

Independent Scrutineer - Response to Questions from Children and Young People Scrutiny Committee.

<p>1. What are the Terms of Reference of the Hereford Children’s Safeguarding Partnership?</p> <p>a. Have the terms of reference been revised in the light of the Ofsted judgement and to what purpose?</p>	<p>The Herefordshire Multi Agency Safeguarding Arrangements (MASA) were published in September 2019 and reviewed in January 2022. If fully implemented and effective these arrangements are in line with practice in other partnership areas. Some changes were made in response to issues identified both prior to Ofsted some of which were also identified by Ofsted. The safeguarding partners who have a ‘joint and equal’ responsibility are now engaged in discussion and action to make them operate more effectively. (see below)</p>
<p>2. Following the Ofsted judgement which states quite clearly that children are not adequately safeguarded what responsibility does HCSP bear in this failure?</p> <p>a. The Independent Scrutineer summarises that governance needs review – presumably some progress has been made in this direction. Please can you detail the governance changes which have been made to the Partnership as a result of this learning?</p> <p>b. How will the effectiveness of changes be monitored?</p>	<p>Partners have fully accepted the findings of Ofsted and are responding to those findings. Additional resources and expertise have been made available specifically in the Multi Agency Safeguarding Hub to improve the operation of the ‘front door’ which receives all contacts and reviews them to determine if they meet the threshold for intervention whether that be advice; early help or children’s social care support / intervention.</p> <p>Partners are also represented on the Improvement Board and are committed to work with Herefordshire Children’s Services to rectify the failings identified by Ofsted.</p> <p>a. The partnership will be undertaking a further review in the next 6 months of the effectiveness of current governance arrangements.</p> <p>b. There are three key areas where the partnership will monitor effectiveness. 1. The improvements being made in the MASH which are expected to reduce the number of contacts by improving the early help offer to ensure children and families receive the ‘right support at the right time’. It is also expected that the improvements will see a fall in the number of cases that become subject to statutory intervention. 2. The launch and implementation of the Neglect strategy (see below). 3. The launch and implementation of the Get Safe approach to supporting children and young people at risk of or being exploited with a specific reference to criminal exploitation. The improvement in the data now available to the</p>

	<p>partnership will enable the Strategic Partnership Board to agree for each work stream specific performance indicators through which progress can be measured.</p>
<p>3. One of the matters outstanding from the report in hand is (p75 para 10) the publication of a Serious Case Review and a Child Safe Guarding Practice Review to complete our understanding can these documents now be seen by Children’s Scrutiny?</p>	<p>Please find the documents attached to 18 July Agenda: Appendix 3 - Serious Case Review Louise Appendix 4 – Child Safeguarding Practice Review</p>
<p>4. Problems with attendance rates generally reflect the degree of effectiveness of committees – what steps have been taken to ensure that the Safeguarding Partnership has effective buy in from all participants?</p>	<p>Partners have re-affirmed their commitment to ensure that the HSCP operates effectively and have reviewed the representation on the HSCP working groups including emphasising the need for nominated colleagues to attend. Work is also being undertaken to review the number of sub groups and to take a more ‘task and finish’ approach to the work of the partnership.</p>
<p>5. 82 of the pack (p 6 of your report) salary costs for the HCSP are £281,110 can you justify this salary spend? Going forward what will be your KPI’s to demonstrate value for money? a) Is the Independent chair position a full time position? b) IF not - why does it cost so much?</p>	<p>The salary costs refer to the costs of the Business Unit Staff. The Unit supports 3 key partnerships – HSCP, Herefordshire Adults Safeguarding Board (HASP) and the Community Safety Partnership. The salary cost of £281,110 is staffing cost to support the 3 partnerships / boards. If fully staffed the unit consists of:</p> <p>The Business Unit core establishment is as follows:</p> <ul style="list-style-type: none"> • Partnership Manager • Deputy Manager Safeguarding Practice Development • Partnership Officer • Partnership Officer • Partnership Business Administration Co-ordinator • Partnership Support Officer (F/T) • Partnership Support Officer (P/T) <p>Partners are still considering the future structure and role of the Unit in the light of the findings of the 2021 review and recent events which mean that the HSCP in particular needs to improve the effectiveness of its work. a). The Independent Scrutineer is not a full time post and the current contract was let on the basis of 24 days per year with the facility to agree more time if required.</p>

	<p>It is let on the basis of a daily rate which in the case of the Children’s IS is £600 per day inclusive of any expenses. With the Hoople agency cost the day rate increases to £660 a day. The daily rate for the IS is in line with similar posts in other Safeguarding partnerships.</p> <p>b) The budget which is shown on p6 of the annual report includes the costs of the IS and the Independent Chair of the HASP. The remaining budget is to allow for commissioning independent authors for of local safeguarding reviews. CSPR / SAR and additional cost accrued by either of the chair or the IS if asked to do work beyond the core contract.</p>
<p>6. Following on from Q 5. Given the fact that ‘No Wrong Door’ is so highly praised (p89 of pack, p47 of report) and was clearly a big success story could some of the money paid out for the running cost of HCSP be reallocated to re-establish No Wrong Door?</p>	<p>‘No Wrong Door’ was funded by grant funding and partners were unable to find funding from their annual budgets to continue with the project at this time. All partners are facing significant demand on their budgets at this time.</p> <p>As indicated above the role and function of the Business Unit remains under review and the December 2021 review indicated a lack of capacity to meet the current role of the Unit. Funding could not therefore be reallocated to any other project in these circumstances.</p>
<p>7. Given that NEGLECT is recognised as one of the most damaging forms of abuse what progress has the ‘Neglect Strategic Group’ made towards the development of a dashboard of performance indicators – indeed do we now have a Neglect Strategy?</p> <p>a) Are you now in a position to disclose what training packages or resource has been identified to tackle childhood neglect in this county?</p>	<p>An interim neglect strategy was agreed and launched in December 2022. There is a neglect working group which is tasked with the job of agreeing a delivery plan including clear performance indicators by Easter 2023.</p> <p>a) The use of the graded care profile and the Solihull Approach form part of the current response plan. The development of a dash board of performance indicators and consideration of other training packages / resource will be considered as part of the delivery plan being completed by Easter 2023.</p>
<p>8. Data: (p81 pack /5 report) says 2% of children in the county would be on CPP which would mean 722 children (2% of 36,000 children) however p 89 in the pack/p13 report:</p>	<p>The IS new has been informed that the source of the data was https://understanding.herefordshire.gov.uk/growing-up/</p> <p>The current IS is similarly not able to reconcile the data in the report with the data provided to him in other fora. Performance indicators provided to the Improvement</p>

<p>says that 286 children were on CPP. How do you account for this discrepancy and how can we arrive at a point where data presented is clear and reliable?</p>	<p>Board indicate that in December 22 there were 270 children on a CPP. Using the population base of 36000 that would be a rate closer to .8%</p> <p>Improving the quality of performance data is an important element of the Improvement plan and there has been significant progress in respect of the accuracy of data. In the most recent feedback from the first Ofsted monitoring visit Ofsted notes that:</p> <p><i>“...Performance management systems have been strengthened with senior managers, leaders and partners provided with helpful performance reports, enabling more effective scrutiny and challenge arrangements in key internal and partnership-based forums...”</i></p>
<p>9. Why is adoption of children being used as a measure of success? <i>‘the conversation regarding adopting a proactive approach to the reunification of children from care is growing in momentum and the Centre for Family Safeguarding Practice is continuing to support local authorities with this important work by applying the Family Safeguarding vision, values and ethos to care planning practice. The workshops we run on reunification are creating opportunities for changes in practice and are enabling greater inclusion of all significant stakeholders, especially birth families, whilst ensuring that the child’s wishes and feelings remains central to planning’ (Hertfordshire Children’s Services reunification programme)</i></p> <p>Given that the object of children’s services is to offer early help to reduce risk of harm to children and enable families to stay together safely – why is a significantly higher number of adoptions in Herefordshire 24% than the national average</p>	<p>The role of the HSCP is to ensure there are effective arrangements to ensure the safeguarding and welfare of children and young people. The balance between different permanency arrangements would largely be a matter for Children’s services with the partnership looking for evidence that the service was always seeking to act in the best interests of the child and that every effort has been made to explore keeping children and families together.</p> <p>Service response: Adoption rates are not a measure of success per se although achieving permanence for a child at an early stage is considered a measure of success compared to not achieving permanence. The particular phraseology and presentation in the annual report was clumsy and unhelpful and was not picked up in the proof-reading.</p> <p>The 24% referred to was a reflection of the proportion of the children and young people who left our care in that year having left with a plan of permanence where adoption was that plan and isn’t related to the rate per 10,000 of children adopted. The proportion is influenced and changed if, for example, there were more children leaving our care as a result of Special Guardianship Orders being granted, or return home and for both of these there were lower numbers in the year reported. The proportion is also skewed in a year if relatively few children leave care with a</p>

<p>(10%) being used as a measure of good practice? It is surely the very opposite?</p> <p>The Corporate Parenting Report tells us that there is a 'resource identified to review all CLA who may be able to be re-unified with their parents and to drive the permanence agenda.'</p> <p>Is HCSP now in a position to reflect this clear change of focus and view the KPI on adoption numbers as low nos. = good?</p>	<p>permanence arrangement (rather than leaving care as a result of reaching their 18th birthday, for example)</p> <p>The percentage of children who ceased to be looked after in the year who were adopted for 2022-23 was 9.9%, slightly lower than most recently published England and statistical neighbour averages.</p>
<p>10. P89/13 of report: How many CLA are placed more than 20 miles away from where they used to live)</p> <p>a) What additional risk and cost does placing children more than 20 miles from their families' incur?</p> <p>b) How does this demonstrate best practice?</p>	<p>The council does not currently routinely report on the number of children in our care who live more than 20 miles away from where they live. As is the case with most local authorities, we report on is the number of children in our care who are placed inside/outside of Herefordshire.</p> <p>As of 15/06/2023, there are a 406 children and young people in our care. Of these 136 (33%) are placed out of Herefordshire.</p> <p>a) There are additional risks and costs associated with placing children at a distance outside of the County boundary. Being placed away from home at a distance can be traumatic for children who have already had a difficult upbringing and this can exacerbate children's anxiety about coming into care or being moved once in care. For vulnerable children this can increase the risk of them going missing and there are additional risks associated with trying to make their way back home given the distance, unfamiliar transport routes and heightened safeguarding risks, including exploitation, for example. Children can feel particularly isolated in an unfamiliar environment in terms of where they are living, the unfamiliar community and possible changes to their education and other services they have previously received. Separation from their friends and of course their family members and significant others, who they may not see as often once placed at a distance, are all factors that may make a child feel additionally anxious and upset.</p>

There is also the risk of a change in the professional network supporting the child. Whilst the allocated social worker will continue to be from Herefordshire, other professionals who may ordinarily know and support the child, particularly those from an Education and Health perspective often change when children are placed outside of the local jurisdiction.

Whilst the above are potential risks, sensitive planning and child focused practice should help to mitigate the risks. For example, the services of the Virtual School and the designated Child in Care Nurse and Paediatrician are specifically designed to work across County borders to ensure the exchange of information and continuity of service.

Some placements outside of the County are naturally more specialist, often residential placements with therapeutic specialisms including those with education on site. These are chosen when a child's complex needs cannot be met by accessing local provision as they have the necessary experience, expertise and resources to meet a particular child's complex needs. Competition for these more specialist placement resources is high as are their fees which are represent some of the most expensive placement options.

Independent Fostering Agency (IFA) placements are more expensive than placing a child with a Herefordshire foster carer. Whilst some IFA placements may provide care inside the County boundary this is not always guaranteed.

The Home Finding Team receive requests to identify suitable placements for children in care and the first consideration will be to identify a local placement, ideally with an in-house foster carer, that will meet the child's assessed needs. If there is no available in-house foster carer, or one that is not well matched to meet the child's assessed needs, the Home Finding Team will broaden their placement search to consider IFA and residential

	<p>care. Broadening the search increases the likelihood of having a placement at a distance/over 20 miles.</p> <p>The service has a sufficiency duty to identify a sufficient number and type of placement. Targeted work has been on-going with the All-Age Commissioning Service to review and refresh our Sufficiency Strategy, including an options appraisal and business case for children’s residential care as well as a Fostering Recruitment Strategy.</p> <p>b) When considering any placement the needs of the child are always carefully considered. At times a placement outside of Herefordshire will be preferred for instance when the child is placed with friends and family carers, is in a specialist placement or is closer to a community which is important to them.</p>
<p>11. Child on Child abuse</p> <p>From pack p 112/report p36 – This committee acknowledges that contextual safeguarding and advice offered by Herefordshire (using material from the University of Bedford) is offering an improved understanding of the contexts within which child on child sexual abuse and assault can proliferate. This approach advised by HC employs a range of preventative measures helping children to understand consent and improves space and credence to disclosure –</p> <p>However: the <u>Review of Sexual Violence govt report 2021</u> revealed that:</p> <p><i>‘it appears that school and college leaders are increasingly having to make difficult decision that guidance does not equip them to make. For example, some school and college leaders told us that they are unsure how to proceed when criminal investigations do</i></p>	<p>The current IS came into post (October 2022) after the publication of the thematic LSCPR on ‘peer on peer’ (now ‘child on child’) abuse in 2021. The IS has not yet had the opportunity to talk to partners about the impact of work done as part of the action plan proposed by that review. There is quite comprehensive guidance to schools issued by Herefordshire but again the IS not had the opportunity to consider how effective that guidance has been in practice. He will discuss this matter further with the HSCP.</p>

not lead to a prosecution or conviction. Schools and colleges should not be left to navigate these 'grey areas' without sufficient guidance.'

- b) What confidence does HCSP have that Herefordshire schools are performing better than the national picture and are navigating these 'grey areas' in a manner that safeguards the right to an effective education of victims and perpetrators or protects from inhuman and degrading treatment? (eg a victim having to remain in class with the perpetrator despite a credible allegation of sexual violence when a criminal prosecution is not being pursued?)
- c) Can you provide evidence please of the advice and guidance Herefordshire offer in respect of this matter and how will we demonstrate that the guidance is effective?
- d) Are we triangulating our evidence of good practice in consultation with WMRASAC who through the work of CHISVAS work directly with victims of sexual abuse?
- e) If we are not triangulating evidence with WMRASAC can HCSP commit to doing so at the earliest opportunity?
- f) HCSP recommends that: (p112 pack/36 report): 'the Safeguarding partnership should seek assurance that the views of young people involved in child on child abuse and their parents' and carers' inform practice.' Has this been done

<p>and where is the evidence that this has been done?</p> <p>g) By what means will the needs and understanding of this group be facilitated?</p>	
<p>12. IRO's and the dispute resolution process</p> <p>P93 pack/36 of report: As this scrutiny committee can attest the role of the IRO is 'to challenge delays in children's care plans', from the report it is clear that the dispute resolution process (DRP) has been foundering. The 18 formal disputes raised in the period April 2021 – March 2022 'demonstrate delays in assessment and care planning --- indicating that 'the LA was not progressing the child's right to permanency at pace'. It is reported that the DRP is improving –</p> <p>Can you now give us assurance that IRO challenge is being swiftly met and the need to issue DRP's is reducing?</p>	<p>The Dispute Resolution Protocol (DRP) used by Independent Reviewing Officers has been reviewed and relaunched and the renewed system is more effective. Whilst progress and improvement of practice is evident, further improvement is required.</p> <p>The Dispute Resolution Protocol (DRP) can be used for a variety of reasons and it would not be beneficial to solely focus on the number of DRPs raised. As one of the Measure that Matters, the council has included the number and % of concerns raised and were resolved at stage one of the Dispute Resolution Protocol. Based on the most recent data available, 2 concerns were raised which were both resolved at stage 1 (100%).</p>
<p>13. The Solihull Approach</p> <p>The Early Intervention Foundation only scores the approach/programme at Level 2 ie '<i>preliminary evidence of short term +ve impact from 1 rigorous evaluation, but an assumption of causal impact cannot yet be drawn</i>'.</p> <p>Has HCSP a view as to whether use of this tool effectively safeguards children and whether there are other programmes out there which might, more effectively embed long term behaviour change?</p> <p>a) In terms of contracts are we committed to use of the programme for a fixed period?</p> <p>What other programmes of early help are being considered?</p>	<p>This is correct. The EIF does rate it at L2 which basically means there has not yet been a detailed evaluation which establishes a causal link between the programme and outcomes for children. However, level 2 means that there is some evidence that the programme is effective.</p> <p>The DfE adviser Gladys Rhodes White has been leading consultation with the community including 'World Café' events to develop a more robust early help offer.</p> <p>This links with the work being led by Matt Pearce the Director of Public health and community well-being to develop a new Early Help and Intervention Strategy.</p> <p>Developing a more effective early help offer is a key ambition of the Herefordshire Children's Improvement Plan which is monitored through the Improvement Board.</p>

<p>14. Might the Children's Safeguarding Partnership consider recommending that support be commissioned for families (eg through ICON) to assist interventions with parents of babies, (P38 of review).</p>	<p>The IS will explore this matter with partners following the completion of the work on governance</p>
<p>15. P33 of report: "There is a lack of engagement by CSC [Children's Social Care] with GPs including invites to Child Protection Conferences (CPCs) and Child in Need (CIN) threshold meetings [P33 of review]" Can you please give evidence that Children's Social Care are now engaging in a more proactive manner with GP's? particularly in relation to Child Protection Conferences.</p>	<p>There is a range of work now being undertaken to improve partners' engagement with key processes including conferences of all type. Additional health resource has been placed within the MASH. Data on the participation of agencies in these processes will be included in partnership data set which is currently under development.</p>