



Annual Report 2020-2021



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Foreword

This annual report covers the period 1st April 2020 - 31st March 2021 and represents the full year of work undertaken by Herefordshire Safeguarding Children's Partnership (HSCP), the former Safeguarding Young People in Herefordshire (SCYPYIH) established in September 2019.

This year has been like no other due to the additional demands posed by the Covid-19 pandemic on all our partner agencies. Herefordshire agencies were quickly galvanised in the early part of the year to provide assurance around the ability and capacity of services to provide a contingency plan. This was in response to a rapid change to the service delivery and arrangements across the public sector as the Government increased restrictions that ultimately led to the national lockdown as the pandemic took hold internationally.

Fortunately, during this period Herefordshire did not experience an increase in referrals for early help support and statutory intervention like many of the local authority areas across the country.

Nationally, there has been a significant increase in domestic abuse reports, with [Refuge](#) reporting a 25% increase since lockdown in April 2020. Herefordshire, in this period, while not reporting a significant increase to domestic abuse referrals, did report seeing an increase of domestic homicide during Quarter 3 and 4 of 2020 -2021.

Herefordshire agencies have responded to the challenges presented by the Covid-19 pandemic and many were able to provide alternative approaches to continue to support children, young people and families through video links or other means of on-line support. Some face to face visits continued in the most vulnerable cases when assessments indicated a need for a visit. However, many appointments with services and support offered was greatly changed due to the impact of the pandemic, redeployment of key front-line staff and government restrictions. It is understood that the revised arrangements in Herefordshire did further limited the opportunities to listen to the concerns of children and young people, an issue that is a significant area for improvement for the partnership.

The HSCP recognises the impact of the Covid-19 pandemic on everyone and acknowledges the continued work to safeguard children and young people across the

partnership despite the difficulties and challenges the response to the pandemic has posed.

There is recognition of the service improvements that are now taking place within Herefordshire. However, in acknowledging these improvements, we are mindful there continues to be much more we need to do, including the continued work we are undertaking as part of the improvement journey following the High Court Judgement and the Ofsted focussed visit to local authority children's services in 2021.

The Safeguarding Children Partners are a partnership and we will continue to work together to provide strong leadership in the co-ordination of improvements to the multi-agency safeguarding system, for the benefit of all children and young people living in Herefordshire.

Herefordshire Safeguarding Partners – Accountable Officers



Paul Walker
Chief Executive
Herefordshire Council



Simon Trickett
Chief Officer
Herefordshire and
Worcestershire
Clinical Commissioning Group



Pippa Mills
Chief Superintendent
West Mercia Police

Herefordshire Safeguarding Partners - Delegated Officers



Darryl Freeman
Director for Children and Families
Herefordshire Council



Lisa Levy
Chief Nursing Officer
Herefordshire & Worcestershire
Clinical Commissioning Group



Edward Williams
Superintendent
West Mercia Police

Independent Scrutineer comments

I have used the requirements set out in Working Together 2018 to provide scrutiny of the HSCP Annual Report 20-21. Working Together 2018 determines that statutory partners should produce a report that:

- sets out what partners have done as a result of the arrangements, including on child safeguarding practice reviews, and how effective these arrangements have been in practice
- evidences the impact of the work of the safeguarding partners and relevant agencies, including training, on outcomes for children and families from early help to looked-after children and care leavers
- provides an analysis of any areas where there has been little or no evidence of progress on agreed priorities
- Details the decisions and actions taken by the partners in the report's period (or planned to be taken) to implement the recommendations of any local and national child safeguarding practice reviews, including any resulting improvements
- Sets out the ways in which the partners have sought and utilised feedback from children and families to inform their work and influence service provision.

The four strategic priorities set out in this report were formally agreed by partners during the reporting period and were designed to meet local need. They were not however, supported by a delivery plan to drive forward service development and improvement across the partnership. As a result, the narrative provided by statutory partners about work undertaken in 2020-21 describes activity completed by or within an individual organisation, as opposed to that which has been achieved as a result of their leadership of the safeguarding system and collaborative working. The lack of delivery plan, and lack of evidence of partnership achievements, coupled with the delay in

developing a fit for purpose multi-agency performance dataset and quality assurance framework are significant factors in statutory partners being unable to evaluate the impact of their work and that of relevant agencies from early help to looked after children and care leavers. This does not mean that there has been no oversight or quality assurance of safeguarding activity co-ordinated by statutory partners, however it remains under-developed.

Partners increased the budget available for 2021-22 to fund dedicated performance analyst capacity and completed a review of the partnership arrangements in conjunction with relevant partners. The review resulted in the decision to establish the Executive Support Group to co-ordinate the implementation of the strategic priorities across the partnership albeit, the report illustrates that the impact of the strengthened governance arrangements has not yet been realised. The review identified that work was required to develop arrangements to seek and use feedback from children and families.

The report provides an overview of the training offer and the key findings of two Serious Case Reviews and reports that the Joint Case Review subgroup has overseen activity to act on these findings. Future reports should set out the actions taken and any resulting improvements; this should also include the response taken in relation to the findings of national Child Safeguarding Practice Reviews.

The report describes how partners came together to monitor the impact of Covid 19 on the safety and wellbeing of vulnerable children and the ways help and support continued to be provided to children and families during the unprecedented challenges of the pandemic. It is important to acknowledge the creativity and tenacity of front-line staff, managers, and leaders during these times and for them to remain open to and professionally curious about harm that remains unseen, unheard, unknown, or untold as a result of restrictions imposed during the pandemic

The year ended with myself, the CCG and the Police partners being made aware by the Local Authority that a critical High Court judgement in relation to children in the care of Herefordshire Council was imminent. The judgement was issued in April 2021 and resulted in the creation of a Children's Services Improvement Board in the county to oversee an improvement plan. The leadership and culture of partnership working are central to the realisation of the ambitions of the improvement plan. A stronger culture of shared accountability, visible leadership and robust governance arrangements will enable the safeguarding partners to build on all agencies commitment to provide help and support to children and families at the right time and to tackle those issues that are having the greatest impact on the safety of children and young people. This will be a journey of improvement to provide front line staff with the tools, support, and conditions to work together to identify, assess and safeguard children and young people. The strengths-based practice model which was introduced in 2020-21 will play an important role in this improvement journey.

Partners will publish this report; it will also be taken through the appropriate internal governance structures in the 3 statutory partners. In addition, I will meet with the nominated representatives of the 3 safeguarding partners to discuss this report so that those individuals, who are ultimately accountable, are both sighted on the work/effectiveness of the Partnership and given an opportunity to influence its future ways of working.



Liz Murphy
Independent Scrutineer
January 2022



Governance Arrangements and Membership

The Herefordshire Partnership Vision is:

Children are safely cared for by their family because services work well together, and with families

Working Together to Safeguarding Children 2018 - This statutory guidance says we must publish a report at least once in every 12-month period. It must set out what we have done as a result of the arrangements, including on child safeguarding practice reviews. The report should also include evidence of the impact of the work of the safeguarding partners and relevant agencies.

Governance Structure - Safeguarding Children and Young People in Herefordshire (SCYPIH) 2020-2021



The Herefordshire Safeguarding Children’s Partnership is made up of the three statutory safeguarding children partners West Mercia Police, Herefordshire and Worcestershire Clinical Commissioning Group and Herefordshire Council, along with our relevant agencies, which include:

- Wye Valley NHS trust
- Herefordshire and Worcestershire Health and Care NHS Trust
- Herefordshire and Worcestershire Fire and Rescue
- Herefordshire Voluntary Organisation Support Service (HVOSS)
- West Mercia Youth Justice service

Further information is available on the Herefordshire Safeguarding Children Partnership’s [website](#)

This report presents the work that the Herefordshire Safeguarding Children’s Partnership (and the organisations that make up the HSCP) have done, in its full year of operation, to keep children and young people safe. The report covers the period from 1st April 2020 to 31st March 2021. It has been produced using evidence and information compiled by Statutory Safeguarding Partners and Herefordshire’s Relevant Agencies. In addition, information has been gleaned from improvement reports for Children’s Services and Special Educational Needs and Disabilities (SEND), Ofsted Focussed Visit undertaken in December 2019 and other areas of improvement work undertaken by partner agencies.

The Herefordshire Safeguarding Children’s Partnership arrangements reflect the fundamental legislation as outlined above. The published arrangements were implemented on the 29th September 2019.

The role of the Safeguarding Children Partners is to:

- coordinate local work to safeguard and promote the welfare of children, and
- to ensure the effectiveness of what the member organisations do individually and together.

The purpose of these local arrangements is to support and enable local organisations and agencies to work together in a system where:

- Children are safeguarded and their welfare promoted
- Partner organisations and agencies collaborate, share and co-own the vision for how to achieve improved outcomes for vulnerable children
- Organisations and agencies challenge appropriately and hold one another to account effectively
- There is early identification and analysis of new safeguarding issues and emerging threats
- Learning is promoted and embedded in a way that local services for children and families can become more reflective and implement changes to practice
- Information is shared effectively to facilitate more accurate and timely decision making for children and families

The governance arrangements for the HSCP are as follows:

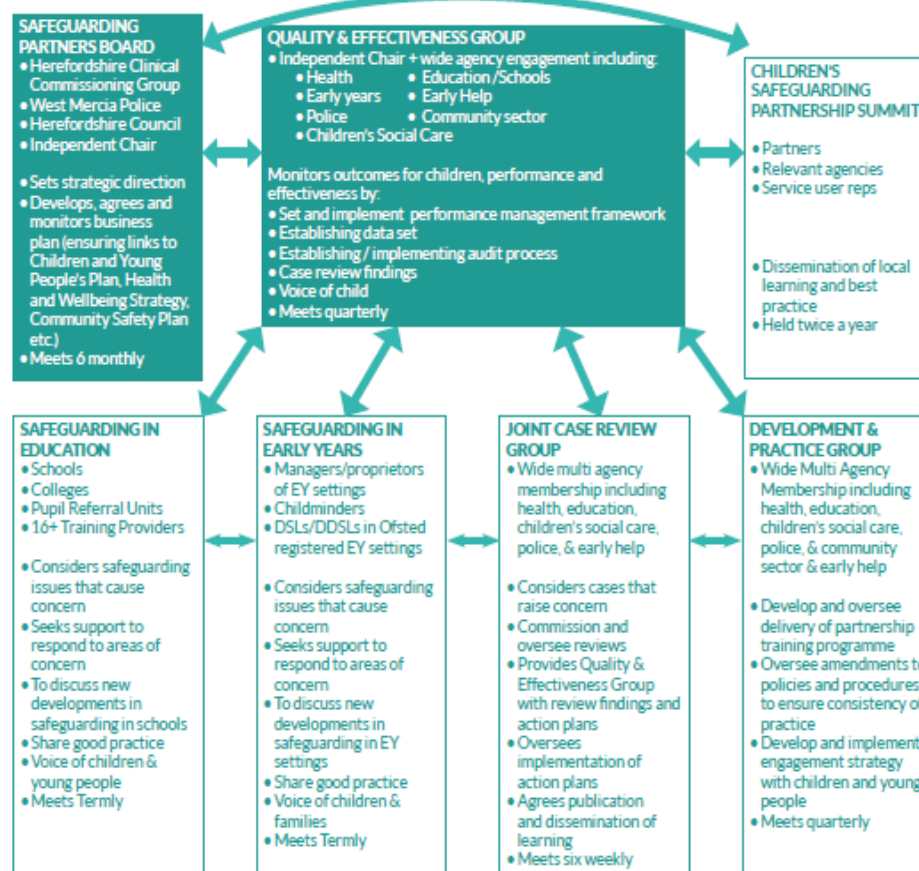
There is a Safeguarding Partners Board, the core membership comprises of the senior officers from the three statutory agencies who have been given delegated authority to discharge the partnership statutory function. This small strategic group is independently chaired to support independent scrutiny and oversight of the partnership arrangements. This board provides the overall strategic direction for the development of safeguarding for children and young people and ensures the statutory function required under legislation is fulfilled with a clearer focus on quality and learning.

The Statutory Partner members have joint and equal responsibility for the success or failure of its multi-agency safeguarding arrangements (MASA). The partnership understand the absolute dependence on relevant agencies to make a difference to the work with children young people and families. The partnership continues to work in collaboration with relevant agencies and as such considers the wider systems contribution in the development review and implementation of Herefordshire’s (MASA).

Independent advice and scrutiny of the safeguarding arrangements is provided by Liz Murphy, the Independent Scrutineer and Chair of the Herefordshire Safeguarding Children Partnership.

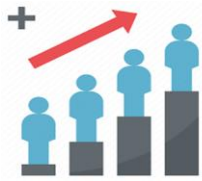
The HSCP continues to be strengthened over this year by the work of the Quality and Effectiveness Group which monitored the outcome of the work of the partnerships sub-groups

Figure 2 - Safeguarding Children and Young People in Herefordshire



About Herefordshire

Population



Herefordshire is home to around **35,900 young people aged under 18** - this is projected to increase to 37,000 by 2025.

Herefordshire has the fourth **lowest** population density in England, with a land area of 2,180km² but a population of only **189,300** (2016).

Herefordshire has, on average, relatively low levels of overall, multiple deprivation and a relatively low proportion of children living in income deprived households (14% compared to 20% across England) - but this still equates to 4,300 children living in poverty across the county. Around 1,900 county school children are eligible for free school meals.

Most of the county (**95%**) is **rural** and **53%** of the population live in rural areas.

The county has an older age population profile than England & Wales, with **24%** of the population aged 65 or older compared to **18%** nationally; **18.9%** of the current population are aged **0-18yrs** compared to 21.3% nationally.

1.4% of people are from black, Asian or minority ethnic background compared to 13.6% in England. The population mix as a footprint of **97% white, with 2% Polish and Eastern European, and 0.5% Asian and Afro-Caribbean.**

Overall numbers of children have declined by around **7%** over the last decade. However, the number of under-fives and births have been rising for the best part of the last decade. The next five years are expected to show a gradual increase in the numbers of children, to around **33,200** by 2023.

A larger proportion of school-aged children (2017/18 academic year) have a statement for SEN or EHCP locally (**3.1%**) compared to nationally (**2.9%**). However, local figures are in line with those for the West Midlands region (**3.1%**).

Unemployment in the county is low, but average earnings in the county are significantly below both the regional and national averages. Average house prices are high compared with elsewhere in the region.

Annually there are more people coming into the county than leave across all ages except **18-20 year-olds**, the ages at which young people are most likely to be moving away to study.

The Covid Context

Education

There have been no statutory tests or assessments in schools since 2019. GCSE's have been awarded to students. In 2020 these were based on teacher assessments and in 2021 they were based on teacher assessment which usually included an assessment of the performance in an examination.



In 2019:

75.4% of children in Herefordshire achieved a Good Level of Development at the end of the foundation stage, compared to **71.8%** of children in England

69% of pupils in Herefordshire reached the expected standard in Reading, Writing and maths at the end of **key stage 2**, compared to **65%** of children in maintained schools in England

The average **Attainment 8 score** of students in Herefordshire at the end of **key stage 4 was 44.7** compared to 46.7 for all students in state-funded schools in England

The average **Progress 8 score** of students in Herefordshire at the end of **key stage 4 was -0.19** compared -0.03 to for all students in state-funded schools in England

The annual **NEET outturn for 2021** reflects an average of the months Dec 2020, Jan 2021 and Feb 2021. In Herefordshire the percentage of 16 & 17 year olds who were **NEET or Not Known = 5.9%** compared to an England average of 5.5%

The spring 2021 School Census 13.4% of pupils were reported with ethnicity of BAME.

8.7% of pupils were **reported with a first language** other than English. There were 66 languages in addition to English that were identified as the first language of at least 1 pupil in the 2021 spring census

Exclusions

No. of permanent exclusions reported in Herefordshire maintained schools and academies 2019-20 academic year was 15

Permanent exclusions rate:	Herefordshire	0.06
Permanent exclusions rate:	England	0.06

Elective Home Education (EHE)

As there is no statutory register of pupils receiving elective home education, potentially there will be additional children receiving EHE for whom the local authority is unaware.

Nationally since the onset of the pandemic there has been a rise in the number of pupils choosing elective home education. Particularly at the start of the 2020-21 academic year, following the first period of school closure we saw an **increase in the EHE cohort which rose from almost 200 in early 2020 to approximately 275 by the end of 2020.**

The reasons behind parents withdrawing their children to EHE are multifaceted. Some parents will have enjoyed the enforced time spent with children at home and discovered that they can and enjoy, playing a part in their child's learning. Some parents will have been fearful of their children returning to school with the pandemic not yet at an end. Parents may have had concern for their children, for themselves if they were vulnerable or elderly family members where the household was multigenerational. There will also be a small number of children who have historically had poor attendance at school, whose parents have decided that EHE might be a suitable route out of a difficult situation.

A number of children who became EHE have subsequently returned to maintained education perhaps because parents felt unable to educate their children at home or because they saw Covid 19 restrictions easing. Number of Herefordshire children registered in receipt of elective home education as at 31 Mar 2021: **274**

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Schools

There are 99 maintained educational establishments in Herefordshire. These include primary, secondary and all-through mainstream schools and academies plus special schools and academies and alternative provision.

64 are local authority maintained establishments
35 are maintained academies
78 are primary phase establishments
14 are secondary phase establishments
1 is an all-through establishment
1 is an alternative provision pupil referral unit



5 are special establishments catering for students with special educational needs and disabilities (SEND)
1 is an alternative provision pupil referral unit

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Health

Prevalence of obesity in children in Yr. R is 12.5%, compared to a national rate of 14.2%. In Yr 6, the prevalence is 21.6%, compared to a national rate of 20.2%. Prevalence of underweight children in Yr. R is 0.7%, compared to a national rate of 1%. In Yr 6, the prevalence is 0.7%, compared to a national rate of 1.4%

21.2 per 100,000 of 0-5 year olds in Herefordshire have a hospital admission for dental caries, compared to a national rate of 37.5.



Under 18s conception rate per 1,000 is 18.9, compared to a national average of 16.7. 55.4% of these conceptions lead to an abortion. Herefordshire has a rate of 0.7% teenage mothers compared to a national average of 0.6%.



The rate for hospital admission episodes for alcohol-specific conditions is 34 per 100,000 compared to a national rate of 31.6. For substance misuse, the hospital admission rate for 15-24 year old is 77.2 per 100,000 compared to a national average of 83.1.

Hospital admissions as a result of self-harm in 15-19 year olds is 833 per 100,000 compared to a national rate of 659.5. For 10-14 year olds this rate is 251.6, and nationally is 226.3 per 100,000.



Child Death Notifications in Herefordshire 2019-2021

Between 1st April 2019 and 31st March 2021, a total of **27** child death notifications were received for Herefordshire resident children.

- 48% of notifications were male and 52% were female.
- 56% of the deaths were expected and 44% were unexpected.

The data does not reflect a significant link with deprivation. However, there were a higher number of deaths categorised as sudden infant death syndrome (SIDS) in the most deprived postcodes in Herefordshire.

Poverty and Deprivation

Herefordshire is a beautiful and relatively healthy place to grow up and live in, but as is the case elsewhere, inequality (differences in social status, wealth, or opportunity between people or groups) means some communities are more deprived than others.

Poverty and deprivation is an issue on the nation's agenda. Its impact on the safety and welfare of children cannot be overstated. The above table provides a snapshot of information about poverty and deprivation across Herefordshire by ward.

Herefordshire geography is complex resulting in variations of deprivation across the county and within individual wards which span both rural and town communities.

Herefordshire experiences average levels of overall, multiple deprivation. However, it contains seven of the county's 12 areas that are included among the 25% most deprived areas in England. The impact on children and young people's safety and well-being will also reflect this level of complexity and variance.

Many of the wards are deprived in terms of access to services, employment and income, education and, due to geography the rural communities in particular along with issues of social isolation, rural communities are known to have compounded risk factors such as domestic violence and mental health.

It is also understood that, where deprived communities have limited supports and services which promote positive health and wellbeing, there is an increased risk of poor lifestyle choices and risk taking behaviours such as alcohol or drugs misuse.

Overall, 14% of children live in poverty. This equates to 4,300 children living in poverty across the county, meaning that their household income is no more than 60% of the country median income and as stated above this level varies significantly across the various wards in the County.



Herefordshire's weekly earnings are significantly lower than those in the West Midlands region £552.50 (\pm £12.99) and England £589.90 50 (\pm £3.47), 13% and 19% respectively.

The total number of claimants in May 2020 was 5,065, which represents a 140% increase since March 2020 and compares to a 114% rise from March to May in the UK as a whole

Herefordshire has a family homelessness rate of 3.8 per 1,000 compared to a national rate of 1.7.

SAFEGUARDING CHILDREN – what have we done as a result of the safeguarding arrangements? 2020-2021 in Review

Responding to Coronavirus

During the period of Covid-19, the partnership has had to work smarter to ensure that collaboration is continuous. This has meant utilising technology and becoming creative with ways to engage. Key events were held over video conferencing throughout the year. Partners have faced a number of challenges.

In this reporting period (April 2020 - March 2021) the United Kingdom was subject to 'lockdown' three times due to the global pandemic – COVID-19. The Safeguarding Partners met regularly to coordinate the multiagency support for the most vulnerable children, young people and families. In order to monitor the impact of the pandemic the three Safeguarding Partners, (the CCG Chief Nursing Officer and Head of Quality and Safeguarding/Designated Nurse, Director of Children's Services, Police Superintendent); HSCP Independent Scrutineer, Safeguarding Adult Board Independent Chair and Director for Adult Social Care; met initially weekly, moving to fortnightly then monthly, forming a Covid-19 Partnership Board. The purpose was to understand the impact of Covid-19 on the system and what action needed to be taken as system leads, to protect the most vulnerable in our population. Crucially, because protection of life and the NHS was critical, many staff

nationally and locally were redeployed from front-line children's health services during the initial crisis period.

Staff welfare during this time was of increased concern for the partnership and much focus was given to engaging with staff. In February 2021, there was an opportunity for our frontline practitioners to come together to tell us what it's like for them in delivering services particularly during the pandemic. The multi-agency Practitioner Forum was also an invaluable platform to tell staff about key changes to our multiagency safeguarding arrangements.

We also want to pay tribute to those lost and affected by the pandemic personally and thank all our practitioners for their hard work and dedication to the continued efforts to work together to safeguard children and young people of Herefordshire.

The Safeguarding Partners and relevant agencies played a key role in the response to the local impact of the pandemic on children and families and services. They were asked to produce information on their reflections of services pertinent to children and families over this period.



Herefordshire Safeguarding Children Partnership Priorities - Update on 2020-2021

Strategic Priority 1 - Leadership

Aim: Through the leadership of the three Statutory Partners, promote a culture of collective responsibility, accountability and professional challenge built on guiding principles of respect and openness to forge an effective Safeguarding Children Partnership with strong governance, shared work practices and meaningful engagement with children and families.

Update

Safeguarding children is a multi-agency process and as such needs good collaboration with safeguarding partners and relevant agencies to support the successful delivery of arrangements and the agreed priorities.

The senior leadership team across Herefordshire Council has experienced some instability and as such this has impacted on performance, but there has been much work undertaken to bring dynamic and effective leaders to refocus Herefordshire improvement plans.

The Wye Valley NHS Trust recruited to the Named Midwife role. The Trust agreed to move the role into the Safeguarding Children Team, as it was recognised that this needed to be separated from the clinical practice of midwifery. This has been shown to be very beneficial in terms of impact e.g. supervision compliance, training, staff support with case management. This leadership change has resulted in community midwifery supervision compliance consistently standing at 100% and new drop-in sessions for hospital midwives to access child safeguarding supervision commenced. There

has been a significant improvement with regards to case progression and timescales according to the pre-birth practice handbook with close working between named midwife safeguarding and unborn case progression officer. Cases are managed in a timely manner and all agencies are involved in decision making- the work between the named midwife safeguarding, case progression officer, social worker and midwives is invaluable and has improved working together and safeguarding practice. In addition, two new recruitments were made to the Safeguarding Children team. They have received appropriate training for their role, both completing child safeguarding supervision skills training and the senior member completing leadership in safeguarding training.

Partners have continued to provide leadership and support the partnership arrangements and ensure that sub-structures are well represented by key safeguarding partners and relevant agencies.

Strategic Priority 2 – Neglect

Aim: We aim to recognise, prevent and reduce neglect to improve the safety and wellbeing of children and young people in Herefordshire.

Update

The sub group was restarted with a new Chair following a hiatus when the previous Chair moved posts. Regular meetings started from July 2020 and have been held every quarter since then. Chairing has been by the Assistant Director for Safeguarding Children Quality and Review.

Work streams from this sub group / task and finish groups to which partners have contributed include:

Wye Valley Trust have reported that

- Delivery of GCP2 training both internally to Trust staff as a single agency and also to the multi-agency training courses offered by the

partnership. Within the trust social care supervision explores the identification of neglect and use of GCP2 as appropriate

- The development and implementation of the Injuries to Babies and Children under 2 years policy across the West Midlands. Supporting the MASH team manager to ensure practitioners understand the policy and apply it.

Strategic Priority 3 - Right Help, Right Time

Aim: We will seek to provide children and families with the right help and support at the right time through a coordinated multi-agency safeguarding approach.

Update

The MASH works to a well-established multi-agency model.

There is a good response to immediate harm to children between education, police, social services and other relevant agencies.

There is some variance in understanding and application of threshold.

Good impact of early intervention services. The Early Help Hub performed well during this period, meeting its target of 95% of contacts completed in 72 hours since it started. The impact of reducing the number of contacts going into MASH is being evidenced.

A significant amount of work has taken place to improve the quality and timeliness of the work completed within the MASH and the assessment teams. Data and quality assurance activity is showing some evidence of improvement.

Performance reports measure how many contacts the MASH receives and the outcome of all contacts following the initial screening process. This was broken down and has evidenced:

- the Police Notifications of Domestic Abuse that go to the Domestic Abuse Hub
- the contacts that are sent to the Early Help Hub
- the contacts sent to MASH

The reports additionally measure the numbers being received, the timeliness of completion and outcomes of referral and assessment.

Strategic Priority 4 - Child Exploitation

Aim: We aim to prevent and reduce child exploitation and improve the safety and wellbeing of children and young people in Herefordshire.

Update

Wye Valley NHS Trust - There were increased Child Exploitation (CE) & Missing sub group meetings after the initial impact of Covid and the need to establish virtual working platforms. Meetings were held monthly from May to August 2020 and then have been bi-monthly since.

WVT have attended all meetings except one where CCG have been the health representative. Transitions work has been added to the group agenda and been delegated to the Prevent and Disrupt group. It is hoped that an adult social care representative can join the group to further this. There is a recognition that those turning 18 continue to be vulnerable to exploitation and need ongoing support. CLIMB project has commenced in Herefordshire to try and prevent young people being drawn into exploitation and referrals are being received.

There has been an added focus on hearing the child's voice within the CE sub-group via the CE team, this is a standing item. There has been progress in

understanding and rising to the challenge of child exploitation in Herefordshire and some very good work is being done but progress has been hampered in the last year due to the pandemic.

Without a HSCP comprehensive CE multi-agency dataset/audit during the last year it is difficult to know about the effectiveness of these processes.

Herefordshire Children's Service - The service structure in relation to responses to children at risk of extra-familial harm in Herefordshire has rapidly evolved since 2019. In January 2019 there were approximately 13 children in Herefordshire recorded as being at risk of child sexual exploitation (CSE). As a direct response to a Serious Case Review which highlighted a number of recommendations in relation to responses to children experiencing Child Sexual Exploitation, the Local Authority undertook a full service review of cases where CSE was identified. One of the recommendations was for Herefordshire Safeguarding Partnership, formerly the Herefordshire Safeguarding Children Board, to adopt a contextual safeguarding approach, this is yet to be progressed. In February 2019 a review of all cases across the service identified 62 young people and care leavers as being at potential risk of extra-familial harm and requiring assessment. However, there was no framework in Herefordshire to assess other forms of exploitation, only CSE. In July 2019 the West Mercia Child Criminal Exploitation Needs Assessment was published and the New Child Exploitation tools were launched across the Children and Families Directorate and Safeguarding Partnership.

Further expansion of the team since 2019 has included recruitment of an extra child exploitation worker to meet growing demand and offer direct work and outreach support in relation to CE across the service. A Managing Practitioner and another CE coordinator were appointed in June 2020. The CE team has an approach that incorporates Harmful Sexual Behaviour, Peer on Peer abuse, Modern Slavery and Youth Violence.

Making the transition from an approach where CSE is the lone form of exploitation to one which includes the additional areas and all age approach, recognised as Contextual Safeguarding, is a significant shift in both culture and strategic response.

This required further development of the Child Exploitation Team within Children's Services and also expansion to existing CSE coordinator role. The CSE coordinator role transitioned to the CE Coordinator (Child Exploitation) and now involves chairing Risk Management Meetings and providing oversight on all Child Exploitation assessments.

The Look Closer campaign in May 2020 and Child Exploitation awareness in March 2021 provided frontline practitioners with bespoke learning to strengthen awareness and improve response to this matter.

The Prevent and Disrupt group continues to feed through themes and trends to inform the safety plan and provide an updated overview to the CE & Missing sub-group. There is an additional added focus now on Harmful Sexual behaviour (HSB) and Peer on Peer abuse. There has been progress with development of a social media platform locally for children and young people which will include input from CYP directly.

Below is an example of strong partnership working in a case where a young person was at risk of exploitation.

Anonymised Case Study

Young Person A was admitted to the paediatric ward having taken an overdose and expressing suicidal ideation. He was known to be at high risk of sexual exploitation and was receiving services from children's social care.

During his stay on the ward, a series of multi-agency meetings including strategy discussions, risk management meetings and discharge planning meetings were held, which ensured clear and effective communication between the agencies supporting him. At these meetings, the level of risk to the young person was assessed / reviewed and decisions made to ensure appropriate care and interventions were being provided to keep him safe. The paediatric ward team worked well with the young person to ensure that his voice was heard and that he remained safe.

He was able to express that neither he nor his parents were able to keep him safe and consequently he was discharged from the ward to residential accommodation out of county, which had expertise in working with young people experiencing sexual exploitation.

Early Help

The Early Help approach in Herefordshire is known by all agencies and practitioners as the Right Help, Right Time.

Early Help has developed considerably since the introduction of Herefordshire's Early Help Assessment (EHA), which replaced the Common Assessment Framework (CAF). There were 1889 EHAs at 31st March 2021 compared with 650 CAFs during the same period.

Partnership working has been strong within Early Help across Herefordshire. Data for the year 2020/21: The Key Worker for EHAs - Primary Schools 28.2%, Health Visitors 17.8%, Other Health professionals 5.5%, Secondary Schools 17% and Local Authority early help staff 28%. The reduction of health professional engagement is related to the re-deployment of health practitioners in response to the crisis arising from the Covid-19 pandemic.

Early help is about supporting families who are struggling with the day-to-day challenges they are facing, it is fully integrated with the Supporting Families programme (previously Troubled Families and called Families First in Herefordshire). Supporting vulnerable families to tackle problems such as domestic violence and mental ill health is a priority for agencies in Herefordshire. The EHA is linked to the supporting families' criteria and outcomes for families to the Herefordshire Family Outcomes Framework.

Early Help Assessments are managed by the Early Help Coordinator team who administer the assessments, support key workers and organise and facilitate Early Help Multiagency Group meetings (MAGs). MAGs are multi-agency meetings where partner agencies meet to discuss cases which have drifted (with the consent of the family), share good practice and discuss any community concerns. These are usually held twice termly in eight locations throughout the county and are well attended by representatives from schools, health professionals- including mental health professionals, housing associations, Police and voluntary agencies.

Due to Covid-19, these were taking place virtually. This has had a positive consequence with improved multi-agency attendance at the meetings. The MAGs are usually chaired by an experienced Early Help Manager and social care provide a senior social worker at every other meeting to give advice and guidance on cases. The presence of a social care representative since November 2018 has been appreciated by partner agencies.

Early Help internal support services are trained in Make Every Contact Count (MECC) so are equipped to talk to, signpost and support families about healthy eating, oral health (childhood obesity from yr 6 and dental health are both issues in Herefordshire despite being lower than the national average), physical activity, smoking cessation, alcohol consumption, sexual health and mental wellbeing.

The Early Help service delivers parenting programmes to mixed groups of parents from those accessing just universal services to those with children on Child Protection Plans. The programmes are Solihull for parents of children 0-5 years, Triple P standard for parents of children 2-10, Triple P Teen for parents with teenagers, and Stepping Stones Triple P for parents of children with additional needs.

The delivery of parenting programmes to groups of parents in a building had been suspended due to Covid-19 but 'bite-sized' parenting workshops and delivery of the parenting programmes were still offered virtually. Whilst there was reduced engagement to begin with parents believing the situation would get back to normal and wanting to wait for face to face intervention but this did improve over the period. There was not a concern resulting from digital poverty as most families had mobile phones or laptops. There were issues of poor internet signals that at times caused an interruption to engagement.

There are three specialist family support services working with the whole family with EHAs. They go into the family home and work with individual family members and families as a whole. The three services are:

- ✓ an internal, experienced Early Help Family Support team which works with families with the most complex needs and those families stepping down from statutory intervention
- ✓ Vennture4families, a commissioned service using a professional link worker and volunteer model, and
- ✓ HomeStart, also commissioned which uses a volunteer model

Vennture4families work with families who are lower level three on the Herefordshire level of needs and HomeStart with families with less complex needs. The specialist services seek to address the core issues affecting families systemically such as parenting issues, mental health issues, domestic abuse, problem debts, parental conflict, drugs and alcohol abuse, with a strong focus on worklessness using the Supporting Families Employment Advisor.

Impact on Services

The three specialist services continued to support families and work with them to bring about sustainable change. Each service area has followed their own organisation's guidelines as to what work they should do with families.

The internal **Early Help Family Support** team vacillated between virtual working with families at the start of Covid-19 (except for families where there were concerns that the circumstances suggested a risk of escalation into statutory services), or direct work with the families in their home or at outdoor spaces. Direct visits followed Public Health/Council guidelines and PPE was used where required. Work continued with all families by phone or using 'WhatsApp' video facility.

The specialist services continue to close cases with a 'Family Wellbeing Plan' which leaves the family with information on the success they've achieved and detailed information about where to go within their family, friends and community if they feel they need support, rather than perhaps letting things slide and requiring specialist services intervention again. The plan is designed

to be visual and is laminated so it can be put in a place for easy access by the family members.

The Named Midwife (NM) has developed where families of babies that are removed at birth can be offered a memory box, to collect different memories for themselves and their child. This allows parents to focus on positives and give them encouragement to make positive changes to increase the chances of re-unification.

The link between Early Help and the Multiagency Safeguarding Hub (MASH) has been strengthened to further ensure families receive the Right Help at the Right Time by the formation of the Early Help Hub (EHH), launched on 21st September 2020. The EHH was to be located beside MASH in an identified building however due to Covid-19 the EHH worked virtually throughout this period.

The EHH would take all contacts to the team with

- ✓ no level of need identified,
- ✓ all level 2 &3 contacts,
- ✓ including level 3 Multi Agency Referral Form's (MARF's)

This approach ensured families are offered the **'Right Support at the Right Time'** and released MASH to spend more time on investigating threshold and level 4 cases. Any cases deemed to be level 4 by the EHH go directly into MASH and vice versa those cases on further investigation by MASH which do not meet threshold go to the EHH for signposting, advice and guidance or support through an EHA being offered as appropriate.

In November 2020 the **EHH telephone line** was launched for children and their families and professionals. In December 2020 the EHH completed 270 contacts and met their target of 95% contacts completed in 72 hours and handled 314 telephone calls.

Children Centre Services was restructured in June 2019 in order to target resources to support the most vulnerable families with children 0-5 years and

use some resource to engage and map community assets for families with children 0-18. The service provides guidance and support on, for example, healthy eating, dental health and immunisations and now has a team of early years support workers (EYSW's) who deliver one to one support in families' homes using evidence based intervention such as:

- ✓ Let's Talk with your Baby
- ✓ Communication Steps
- ✓ Bookstart Corner
- ✓ Solihull Parenting

During Covid-19 the service continued to work remotely with families by phone, Whatsapp, video conferencing. Visits to families again were reserved for those children and families where there was heightened risks. To support families further the service produced videos of some of their support programmes so that work being undertaken remotely was strengthened.

Similar arrangements were in place as aforementioned to increase visits and work to be undertaken in family homes or in outdoor spaces as the Covid-19 restrictions lessened as necessary and with full PPE arrangements in place.

Throughout lockdown all the internal early help services were involved in delivering food parcels and dropping off activities and essential items to vulnerable families.

The **Solid Roots Programme** is an investment to improve outcomes for foundation (0-5 aged) children and families. This includes training for early years professionals to ensure children have adequate speech, language and communication skills so that they are ready to engage in school. Training was commissioned for early year's professionals in the 'Solihull Approach' and Solihull licenses were purchased to ensure all parents in Herefordshire could access 'Solihull Parenting Courses' on line and to ensure training available and consistent training opportunities for the early year's workforce in a range of areas to ultimately ensure all children reach a good level of development.

During Covid-19 the training for early year’s professionals has been moved to virtual training. The Solihull on line parenting courses continue to be promoted.

Children in Need, Child Protection and Children Looked After

The Use of Data, Quality Activity and Intelligence to Monitor Performance

Snapshot

The MASH received 2395 contacts in relation to children’s safeguarding

Number of referrals in the year was 1096

There were 1351 assessments completed

172 child protection plans were started with 173 ending in the same period

107 children were subject to a child protection plan at 31/03/2021 this is a decrease from the previous year at 135 - with the following categories

Emotional Abuse	Physical abuse	Neglect	Sexual Abuse
65	5	29	8

Health agencies are the highest source of contacts and referrals, followed by schools

Domestic abuse, mental health issues, alcohol and substance misuse were the highest factors for referral and assessment into the MASH.

Herefordshire Children’s Services

Although the annual report covers the period of 2020-2021, work undertaken in the 2021-2022 business year has highlighted significant failings in terms of progress against the identified priorities made in 2020. In March 2021 Herefordshire Children’s Service became subject to much scrutiny following the outcome of a High Court Judgement related to a child in the care of Herefordshire Children’s Services whom was subject to Family Court Proceedings. This further placed a spotlight on the quality of social work practice and concerns about leadership, which questioned Herefordshire Children’s Services fitness for purpose due to significant failings relating to a child in care whom was subject to Family Court Proceedings.

Herefordshire Children’s Services have become subject to an improvement board, led by a Department for Education advisor to drive the required reforms. Children’s services since this time have been committed to taking steps to address the challenges identified and will continue to work with safeguarding partners in collaboration to ensure children, young people and their families receive good quality services when needed.

In January 2021 Signs of Safety (SofS) the approved approach to assess and manage children’s safety and protection was to be implemented across the whole children’s system. This, however, created significant challenges for credible performance reporting, which required further review and development of the electronic case management system. There were also capacity issues which resulted in limitations to train relevant staff groups. Herefordshire children’s services has experienced staff turnover in frontline practice and operational management, which has further compounded the number of staff to be re-trained following re-recruitments.

In terms of performance data available during 2020-2021, it suggests that Herefordshire had experienced lower referral rates of children in need, section 47 assessments and child protection per 10,000 compared to the

regional and national averages. However, the rates for children looked after per 10,000 was above the national average. The lower rates of referrals suggests that risk and help for children and families when needed was not identified early enough, which has resulted in children's safety being compromised. Intelligence further indicates that there is not a consistent understanding and application of threshold across partner agencies and that children have been left in a position of risk for too long.

Within Children's Services, monitoring and challenge of threshold is used as a learning mechanism both in supervision, team discussions, group supervision and multi-agency performance meetings.

In April 2020 A MASH and multi-agency response to Child Exploitation audit was completed. 50% were seen as good and 50% required improvement.

In June 2020 a thematic audit was completed looking at re-referrals into MASH. One was good, 5 required improvement and 1 was inadequate. Areas of strength were that Early Help support was offered to families in 6 of 8 cases, indicating that this support is being routinely offered.

Safeguarding and review service continue to drive change and are working to provide robust challenge to operational teams; consequently improvement is being seen in key areas of performance in relation to children looked after e.g. timeliness of plans being completed and the challenge in relation to delegated authority and response time to initial and review health assessments.

In line with many other local authorities, since the end of March 2020 the restrictions arising from Covid-19 has resulted in all Child Looked After Reviews and Child Protection Conferences being conducted via video conferencing. Children who are looked after continue to be consulted via Webex, WhatsApp, email and telephone calls prior to their Review; and every effort is made to ensure children and parents are able attend the Webex video based CLA Review. Where parents / carers do not have access to equipment to aid their attendance they are either supported by the child's social worker / fostering social worker in person to access the meeting with the social worker via the Webex link; or the IRO conducts a series of meetings and

consultation with parents happens prior to the Review; to gather the parents views about their child's progress. IROs ask SWs to feedback the outcomes of the CLA Review to parents after the meeting has concluded

Next steps

An area for improvement for 2021-2022 will be to develop a robust performance and quality assurance and improvement framework in order to be assured about the quality and effectiveness of the multi-agency safeguarding arrangements. We further want to use data and quality activity to promote good and effective practice, as well as to be able to identify and challenge areas that require improvement. This must include the use of performance data to understanding the demand for services relating to the children within the safeguarding system.



Were there opportunities to learn and improve? Workforce Development

The HSCP provide a range of multiagency training to enable an effective single and multiagency safeguarding response by frontline practitioners and their managers. The effectiveness of the safeguarding response is further complimented by single agency training for their workforce. During 2020-2021 the HSCP ran the following training courses as part of its core programme, with a total attendance of 862 delegates.

Course	Attendance Figures	Type of Training
Contextual Safeguarding –20/01/2021 and 17/02/2021	34	Safeguarding Children
Delivering brief interventions for substance misuse to young people - Part One – 19/01/2021, 22/01/2021, 03/02/2021	30	Safeguarding Children
Delivering brief interventions for substance misuse to young people - Part Two – 26/01/2021, 29/01/2021, 10/02/2021	26	Safeguarding Children
Exploitation and Vulnerability Training – 06/01/2021 and 08/02/2021	41	Safeguarding Children
Graded Care Profile 2 – 26/10/2020, 05/10/2020, 09/11/2020, 16/11/2020, 30/11/2020, 07/12/2020, 14/12/2020, 11/01/2021, 25/01/2021, 27/01/2021, 24/02/2021,	104	Safeguarding Children
LADO Position of Trust Managing Allegations Against Adults who Work with Children – 09/02/2021	6	Safeguarding Children

Launch of the Right Help Right Time Levels of Need document (RHRT LON) – 02/12/2020	235	Safeguarding Children
Practitioner Forum (multiple topics, including Signs of Safety briefing) – 05/11/2020	68	Safeguarding Children
White Ribbon 2020 - “Being professionally curious and thinking the unthinkable” (Domestic Abuse, Adults Safeguarding) 25/11/2020	69	Safeguarding Children / Safeguarding Adults

In addition to this, the HSCP Safeguarding Partners held one Summit for senior officers of relevant agencies to share key safeguarding learning and developments.

Additional Early Years & Early Help Trainings Events

Course	Attendance Figures	Type of Training
How to write SMART targets for early years IEPs – 08/10/2020	25	Early Years
Designated Safeguarding Lead- training for Registered Early Years Group Settings – 08/12/2020	16	Early Years
Early Help assessment support and guidance session – 09/07/2020, 13/10/2020, 20/01/2021	22	Early Help
Autism Education Trust Early Years 2 day (4 x half days) training course – 23/10/2020	84	Early Years
Briefing for Early Years Providers and Childminders -14/01/2021	96	Early Years
Completing the EYFS Profile- workshop for NQTs and teachers new to EYFS in reception classes – 20/01/2021	6	Early Years

Learning from Reviews

Joint Case Review Group is responsible for ensuring that early learning and recommendations arising from reviews are acted on promptly, and that there is a robust process to track the completion of related actions in order to ensure that the multiagency system is learning and achieving improvements in practice and in outcomes for children. Our overall aim as a result of learning from reviews is to reduce harm to children and young people.

During the reporting period, one referral for a Rapid Review was received towards the end of March 2021. However, the Rapid Review was undertaken at the beginning of April 2021 which is outside the reporting period. The case did not meet the criteria for a Child Safeguarding Practice Review (CSPR) but learning identified has been included into the work streams of the HSCP. The JCR group continue to oversee two previously commissioned serious case reviews from 2019; as well as a Child Safeguarding Practice Review (CSPR) on Peer on Peer Abuse, which was commissioned in 2019 by the HSCP. The Peer on Peer review was completed in April 2021.

Reviews promote the participation of frontline practitioners and provide a detailed insight into issues and experiences in safeguarding casework. Practice Briefings are produced to disseminate the learning to the wider workforce as well as webinars, which are produced on a multi-agency basis, to support learning. Learning from reviews is also shared at the Practitioner Forums and in the Herefordshire Safeguarding Newsletters, which are a joint approach with the Herefordshire Safeguarding Adult Board and Community Safety Partnership.

The findings from the case reviews featured identified learning for the multi-agency system and included strengthening and changing the culture relating to the following areas of practice:

- Family Front Door (FFD)
- Multi-agency Safeguarding Hub (MASH)

- Decision Making
- Challenge, Escalation and Resolution
- Right Help Right Time (RHRT)

There were additionally opportunities to learn and improve as a system:

- Improve ability to ensure learning from Reviews is not only disseminated but embedded in practice: develop 'tools' such as Webinars, briefings, on-line workshops as soon as learning is known, rather than waiting until a review is about to be published.
- Virtual Training opportunities not utilised – two webinars were developed and shared across the system. These were positively received by practitioners but took a long time to be completed.
- Disseminate already available webinars, from other areas /NSPCC that relate to local learning from reviews in a systematic way.



Evidencing Impact

Clinical Commissioning Group

In March 2020 Vicky Ford MP, Parliamentary Under-Secretary of State for Children and Families sent a letter to all LSCPs, addressing children and young people with SEND, their parents, families and others who currently support them.

The letter says thank you for keeping our most vulnerable young people safe and shares the most recent guidance and FAQs about how to support vulnerable children. The Minister reiterates the importance of regular and ongoing risk assessment that involves the voice of young people. She also mentions the relaxation of local authority statutory responsibilities at this time so that support from local officers for the current crisis can be prioritised.

The response to the Vicky Forde letter was initially slow but once the CCG became aware, a lead was established within the CCG, a robust plan was developed and 43 out of 45 families who required a visit had been contacted and seen within a 2 month period. Assurance was provided to the Partners that any required actions to support or safeguard the children had been implemented.

The CCG supported the Safeguarding Children Partnership through appropriate representation and contribution at the: Executive Safeguarding Partners Board Group Safeguarding Partners Board, Quality & Effectiveness Group, Development & Practice Group, Child Exploitation & Missing Group and Joint Case Review Group. As well as the many Task and Finish or other Groups established to support the work of the Partnership, such as the 'Engine Room' – now the Executive Support Group, Performance Data Group, and Neglect Strategy Group.

Impact:

The CCG have provided leadership across the partnership and supported driving the safeguarding agenda forward.

Children's and Maternity health services identified that some frontline staff such as Public Health Nurses, which included Health Visitors and School Nurses had been redeployed. Most community health services moved to online video contacts, with a reduction of face to face contact and routine visits for many services. For example, a 24-hour telephone service for emotional health and well-being was commissioned. On-line resources produced nationally and locally were also made available, such as information for new parents on crying babies and coping strategies to support.

Neglect/Right Help/Right Time/Exploitation/Learning from Reviews:

- Commissioned bespoke Learning and Development sessions for GPs and wider multi-disciplinary workforce which includes findings and learning from reviews.
- A Herefordshire and Worcestershire-wide conference looking at Exploitation was planned and organised with renowned national speakers. Unfortunately, the date was deferred to May 2021 due to the Covid19 Pandemic. Feedback from the event was overwhelmingly positive, with attendees making commitments to how they will use in their practice and how they will share the learning.
- Supported the development of the webinar on 'Right Help Right Time' to ensure appropriate services are in place to support families when they need them, i.e. at the Right Time. (This replaced the Thresholds of Need guidance).
- GP development sessions with a focus on Right Help Right Time.
- Locally the 'Keep Me Safe...Strategy' is being developed. This includes themes from local learning reviews. For example, 'Keep Me Safe...when I

am Crying,' which includes learning related to safe sleep, crying and preventing Abusive Head Trauma. This strand of the strategy provides support/advice to parents of under 1's. Free on-line resources were disseminated during lockdown, but the Strategy aims to provide additional resources and a co-ordinated approach to reducing harm in under 1's across Herefordshire and Worcestershire. This links with the regional Keeping Babies Safe work stream and short-term funding received from NHSE/I has been utilised to support this work.

- Developed Webinar on physical abuse which included co-presenting on a Physical Abuse launch day attended by almost 200 professionals.
- Commissioned Safeguarding Supervision Training for Safeguarding Leads and Safeguarding Champions across the health workforce.
- The CCG led the co-ordination of the health and local authority response to the Vicky Forde letter relating to hidden harm and under 1's, ensuring a face to face visit to the cohort of children of concern.
- Provided Safeguarding supervision.
- Provided Trainers to deliver the GCP2 training in respect of neglect.
- HWCCG commissioned a Domestic abuse conference specifically for Herefordshire and Worcestershire partners coinciding with the White Ribbon national event in November 2020. This was well attended from all multi-agency partners and the evaluation of the day was extremely very positive. A similar event is already being planned for late 2021.

Herefordshire and Worcestershire Fire and Rescue

- Hereford & Worcester Fire and Rescue Service training has been renewed to focus on the importance (where able) of involving family and young people in any intervention.

- Training attended: Key staff have attended Right Help, Right Time training and Signs of Safety training. This will be rolled out to new personnel within the team when appropriate throughout the next year.
- Key staff also attended Herefordshire and Worcestershire Exploitation conference via TEAMS in May.
- Exploitation and Vulnerability training is being rolled out service-wide over the upcoming months.

West Mercia Police

- New Safeguarding Children universal training package to be launched.
- To continue to complete actions from NFCC Audit.
- Completion of external Safeguarding Audit and actions from this.
- Prevention Team to attend all Group Command Meeting to give officers further training so they can effectively respond when crews raise concerns about children and young people.
- Key staff are to attend level 3 & 4 NFCC train the trainer Safeguarding Training in November 2021.

Herefordshire & Worcestershire Health & Care NHS Trust

- Work has been undertaken to establish an information sharing agreement between the Trust and Children's Services to allow the sharing of lists of all children subject to a child protection plan or looked after so that practitioners working them are aware of these processes and can feed information into meetings and be kept abreast of the latest plans.
- Through establishing relationships with the MASH partners there have been an increase in the numbers of requests for information to inform decisions being made on referrals within the MASH.

Wye Valley NHS Trust

- Ensure completion and roll out of the Neglect Strategy, Team member to chair and author Neglect audit for May / June 20. Support the partnership in the development of a comprehensive data set.
- Continue to support partnership training programme - GCP2 / MA safeguarding programme.
- NHS wide audit of MARF focussing upon use and evidence of thresholds and use of resolution of professional differences policy
- Continue commitment to partnership ensuring priorities are aligned with the WVT safeguarding children work plan.
- Support the local authority with their new practice model Signs of Safety – through training, supervision and coaching of staff to embed the new way of working. We are currently ensuring that all the Safeguarding Children team members are trained in use of the model and have identified one of the team to champion this approach.

Health Children in Care Team

- Support the partnership to develop a comprehensive CE MA dataset/audit. During the last year, it is difficult to know about the effectiveness of these processes.
- Improve the number of Children and Young People who have an Initial Health Review within Statutory time frames.
- Audit statutory health assessments to ensure safeguarding concerns are recorded and reflected through good quality health action plans.
- Conduct and engage a review of children and young people views of the children in care health offer.

- Develop the current pathway that supports parents when children and young people are reunited and a health need has been identified before reunification occurs.
- A quarterly newsletter for staff trust wide and a specific maternity safeguarding was been commenced with up to date information and safeguarding news, this has been received well by staff.

As a system, we need to improve how we evidence impact and effectiveness for the work we do with children, young people and their families. We aim to use and improve upon what is already available in the system from single agencies to develop a cohesive multi-agency response. Evidence includes staff surveys, walk-the-floor activity, performance data, feedback from children, young people and families, findings from NHS provider services, single agency audit programmes, being just a few examples but is not an exhaustive list.

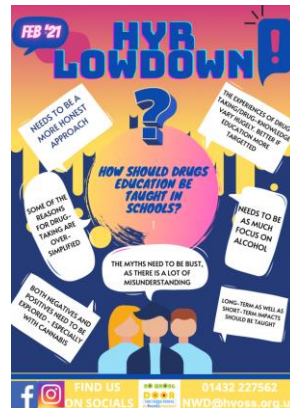
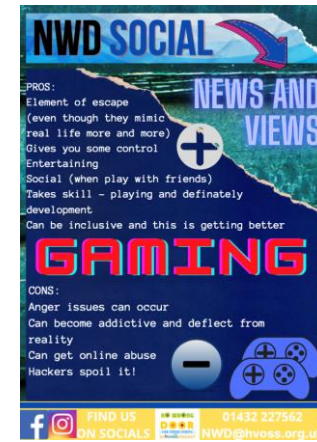
We acknowledge that measuring the impact and effectiveness of the multiagency response to need and risk is harder to demonstrate over this period, however by using a robust framework to capture outcome from a range of measures already in existence consistently, will better inform the partnership and provide the assurance that what we are doing is making a difference as we move forwards into the next year.



What children and families have told us?

Our partners have undertaken significant pieces work to ensure that the views of children are captured and are given full consideration when developing and delivering our services.

No Wrong Door (NWD) are a voluntary organisation and key relevant agency in Herefordshire who lead on a number of work streams to engage with children and young people in a number of settings such as education, hospital, those engaged with children’s social care as well as within the community and family settings. Engagement with children young people and their families was particularly important as services were impacted on by the national Covid restrictions that were in place for the majority of the year. The illustration below set out some of the views of young people during this time on a range of topics.



Child & Adolescent Mental Health Service (CAMHS)

Survey

CAMHS engaged their Wellbeing Ambassadors (young people) to review the changes they had made to their services via a survey. The survey question themes included the following:

- Clinic location
- Reception/waiting area
- Treatment rooms
- Staff
- General satisfaction

It also included a COVID-19 related remote therapies section

- Remote therapies – used/preferred/liked/disliked
- Effects on relationship with therapists
- Future use of remote therapies
- Any other comments

Survey Findings

General

There were 48 returned responses to the main feedback survey and 43 returned responses to the additional COVID survey, a response rate of 24%.

- ✓ **77%** satisfaction with clinic location
- ✓ **70%** felt comfortable with the waiting room facilities
- ✓ **69%** satisfaction with treatment room facilities and 71% were happy with the levels of privacy afforded to them.
- ✓ **81%** were happy with the they were helped by staff and felt listened too
- ✓ **36%** of young people stated they were very satisfied with the service received and **36%** stated they were satisfied

Covid-related

Remote therapies – used/preferred/liked/disliked – Figures show that slightly more service users accessed therapy through video link (Microsoft Teams/Zoom).

- ✓ **56%** stated a preference for Face to face appointments
- ✓ Telephone appointments were the least favourable (**9%**) because of comments such as it being ‘impersonal,’ ‘being talked over’

Effects on relationship with therapists

- ✓ The majority of respondents **58%** agreed that remote therapies did not affect their relationships with their therapists

Future use of remote therapies

- ✓ **42%** saying yes to use remote therapies in the future and **37%** saying no

One thing that was highlighted by the work undertaken was the high number of those respondents stating that they were unable to see information about

the importance of young people’s participation work to help improve services. This has resulted in the Wellbeing Team being allocated an area to promote their engagement work.

The Wellbeing Ambassadors will use a notice board to promote Young People’s Participation as well as share their project work.

Details of CAMHS projects will be displayed along with the results and possible effects of their work in the form of **“You said... We did...”** notices.



Joint Case Review Group (JCR)

The voice and views of the child and family feature strongly within the Child Safeguarding Practice Review (CSPR) process. Where children are not able to express their voice themselves, then their lived experience and ‘voice’ are threaded throughout the report. The JCR Group ensure that engagement with children and families is central to the review and that their voice and views are sought and properly reflected within the final report and conclusions.

The Independent Author for each review, usually accompanied by the JCR Chair or Business Unit Officer if the JCR Chair is unavailable, contacted and spoke to young people and their families at the early stages of the process, to inform them that a review is being conducted and to ensure that the terms of reference include any specific concerns they may have, such as their reflections on multi-agency working with them as a family and how services were provided. Young people gave examples from their experiences of working with different agencies of how we could improve; and as a result of this feedback those agencies were asked to change their way of talking to young people. Once reports are drafted, we ensure the family meet with the Author again to seek their views and that they are reflected within the report. Hearing the voice and views of children, young people and their families is achieved through face-to-face meetings with relevant family members,

including the young people directly involved whenever possible. Due to the Covid-19 pandemic, meetings were conducted using Microsoft Teams or similar virtual technology.

The voice of children, young people and families are reflected throughout the final report, the recommendations and actions taken as a result, including ensuring the learning from such reviews is disseminated and changes are made to practice as a result.



Healthwatch Herefordshire have worked with a range of young people to provide an opportunity for them to articulate their views and concerns, and empower them to support other children and young people.

This letter is to Boris Johnson:



Healthwatch held some Zoom sessions with Georgia to see how they could help. Georgia just wanted to be heard. The attached video was also created.

[Georgia - Dear Mr Johnson - YouTube](#) (filmed March 2021)



Looking Forward - Planning and Priorities for 2021-2024

The Herefordshire Safeguarding Children Partnership has agreed four priorities which are set out in its three year [HSCP Strategic Plan 2021-2024](#). They include the following:

- **Priority 1:** Leadership. Embed a culture of collective responsibility, accountability, and professional challenge built on guiding principles of respect and openness to forge an effective safeguarding children's partnership.
- **Priority 2:** Neglect. Prevent and reduce neglect to improve the safety and wellbeing of children and young people in Herefordshire.
- **Priority 3:** Right Help, Right Time. A coordinated multi-agency approach to provide children and families with the right help and support at the right time (RHRT).
- **Priority 4:** Child Exploitation. Prevent and reduce child exploitation to improve the safety and wellbeing of children and young people in Herefordshire.

There is a [Strategic Plan Outcomes Framework](#) which will be used to monitor and track progress across the partnership substructure.

The Strategic Plan will be co-ordinated through the Safeguarding Partnership Executive Board and subgroups, by partners, as well as wider work streams. Whilst some of the priorities will have dedicated subgroups to achieve their intended outcomes, there will be cross-cutting themes and actions that sit across several work streams.

The Partnership's Executive Support Group will monitor the progress of the actions on a bi-monthly basis through reports, performance data, audits, and work plan updates.

The Independent Chair and Scrutineer, using the agreed scrutiny arrangements, will provide a report of progress made against the plans objective to the Safeguarding Partners at each Safeguarding Partners Meeting.

Funding Herefordshire Safeguarding Children's Partnership

"Working in partnership means organisations and agencies should collaborate on how they will fund their arrangements. The three safeguarding partners and relevant agencies for the local authority area should make payments towards expenditure incurred in conjunction with local multi-agency arrangements for safeguarding and promoting welfare of children. The safeguarding partners should agree the level of funding secured from each partner, which should be equitable and proportionate, and any contributions from each relevant agency, to support the local arrangements. The funding should be transparent to children and families in the area, and sufficient to cover all elements of the arrangements, including the cost of local child safeguarding practice review"

– Working Together to Safeguard Children 2018

Funding is agreed at the beginning of the year with the partners and is used to fulfil the function of the partnership. It is noted that many organisations face financial challenges each, year. The partners will often give their time and resources in kind to support the functioning of the partnership, which includes chairing and participating in sub/task and finish groups, conducting reviews, audits, leading and attending workshops and analysing and submitting data.