Herefordshire Council

Minutes of the meeting of Children and Young People Scrutiny Committee held at Conference Room 1 - Herefordshire Council, Plough Lane Offices, Hereford, HR4 0LE on Tuesday 12 May 2026 at 2.00 pm

Present: **Councillor Toni Fagan (chairperson)**
Councillor Ben Proctor (vice-chairperson)

Councillors: Frank Cornthwaite, Dave Davies, Robert Highfield and David Hitchiner

In attendance: **Leanne Lowe (Detective Superintendent West Mercia Police), Natalie Solomon (Associate Director for Nursing, Quality and Safeguarding NHS)**

Officers: **Simon Cann (Democratic Services Officer), Rachel Gillott (Service Director, Early Help, CIN and Safeguarding), Donna Thornton (Democratic Services Support Officer), Danial Webb (Statutory Scrutiny Officer)**

10. APOLOGIES FOR ABSENCE

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11. NAMED SUBSTITUTES

There had been no named substitutes.

12. DECLARATIONS OF INTEREST

There were no declarations of interest.

13. MINUTES

The minutes of the previous meeting were received.

Resolved: That the minutes of the meeting held on 10 March 2026 be confirmed as a correct record and be signed by the Chairperson.

14. QUESTIONS FROM MEMBERS OF THE PUBLIC

No questions had been received from members of the public.

15. QUESTIONS FROM MEMBERS OF THE COUNCIL

No questions had been received from members of the council.

16. NEGLECT STRATEGY

The Service Director, Early Help, CIN and Safeguarding, Detective Superintendent West Mercia Police and Associate Director for Nursing, Quality and Safeguarding provided an overview of the report and answered questions from the committee:

1. Regarding data sharing and GDPR constraints, officers advised that national guidance made clear there should be no barriers to sharing information where a child was at risk, and highlighted that Herefordshire operated strong multi-agency data sharing arrangements through quality assurance groups and benchmarking with neighbouring authorities. A comprehensive dataset, incorporating inputs from health, police, and other partners, was reviewed on a quarterly basis to identify trends and support informed decision-making.

2. In relation to communications around child neglect, partners explained that substantial work had been undertaken to promote early help and improve access to support services, including awareness forums and partnership initiatives. It was noted that a national focus on neglect in 2026 would further strengthen messaging, and that the service adopted a restorative approach in the first instance, moving to more directive intervention where improvement was not achieved.

3. A question was raised regarding whether limitations on confidentiality within schools prevented children from disclosing concerns when compared to school nursing services. Officers outlined that confidentiality could not be guaranteed in safeguarding situations, as professionals were required to escalate concerns where necessary. They added that differences in disclosure often reflected the nature of relationships, with school nurses typically engaging children in more holistic conversations.

4. The committee heard that private nurseries were subject to the same inspection regimes and statutory safeguarding requirements as maintained settings and received appropriate support from the local authority. However, they acknowledged that detailed data on training uptake across all settings was not yet fully available and was being developed.

5. It was explained to members that the Graded Care Profile 2 provided a structured framework centred on the child's lived experience, but it was noted that, while effective, the tool was time-intensive and subject to ongoing review and adaptation.

6. The committee asked if the Integrated Care Board might consider an adaption of the Graded Care Profile 2 antenatal toolkit and training to make it more easily accessible to midwives. Partners explained that feedback from midwives had indicated they felt the toolkit was more aligned to community roles, such as health visiting and school nursing. However, the partnership was aware that accessibility of training presented a challenge and was prioritising how it could address this moving forward.

7. Partners highlighted a sufficient volume of practitioners trained in the Graded Care Profile, but acknowledged that there was currently limited ability to measure how training translated into practice. Further work was planned to align training data with usage and outcomes.

8. A member asked how families who avoided engagement with services could be identified. Officers reported that most such cases were detected through contact with hospitals, community reporting, or multi-agency intelligence, including the

use of a public helpline. It was recognised that families entirely outside services could be harder to identify, although forthcoming legislative changes were expected to improve this area.

9. The distinction between intentional and unintentional neglect was raised for clarification. Officers advised that no definitive distinction was applied at the outset, with assessments focused instead on the child's lived experience and outcomes. They noted that this remained a complex and evolving issue nationally, but confirmed that persistent unmet need would constitute neglect regardless of intent.

10. Questions were raised as to whether poverty itself constituted harm to children. Officers outlined that poverty was a significant risk factor but did not automatically equate to neglect, as many families in poverty provided appropriate care. However, where circumstances resulted in sustained unmet needs, this would meet the threshold for neglect.

11. Consideration was given to whether the council's wider inequality strategies adequately addressed the link between deprivation and neglect. Officers advised that this formed part of a broader strategic discussion supported by data analysis, including geographic mapping, and noted that targeted interventions in specific areas had demonstrated positive outcomes, particularly where early support was implemented.

12. The committee enquired about the primary sources of safeguarding referrals. Officers reported that referrals were most commonly received from the police, health services, and schools, with patterns varying throughout the year. They explained that all referrals originated as contacts, which were assessed and converted as appropriate for further intervention.

13. Members sought to understand the nature of typical police referrals for neglect. Officers explained that such referrals often arose incidentally when officers attended unrelated incidents and observed unsafe or unsuitable living conditions. In such circumstances, officers were required to assess immediate risk and make appropriate referrals through safeguarding channels.

14. Concerns were raised regarding adolescent neglect and emotional wellbeing. Officers acknowledged increasing demand linked to mental health pressures and service thresholds, and outlined the development of early help and school-based interventions to provide more accessible and preventative support.

15. Members considered whether neglect should be approached as a public health issue. Officers responded that while elements such as prevention, parenting support, and mental health aligned with a public health approach, responsibility for addressing neglect remained shared across a range of services.

16. Clarification was sought as to whether increases in referrals reflected a rise in neglect or improved awareness. Officers advised that both factors were likely contributory, but highlighted that increases in early help and child-in-need cases indicated a more proactive system, supporting improved outcomes for children.

17. A member enquired as to how the "Think Family" approach was being embedded across services. Officers explained that national changes to safeguarding training requirements ensured that staff working with both adults and children were equipped to take a broader, more holistic view of family circumstances.

18. The current position regarding fabricated or induced illness was queried. Officers reported that revised procedures, including independent paediatric review and improved coordination between professionals, had been implemented, and that no recent cases had been identified.

19. Concerns were raised as to whether financial pressures were creating challenges within partnership working. Officers acknowledged that pressures existed but stated that relationships between partners had strengthened, enabling open and constructive discussions. It was emphasised that the shared focus remained on achieving the best outcomes for children, with early intervention seen as key to both improving outcomes and delivering value for money.

At the conclusion of the debate the committee discussed and agreed the following recommendation:

- **For the Integrated Care Board to consider an adaption of the Graded Care Profile 2 antenatal toolkit by midwives.**

17. UPDATE ON RESPONSE TO POLICE EFFECTIVENESS, EFFICIENCY AND LEGITIMACY (PEEL) INSPECTION FINDINGS

The Detective Superintendent West Mercia Police provided an overview and update on the force's response to the inspection findings, and, along with partners, answered questions from the committee:

1. The Detective Superintendent explained that HMICFRS was due to return in May 2026 to reassess progress against the accelerated cause of concern, following submission of evidence indicating that some recommendations had been met. It was further noted that a national child protection inspection was scheduled for 13 July 2026, with the force currently engaged in the data-gathering phase.

2. Regarding system assurance, the committee asked how partners could evidence a transition from crisis recovery to consistent safeguarding practice. Partners explained that that there was currently no backlog in Herefordshire, and that assurance was provided through multi-agency audits, quality assurance processes, and regular dip sampling of cases. This included reviews of decisions not to refer cases onward, monthly sampling of approximately 25-26 cases, and strengthened partnership communication enabling swift verification of concerns.

3. A member queried what circumstances led frontline officers to undertake child risk assessments, whether this represented a recent development, and how such work fitted within broader policing priorities. The Detective Superintendent clarified that staff were expected to consider the presence and safety of children at every incident, applying professional curiosity where necessary. Safeguarding was confirmed as a high organisational priority supported by significant resourcing.

4. The committee asked what tangible benefits improved practice would deliver for children and young people in the county. It was explained that, while most children would hopefully not require police contact, those who did would experience a timely and appropriate response, with effective partnership intervention and improved identification of vulnerability by trained officers.

5. The committee enquired about risks associated with the revised system, alongside mitigation measures. The Detective Superintendent identified potential risks such as the re-emergence of backlogs and system pressures, but highlighted safeguards including: real-time performance monitoring, weekly

senior oversight, strengthened governance structures, and ongoing collaboration with partners to mitigate these risks.

6. Members questioned whether feedback from families and children was actively gathered regarding their experience. It was acknowledged by the partners that this had not yet been implemented, but it was recognised as important and would be considered once current system improvements were fully embedded.

7. In relation to quality assurance, the committee asked whether the impact of changes and the voice of the child were captured through existing processes. It was confirmed that triangulated quality assurance arrangements include feedback from families on multi-agency working. To date, no concerns had been identified regarding police involvement.

8. The committee proposed that a follow-up report be provided to review progress. This Statutory Scrutiny Officer suggested an update and, where available, findings from the national child protection inspection be added to the committee's work programme longlist for consideration.

9. The committee discussed operational arrangements within the Multi-Agency Safeguarding Hub (MASH), the position across partner authorities, and risks of regression. Partners confirmed that the police retained a presence in MASH through daily "floor walkers," ensuring visibility and responsiveness. All four local authority areas were described as performing well, with one rated outstanding, and ongoing collaboration enabled shared learning. Risks of regression were mitigated through regular performance monitoring and governance oversight.

10. Regarding safeguarding around technology and automation, the Detective Superintendent clarified that systems in use were based on robotic process automation rather than artificial intelligence. Human oversight remained integral, with officers reviewing all information and exercising professional judgement to ensure relevance and accuracy.

At the conclusion of the debate the committee discussed and agreed the following recommendation:

- **West Mercia Police should pilot mechanisms to hear from children and families in Herefordshire with whom they have worked, to understand and improve their practice.**

18. WORK PROGRAMME

The committee reviewed its work programme and suggested several additions:

- An update from West Mercia Police following its next safeguarding/PEEL inspection.
- An update on pupil referral units (PRUs), particularly around plans to relocate provision to a single site (a Cabinet decision was expected around 4 June 2026).
- To explore issues from a public health perspective.

The committee noted the early help task and finish group's engagement with the Vennture service; members were assured that leadership changes and staff wellbeing concerns were being managed, with no adverse impact on service delivery.

Resolved that:
The committee approve the work programme as set out at Appendix 1, with agreed additions and actions.

19. DATE OF THE NEXT MEETING

Wednesday 22 July 2026, 10am.

The meeting ended at 16:44

Chairperson