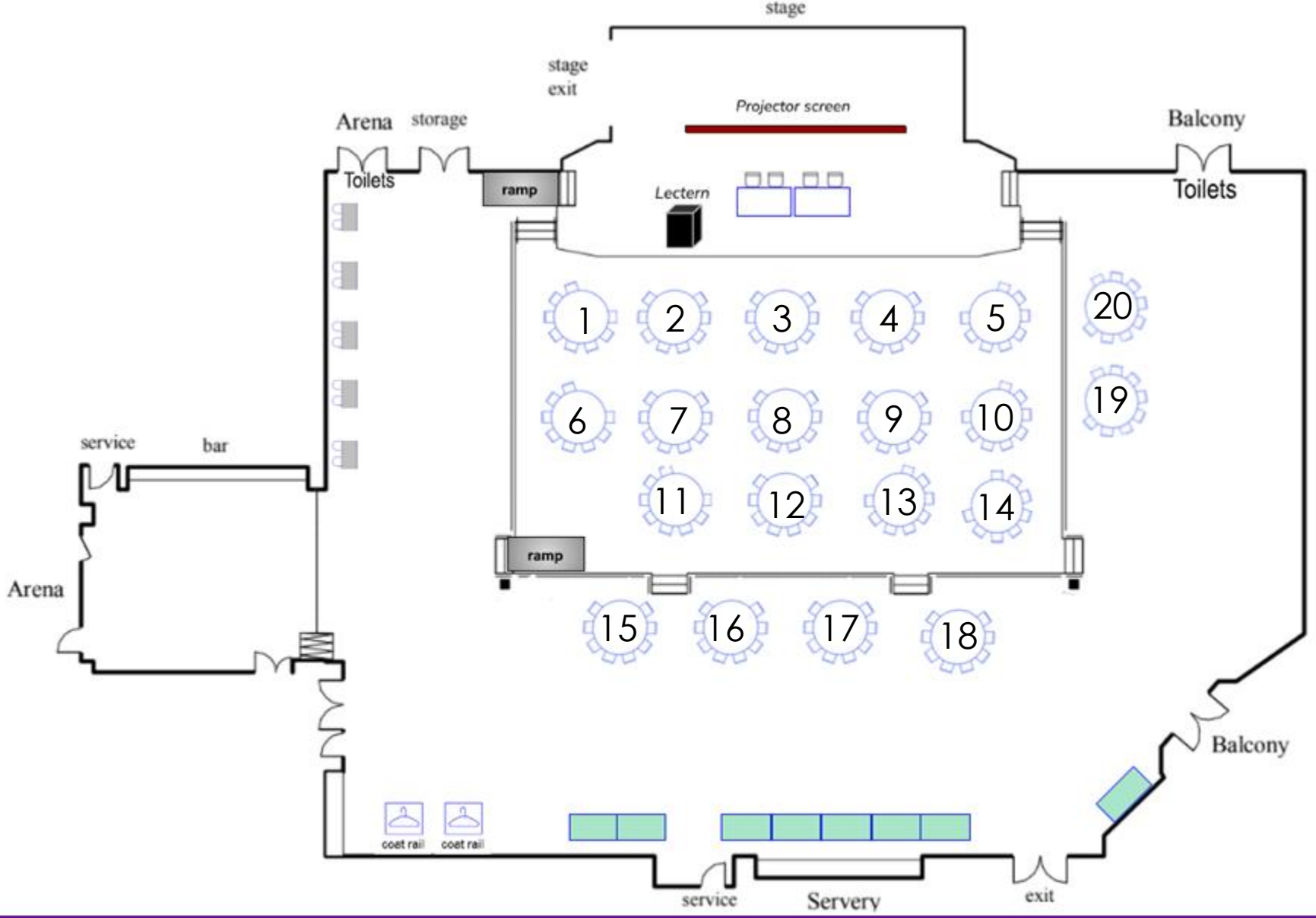

TSCP Conference 2024

Torbay Safeguarding Children Partnership

Torbay Safeguarding Children Partnership

TSCP Conference 2024

Agenda and House Keeping

Welcome	Penny Smith, Chair of TSCP Executive Group Chief Nurse, Devon ICB
Keynote Speech: Working Together 2023	Deborah McMillan, National Safeguarding Partner Facilitator, DfE
JTAI: Outcomes and Next Steps	Michele Thornberry, Head of Safeguarding, NHS Devon
Table Discussions	
REFRESHMENT BREAK	
Child Exploitation	Devon & Cornwall Police – Ian Stevens, South Devon Partnership Inspector
NETWORKING LUNCH	
Professional Curiosity	Children & Family Health Devon – Kate Youngs & Liz Palmer, Specialist Safeguarding Nurses
Neglect and the Graded Care Profile 2 (GCP2)	Torbay Children's Services – Sandra Sylvester, Principle Social Worker
Executive Panel Q&A Session	TSCP Executive Group Members
Final Remarks	Roy Linden, South Devon Policing Commander, Devon & Cornwall Police
Close of Conference	

Torbay Safeguarding Children Partnership

Torbay Safeguarding Children Partnership

Welcome

Penny Smith, Chair of TSCP Executive Group

Chief Nurse, Devon ICB

TSCP Executive Group Members

Penny Smith
Chief Nursing Officer
Devon Integrated Care Board

Nancy Meehan
Director of Children's Services
Torbay Council

Roy Linden
Policing Commander - South Devon
Devon & Cornwall Police

Torbay Safeguarding Children Partnership

Torbay Safeguarding Children Partnership

Keynote Speech:
The Latest National Guidance on Effectively Protecting and Safeguarding Children

Deborah McMillan

National Safeguarding Partner Facilitator, Department for Education

Department for Education

Working Together To Safeguard Children 2023

Children's Social Care National Framework and Dashboard

Kinship Care Strategy

Data Strategy

Information Sharing Guidance - 2024

Torbay Safeguarding Children Partnership

Stable Homes Built on Love

6 Pillars of reform:

1. Family help provides the right support at the right time so that children can thrive with their families
2. A decisive multi-agency child protection system
3. Unlocking the potential of family networks
4. Putting love, relationships and a stable home at the heart of being a child in care
5. A valued, supported and highly skilled social worker for every child who needs one
6. A system that continuously learns and improves, and makes better use of evidence and data

Over the next 2 years focus is on Phase One of reform -

addressing urgent issues, setting national direction, and laying the groundwork for future reform

Torbay Safeguarding Children Partnership

National Framework - principles for practice, expected outcomes and indicators

The National Framework describes the outcomes that local authorities should achieve for children, young people, and families.

DfE have refined the proposed indicators, working with experts to identify the best options, and investing in developing new measures of outcomes.

The plan has been published for phasing roll-out of the Dashboard, alongside a short list of indicators.

Also published is the the plan for the roll-out that takes an iterative approach through which they can test, evaluate and improve the Dashboard and indicators

LA's will have a one-year implementation period to help them to embed the National Framework

Torbay Safeguarding Children Partnership

Working Together 2023: Overview

Background

- ✓ *Working Together to Safeguard Children* is the multi-agency statutory guidance that sets out expectations for the system that provides help, support and protection for children and their families
- ✓ It applies at every level from senior leaders to those in direct practice with families, and across all agencies and organisations that come into contact with children and their families
- ✓ It gives practitioners clarity about what is required of them individually and how they need to work in partnership with each other to deliver effective services
- ✓ It was last revised in 2018, with a limited factual update in 2020
- ✓ DfE aim to update WT on a yearly cycle

Working Together 2023: A Shared Responsibility

We have introduced a new chapter at the beginning of *'Working Together'* to emphasise that successful outcomes for children depend on strong multi-agency partnership working across the whole system of help, support and protection and effective work from all agencies with parents, carers and families

• **Renaming the statutory guidance to reflect the help and support that is provided to families:** The intention is to centre the importance of providing help for parents and families, and the need for decisive action when children need protection from harm, alongside the Children Act 1989 duties on all individuals, organisations and agencies to safeguard and promote the welfare of children.

• **Introducing practice principles for working with parents and carers:** We have drafted clear, explicit expectations for how all agencies and practitioners should work with parents and carers so that they understand what is happening and can engage with services in a meaningful way. Information about key decision-making points will support parents to understand the change that is expected to keep their child safe. These new principles are drawn from good practice that already exists in local areas.

• **Introducing expectations for effective multi-agency working at a strategic, management and direct practice level:** Numerous reviews, including those from the Child Safeguarding Practice Review Panel, have identified the need for much improved multi-agency working with more robust critical thinking and challenge within and between agencies. We have developed expectations to underpin this multi-agency working in the following five areas: Collaboration; Learning; Resourcing; Inclusion; Mutual Challenge

Overview: Multi Agency Safeguarding Arrangements

Chapter 2 on Multi-Agency Safeguarding Arrangements focuses on strengthening how safeguarding partners (local authorities, integrated care boards and the police) work together, and with relevant agencies, to safeguard and protect children locally. Protecting children from abuse and neglect is a multi-agency endeavour and one which requires join up and cooperation at all levels.

- **Clarifying roles and responsibilities, including distinguishing between lead safeguarding partners and their delegates:** We have distinguished those responsible for setting the vision and priorities (Lead Safeguarding Partners) and those leading delivery of arrangements (Delegate Safeguarding Partners), outlining the joint functions as strategic leaders for the first time.

- **Introducing a partnership chair:** It is envisaged that this individual will replace the need for an independent chair and allow a single point of escalation for risks and issues to the Lead Safeguarding Partners.

- **Role of relevant agencies and education providers:** We have emphasised the role of education in safeguarding arrangements, reflecting the importance they play in children's lives and the value in involving them in strategic decision-making. Strengthening *Working Together* is the first step before exploring whether further legislative changes are needed.

- **Role of voluntary, charity, social enterprise (VCSE) organisations and sports clubs:** We have highlighted the importance of considering naming and engaging these organisations in published local arrangements if they are not already.

- **Accountability and transparency:** We have provided more detail on key functions such as independent scrutiny, funding arrangements, dispute resolution and reporting; introducing for the first time a set date by which local areas should submit their yearly reports to encourage greater transparency and compliance.

Working Together 2023: Help and support for children and their families

We want children and their families to receive the right help at the right time, from practitioners with the right knowledge, skills and relationships working with families to keep children safe and well. We also want a renewed focus on family-led solutions where other family members and family friends can play an invaluable role in supporting parents, enabling children to live safely at home.

• **Early help** – strengthened the focus on families for improving outcomes, the role of education and childcare settings in supporting children and keeping them safe and further considerations for practitioners when identifying a child who may need early help services

• **Family Networks** - a renewed focus on family-led solutions from within a 'family network'. With family networks engaged at the earliest point and at every stage. We have outlined the components of family group conferences to improve family network engagement in decision making and supporting children.

• **Direct work with children under s17 of the CA1989** – clarifying that a broader range of practitioners can lead direct work with children and their families where support is provided under section 17 of the Children Act 1989 (Child in Need). Clarifying that social worker qualified practice supervisors or managers provide oversight for key decisions and activity, and that where child protection enquiries are made under section 47 of the Children Act 1989, the lead practitioner should be a social worker.

• **Support for disabled children and families.** We want a stronger focus on support and protection for disabled children, to provide non-stigmatising help and support to disabled children and their families. Strengthening the language around the role of the Designated Social Care Officer, to align with the wider reforms to the SEND system.

• **Support for children in mother and baby units.** We have clarified the role of children's social care in the assessment of suitability and social work input for a mother and baby unit placement within a prison estate.

• **Protecting children from prisoners who present an ongoing risk from within custody or whilst on probation.** We have clarified the role and responsibilities prison and probation services have in keeping children safe and how children's social care should work in partnership to ensure effective child safeguarding and protection is provided**.**

Torbay Safeguarding Children Partnership

Working Together 2023: Decisive Multi-Agency Child Protection

Our vision for child protection is an effective multi-agency system where practitioners across agencies have the highest levels of knowledge and skills, and work in an integrated way across statutory child protection activities.

We are proposing restructuring chapter 3 to include guidance for working with children and their families across the whole system of help, support and protection. This chapter outlines how agencies, organisations and individuals work together through early help, targeted early help, through statutory support under section 17 of the Children Act 1989 and through child protection enquires under section 47 of the same Act.

•**National multi-agency child protection standards:** Set out the actions, considerations and behaviours that should lead to improved child protection practice and better outcomes for children. Apply to all individuals from every agency involved in child protection practice

•**Harm outside the home:** We have strengthened and clarified the multi-agency safeguarding response to all forms of abuse and exploitation, and provision under section 17 and section 47 of the Children Act 1989. Outlining key considerations for practitioners to understand the extra-familial context and the role of partners in keeping children safe and working in partnership with parents.

What are you expected to do now?

- **Name a specific LSP and DSP** for each partner agency and include their details in your annual report and published arrangements
- **Agree how often they will meet** and, if necessary, develop new governance arrangements
- **Name the Partnership Chair** from the DSP group and agree how the Chair role will be shared
- Consider the **role of education partners** and strengthen if necessary
- **Review the funding arrangements** and consider how they will become more equitable
- If present in the structure, **remove the role of Independent Chair**
- Update your **annual report** and publish in September for financial year 23/24
- Review your current arrangements (health check tool available) to ensure effective practice is being delivered as set out in:

  New multi agency expectations

  New principles for working with parents and carers

  New Multi agency child protection standards

Torbay Safeguarding Children Partnership

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Questions?

Deborah McMillan

National Safeguarding Partner Facilitator,
Department for Education

Torbay Safeguarding Children Partnership

JTAI: Outcomes and Next Steps

Michele Thornberry
Head of Safeguarding, NHS Devon

JTAI – outcomes and next steps

Michele Thornberry
Head of Safeguarding
NHS Devon

One Devon

Proud to be part of One Devon: NHS and CARE working with communities and local organisations to improve people's lives

Torbay Safeguarding Children Partnership

Joint Targeted Area Inspection

- Identification of initial need and risk (the ‘front door’).
- Inspection of police, children’s social care, education and relevant health services.
- carried out by inspectors from:
  - Ofsted – 2 social care, 1 school
  - Care Quality Commission (CQC) - 2
  - His Majesty’s Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) - 2

Ofsted

Regulated by CareQuality Commission

HMICFRS
Making communities safer

Timetable

- Notified Mon 30 October 2023
- Week 1 - Information submitted to support inspection, 30 case selected for auditing
- Week 2 – dip sampling as well as audit of 5 cases,
- Week 3 – inspectors visited 13 – 17 November – CSC, MASH, police, emergency department, midwives, GP, 0-19 services, adult mental health and drug and alcohol service
- Daily KIT meetings
- Organising the timetable – who, where, access to records
- Uploading evidence
- Identifying cases

Torbay Safeguarding Children Partnership

What the Inspectors evaluated…

- the front doors of agencies to identify and respond to initial need and risk
- the effectiveness of the MASH
- agency contribution to the multi-agency response, including early help, child in need and child protection
- how effectively TSCP monitors and evaluates the work of the statutory partners.
- the impact of leaders and managers on practice
- the timeliness and impact of actions to improve the multi-agency

  response to children
- the scope did not include longer-term interventions with

  children and families.
- the focus was on practice within the last 6 months, including how practice takes account of relevant history in children's cases.

Criteria

Working effectively together

Children and family views are heard

Quality and timeliness of help and support to prevent needs escalating

Sufficient range of local services

Identification of children in need of help and protection lead to appropriate, timely and high-quality referrals

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Criteria

- Children received the right help and protection - thresholds, information sharing and timely intervention
- Children are protected through multiagency arrangements.
- Response is proportionate to the risk and needs
- Assessments are child focused, comprehensive and timely
- Practice is child-centred, experiences are understood
- Management oversight of front-line practice
- Partnership monitor partners practice and promote learning

Torbay Safeguarding Children Partnership

Findings

- TSCP Executive Group functions effectively
- Agencies work well together.
- Information-sharing and attendance at meetings in the MASH, child protection strategy discussions and in child protection enquiries is consistently timely and effective.
- Thresholds for different levels of intervention are jointly understood
- For most children, risks and support needs are identified early, resulting in the right support at the right time.
- Families have direct access early help services, including from the well-regarded family hubs
- The risk to missing children and the link to exploitation are well understood

Area for priority action

- TSDFT leaders need sufficient oversight and assurance of professional curiosity across practice to safeguard children.
- The variable quality of scrutiny and supervision by health staff leading to safeguarding risks in children not being consistently identified and responded to appropriately. A particular area of concern is the management of unexplained injuries to children.

Action taken

- Professional curiosity training is being developed
- Supervision frequency increased
- Supervision policy reviewed.
- Supervision training for safeguarding team secured.
- Audit of all children attending ED completed. Auditing will continue. Learning for individual staff.
- Themes will inform future training.
- Overseen by Urgent and Emergency Care Group and Safeguarding Committee.

What needs to improve

- The consistency with which professional curiosity and challenge are applied for children living with chronic domestic abuse or neglect and unexplained injuries.
- Performance information across the partnership to inform needs analysis and impact strategic approaches to areas of concern.
- The partnership's strategic approach to children with poor emotional and mental health.

What needs to improve

- The length of time children wait for support from CAMHS when categorised by the service as low risk.
- Communication between partner agencies when new information is gathered about families with existing safeguarding concerns.
- The rigour of the partnership's quality assurance function.
- The meaningful involvement of children, families and the wider Torbay community in the development and delivery of strategic priorities and services.

What's working well

- A strong partnership approach to providing early help is making a positive difference.
- The development of family hubs and the access families have to immediate support.
- Consistently good multi-agency attendance and information-sharing in the MASH. Strategy meetings include the partners that are most important to understanding children's situations.
- The effectiveness of the pre-birth panel to safeguard children.
- The effectiveness of the partnership's response to missing and exploited children.

What's working well

- The quality of public protection notices (PPNs) and their focus on children's wide-ranging needs.
- Flexibility and responsiveness within midwifery and 0 to 19 services
- The high quality of partnership working when a child is in significant mental health crisis and requires a safeguarding response.
- The positive difference that support to schools from the Torbay Education Support Service (TESS) is making for children.

What next

- Develop an action plan and submit to the inspectors by 9th May
- TSCP to monitor the action plan
- Alignment with Children's Continuous Improvement Plan and scrutiny from CCIB
- Each agency will need to complete their actions and monitor their progress.

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Participant Discussion

Over to you…

Please choose a table representative to feed back.

For live online viewers – please use the QR code to submit your feedback online too.

1. What are the **enablers** and **blockers** for embedding multi-agency safeguarding expectations to achieve successful partnership working?

2. How could we ensure that the **voices** of the children and young people you work with are fed into the TSCP Working Together arrangements, in an **impactful** way?

Opening Discussion Questions

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Comfort Break

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Child Exploitation Structure

Ian Stevens
South Devon Partnership Inspector,
Devon & Cornwall Police

Exploitation – what is it?

- **Child criminal exploitation** is common in county lines and occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology.

- **Child sexual exploitation** is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. (Home Office 2017)

Triage – weekly

- **Overview**
- Children who have been reported missing in preceding 7 days
- Children who have a new or updated Exploitation toolkit
- Children who have a Toolkit and who have been reported missing.
- **Purpose**
- The functions of the group will be to review information on all of the children above, and decide which children will be referred to CEMOG Children's Panel.The multi-agency group may also identify additional information or have questions about individual children, to assist understanding and decision making.
- **Membership**
- Group comprises reps from Police, Childrens Services, Education, YJS, Checkpoint and Health

CEMOG – Child Exploitation Missing Operation Group - Monthly

Overview

- Children identified through Triage, or referred direct by Practitioners.
- high risk/vulnerability relating child exploitation
- complex missing and/or exploited whilst missing
- where there appears to some barriers to support and/or disruption planning

Purpose

CEMOG Children's Panel is designed to provide a space for reflective, restorative multi agency discussion about children for whom there are concerns. Whilst It is not a case planning or statutory decision-making Panel, recommendations or proposals may be made to enhance planning or disruption of exploitation.

MACE – Multi Agency Child Exploitation - Monthly

- **Overview**
- Adults of concern who may be exploiting children in the Torbay area.
- Locations of concern where there may be child exploitation in the Torbay area.
- Methods of transportation/vehicles of concern.

- **Purpose**

- Share information and intelligence relating to monitored adult or locations of concern
- Consider any new referrals
- Develop multi agency disruption plans in relation to the above
- Share information/intelligence relating to child exploitation in Torbay – including but not limited to social media apps of concern/substances of concern, any other 'themes' arising

- The MACE Forum does not focus on individual children – these discussions take place in CEMOG Panel (monthly) and Triage Panel (weekly); both of these forums have separate Terms of Reference.

CYPEG –Children and Young Person Exploitation Group

- **Overview**
- The purpose of CYPEG is to develop, review, and maintain strategies, processes, and resources to ensure children are safeguarded and live free from the threat of exploitation and other emerging threats to their safety and well-being.
- The group will focus on:
- Child Sexual Exploitation
- Child Criminal Exploitation (including County Lines)
- Missing Children
- Children who are victims of Trafficking and Modern Slavery
- Prevent
- CYPEG provides governance to the Multi Agency Child Exploitation group (MACE) and the Child Exploitation and Missing Operational Group (CEMOG) and Triage.

CYPEG –Children and Young Person Exploitation Group

- **Purpose**
- To **promote effective working relationships** between member agencies, professional groups, and voluntary organisations to safeguard children from exploitation.
- To **support and guide the development, review, and maintenance** of multi-agency strategies and operations in Torbay to prevent and disrupt child exploitation.
- To **facilitate shared learning** and gain a better understanding of the profile of children, families and the community who are most vulnerable to exploitation.
- To be **responsive to changes in legislation**, changes in service needs, and the implications of research.
- **Respond to continual profiling of child exploitation**, associated risks, and implement lessons learned from CSPRs and other learning reviews, not only from Torbay but also regionally and nationally.

Torbay Safeguarding Children Partnership

Child Criminal Exploitation Multi-Agency Case Audit

Review

Format

- The format of reporting from the Multi-Agency Case Audit includes both a Power Point Executive Summary and a Learning page: http://torbaysafeguarding.org.uk/quality-assurance-group/
- This follows national good practice and ensures accessibility and wider audience engagement with the subject matter
- This also facilitates timely learning and cascading of findings and recommendations
- It is recognised that long written reports have not always supported the embedding of learning from processes
- This presentation outlines the findings and recommendations.

Purpose and methodology for Multi-Agency Case Audit

Why

- To consider the current effectiveness of frontline practice in protecting children and young people who are vulnerable to Criminal Exploitation.
- To help inform a more focused and systemic framework to assist services to better understand and respond to the impact of CCE

How

- Terms of reference were developed by TSCP members.
- Relevant Partner's were engaged to develop the Audit document, referencing the JTAI evaluation criteria.
- Ten cases were anonymously identified and reviewed.
- A thematic analysis was conducted by Multi-Agency partners

Demographic information

The Audit

- 10 children selected anonymously by the Audit group
- Children with Exploitation toolkits indicating Medium or High vulnerability to Criminal Exploitation
- Children known to the Youth Justice Service between January 2022 and January 2023.
- Audit requested from Children Social Care, Police, Education providers, Health Service, YJS, Checkpoint (Drug / Alcohol service, Advocacy), CAMH's (no response from CAMH's due to GDPR concerns).
- Audit document designed by Audit group reflecting 7 themes.
- Further work being scoped to use Participation workers to capture experience of the 10 selected Children. This will add value to this Audit, as we acknowledge that this is the base for further action.

The Children

- 6 boys, 3 girls, 1 transgender (female to male)
- All white, English speaking residing across Torbay
- Age range between 12 and 18 yrs old
- 1 with an NRM Reasonable Grounds outcome
- 7 with SEND identified needs.
- 4 with EHCP's (primary need Social, Emotional and Mental Health)
- Educational Status - 1 in alternative provision after exclusion, 5 at Specialist settings, 2 in mainstream education, 1 on mainstream education role but attending alternative provision due to risks, 1NEET,

What does the audit tell us is working well in Torbay?

- Where there was identified risk and complexity the focus and subsequent Multi-Agency work was good.
- There was evidence of good interaction with young people and their families where risk was identified.
- There was good use of Missing procedures (CEMOG / Triage panel) when it came to Safeguarding and Partnership work.

What areas for focus has the Audit identified for Torbay?

- **Child Exploitation toolkits (CET)** – ***Creation, review, sharing***.

The CET is central and critical to the identification and management of risk of Exploitation. They are effective when complexity / risk is identified but areas for further focus;

- There is a need to review practice Guidance so that they are better understood across the Partnership.
- How do we get the CET recognised as a Multi-Agency tool rather than just for a Social worker to manage?
- How are these shared across Agencies e.g, with Police, Education, Health. Should other Agencies have markers on their systems to highlight the presence of a CET and its grading?
- There are identified challenges in how often they are updated and the quality of Management supervision of them. This was also identified as an issue in the TSCP dip sample (January 2023). How do we address?

What areas for focus has the Audit identified for Torbay?

- **Partnership information sharing** – ***Highlighting risk across all Partners***

We saw good Partnership working from a meeting /actions perspective, however the picture appeared mixed when it came to sharing information as a result of activities, e.g Return Home Interviews (RHI). Good information sharing, as 'eyes on the child', is critical for all Agencies involved with an individual where there is CCE concerns. Areas for focus;

- The Police NICHE system / SEND document does not currently have a warning marker for CCE. This needs to be explored.
- How is the information from CEMOG / Triage shared with Agencies, e.g Health and Police systems?
- How is the RHI information shared with Education /other Agencies where the Child has a Toolkit?
- How do we improved the sharing of the CET across the Partnership?

What areas for focus has the Audit identified for Torbay?

- **Partnership working** – ***Complexity and Engagement***

We saw good working where there was identified risk and complexity and where the child and family were willing to engage. Where there was a lack of child engagement the picture was more mixed so areas for focus;

- How do we support Practitioners to consider other options when it came to assessing and managing risk of exploitation? How do individuals identify other Agencies who may be working with the Child / Young person?
- How do we raise profile of the Checkpoint Advocacy process and promote improved referrals into this Team?
- How do we promote the Professional differences processes where there are concerns raised?
- How can we support improved Management oversight of those cases where there is a Toolkit but where child / family engagement is poor? Poor engagement should be seen as a risk factor.

Themes that we are already aware of.

- YJS not having a dedicated facility is a challenge when it comes to working with young people, especially the lack of an interview room where young people can be spoken to.

- Lack of a Contextual Safeguarding Model in Torbay is a challenge that has been recognised and a TSCP Task and Finish group is pending. The Govt ***Working Together*** Consultation process also recognises the benefit of Contextual Safeguarding for the future.

Group priorities – moving forwards.

1 – CYPEG led review into the use of and distribution of the Child Exploitation Tool (CET) kit across all relevant Agencies, so that it reflects current risk informed by information held by all. Aspiration that the CET is seen as a Multi Agency product as opposed one owned by Childrens Services.

2 – CYPEG led review to identify how we raise awareness of other Agencies involvement with a young person, or to identify and promote other engagement opportunities, where there is a lack of current engagement from the child or family?

3 – CYPEG led review into inter Agency exploitation information sharing and the flagging of risk / CET's.

Torbay Safeguarding Children Partnership

Participant Discussion

Over to you…

Please choose a table representative to feed back.

For live online viewers – please use the QR code to submit your feedback online too.

1. What are the current biggest challenges to keeping young people safe from exploitation?

2. What can/do you do to disrupt / tackle / report?

3. How can we improve locally?

Thank you

Lunch

- Use post cards on your tables to raise any questions to the TSCP Executive Group.

- Post these into the box at the registration desk.

Torbay Safeguarding Children Partnership

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Professional Curiosity

Kate Youngs & Liz Palmer,
Specialist Safeguarding Nurses,
Children & Family Health Devon

Professional Curiosity

CFHD SAFEGUARDING TEAM
MARCH 2024

cfhd
Children & Family Health Devon

What is professional curiosity?

What are the barriers?

Developing the skills

Embedding professional curiosity

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Children & Family Health Devon

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Professional curiosity is……..

- Capacity and skills of communication to explore and understand what is happening for a person.
- Not making assumptions or accepting things at face value.
- It requires skills of looking listening, asking direct questions and being able to hold difficult conversations.
- Professional Curiosity and challenge are a fundamental aspect of working together to keep children safe from harm.

What are the barriers?

- Disguised compliance
- The rules of optimism
- Professional deference
- Confirmation bias
- Poor supervision
- Work pressure
- Ignoring gut feelings

Developing the skills

- Not taking everything at face value
- Being open minded
- Flexible in your work
- Listen to and hear the child's voice
- Creative communication
- Reviewing information – current/historical
- Take responsibility for safeguarding

Safeguarding is everyone's responsibility

Embedding professional curiosity?

- Reflective restorative supervision
- Compassionate leadership
- Training
- Creating an organisational culture
- Courageous conversations

SCENARIO

Gilberts story:

Part 1

Gilbert is 10 years old and attends St Cuthberts school in Bideford, he attends a local youth club two evenings a week and enjoys mixing with other children especially those younger than himself. Gilbert lives at home with his Mum, Step Dad and three younger siblings, he enjoys looking after his kitten and riding his bike.

Two weeks ago, Gilbert did not attend the youth club for both evening activities and no contact had been received from his family to explain his absence. It was unusual for Gilbert to be absent as he really enjoyed himself at the club and was always quick to help out with small jobs in the club, he loved putting away the bikes into the shed at the end of the evening.

This week Gilbert arrived on his own looking tired, his clothes appeared too large for him and throughout the evening activities he appeared quiet, he was not his usual boisterous self.

One of the Youth club leaders helped Gilbert to put the bikes away and asked him if he was alright. Gilbert replied he was alright.

Gilberts parents were very late collecting him, which caused him to become anxious, worrying something was wrong. Tina another child's parent offered to take Gilbert home as she was going past his house.

Torbay Safeguarding Children Partnership

Participant Discussion

Over to you…

Please choose a table representative to feed back.

For live online viewers – please use the QR code to submit your feedback online too.

Part 1.
What should you be curious about?

Part 2

Gilbert was late attending school the following day, which was unusual for him. Once in his class Gilbert was slow to join in the reading exercise the rest of his class had started. One of the stories in his lesson told of a very young girl who got lost in the woods, in the rain without her parents to guide her home. Gilbert became very distressed at this point crying and shouting for the child to be found and taken to her Mum. Gilberts favourite teaching assistant reassured him the little girl was found and safe which calmed him. Gilbert mentioned he was very hungry as he was too late this morning to have breakfast.

At lunch time Gilbert went to the library helping to put the books back on the shelves, Mr Roberts, Librarian, asked Gilbert if he was happy at school and if everything at home was alright. Gilbert was slow to answer but said he was worried about his sister, she had been crying the previous evening.

Mr Roberts asked Gilbert to explain why he was worried about his sister, as crying was not unusual for a 3 year old child. Gilbert shrugged his shoulders and said he was not sure. Mr Roberts asked Gilbert if he wanted him to talk to his Mum to find out if his sister was alright but Gilbert said it was OK and he will look after Maddie when he went home. Another child in the library took Mr Roberts attention and Gilbert went back to his classroom.

Gilbert went to an afterschool activity and seemed to be happy energetic and hungry. After eating his snack Gilbert asked if he and his friend George, could ride the bikes. Whilst helping to get the bikes form the shed, Jen one of the staff members noticed that Gilbert had several bruises on his leg, which Jen described as of different appearance indicating they had happened over several days.

Gilbert was reluctant to put the bike back in the shed at the end of the session saying he needed to put his coat on ready for his Mum to collect him. When Gilbert's Mum collected him, Jen asked her to take Gilbert to his GP to look at the bruises on his legs to make sure he had not sustained a more serious injury.

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Participant Discussion

Over to you…

Please choose a table representative to feed back.

For live online viewers – please use the QR code to submit your feedback online too.

Part 2.
What should you be curious about?

Part 3

Gilbert accompanied his Mum and one-year old sibling to the GP surgery for his siblings' routine immunisations.

The Nurse was running late with her appointments as she had an emergency earlier in the afternoon, so Gilbert his Mum and sister had a long wait in a crowded waiting area, Mum appeared overwhelmed and unable to manage her children's behaviour. Mabel an assistant Practice Nurse noticed Gilbert and his family and offered them a quiet space with toys for the children whilst they waited.

Mabel noticed Gilbert's Mum was very quiet and subdued, appearing not to notice the children's boisterous behaviours, she was not engaging with them, leaving Gilbert to keep his sibling safe within the room.

Mabel had finished her work and following recent safeguarding training she engaged Gilbert in play as she was worried about him. Whilst his sibling went for her immunisations Gilbert and Mabel played with a toy doctors medical kit, chosen by Gilbert. As a part of the pretend play Gilbert showed Mabel the bruises on his legs and suggested she covered them with a bandage. Mabel told Gilbert she was worried about him and asked if he wanted to tell her how the bruises happened. Gilbert assured her it was alright he always had bruises all over his body because has was a very naughty boy and he deserved to be punished with the broom.

Mabel asked if he would tell her more about the broom and Gilbert readily explained that he was so naughty it was what he deserved, so was being locked in the garden shed. Gilbert said one day last week was not alright because his 3-year-old sister had been crying for hours and Dad hit her with the broom and locked her in the shed on her own, she was very scared. Gilbert said it was alright for him as he was older and brave, he liked the shed. Gilbert stopped talking and went quiet. Mabel praised him for telling her about the shed, he replied I was not so brave when I had to stay in the shed all night, I did not like the noises the foxes made in the garden, I was frightened, but Dad said I had to stay there until I learned to be good, he told me I was not his son and needed to be good or I will be given to social services.

Mabel asked if there was anything else he wanted to tell her Gilbert said he thought his Mum was very sad because Dad was not very nice to her, but he tried to look after her and make her smile.

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Participant Discussion

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3. What are the risks if we are not curious?

Best Practice Briefing (PB1 April 2022)

This month: Professional Curiosity

1. What is Professional Curiosity?

Professional curiosity is having a healthy scepticism about what you are being told about a child. It is a communication skill to explore and understand what is happening within a family rather than making assumptions or accepting children and families' versions of events or disclosures at face value. This requires practitioners to practice 'respectful uncertainty'.

2. Consider disguised Compliance

Disguised compliance involves parents or carers giving the appearance of co-operating with agencies to avoid raising suspicions and allay concerns (e.g., agreeing to attend appointments but not turning up.) Practitioners should verify and corroborate information with others.

3. Thinking the unthinkable

Thinking the unthinkable does not mean assuming the worst. It means keeping an open mind and being able to think objectively about what the evidence is telling you.

4. Assessing Risk and Recording

Be observant when completing key tasks such as home visits and considering all presenting evidence within a risk context. Analyse all available information and record all concerns and considerations.

5. Tips for Practitioners

- Seek advice, guidance and second opinions
- Work in partnership with other agencies
- Carry out unplanned visits (where possible)
- Play 'devil's advocate'
- Present alternative hypotheses
- Present cases from the child, young person, adult, or another family member's perspective
- Share your concerns and findings with other professionals/agencies

6. Why is it so important?

A lack of professional curiosity can lead to:

Missed opportunities to identify less obvious indicators of vulnerability or significant harm
Good information sharing, supervision, and open discussion at key decision-making meetings to 'check and test' information can be crucial in ensuring you do not miss any areas of concern.

7. Barriers to curiosity

- Overidentifying with carers and losing focus on the child they need to make the hard decisions about the case
- Over optimism: **The rule of optimism** is also about professionals who do not want to acknowledge that things are not getting better and that they need to make difficult decisions
- Making assumptions
- Being afraid to raise concerns and question families
- Time constraints
- Lacking the confidence to ask sensitive questions
- Unconscious bias

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Any further questions?

cfhd
Children & Family Health Devon

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You can make a difference

The power of one

'Lads like us'

HEALTH VISITOR CONFERENCE (YOUTUBE.COM)

Thank you

cfhd
Children & Family Health Devon

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Neglect and the Graded Care Profile 2 (GCP2)

Sandra Sylvester,
Principal Social Worker,
Torbay Children's Services

NSPCC Learning

Torbay Safeguarding Children Partnership

Graded Care Profile 2 (GCP2)

Measuring Care, Helping Families

Awareness session

- Why do we need it?
- What is it?
- Benefits of using GCP2
- Implementation and why it's vital
- How NSPCC can support you

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Participant Discussion

Over to you…

Please choose a table representative to feed back.

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Questions:

- What is neglect?
- What is the impact on Children and Young People?
- Why is it difficult to assess?

Why focus on child neglect?

Child neglect is…

- the most common reason for a child to be subject to a child protection plan. Currently at 27.02.2024 we have 163 children on a plan, 111 are subject to neglect,
- features in 75% of SCR's (Serious Case Review (SCR) analysis 2020 for the education sector: Neglect - SCIE
- the most common concern for which adults contact the NSPCC helpline.
- the most prevalent form of child maltreatment in the UK.
- key priority of the TSCP – Neglect Strategy in place.

Effects of neglect:

- Death
- Delayed development
- Emotional difficulties - anger, anxiety, sadness or low self-esteem
- Mental health problems such as depression, eating disorders, (PTSD), suicidal thoughts, self-harm
- Problems with drugs or alcohol
- Poor physical health
- Struggles with relationships
- Difficulties with learning, lower educational attainment, difficulties in communicating
- Behavioural problems including anti-social behaviour, criminal behaviour

Graded Care Profile 2
Measuring care, helping families

Identifying Neglect

- ✔ Assessing neglect can be difficult
- ✔ It can be subjective and prone to bias
- ✔ There is a high threshold for recognition
- ✔ It's difficult to capture and compare
- ✔ It can be complex and intergenerational

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What is the Graded Care Profile 2 (GCP2)?

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"Sometimes I was going for a nap in the day, my daughter was playing downstairs, and she (practitioner) made me think about how it's unsafe like if my daughter turned the cooker on or something. So now if I am having a lie down I will lie on the sofa and I am not fully asleep, just like resting."

Parent/carer assessed.

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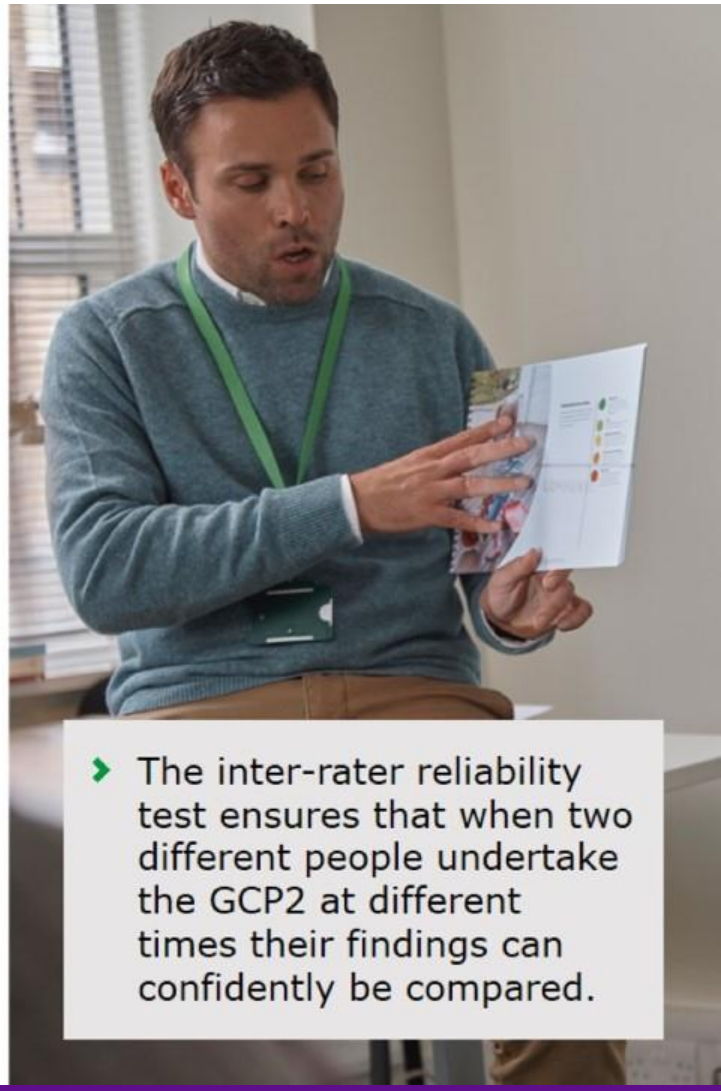
Graded Care Profile

- An evidenced-based assessment tool for evaluating levels of parental care – what is life like for the child
- Uses a graded scale (1=Always met 5=Never met) to capture levels of physical and emotional care
- Theoretically sound
- Identifies strengths as well as areas of concern
- Targets aspects of neglectful care
- Provides evidence that can inform care and intervention plans

Graded Care Profile 2
Measuring care, helping families

"GCP2 has been found to be reliable and valid. It can be used in the knowledge that it has sound psychometric properties, and is a reliable and valid assessment tool in aiding practitioners in the assessment of child neglect."



- The inter-rater reliability test ensures that when two different people undertake the GCP2 at different times their findings can confidently be compared.

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Graded Care Profile 2

It can:

- ✔ Support decision making at all levels and between levels
- ✔ Support a better understanding of parents' capacity to and ability to sustain change
- ✔ Describe when sub-optimal care becomes neglectful
- ✔ Bring what life is like for the child to the forefront

Graded Care Profile 2
Measuring care, helping families

Who can use the tool?

- ✔ Social workers
- ✔ Family support workers
- ✔ Teachers, home school link workers
- ✔ Health staff
- ✔ Police, Youth workers, voluntary sector
- ✔ Childcare providers
- ✔ Parents
- ✔ Young people

✔Used with informed consent

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Reasons for using the tool

Where neglect is suspected:

- Assess the quality of current care / frame concerns
- Get the baseline measurement
- Ensure interventions are targeted
- Monitor progress

Graded Care Profile 2
Measuring care, helping families

NSPCC Learning

- What the tool looks like

AREA A:
Physical Care

	1 Always met	2 Met	3 Met most of the time	4 Not met most of the time	5 Never met
A1 Nutrition					
1.1 Quality	Parent/carer is aware and proactive; provides excellent quality food and drink.	Parent/carer is aware and manages to provide reasonable quality food and drink.	Parent/carer provides reasonable quality food but inconsistent through lack of awareness or effort.	Parent/carer mainly provides poor quality fattening or sugary foods, occasionally food is of reasonable standards if under pressure from professionals.	Quality not a consideration at all or lies about quality.
1.2 Quantity	Ample.	Adequate.	Most of the time quantity of food is of an adequate amount – but at times can be variable.	Variable to low or too much food is offered.	Child is mostly starved or routinely overfed.
1.3 Diet for children with specific requirements	Specific dietary requirements are fully met, proactive but balanced approach.	Specific dietary requirements are fully met.	Most of the time specific dietary requirements are met.	Most of the time the specific dietary requirements are not met.	Specific dietary requirements not met or ignored.
1.4 Preparation	Painstakingly cooks and prepares food, the child is always put first.	Food is well prepared for whole family, always meeting the child's needs.	Most of the time the preparation is adequate although it can be variable.	Most of the time the preparation is not adequate, child's needs are not taken into account.	No preparation or effort is made, the child lives off snacks and cereals, when and what they can.
1.5 Organisation	Meals elaborately organised, family always sits together at regular times.	Well organised, family often sits together at regular times.	Most of the time there is some organisation, although timings and seating arrangements are variable.	Most of the times meals are disorganised with no clear meal times.	No organisation, chaotic, children eat when and what they can.

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Graded Care Profile 2
Measuring care, helping families

Strategic benefits:

- Creates a consistent, objective approach across all disciplines
- Creates a common language between agencies
- Quality of referrals improved
- Costs avoided, redistribution of resources
- Improved outcomes for children and families
- Improves practice

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Graded Care Profile 2
Measuring care, helping families

Practice benefits:

- Increased confidence in decision making at all levels
- Supports good working relationships with parents
- Helps communicate concerns to parents
- Focusses assessment of what life is like for the child
- Evidences a parent's capacity to change/not change
- Supports a better and broader understanding of neglect
- Improves quality of referrals

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Graded Care Profile 2
Measuring care, helping families

Benefits to families:

- Parents encouraged by strengths identified and seeing improvements in scores
- Better understanding of how their behaviours may harm child
- Breaks concerns down in priority areas – more achievable
- Supports adolescents understanding of the care they should be receiving
- Many examples of escalation and de-escalation

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Where in the system can you use GCP2 to support decision making?

- ✔ Early help – identify needs and areas of strengths
- ✔ Supports social work practice and decision making – ICPC or Review
- ✔ Can support legal decision making and as part of the court bundle

However, GCP does not:

- ✖ Replace good professional practice
- ✖ Assess the reason for the neglect
- ✖ Replace good engagement
- ✖ Measure impact

Supporting use of GCP2:

Children and families cannot benefit from a GCP2 they do not experience

Support staff by:

- Being clear on when GCP2 should/must be used
- Provide support when staff first start using the tool
- Ask for GCP2's in supervision
- Ensure GCP2's are recorded on your case recording system
- Remind staff of the benefits to using GCP2, to their own practice and for families

How Torbay is implementing GCP2 locally

- Key priority of the TSCP Neglect Strategy.
- Accessing documents and further guidance.
- Referrals for neglect.
- Completed GCP2 can be uploaded to LiquidLogic as a document.
- Support surgeries and dedicated GCP2@torbay.gov.uk email address.
- Quarterly Returns
- Keeping Licenced Practitioners current

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Measuring impact

How will we know when we've achieved our aim?

Capturing GCP2 data will:

- ✔ encourage practitioners to use the tool
- ✔ Who and how many are using
- ✔ How many children the tool is used with
- ✔ analyse the data to understand the prevalence and types of neglect, demographics and help shape future services
- ✔ Show when GCP2 is having an impact on the local population of neglected children

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Participant Discussion

Over to you…

Please choose a table representative to feed back.

For live online viewers – please use the QR code to submit your feedback online too.

Questions:

- What are the benefits of the GCP2 tool?
- When might I use the GCP2 tool?
- What is preventing practitioners using the GCP2 tool?

NSPCC Learning

Thank you

Any questions?

gcp2@torbay.gov.uk

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Thank you

Children's Services

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Q&A

Executive Panel and Presenters

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Final Remarks

Roy Linden, South Devon Policing Commander,
Devon & Cornwall Police

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Thank you for your time and engagement.

We hope to see you again next year!

*Last year's **i-learn evaluation form** feedback informed today's event – please let us know what went well and share any ideas for next year…*