

# Minutes of the meeting of Children and Young People Scrutiny Committee held in Herefordshire Council Offices, Plough Lane, Hereford, HR4 0LE on Tuesday 26 September 2023 at 2.00 pm

## Board members present in person, voting:

Councillor Frank Cornthwaite  
Councillor Clare Davies  
Councillor Toni Fagan  
(Chairperson)  
Councillor Robert Highfield  
Councillor Jim Kenyon  
Councillor Ben Proctor

Sam Pratley (Co-optee)                      Representative of the Diocese of Hereford

## Board members in attendance remotely, non-voting:

Councillor Liz Harvey (Vice Chair)

## Cabinet member:

Councillor Ivan Powell

*Note: Board members in attendance remotely, e.g. through video conference facilities, may not vote on any decisions taken.*

## Others in attendance:

Hannah Bannister-White	Operational Lead Public Health Nursing	Wye Valley NHS Trust
Simon Cann	Democratic Services Officer	Herefordshire Council
Kevin Crompton	Independent Scrutineer	Herefordshire Council
Liz Farr	Service Director, Education, Skills and Learning	Herefordshire Council
Darryl Freeman	Corporate Director - Children & Young People	Herefordshire Council
Victoria Gibbs	Service Director - Early Help, Quality Assurance and Prevention	Herefordshire Council
Gail Hancock	Service Director Improvement	Herefordshire Council
Matt Pearce	Director of Public Health	Public Health
Nicola Turvey	Early help service manager	Herefordshire Council
Superintendent Helen Wain	West Mercia Police	West Mercia Police
Danial Webb	Statutory Scrutiny Officer	Herefordshire Council

## Others in attendance remotely:

Julia Stephens	NHS 0-19 Public Health Nursing Service	NHS
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**152. APOLOGIES FOR ABSENCE**

Apologies were received from Councillor Rob Williams.

**153. NAMED SUBSTITUTES**

Councillor Frank Cornthwaite substituted for Councillor Rob Williams.

**154. DECLARATIONS OF INTEREST**

There were no declarations of interest

**155. MINUTES**

It was noted that councillor attendance records for the meeting were not accurate and needed to be amended.

Including noted amendments, the minutes of the meeting held on 18 July 2023 were agreed as a correct record and signed by the Chairperson.

**156. QUESTIONS FROM MEMBERS OF THE PUBLIC**

Four supplementary questions had been submitted to the committee further to the original questions published as part of the agenda pack. Three of these were responded to verbally by the Cabinet Member for Children and Young People and a written response was promised for the question that couldn't be answered on the day.

<b>Questioner:</b>	Eddy Parkinson
<b>Scrutiny Meeting:</b>	September 2023
<b>Supplementary Question:</b>	
I draw attention to the last sentence of the response. 'Everyone with significant contact with children'. I ask the council to define 'significant' in relation to contact with children. Is this based on hours? Is there a policy the council uses? Thank you	
<b>Response: Delivered by Councillor Ivan Powell during the meeting.</b>	
Councillor Powell thanked Mr Parkinson for his original and supplementary questions and stated:  "Significant in the context of the question refers to those members of staff who would have direct face-to-face contact with children. Many children's services colleagues do have indirect contact with families, where an enhanced DBS (disclosure and barring service) check may not be required. The numbers of hours worked is not a factor in this process and the requirement for an enhanced DBS is written into all job descriptions for members of staff who are expected to have direct face-to-face contact with children."	

<b>Questioner:</b>	Rachel Gallagher
<b>Scrutiny Meeting:</b>	September 2023
<b>Supplementary Question:</b>	
<p>"On the 18th August 2023, CJ, an information governance officer for Herefordshire Council responded to a Freedom of Information request regarding a Reunification Policy. She confirmed that there is NO policy currently in place and no timescales for when it will be completed.</p> <p>Without a policy, procedures lack clarity and consistency. Without this policy, parents do not know what's expected of them, social workers don't know when to use the procedure and no one knows why it should be implemented and when. Therefore, children are not being returned to their parents and remain in care.</p> <p>With no policy in place to ensure this procedure is used, even when recommended by independent social workers, how are you reducing the number of children in care?"</p>	
<b>Response: Delivered by Councillor Ivan Powell during the meeting.</b>	
<p>Councillor Powell thanked Ms Gallagher for her original and supplementary questions and stated:</p> <p>"In response to the original question we referenced our reunification practice guidance and that forms part of the overall permanence policy for the council. The freedom of information request referred specifically to the reunification policy, we acknowledge that we should have referred specifically to that reunification practice guidance, we would like to apologise for any misunderstanding that many have been caused by that.</p> <p>Children in care have an independent review officer, who chairs children looked after reviews, where the care plan, including the plan for permanency is considered. There is an established permanence panel, which ensures that there is an appropriate permanence plan in place and this includes children who are potentially suited to a plan of reunification. There is also a permanency champion in post, who has a dedicated team of social workers, specifically focusing on the discharging of care orders and supporting children to go home to the care of their parents and or family members where this is in their best interest and is in line with their care plan."</p>	

<b>Questioner:</b>	Hannah Currie
<b>Scrutiny Meeting:</b>	September 2023
<b>Supplementary Question:</b>	
<p>To quote from your response to my original public question:</p> <p style="padding-left: 40px;">"An Independent Visitor is a volunteer who befriends and visits a child or young person living in the care of the Local Authority. Independent Visitors can provide support, advice and guidance as well as positively engaging with the child or young person in activities."</p> <p>Therefore, it is fair to assume that Independent Visitors are very beneficial to children and young people in care. Arguably, they have a safeguarding role as they are</p>	

independent of foster parents etc. It is disappointing to hear that of the 396 children in care (at 18/9/23), 372 (94%) do not have an Independent Visitor.

The council has responsibilities as a Corporate Parent.

How will you be recruiting for more Independent Visitors and by when will all children and young people in its care who are mature enough (usually from age 5) be offered and encouraged to have an Independent Visitor?

**Response:**

Written response to follow.

<b>Questioner:</b>	Ms Reid, Herefordshire
<b>Scrutiny Meeting:</b>	September 2023

**Supplementary Question:**

The Team around the Family (TAF) seems a positive approach and I welcome the roll out of Family Group Conferences (FGCs). I suggest you do “market research” on them fairly soon.

Prioritising use of FGCs (eg children “in need”) is sensible.

From the website of the council’s improvement-partner, Leeds City Council:

“Referrals for FGCs are mainly made through the child or young person’s social worker or Early Help Lead Worker.”

**When will the council extend the use of FGCs to children (and families) supported by Early Help?**

Also from Leeds’s website:

“Each FGC is coordinated by an accredited FGC coordinator, who is independent from the social work service or other services. The coordinator is neutral, with no case management or decision making responsibilities.

I hope the council’s FGC Coordinators are truly independent?

**Response: Delivered by Councillor Ivan Powell during the meeting.**

Councillor Powell thanked Ms Reid for her original and supplementary questions and stated:

“We do not yet, as a council, have a firm timeline to extend the use of family group conferences to children and families supported by early help. Our priority as we expand our service at this stage, is to focus on children and families on the edge of care and for whom reunification is a possibility. We’ve spoken to our partners in Leeds and they have explained it did take them a number of years to get to the position that they are now in and that is where family group conferences are being offered as widely as they are in

Leeds. We are working closely with them to learn from their experience and obviously to try and speed up our expansion efforts. Our family group conference coordinators are independent of the case management, as they are in Leeds, and that future service redesign - expected early next year - will further reinforce that position.”

**157. QUESTIONS FROM MEMBERS OF THE COUNCIL**

There were no questions received from Councillors.

**158. EARLY HELP**

The committee took the report as read and the debate was opened up for questions.

The committee asked how the council and partners engaged with children and families to determine need and demand for services. It was asked how well the partnership knew the families, their strengths and the pattern of service use, and how this knowledge determined which services were being provided.

The Director of Children’s Services explained that allocation of services was based on historical data primarily taken from the JSNA (Joint Strategic Needs Assessment) and that the JSNA was being updated by colleagues in public health in the next six months.

It was explained that the JSNA was a data set that was refreshed periodically, and informed by service user feedback and by demographics and information obtained from schools and voluntary/community sectors. Additional information was also obtained from the census data.

It was noted that a lot of early help and prevention services were delivered through school hubs and Talk Community hubs.

The Head of Services for Early Help stated that families were identified by those professionals or people who knew or worked with the family and that advice and signposting could be given depending on the level of need. The CHAT (Children’s Health and Advice Team) and the helpline it operates could signpost for early help services before the need for targeted services.

There was a windscreen of needs from levels one to four. Level one was safeguarding, level four was where universal services were required. Levels two and three were where the CHAT helpline, school, health and police services came in.

The Head of Services for Early Help explained that where needs were more complex families could be offered an early help assessment, which was an assessment of the needs of the whole family including all children and adults. This was done with consent and the professional would draw up a plan of support to address any needs. The early help assessment was a working document that was regularly updated and reviewed. If additional needs had been identified, targeted support would go into the family home. Professionals would also work with other adults who have a role in the life of the child, such as grandparents.

Work was carried out with children to understand their lived experience, which could highlight further needs.

The committee noted that needs were changing rapidly due to the fallout from Covid and the cost of living crisis. The committee hoped a revised JSNA might draw attention to other needs, but questioned whether services would be able to respond to and adapt to changes in the community.

The Head of Service for Early Help explained that early help and the wider partnership was constantly evolving and developing depending on needs. The CHAT helpline had identified an increase in calls about mental health and anxiety, and staff were being trained in the 'fearless parenting' programme, which was aimed at parents with children who suffer with anxiety. The CHAT was constantly updating its knowledge about what services were available, including online, telephone and specialist services (accessed through GPs or CAMHS).

The committee enquired whether information obtained by school systems such as 'my concerns' was being used as a data source for targeting activity

The Director for Education, Learning and Skills explained that schools were required to keep records of concerns and build pictures via electronic systems such as 'my concerns' or traditional paper records, and this did often lead to referrals being made. Accessing the data directly would be difficult due to confidentiality issues, but schools did report in on patterns and trends, which feeds into the safeguarding audit.

The committee stated that the relationship with schools was an important one and noted the need to discuss a recommendation on making sure trends and patterns from school data were being used as effectively as possible.

The committee suggested that some families were scared to seek help from the council for fear of their children being removed.

A broad set of referral numbers from each area of the partnership was requested, along with figures for care leavers and what measures were in place to support them and their children.

The committee suggested it would be useful to share good practice with all schools especially in relation to pastoral care.

The Director of Children Services agreed that more family support officers would be good, but disagreed about families being scared of seeking help from the council. The Director did accept that some families didn't trust the council and that it needed to work on its image.

The Director stated that a report on referrals would form part of the work being done with safeguarding partners and that care leaver support was something they were hoping to discuss at a later stage.

The Head of Service for Early Help pointed out that there had been a lot of good news stories about the council and early help coming through from families. Early help was relationship based and building trust was key, they were aiming to promote positive messages about early help every month and would like to get families on camera at some stage. Early help had been deemed as good according to Ofsted reports.

The Head of Service for Early Help, provided a rough breakdown of referral sources, explain that 50% came from schools with the next biggest source being families stepping out from social care and no longer a safeguarding need. Health colleagues, health visitors, school nurses and midwives accounted for most of the remaining referral figures.

The Head of Service for Early Help discussed a programme called 'first steps', this was a preventative universal programme open to all parents 21 and younger. The programme had had a positive take up and offered parents support with underlying needs such as finance, housing, mental health and preparation for parenthood.

The committee enquired about how many professionals were assigned when dealing with families and whether each sibling was provided with an opportunity to speak privately away from other siblings and family members.

The Head of Service explained that the lived experience of every child was captured by speaking to children separately. There were lots of different ways to capture the voice of the child, but individual voices were crucial to understanding lived experience. The number of practitioners allocated would vary from family to family and individual circumstances.

The committee sought clarity on the definition of early help as detailed in the report.

The Service Director Early Help, QA and Prevention explained that the definitions fell out of working together to safeguard children and reflected the continuum. Early help was about providing support at the point of presentation, but also enabling families to be stepped down or across into targeted universal services and allowing them to access wraparound services within their communities.

The committee enquired that if there was a spectrum of early help, whether simply labelling it early help was a good way of describing it so that the public understood what it was. The committee asked how best to get across the differences regarding the sort of help that could be accessed before social care got involved as professionals.

The Director of Children's Services suggested that there was a danger of over engineering the terminology, it could be called early help, early intervention or early prevention, but families generally knew what they needed.

The committee enquired about availability of pre-natal services.

A representative of the Wye Valley NHS Trust explained that colleagues in midwifery provided pre-natal classes and offered mums to be anti-natal contact, one-to-one holistic assessments in the home and support for parents and family with any issues.

The representative for West Mercia Police explained that they had a number of officers dedicated to early help, including a prevention assessment officer and two intervention and prevention officers, one being located in the MASH with social care staff.

Initially these roles had focused on children already showing signs of trauma and on the fringes of criminality, but they were now moving focus from tertiary to secondary prevention, focusing on children who were exposed to negative situations and removing the likelihood of them becoming involved in criminality.

Using the police data set, a prevention assessment officer looked at every child recorded as an involved party of crime and reviewed every child under fifteen subjected to a stop and search. This would not always result in a referral, but when it did, support would include home visits with the family, ongoing engagement with parents, school engagement with education professionals and potential referrals to mental health programmes such as steer clear (knife crime) and strong young minds (anger management). Working with the family and the child, the interventional prevention officers assessed what would be the most suitable means of supporting and delivering early help. The work was documented on a problem solving plan, which sets out how to improve and track the situation with families. Generally there had been a positive picture from this.

The committee asked how the partnership arranged things strategically, and how would different partners make changes in relation to the revised JSNA.

The Director of Children's Services explained that public health were working across the partnership to develop the JSNA data set and how to use that going forward. Leadership teams were involved with this and there were parallel pieces of work being done, Public health was very keen to engage with different partners and information was being used to inform conversations about what the service should look like in two to three years' time.

The committee acknowledged the work being done with teenagers on the fringes of crime, but enquired about those teenagers who simply needed support and help in everyday areas. What lessons had been learned from the funding issues that led to closure of 'no wrong door' and what was being done to provide somewhere to go or some way of connecting with advice providers that maintained privacy and gave teenagers a safe space.

The representative for NHS 0-19 Public Health Nursing Service explained that teenage public health nursing had a school nursing service embedded in it. Every high school had the opportunity to access a school nurse, who delivered drop-in surgeries for young people every week. These were confidential and covered sexual health, anxiety, smoking, drink and drugs. The school nurse would provide teenagers with info, advice, signposting and signposting to the sexual health clinic, in a confidential space to have discussions.

The service was looking to enhance and develop its offer to teenagers, with workshops within schools offering support around transitional times and to children missing from school.

The committee asked if there were any lessons learned from the 'no wrong door' situation.

The Director of Children's Services stated that the service had learned a lot about keeping an eye on contracts and commissioning. Youth services were no longer a statutory service, although there were fantastic services being provided by community and community volunteer groups. Regrettably, given the economic climate, it was unlikely there would be a return to commissioning or providing youth services.

The committee asked whether it might be possible to supply a small amount of financial support for voluntary and community groups and reach out to the city and market town councils to discuss what could be done together.

The Director stated that funding was a political decision, but there was a role for town and parish councils to support local initiatives to support youth workers.

The committee enquired as to whether information from the children and young people survey was being shared and fed into how the services were being developed and how partners were responding.

The Director of Public Health stated that they would be combining the historic responses with the most recent set to create longitudinal data. The Children and Young People Partnership had been up and running again for 12 months and was the forum that would have oversight of that data. The data would be used to inform strategic plans.



The health and wellbeing strategy was prioritising 'best start in life' and mental wellbeing and would go through a process of starting with evidence, implementing the intervention and evaluating the outcome. The cycle of change would then be repeated as required.

The committee enquired whether the threshold documents were being used consistently across the partnership.

The Director of Children's Services gave an assurance that the threshold documents were solid (as viewed by Ofsted), but everything hinged on people understanding and applying the threshold in a consistent manner. The safeguarding partnership owns the document and more work needed to be done on making sure that people in voluntary groups, schools and nurseries knew and understood how to access services and how to have a conversation with people concerned about children.

The committee asked about availability of children's theatre as it was a useful platform for allowing children to express themselves by pretending to be somebody else.

The Director of Public Health pointed out that Creative Health Champions could consider how to embed arts and culture into health and wellbeing and there could be some opportunities to link things in with the community paradigm.

The committee asked about the process for dealing with and who the point of contact was for seeking help in relation to cyber bullying inside and outside of school.

The Director for Education, Learning and Skills explained that all schools have anti-bullying/behaviour policies and that within those policies there were processes about how to report bullying concerns. The policies contained advice on cyber bullying issues and Herefordshire schools were proactive in dealing with cases. Schools took their personal development curriculum offers very seriously.

The committee asked about how early help and family hubs in Herefordshire would look.

The Director of Children's Services noted that Herefordshire Council was not part of the government pilot on family hubs, but that it would be possible to discuss the general principles around them.

The Director for Education, Learning and Skills explained engaging with early help and face-to-face meetings with primary, secondary school heads, and leaders and governors' webinars, presented good opportunities for the local authority to feed in on a variety of agenda items including the early help and prevention offer.

There was a growing offer of early help and prevention in a cluster-based community paradigm model. Visits to larger market town schools had revealed a pleasingly rich early help and prevention offer, which was well established from community and voluntary organisations working within schools. Schools also had available community space around the hub and spoke model, which could potentially be developed further.

The committee asked how involved partners were with the hubs.

The Director for Education, Learning and Skills pointed out that a number of organisations already contributed and that this could be developed further with partner organisations.

The committee asked what a parent could expect to experience from the hubs.

The Director for Education, Learning and Skills explained that hubs could coordinate voluntary work that happened in schools and bring together a variety of services. The school essentially acted as a host, meeting point and enabler for those services to coordinate around families and this included midwifery and health services running groups for families and for children. The hubs were trying to provide an environment and collate groups where services could coalesce and come together, including pre and after school clubs.

The committee asked if cyber bullying could feed into the hub.

The Director of Children's Services confirmed that would be an aspiration and pointed out that an advantage of running such groups through schools was the strong parent input it drew in.

The committee discussed four key ways of remedying cyber bullying: that the source be identified and stopped, the victim supported so that they didn't suffer long-term harm, the person bullying being counselled and the message being spread that bullying was unacceptable. The committee asked if these steps were currently being implemented.

The Director for Education, Learning and Skills explained that schools had bespoke anti-bullying policies. These typically contained key processes and guidance on how the schools approached the issue, including investigation, support and applying the process as a whole. Schools were expected to take bullying very seriously and staff were highly skilled at supporting children and dealing with bullying in all its forms. Many schools also participated in the national anti-bullying initiative about the golden rules.

The Independent Scrutineer explained that appropriate processes were in place to deal with the level of concern. This would start with the school and escalate to a safeguarding lead at the school who would have contacts into the wider system, such as MASH, where there was a police contact. If the bullying was very serious attempts would be made to locate the source depending on the information available.

The safeguarding board in November would be seeking assurance that children would be supported and bullying dealt with in a way as described.

The Director of Public Health explained there was an aspiration to develop a healthy school standard or a sort of tool kit for schools that would enable them to identify and tackle issues they thought were important, which could include bullying.

The committee enquired about whether the authority had got the balance right for commissioning of other services and whether there was enough funding for commissioned partners.

The Head of Service for Early Help explained that organisations were commissioned to provide early help, but the all ages commissioning service led on that over a number of services across the partnership. Information on that could be provided at a later date.

The Cabinet Member for Children and Young People provided a note of caution into well-intended, but potentially restrictive and damaging council monitoring of voluntary organisations in the early help sector. A degree of capturing and counting was fine, but there needed to be a degree of trust in the leadership of other organisations that they would just get on with what they were doing.

The committee agreed with the cabinet member, but enquired how, if you didn't count anything at all, could any gaps be identified. What was the role of the local authority and was it the role of the authority to make sure that there was some early help around.

The Cabinet Member for Children and Young People explained that gaps would be identified through the Children and Young People Partnership Board in the area of work that sits below statutory prevention. There was a need for data counting and capture, but when you reached a level where that became difficult it would be advisable to step back and put trust in the voluntary community sectors and schools.

The committee discussed setting up two task and finish groups, one around family support officers and the other around pastoral care.

The Statutory Scrutiny Officer warned against setting up two such groups without proper preparation and discussion about what the committee would want from them.

The Director of Children's Services stated that a task and finish group on family support officers would not have significant impact on how many there would be next year, however the committee might want to consider a task and finish around the broader subject of recruitment and retention, which would not just be limited to family support work.

The Director for Education, Learning and Skills pointed out that pastoral care responsibility sat with the governing body of the school and the trustees in the case of a trust.

The Statutory Scrutiny Officer noted that it had become apparent that the committee might benefit from an initial briefing on what the local authority's powers were in relation to schools. It was a rapidly moving area where council powers were being drained and would continue to be drained. There was a very different environment from just five or six years ago.

The Scrutiny Officer suggested an initial briefing about those powers might equip and inform the committee in terms of recommendations it made going forward.

The committee agreed to hold back on any task and finish group activity until proposed topics had been discussed in more depth and relevant briefings had been held.

The committee unanimously agreed the following recommendations:

**RESOLVED:**

**That:**

- a) **The committee notes the report, and**
- b) **the council will make full use of school information collection to plan and deliver early help support, and**
- c) **the JSNA will be brought to scrutiny to understand its role in supporting service delivery, and**
- d) **a briefing around the schools education powers will be arranged and delivered for committee members.**

**159. FAMILIES' COMMISSION REPORT UPDATE**

The Director of Children's Services gave an introduction and overview of the report and explained that it had posed seven questions for consideration some directed at the council and some at the partnership.

It had been agreed with the commission that there would not be a rush to give glib, shallow responses to these questions and that adequate time would be taken to stop and reflect.

The Director sought the committee's agreement to provide a further update in three months' time on the progress and impact of the steps taken since the publication of the commission's report. The Director stressed that this would not be a paper exercise for the council and its partners. Long term responses and plans had been developed and a direction had been taken to further engage with some of the families who had met and spoken with the commission.

The committee asked the Independent Scrutineer for the main points that were raised by the commission and what progress had been made.

The Independent Scrutineer started by thanking the families involved for their contributions.

The Independent Scrutineer noted the areas of overlap involved in responding to the commission and the overall improvement journey that children's services was on.

It was explained that partner engagement with restorative practice would help meet some of the recommendations of the commission and that a trauma informed awareness training package would be rolled out across the partnership over the coming months.

It was stated that focusing on the way the partnership worked, the culture and the way it interacted with the families who were involved with the social care system, would be key to success in the future, but that all of this would take time to get right.

The partnership would need to find ways in the future of ensuring it got direct feedback from families going through the system and that the restorative approach being rolled out should help that.

The committee enquired as to what the restorative approach would look like, what differences families who had used the service before would notice and whether the 'Think Family' approach would be embraced.

The Independent Scrutineer explained that the new approach would focus on 'working with and not doing to' by seeking joint solutions to issues and that children would stay with their families whenever it was safe and possible for them to do so

The Director of Children's Services pointed out that restorative/relational practice was a model of practice that had been around for many years and that if the committee wished it would be possible, with joint input from the Leeds improvement partner, to carry out a workshop on the subject.

The Director acknowledged that one of the key criticism of children services had been that families felt they had been 'done to and not worked with'. Some families had come for help and support and felt that the service hadn't provided that and had been heavy-handed or escalated things in an unhelpful way.

The service had tried to listen to that and the commission had been a staging post. The restorative practice was like two axis on a chart, one being high support and one being high challenge, with an aim to having honest conversations that help raise concerns, but also focusing on strengths and how families could be encouraged to build on these in the best interest of the children.

In the past interventions had been characterised by high challenge and low support, which had been punitive and led to criticism

The Director stated it was about shifting behaviour, language, the way the service worked with families and colleagues and building good relations over a period of time through honest conversations and dialogue. This was something that hadn't occurred in the past and Leeds was helping that process of change.

It was explained that:

Restorative practice was about putting things right, saying sorry and discussing how to make amends and get things right

Relational practice was about building good relations between practitioners and families, practitioners and practitioners and practitioners across a range of agencies.

The Director stated that this didn't do the subject justice and that he would like to make a presentation to the committee at a later date with the improvement partner.

**ACTION: Director of Children's Services and improvement partner to deliver workshop on restorative/relational practice.**

The committee raised concerns that there was still a lot of jargon involved in the communications. At the heart of what needed to be done was focusing on building relationships, responding to questions and carrying out and completing commitments.

The Director explained that the update was for committee purposes and that a different communication was going out to families.

The committee discussed the issue of co-production. It was asked if and how the service was capturing feedback from families to move things forward, and whether there was a strategy or plan to benchmark and monitor progress.

The committee also enquired as to whether the complaints system needed to be improved and if there was a system that could work and be applied across the partnership.

The Director explained that there had been a lot of additional conversations with families who cooperated with the commission. The complaints process was one of the seven questions that the commission asked it to consider.

Structural and operational differences in the NHS, West Mercia Police and the council would make it hard to introduce or implement a single standardised complaints process. However, the partnership was working hard to promote clear signposting of support for families through the partnership website. Sampling around families was also being carried out to establish whether people found the complaints processes very helpful or accessible, this information could be used for analysis and the creation of a forum where the learning from that sampling could be applied.

The committee asked where would a family experiencing issues with social care go to presently to raise those issues.

The Director said most families would use the statutory complaints procedure, which was a very closely and tightly monitored system and process.

It was explained that as recently as last year not everything had been going through the statutory complaints process and complaints weren't being responded to in a robust way. Training was now being given to frontline managers, so that the service would get better at responding to complaints.

Other routes used by families included: directly contacting the Director, the cabinet member or local ward councillor.

The committee asked what work was being done to encourage families to raise complaints.

The Director pointed out that when the service starts to work with families it lets them know about complaints and compliments procedures, which wasn't the case previously.

Also if a child is on a protection plan or is looked after then an independent review officer will remind families about the complaints procedure that is available.

The process is detailed online and through leaflets available at different points in the process. Although not all families are able to do so, engaging the complaints process via the website was a common route.

The committee enquired as to whether there had been an increase in complaints.

The Director confirmed there had been an increase in stage one and two complaints within the process, which was to be expected following the promotion of the complaints process and the recent Ofsted inspection. The Director felt that not enough complaints were being resolved at stage one, but that work was being done to resolve this.

The committee asked if local ward councillors were contacted following an initial complaint to the service from one of their constituents, so that they could act as a go-between.

The Director explained that the service welcomed the constructive engagement of ward councillors, but that confidentiality prevented them from telling councillors about who the service was working with. Some families might not want their ward councillor involved and some councillors might not have the capacity to be involved in such situations.

The committee noted that there was a heavy emphasis on listening to the families and taking a family-centred approach to the complaints process. It was asked whether, for the sake of balance, the case officers and social workers involved in cases were approached for their opinions and input.

The Independent Scrutineer explained that from experience, the families speaking to the commission were very open and hadn't denied that there were circumstances in their lives that had required them to seek help around their children.

It was pointed out that the complaints the families had had with the process weren't about the decisions that were made, but rather the way they had been treated during the journey.

The Independent Scrutineer stressed that moving forward it was about doing what is necessary, but in an empathetic and respectful manner.

The committee acknowledged this, but asked if, when a complaint from a family came in, whether the social worker on the case was consulted with and asked for input.

The Director explained that at stage one the investigating manager and team manager would look at case records, speak to the social worker and speak with the school depending on the nature of the complaint.

The Director added that stage one complaints would either be upheld, partially upheld or not upheld. Often at this stage families would be content that somebody had listened and looked at the complaint, others would not and this would lead to stage two or above. The process was not entirely different to complaining in any other arena of life.

The Independent Scrutineer pointed out that there was also the safeguard after the statutory procedure, whereby there was a right to a stage three independent review of the complaint.

The Director and Scrutineer explained that a historical failing in the service had been that complaints went through the council's rather than the statutory process, with the council process not allowing for an independent review at the end of it. Some families were not aware of the statutory process.

When applied properly the complaints procedure could be effective and independent reviews were extremely helpful.

The committee noted that there had been a significant change in the last year, but wondered what needed to be done to change the culture.

The Service Director for Improvement in Children Services echoed previous comments about the historic lack of respect and empathy when dealing with certain cases and added that there had been a judgemental element in the manner in which families had been treated

It wasn't just about what had happened, but how it happened. Improving culture would involve listening to and respecting people and valuing the contribution that they could make. The Service Director noted that all families had been very brave in contributing to the process and had helped to reshape and improve the service.

The committee asked about what was being done to help parents being abused by their children and what support was in place for young carers.

The Independent Scrutineer explained that there had not been any substantial work in relation to young carers yet, but it was on the list of questions.

The committee noted that regarding culture within the partnership, there had been a feeling by some partners that the families commission was very one sided and that there was another side to the story, but what emerged was a picture of a flawed culture that had developed over time. The committee asked if the Independent Scrutineer was seeing a change within other partners in terms of the need to address the culture towards families that are asking for help.

The Independent Scrutineer explained that in order to get line of sight, it had been necessary to put in place a programme of multi-agency audits to pick up some of the aspects of how meetings were being held. Reviews about the conferences had been mixed and there were potentially still a lot of people who needed to change how they were behaving - that was a challenge for Herefordshire.

The plan was to change culture through training, development and the rollout of the restorative approach. The role of the IRO (Independent Review Officer) would be to

assert control over meetings. The culture was still, in part, problematic and it would take time to change.

The committee noted that the speed of change was hard to hear as they would like the change to occur swiftly.

The Independent Scrutineer explained that there was plenty of research on improvement that gave a one to three year window for moving from inadequate to the better areas, change always took time. The project with Leeds was a major advance forward. Leeds had helped other authorities and it was recognised that the big thing Leeds had done was to get the partnership right.

The committee asked if the Scrutineer felt that the right messaging was coming from the top.

The Independent Scrutineer stated that he believed the intentions were good, but that the partnership still struggled with going from intention to practice and there were clear priorities for the next year to shift the position from a critical one to a more positive position.

The committee noted that continuity of staff was vitally important and that there was a need for more family support workers. Poor practice would continue until a stable workforce was in place - with more family support workers to support social workers.

The Independent Scrutineer agreed that establishing a workforce with the right culture was probably the single most important building block of a secure and effective social care system, but pointed out that Herefordshire Council was not alone in struggling with the difficult recruitment market.

The committee asked if the 'think family' approach was being adopted across the partnership, as there hadn't been much from the partners on this matter.

The Independent Scrutineer felt that this would derive from the restorative programme, which engaged all partners and not just social workers. The think family approach needed to be at work with all partners in initial child protection conferences, in review conferences, in strategy discussions and assessments of the MASH on which pathways were appropriate for the family.

It was stated that the Safeguarding Children Partnership Annual Report would be available by the next meeting and that partners would be attending when the committee looked at the report.

The committee asked whether all the Herefordshire families within the service now had access to social workers on a face-to-face basis

The Independent Scrutineer suggested that that was a question for the Director, but felt the situation was moving in the right direction, although the biggest issue with social workers continued to be turnover and continuity.

The committee voted unanimously in favour of the following recommendation:

**RESOLVED:**

**That: The committee noted the report.**



**160. WORK PROGRAMME**

The committee discussed the work programme and noted that:

The SEND Action Plan item would be rescheduled for the November meeting.

The Statutory Scrutiny Officer was preparing work around CAMHS and was aiming to put in a briefing before the November meeting.

The Director for Education, Learning and Skills and the Statutory Scrutiny Officer were planning to hold a briefing on the education powers and duties of the local authority, to help the committee to better understand how it might shape scrutiny around education going forward - a tentative date of 19 October was proposed for this briefing.

The anticipated Safeguarding Children Partnership Annual Report, was not time sensitive and could be scrutinised by the committee early in the New Year, most likely in the January 2024 meeting.

**161. DATE OF THE NEXT MEETING**

Date of next meeting: 14 November 2023 2:00pm

The meeting ended at Time Not Specified

**Chairperson**