protection conferences is a strength. When there has been poor attendance by any particular agency, this has been identified and escalated by chairs, leading to improved attendance.
22. Children in need and subject to child protection plans receive effective help from a range of targeted support services. Multi-agency engagement is strong and services work well together, particularly when responding to the impact on children of domestic abuse, drug and alcohol misuse and parental mental ill health. Pre-birth assessments of babies who may go on to be in need or at risk after they are born are good. This was an area for priority action identified at the time of Ofsted's last inspection, and continued to be an issue of concern identified by the 'Baby F' serious case review published in 2015. A sharpened focus on this work and the introduction of a pre-birth assessment toolkit have supported improved inter-agency communication, particularly with midwifery, and timelier and clearer assessments for these babies. A well-used 'neglect toolkit' has had a similar positive impact on improving the identification of risk when it stems from a chronic pattern of concern.

23. When children are at risk through living in homes where there is domestic abuse, drug or alcohol misuse or parental mental ill health, meetings designed to coordinate support services work well. The multi-agency public protection arrangements and multi-agency risk assessment conferences (MARAC) share information and coordinate services effectively. Good information sharing and engagement in the MARAC process by social workers is successfully reducing the risks to which children are exposed. Discussion between agencies at MARAC achieves tangible improvements to the lives of children who are exposed to domestic abuse.
24. Work to identify and to protect children and young people from the risk of sexual exploitation is good and improving. Most children and young people receive a service that is well coordinated between agencies, identifies the harm that they have suffered or are at risk of suffering and reduces risk. The multi-agency sexual exploitation panel is effective. A risk assessment tool is routinely well used to assess risks when they first come to light, but is not yet consistently used to reassess risk. This means that social workers are not always absolutely clear about how successful the actions taken have been in reducing risk. A specialist team, including a child sexual exploitation coordinator, a missing person's worker and a gangs worker, is important in ensuring a joined-up approach to these closely related areas of risk, and has been central to the improvements that have been achieved in the past six months, particularly with regard to the timeliness of return home interviews.
25. A children at risk meeting, chaired by the divisional director of children and young people services, is used effectively to track the circumstances and progress of those children who are currently missing or who have been missing in the previous week. Strategy meetings are held appropriately when risks escalate. Although over two thirds of children and young people receive a return home interview within 72 hours of being found, this means that nearly a third are waiting too long to have the opportunity for an interview. Copies of return home interviews are included in children's and young people's electronic case files, but the information that they contain is not used consistently enough to inform planning about how to keep them safe or to reduce the likelihood of them going missing again.
26. Effective work is undertaken to identify and track children missing education. An up-to-date list of children missing education is maintained by the children missing education officer. The children missing education policy and procedures provide clear guidance to professionals. Information sharing within the local authority and partners is effective. Staff have a sound overview of the welfare of children who are electively home educated. Good liaison with families and information sharing with schools, families and other services has contributed to a decrease in the number of families who are choosing home education when it may not be in the individual best interests of their children.
27. Disabled children receive a good service in Harrow. Experienced social workers consider the full range of children's needs, whether these relate to disability or

their broader welfare concerns. Transitions to adult services are well managed. When there are child protection concerns, these are addressed promptly and effectively.

28. Social workers in Harrow know their communities well. They make good use of interpreters when this is necessary, and have an understanding of the complex dynamics when there are concerns about abuse or neglect in a particular cultural context. This is apparent in a clear, effective and well-joined-up approach to the issue of female genital mutilation, in links with community resources such as an Asian women's resource centre and in positive work with families who have no recourse to public funds.
29. Work to tackle the risks to children and young people from radicalisation through Harrow's 'Prevent' partnership is well established. Counter-radicalisation work with children and young people is aligned with wider child protection, child in need and early-help work, so that children benefit from a broad consideration of their needs and a joined-up approach to meeting them. Awareness-raising and engagement work has successfully increased the understanding by professionals and the local community. An integrated response to children at risk of radicalisation, gang affiliation, going missing and child sexual exploitation has resulted in a stronger and more effective approach. Harrow's gangs worker operates at both a strategic and operational level, and his work is valued by young people. The carefully designed gangs direct work programme ensures that young people have the opportunity to think about their gang affiliations, to share their worries and fears in a safe environment, and to work towards making choices that will help to keep them safer. Young people value the individualised approach provided by the Harrow gangs worker.

<p>The experiences and progress of children looked after and achieving permanence</p>	<p>Good</p>
<p>Summary</p> <p>When children need to be looked after in Harrow, the response is swift and child centred. Children only become looked after when this is necessary and in their best interests. Social workers visit children looked after regularly, know them well and build strong relationships with them. They have high aspirations for them. Children receive a good service, and timely and effective decisions are made so that they move to permanent homes as quickly as possible. Social workers demonstrate a proactive approach and work hard to secure homes for children with brothers and sisters, older children and disabled children. When legal proceedings are necessary to secure children’s safety, assessments and support to children and their families are timely and appropriate. When the plan is for children to return home, most do so successfully. However, a few children experience delay and a lack of clarity in the delivery of services to support their return home.</p> <p>Good participation and engagement by children means that their views are used well to inform planning and decisions made about their care plans. Reviews are regular and are held within appropriate timescales. Improvements are needed in some children’s reviews, including better organisation and preparation by social workers and independent reviewing officers. Actions are not always progressed quickly enough between review meetings, causing delays in care planning for a few children. An effective and committed children looked after health service is improving health outcomes for children, including significant progress in the timeliness of initial and review health assessments. However, some children do not receive appropriate therapeutic and emotional health support services quickly enough. Children looked after benefit from an impressive range of creative and innovative participation and engagement opportunities, and an active Children in Care Council, ‘Beyond limits’.</p> <p>Children needing a range of alternative permanent families benefit from early parallel planning, careful matching with carers and adopters, and good support plans. Adoption work is very strong. Children’s arrangements are secure, and placement and adoption breakdowns are rare. ‘Together or apart’ assessments are mostly good, but some variation in the depth of analysis and the clarity with which children’s voices are recorded means that they do not always add the value that they could to the decision-making process.</p> <p>A large majority of care leavers receive good support that helps them to achieve well in their education and career aspirations, and in developing the skills that they need to live independently. Many achieve well and make a successful transition to adulthood. However, for a small minority, there are delays in providing support in key areas, such as their emotional well-being, education, employment and training.</p>	

Inspection findings

30. When children need to be looked after in Harrow, the response is swift and child-centred. When legal proceedings are necessary to secure children's safety, assessments and support to children and their families are timely and appropriate. Permanence, including through return to birth families, is considered at the earliest opportunity. Children are not looked after unnecessarily.
31. The Public Law Outline (PLO) process is used well to ensure that there is no drift or delay in planning for children, either within court proceedings or at the pre-proceedings stage. Regular management oversight and tracking systems help to prevent drift for children needing permanence. When delays are identified, reasons for this are clearly recorded in children's case files, and actions are quickly agreed and implemented to address them. Pre-proceedings letters are of high quality, so families understand exactly what is expected of them. They are encouraged to seek legal advice and are helped to access interpreting and translation support services, when needed. When children do need to be the subject of care proceedings, the local authority ensures that these are completed quickly to avoid delay and uncertainty for children.
32. The majority of children who return home do so successfully, with low numbers of children experiencing a subsequent looked-after episode. Appropriate decisions are made when children do need to become looked after for a second time or when their circumstances change. For some children returning home, there is a delay in the provision of the appropriate support services needed to reduce continued disruption to children's lives. Plans in place to support children who have returned home need to be implemented more quickly. Support for children on the edge of care is not consistently well targeted, coordinated or monitored. The local authority is aware of this deficit, but the plans to improve services through a 'reunification local offer' are at too early a stage to have had an impact on improving practice. (Recommendation)
33. The Children and Family Court Advisory and Support Service and social work teams, including the emergency duty service and independent reviewing officers (IROs), link together at an early stage to share information and consider viable permanence options for children. Strong professional relationships and the sharing of key information about risks to children support effective communication between partners and early identification of children's needs. This continues for children whose journey to permanence is through the PLO process. Low numbers of emergency and urgent care applications are indicative of good planning for children and early anticipation of their needs.
34. There is a strong commitment and expectation in Harrow that children live with their extended family and with their brothers and sisters when it is safe

and appropriate for them to do so. This is demonstrated by the 15% who left care due to special guardianship orders (SGOs) made during 2015–16, ensuring that children achieve early permanence while continuing to live with their families. There is a wide range of service provision and extensive support available to families undergoing SGO assessments. This includes effective use of family group conferences in identifying viable options for where children will live. Direct work with children prepares them well for permanent moves to special guardians, long-term foster carers or adopters.

35. Social workers develop strong, open relationships with children and their families, and have a good understanding of children’s individual needs. Cultural heritage is well considered. Social workers know children well and talk about them positively, including those who find engagement difficult and experience challenges in managing their behaviour. Visits to see children are regular, and children are mostly seen alone. Inspectors saw evidence that social workers help young children to understand difficult and complicated decisions about their lives and demonstrate a real commitment to engaging older young people who have ongoing high-risk behaviours. Children told inspectors: ‘my social worker is very helpful’, ‘she tells me what’s going on’ and ‘my social worker helped me to stay with my gran.’
36. Assessments to decide applicants’ suitability for fostering roles are almost always comprehensive, with careful analysis of issues relating to their life experiences, ethnicity, faith and values. For a small number of carers, discussion at fostering panel could be more searching about how their personal values may affect them in their fostering role. Supervising social workers visit foster carers regularly and record detailed discussions. Areas for development are explored alongside warm and positive feedback about the difference that carers have made for children. During these visits, fostering social workers explore missing from home incidents and check whether all important meetings and assessments have happened, such as personal education plans (PEPs) and health reviews. This supports children’s progress. Foster carers’ annual reviews are timely, clear and help them to reflect on their practice and develop their skills.
37. Foster carers told inspectors that, overall, they appreciate the quality of the training and support that they receive, including the advice and involvement of a play therapist. They say that they are well supported by the managers in the fostering service. One foster carer said, ‘They definitely make you feel valued’ and another ‘They recognise that we have a challenging job and stand shoulder to shoulder with us, treating us like fellow professionals.’ Some expressed frustration about too many changes in fostering and children’s social workers, saying that this is unsettling for them and for the children in their care. They reported that they cannot always get through to social workers on the phone.
38. Children are generally well matched with foster carers, including in relation to cultural and ethnic factors. This is true for both short- and long-term foster

care arrangements. When this is not possible, consideration is given to the emotional impact and risks to children of moving to an alternative home. Decisions are made in children's best interests. Workers are proactive in their approaches to foster carers and, as a result, children with care plans for long-term fostering secure permanence quickly, reducing disruption and enabling them to maintain close relationships with carers.

39. An appropriate range of recruitment activity for foster carers takes place, including high-quality features in local publications with diverse and inclusive images. Despite this, the local authority has not met its own targets for the recruitment of foster carers. Eleven new carers have been approved since April 2016, but this is still seven short of the ambitious target set by the local authority. The local authority commissions placements from a range of independent providers to ensure that, despite this shortfall, it has a sufficient range of placements for children and young people. Short-term placement stability is in line with similar authorities, while long-term stability, although improving, continues to fluctuate and remains a challenge for the local authority. A small number of children continue to experience a high number of moves. For these children, the local authority has taken appropriate steps to find alternative homes that can best meet their highly complex needs. This particular sufficiency challenge is being addressed through a range of provision, both 'in-house' and commissioned through an independent framework agreement across the West London Alliance. A recent rise in the number of children living in foster homes is positive, but has not led to any reduction in the local authority's use of residential children's homes for teenagers with complex needs.
40. Strategy meetings held to plan responses to children and young people who go missing from care, and those who are at risk of sexual exploitation, are timely and are supported by good information sharing from partner agencies. This is helping to keep children and young people safe. The great majority of children receive timely return home interviews. While intelligence gathered is used to inform some children's risk assessments and decisions about where it is safe for them to live, the cumulative impact of repeat incidents is not always well understood or analysed to help to keep children safe. Workers and carers do make consistent attempts to engage with young people so that support plans can be progressed.
41. All children looked after attend registered provision, with a small number in alternative provision or missing education. While the majority of children and young people attend school regularly, a high proportion of children looked after have been persistently absent from school. Although this number has reduced recently, action to return children to education swiftly is not always effective, and a small minority of children continue to remain out of education for too long.
42. Managers have accurately identified the key improvements needed to better support the attainment and progress of children looked after. As a result, the

virtual school is taking steps to improve outcomes for children, and these are beginning to make a difference to them. The virtual school monitors the attendance and progress of children regularly. This enhances the oversight of those who experience disruption to their learning and those at risk of not achieving, including those children who are placed out of the area. This results in targeted actions that better support those children who are at risk of not succeeding. Often the virtual school team acts as an effective advocate for children and young people, and is persistent in offering support to them when they experience problems at school or at home.

43. The virtual school team has made good progress in improving the proportion of children with up-to-date PEPs, and staff have a good understanding of when further improvements are needed. Staff are working hard with schools and social workers to improve the quality of PEPs. However, too many PEPs are not fully completed. When this is the case, important information is missing, such as children's views and details of how the pupil premium grant is being used to address the specific needs of individual children.
44. Children looked after achieve at around the national rate for children looked after at key stages 1 and 2. Historically, attainment at key stage 4 has been comparatively poor, but, as a result of better targeting of practical support to pupils in key stage 4 last year, the attainment of these pupils improved to the national rate for children looked after. Data shows that this year, as a result of improved support, a greater proportion of pupils are on track to achieve well at key stage 4. However, the gap between the attainment of children looked after and their peers remains wide. The good support provided to young people by schools, the virtual school and partners ensures that a high proportion of young people, many of whom have few qualifications, remain in education, employment and training when they complete Year 11 through to Year 13.
45. Children's health needs receive significant oversight and monitoring from the children looked after health service and, as a result, their health outcomes continue to improve. Strong relationships between the service, social work teams and partners, complemented by effective tracking systems, help with effective communication and information sharing. As a consequence, children's health needs are identified quickly, and timescales for initial and review health assessments are improving rapidly. Children's involvement in and feedback of their experience are pivotal to this recent success and have helped to inform improvements to the service. A sharp focus on improving the completion rate of strengths and difficulties questionnaires by children looked after has seen the rate rise from only 41% during 2015–16 to 75% at the end of December 2016. This is positive, although further work is required to meet the 81% average figure for similar local authorities.
46. The health needs of children placed out of the local authority area are actively monitored. The children looked after health nurse challenges any delays effectively to ensure that children receive a timely service. A small number of

children were seen by inspectors to experience delays in receiving timely therapeutic support. Children needing specialist support from the child and adolescent mental health services often have to wait for help. This is also reported by children's foster carers. (Recommendation)

47. Children benefit from an impressive range of creative and innovative participation and engagement opportunities. All children receive information about advocacy, the independent visitors scheme and their entitlements from the children's pledge. Workers show a continuous commitment to attending engagement activities that help to gain children's views and wishes. Workers have high aspirations for children and support them to try new experiences to develop their social, emotional and educational skills. Engagement activity includes unaccompanied asylum-seeking children and those who may not want to be actively involved in Harrow's very active Children in Care Council, 'Beyond limits'. A number of annual activities are arranged specifically to encourage the participation of children living outside of the local authority. The local authority does well in engaging local businesses and sports clubs to provide both work and wider social opportunities for children looked after. For example, the local authority involved Queens Park Rangers football club in a recent football development activity for children looked after.
48. Children benefit from regular, timely reviews, and have an opportunity to meet with their IRO prior to meetings. If children do not attend, their views and wishes are represented in a variety of formats and are used to inform appropriate decisions. When instability or significant changes occur in children's lives, reviews are brought forward to make appropriate changes to their care plans. The IRO service is generally effective in identifying and challenging delays to ensure that children receive the right help. However, foster carers did share some frustrations with inspectors about a lack of consistency. These include some actions not being followed up between reviews, leading to delays in support for children, and that IROs and children's social workers are, on occasion, insufficiently prepared for meetings (Recommendation).
49. Sixteen- and 17-year-olds who are homeless or in danger of homelessness are quickly and accurately assessed to decide whether they should become looked after by the local authority or if it is more appropriate to provide support in other ways. These young people are provided with support and accommodation that meets their needs. Bed and breakfast accommodation is not used, and careful attention is paid to their vulnerabilities.

<p>The graded judgement for adoption performance is that it is good</p>
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50. In Harrow, all children are considered for adoption when they are unable to live within their birth family. Careful matching and good post-adoption support

have resulted in no children experiencing an adoption breakdown in recent years.

51. A combination of a drop in the number of placement orders being granted and decisions being moved away from adoption has led to a reduction in the number of children leaving care to be adopted, in Harrow. This has fallen from 10 children in 2015–16 to a projected six children being adopted by the end of March 2017. There are currently four children in adoptive families. Harrow has a lower rate of children looked after than similar areas, and fewer children in care aged under 10 years. Decisions which have been changed away from adoption are typically due to the availability of wider family members to care permanently for children. The number of children leaving care for special guardianship arrangements went up to 15% in 2015–16, with a similar rise seen in recent in-year figures. Evidence shows that this resulted in good outcomes for children, and disruptions to special guardianship arrangements are rare in Harrow. Therefore, the current rates of adoption appear appropriate in the context of the wider children looked after population.
52. Children’s journeys to adoption are very timely for almost all children, with performance against national thresholds being well above the average in England. Local in-year data shows a very slight slowing down of performance, but it is still very timely for children. Managers know individual children well and can account for delays in a small number of complex cases.
53. Children’s progress is closely monitored to avoid any unnecessary delay. Regular permanence planning meetings and legal planning meetings are attended by the adoption manager. A tracking manager is partly based with ‘front-door’ social work teams to ensure that all social workers ‘think permanence’ at the earliest opportunity. As a result, early parallel planning is well embedded and is particularly effective in securing adoption for very young children, allowing secure attachments to be made. Early family finding ahead of a placement order being granted means that some children can, at the appropriate point, move quickly to prospective adopters. However, this is slowed down for a few children by avoidable external causes, such as delays in police checks. In a very small number of cases, children’s adoption could have been secured even sooner.
54. Children’s permanence records are of a good standard. Social workers prepare life-story books for children. These give extensive information about their birth family and journey to their new family. Later-life letters are well written, giving young people a sensitive but straightforward account of their life story. However, social workers currently make limited use of learning from research. The profile of children being adopted, although small in number, has become more ethnically diverse than in previous years and there have been recent adoptions of children with disabilities and groups of brothers and sisters. ‘Together or apart’ assessments are mostly of a high standard. Variations in the depth of analysis and the clarity with which children’s voices are recorded

mean that a minority do not add the full value that they could to the decision-making process.

55. Decisions made by the agency decision maker (ADM) are timely and detail a clear rationale for plans for adoption. The combined fostering and adoption panel is constituted of highly experienced and committed individuals who reflect the range and diversity of Harrow's community. Regular feedback to social workers has contributed to improvement in the quality of reports coming to panel. Feedback from adopters who have attended the panel is positive. Adopters value the face-to-face meeting with the panel's medical adviser, because it helps them to understand the current and future health needs of their child. However, links between the ADM and the panel chair have been limited, to date, and managers have already recognised this as an area for improvement.
56. Harrow's partnership arrangement with a voluntary adoption agency (VAA) gives access to a broad range of approved adopters across the country, as well as the national adoption register and local consortia. A diverse range of adopters have been matched to children, including single parents and same-sex couples. Children are carefully matched and many benefit from being adopted by families that reflect their own culture and ethnicity. Prospective adopter records completed by the VAA are very detailed, and reflect a thorough assessment process and clear analysis of the parenting capacity of the applicants.
57. Adopters are positive about their experiences of the assessment process, and preparation days have helped them to relate to their child's experience and the experience of the birth family. They receive detailed information about their child and value the support from social workers. As one said, 'Nothing is too much trouble.'
58. There has been just one foster for adoption placement, to date, in Harrow. However, foster for adoption and concurrent care are discussed with all prospective adopters during assessment and are promoted during preparation. A number of concurrent placements have meant that very young children have a minimal number of placement moves and attach at an early stage to their prospective adopters. Children are well prepared for moving in with their adoptive families. Foster carers are highly skilled in preparing children for adoption, and have completed specialist training.
59. Adoption support plans are sensitive and detailed. Contact arrangements are carefully considered for children moving to adoption, and a letterbox contact coordinator works within the adoption team. When it has been important for children to maintain some direct contact with key people, careful matching has secured adopters who understand and will support this contact.
60. Post-adoption support for families is a strength in Harrow. An experienced adoption team, including a play therapist, provides easy-to-access help when

it is needed. There are strong links with the virtual school, and this results in targeted support for children at risk of exclusion. Therapeutic support is frequently funded through the adoption support fund, with 13 children receiving grants since April 2016, and all applications to date have been successful. In addition, a commissioned service provides bespoke therapeutic work with birth families, adopters and their children. Many Harrow adopters use a variety of support groups provided by the partner VAA, such as groups for same-sex adopters. This means that families benefit from open-ended support through the VAA. As one adopter put it, 'knowing you can come back in one, two or 20 years is key' to choosing to adopt with Harrow.

The graded judgement about the experience and progress of care leavers is that it is good

61. Care leavers in Harrow receive good support which helps many to achieve good outcomes. These include making good progress in further and higher education, and living in safe and secure accommodation. They develop their skills to live independently well. However, the good support that the majority of those leaving care receive is not experienced by all. For a small minority, there are delays in receiving the support and help that they need in key areas of their lives, such as support for their education, training and employment, their mental health and in accessing sexual health services.
(Recommendation)
62. Social workers and social work assistants form positive and productive relationships with care leavers. They encourage them to aim high and achieve their goals. This leads to the good outcomes that the majority achieve. Staff and managers know care leavers well. They understand their needs and circumstances, and see them regularly. This includes those who are at risk of sexual exploitation, are parents themselves or are in custody. In the majority of cases, when care leavers' needs become more acute or their circumstances change, staff increase their contact and take effective action to mitigate the risks that they face, such as the breakdown of their tenancy.
63. When care leavers lose touch with the leaving care team, staff almost always take all reasonable steps to engage with them, including via text, phone, through family and known friends, and by unannounced visits. Care leavers told inspectors that they trust staff, whom they can readily turn to when they need help. One comment, 'he's like family', was typical of the high regard in which staff from the leaving care team are held.
64. Staff plan well to meet care leavers' needs, with many good examples of them receiving effective practical help that supports both their immediate and longer-term needs. Nearly all care leavers have an up-to-date pathway plan.

Typically, plans are clear, focus well on the needs of care leavers and capture their views effectively.

65. Managers and staff have high aspirations for all care leavers, including those who arrive in the United Kingdom as unaccompanied asylum-seeking children. This is reflected in the very good support that they receive with regard to their accommodation, health, education and career aspirations. Many young people who have sought asylum have high aspirations for themselves, such as to become architects, lawyers, chefs or entrepreneurs. With very well-tailored individual support, many are making excellent progress towards these goals. The help that they receive enables them to settle well and engage with the wider community.
66. Managers ensure that there is an appropriate range of accommodation available to care leavers. There are a small number of care leavers who remain with their foster carers when they reach 18 years of age or live in supported lodgings. Most live in semi-independent accommodation. Staff and managers never use bed and breakfast accommodation as an option for care leavers, even in an emergency.
67. Care leavers receive good support from the leaving care team and housing providers to develop the skills that they need to live independently. All those who move into independent accommodation take a two-day course in preparation. Managers and staff make accurate assessments of care leavers' readiness to live independently and provide support accordingly. Such support ranges from such everyday matters, such as advice on managing a budget, up to help in saving for and securing a mortgage. As a result, over the past year all but one care leaver have successfully maintained their tenancy.
68. Care leavers receive good guidance from their social worker, social work assistant and the specialist careers adviser to help them to achieve well in their education. There are a good number of care leavers at university, many of whom are making excellent progress. While at university, care leavers receive additional funding that helps them successfully to complete their studies, for example through payment for accommodation during holiday periods.
69. The number of care leavers who are in education, training or employment is good. Published data for 19- to 21-year-olds shows that a higher proportion of care leavers are in education, training and employment than in similar local authorities and in England overall. More recent local data shows that approximately three quarters of all those supported by the leaving care team have an education, training or employment place, including a small number who are undertaking apprenticeships.
70. Staff provide good, practical assistance to maintain good health. Most care leavers register with their local doctor and dentist, and attend medical appointments that meet their specific health needs. Staff accompany

sometimes quite nervous care leavers to their appointments. Care leavers told inspectors how much they value the practical assistance that they receive. Additional health screening for tuberculosis for asylum-seeking young people meets their health needs well. Managers have recently introduced a health passport that brings together care leavers' health histories so that they are better placed to manage their own health as they gain greater independence.

71. Staff promote care leavers' entitlements effectively through, for example, a regular and very well-attended forum for care leavers and a widely circulated charter that outlines the local authority's commitment to them. As a result, care leavers know whom to turn to should they wish to complain about any aspect of the support that they are receiving. The leaving care team responds effectively when care leavers raise concerns about the help that they are receiving.

Leadership, management and governance	Good
<p>Summary</p> <p>A strong and energetic senior management team with a sense of direction, robust governance arrangements and clear lines of accountability is having a positive impact on the way in which services are designed, developed and delivered. This is helping children to achieve good outcomes.</p> <p>The local authority knows itself well. Senior leaders have a clear understanding of strengths and areas for development, and are making intelligent use of qualitative and quantitative data to address shortfalls and raise standards. Learning from audits is acted on and the quality of practice is improving. With greater use of feedback from children and families, the impact of audits would be further strengthened.</p> <p>A strong focus on and investment in social worker recruitment are having a positive impact on reducing both a reliance on agency staff and staff turnover. A low level of exit interviews limits the gathering of information in order to develop the recruitment and retention strategy further, and is an area of development in an otherwise thorough approach. Workforce development is a significant priority in Harrow, and social workers’ professional development is supported by a well-planned and resourced offer of training. Investment in staffing has ensured that social workers have manageable caseloads, and this means that they are able to visit children regularly to come to know them and their families well and build relationships of trust. This supports the achievement of improved outcomes for children.</p> <p>The local authority, through its corporate parenting panel, demonstrates a clear commitment to improving the life chances of children looked after. The sufficiency strategy is clear and coherent, with relevant priorities linked to present and future need. Appropriate commissioning arrangements are in place to ensure that there is a range of placements to meet the needs of children looked after.</p> <p>Services for children who go missing and those at risk of sexual exploitation are good and improving. Most receive effective and well-coordinated help and protection. There is an effective structure of both strategic and operational meetings to develop services and track performance, and to monitor and intervene in the cases of individual children. The timeliness of return home interviews has improved significantly, but remains a priority, given that almost a third take over 72 hours to complete.</p>	

The local authority's overview and scrutiny panel is not consistently effective. There is no stand-alone children's scrutiny committee and, while some important issues affecting children's outcomes have been discussed at the scrutiny committee, there is still insufficient focus or challenge on matters affecting children.

Inspection findings

72. The director of children's services and the divisional director for children and young people's services provide highly visible and strong leadership, with a clear focus on improving the quality of services for local children. Effective communication between senior officers and elected members, combined with clear governance arrangements, ensures that there is a sharp focus on improving outcomes for children. Regular face-to-face meetings between the chief executive, the director of children's services, the lead member and the chair of the Local Safeguarding Children Board (LSCB) facilitate a shared understanding of the key challenges for children's social care. Senior leaders understand the scale of the challenges that they and their staff face, and are realistic about strengths and areas for development, such as the need to implement planned improvements to early-help services and to further improve the timeliness and quality of the multi-agency safeguarding hub (MASH).
73. The role of director of children's services also has a strategic statutory responsibility for adult social care services, children's social care and public health. Although this is a wide span of control, a clear line of sight to frontline practice is maintained. An appropriate statement of assurance has been undertaken to ensure that there is sufficient capacity to fulfil these roles.
74. There is a strong commitment to performance management at all levels of the organisation. Meetings involving elected members, including the leader, senior managers and the LSCB chair, ensure that a determined focus is kept on performance. The business analysis function collects a wide range of relevant up-to-date performance data, helping to create a culture in which performance is seen as everybody's business. This data enables all managers to drill down to individual, team and service performance, and provides a direct line of sight to what is happening at the frontline. Performance monitoring reports are routinely scrutinised, and information is used well to understand causes and identify possible solutions to any areas of poor performance. This grip on performance has enabled a focus on achieving and sustaining improvements in the timeliness of initial health assessments for children looked after and for single assessments, and continues to drive the development of the MASH.
75. The local authority makes good use of external reviews from relevant specialist bodies, such as the Local Government Association. This is reflective of a culture of openness to learning and improvement at all levels throughout

the organisation. A number of such reviews have been commissioned to help to evaluate the effectiveness of current provision. External audits of child sexual exploitation provision have helped to identify gaps, with the recommendations clearly acted upon. An external audit in December 2016 looked at placement provision for children looked after, and has made a number of recommendations to help Harrow to focus further on the sufficiency of placements.

76. Audits are used well to quality assure social work practice and gain an insight into how effectively services are improving the outcomes that children achieve. A clear audit programme, including senior leaders undertaking audits, is in place. Lessons learned from audits are used well to identify and address areas for improvement, including routine individual and team feedback. As part of this programme, observations of social work practice are undertaken to enhance the understanding of the service that children and families receive. The local authority recognises that more needs to be done to involve children and families, including seeking their views as part of the audit programme. However, this remains underdeveloped. (Recommendation)
77. Significant improvements have been made in the provision of services to children missing from home and care, and those at risk of sexual and gang exploitation. Most receive well-coordinated help and protection. Improvements in intelligence sharing, mapping of trends and disruption activity, along with more effective use of the multi-agency sexual exploitation meetings, have helped to keep Harrow children better protected. In particular, effective multi-agency mapping, coupled with proactive use of legislation, has been decisive in keeping some children safe. There is an effective structure of both strategic and operational meetings in place to develop services and track performance, and to monitor and intervene in the cases of individual children. The development of a specialist co-located team, including a child sexual exploitation coordinator, missing persons' worker and gang worker, has ensured a more focused and joined-up service for children.
78. While inspectors saw an improving picture, there is still further work to be done in ensuring the consistent use of the child sexual exploitation risk assessment tool. This is about ensuring that it is always used to assess risk, and is more particularly about ensuring that it is also used to assess how risk has reduced or increased over time and in response to the help provided. While the timeliness of return home interviews has improved significantly as a result of effective performance and contact management, almost a third of children and young people are still having to wait more than 72 hours to be seen.
79. A joined-up approach to recruitment, retention and development is having a positive impact in terms of making Harrow a more attractive place to work. Senior leaders have understood the importance of having a sufficient, skilled and stable workforce in order to drive improvement. They have invested both financially and in management time and focus to achieve this. Substantial

efforts are being made to recruit staff, such as the recruitment of qualified and appropriately experienced overseas workers and investing in the 'Step up' and 'Frontline' programmes. These are showing signs of fruition, with both the dependency on agency staff and the level of staff turnover reducing. A low level of exit interviews hampers the gathering of important information to further develop the social worker recruitment and retention strategy. The local authority's commitment to children's social work in Harrow is seen in the funding of extra social work provision in response to increasing demand in order to keep social work caseloads at a manageable level. This enables social workers to visit children regularly. (Recommendation)

80. The vast majority of social workers spoken to by inspectors were very positive about working for Harrow, and particularly mentioned visible and supportive leadership and management. The pod system of small groups of social workers, each supported by a skilled pod manager, is a strength which social workers almost universally report as supportive and which assists them in delivering a service to vulnerable children and families. Use of a systemic approach to practice is well embedded and adds value, enabling reflection and a holistic approach to the work with families. Most social workers are tenacious in their efforts to engage with children and families, and they speak with genuine warmth and knowledge about the children whom they are helping.
81. Managers pay careful attention to non-casework supervision areas, particularly training and development and workload management. In a small minority of cases, although both supervision and management oversight are regular, social workers do not receive clear enough direction to support fully effective practice with children. The vast majority of social workers have an up-to-date annual appraisal which clearly identifies their achievements and areas for development in the future. Social workers have access to a wide range of training and development opportunities, and are actively encouraged to participate.
82. The local authority's overview and scrutiny panel is not consistently effective. There is no stand-alone children's scrutiny committee and, while some important issues affecting children's outcomes have been discussed at the scrutiny committee, there is still insufficient focus and challenge on matters affecting children. For example, there has been little consideration of the effectiveness of services for children at risk of sexual exploitation. Recognition of the limitations of scrutiny prompted Harrow, in late 2016, to commission an external review focusing on how scrutiny can be better exercised. This review is ongoing, so is too recent to have had an impact. (Recommendation)
83. Elected members of the corporate parenting panel demonstrate a clear commitment to improving the life chances of children looked after. They have oversight of detailed performance information and analysis, with a range of professionals presenting reports. This helps them to clarify, challenge and question activity. Mandatory training enhances their understanding. The

corporate parenting strategy is detailed, and it sets clear priorities and the areas for improvement. There is an appropriate focus on monitoring action completion, but the lack of sufficient outcome information limits the ability to fully understand if completed actions have improved outcomes for children.

84. The Health and Wellbeing Board, chaired by the leader of the council, takes a 'whole life journey' approach to identifying priorities, and this includes a number relevant to the lives of children and young people. This 'high-level' vision is translated into a clear and well-focused commissioning plan by the multi-agency children's commissioning group. Through this group, the local authority, including public health, works closely and effectively with the clinical commissioning group and schools to ensure that there is an appropriate range of commissioned services to meet children's needs. Children and young people are being successfully involved in the design of service specifications and the commissioning process. Active contract management ensures an ongoing focus on the quality of services and, through this, the outcomes achieved by children. Children and young people are well involved in this process, leading to more sharply targeted services, including the development of sexual health services and the recent 'Future in mind' recommissioning of emotional well-being services for children and young people. Effective use of data and contract management is leading to the recommissioning of services, which are producing better outcomes. The cancellation of a previous contract to provide return home interviews led to the creation of a new in-house service, with subsequent improvements in timeliness of completion.
85. The sufficiency strategy 2015–17 is clear and coherent, with relevant priorities linked to present and future need. Appropriate commissioning arrangements are in place to ensure that there is a range of placements to meet the needs of children looked after. Steps are being taken to address gaps, such as the use of positive contracts through the West London Alliance, including innovative recommissioning of the framework for the provision of independent foster placements. The local authority has seen an increasing number of young people placed in private sector residential accommodation in the past year. The quality of such provision is overseen by the access to resources panel, which is chaired by the divisional director, and the use of such accommodation is continually reviewed to ensure that it is meeting need. For some young people, the decision to place outside of Harrow in such accommodation has been on the basis of well-evidenced assessments to address particular issues of risk.
86. The local authority responds to complaints in a well-organised and open way, with an increasing number being resolved at an early stage. When it identifies wider practice concerns, it takes steps to address and improve practice. Overall, numbers of complaints are reducing, and those that are made are being resolved increasingly quickly. However, the local authority's own audits from April to September 2016 show that in over half of children's case files audited there was no evidence of parents, carers or children being given information relating to access to records, complaints or advocacy. This means

that the local authority cannot be certain that it is actively seeking feedback from children and their families or making sure that they are aware of their entitlements.

The Local Safeguarding Children Board (LSCB)

The Local Safeguarding Children Board requires improvement

Executive summary

The Local Safeguarding Children Board in Harrow fulfils all of its statutory functions, as defined in 'Working together to safeguard children' 2015, and has made considerable progress in work to safeguard vulnerable children. Following the appointment of an experienced and knowledgeable chair, it remains well positioned to enhance the effectiveness and coordination of local safeguarding arrangements further. Key partner agencies are represented, and the board benefits from two highly effective lay members who offer exceptional levels of knowledgeable support and challenge.

The board demonstrates open and candid challenge between board members, and this has been effective in some areas, such as improving safeguarding practice within the multi-agency safeguarding hub. However, the board is insufficiently informed about the quality of all frontline services and practice. As a result of limited performance information supplied by some partner agencies, the board's data set does not fully reflect the range of services responsible for safeguarding children in Harrow, and analysis is limited. This inhibits the board's ability to monitor and understand the overall effectiveness of services and to challenge agencies when they fall short.

The board has coordinated effective multi-agency arrangements for responding to young people at risk of child sexual exploitation at both operational and strategic levels. Some of this area of work is still in development, but overall the arrangements to tackle child sexual exploitation are robust. Some children and young people have benefited from schools providing awareness-raising sessions regarding female genital mutilation, including one primary school.

The board's annual report provides helpful information on a wide range of issues. For example, there is a commentary on the Home Office review in Harrow of gangs and youth violence. This noted the effective operational partnership work, but identified the need for an overarching strategy, now led by the Safer Harrow Partnership.

The influence and participation of children and young people in aiding understanding and informing board priorities and providing ongoing feedback are in their infancy. The board is not yet systematically evaluating the effectiveness of the newly formed early-help services.

The board has a comprehensive range of training events and e-learning courses that have increased the number of practitioners who have received training. The training events include lessons learned from serious case reviews, including a

nationally recognised and highly regarded 'cartoon' account of a young person's experience of living in a neglectful home environment.

Recommendations

87. Work with the Local Safeguarding Children Board's (LSCB)'s constituent agencies to ensure that the board receives a sufficient breadth and quality of performance information to support rigorous monitoring, analysis and challenge of the full range of safeguarding work with children in Harrow.
88. Strengthen the board's scrutiny of the quality and impact of early-help services.
89. Review the capacity and functioning of the board's sub-groups to ensure that they are all as effective as the best.
90. Engage children and young people more effectively in contributing to and developing the board's work and priorities.
91. Continue work with schools to significantly improve their engagement with the section 11 audit process.
92. Update the LSCB threshold document so that it is fully compliant with statutory guidance, and is as effective a document as it can be to support decision making by those working with children and their families.

Inspection findings – the Local Safeguarding Children Board

93. Governance arrangements are well established. The newly appointed independent chair of the board intends to retain the existing pattern of regular meetings with the chief executive, director of children's services, leader of the council and lead member, as well as senior managers from partner agencies. The detailed minutes of these meetings evidence that key priorities and issues of concern for children are shared at the most senior level. The chair of the board attends the Health and Wellbeing Board, at which the Local Safeguarding Children Board's (LSCB's) annual report is considered. The chair provides appropriate challenge to partners, ensuring that children's issues are prioritised. The board maintains a challenge log as a record of actions taken on a number of issues. In 2016, there were 15 challenges made. However, as the impact of these challenges is not recorded, it is difficult to assess the effectiveness of the board's challenge to agencies.
94. Key areas of the board's work are appropriately aligned with other relevant boards and multi-agency bodies. Work to prevent child sexual exploitation is

aligned with the Safer Harrow Partnership, and the board works in conjunction with the Harrow Safeguarding Adults Board to promote a 'think family approach' in relation to vulnerable adults. This ensures that the board has a pivotal role in coordinating work across the partnership to raise awareness of important issues. One example is work following a Home Office peer review initiative to end gang and youth violence, which resulted in a Harrow-specific preventative strategy on gangs, knife crime and violence.

95. The newly appointed chair has current, relevant experience. He is also the chair of another LSCB and contributes to work on pan-London LSCB work-streams. Further involvement in and work for a domestic abuse charity and as safeguarding adviser to the diocese of London give him an extensive understanding of board business and priorities. The board is financially sound, but is due to have a reduction in funding in the next budgetary year. The board plans to manage this by reducing the use of external auditors, and has confidence that there is the capacity in the partner organisations to complete more audits in-house. The board's auditing activity has been crucial in identifying practice weaknesses, for example within the multi-agency safeguarding hub (MASH) and in relation to section 47 processes. The board has the agreement of all partners that, in the event of any unforeseen expenses, such as serious case reviews (SCRs), all partners will share the cost.
96. The board has appropriate multi-agency membership and is attended by sufficiently senior officers from a wide variety of relevant agencies. Board members are committed to improving the life chances of children. The two lay members involved at board level contribute very effectively, including one acting as a vice-chair for one of the sub-groups and for the board itself. The relationship between the board and the lead member is strong and effective, despite the lead member being newly appointed.
97. In the past two years, the board has moved forward significantly in its commitment to driving up the standard of safeguarding services provided by partner agencies. The board has had success in raising practice standards, but the extent of this has been hampered by a lack of available performance information from partner agencies and a consequent lack of analysis. This means that the board does not have a full or accurate picture of the differences that agencies are making for children, or of gaps and shortfalls in service delivery. For example, the waiting times for child and adolescent mental health services often are not provided as part of the data set for the board, and the opportunity is missed for this to be an area of challenge to health partners. Weakness in data provision therefore reduces the board's influence on the planning and commissioning of services, as it cannot systematically monitor or evaluate quality. (Recommendation)
98. Data and performance information sharing works better within the board when partners are able to share concerns, develop a shared understanding and take action to improve service provision. For example, the identification of a lack of proactive antenatal and midwifery engagement with vulnerable

pregnant women led to practice changes which now ensure earlier targeted engagement with these mothers. This promotes better support and more effective relationship building with the most vulnerable at the earliest possible stage. The board has worked effectively to influence the staffing provision in the MASH and the location of the police interview suite, in order to support and improve the assessments of all children.

99. Early-help provision has been subject to a series of scrutiny exercises by the board, but as yet has not highlighted effectively the factors that have held back progress. The board has focused on linking the respective priorities of partner agencies, but this has not provided the necessary challenge and focus. The engagement of agencies in the common assessment framework process is weak, with no professionals from any agency other than the local authority currently undertaking the lead professional role with families. The LSCB has not sufficiently challenged partner agencies, such as health and schools, about this shortfall. (Recommendation)
100. The threshold document has been subject to two revisions in the past year following learning from the board's section 47 and MASH audits. It requires further modification, as it lacks sufficient clarity about key service pathways, such as those for children at risk of sexual exploitation, and does not provide guidance about the thresholds for voluntary accommodation or care proceedings, under sections 20 and 31 of the Children Act 1989, as required by statutory guidance. It also contains some language that is unclear or confusing for professionals using the document as a guide to decision making. (Recommendation)
101. The board has been effective in promoting awareness of child sexual exploitation among young people, having supported the delivery of 'Chelsea's Choice' across Harrow to 16 schools. The board has overseen and been influential in ensuring an appropriate local response to the 'Prevent' duty and female genital mutilation. This includes ensuring the provision of training and awareness raising, and supporting some innovative projects such as the 'Pants' video. This initiative is an example of good practice.
102. The LSCB undertakes annual section 11 audits of partners' effectiveness in carrying out their safeguarding responsibilities. These have been jointly completed with a neighbouring authority, enabling efficiencies. All statutory partners complete this audit, but less than 50% of schools do so. There is evidence that more schools are now engaging positively with the board following the setting up of a safeguarding in education termly seminar group, led by the board business manager. The seminar group has addressed such issues as bullying, female genital mutilation and the role of the MASH. To date, 55 out of a possible 60 schools and colleges are reported as attending this group, and teaching staff spoke positively regarding the initiative.
103. The board recognises that its current structure of six sub-groups requires revision. Not all sub-groups have sufficient capacity or the active engagement

of all partners, so cannot fully achieve their planned work. The minutes of some sub-groups do not provide a concise record of activity. This has been recognised. When sub-groups have been working effectively, such as the quality assurance sub-group, there are measurable improvements in practice. The multi-agency audits undertaken are focused on relevant issues of concern, and lead to clear action plans and evidence of improvement, for example the recent audit of services for disabled children. Positively, the practice of this sub-group is that audit activity continues until measurable improvements have been seen in practice. A good example is the audits carried out of the section 47 process, which led to tangible improvements in the quality and impact of practice with children at risk of significant harm. (Recommendation)

104. The child death overview panel (CDOP) is effective in analysing local information on child deaths, identifying patterns and trends. None of the small number of deaths during the past year were linked to safeguarding issues or concerns about professional practice, so were not referred to the board. There are plans in place to improve the CDOP annual report by linking findings to the wider population in order to improve the quality of the information provided. The CDOP has developed and rolled out good awareness-raising programmes linked to the use of baby slings, safer sleeping, smoking cessation and the availability of support for bereaved parents. Harrow has high rates of breastfeeding, and the CDOP challenged the council successfully when there was a proposed plan to cut funding to a successful peer breastfeeding programme.
105. Processes for making decisions about and undertaking SCRs or management reviews are clearly set out in the terms of reference of the SCR sub-group and are well established. This group also monitors and challenges the progress of SCR action plans. The board has been undertaking work relating to three SCRs in the past year, as well as multi-agency learning reviews of children's cases that do not meet the criteria for an SCR. A programme of training sessions ensures that lessons learned are cascaded out by all agencies quickly via e-bulletins, training events, sub-group members and the children's services management team. This sub-group holds agencies to account effectively in implementing recommendations.
106. The quality assurance sub-group is responsible for a wide range of tasks, including analysis of data sets and coordinating the six-monthly multi-agency case audits. These case audits are an effective mechanism for increasing understanding of the quality of frontline practice and identifying areas for improvement. This has enabled the board to identify a number of priorities and put action plans in place to further strengthen practice.
107. The child sexual exploitation sub-group has a wide work programme following the areas identified for improvement by the second child sexual exploitation review in spring 2016. There are some key improvements which the sub-group is progressing, such as awareness-raising activity with staff in sexual

health clinics. Areas for development include evidence of challenge. For example, there is lack of analysis of return home interviews. The return home interviews are frequently a verbatim account of the young person's words, instead of an analysis of the push and pull factors or the cumulative risk of multiple 'missing' episodes.

108. Social workers and foster carers who spoke to inspectors value the multi-agency training provided by the board. Training activity has increased significantly, with 1,702 sessions delivered in 2015–16 against 1,194 in 2014–15. The creation of 60 child sexual exploitation champions, who have been trained to cascade face-to-face courses within partnership agencies, has been effective. This means that all partner agencies are supported to share good practice within their workforce. Some training sessions for local GPs have been specifically designed and led by the general practitioner who sits on the board. All training is evaluated, but the low feedback response on individuals' practice three months after training hampers the evaluation in its effectiveness. Training is responsive to changing need, as it combines learning from the LSCB's own audits and SCRs, as well as nationally published SCRs and research findings, into current training programmes. A small community organisation is commissioned to deliver training to a large number of voluntary and faith organisations. This is ensuring that safeguarding issues are far better understood. An increasing number of the organisations that have attended these sessions have nominated a designated safeguarding lead for their organisation.
109. The board has an accessible and informative website with links to relevant good-quality information about a range of safeguarding issues. A focus group of children looked after was involved in its development and one young person was directly involved in the design. It includes helpful information on SCRs. The LSCB produced an 'outstandingly good' cartoon, in the words of a child living in a family of neglectful and abusive parents. This is used routinely in induction and other training. It has a useful site for young people that includes information on the NSPCC 'Pants' campaign, female genital mutilation, bullying, child sexual exploitation and 'what to do if you are worried'. The website also holds the pan-London LSCB policies and procedures, which the board has adopted.
110. Young people have recently been involved in presenting a session at the board's annual conference, and in a series of positive and effective sessions undertaken with other young people seeking their views on safety in Harrow. However, children and young people are not routinely or sufficiently engaged in the quality assurance and priority-setting work of the board (Recommendation)
111. The LSCB annual report 2015–16 is a comprehensive document. It is detailed as a record of performance, but it is not sufficiently rigorous in its analysis. It has helpful summary key findings and some suggestions on what needs to be focused on in the future. The business plan is linked to the annual report, but

it lacks a sharpness and a framework to measure impact. The business plan priorities are too broad and lack specificity, so cannot be readily achievable or measurable. As a result of this, the business plan is not a sufficiently effective tool for the board to understand whether it is making a positive difference for children and young people. Overall, there is a lack of alignment between the business plan, the challenge log and action plans. These all need to be kept up to date so that board members always have a clear understanding of the board's position, and can measure impact and ensure sufficient challenge.
(Recommendation)

Information about this inspection

Inspectors have looked closely at the experiences of children and young people who have needed or still need help and/or protection. This also includes children and young people who are looked after and young people who are leaving care and starting their lives as young adults.

Inspectors considered the quality of work and the difference adults make to the lives of children, young people and families. They read case files, watched how professional staff work with families and each other and discussed the effectiveness of help and care given to children and young people. Wherever possible, they talked to children, young people and their families. In addition the inspectors have tried to understand what the local authority knows about how well it is performing, how well it is doing and what difference it is making for the people who it is trying to help, protect and look after.

The inspection of the local authority was carried out under section 136 of the Education and Inspections Act 2006.

The review of the Local Safeguarding Children Board was carried out under section 15A of the Children Act 2004.

Ofsted produces this report of the inspection of local authority functions and the review of the local safeguarding children board under its power to combine reports in accordance with section 152 of the Education and Inspections Act 2006.

The inspection team consisted of eight of Her Majesty's Inspectors (HMI) and one Social Care Regulatory Inspector from Ofsted.

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2017 London Borough of Harrow OFSTED Single Inspection Framework Action Plan

Report Recommendations	What will be done?	Who will do this and by when?	What will be different?	Progress
<p>1. Ensure that all children and families who need an early-help assessment and a package of support coordinated by a lead professional are able to receive this.</p> <p>77</p>	<p>LA in partnership with key agencies in the Harrow Safeguarding Children Board (HSCB) will fully implement an agreed Early Support Pathway following the re-organisation of Early Support Services.</p>	<p>Head of Service Early Support and Youth Offending.</p> <p>By 30.09.17</p>	<ul style="list-style-type: none"> i) Increase in targeted Early Support (ES) assessments for young people and their families ii) Increase in targeted Early Support packages for young people and their families iii) Suite of performance management data to track and evidence impact of effectiveness of Early Support services. 	<ul style="list-style-type: none"> • All actions on track • Revised Early Support Family Led Needs Assessment (FLNA) implemented June 2017. Practice embedding across ES. • Comprehensive early support offer launched through Hubs and bespoke outreach services. Take up of services improving. • Suite of performance management data under continuing development, tracked through monthly senior

				management meeting
<p>2. Ensure that decision-making within the MASH is consistently timely, so that all children who are the subject of a referral receive assessment and support in a timely manner.</p>	<p>The performance management system in Multi Agency Safeguarding Hub (MASH) will be revised in order to improve the timeliness of the Section 17 referral pathway to the First Response Team (FRT).</p>	<p>Head of Service Children's Access Service. By 30.09.17</p>	<p>i) Performance management data will demonstrate that targets are achieved and maintained for referral and assessment timeliness</p>	<ul style="list-style-type: none"> • Performance management system revised. MASH RAG performance improved across all RAG status (April-July 2017) • Excellent FRT assessment timescales (97% within 45 days April-July 2017)
<p>3 Ensure that assessments and plans are consistently up to date, reflective of children's views and clear about what is expected of families.</p>	<p>Young people and their families receiving Section 17 child protection and looked after services will benefit from SMART plans that reflect their changing needs.</p>	<p>Head of Service Children in Need Service. By 30.09.17</p>	<p>i) Data will demonstrate that assessments are updated in line with Children In Need (CIN), Child Protection (CP), & Children Looked After (CLA) Reviews. ii) Monitoring and audit analysis demonstrate that YP views actively contribute to revised assessments and that plans are SMART.</p>	<ul style="list-style-type: none"> • All actions on track • Child Protection and Children Looked After plans consistently updated following conference / review meetings. Re-assessment practice becoming embedded through Child In Need review meetings. • Young people actively encouraged to

				<p>contribute during assessments. High satisfaction levels reported regarding quality of social work input, and feeling safe where they live.</p>
<p>79</p> <p>4. Ensure that strategy discussions involve the full range of relevant agencies, so that the full range of relevant information informs assessment of risk.</p>	<p>The Local Authority in partnership with key agencies will increase multi-agency participation in child protection strategy discussions and during Section 47 investigations.</p>	<p>Head of Service Children's Access / Head of Service Children in Need Service. By 30.09.17</p>	<p>i) Section 47 strategy discussions will demonstrate improved contribution of relevant agencies, particularly Health.</p>	<ul style="list-style-type: none"> Guidance consistently followed in FRT/CIN regarding consultation within partner agencies during S47 child protection investigations. Data demonstrates comprehensive range of services identified / consulted during S47 child protection investigations (21 agency types contributed 3,532 occasions during 309 S47 undertaken April-July 2017.

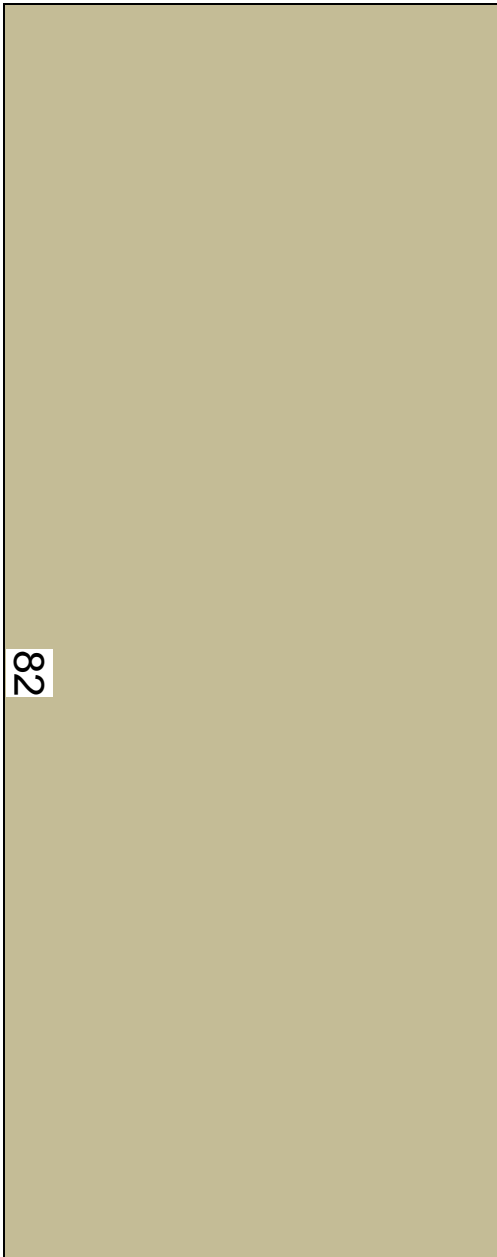
				Averaging 11.4 agencies contributing per investigation)
<p>5. Ensure that children looked after receive timely therapeutic support when they need it.</p>	<p>All Children Looked After will receive appropriate and timely Tier 2/3 therapeutic services in line with their assessed needs.</p>	<p>Divisional Director Children and Young People Service By 30.09.17</p>	<p>i) The LA & Health partners performance data will demonstrate that targets are met and consistently achieved for the provision of therapeutic support and outcomes for CLA.</p>	<ul style="list-style-type: none"> Horizons service targeting support for young people up to the age of 18 launched July 2017. Performance to be tracked through SLA Therapeutic services for Children Looked After (CLA) strengthened tripartite funding panel with Clinical Commissioning Group, including young people placed out of borough. Specialist nurses aligned closely with Children Adolescent Mental Health Service (CAMHS) to track and monitor CLA

08

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<p>6. Improve the quality of plans when children return to their families from care, so that there is clarity about what services will be provided, who will provide them, by when and what they are aimed at achieving.</p>	<p>Final CLA Review meetings for young people returning to the care of their parents will confirm the appropriate package of support services and that contingency arrangements are agreed.</p>	<p>Head of Service Children in Need Service / Head of Service Quality Assurance and Service Improvement.</p> <p>By 30.09.17</p>	<p>i) The LA performance data for CLA demonstrates effective delivery of care planning for young people to be reunited with their birth families.</p>	<p>referrals.</p> <ul style="list-style-type: none"> Final reviews prior to discharge from care consistently delivered without requiring formal escalation by Independent Reviewing Officer 21 of 55 young leaving care returned to the care of family members. None of the 21 young people have required child protection planning or have returned into the care of the LA (April-July 2017)
<p>7. Ensure professionals consistently implement actions required between review meetings for children looked after.</p>	<p>Social Workers and Independent Reviewing Officers will ensure that all young people and their carers are prepared and supported to participate in CLA Review Meetings. Social Worker line managers will ensure that agreed actions</p>	<p>Head of Service Quality Assurance and Service Improvement.</p> <p>By 30.09.17</p>	<p>i) Supervising Social Workers will confirm foster carers have been adequately supported to contribute to Review meetings that are effective.</p> <p>ii) Monitoring and Dispute Resolution data demonstrate that care planning decisions are delivered in a timely</p>	<ul style="list-style-type: none"> All actions on track Supervising social workers (SSW) continue to support foster carers to participate in review meetings.

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are progressed between Review meetings.

manner.

Performance management report for the fostering service is being refined to include SSW visiting arrangements

- Advocacy Service being re-commissioned. Scope of advocacy service extended to include care leavers, and parents requiring advocacy support in CP and CLA cohorts
- Review timeliness remains good (98% April-July 2017), and no formal escalations required owing to significant delay in progressing care plan made form

				Independent Reviewing Officers
<p>8. Ensure that the good support experienced by the vast majority of care leavers is extended to all care leavers, so that their needs are better met.</p>	<p>Effective pathway planning will ensure that all care leavers receive timely support for their emotional well-being, education, employment and training.</p>	<p>Head of Service Corporate Parenting. By 30.09.17</p>	<p>i) Data will demonstrate that targets are consistently met for care leavers in relation to their accommodation, education, employment and training status.</p>	<ul style="list-style-type: none"> Children In Need Census 2017 report key performance indicators well above national average for NEET (28.3% compared to 37.9%) and suitable accommodation (95.7% compared to 83%). Pathway planning improving with 88.1% eligible, and 95.3% former relevant having an up to date pathway plan April-July 2017 . Performance improvements supported through commissioned service "Prospects" supporting employment and training,

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				<p>extending the strategic reach of the Virtual School for CLA, and CLA nurse supporting care leavers.</p>
<p>9. Strengthen the quality of learning from audits through better involvement and use of feedback from children and their families.</p>	<p>The Local Authority Quality Assurance Framework will be revised to strengthen the voice and participation of young people and their families.</p>	<p>Head of Service Quality Assurance and Service Improvement.</p> <p>By 30.09.17</p>	<p>i) Audit processes will be specifically revised to include feedback from young people and their families.</p> <p>ii) Quality Assurance quarterly reporting will analyse the themes of feedback and participation of YP and their families through audit and review mechanisms.</p>	<ul style="list-style-type: none"> • All actions on track • Audit processes amended to specifically include feedback from young people. Further action required to fully embed in audit practice. • QA reporting continues to analyse themes from young people and families. Further training planned for social workers concerning motivational interviewing technique training and mental health needs of young people.
			<p>i) Overview & Scrutiny Panel</p>	<ul style="list-style-type: none"> • All actions on

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<p>85</p> <p>10. Improve the functioning of the overview and scrutiny panel, to ensure that it is more sharply focused on children and that its work has an impact on improving both services for children and the outcomes they achieve.</p>	<p>Overview and Scrutiny Panel activity in LA will ensure there is sufficient focus and challenge on strategic planning and delivery for the children and young people's population of Harrow.</p>	<p>Harrow Council CEO / Harrow Council DCS.</p> <p>By 31.03.18</p>	<p>agenda items and recommendations demonstrate sufficient focus on the key strategic plans for the children and young people's population in Harrow.</p>	<p>track</p> <ul style="list-style-type: none"> • Centre for Public Sector Scrutiny (CFPS) has been commissioned to conduct a review of scrutiny effectiveness in the LA. Review to report in September 2017. • The membership of Overview and Scrutiny has been recently refreshed, and the work plan is being aligned to include key issues in Children's Services e.g. Budget pressures in relation to placements and families that have no recourse to public funds (NRPf).
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COUNCIL
28 SEPTEMBER 2017

CABINET
RECOMMENDATION
(13 JULY 2017)

RECOMMENDATION I

COMMUNITY SAFETY AND VIOLENCE
VULNERABILITY AND EXPLOITATION
STRATEGY

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CABINET

13 JULY 2017

Record of decisions taken at the meeting held on Thursday 13 July 2017.

Present:

Chair: * Councillor Sachin Shah

Councillors:

* Sue Anderson	* Varsha Parmar
* Simon Brown	* Kiran Ramchandani
* Keith Ferry	* Mrs Christine Robson
* Glen Hearnden	* Adam Swersky
† Graham Henson	

In attendance:

Richard Almond	Minute 571
James Bond	Minute 571
Barry Macleod-Cullinane	Minute 571
Pritesh Patel	Minute 570

* Denotes Member present
† Denotes apologies received

RECOMMENDED ITEMS

576. Community Safety, Violence, Vulnerability and Exploitation Strategy

Resolved to RECOMMEND: (to Council)

That the Community Safety, Violence, Vulnerability and Exploitation Strategy 2017-2020 be adopted.

RESOLVED: That the reference from the Overview and Scrutiny Committee be noted and the Portfolio Holder for Public Health, Equality and Community Safety be authorised to make minor amendments to the Strategy, in conjunction with Harrow Community Safety Partnership, Safer Harrow, for presentation to full Council meeting in September 2017.

Reason for Decision: To endorse the Safer Harrow Partnership's Community Safety Strategy 2017-2020 and adopt it as Harrow Council's Community Safety Plan.

Alternative Options Considered and Rejected: As set out in the report.

Conflict of Interest relating to the matter declared by Cabinet Member/Dispensation Granted: None.

**Community Safety,
Violence
Vulnerability and
Exploitation Strategy
2017 – 2020**

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5. Delivering the Strategy	page 52
6. Annex 1 – See attached PDF	

Foreword

On behalf of Safer Harrow, the Harrow Community Safety Partnership, I am pleased to introduce Harrow's Community Safety and Violence, Vulnerability and Exploitation Strategy for 2017-2021. This year we are presenting a Community Safety Strategy that is different from last year's Strategy, which was based around the seven crime priorities from the Mayor's Office for Policing and Crime such as robbery, theft from vehicles and burglary (known as the MOPAC 7).

Following consultation on a new Police and Crime Plan, the Mayor has significantly changed his priorities for London, which involves the scrapping of the MOPAC 7 crime targets in favour of a thematic approach which gives local areas greater control of local community safety priorities. This new approach will ensure that police and councils are focused on the issues of greatest concern in their areas and that serious, high-harm, high vulnerability crimes that are a priority for the whole city are more central to our local approach. Within our strategy we still have a clear commitment to tackle high volume crime such as burglary, but we have also given a greater focus to what are low-volume but high harm crimes, which include youth violence, domestic abuse and drug and alcohol misuse. Given this greater focus on high harm crimes, we have also taken the decision to merge our Domestic and Sexual Violence Strategy (which would be up for renewal this year) into a single overarching Community Safety and Violence, Vulnerability and Exploitation Strategy.

Under my leadership, Safer Harrow will continue to work to address those high volume crimes which have seen an increase in the last year, including burglary, non domestic violence with injury, and anti-social behaviour, whilst ensuring we are tackling ~~the~~ high-harm crimes. Through this approach I feel we are firmly echoing the Mayor's priorities, which includes a renewed focus on tackling knife crime and youth violence, which also builds on recommendations from a Home Office led Ending Gangs and Youth Violence Peer Review which took place in 2015, and is clearly in my view aimed at delivering better outcomes for Harrow residents and making Harrow as a place safer for everyone.

I am also committed to working with partners, including the Harrow Youth Parliament, to develop better approaches to raising awareness in young people of the impact of anti-social behaviour and other forms of crime, so that young people are and remain safe.

Again, through a greater focus on partnership I believe we can make our limited and stretched resources go further so we do make Harrow a safer place.

Councillor Varsha Parmar

Portfolio Holder, Public Health, Equality and Community Safety

Chair, Safer Harrow

Introduction

~~The Council's vision is "working together to make a difference for Harrow". This is particularly relevant to the work of Harrow's Community Safety Partnership, Safer Harrow. The Partnership brings together many organisations that contribute to our ambition of making Harrow the Safest Borough in London. The Council's vision is also "working together to make a difference for Harrow" and this is particularly relevant to the work of Safer Harrow, which as a We Partnership are is working together to achieve better and safer outcomes for people who live, work, and study in the borough.~~

It is recognised that many of our priorities connect with those of other multi-agency strategic partnerships in Harrow such as the Harrow Safeguarding Children Board, Harrow Safeguarding Adults Board and the Health and Well-being Board. The partnership taking the strategic lead on each agenda will of course vary according to its statutory obligations, but by collaborating on relevant topics, the partnerships can be more effective by supporting each other's objectives. This means for example, that key messages can reach a wider audience and Safer Harrow can influence the direction of many more local initiatives through several lines of coordinated activity across the community.

All Community Safety Partnerships are required by law to conduct an annual assessment of crime, disorder, anti-social behaviour, substance misuse and reoffending within the borough. This is known as the Strategic Assessment. The Strategic Assessment is then used to produce the partnership's Community Safety Plan. The last Community Safety Strategy was published in 2016 and is refreshed on an annual basis. However, with a new Mayor in post, the priorities from the previous Mayor's Office for Policing and Crime (MOPAC) 7 crimes have changed significantly¹, which involves the replacement of the previous Mayor's crime targets in favour of a thematic approach which gives local areas greater control of local police priorities.

This new approach is designed to ensure that police, councils, and other [strategic](#) partners are focused on the issues of greatest concern in their areas and that serious, high-harm,

¹ MOPAC 7 crimes are: Violence with injury; Robbery; Burglary; Theft of a motor vehicle; Theft from a motor vehicle; Theft from a person; Criminal damage

high vulnerability crimes that are a priority for the whole city are not overlooked. The new themes in the Mayor's Police and Crime Plan 2017-21 are:

- Neighbourhood Policing
- Keeping Children and Young People Safe
- Tackling Violence Against Women and Girls
- Criminal Justice that Works for London
- Hate Crime

This Community Safety and Violence, Vulnerability and Exploitation (VVE) Strategy sets out the Council's vision for tackling community safety in Harrow and takes into account the recommendations from two substantial reviews; the Home Office led Ending Gang and Youth Violence peer review in 2015 and the Local Assessment Process (LAP) in 2016, which addressed the issue of gang and youth violence locally. Furthermore, given that there is now a new strategic approach from the Mayor to policing and crime, there are clear synergies with the VVE agenda in general and also with domestic and sexual violence under the '*Tackling Violence Against Women and Girls*' theme. This Strategy will therefore include our vision for Domestic and Sexual Violence.

In taking forward the proposed Community Safety and VVE Strategy the following partners have been consulted through Safer Harrow:

- Environmental Crime / Community Safety (Public Protection)
- Children's Services (YOT, Early Intervention)
- Housing
- Domestic and Sexual Violence
- Local Safeguarding Children's Board
- [Harrow Safeguarding Adults Board](#)
- Safeguarding Adults Services
- Police
- Public Health
- Probation
- Community Rehabilitation Company
- Health partners
- London Fire Brigade

Local Context

Harrow prides itself in being one of the most ethnically and religiously diverse boroughs in the country with people of many different backgrounds and life experiences living side by side. It is the richness of this diversity, and the positive impact that it has on the borough and our community, that we believe helps make Harrow such a great place to live, work and visit. 69.1% of residents classify themselves as belonging to a minority ethnic group and the White British group forms the remaining 30.9% of the population, (down from 50% in 2001). The 'Asian/Asian British: Indian' group form 26.4% of the population. 11.3% are 'Other Asian', reflecting Harrow's sizeable Sri Lankan community, whilst 8.2% of residents are 'White Other', up from 4.5% in 2001. In terms of religious belief, Harrow had the third highest level of religious diversity of the 348 local authorities in England or Wales. The borough had the highest proportion of Hindus, Jains and members of the Unification Church, the second highest figures for Zoroastrianism and was 6th for Judaism. 37% of the population are Christian, the 5th lowest figure in the country. Muslims accounted for 12.5% of the population.

Harrow has a population of 247,130 people² which has grown over the last decade by 11.8%. This is above the UK average annual population increase rate over the same time period. 49.8% of the population are male, whereas 50.2% of Harrow's residents are female. Harrow is an affluent borough with pockets of deprivation mainly around the centre, the south and east of the borough; including the wards, Roxbourne, Greenhill, Marlborough, Harrow Weald, and Wealdstone, which also has the highest level of income deprivation in the borough. Harrow's least deprived areas are largely found in the north and west of the borough.

² According to 2015 Mid-Year Population Estimates

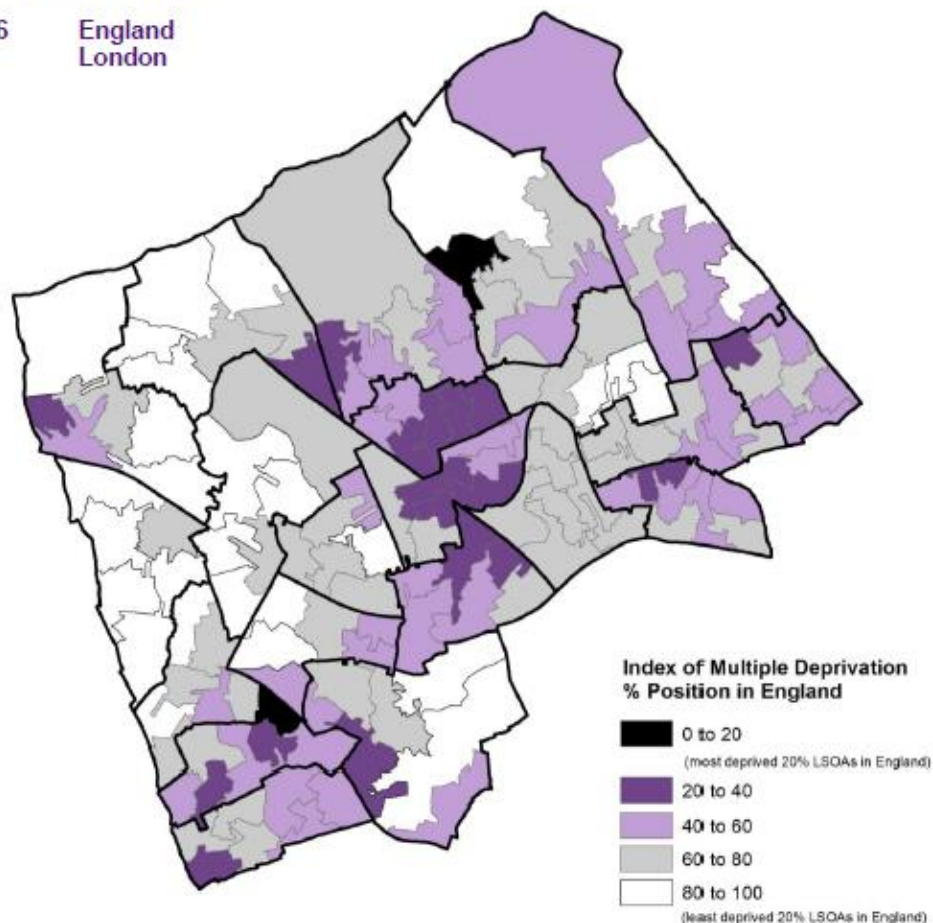


Figure 1 – Deprivation in Harrow based on the Index of Multiple Deprivation, 2015

Employment levels in Harrow are generally good, and Harrow has seen a reduction in unemployment and the number of long term unemployed claimants. However, a number of residents are low paid and have low functional skills. The employment deprivation domain within the 2015 Index of Multiple Deprivation (IMD) indicates 12,083 of Harrow's residents experiencing employment deprivation. This includes people who would like to work but are unable to do so due to unemployment, sickness or disability, or caring responsibilities.

Overall, Wealdstone is Harrow's most deprived ward for employment deprivation, closely followed by Roxbourne. Unemployment figures are highest in Greenhill, Wealdstone and Roxbourne wards. Employment deprivation is generally concentrated in areas with higher levels of social housing, such as the Rayners Lane Estate in Roxbourne; the Headstone Estate in Hatch End and Harrow Weald; the Woodlands and Cottessmore Estates in Stanmore Park; and the former Mill Farm Close Estate in Pinner.³

³ Harrow Council (2017) *Equality Matters: Reducing Inequality in Harrow*

It should be noted however that a report by London School of Economics (2016)⁴ suggests that the £140m regeneration programme in the Rayners Lane estate has brought positive changes to the estate. With residents saying that they think the estate is now 85% better than it was.

In terms of income deprivation, the Indices of Multiple Deprivation (IMD) Income Deprivation scale indicates that 30,733 of Harrow's residents are currently experiencing income deprivation. Wealdstone is Harrow's most deprived ward for this measure and for income deprivation affecting children, closely followed by Roxbourne, then Marlborough and Harrow Weald. Over a fifth of Harrow's residents are in low paid jobs. In part this relates to the business composition of the borough, with small businesses paying less than larger companies and in part due to a significant number of residents having low skills⁵.

In terms of child poverty⁶, Within Harrow, the highest proportions of the population without qualifications or with low level qualifications are in Kenton East, Edgware, Roxbourne and Roxeth. Poor language skills are a major barrier to progressing in the workplace. Harrow was one of 25 local authority areas identified by the Department for Communities and Local Government as an area with high levels of need for English Language provision. 28.5 % of Harrow's residents have a foreign first language. In 15.9 % of households English is not the main language of any household occupants, the 10th highest ranking nationally and much higher than the national level of 4.3 %. The 2011 census showed 1% of Harrow residents unable to speak English at all, compared to 0.6% for London and a national figure of 0.3%.

In terms of child poverty, 17% (London average 17%) children are living in poverty in Harrow before housing costs, and this rises to 27% (London average 37%) after housing costs in Harrow (Dec 2015)⁷. Child poverty has long-lasting effects. By the time children reach GCSE-age, there is a 28 per cent gap between children receiving free school meals

⁴ LSE, (2016) *Moving on without moving out: the impacts of regeneration on the Rayners Lane Estate*

⁵ CLG, *Indices of Deprivation 2015*, Crown Copyright

⁶ Poverty in this document refers to the *relative* poverty measure (defined by Peter Townsend as "Resources that are so seriously below those commanded by the average individual or family that they are, in effect, excluded from ordinary living patterns, customs and activities."). The definition of poverty used in this document is: *Families which have £79 less per week than families on average income.*

⁷ <http://www.endchildpoverty.org.uk/poverty-in-your-area-2016/>

<https://www.gov.uk/government/statistics/households-below-average-income-199495-to-201516>

(FSM) and non FSM in terms of the number achieving at least 5 A*-C GCSE grades. Families in Harrow experience poverty for a variety of reasons, but its fundamental cause is not having enough money to cope with the circumstances in which they are living. A family might move into poverty because of a rise in living costs, a drop in earnings through job loss or benefit changes. Children in large families are at a far greater risk of living in poverty – 34% of children in poverty live in families with three or more children.

Schools in Harrow are; on the whole, among the best performing in the country which has been maintained over a number of years, with 95% being judged as Good or Outstanding (31st August 2016). However, inequalities in education exist in Harrow, particularly amongst children with special educational needs (SEN), those eligible for FSM, and specific ethnic groups. There is a wider gap between pupils who have special educational needs and their peers at Key Stage compared to the national average. Additionally, children who receive FSM show less progress across all subjects between Key Stage 1 and Key Stage 2 compared to their peers.

In terms of public voice and victim satisfaction, *Harrow is currently recording 79% victim satisfaction (ranked 20th in London) and 64% ‘good job’ confidence levels for residents of the borough (27th of the 32 London boroughs);* this is according to data published by the Mayor’s Office for Policing and Crime.

Between October 2015 and September 2016, a total of 13,631 crimes were recorded in Harrow, this equates to 1.79% of all crime reported in Greater London and was the sixth lowest of actual crimes reported.

The table below shows the difference in crime rate between Harrow and our neighbouring boroughs from October 2014-September 2015 and October 2015-September 2016. Hillingdon has shown the [greatest reduction/lowest increase](#) in the crime rate between the same two time periods and Ealing’s reduction was slightly lower than Harrow’s. Barnet showed a similar increase to Harrow and Brent recorded the largest increase in the area.

Total offences	October 2014-September 2015		October 2015-September 2016		% Change
	Offences	Rate (per 1,000)	Offences	Rate (per	

				1,000)	
Hillingdon	21921	73.63	22415	75.29	2%
Ealing	26775	78.05	27877	81.26	4%
Harrow	12598	50.98	13631	55.16	8%
Barnet	24002	63.21	25824	68.01	8%
Brent	24833	76.64	27540	85.00	11%
Greater London	727488	83.87	758919.00	87.50	4%

Figure 2: Rate change showing the change in percentage when comparing crime per 1,000 population

Crime increased by 8% compared to the same period of time the previous year; this is higher percentage increase than Greater London as a whole, where crime increased by just 4%.

Progress under the Mayor's Office for Policing and Crime (MOPAC) 7 crimes

This section reports on progress made against 6 of the 7 previous MOPAC 7 crimes, which includes, Violence with injury; Robbery; Theft of a motor vehicle; Theft from a motor vehicle; Theft from a person; Criminal damage. As Burglary has increased considerably in Harrow this has been identified as a strategic objective in this strategy and will be looked at in more detail in the Strategic Objectives chapter.

Violence with Injury includes a range of offences including murder, wounding / grievous bodily harm (GBH) and assault with injury, and there were 1,327 offences that took place in relation to this indicator from October 2015 to September 2016. There has been a reduction of 4 offences (or 0.3%) compared to the same period in the previous year (see table below). However, data on victims of knife crime shows an increase over the same period (see below) which corresponds with experience of local police and other front line staff.

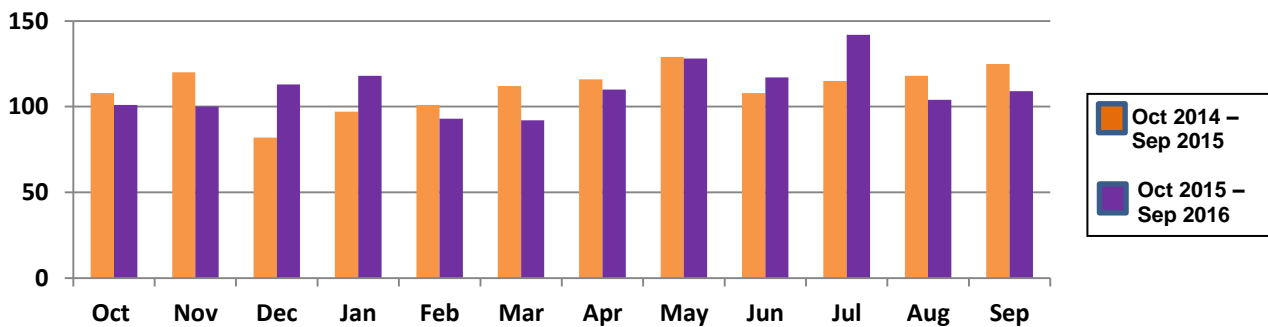


Figure 3 – Violence with injury offences (number) between October 2015 and September 2016 compared to the previous year

Incidences of *Robbery* (including crimes such as theft with the use of force or a threat of force, personal robberies, commercial robberies snatch), have increased significantly by 22.2%, with 391 offences being recorded this year compared to 320 offences being recorded in in the previous year.

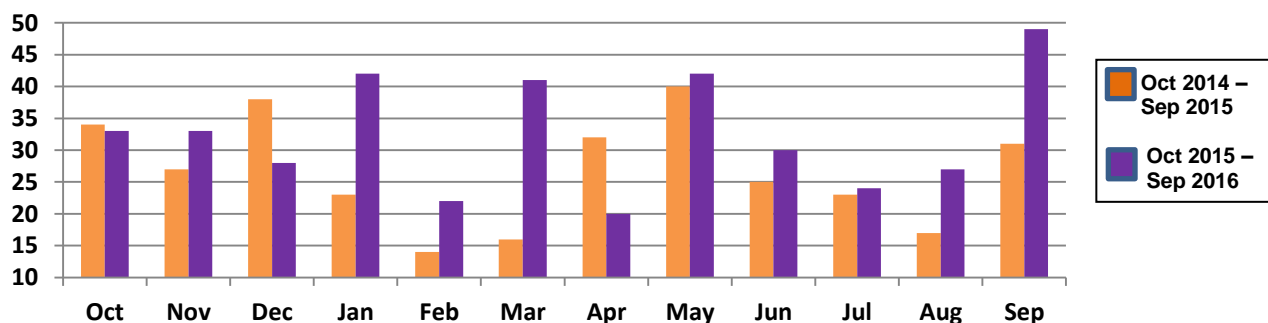


Figure 4 – Robbery offences between October 2015 and September 2016 compared to the previous year

Theft of a motor vehicle has seen the largest increase in percentage terms of all of the MOPAC indicators, having increased 44% in the last year in the same reporting period. When looking at this in a population context, this translates to an increase of 0.36 per 1000 population.

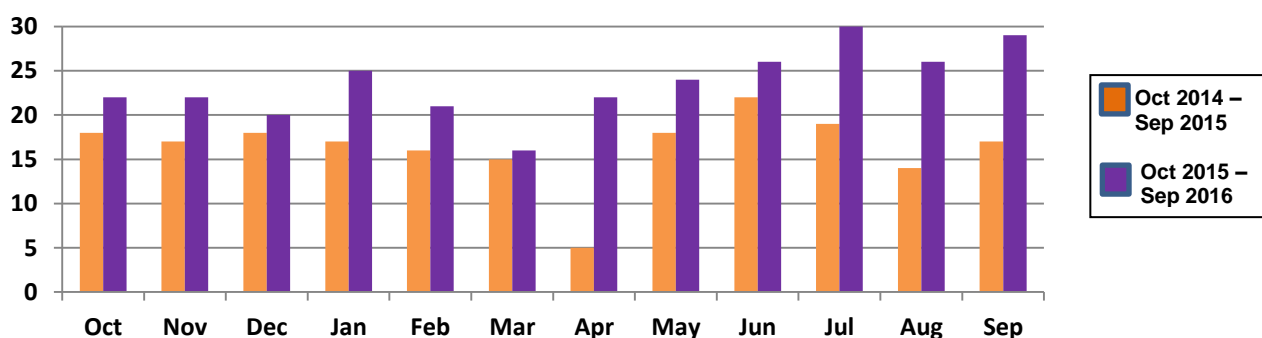


Figure 4 – Theft of a motor vehicle offences between October 2015 and September 2016 compared to the previous year

There were a total of 1,133 offences relating to *theft from a motor vehicle* between October 2015 and September 2016, which is an increase of 6% compared to the previous year.

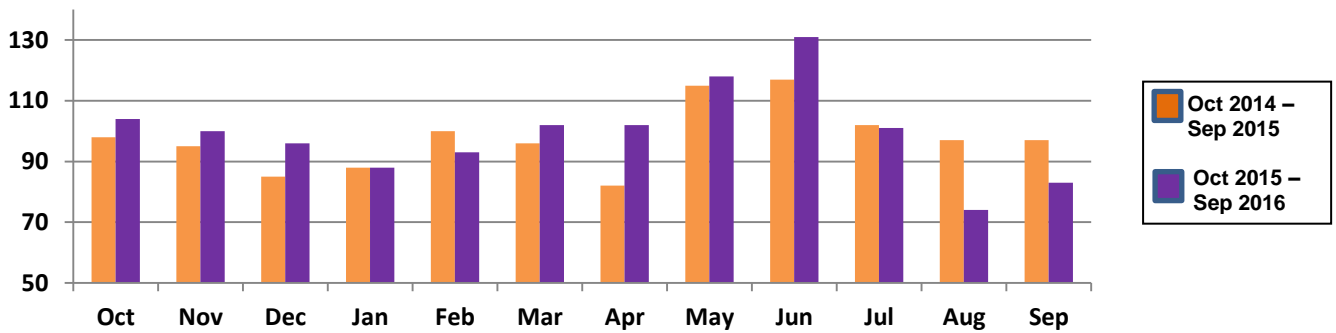


Figure 5 – Theft from a motor vehicle offences between October 2015 and September 2016 compared to the previous year

346 offences in relation to *theft from a person* took place during the last year; this has risen by 21.4%, and is a significant increase.

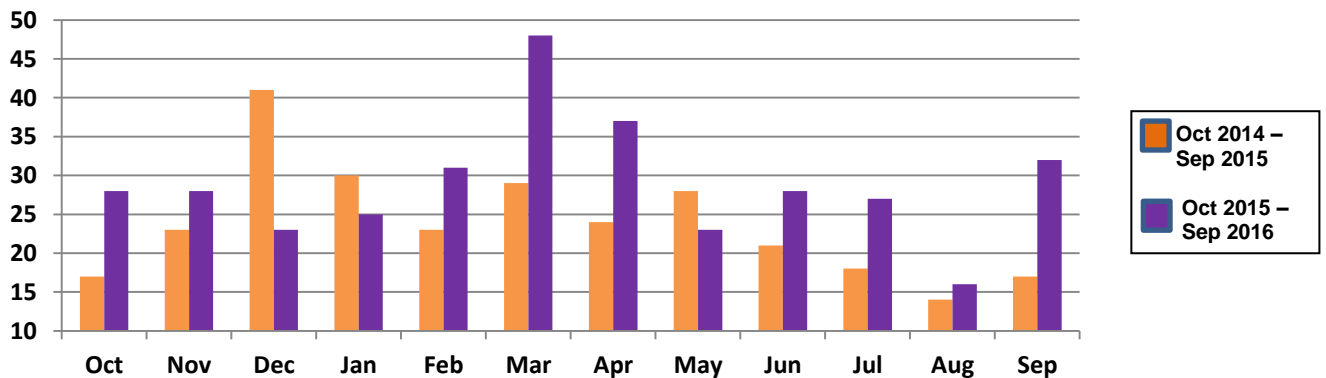


Figure 6 – Theft from a person offences between October 2015 and September 2016 compared to the previous year

Criminal damage includes offences such as damage to a dwelling, damage to other buildings, damage to a motor vehicle and other criminal damage offences. There were a total of 1,192 offences this year, which translates to a small increase of 1.7% or 20 additional offences.

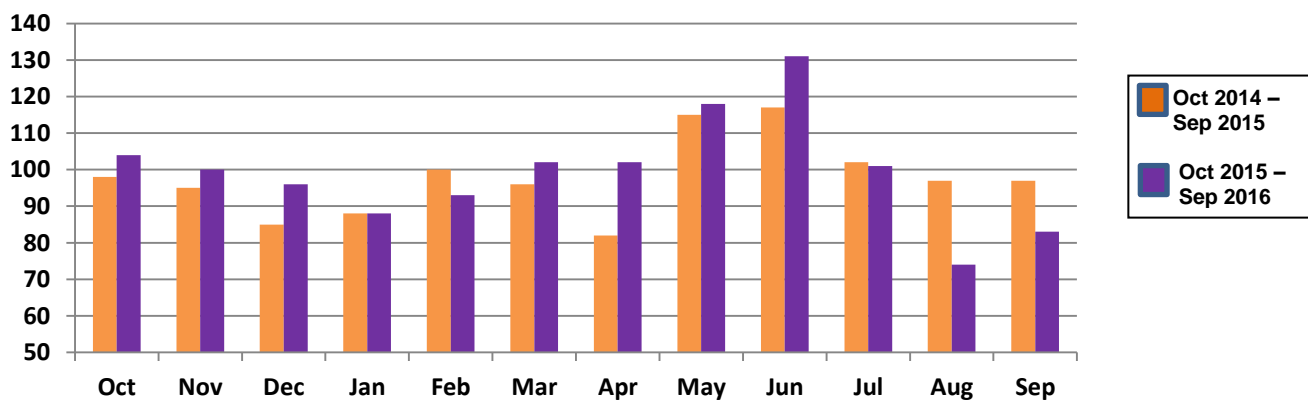


Figure 7 – Criminal damage offences between October 2015 and September 2016 compared to the previous year

Strategic Objectives

Our aim is to deal with the cause of crime and not just the problem itself through the continuation of our services across the partnership and a distinct set of projects which work with perpetrators and those on the edge of crime. Harrow's strategic objectives are two-fold, and based around intelligence gathered from the previous Mayor's Office for Policing and Crime (MOPAC) 7 crimes and around anecdotal accounts such as the rise in youth violence and gang-related activity, which has given us an understanding of what is important in Harrow. Our focus for the next four years will be based on two strategic areas; *high volume crime*, which include crimes that have seen a significant increase in the last year, and *high harm crime*, which encompass Harrow's central commitment to tackle *Violence, Vulnerability and Exploitation (VVE)* in the borough.

We understand that while there are many indicators of high harm crime, the nature of the root causes are not always understood. There has never been a more critical time to explore the strong link between the complex needs of vulnerable young people who are at risk of being exploited and individuals who take to offending. However, vulnerability isn't just limited to people, and at times local areas can turn into crime hotspots and vulnerability can become concentrated into particular areas, where people are more likely to become victims of both high volume and high harm crimes. By putting VVE at the core of our strategy we plan to reduce crime in the borough not just through enforcement and convictions but by also working with those people who are vulnerable to being brought into association with crime either as a perpetrator or as victim (and in some instances both).

We pledge to make Harrow the safest place to live for all those who live, work, and study in the borough and this will be achieved through a distinct set of strategic objectives set out below:

High volume crime

The following crimes will be prioritised following a significant increase in these areas and in agreement with the Mayor's Office for Policing and Crime (MOPAC):

1. *Burglary* – To reduce the number of burglaries and fear of crime in the borough and increase public confidence in the police;

2. *Non-domestic violence with injury* – To reduce the number of incidents of grievous bodily harm and actual bodily harm (NB, this is still an emerging theme with MOPAC, but in devising our strategy and concentrating on high harm crime, we believe we will cover non-domestic violence with injury with the areas in our delivery plan)
3. *Anti-social behaviour (ASB)* – To reduce the number of anti-social behaviour incidents that occur in the borough and ensure victims get the support ~~they~~ need-specific to their needs.

High harm crime

We will have a strong focus on the following aspects of high harm crime which reinforce our commitment to tackle violence, vulnerability and exploitation in the borough. This also firmly echoes the current Mayor's priorities, and includes a renewed focus on Anti-Social Behaviour and Youth Violence.

1. *Youth violence and knife crime* –
 - a. To reduce the number of young people involved in youth violence and gang crime and to decrease the number of young people carrying offensive weapons,
 - b. To ~~embed support schools to deal more effectively with a cultural shift within the schools on the~~ issues of sexual assault, child sexual exploitation and digital exploitation, and to promote a culture of awareness of child sexual exploitation;
2. *Domestic and sexual abuse* – To provide critical support to the most vulnerable members of our community who are affected by domestic and sexual violence and female genital mutilation;
3. *Drug and alcohol misuse* –

- a. To reduce the number of young people involved in the supply of illegal substances and to build resilience in young people so that they are able to spot the signs of dealer grooming;
 - b. To reduce alcohol and drug-related reoffending via targeted early support and treatment for ex-prisoners;
4. *Extremism and hate crime* – To prevent young people from being drawn into terrorism; and to improve hate crime reporting rates.

High Volume Crime

1. Burglary

The Indices of Deprivation (IMD) Crime Domain and Burglary, Robbery, Violence with Injury and ASB [\(BRVA\)](#) Data from 2015-16 provides a list of wards in which residents are most at risk of crime victimisation. The following wards feature in both top 7 most at-risk lists: Greenhill, Edgware, Marlborough, Roxeth, Harrow on the Hill, Roxbourne, and Queensbury. Analysis of these wards shows a particular peak in some crime during the winter months when clocks go back and the nights get longer, making homes an easier target. Notably, Edgware, which is the 2nd most at risk according to BRVA data, and is also 1st in the IMD Crime Domain. Furthermore, 6 out of 10 of the most deprived wards according to the Index of Multiple Deprivation (IMD) are also in the top 10 wards at the highest risk of crime based on the BRVA measurement. These are, Roxbourne, Greenhill, Marlborough, Edgware, Roxeth, and Harrow on the Hill. This suggests a correlation between deprivation and crime levels.

There were a total of 2,025 burglary offences between October 2015 and September 2016. This is a significant increase when compared to the same period in the previous year, and translates to a 27% increase or 489 additional offences in this period. The chart below also shows the number of offences in boroughs around Harrow and in Greater London.

Burglary	October 2014 - September 2016		October 2015 – September 2016		Offences Change	% Change
	Offences	Rate (per 1,000)	Offences	Rate (per 1,000)		
Ealing	2782	8.11	2542	7.41	-240	-9%
Hillingdon	2471	8.30	2064	6.93	-407	-16%
Barnet	3700	9.74	3707	9.76	7	0%
Brent	2660	8.21	2747	8.48	87	3%
Harrow	1586	6.42	2025	8.19	439	28%
Greater London	58768	6.78	69456	8.01	10688	18%

Table 1 – Burglary offences in Harrow and neighbouring boroughs

The chart below shows the number of offences recorded in Harrow during each month between October 2015 and September 2016 (purple) compared to the previous year (orange).

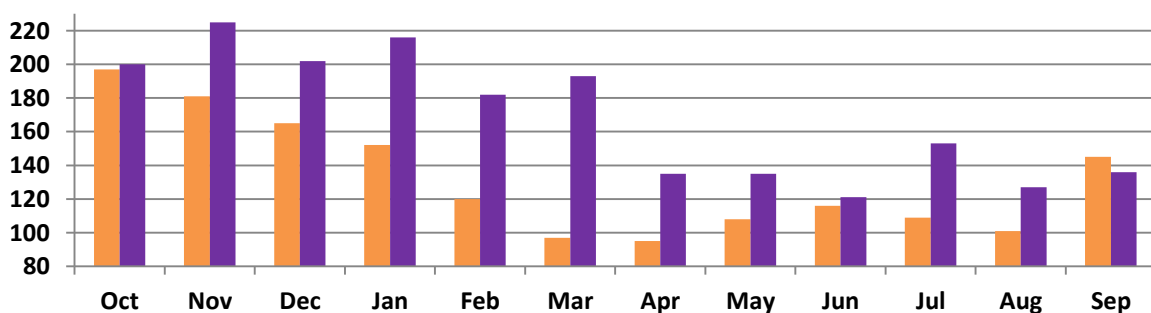


Figure 8 – Burglary offences between October 2015 and September 2016 compared to the previous year

Harrow Police have launched a campaign called '[Autumn Nights](#)' [Be Safe](#)' which is aimed at increasing public confidence and reduction of a fear of crime, as well as a reduction of burglaries itself. This project aims to:

- Provide a lawful and proportionate policing response to the anticipated rise in residential burglary during the darker nights of the autumn
- Prevent burglary and provide a reasonable and proportionate response if a burglary is committed
- Work together with partner agencies

In preparation for this campaign, police teams will be working to identify vulnerable people and burglary and theft 'snatch' hotspots across the borough. Once launched, the campaign will provide specific Intelligence and the tasking of Safer Neighbourhood Teams, including fortnightly street briefings and weekly contact with hard to reach groups, community events, faith premises, and sellers which include supermarkets. In addition to this, literature and other publicity material will be used to promote anti-burglary messages, which typically increase as the clocks go back and the nights are longer.

The police also plan on increasing signage on roads, raising awareness of panic alarms and light timers and ensure there is higher visibility in burglary areas, including the deployment of high visual cycle patrol officers who will cover high-risk areas at particular times of the day or night. In addition to this, METRACE will continue to be rolled out to priority areas. The police commit to working closely with the Council to make best use of opportunities to use CCTV intelligence.

With regards to intervention and prevention at schools, dedicated Schools Officers already exist, and the aim is to ensure all Schools Officers discuss concerns in relation to the misuse of fireworks and 'trick or treating' and highlight the consequences of offences. Following on from this the police will maintain a list of bail/curfew restrictions and carry out truancy patrols.

In the past this [campaign, previously known as e-'Autumn Nights' campaign](#) has proved successful in reducing burglaries during autumn when a number of religious festivals, including Navratri, Diwali, Hanukkah and Christmas occur. In 2015 the project was very popular with the community in reminding them to keep their home safe. However with such a great increase in burglary in the last year it is clear that there now needs to be a greater focus on this area.

In addition to this, the Harrow Safeguarding Adults Board (HSAB) has identified a priority for future work in tackling scams, door step crime and distraction burglary which relate to

older and vulnerable people. Locally there have also been victims and the HSAB wants to get a better understanding of the numbers and is promoting the [Home Office / Metropolitan Police](#) “little book of big scams” (~~Home Office/Metropolitan Police~~) and [the National Trading Standard / Police](#) “watch out for scams” (~~National Trading Standards/Police~~) publications as widely in the borough as possible.

2. Non-domestic violence with injury

This is a new indicator for MOPAC and is recorded as allegations of grievous bodily harm, actual bodily harm, wounding, and assault with injury. We aim to address this through our commitment to tackling violence, vulnerability and exploitation in its general sense and this is explored in further detail in the next section.

The MOPAC Crime Dashboard⁸ shows an increase in Common Assault offences in the last 12 months, which make up 9.5% of total notable offences. Offences are highest in five wards in the south and centre of the borough, namely; Greenhill, Harrow on the Hill, Roxbourne, Marlborough and Roxeth wards. Over 43% of Common Assault offences across the borough occur in these five wards.

3. Anti-Social Behaviour

Anti-social behaviour covers a wide range of unacceptable activity that causes harm to an individual, to their community or to their environment. This could be an action by someone else that leaves a person feeling alarmed, harassed or distressed. It also includes fear of crime or concern for public safety, public disorder or public nuisance.

Examples of anti-social behaviour include:

- Nuisance, rowdy or inconsiderate neighbours
- Vandalism, graffiti and fly-posting
- Street drinking
- Environmental damage including littering, dumping of rubbish and abandonment of cars
- Prostitution related activity

⁸ <https://www.london.gov.uk/what-we-do/mayors-office-policing-and-crime-mopac/data-and-research/crime>

- Begging and vagrancy
- Fireworks misuse
- Inconsiderate or inappropriate use of vehicles

The police, local authorities and other community safety partner agencies, such as Fire & Rescue and social housing landlords ([which includes registered providers and the Council](#)), all have a responsibility to deal with anti-social behaviour and to help people who are suffering from it, [including resolving issues at the earliest point of an incident of ASB.](#)

There has been an upward trend in incidents of Anti-Social Behaviour since summer 2016 with Harrow recording an 8.2% increase compared to the previous 12 month period, which currently ranks Harrow at 27th out of 33 boroughs within London.

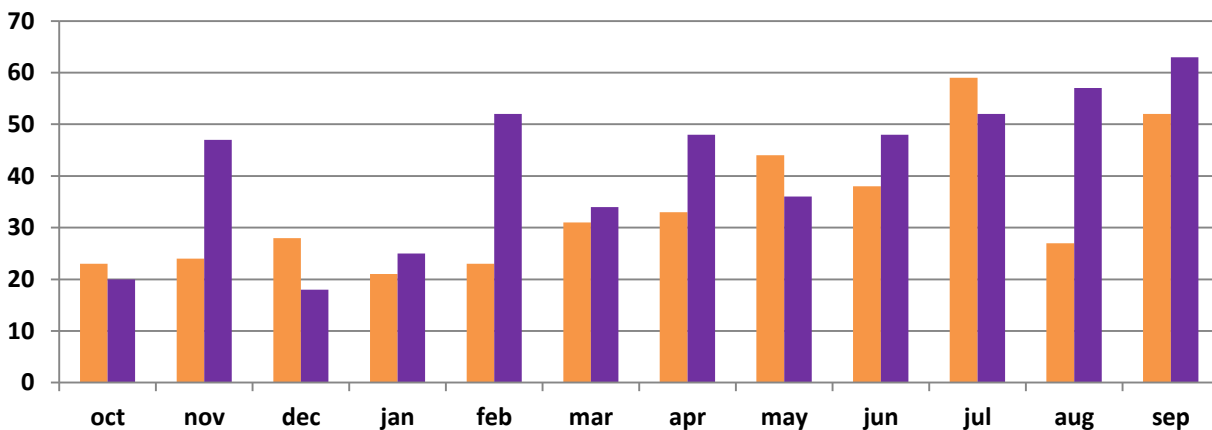


Figure 9 – Anti social behaviour incidents between October 2015 and September 2016 [as reflected in Police Crime data](#) compared to the previous year

Locations in the borough that have seen a considerable rise include Queensbury, Stanmore Park, and Belmont, with the peak months for anti-social behaviour incidents occurring in September, August, and February.

The Council’s Community Safety Team is responsible for dealing with matters of Anti-Social Behaviour [with the exception of Council housing. The Community Safety Team arising in the Borough and](#) is responsible for investigating **all** complaints of ASB through to resolution using the appropriate tools and powers and through engagement with partners, [including the Council’s Housing Team](#). In order to enhance our partnership between the Council and the Police, Police Officers sit with the Team to ensure sharing of information and a co-ordinated approach for the Borough. To ensure the protection of the community, the team remit includes elements of violence and vulnerability and the central focus of the

team is the victim and also supporting the community. Officers are also responsible for taking forward recommended actions outlined on the partnerships Risk Matrix, part of the Council's Anti-Social Behaviour Action Group (ASGAB), to support victims.

Currently the team has been acting as the Single Point of Contact for operational issues in relation to gangs and has been coordinating a partnership approach to dealing with gang related crime through monthly Gangs Multi Agency Partnership ([GMAP](#)) meetings, which has been set up in response to increasing violence from gangs on the borough and emerging risks of those exploited by gangs. The group meets on a monthly basis and bring together partners to add value to the enforcement options delivered by the police. [GMAP is attended by key agencies, including Schools Officers who are represented by the Police Team, and the Youth Offending Team \(YOT\) who ~~are~~ provide an insight into the current interventions taking place which can influence decisions around enforcement options for young people.](#) The Community Safety Team work with internal and external agencies to tackle matters of violence, vulnerability and exploitation through identification, education, disruption and enforcement. The aims are to:

- Provide first line support and act as primary co-ordinators and enforcers for matters of ASB, crime and disorder in the Borough in partnership with other Council partners and external agencies;
- Take the recommended action outlined on the Partnership Matrix to support the victim(s) as well as the appropriate course of action to tackle the perpetrator(s)
- Investigate all ASB complaints to resolution using the appropriate tools and powers and through engagement with partners, [with the exception of Council housing](#). This includes the organisation of a series of meetings that are governed by set protocols that ultimately report to the Safer Harrow Board and the Home Office where necessary;
- Provide proactive reassurance and support in relation to ASB issues, to those who live, work and visit Harrow in partnership with relevant agencies
- Work closely with other Councils to share best practice in combatting crime and disorder, in line with Home Office guidance
- Support and protect vulnerable victims and manage risk in accordance to them, working closely with safeguarding units

In addition to this, CCTV continues to play an instrumental role in making the borough safer. The Council works closely with the police in this area and delivers a 24/7/365 CCTV

service. This has worked well and includes utilising direct video and radio links. The good work of the team has been recognised at a local and regional level.

Over recent months a MOPAC-led taskforce has been exploring opportunities to secure sustainable CCTV provision in London. This is in recognition of the challenging financial climate faced by local authorities, which are the primary funders of public space community safety CCTV. Harrow Council is one of the sites that the taskforce visited. The findings from the work of the taskforce will inform future approaches to CCTV. In addition, the council will continue to engage with the development of any regional strategy in this area.

Services for offenders

All local authorities have a significant role to play in reducing reoffending as well as tackling crime. This includes ensuring partners take account of the concerns of residents and businesses and understanding the health and wider needs of offenders. A number of partners are responsible for commissioning and providing a range of services that support the rehabilitation of offenders. Examples include community based and residential drug and alcohol treatment and recovery services, support with mental health needs, housing provision and benefits, social care services, and access to training, volunteering, education, and employment opportunities.

The Council continues to develop an effective working relationship with the National Probation Service a Community Rehabilitation Company through various panels, including the Integrated Offender Management (IOM) service. The IOM panel meets on a monthly basis providing an opportunity for the provision of intelligence sharing through a number of partners and uses of a range of enforcement powers to take action against offenders who choose not to engage with IOM services, and who continue to offend. Harrow Council plays an integral role in the strategic development and operational delivery of IOM in terms of securing partnership buy-in and resources for multi-disciplinary IOM teams and ensuring robust governance arrangements are in place to support delivery and ensure accountability.

High Harm Crime

Violence, Vulnerability and Exploitation (VVE)

This strategic objective for Harrow has been informed by the Ending Gang and Youth Violence Peer Review, which was commissioned by the Home Office in 2015. The Review found that Harrow is dealing with some of the highest risk young people, and recognised emerging issues of serious youth violence vulnerability and exploitation. Following the Peer Review, a Local Area Profile was commissioned which involved a one-day Local Area Assessment, giving us invaluable insight through interviews and focus groups with front-line practitioners to gather information, building a qualitative picture of the key issues and drivers around county lines with our neighbouring boroughs, gangs, youth violence and vulnerability. Additionally, one of the recommendations of the Peer Review was to develop a problem profile, which explores the risk factors that affect violence, vulnerability and exploitation and gain an in-depth understanding of the causes of gang membership. In identifying these issues, we hope to reduce the number of people drawn into gang membership through early intervention and equipping existing gang members with the support they need to exit a disruptive pathway. This will not only safeguard younger siblings and family members who may be on the periphery of exploitation but also help to prevent gang culture becoming further embedded in Harrow.

Several partners have a role to play in dealing with all aspects of VVE in our strategic objectives and boroughs have received funding from MOPAC via the London Crime Prevention Fund (LCPF) in order to address key priorities related to crime reduction. We have worked with our voluntary and community sector (VCS) to design a range of interventions that have been proven to be successful in the borough and elsewhere, these are outlined in more detail further on. Our aim is that by working in partnership with the local VCS they will be able to leverage in additional funding and resource to support this agenda in addition to what the Council can provide.

4. Youth violence and knife crime

We have seen an increase in the number of victims of knife crime within the borough and young people convicted of weapons offences has also risen. In 2016/17 36 young people were convicted of possession of an offensive weapon, compared to 28 young people in the previous year however, the number of first time entrants has decreased by 7.9% compared to the previous year; this is based on data collected by the Council's Youth Offending Team (YOT). The graph below shows how FTE has changed over the past six years.

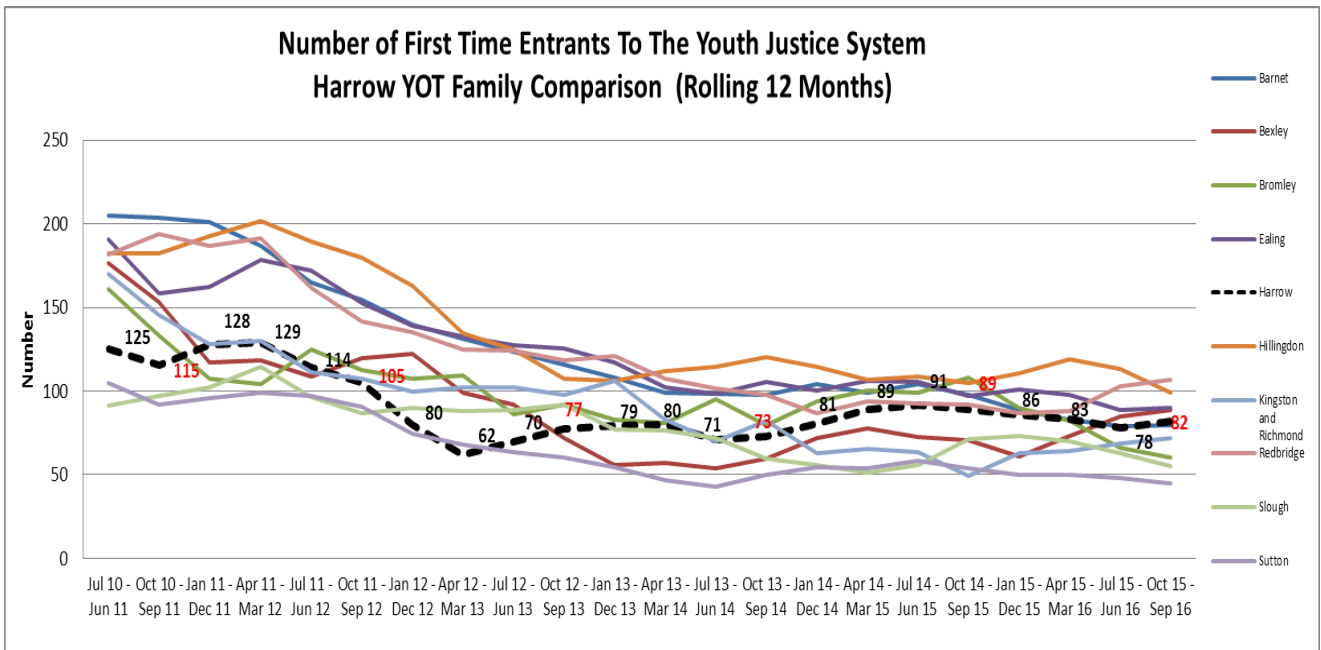


Figure 10 – Number of first time entrants to the Youth Justice System

In addition to this, the Triage service has been transferred to Harrow’s YOT service which has meant a more streamlined approach to early intervention to address youth violence. During 2016/17 the YOT received 73 referrals, 68 of which went on to have a triage intervention. Overall; including those already with triage at the start of the year; the team delivered triage interventions to 83 young people. There were a total of 50 young people discharged from the triage programme in 2016/17 45 (90.0%) of whom completed the programme successfully.

However, assessments of young people by the YOT indicate that young people are carrying knives due to feeling unsafe and the majority of knives have been kitchen knives rather than “trophy” knives. Knife crime incidents made up a total of 281 offences in April 2015 to March 2016 in young people aged 0-25, this increased by 29% in the following year to 362 incidents between April 2016 to March 2017. The graph below shows the upward trend of knife related incidents in the borough:

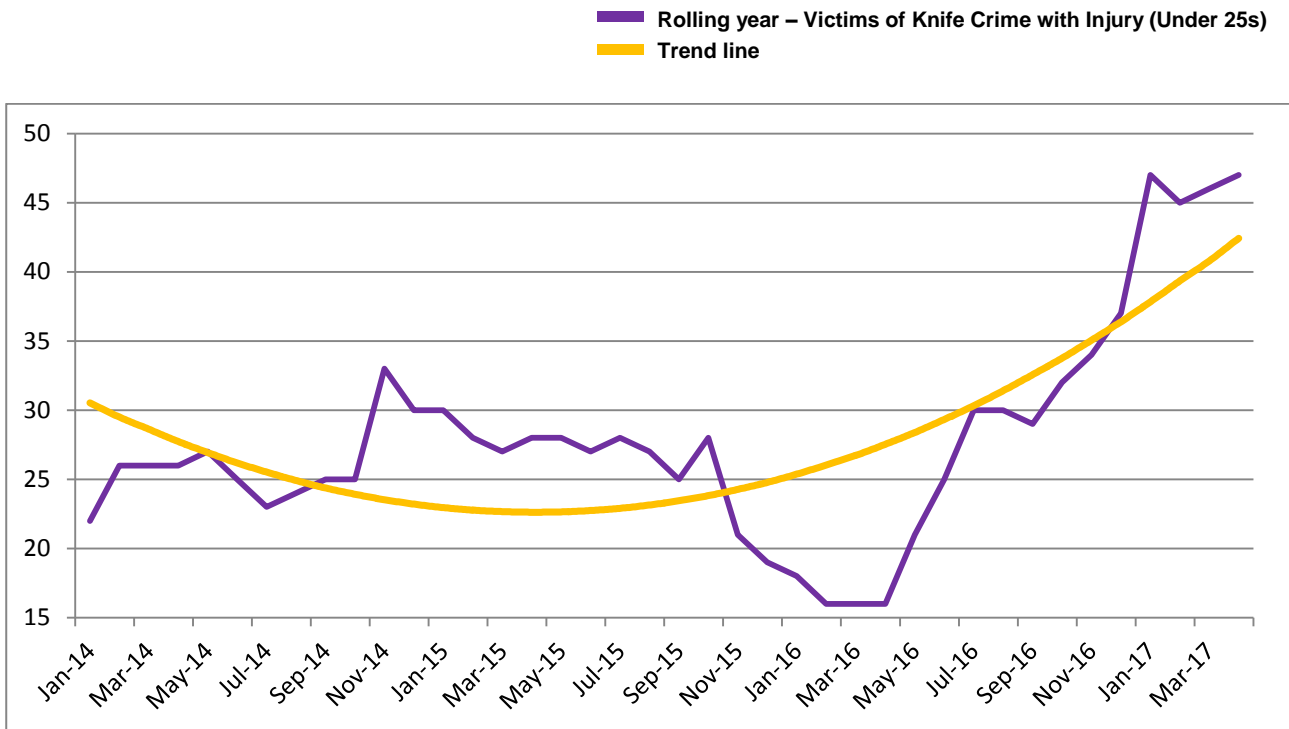


Figure 11 - Knife Crime with Injury (Under 25s) from October 2015 – April 2017, MOPAC Dashboard

Harrow has seen a particular rise in youth violence in the South Harrow and Rayners Lane area and in light of this increase, and in response to offences linked to knife crime and serious offences involving stabbings, the Council are developing a Youth Offer as part of the Early Support [Offer](#) and in conjunction with Youth Offending Team to directly address young people who are vulnerable to being either victims or perpetrators of such crime.

In addressing the issue of youth violence, the Council have been working with Ignite a well-known voluntary and community organisation, with a team of experienced youth workers, to recruit a full-time Gangs Worker for the Rayners Lane Estate and South Harrow area. The programme is specifically aimed at working with young people connected to ~~the~~ known gangs in the area and those who are engaged in high levels of anti-social, violent and criminal behaviour.

This service aims to achieve a reduction in youth offending and gang-related behaviour, and support young people to disengage with and ultimately leave associated gangs. The Gangs Worker will work in close partnership with the Community Safety Team and attend monthly GMAP meetings to share intelligence and anecdotal insight. Outcomes will

include reduced incidents of violent youth crime in Harrow and a reduction in children and young people 'coming to notice' by the police and young people demonstrating improved self-esteem, engagement, confidence and skills, helping them to make positive choices and increasing their aspirations and hope for the future. The programme will enable young people to demonstrate improved personal and social skills such as communication and emotional resilience.

Connected to this, we believe that prevention and early intervention is better than cure, and we have therefore invested in a drama programme with Synergy Theatre. Synergy have a proven track record in working to rehabilitate ex-prisoners and have featured in the national press for their successful work in changing the attitudes and behaviours of participants and the audience. The production company will work in a select number of targeted schools where young people are at risk of entering the criminal justice system to help them discover alternative pathways and become an integral and meaningful part of society. Synergy have developed a ground breaking, interrelated programme of artistic work that seeks to build a bridge from prison to social reintegration, prevent young people from entering the criminal justice system, and inspire change by capturing the imagination and affecting the feelings, behaviours and attitudes of participants and public.

Through the opportunities offered by this project, participants will be challenged to try new activities and learn new skills to overcome destructive patterns of thinking and behaviour. Many may discover untapped potential and talent and these achievements and skills gained can foster a more positive mode of behaviour and encourage re-engagement with education and increase future employability.

In addition to this programme YOT are seeking to add provision by delivering collaborative sessions across schools. YOT are currently working in partnership with Prospects whereby a workshop on the impact of having a criminal record on future life chances is delivered and this will be considered as part of the wider offer to schools.

Another programme called Street Doctors has been selected to assist Harrow Youth Service in addressing the rise in knife crime. Street Doctors is a group of 2nd year medical students who volunteer their time to work with young people who may come into contact with a stab victim. They work with multiple partners across London to help fund, facilitate and strengthen the delivery of pragmatic, life-saving first aid to young people at risk of

youth violence in the city. The programme they deliver includes a minimum of 42 young people (potentially 6 per cohort) at risk of youth violence educated in each of two modules – ‘What to do when someone is bleeding’ (6 sessions) and ‘What to do when someone is unconscious’ (6 sessions). Those at risk are defined as any one of the following:

- Young people who have already received a conviction for violence or weapon carrying
- Young people who are deemed by other services as being at higher risk. Example services include: Youth Offending Institutes/ Teams, Pupil Referral Units, Specialist Charities, and Youth Clubs
- Young people living in areas where there is a high rate of violence

Young people who attend the Street Doctors course receive a certificate of attendance at the end of the programme. Once the course is complete the team share subsequent intelligence and analysis with key stakeholders. Discussions are also underway with the Beacon Centre which is located in Rayners Lane to host these sessions. We know from recent experience that this is a worthwhile venture as two young people known to the YOT who witnessed the aftermath of a stabbing were able to utilise their skills learned from these sessions and stop the bleeding of a victim.

In conjunction with these practical activities, the Youth Offer delivers a programme to help young people explore their current mind-set and consider ways of approaching different situations that they are faced with both in and out of school. The Youth Offer addresses a number of key factors which can lead young people into crime, such as social skills, cognitive deficits, self-esteem, emotional resilience, confidence building, and ensuring a strengths based model is adopted which moves away from a deficit model of working with the “problem”. The Mental Toughness programme works closely with young people aged 12 to 19 to help them drive positive and sustainable changes that will make a real difference to their attitude, mind-set and behaviour. The aims of the programme are to help them; not to fear failure; challenge stereotypes & ditch labels; be resilient to challenge; be confident to make mistakes.

The Council are also engaged with a number of other partners, including Prospects, MIND, Watford Football Club employability programmes, and Xcite. All organisations are delivering sessions across the youth offer as a preventative strand but also a range of provision is available for those who may have offended through the YOT including a

[dedicated education worker](#). In addition, Children's Services have been in discussion with Ignite to look at ways in which to partner further and develop a more bespoke youth offer to the area which will include joint outreach/detached youth work, engagement events with young people in the South Harrow area and youth club sessions built on the feedback from young people as to what they want to see delivered. It is the intention that once a model of delivery is agreed and rolled out at the Beacon Centre, that this model is then replicated in other areas of Harrow where there is a need.

Work continues to extend the youth offer to other areas of the Borough including activities being run in partnership with Watford FC based at the Cedars Youth and Community Centre and plans to add youth services to the programme of activities from the Early Support Hub at the Pinner Centre.

Key to further developments around the Youth Offer is our partnership with Young Harrow Foundation, a not for profit youth organisation, who are assisting Harrow Early Support in developing an overarching youth strategy along with other partners within the private and voluntary sector.

In addition to this some of Harrow's young people access services at St Mary's Hospital Emergency Department run by Red Thread, a collaborative youth charity, which provides youth intervention programmes to support and engage with victims of serious youth violence and exploitation.

In providing a joint response to child sexual exploitation (CSE), missing children, and gang related activity, Harrow Children's Services took the steps to mobilise resources associated with Violence Vulnerability and Exploitation and create the Violence, Vulnerability and Exploitation (VVE) team in April 2016. The VVE Team has a CSE Coordinator, Missing Children/Runaways Family Support Worker and a Gangs worker in order to provide a joined up response to children and young people displaying vulnerabilities associated with these key risk areas. This work compliments the work being carried out by the Community Safety Team, informing and supporting intelligence shared at monthly Gangs Multi Agency Partnership meetings. The VVE team works in collaboration with key partners, including the Police, [Harrow Safeguarding Children's Board \(HSCB\)](#), Youth Offending Team and Education to provide a joint response to CSE, Missing Children and Gang related activity, as well as being involved in Channel and preventing extremism. The team also serves to develop key themes and trends, improve

collective response through an informed understanding of the issues, which will feed into the development of the problem profile in respect of young people.

In November 2016 a Harrow led Violence, Vulnerability and Exploitation mapping exercise of approximately 40 known young people was undertaken involving professionals across the partnership including Harrow Children's Services, Police, Education, Housing, Community Safety Team, Helix Pupil Referral Unit (PRU), [HSCB](#) and Health. The [purpose aim](#) was to explore the links and key themes between the young people in respect of VVE indicators and vulnerabilities. The mapping exercise highlighted links and relationships involving missing young people, CSE, youth violence, suspected county lines drug trafficking and gang associations, primarily the development of a new group/gang. The Helix PRU was also becoming a prominent location where a key number of VVE young people were meeting and forming peer groups.

Case Study

In December 2016 a Multi-Agency Child Protection Strategy meeting was held involving approximately 35 multi-agency professionals across the partnership regarding a family address and location in the Roxbourne Ward, Harrow. The location was a recurring theme with young people associated with VVE. The concerns at the address included CSE, Missing young people, substance use and youth violence associated with the new 'Group/Gang'.

The Police, with support of Children's Services and the Community Protection Team, were able to submit representations to Harrow court and obtain a Closure Order for 3 months covering period 10.12.16 – 4.3.17. (*ASB Crime & Police Act 2014 – Sect.80*). *Disorderly, offensive or criminal behaviour ...serious nuisance... disorder to members of the public*. The order ensured that only the named individuals residing at the address could be there prohibiting access to the premises to anyone else.

Effective partnership working with corporate and with key stakeholders led to successful disruption activity, safeguarding children missing from home and care and [those](#) at risk of Child Sexual Exploitation. The success of the disruption activity and reduced anti-social behaviour firmly rests with the strength of

partnership working between Children's Services, Police, Community [Safety](#) and Housing. Swift action on the part of everyone involved led to a reduction in criminality and children being safeguarded.

Over the next two years the Council will also invest in a programme aimed at generating a cultural shift within schools on the issue of sexual assault, CSE, and digital exploitation violence, and promote a culture of awareness.

We know that young women in Harrow, particularly from the Black, Asian and Minority Ethnic communities (BAME), are disproportionately affected by crimes of sexual assault in schools, and Child Sexual and Digital Exploitation. A report by the Government's Women and Equalities Committee released on 13 September 2016 shows that sexual harassment and sexual violence in schools are widespread nationally. Testimonials from young women and girls affected suggest that schools are failing to deal effectively with the problem. A new programme aimed at early intervention and prevention will be delivered by Wish, a charity supporting young people into recovery from self harm, violence, abuse and neglect. Wish will work in close partnership with the Harrow Violence Vulnerabilities and Exploitation team, to deliver an Outreach and Support service to young people within identified schools and/or "hotspot" areas in Harrow. Working within clearly identified strategic goals agreed across multi-agency partnerships such as the local authority, police, health and other key agencies like probation and youth offending, information and intelligence will be shared to fully understand the local patterns of child sexual exploitation and peer related sexual violence, to disrupt and deter perpetrators and to identify, help and protect children. Raising awareness across the community is crucial, and the service will work with children to develop materials to support other children to understand the risks and issues. Schools will be supported to deliver appropriate responses to young people on the issues, and to tackle incidents such as sexual assault in appropriate ways.

This project aims to narrow the vulnerability gap by increasing targeted interventions in schools where a high percentage of sexual assault and digital exploitation incidents are known and through a whole school approach will generate a strong counter culture of challenge and change to tackle and prevent violence, vulnerability and exploitation.

Female Genital Mutilation (FGM)

Female genital mutilation (FGM) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. FGM is a criminal offence – it is child abuse and a form of violence against women and girls, and has been illegal in the UK since 1985, with the law being strengthened in 2003 to prevent girls travelling from the UK and undergoing FGM abroad⁹. FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for victims and can cause harm in many ways the practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in child birth, causing danger to the child and mother and/or death. The age at which FGM is carried out varies enormously according to the community. The procedure may be carried out shortly after birth, during childhood or adolescence, just before marriage or during a woman's first pregnancy.

Between April 2015 and March 2016, 70 women or girls (i.e. under 18) in Harrow were identified as having had FGM at some point in their lives¹⁰. Compared to the rest of the local authorities in England, Harrow ranks joint 27th highest and joint 19th highest in London. The highest numbers identified were seen in Birmingham, Bristol and Brent. These small numbers do not allow us to divide the cases into those aged under or over 18. The recording of age at which FGM took place is very poorly recorded and so it is not currently possible to say how many are recent cases, or indeed, if any of them are.

Harrow ranks 4th highest nationally in the rate of hospital, clinical, or GP attendances for women or girls with FGM, i.e. the number of contacts with the health services that any woman previously or concurrently identified as having FGM. We do not have data on the reasons for these attendances. Some/most are certainly maternity cases and will be receiving a number of antenatal attendances while others may be having treatment for their FGM and other attendances could be completely unrelated to their FGM. What is clear is that the number of attendances in Harrow is 6 times the number of cases compared to 3 times the cases in Brent, who use the same hospital Trust, and between 1

⁹ Under section 1(1) of the Female Genital Mutilation Act 2003, a person is guilty of an offence if they excise, infibulate or otherwise mutilate the whole or any part of a girl's labia majora, labia minora or clitoris. Section 6(1) of the 2003 Act provides that the term "girl" includes "woman" so the offences in section 1 to 3 apply to victims of any age.

¹⁰ The number of newly recorded cases has been rounded to the closest 5 to prevent disclosure.

and 2 times elsewhere. Due to poor quality data it is impossible to ascertain the reasons behind this at this time.

North West London Healthcare Trust safeguarding nurses have ensured that questions about FGM are routinely asked as part of the Trust's safeguarding policy. These questions are asked regardless of whether the child or mother are attending accident and emergency, paediatrics, maternity or a surgical ward. Since the introduction of mandatory reporting for certain professions, combined with the local awareness raising activity, referral figures are increasing. Referral figures to the MASH have risen from an average of 3-4 per year prior to 2015 to 14 in 2015-6. While most of these cases were children identified as potentially "at risk" of FGM, one case was of a young woman who had already had FGM. This case was investigated and it was established that she had undergone FGM prior to arriving in the UK.

The Harrow Domestic and Sexual Violence Forum has identified FGM as a priority area. In line with this, a series of posters and communication plan have been produced to raise the profile of this critical issue. They were distributed throughout the Borough at 26 on street sites and in council publications, with the design options distributed to local sites for display at their discretion. In addition to this, the Harrow Local Children's Safeguarding Board (LSCB) ran briefings for staff on the new duties and to reinforce understanding about the harmful initial and long term effects of FGM. Harrow has two safeguarding health professionals who lead on FGM based at Northwick Park Hospital within London North West Healthcare Trust (LNWHT). They provide training, advice, and support to health professionals within the hospital community; to other health providers such as the mental health trust; and to safeguarding leads based in general practice settings. This increased awareness has improved the quality and timeliness of GP referrals and their action plans. In turn, ~~the~~ GPs have reported ed that responses from MASH have improved so they know what is happening with their patients.

As part of the HSBCHSCB, colleagues in Public Health have FORWARD trained FGM trainers who deliver a cross agency session as part of our race, culture, faith and diversity implications for safeguarding children effectively course. These trainers work as part of our voluntary community and faith child safeguarding engagement.

Schools in Harrow have been working with NSPCC and FORWARD on FGM. Norbury School is the leading primary school in the NSPCC Talk PANTS programme and lead in Female Genital Mutilation education, working alongside the Azure Project with the Metropolitan Police. The school had six months of regular meetings with stakeholders including health services, children's services, their parent group, the voluntary sector, the police, cluster schools and charities to understand the facts, the various educational approaches, training and engagement with communities. Following these meetings the school created their own FGM lesson plans, resources and approaches which they were shared with their stakeholders and modified as required. All Year 5 & 6 pupils' parents met the school and reviewed the resources before the lessons were piloted and INSETs were held for their staff, governors and parents. Under the slogan My Body My Rules, Norbury has specific FGM lessons from year 3-year 6. Norbury School has also delivered CPD Online seminar lessons and has participated in three conferences, a radio programme and has developed a video. They are also a case study championed by the Home Office and have shared the approach and learning with other schools. Their role in raising awareness of FGM has also been recognised by the United Nation, within the Big Bro Movement.

A number of lesson plans are being created in Harrow schools and colleges, in partnership with their community, under the support and guidance of Norbury Primary School. Norbury is also working with older students from a high school to train as providers in lessons. As local education champions on FGM, Norbury has developed the lesson plans for PANTS from Nursery through to year 6. Norbury has trained and facilitated assemblies, seminar lessons and taught across 10 different boroughs in London. Norbury is now a facilitator for a national training provider speaking at Conferences in Bristol, Manchester and London.

In addition to this, Harrow High School met with KS3 parents to share Harrow High's Talk PANTS and FGM vision with the plan to deliver lessons. Elmgrove has received staff training and is working with Community Ambassadors to deliver Talk PANTS/FGM lessons. Grange has completely adopted the programme working with Norbury on a weekly basis in the Autumn Term. HASVO (Harrow Association of Somali Voluntary Organisations) are working with Rooks Heath School to support the FGM agenda and developing an FGM film. Harrow College has included FGM awareness in its health fair.

Domestic and Sexual Violence

Domestic violence and abuse is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial and/or emotional abuse¹¹.

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour. Coercive control is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten their victim.

Since the publication of our [last](#) Domestic and Sexual Violence Strategy, the legislative and policy context has developed considerably. We see this is a positive step. A range of new legislative measures have been introduced including specific offences of stalking, forced marriage, failure to protect from Female Genital Mutilation (FGM), and revenge pornography, as well as a new definition of domestic abuse which includes young people aged 16 to 17 and “coercive control”. Other key legislative developments include the introduction of the Modern Slavery Act (2015), the rolling out of Domestic Violence Protection Orders (DVPOs) and the Domestic Violence Disclosure Scheme (DVDS), the introduction of FGM Protection Orders and an FGM mandatory reporting duty, and enhanced measures to manage sex offenders and those who pose a risk of sexual harm.

The Government has also released a national strategy, Ending Violence Against Women and Girls 2016-20. This refreshes the first UK national VAWG Strategy launched in 2010. The strategy retains the framework of Prevention, Provision of services, Partnership working and Pursuing perpetrators. In addition to this, the London Mayor has launched five new priorities for London as part of the Police and Crime Plan, and this includes a priority to tackle violence against women and girls, putting this issue right at the top of the political agenda.

¹¹ [It must be noted that a young person is still a child in law up to the age of 18, for example if abuse is experienced from a family member then child protection procedures must be followed rather than domestic abuse. Domestic abuse however, is relevant for peer on peer relationships.](#)

There is a general acceptance that cases of domestic abuse are under reported, and the new laws around coercive control have not resulted in many convictions to date. There have been four reports to Police in Harrow over the past year, and none have resulted in further action being taken.

There has been a clear increase in recorded domestic offences in London. In the year [up](#) to December 2016 there were over 149,000 incidents, which was an increase of 3.0% compared to the previous year. In December 2012 there were 118,013 incidents, which has increased year on year. Barking and Dagenham has the highest recorded rate of domestic abuse in London, with 26 incidents per 1,000 population as of December 2016. In Harrow the rate was 12 as of December 2016, with only Richmond upon Thames and Kensington and Chelsea having lower incident levels (11 recorded incidents per 1,000 population).

There are challenges in capturing an accurate picture of the levels of domestic and sexual violence in Harrow, including under-reporting by victims, inconsistencies in approach to data collection across services, Home Office changes to the way MPS police forces record domestic violence offences and the hidden nature of this type of violence and associated stigma. Therefore, whilst the data we have collected enables us to look at general trends, we suspect that the true levels of domestic violence in the borough are likely to be higher.

In Harrow, the local Community Independent Domestic Violence Advocates (IDVAs) are now receiving an average of 93 referrals per quarter. This is set against 81 referrals per quarter for 2015/16 and 30 per quarter for 2014/15. The IDVA based in the MASH (Multi Agency Safeguarding Hub) is receiving an average of 30 referrals per quarter, slightly down on last year's peak of 35, but against just 18 referrals per quarter in 2014/15.

The local Multi Agency Risk Assessment Conference (MARAC), which deals with the highest level of domestic abuse cases, has considered an average of 16 cases each month; this number has remained largely consistent for the past two years (18 cases per month in 2015/16 and 19 cases per month in 2014/15). This may well reflect that the MARAC referral process is well embedded into local organisations and working well.

In terms of the national Troubled Families agenda, locally referred to as "Together with Families", 314 out of 718 eligible and verified families on this programme in Harrow have domestic violence recorded as one of the criteria; which is 43.7%.

This local data clearly demonstrates that the Harrow Domestic and Sexual Violence Strategy, and the hard work of the local authority and partner organisations, has been successful in terms of raising the profile of domestic violence services; educating the local community around how to access the available services; and ultimately, increasing our referral rates and therefore being able to provide an intervention, help and support to more local victims of domestic and sexual violence.

We need to better understand domestic violence in our local community, and will work jointly with our strategic partners to ensure access to high quality intelligence to map the nature of domestic violence in Harrow. In addition, we propose to work with local communities, partners and all stakeholders, to increase the number of crime reports, and in particular raising awareness of coercive control as a form of domestic violence.

Harrow has invested £552,000 over two years in domestic and sexual violence services through a contract with Hestia. Through this we have provided a six unit refuge for women and children fleeing domestic abuse; practical and emotional support, advice and advocacy to victims and their children on matters including housing, welfare benefits, legal options, health, education, training and childcare; and Independent Domestic Violence Advocate (IDVA) provision.

The big success over the past year has been the successful delivery of Harrow Couple's Domestic Violence Programme, where Harrow Children's Services partnered with the renowned Tavistock Relationships to deliver a feasibility project trialling a 'mentalisation' based couple's therapy approach to intervention with couples who are parents of one or more Children in Need, and where there is situational violence between the partners. The aim of the pilot was to assess whether the intervention helps alleviate the incidence of violence, improves the couple's relationship, and improves outcomes for children. This was the first time a programme like this has been used in a domestic violence context and so was ground breaking; it was a small pilot and it indicated proof of concept as well as offering a promising potential intervention in a field where there is very little research on what works for couples experiencing domestic violence and abuse.

The results of the programme indicated that it is possible to deliver a couple therapy intervention to carefully assessed and selected parents with a history of domestic violence safely and productively. Couples referred to the project had a total of 67 police call outs

(average of 6.1, range 1 - 24) and 41 contacts (average of 3.7, range 1 - 11) with Children's Services prior to starting the intervention (each police call out is calculated at £477). Working with the couples together led to no further incidents of domestic violence being recorded to date. A post-intervention review by Harrow Children's Services in October 2016 showed that there had been no new incidents involving the Police or referrals to Children's Services for any of the 11 couples in the project.

The improvements can also be demonstrated through the reduced need for statutory social care interventions. Four couples who had been on Child Protection Plans were stepped down to Child in Need Plans; two couples whose children had been on Child in Need Plans improved and their cases were closed; four couples remain on Child in Need Plans (partly because there are other concerns, for example about a parent's mental health or accommodation issues); one couple was not on a Plan.

Qualitative reports from interviews with the couples showed how much they valued the intervention and how much it helped change the interactions in their relationships, and, in some cases at least, had a beneficial knock-on effect on their children, who were happier and more able to function at school. Partners reported not arguing as much or as heatedly and being able to cool things down between them when they did begin to argue. They talked about being able to keep their children in mind and being better parents. Eight out of eleven partners said they would seek the same kind of help again, and one had recommended it to a friend. Officers have now successfully secured funding from the Department of Education to extend the programme for another year.

Case Study

This case summarises the advice and support provided to a low/medium risk victim of domestic abuse during a two year period within the Harrow Floating Support Service.

The client's past experiences of domestic abuse within the former abusive relationship include physical abuse, intimidating/threatening behaviours, emotional abuse, controlling and/or coercive behaviour, verbal abuse, sexual abuse including rape and financial abuse. The provision of advice and support to the client has ensured on-going safety planning and review of relevant risk factors attributable to the former partner's abusive behaviour. In addition to safeguarding, the client was provided with support in gaining legal remedies (referral to immigration lawyer and family lawyer who applied for a Non Molestation Order

and Child Arrangement Order), alleviating her housing situation (referral to housing service and support in applying for JSA and housing benefit), extending her support networks, assisting with her finances and budgeting and work (pursued an Employer User Programme within the NHS (Mental Health Service) and through this programme, the client secured part-time employment), and empowerment and self-esteem in her moving-on/recovery process towards leading an independent and safe life.

'The Floating Support Worker has accompanied me to the Police station on a number of occasions and she has also accompanied me to a Parent-Teacher meeting in relation to my child; her presence has made me feel safer and more confident. The Floating Support Worker has since the beginning of my case focused a lot on how I can increase my self-esteem, self-worth and sense of empowerment in my moving-on/recovery process in particular when I interact with my former partner during handovers and when we need to communicate by email. During this process I have gradually strengthened my emotional resilience and my ability to detach from my former partner's abusive behaviour on a mental and emotional level which has proved vital as I need to meet him face to face during handovers. I have learnt that I cannot give my power and control away to my former partner and that I cannot stop him from exercising these forms of abuse against me. Instead I am slowly starting to understand that by detaching myself from my former partner on a mental, emotional and psychological level, I can reclaim power and control in my own life and chose how to respond to his abusive behaviour by not allowing it to affect me on a deeper level. This is a process however I have a greater belief in myself that I can do it'.

The Floating Support Worker has empowered me to take charge of the situation and it has made me realise that I have the right to assert boundaries and that my former partner can only stop me from exercising my independence if I allow him to. I feel that this is still a learning process and the Floating Support Worker has played a big part in lifting me up and supporting me to believe in myself and my potential to be able to move forwards in my life. In this context, I feel that the provision of emotional support and focus on increasing self-esteem and independence has had a significant and positive impact on my wellbeing and moving-on/recovery process. There is a safety plan in place which I am mindful of and I feel safer now compared to before when I was not supported by the Harrow IDVA or Harrow Floating Support Service'.

In 2014 we published our Domestic and Sexual Violence Strategy and over the past four years, this has enabled us to make real progress in delivering an integrated approach to

tackling domestic violence across Harrow. We are proud to have made this a priority for the Council and provided additional investment to enhance our service offer. Despite our achievements, domestic violence still exists, and its prevalence remains too high and so we still have work to do.

One of the [Domestic and Sexual Violence](#) Strategy Group's priorities for 2016/17 was signing up to the UK SAYS NO MORE campaign. UK SAYS NO MORE is a national campaign to raise awareness to end domestic violence and sexual assault and is a unifying symbol and campaign to raise public awareness and engage bystanders around ending domestic violence and sexual assault. We were very proud to be the first local authority partner and will continue to support the campaign over the coming year.

Over the life of the strategy, there has been a marked increase in referrals received into our services. This can be attributed to a number of factors, including the increased investment the Council has made; the fact that it has been a priority for the Administration and therefore has been subject of a long running communications campaign; and the profile of domestic violence having been raised significantly, through changes in legislation, national campaigns and high profile media cases.

We now make a renewed commitment through this strategy on behalf of all of the members of the Safer Harrow Partnership, to prioritise tackling domestic violence through a closer working and will now be integrated into the overall Community Safety and VVE Strategy. We commit to aligning budgets across the partnership, where possible, to make the best use of available resources in challenging financial times, to funding high quality provision, and to putting victims, and those affected, at the forefront of our work.

We recognise that some sectors of society can experience multiple forms of discrimination and disadvantage, or additional barriers to accessing support. These include victims from Black, Asian and Minority Ethnic (BAME) communities, lesbian, gay, bisexual and transgender (LGB&T), older people, disabled people, those with insecure immigration status and men. We are committed to ensuring that our approach takes into account the differing needs of victims, and the wider needs of our communities. In particular we recognise that adults in need of care/support are often at risk of domestic violence and abuse. A recent deep dive by the Safeguarding Adults Team showed that 33% (171 cases) of all safeguarding adults enquiries taken forward in 2016/17 had an element of domestic violence and abuse, and older people were the most "at risk group" (45%)

followed by mental health users (42%). The Harrow Safeguarding Adults Board (HSAB) has agreed that training and ~~awareness~~-raising awareness should be targeted to agencies where no/low referrals have been generated, this will also include a greater focus on the multi-agency training programme for safeguarding adults in relation to this domestic violence and abuse.

The Safer Harrow and Harrow Domestic and Sexual Violence Forum also aim to secure funding to continue current provision of domestic violence services for 2018/19. This will demand a true partnership approach with all avenues being considered. It is also proposed that a business case be developed to ascertain the options around potentially commissioning or developing a perpetrator programme locally. In addition, we would aim to future proof the Harrow Couples Domestic Violence Programme, to ensure that we can continue to provide this vital, ground breaking service, this would include exploring advances in technology which support the management of perpetrators. Perpetrator programmes aim to help people who have been abusive towards their partners or ex-partners change their behaviour and develop respectful, non abusive relationships. Taking part in a perpetrator programme can make a real difference to the lives of those involved, including children who have been affected. The Harrow Domestic Violence Forum and Strategy Group have long called for a perpetrator programme to be provided more widely in Harrow (it is currently spot purchased by Children's Services on a case by case basis).

Drug and alcohol misuse

Our strategic objective for drug and alcohol misuse lie around the need to ensure there is a continuity of treatment from prison to community. There is evidenced correlation between the commission of acquisitive crimes such as burglary and the misuse of Class A drugs, especially crack cocaine and heroin. Most prisoners recovering from drug or alcohol addiction will continue to require treatment after they leave prison and there is also a greater risk of drug-related deaths in the few weeks after release. It is also crucial to attack both the supply and demand for drugs, while ensuring addicts are given the best possible help to recover and necessary for those prisoners and their families who are faced with the destructive consequences of addiction. It is essential~~also necessary~~ for local people who become victims of preventable crimes every year at the hands of those desperately trying to pay for their drug and/or alcohol habits and reinforces our commitment to helping the most vulnerable.

The Harrow Substance Misuse Service is tailored for both young people and adults. The role of specialist substance misuse services is to support young people and adults to address their alcohol and drug use, reduce the harm caused by it and prevent it from becoming a greater problem.

Harrow Young People’s Substance Misuse Service (YPSMS) is provided by Compass who delivers a well-developed care pathway and range of early, targeted and specialist interventions that have been further developed throughout the year to increase Service User engagement including a Young People’s Service User Group. Compass’s co-location continues within the Youth Offending Team (YOT) to respond to youth cautions, youth conditional cautions and court orders in partnership with the YOT and the Police. The Compass Service Manager is a member of the Youth Offending Board and the Service has recently developed closer joint working arrangements at A&E to identify young people attending A&E with drug and /or alcohol related conditions.

There has been a significant increase in referrals from universal and alternative education between 15/16 Q3 and 16/17 Q3 with referrals from YOT remaining consistent. In 16/17 Q3 there were more referrals from education than from YOT which reflects the changing national picture. The Young people’s statistics from the National Drug Treatment Monitoring System (NDTMS) recent report highlighted that nationally, it is the first year of reporting that referrals from education services have exceeded referrals from youth/criminal justice sources.

The number of young people receiving drug and alcohol treatment intervention has also increased and this is a reflection of the increased engagement and co-locations of Harrow’s Young People’s Substance Misuse Service across the borough.

Harrow Young People’s Substance Misuse Service	Q3 15-16	Q4 15-16	Q1 16-17	Q2 16-17	Q3 16-17
Numbers in Treatment	72	78	89	83	90

During 2016/17 (information up until Q3) 48% of young people exiting treatment were drug free and 26% exiting treatment had reduced use. Compass has continued to undertake workforce development of multi-agency practitioners working with young people at risk of

offending and offenders to enable early identification of substance use and to be able to deliver brief interventions.

Case Study

Compass's first contact with a young person was in June 2016 when they were given 'Triage' by the Police for a possession of cannabis offence. The young person was required to complete statutory appointments with the YOT and Compass. Prior to their assessment with Compass, the young person had been using cannabis (on average) twice per month had a sibling in prison for a serious offence, a history of gang affiliation, anger issues and a complex family relationship. The young person (who had been using cannabis as a coping mechanism to deal with these issues) engaged well with the YOT who, as part of the process communicated with the police to inform them the young person had successfully completed their YOT programme. Once the sessions were completed with the YOT, the young person was given the option by Compass to continue to work with them on a voluntary basis which was accepted. ~~The young and they person~~ appreciated the safe place they were given to talk and throughout their engagement and attendance was exemplary. The young person also reported during their Compass engagement that they only used cannabis on 2 occasions from their assessment with Compass to discharge (period of engagement lasting 9 months).

To encourage positive activities, Compass also visited a gym with the young person that they were interested in joining and also attended their school (with their permission) to complete some three-way work with the staff. In addition, Compass also completed some of their sessions at the school so this did not impinge of after school studies/activities. In planning discharge, Compass made arrangements with the school for the young person to have access to a staff member for regular support sessions/counselling so they did not lose a safe place to talk. ~~The~~ young person was discharged from Compass in March 2017 with no evident of reoffending during their time of engagement.

Compass have also recently been awarded a two-year grant which aims to provide preventative interventions to support young people at risk of becoming involved in the supply of illicit substances and build resilience in young people to recognise the signs of

dealer grooming. This project will work with young people to help them build resilience so that they are able to spot the signs of dealer grooming and are able to choose not to supply substances, and to reduce the harm that supply of substances does to individuals, families and communities by supporting them to exit this lifestyle. It also seeks to reduce the numbers of young people choosing to or being coerced into supplying substances; by measuring the number of young people referred to the drug and alcohol service regarding preventative work using local public health data.

Compass will deliver focused early interventions to young people involved in the supply of illicit substances in the form of Cognitive Behaviour Therapy (CBT) based 1-1 sessions, and delivering targeted preventative interventions to support young people who are risk of becoming involved in the supply of illegal substances via psycho-educational 1-1 and group sessions. In addition to this, the project will roll out universal awareness sessions in schools via assemblies and tutor groups to help build young people's resilience against offending. Compass will build on its close working relationships with Harrow Council and specific agencies, including MACE, MARAC, YOT, CSE and Northwick Park paediatric A&E to deliver this programme.

The chart below shows Substance Misuse Service users by age during October 2015 to September 2016. The highest numbers of users of the Service are aged 35-39 and interestingly, where there is a high proportion of young people aged 15-19 years old entering the service, this drops dramatically young people aged 20-24, which could indicate a potential gap in services for young people transitioning to adult services. To reduce the risk of 'cliff edge' of support between Young People's and Adult Services, the age range for access to Harrow's Young People's Substance Misuse Service has been extended to 24 years.

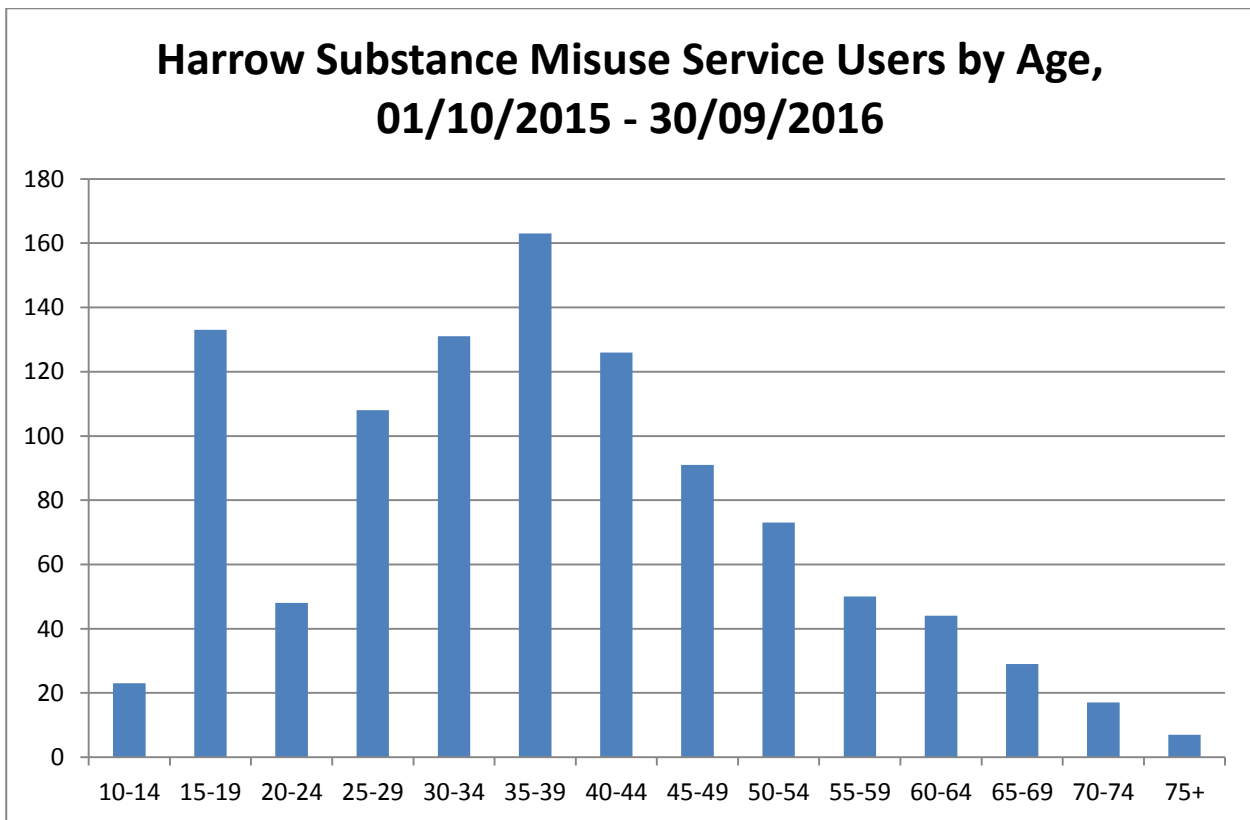


Figure 11 - Harrow Substance Misuse Service Users by Age, October 2015 – September 2016

The Harrow Adult Substance Misuse Service is delivered by Westminster Drug Project (WDP) who have a strong partnership and satellite provision with their Criminal Justice System partners by joint working and co-location with Police, Probation (National Probation Service and the Community Rehabilitation Company and at Court where Drug Rehabilitation Requirements and Alcohol Treatment Reports are delivered. WDP are co-located in Custody three mornings a week to undertake assessments and offer seven slots a week for required assessment appointments and all individuals that commit a “trigger offence” such as burglary, shoplifting and common assault are target tested. If positive for cocaine/heroin they will be required to come and see WDP for an assessment and also a follow up appointment to support them into treatment. There is also continuation of the local drug testing on arrest (DTOA) initiative implemented in 2012 in partnership with the Metropolitan Police and continuation of the prison link/community resettlement pathway for substance-misusing prisoners with Integrated Offender Management (IOM). The presence of WDP staff in Custody also provides support to Custody officers in what to look out for in terms of an individual experiencing withdrawal of alcohol and / or opiates). WDP staff working in custody have MET clearance so they can undertake “cell sweeps” and deliver Identification and Brief Advice on alcohol (‘IBA’) which is a brief intervention approach and is aimed at identifying increasing risk drinkers.

The number of adults assessed in a Criminal Justice System (CJS) setting has remained consistent, although there was a sharp rise in referrals during 16/17 Q2. However there is still opportunity and on-going joint work between WDP and Police Custody to increase referrals and improve the rate of individuals being referred to and accessing treatment. A number of individuals coming through Police Custody reported themselves to be recreational users. Whilst numbers of individuals assessed in a CJS setting were lower in 16/17 Q3 than 16/17 Q2, the conversion rate into treatment was higher at 61% from 56%.

The number of individuals on Court ordered Drug Rehabilitation Requirements has increased over the past 12 months with an increase in treatment starts in 15/16 Q3 and the number of individuals on Court ordered Alcohol Treatment Requirements plus treatment starts have also increased.

The new Public Health Outcome Framework (PHOF) indicator 2.16 supports a priority under the National Partnership Agreement between NHS England, National Offender Management Service (NOMS) and Public Health England (PHE) to strengthen integration of services and continuity of care between custody and the community. Prisoners will need to be supported to engage in community treatment within three weeks of their release. The recent PHOF 2.16 activity shows the rate of successful transfer from prison to community treatment in Harrow is lower than the national average and represents a lost opportunity to potentially engage people who had been in treatment while in prison.

WDP have recently been awarded a two-year grant to provide a Prison Link Worker. Although a particularly difficult cohort to engage there is a great deal that can be undertaken to improve outcomes in this area and the Prison Link Worker will work with the prison's CARAT (Counselling, Assessment, Referral, Advice and Through-care) team to identify substance misusers within prisons. Links will be reinforced with key individuals within prisons and robust referral pathways implemented to ensure that all offenders are offered an appointment on release and where appropriate can be assessed within prison before their release. The Prison Link Worker will be co-located at NPs and CRC and other appropriate criminal justice settings including but not limited to prisons themselves.

Increased involvement of Harrow Substance Misuse Service with the CRC and NPS via a new Prison Link Worker will help make the critical phase of transition more likely to succeed and support the engagement of drug and alcohol misusing offenders into

effective treatment with the objective of reducing drug and/or alcohol-related crimes and anti-social behaviour.

Despite high abstinence levels, partly due to the ethnic and religious breakdown of the borough it is estimated that 50,000 people in Harrow are drinking at hazardous and harmful levels and 1,607 people have an alcohol dependence requiring treatment¹². We are committed to addressing the cause of alcohol misuse. Those drinkers who are drinking at any elevated level of risk will benefit from accurate identification and advice from their professional and the evidence base for the effectiveness of IBA is strong. The World Health Organisation and the Department of Health have both acknowledged over 50 peer reviewed academic studies that demonstrate IBA is both effective and cost effective in reducing the risks associated with drinking. On average, 1 in 8 drinkers who receive this type of support from a health care professional will reduce their drinking to the lower-risk levels¹³. However, this may be an underestimation of the benefits as some may reduce their drinking but not to lower-risk levels.

WDP is currently delivering IBA [training](#) across the borough and supporting Harrow stakeholders in the shared objective to improve the wellbeing and quality of life of residents. IBA training is currently being offered to frontline staff including Custody and Neighbourhood Police, Domestic Violence Agencies, Children and Family Services (including supporting family members to respond to change resistant drinkers, making family members more aware of barriers to change, harm reduction and impact of physical effects) to improve engagement with individuals who may not normally access a Drug and Alcohol Service.

The Council helps support the responsible retailing of alcohol through its' statutory duties under the Licensing Act 2003, which includes preventing crime and disorder arising from alcohol-licensed premises. In 2016 it launched the Best Bar None accreditation scheme for pubs and bars with the police, Harrow Town Centre Business Improvement District and the private sector, in which thirteen premises participated. The Council's plan is to increase the number and type of premises taking part in Best Bar None year-on-year.

¹² Estimates of Alcohol Dependence in England based on APMS 2014, including Estimates of Children Living in a Household with an Adult with Alcohol Dependence Prevalence. Trends, and Amenability to Treatment - Public Health England, March 2017

¹³ Moyer, A., Finney, J., Swearingen, C. and Vergun, P. (2002) Brief Interventions for alcohol problems: a meta-analytic review of controlled investigations in treatment-seeking and non-treatment seeking populations, *Addiction*, 97, 279-292.

In 2017 the Council's licensing team conducted on-street surveys in Burnt Oak Broadway and Sudbury which confirmed that on-street drinking was perceived as a concern for local residents of both sexes and across different ages and ethnic backgrounds. The licensing team will work with the police and Trading Standards to introduce Neighbourhood Watch-style schemes with off-licences in Wealdstone, Burnt Oak Broadway, Sudbury Town and potentially Northolt Road to promote responsible alcohol retailing, information-sharing and reduce on-street drinking.

Extremism and hate crime

The Counter Terrorism and Security Act (2015) placed a duty on specified authorities to have due regard to the need to prevent people from being drawn into terrorism. Authorities subject to the provisions must have regard to the Prevent Duty Guidance when carrying out the duty.

Specified authorities include:

- Local authorities
- Higher/further education
- Schools and registered child care providers
- The health sector
- Prisons and probation (including Young Offenders Institutions)
- Police

By endorsing and supporting the approach being taken in Harrow the Council will be working towards complying with the Prevent duty Harrow. The Prevent strategy, published by the Government in 2011, is part of the overall counter-terrorism strategy, CONTEST.

There are four work streams within CONTEST:

- PREVENT: to stop people becoming terrorists or supporting terrorism
- PROTECT: to strengthen our protection against an attack
- PREPARE: to mitigate the impact of an attack
- PURSUE: to stop terrorist attacks

The aim of the Prevent strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. The Prevent strategy has three specific objectives:

- Responding to the ideological challenge of terrorism and the threat we face from those who promote it;
- Preventing people from being drawn into terrorism and ensuring that they are given appropriate advice and support; and
- Work with sectors and institutions where there are risks of radicalisation that we need to address.

Terrorist groups often draw on extremist ideology, developed by extremist organisations. The Government has defined extremism in the Prevent strategy as: 'vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces.'

The Prevent strategy was explicitly changed in 2011 to deal with all forms of terrorism and with non-violent extremism, which can create an atmosphere conducive to terrorism and can popularise views which terrorists then exploit. Prevent is intended to deal with all kinds of terrorist threats in the UK.

The current threat level for international terrorism for the UK is assessed as severe, which means that a terrorist attack is highly likely. Preventing people from being drawn into terrorism is therefore a high priority for government, and by introducing the Prevent duty all named authorities must ensure that they have due regard to the need to prevent people from being drawn into terrorism.

The approach taken in Harrow has been to work in partnership with other named authorities bound by the duty, and to engage with communities in this challenging and high profile area of work.

Harrow's approach has also been firmly rooted from a safeguarding perspective. The Prevent strategy states that 'safeguarding vulnerable people from radicalisation is no different from safeguarding them from other forms of harm'.

In complying with the duty a risk assessment has been carried out in Harrow (in partnership with Harrow police and SO15 – Counter Terrorism Command) and a local Prevent Action Plan has been drawn up. A multi-agency Prevent Action Plan Group has been set up to review progress of the action plan and where necessary to agree additional actions if required.

Some of the main areas of work to date have been around raising awareness of Prevent, staff training [which has been supported by the local HSCB and HSAB](#) (Workshop to Raise Awareness of Prevent – WRAP), establishing and effectively operating a multi-agency panel for those individuals identified as vulnerable to radicalisation (Channel), and ensuring that publically owned venues and resources do not provide a platform for extremists. All of these actions assist us in meeting the recommendations of the Prevent Duty Guidance which was issued in 2015 alongside the counter Terrorism and Security Act.

Our aim is to ensure that all relevant practitioners and frontline staff, including those of its contractors, have a good understanding of Prevent and are trained to recognise vulnerability to being drawn into terrorism and are aware of available programmes to deal with these issues. Over the last year over 1,500 people were trained, by the Council, using the Home Office WRAP package – Workshop to Raise Awareness of Prevent.

There are a number of expectations upon local authorities including:

- Making appropriate referrals to Channel (a programme that provides support to individuals who are at risk of being drawn into terrorism, which has been put on a statutory footing by the Counter Terrorism and Security Act). Channel arrangements are established in Harrow and the multi-agency panel meets on a monthly basis.
- Ensuring publically-owned venues and resources do not provide a platform for extremists and are not used to disseminate extremist views. This includes considering whether IT equipment available to the general public should use filtering solutions that limit access to terrorist and extremist material. Prevent advice (and police recommendations regarding halls for hire), has been shared across the Council and with partners.

- Ensuring organisations who work with the Council on Prevent are not engaged in any extremist activity or espouse extremist views. Currently the Council is not delivering any specific Prevent projects.

In addition to this, all Local Authorities are also expected to ensure that these principles and duties are written into any new contracts for the delivery of services in a suitable form. Discussions around this have been started with procurement colleagues and commissioners.

In relation to community cohesion, Harrow is a hugely diverse borough, which benefits from positive levels of community cohesion. In the last Reputation Tracker 79% of residents were positive about people from different backgrounds in their area getting on well together.

However, we are not complacent about community cohesion, and on a weekly basis (in partnership with Harrow police) we monitor community tensions. Where necessary, appropriate action is taken with relevant partners to ensure that tensions do not escalate.

Following national and international events the Council has brought leaders from different communities together to hear key messages from the police and council and to ensure that messages of unity, community cohesion and reassurance are given and disseminated via different community leaders. This has proved to be a very helpful approach.

[We recognise that hate crime is often under reported and reported](#) Harrow has the lowest level of [reported](#) hate crime in London, ~~but we recognise that hate crime is often under reported.~~ The Council has commissioned Stop Hate UK to provide third party reporting arrangements. Stop Hate UK information is widely promoted and communities are encouraged to report incidents of hate crime directly to the police or via Stop Hate UK. Victims of hate crime are provided with casework support via the Community Safety Team.

In addition to this we often hear from people with care/support needs and those with learning disability about being targeted e.g. bullying by young people around the bus station. They also experience “mate crime” where they can be befriended for the purposes of exploitation. The Safeguarding Adults Board has prioritised community safety this year and hope to formally launch the “Safe Place Scheme” later this year.

Delivering the Strategy

The Strategy's objectives will be delivered in partnership through Safer Harrow, which is responsible for co-ordinating activity between the Police, the British Transport Police, the Council, the London Fire Brigade, the London Probation Service, the Voluntary and Community Sector and any other relevant organisation to reduce crime, disorder, anti-social behaviour and the fear of crime. In light of our renewed focus in the Strategy, Safer Harrow will be reviewing the current governance arrangements and are in the process of developing a process which will be better aligned to ensuring the effective implementation of the Delivery Plan.

The role of Safer Harrow is to bring key agencies and players together in order to ensure that we are working effectively with one another ~~in order~~ to reduce crime and disorder in Harrow. Safer Harrow adds value by having a strategic overview of all programmes and providing support to partners ~~in order~~ to ensure that the overall objectives of the partnership are achieved through effective collaboration. Its purpose is to identify links, reduce duplication, and make sure that gaps in service provision are identified so that programmes can address issues that are of particular concern. Although Safer Harrow cannot instruct other agencies what to do or how to do it, it can highlight 'need' and encourage joint working, co-operation and participation in achieving improvements and solutions. [As part of this, the partnership will look for all opportunities to communicate the impact of our initiatives that are taking place across the borough.](#)

Safer Harrow also provides a forum in which to examine the performance of programmes and how they can be assessed. This includes facilitating the sharing of data and information in a timely and relevant way so that those who need to know can easily find out about problems, issues, individuals of interest, and those needing support. A number of data sharing agreements have been reviewed in the last year and will be refreshed to facilitate better joint working.

Governance of community safety, including this Strategy, sits with Safer Harrow and the strategic objectives will be measured through a Delivery Plan, which will clear outcomes and measures. In order to establish an effective delivery mechanism of the fund, Safer Harrow will be working closely with the voluntary and community sector to deliver the projects outlined in this strategy aimed at reducing violence, vulnerability and exploitation,

and a Delivery Group will oversee the whole programme. In doing this we will ensure that we avoid duplication and support existing bodies where they already exist.

Over the next two years the Council will be receiving funding under the Mayor's Office for Policing and Crime (MOPAC) through the London Crime Prevention Fund (LCPF) to tackle priorities in the new London Police and Crime Plan. As part of this, MOPAC have approved funding aimed at a programme of Violence, Vulnerability and Exploitation projects, outlined in this strategy, which will help us respond to the gangs peer review, the rise in youth violence that we are seeing in the borough.

We are fortunate in that we have a vibrant and efficient voluntary and community sector with which we have a close working partnership. This has meant that to date we have made substantial gains in closing the gap between vulnerable groups through targeted interventions, and this will continue to be the theme of our forthcoming programmes.

In delivering this Strategy Safer Harrow will be producing a themed Delivery Plan which will oversee projects which will contribute to the strategic objectives outlined in this Strategy, including all of the MOPAC funded projects agreed for the 2017/18 and 2018/19 financial years.

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**COUNCIL
28 SEPTEMBER 2017**

**CABINET
RECOMMENDATION
(13 JULY 2017)**

RECOMMENDATION I

CORPORATE PARENTING STRATEGY

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CABINET

13 JULY 2017

Record of decisions taken at the meeting held on Thursday 13 July 2017.

Present:

Chair: * Councillor Sachin Shah

Councillors:

* Sue Anderson	* Varsha Parmar
* Simon Brown	* Kiran Ramchandani
* Keith Ferry	* Mrs Christine Robson
* Glen Hearnden	* Adam Swersky
† Graham Henson	

In attendance:

Richard Almond	Minute 571
James Bond	Minute 571
Barry Macleod-Cullinane	Minute 571
Pritesh Patel	Minute 570

- * Denotes Member present
- † Denotes apologies received

RECOMMENDED ITEMS

575. Corporate Parenting Strategy

Resolved to RECOMMEND: (to Council)

That the Corporate Parenting Strategy 2017 – 2019 be approved.

RESOLVED: That the Corporate Parenting Strategy 2017 – 2019, as recommended by the Corporate Parenting Panel on 14 June 2017, be approved.

Reason for Decision: To ensure that all Councillors as Corporate Parents were aware of how these responsibilities were being carried out.

Alternative Options Considered and Rejected: None.

Conflict of Interest relating to the matter declared by Cabinet Member/Dispensation Granted: None.

COUNCIL
28 SEPTEMBER 2017

CABINET
RECOMMENDATION
(14 SEPTEMBER 2017)

RECOMMENDATION I

**USE OF RETAINED RIGHT TO BUY
RECEIPTS**

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CABINET

14 SEPTEMBER 2017

Record of decisions taken at the meeting held on Thursday 14 September 2017.

Present:

Chair: * Councillor Sachin Shah

Councillors:

* Sue Anderson	* Varsha Parmar
* Simon Brown	* Kiran Ramchandani
* Keith Ferry	* Mrs Christine Robson
† Glen Hearnden	* Adam Swersky
* Graham Henson	

In attendance:

Janet Mote	Minute 597
Paul Osborn	Minute 588
Norman Stevenson	Minute 588
Sasi Suresh	Minute 597

- * Denotes Member present
- † Denotes apologies received

RECOMMENDED ITEMS

591. Use of Retained Right to Buy Receipts

Resolved to RECOMMEND: (to Council)

That Council be recommended to approve the addition of the £5m capital budget to the Housing Revenue Account (HRA) Capital Programme in 2017-18.

RESOLVED: That, subject to Council approval

- (1) the Divisional Director of Housing, following consultation with the Portfolio Holders for Housing and Employment and Finance and

Commercialisation, be authorised to use retained Right to Buy Receipts to support Registered Providers (RPs) bringing forward social housing schemes to which the Council would have 100% nomination rights, subject to the RPs entering into a grant agreement with the Council;

- (2) for the purposes of resolution (1) above, a capital budget of £5m be created within the Housing Revenue Account (HRA) Homes for Harrow programme, which would be fully funded from retained HRA Right to Buy capital receipts with no impact on General Fund or HRA revenue resources.

Reason for Decision: To increase the supply of affordable housing for households in priority housing need. In order to comply with the Budget and Policy Framework Rules set out in the Constitution and the Financial Regulations.

Alternative Options Considered and Rejected: As set out in the report.

Conflict of Interest relating to the matter declared by Cabinet Member/Dispensation Granted: None.

[Note: Call-in does not apply to the recommendation reserved to Council.]

**COUNCIL
28 SEPTEMBER 2017**

**PENSION FUND COMMITTEE
RECOMMENDATION
(28 JUNE 2017)**

RECOMMENDATION I

**PENSION FUND COMMITTEE – ROLE
OF CO-OPTEE**

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PENSION FUND COMMITTEE

MINUTES

28 JUNE 2017

Chair:	* Councillor Nitin Parekh	
Councillors:	* Kairul Kareema Marikar	* Bharat Thakker
	* Norman Stevenson	
Trade Union Observers:	John Royle	Pamela Belgrave
Independent Advisers:	* Mr C Robertson	Independent Adviser
	* Honorary Alderman R Romain	Independent Adviser
Others:	* Colin Cartwright	Aon Hewitt
	* Joe Peach	Aon Hewitt
	* Howard Bluston	

* Denotes [Member] present

RECOMMENDED ITEMS

208. Role of Co-optee

The Committee received a report of the Director of Finance regarding the role of the non-voting co-optee to the Committee.

The Director of Finance introduced the report and drew attention to paragraphs 10 and 11 of the report which set out the need for the role of the non-voting co-optee to operate within the rules of the Council's Constitution. She emphasised that attendance at other external meetings and function relevant to the Pension Fund Committee would be subject to officer approval.

The Chair provided some background to the report and Members asked questions on the cost of the training attended. The Director of Finance explained that the appropriateness of the training and conferences required careful consideration as it would be a cost to the Pension Fund. She explained that this statement only applied to external training and not that provided in-house. Representation by the co-optee at external training and conferences was also subject to officer approval.

Resolved to RECOMMEND: (to Council)

That the role of, and the working arrangements applying to, the non-voting co-optee(s) to the Committee, as described in paragraphs 10 and 11 of the report be agreed and that Howard Bluston be appointed as a non-voting co-optee on the Committee for the Municipal Year 2017/18.

**COUNCIL
28 SEPTEMBER 2017**

**CONSTITUTIONAL AMENDMENTS – TERMS
OF REFERENCE OF HEALTH AND WELLBEING
BOARD**

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REPORT FOR: COUNCIL

Date of Meeting:	28 September 2017
Subject:	Constitutional amendments – terms of reference of Health and Wellbeing Board
Responsible Officer:	Hugh Peart Monitoring Officer
Exempt:	No
Wards affected:	None
Enclosures:	Appendix 1 – Report to Health and Wellbeing Board 20.07.17 Appendix 2 – Proposed changes to terms of reference of the Health and Wellbeing Board Appendix 3 – Extract from minutes of Health and Wellbeing Board 20.07.17

Section 1 – Summary and Recommendations

This report sets out proposals to change the terms of reference of the Health and Wellbeing Board. The proposed changes have already been considered by the Health and Wellbeing Board and the Constitution Review Working Group.

Recommendations:

Council is requested to agree to make the changes to the terms of reference of the Health and Wellbeing Board as set out in Appendix 2.

Section 2 – Report

1. At its meeting on 20 July 2017, the Health and Wellbeing Board agreed to recommend to Council changes to its terms of reference as set out in Appendix 2. The report and an extract from the minutes are attached as Appendix 1 and 3 respectively. The Constitution Review Working Group has considered the recommendation and agreed to recommend the revised terms of reference to Council.

Legal comments

2. Legal comments are as set out in the report to the Health and Wellbeing Board at Appendix 1.

Financial Implications

3. Financial implications are as set out in the report to the Health and Wellbeing Board at Appendix 1.

Risk Management Implications

Risk included on Directorate risk register? No

Separate risk register in place? No

Equalities implications

Was an Equality Impact Assessment carried out? No.

There are no equalities implications arising from this report.

Council Priorities

An up to date and effective constitution is important in facilitating proper decision-making in the Council so that it can work together to make a difference for Harrow.

Section 3 - Statutory Officer Clearance

Name: Sharon Daniels	<input checked="" type="checkbox"/>	On behalf of the Chief Financial Officer
Date: 19.09.17		
Name: Caroline Eccles	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 18.09.17		

Ward Councillors notified:	NO
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Section 4 - Contact Details and Background Papers

Contact: Caroline Eccles, Senior Lawyer, Employment and Governance, tel: 0208 424 7580.

Background Papers:

None.

If appropriate, does the report include the following considerations?

1.	Consultation	NO
2.	Priorities	YES

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REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting:	20 July 2017
Subject:	Terms of Reference for Health and Wellbeing Board
Responsible Officer:	Hugh Peart, Director of Legal and Governance Services
Public:	Yes
Wards affected:	All Wards
Enclosures:	Current Terms of Reference with tracked changes

Section 1 – Summary and Recommendations

This report informs the Board of the request by the Harrow Clinical Commissioning Group for an increase in its voting representation on the Board. It also seeks approval to amend the terms of reference in relation to sub groups.

Recommendations:

The Board is requested to:

1. Consider the request from the Harrow Clinical Commissioning Group to amend its membership by the inclusion of the Accountable Officer as a Voting Board Member;
2. Agree, subject to Council approval, that the paragraph on Sub Groups be deleted from the terms of reference as these groups are not in operation;
3. Recommend to the Constitutional Review Working Group that Council be requested to approve the revised Terms of Reference for inclusion in the Council's Constitution.

Section 2 – Report

At its first meeting on 19 June 2013 the Board received a report which set out its terms of reference and procedural rules. The voting membership comprised four Members of the Council nominated by the Leader of the Council, three representatives from Harrow Clinical Commissioning Group and one representative from Harrow Healthwatch. At the meeting on 30 June 2016, it was noted that the number of Members of the Council nominated by the Leader of the Council had been increased from 4 to 5. This was to enable the Leader of the Council to take a place on the Board and to enable the continued attendance of an opposition Member.

Current situation

Harrow Clinical Commissioning Group has requested that the CCG Accountable Officer or his/her nominee becomes an additional voting member on the Board. The officer is currently a non-voting member. If this is approved, there would be an equality of votes between the Members of the Council and the CCG/Healthwatch with the casting vote in the event of an equality of votes falling to the Leader of the Council or in his absence the Vice-Chair who is the Chair of the Harrow Clinical Commissioning Group. This is in accordance with the balance between the organisations as when the Board was first set up. As the CCG Accountable Officer is currently a non-voting member, the bullet point in section 4.3 would be deleted if it is agreed for this member to become a voting member. The total number of CCG Board members would remain the same.

It was envisaged that the Health and Wellbeing Board would establish sub groups. These would be informal officer level groups and would be reviewed annually. As Sub groups are no longer appointed, and no minutes or issues have been submitted to the Board, it is suggested that they be deleted from the terms of reference.

Why a change is needed

The current terms of reference for the Health and Wellbeing Board are attached with suggested amendments in track changes with regard to a revised voting membership and the deletion of the paragraph on sub groups.

Financial Implications/Comments

No additional costs have been identified as a result of the proposed changes to voting representation. However, in the event that any costs arise from these changes, such costs would need to be contained within existing partner organisation budgets as appropriate

Legal Implications/Comments

Under s.194 of the Health and Social Care Act, a local authority must establish a Health and Wellbeing Board. The core membership is set out

under that section and may include 'such other persons, or representatives of such other persons, as the local authority thinks appropriate.' The Board itself can appoint additional members. As the member in question was originally appointed by the local authority it is appropriate for the change in their status to be approved by Council, particularly as it is a change to the constitution.

The usual practice is for proposed changes to the constitution to be considered by the Constitution Review Working Group prior to a report going to Council..

Risk Management Implications

There are no additional risks identified.

Equalities implications

The purpose of the Board is to improve health and wellbeing for the residents of Harrow and reduce inequalities in outcomes.

Council Priorities

The Council's vision:

Working Together to Make a Difference for Harrow

The report incorporates the administration's priorities by improving health and wellbeing for the residents of Harrow and reduce inequalities in outcomes.

- Making a difference for the vulnerable
- Making a difference for communities
- Making a difference for local businesses
- Making a difference for families

Section 3 - Statutory Officer Clearance (Council and Joint Reports)

Name: Donna Edwards	<input checked="" type="checkbox"/>	on behalf of the Chief Financial Officer
Date: 14 June 2017		
Name: Caroline Eccles	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 27 June 2017		

Ward Councillors notified:	NO
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Section 4 - Contact Details and Background Papers

Contact: Miriam Wearing, Senior Democratic Services Officer
Email: Miriam.wearing@harrow.gov.uk
Tel: 020 8424 1542

Background Papers: Terms of reference of Health and Wellbeing Board

HEALTH AND WELLBEING BOARD

1. Accountability

The Health and Wellbeing Board is set up in accordance with section 102 of the Health and Social Care Act 2012. The Council can choose to delegate decision making powers to the Health and Wellbeing Board. Any recommendations are subject to the agreement of the Leader of the Council if they are not covered by the delegated authority.

Members of the Board will be required to abide by the Code of Conduct.

2. Purpose of the Board

2.1. The Government proposes that statutory health and wellbeing boards will have 3 main functions:

- to assess the needs of the local population and lead the statutory joint strategic needs assessment
- to promote integration and partnership across areas, including through promoting joined up commissioning plans across NHS, social care and public health
- to support joint commissioning and pooled arrangements, where all parties agree this makes sense

The Board will cover both adult and children's issues.

2.2. The purpose of the Board is to improve health and wellbeing for the residents of Harrow and reduce inequalities in outcomes. The Board will hold partner agencies to account for delivering improvements to the provision of health, adult and children's services social care and housing services.

3. Key Responsibilities

3.1. The key responsibilities of the Health and Wellbeing Board shall be:

- 3.1.1. To agree health and wellbeing priorities for Harrow
- 3.1.2. To develop the joint strategic needs assessment
- 3.1.3. To develop a joint health and wellbeing strategy
- 3.1.4. To promote joint commissioning
- 3.1.5. To ensure that Harrow Council and the CCG commissioning plans have had sufficient regard to the Joint Health and Wellbeing strategy

- 3.1.6. To have a role in agreeing the commissioning arrangements for local Healthwatch
- 3.1.7. To consider how to best use the totality of resources available for health and wellbeing.
- 3.1.8. To oversee the quality of commissioned health services
- 3.1.9. To provide a forum for public accountability of NHS, public health, social care and other health and wellbeing services
- 3.1.10. To monitor the outcomes of the public health framework, social care framework and NHS framework introduced from April 2013)
- 3.1.11. To authorise Harrow's Clinical Commissioning Group annual assessment
- 3.1.12. To produce a Pharmaceutical Needs Assessment and revise every three years
- 3.1.13. Undertake additional responsibilities as delegated by the local authority or the Clinical Commissioning Group e.g. considering wider health determinants such as housing, or be the vehicle for lead commissioning of learning disabilities services.

4. Membership

4.1. The Chair of the Board will be nominated by the Leader of Harrow Council.

4.2. The voting membership will be:

- Members of the Council nominated by the Leader of the Council (5)
- Chair of the Harrow Clinical Commissioning Group (vice chair)
- GP representative of the Harrow Clinical Commissioning Group
- A further representative of the Harrow Clinical Commissioning Group
- [CCG Accountable Officer or nominee](#)
- Chair of Healthwatch

4.3. The following Advisors will be non-voting members:

- Director of Public Health
- Chief Officer, Voluntary and Community Sector
- Senior Officer of Harrow Police
- ~~[Accountable Officer – CCG](#)~~
- Chief Operating Officer – CCG

Comment [MW1]: This bullet point is to be deleted if it is agreed for this member to become a voting member (as referenced in 4.2 above)

- Corporate Director, People
- Director Adult Social Services

4.4. The voluntary and community sector representative shall be nominated by the Voluntary Community Sector Forum on an annual basis.

4.5. Members are appointed annually. Members of the Board shall each name a reserve who will have the authority to make decisions in the event that they are unable to attend a meeting.

4.6. Board members shall sign a register of attendance at each meeting and should not normally miss more than one meeting within a financial year.

4.7. The chair of the Clinical Commissioning Group will serve as the vice chair of the Health and Wellbeing Board.

4.8. Providers will be invited to attend meetings as required depending on the subject under discussion.

4.9. Participation of the NHS England

4.9.1. NHS England must appoint a representative to join Harrow's Health and Wellbeing Board for the purpose of participating in the Boards preparation of the JSNA and JHWS.

4.9.2. The Health and Wellbeing Board can request the participation of the NHS England representative when the Health and Wellbeing Board is considering a matter that relates to the exercise or proposed exercise of the commissioning functions of NHS England in relation to Harrow.

4.10. Meeting Frequency

4.10.1. The Board shall meet bi monthly subject to review

4.10.2. An extraordinary meeting will be called when the Chair considers this necessary and/or in the circumstances where the Chair receives a request in writing by 50% of the voting membership of the Board

4.11. Health and Wellbeing Board Executive

4.11.1. The purpose of the Health and Wellbeing Board Executive is to:

- Develop and deliver a programme of work based on the Joint Commissioning priorities and the Joint Health and Wellbeing Strategy
- Shape future years joint commissioning
- Shape the agenda for future HWB meetings

- Engage and understand the views of different organisations (including providers)
- Bring together a collective view of partners and providers to the bi-monthly Health and Wellbeing Board
- Share Commissioning Intentions and common priorities
- Govern and quality assure the Health and Wellbeing Board work programme
- Be aware and discuss emerging policy and strategy
- Problem Solving

4.11.2. The meetings of the Executive will be scheduled to meet before the Board.

4.11.3. Membership will consist of senior representatives from both the Council and Clinical Commissioning Group, including the Directors of Adults, Children's, and Public Health services, the Chair of Harrow Clinical Commissioning Group, Accountable Officer, Chief Operating Officer, GP Clinical Directors, and finance officers.

4.11.4. The chairing of the Executive will alternate between the council's Corporate Director of People Services and the Chief Operating Officer, Harrow CCG.

4.12. Local Safeguarding Boards

4.12.1. The Council's two Local Safeguarding Boards have a horizontal link to the Health and Wellbeing Board and include:

4.12.1.1. Local Safeguarding Adults Board

4.12.1.2. Harrow Local Children's Safeguarding Board

4.13. Sub Groups

~~4.13.1. The Board will review each year which sub groups are to be established based on the Boards priority areas~~

~~4.13.2. The Sub Groups will ensure that the views of patients and service users are included.~~

~~4.13.3. Sub groups will be informal officer level groups.~~

~~4.13.4. Sub groups should provide a copy of their previous minutes or a list of issues for discussion at alternate Health and Wellbeing Board meetings to be considered by members.~~

Comment [MW2]: Sub groups are no longer appointed and no minutes or issues have been submitted to the Board.

4.14.4.13. Conduct of Meetings

- 4.14.1.4.13.1. Meetings of the Board will be held in public except where the public are excluded from the meeting by resolution in accordance with Access to Information Act.
- 4.14.2.4.13.2. The quorum of the Board shall be 50% of the voting membership – however there must be attendance of at least one voting member from both the Council and the Clinical Commissioning Group. Should the quorum not be secured the meeting will not take place.
- 4.14.3.4.13.3. Decisions shall be made on the basis of a show of hands of a majority of voting members present. The Chairman will have a second or casting vote.
- 4.14.4.4.13.4. Each meeting will have provision for the public to ask questions. There will be a total limit of 15 minutes for the asking and answering of public questions.
- 4.14.5.4.13.5. Harrow Council Democratic Services will service the meetings including the preparation and circulation of agenda and the production of minutes.
- 4.14.6.4.13.6. Minutes of the meetings will be available on the website of the council.
- 4.14.7.4.13.7. The chair shall sign off the minutes as a true and accurate record of the meeting.
- 4.14.8.4.13.8. Agendas and supporting papers will be available on the website of the council at least five working days before the meeting.

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APPENDIX 3

HEALTH AND WELLBEING BOARD MINUTES

20 JULY 2017

Chair:	* Councillor Sachin Shah		
Board Members:	* Councillor Simon Brown	Harrow Council	
	† Councillor Janet Mote	Harrow Council	
	* Councillor Varsha Parmar	Harrow Council	
	* Councillor Mrs Christine Robson	Harrow Council	
Non Voting Members:	† Bernie Flaherty	Director of Adult Social Services	Harrow Council
	† Carol Foyle	Representative of the Voluntary and Community Sector	Voluntary and Community Sector
	* Andrew Howe	Director of Public Health	Harrow Council
	* Paul Jenkins	Interim Chief Operating Officer	Harrow Clinical Commissioning Group
	† Rob Larkman	Accountable Officer	Harrow Clinical Commissioning Group
	Jo Ohlson	Director of Commissioning Operations	NW London NHS England
	Chief Superintendent Simon Ovens	Borough Commander, Harrow Police	Metropolitan Police
	* Chris Spencer	Corporate Director, People	Harrow Council

In attendance: (Officers)	Chris Greenway	Head of Safeguarding Assurance & Quality Services	Harrow Council
	Garry Griffiths	Assistant Chief Operating Officer	Harrow Clinical Commissioning Group
	Donna Edwards	Service Manager Adults and Housing	Harrow Council

RECOMMENDED ITEMS

217. Terms of Reference for Health and Wellbeing Board

Consideration was given to a request from the Harrow Clinical Commissioning Group to amend its membership to include the Accountable Officer as a Voting Board Member and to the deletion of the paragraph on Sub Groups as those groups had not been in operation. It was noted that the Accountable Officer was currently a non-voting member of the Board.

The Chair advised the Panel that the recent increase in the number of Members of the Council nominated by the Leader of the Council from 4 to 5 had enabled him to have a place on the Board and the continued attendance of an opposition member. The request from the CCG would restore the balance between the voting membership.

Resolved to RECOMMEND: (to Council)

That the terms of reference of the Board be amended to:

- (1) include the Accountable Officer of Harrow Clinical Commissioning Group as an additional Voting Board Member;
- (2) delete the paragraph on Sub Groups as these groups had not been in operation.

COUNCIL
28 SEPTEMBER 2017

INFORMATION REPORT - DECISIONS TAKEN
UNDER THE URGENCY PROCEDURE

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REPORT FOR: COUNCIL

Date of Meeting: 28 September 2017

Subject: **Information Report - Decisions taken under the Urgency Procedure**

Responsible Officer: Hugh Peart – Monitoring Officer

Exempt: No

Enclosures: Appendix A – Decisions taken as a matter of urgency

Section 1 – Summary

This report sets out details of decisions taken under the Urgency procedure rules by the Executive since the meeting of the Council on 23 February 2017.

FOR INFORMATION

Section 2 – Report

In accordance with Committee Procedure Rule 46.6 set out in Part 4 of the Council's Constitution, any Executive decisions taken as a matter of urgency are reported to the next available meeting of the Council.

Two decisions have been taken as a matter of urgency since the Council meeting held on 23 February 2017, details of which are set out in Appendix A.

In accordance with the Access to Information Procedure Rules (Rule 17) and paragraph 19 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the use of the Special Urgency procedure in relation to Executive decisions is to be reported quarterly to Council.

The Special Urgency procedure has not been used since the last ordinary Council.

Section 3 – Further Information

Where appropriate, Ward Councillors, outside organisations and interested parties were consulted on individual reports considered by Cabinet, the Leader and Portfolio Holders.

Where decisions were deemed urgent, the agreement of the Chair of the Overview and Scrutiny Committee was obtained that the decision would not be subject to the call-in procedure. The agreement of the Mayor was sought in relation to the Portfolio Holder decision.

Section 4 – Financial Implications

As per the report to Cabinet and the Portfolio Holder.

Section 5 - Contact Details and Background Papers

Contact:

Elaine McEachron, Democratic & Electoral Services Manager

Tel: 020 8424 1097

E-mail: Elaine.mceachron@harrow.gov.uk

Background Papers:

Council's Constitution/Portfolio Holder Decision report/Cabinet agenda

Decisions taken in accordance with the Urgency Procedure

The following urgent decision had been made since Council on 23 February 2017:

Subject	Decision Maker (Portfolio Holder/Leader/Cabinet)	Reason for Urgency
Delegation of function to allow Harrow Council to assist with the management of a dangerous structure	Portfolio Holder for Strategy, Partnerships and Devolution	After the devastating fire at Grenfell Tower, the Royal Borough of Kensington and Chelsea had asked other boroughs to urgently assist them. Harrow Council had been asked to assist with the assessment of the building and this work was urgent.
Assets Acquisition – Building a Better Harrow	Portfolio Holder for Business, Planning & Regeneration	As the Council needed to proceed with the acquisition of the lease prior to 1 September 2017

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By virtue of paragraph(s) 1 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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