



ANNUAL REPORT 2021/22

Dudley Safeguarding Children Partnership Group

Reporting Period April 2021 – March 2022





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Foreword from Independent Scrutineer



It is my pleasure to welcome you to the annual report of the Dudley Safeguarding Children Partnership Group. This report covers the period between April 2021 and March 2022. It reflects the safeguarding commitments of all partners, as we work to achieve our intentions as set out in our strategic partnership plan.

I joined Dudley as the Independent Children’s Safeguarding Scrutineer in September 2021 and therefore my observations focus in the main on the last 6 months of the reporting period. It is positive that Dudley’s Safeguarding People Partnership recognised that a greater focus was needed on the issues that impact on children, young people and their families and developed this important role.

Independent scrutiny provides assurance by reflecting and reporting on the effectiveness of multi-agency arrangements to safeguard and promote the welfare of all children, including arrangements to identify and review serious safeguarding incidents. It is part of a wider system which includes inspectorates’ single assessments and Joint Targeted Area Inspections (JTAs.) My role is to consider how effectively arrangements work for children, families, and practitioners, and how well partners provide strong leadership. I act as a critical friend to the partnership and challenge through ongoing appraisal of the partnership’s work in line with Working Together 2018 and the Wood Review of multi – agency safeguarding arrangements 2021.

This report was prepared by the DSPP Business Support Unit on behalf of the Partnership and recognises the progress the DSPP has made throughout the year and the challenges that remain that we will continue to address in 2022/23. I have reviewed the contents and, as the Independent Scrutineer, I can say that the contents are an accurate report of the activities of the Partnership and its Sub- Groups. It highlights the areas where progress has been made and what we need to focus on in 2022/23 and beyond.

There is a strong commitment from the multi-agency partnership to work together on agreed priorities and the Executive is well attended by senior leaders in organisations. We have strengthened and refreshed the Terms of Reference for the Dudley Safeguarding Children Partnership Group (DSCPG) to ensure that our Education colleagues are represented, and we hold each other to account through a culture of high support and high challenge.

In my first six months I observed all Sub – Groups and reported my findings to both the Executive and DSCPG. The Partnership recognises that there is much to do to strengthen our partnership arrangements over the year 2022/2023 and I am pleased to report that there is significant work underway. We have revised our priorities and strengthened our partnership structure to reflect our joint accountability and responsibility to safeguard children. We are developing our approach to data and performance to ensure we have a good understanding and evidence base to demonstrate how the partnership makes a difference to children and young people and we are working together to ensure there is a culture of high support and high challenge.

What’s Next for the Partnership? Issues of Note and Risks to be Dealt With

The Covid 19 Pandemic has had a significant impact on children, young people and their families. As a Partnership we have focussed on the challenges this presented and impacted how we delivered services in 2021/22. We are now able to use hybrid ways of working to ensure that we remain responsive to children and young people in Dudley with a much more business as usual approach for our safeguarding services. We know that the impact of the pandemic on Children’s emotional health and wellbeing and their readiness for school, for example, will continue to impact for some considerable time and we need to ensure that services can continue to respond and support families.

Over the next 12 months we recognise that we need to strengthen our multi – agency response to children and young people who are exploited both criminally and sexually, learning from reviews across the country. We are working hard to ensure that our integrated front door supports children and their families to receive the right help at the right time.

We need to ensure a multi – agency audit processes provide assurance on the quality of safeguarding practice in Dudley and our sub – groups deliver on our strategic plan. We need to ensure that the learning from Local Safeguarding Practice Reviews is embedded in practice and is having the desired impact of ensuring that children in Dudley are safer as a result.

A priority for me as the Independent Scrutineer is to ensure that I hear directly from children, young people, and their families about what is working well and how we need to improve as well as hearing from frontline practitioners about the challenges they face and how we can improve multi -agency working.

We will also need to focus on the learning from the national review of the murders of Arthur Labinjo-Hughes and Star Hobson and how we will work differently moving forward. There will also be challenges for our partnerships as the Review of Children’s Social Care is taken forward and our health colleagues move towards and embed Integrated Care Partnerships whilst continuing to deliver high quality services.

Whilst there is much to do, I am confident that Dudley’s Safeguarding Partnership will rise to the challenge and our practitioners will continue to work tirelessly to ensure our children are safeguarded.

I look forward to updating you on our progress and the difference we are making in our next annual report.



About the DSCPG

The Annual Report

Welcome to the Dudley Safeguarding Children's Partnership Group's annual report. This document provides an overview of the effectiveness of services in place to safeguard children across the Dudley Borough. The information relates to the period 1st April 2021 – 31st March 2022.

The report will be available on our website via the DSCPG page and will be shared with our partners for dissemination. The report will also be shared with the Health and Wellbeing Board, Dudley Safeguarding Adults Board as well as a copy shared with the Child Safeguarding Practice Review Panel and What Works Centre for Children's Social Care within seven days of being published.

Our Statutory Safeguarding Partners

Our Statutory Safeguarding Partners are responsible for the co-ordination of the safeguarding services in Dudley. They are a strategic leadership group with joint and equal responsibility for ensuring everyone works together to promote the welfare of children in Dudley.

In Dudley, our statutory safeguarding partners consist of the Chief Constable of West Midlands Police, the Chief Executive of Dudley Metropolitan Borough Council and the Accountable Officer for the Black Country and West Birmingham Clinical Commissioning Group¹

Each Chief Officer is given permission, under Working Together 2018, to delegate their functions to senior officers. In Dudley the senior officers are:

- Catherine Driscoll – Director of Children's Services, Dudley Metropolitan Borough Council
- Sally Roberts – Chief Nursing Officer (Designate), Black Country and West Birmingham Clinical Commissioning Group (now known as Black Country Integrated Care Board)
- Clare Caddick – Chief Superintendent, West Midlands Police

These senior officers meet formally on a quarterly basis as part of the Dudley Safeguarding People Partnership Executive (DSPP). The DSPP covers the life course, and the Executive membership also includes the Director of Adult Social Care for Dudley Metropolitan Borough Council. The Executive is chaired by the Independent Chair of the Dudley Safeguarding Adults Board who is also the Chair of the DSPP. The Independent Scrutineer for the DSCPG is also a member of the Executive.

The Safeguarding partners identify the agencies needed to work as part of the multi-agency safeguarding arrangements (MASA)² and they have a statutory duty to co-operate with the identified safeguarding arrangements. These agencies are represented on various workstreams and sub groups which report into the DSCPG. In recent months (and outside the scope of this reporting period), the DSCPG has included education partners as our 'fourth statutory partner' as we recognise the invaluable contribution they play in keeping children safe.

Our Shared Vision

Safeguarding is fundamental to ensuring Dudley is a place of healthy, resilient and safe communities with high aspirations and the ability to shape their own future. These safeguarding arrangements build on a strong foundation of partnership working in Dudley borough. Our focus on ensuring coherence with partnership working foundations supports Dudley borough's 'Forging a Future for All' vision to 2030 which contains seven aspirations including a shared commitment to Dudley being 'a place of healthy, resilient, safe communities with high aspirations and the ability to shape their own future'.

Our shared vision reflects the life course Partnership approach. We believe that when support is needed, it is not often in isolation. To achieve our vision, the Partners will work together with all agencies to:

- Ensure the welfare and best interests of the person are at the centre of all we do.
- Treat everyone as valued partners.
- Believe change is possible and positively support parents and carers.
- Value difference, inclusivity and encourage engagement.
- Actively listen and take action in a timely and responsive way, avoiding unnecessary delay.
- 'Hear the voice' of frontline practitioners and take their views into account
- Be open and transparent in all that we do
- Support a working culture that challenges, scrutinises and uplifts the partnership

1. The Clinical Commissioning Group is now the Integrated Care Board (ICB) but for the reporting period of this report will still be referred to as the CCG

2. Known as 'relevant agencies'

Our priorities 2021-22

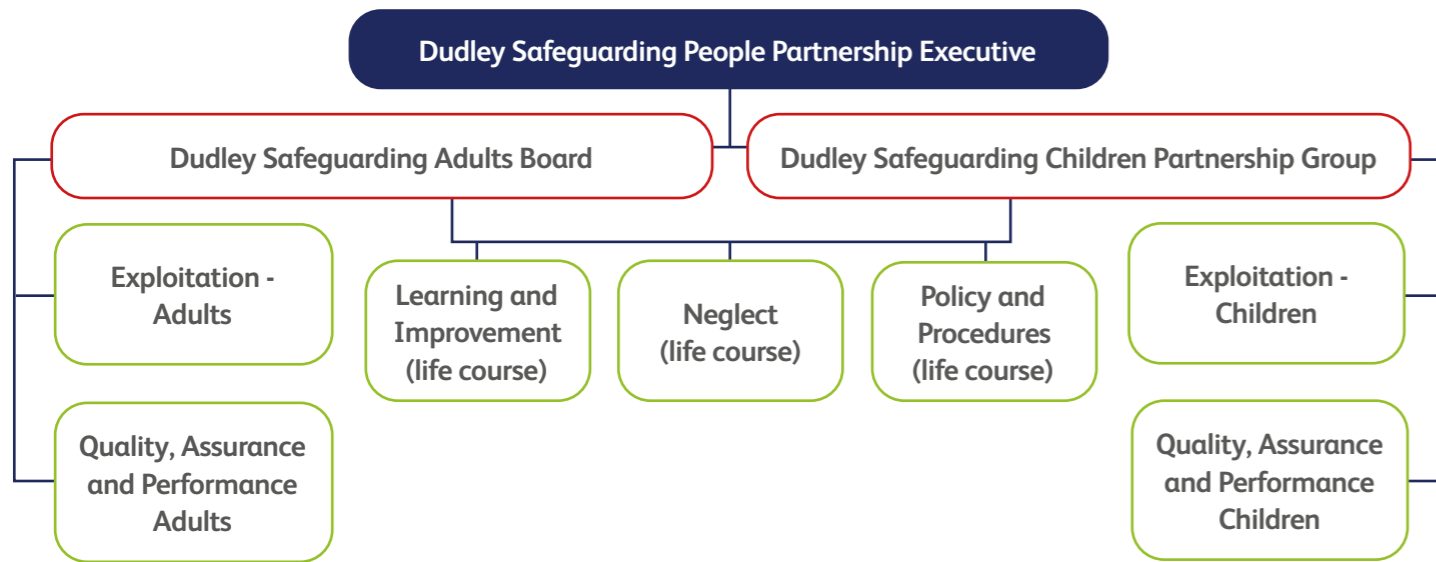
Our priorities were set in 2020 for a period of two years. For the reporting period of this report they are:

1. Neglect across the life course
2. Exploitation across the life course
3. Preventing harm across the life course

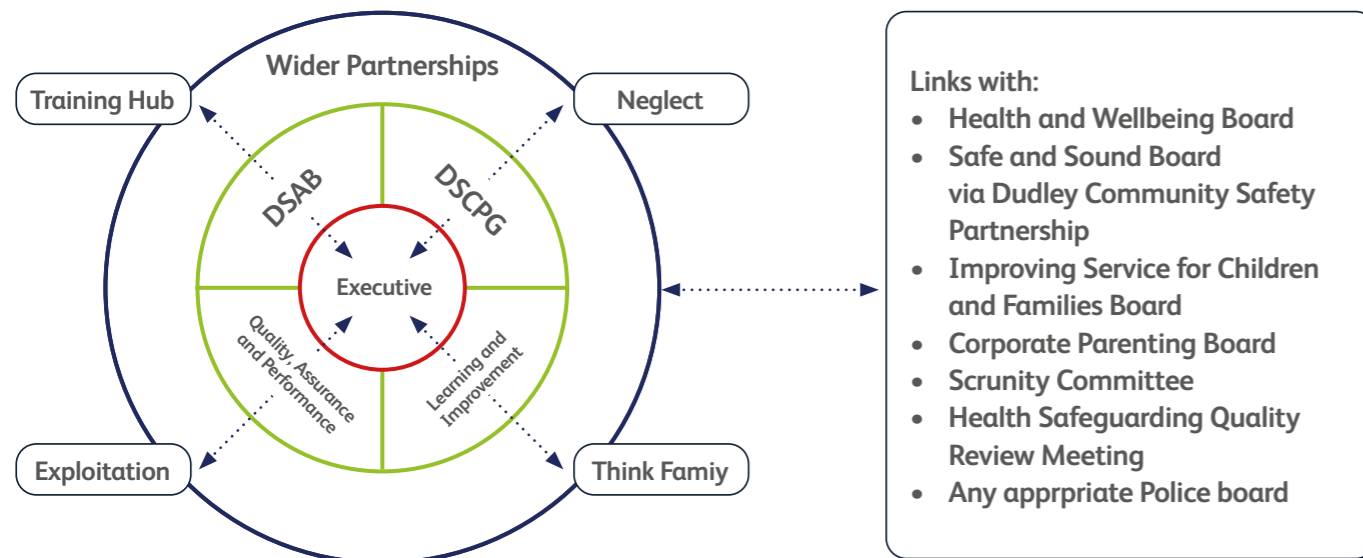
The priorities were reviewed in April 2022 and were agreed based on feedback from quality assurance activity and emerging local and national learning. The two priorities of neglect and exploitation have remained the same. The third priority is now 'Think Family' with a specific focus on transitional safeguarding. This third priority allows partners to be more flexible and adapt to emerging themes and trends. For the purpose of this report, we will focus on the priorities of 2020, highlighting areas of work that have changed in 2022, which will be discussed in more detail in next year's report

Our structure

We are a joint, life course Partnership which overseen by an Executive group. Below shows our structure for 2021-22.



Since reviewing our priorities, we have also revised our structure for the Partnership. This is so we strengthen our links with all agencies and other Boards in the Dudley Borough. We are also keen to promote a culture of inclusivity regarding our safeguarding arrangements, utilising expertise and feedback across our Partnership. The effectiveness of this change will be discussed in our next annual report, but is included for information in this report.



Links with other Partnerships and Boards

We are members of the West Midlands MASA group and West Midlands Regional Procedures Group. This ensures we are up to date with the most recent changes as well as ensuring we work as effectively as possible with our cross border partnerships. We recognise that many of our partners work across several local authority areas and therefore consistency in our safeguarding approach is paramount.

In addition to the regional groups, there are other groups which either carry out work on our behalf or provide us regular assurance. These groups include the Female Genital Mutilation Group (FGM), Multi Agency Safeguarding Hub (MASH) strategic group and the Non Accidental Injury Forum (NAI). Both the FGM group and NAI forum were established as a result of learning from our Serious Case Reviews/Local Safeguarding Practice Reviews.

The Child Death Overview Panel (CDOP) maintains links with the Partnership via their annual report as well as regular communication where there are specific emerging themes.

The DSCPG also works closely with Safe and Sound, Dudley's Community Safety Partnership, as we recognise that many safeguarding themes overlap for example, exploitation and domestic abuse. We also regularly provide updates to our health colleagues via the Safeguarding and Quality Review Meeting (SQRM)

This report will also be presented to the Health and Wellbeing Board.





About Dudley

Dudley is a metropolitan borough formed in 1974. It is located on the edge of the West Midlands. Dudley is at the heart of the Black Country, which also includes the neighbouring boroughs of Sandwell, Walsall, and the city of Wolverhampton. The population has been growing at a modest but sustained rate in recent years, with 17,311 more people living in the Borough now compared to the 2001 estimate.

Deprivation, Child Poverty and Family Income

A total of 76,306 children and young people aged 0 to 19 are estimated to live in Dudley Borough (Mid-Year population estimates 2020). This is 24% of the total population in the area.

The proportion of children and young people from minority ethnic groups is rising and in January 2021, they represented 23.4% of the school population up from 16.0% in 2012. The number of children for whom English is an additional language was 10.9% in January 2021 up from 10.7% in 2012.³

Both absolute and relative child poverty has remained an issue in Dudley with rates significantly higher than England. The most recent data available from 2019/20 shows that 21.1% of children in Dudley aged under 16 live in absolute low-income families and 25.7% within relative low-income families. For both measures, Dudley continues to have a significantly higher percentage than England with the recent trend increasing and getting worse. However, is not statistically significantly different to the West Midlands.⁴

In March 2022 there were 10,315 Dudley Borough residents claiming Universal Credit or Jobseekers Allowance. This is 5.3% of the working age population (aged 16-64), which is the same compared to the proportion 10 years ago in 2012. The proportion of West Midlands residents claiming is 5.3% also, England is lower at 4.3%.⁵

The mean gross annual wage for adult Dudley residents working full-time was £34,026 in 2021, below the national figure of £38,876 for England and below £35,698 for West Midlands.

The mean gross weekly earnings for full time adult employees in Dudley was £681 in 2021 (ONS annual survey of hours and earnings). This is lower than the West Midlands (£699) and England average (£738).

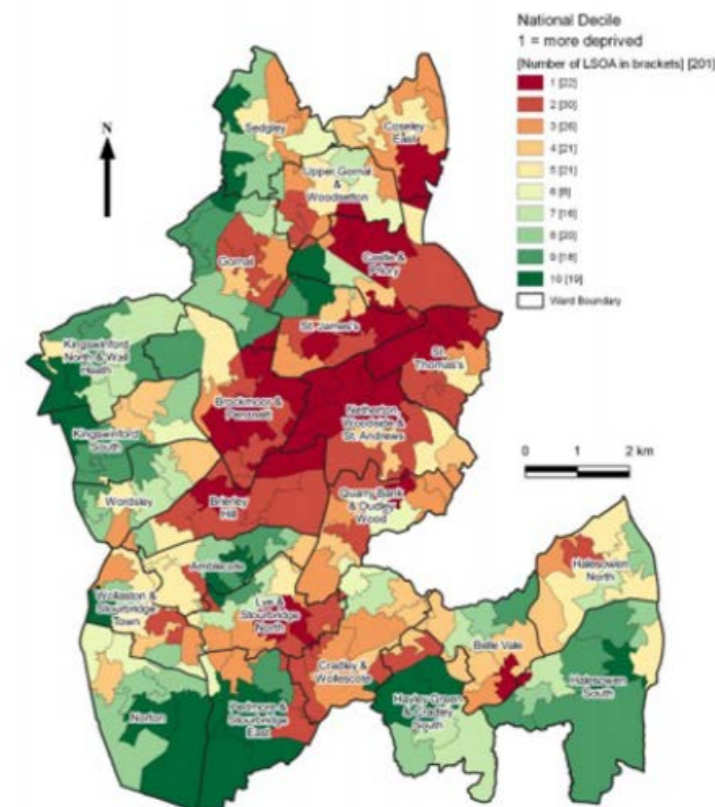
Education, Employment and Training amongst Young People

The number of young people (aged 16-24) resident in Dudley borough claiming Universal Credit/Job Seekers Allowance (JSA) spiked during the Covid-19 pandemic increasing from 1,755 claimants in March 2020 to 3,075 in March 2021 (71% increase). This increase was smaller compared to England and the West Midlands which saw increases of 117% and 90% respectively.

In March 2022 the number of claimants in Dudley has reduced to 1,825 which is an increase of 2% compared to March 2020.

Dudley's latest under 18 conception rate (15.3 per 1,000 for 2020) is not statistically different to England (13 per 1,000) or the West Midlands (15.1 per 1,000). The trend both nationally and for Dudley is decreasing; in 1998 the value was 54.7 per 1,000 in Dudley which is a reduction of 72% compared to 2020.

The proportion of 9 and 11 year olds bullied at or near their school has remained above 25% over the last 10 years, results in 2020 show that 28% of primary school pupils said they had been bullied at or near school in the past 12 months.⁶



Source: Indices of Deprivation 2019, MHCLG
Produced by: Intelligence Team, Dudley MBC, 2019
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3. Source: School Place Planning team/ School census 4. Source: PHE, Public Health Outcomes Framework
5. Source NOMIS 6. Source: Health Related Behaviour Questionnaire

Our data

We have a multi-agency dashboard that consist of high-level partner information. We are still improving our dataset, and this is regularly reviewed. We know we have more to do with this and will ensure it is revised in line with our revised priorities. The effectiveness of this, will be reported in our next annual report.

Indicator	2021/22 Q4	2020/21 Q4	Trend
Step-Downs from Children's Social Care to Early Help	74	72	↑
Step-Ups from Early Help to Children's Social Care	46	29	↑
% Re-referrals back to Early Help within 12 months	14%	21%	↓
No. of Children receiving Permanent Exclusion (by term not quarter)	23	5	↑ *
No. of sessions of Fixed Term Exclusion (By term not quarter)	818	235	↑ **
% of new contacts that progressed to Social Work	16%	20%	↓
No. of Children in Need (at end of Quarter)	1468	1454	↑
No. of Children on Child Protection Plan (at end of Quarter)	296	294	↑
No. of Children Looked After (at end of Quarter)	586	621	↓
% of Children in Care placed outside of LA boundary and more than 20 miles from home	10.6%	9.6%	↑
No. of first -time entrants (FTE) to the Youth Justice System	17	14	↑

* Data for spring term 2020-2021 academic year. Numbers abnormally low due to Schools being locked down at the time.

** Data for spring term 2020-2021 academic year. Most Suspensions/Fixed Term Exclusions occurred in March when pupils returned to school following lockdown.

The number of new contacts leading to social worker assessment has decreased over the year. At the same time, the number of assessments that ended with no social worker involvement has remained consistently high meaning that children and families are being taken through a social work assessment process potentially without benefit to them.

The reasons for this have been explored in line with the recent launch of the Early Help Strategy and work has been undertaken by the Children's Front door improvement groups, to explore and plan for how partners can meet the needs of children and families more effectively at the earliest possible level. The Children's Front Door Strategic Group provides strategic oversight of this work.

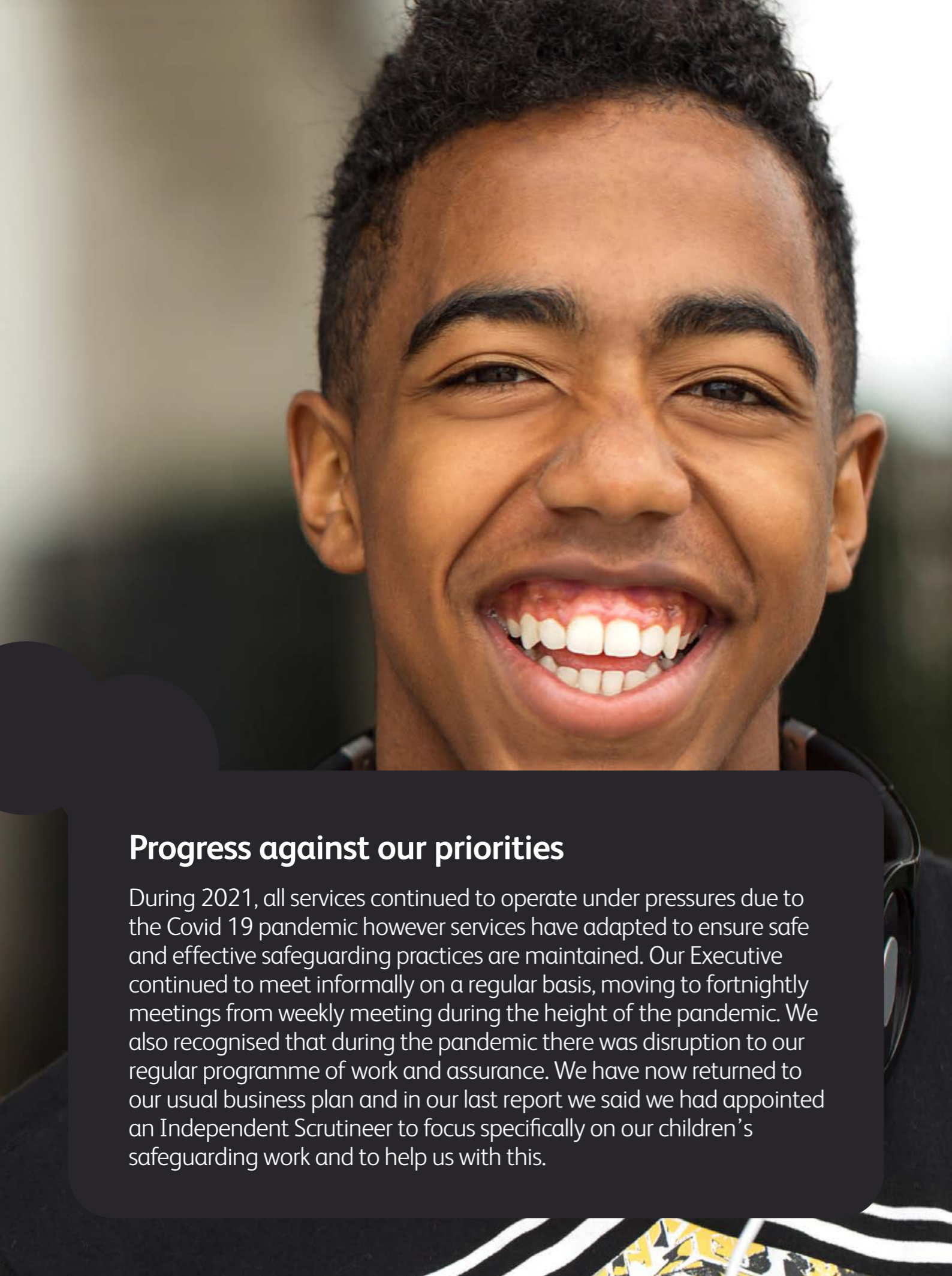
Understanding and applying the Threshold Document has been identified as one area for development both within the Front Door and across the partnership and the DSCPG will be supporting this. We will update on this work in our next report as we plan training and partner engagement events to ensure children are being supported with the right help at the right time.

We know that the review of Children on Child In Need (CIN) plans is being regularly monitored to ensure that robust planning is in place for these children enabling children to receive the support and step-down to Early Help in a timely and sustainable way. This data will also be positively impacted upon by the Front Door improvement work.

Finding suitable foster care homes and residentials in our local area continues to be a priority, but at times out of the borough placements are the only option where more specialist resources are needed.

Across the Early Help Partnership and there has been a noticeable increase in the number of families stepped down to Early Help. This relates to an increase of Child in Need cases being closed in statutory service and a higher number of cases stepped down to Early Help after a Social Work Child Young Person Assessment being complete at level 4. The increase in step ups is a reflection of there being higher complexity within the Early Help system. It is also evidence that thresholds are understood and applied appropriately to safeguard children. However, the Early Help system is increasingly effective at deescalating families to level 1 or 2 with only 8% of families closed to Early Help re-referred at level 4 within a 12-month period.

The Youth Justice Board data indicates an increase in First time Entrants to the youth justice system compared to the previous year. This is within a context of a national increase in crime and also set against an artificially low comparison figure in the previous year due to covid restrictions. However, it is not something that is being seen in all neighbouring areas. This will be monitored, and partners will support where possible. The out of court disposal assessment has been revised, and services are entering now doing more work in schools. A pilot way of working has been introduced considering targeted work alongside the youth service to identify the most relevant services to help with children who are referred in for support due to posing risks of entering the youth justice system. This will be reported on in our next annual report. positive impact on how they raise their children.



Progress against our priorities

During 2021, all services continued to operate under pressures due to the Covid 19 pandemic however services have adapted to ensure safe and effective safeguarding practices are maintained. Our Executive continued to meet informally on a regular basis, moving to fortnightly meetings from weekly meeting during the height of the pandemic. We also recognised that during the pandemic there was disruption to our regular programme of work and assurance. We have now returned to our usual business plan and in our last report we said we had appointed an Independent Scrutineer to focus specifically on our children's safeguarding work and to help us with this.

Priority 1 – Neglect across the Life course:

We know from our data that there has been an increase in step ups to children social care from Early Help and also an increase in children on Child in Need Plans.

What we did:

- Rolled out ICON (a programme to support parents to understand and respond to crying in infancy promoting confidence and safety) across the Borough. In addition, the DSPP developed a training package which been shared across the Black Country. As a partnership we recognised the increased stressors in homes, as well as taking into account learning locally and nationally, and the need to provide extra support to professionals and families to reduce the risk of abusive head trauma.
- We have revised our Children's neglect strategy and will formally launch this in September 2022. This document provides up to date information for use in practice and ensures we have a multi-agency response to cases of neglect or suspected neglect.
- We have continued to work with the NSPCC regarding the roll out of the Graded Care Profile 2A. We know that early identification of neglect and attachment issues are paramount to give all children the best start in life. GCP2 A will be launched in Autumn. Dudley will be the first area in the UK to identify families and provide support before the baby is born via this pathway. A new GCP2 antenatal pathway has been developed to embed the GCP2A tool as a universal prevention screen at every maternity care contact. We are working with our partners to ensure that this is embedded in practice through supervision for example and monitoring its impact via the quality assurance sub group.
- We have continued to deliver Graded Care Profile 2 (GCP2) training as our preferred method for recognising 'neglect'. We know the uptake of our training is lower than we would like and we addressing this by encouraging partners to sign up to additional training courses. In addition to this we are carrying out specific audits in relation to the use of the tool and outlining our expectations from a Partnership. We know that the tool is invaluable and can spot signs of neglect at an early stage which will ensure children and their families receive the right help and the right time. We will continue to monitor the use of this tool and provide an update in our next annual report.
- Our health colleagues have developed and implemented a 'was not brought policy'. We know from some of the children featured in our rapid review referrals missed important medical appointments and this was not always picked up at the time. The process of Was Not Brought can now be regularly monitored and children who miss appointments followed up to ensure their health needs are not being neglected.
- The Early Help Strategy has been revised and relaunched with a focus on children and their families receiving the right help at the right time. We want to better capture the voice and views of children and their families. We also want to ensure appropriate referrals are made via the Front Door, reducing the pressure currently being faced. This information will be monitored via the quality and assurance sub group. We now need to revisit our multi agency threshold guidance document to reflect our approach of 'right help at the right time'. This will be reported on in our next annual report.

Priority 2 – Exploitation across the life course:

We know that there are vulnerable children at risk of exploitation in our Borough. We are developing our dedicated Exploitation Hub but there is still more work to do.

What we did:

- We identified a gap in health representation in our multi agency Exploitation Hub. Our health colleagues have now secured attendance of a School Nurse or Child in Care Nurse who sits on MACE (Multi Agency Child Exploitation) panels so that information sharing about a child is the best it can be. We know there is more work to do, and we will continue to support the embedding of this role.
- Implemented the Child Exploitation Operational Group to identify perpetrators, locations and high-risk victims of exploitation and work collectively across the Partnership. This will result in minimising the risks to children and ensure a cohesive approach to supporting children and young people
- In Summer 2021 all Police first responders were provided with additional training regarding thresholds of support and referral pathways with the aim to improve recording in the MASH and to ensure the right help is received at the right time.

Priority 3 – Preventing harm across the life course:

- Our health partners have created a Discharge Planning process which aligns to the DSPP multi agency Threshold's document to ensure that children who are discharged from hospital with complex needs or safeguarding concerns have a discharge planning meeting and the professionals around the child are all informed of the discharge and the child and family's needs. This will keep children safe and well.
- An uplift of 36 new posts were agreed for the child abuse department across WMP. The Dudley Neighbourhood Policing Unit will also see an increase in Early Help officers. The objective is for them to work closely with vulnerable children and young people to prevent them coming to harm and before they need to access more intensive levels of support or intervention.
- We have revised and simplified our professional resolution document. This will enable professionals to challenge other agencies where they feel something isn't quite right. This will keep children safe. In the majority of cases that have been brought to the DSPP attention, there has been concerns over the delay of the process. This is usually down to changes to the lead professional or an absent lead worker. These have been successfully resolved through the process.
- We have supported our partners in the roll out of their models of practice, recognising that different language may create confusion. We have produced our Think Family model of practice' guidance document to explain how we work with families in Dudley This will provide consistency and clarity for professionals and those who access children's services in Dudley. We have ensured multi agency training in both trauma informed practice and restorative practice is available.
- Following the increasing number of children and young people attending hospital with mental health, substance misuse and violence concerns, the Violence Reduction Unit (VRU) supported the placement of St Giles Violence Intervention Team in the Trust Emergency Department (ED). This means that timely and tailored support is offered to young people under the age of 25, who have been victims of a violent attack (youth, gang, and domestic violence) and have been admitted to A&E. More work is required to evaluate and mainstream funding for this service. Between September 2021 to the end of March 2022 the team have received 234 referrals for children and young people attending ED and have been able to work with them to improve education and employment prospects, issues around confidence and self-esteem and mental health concerns including self-harm and substance misuse.
- The Families Come First (multi-disciplinary, evidence-based model) was launched in January 2021 which includes teams providing support around substance misuse, financial support, emotional health & wellbeing, youth mentoring, parenting. The Dudley Webstar, a collaborative assessment tool is completed with families, providing evidence of children and families' views. There is also work with Citizen's Advice, CAMHS and substance misuse services to Commission staff from those partnerships to deliver the collaborative support to families. The multi-disciplinary model has been expanded to provide early intervention and support to families under Child in Need planning.

Other areas of progress that support our priority work:

- In January 2022, our Children with Disabilities team moved to children's services from Adult social care; this reflects the commitment to children at the heart of what we do. A wide-ranging audit was completed (25% all children open to the Disability Team) to test out consistency and quality of practice ensuring the right level of support of offered to this cohort of children and young people. We will be able to analyse the effectiveness of this move in our next annual report.
- The Child Friendly Dudley strategy has been agreed at Cabinet and is now in development. This will be supported by the recruitment of the Child Friendly Dudley project team and application of the nine UNICEF Child Friendly City principles to refreshed and redeveloped Council and Partnership strategic and operational plans.





LADO

The Designated Officer (DO) nationally known as the LADO (Local Authority Designated Officer) oversees allegations against adults in a Position of Trust (POT) who work or volunteer with children and young people.

A person in a Position of Trust has:

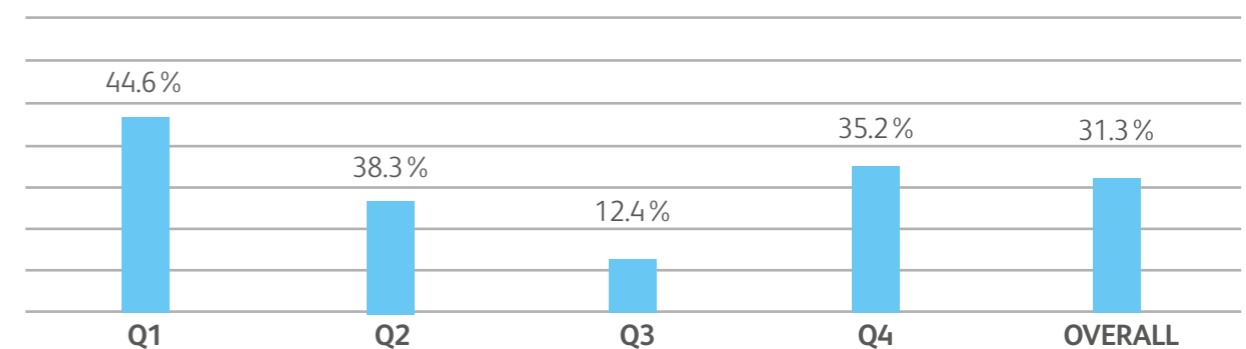
- Behaved in a way that has harmed, or may have harmed, a child
- Possibly committed a criminal offence against, or related to, a child, OR
- Behaved towards a child or children in a way that indicates that they may pose a risk of harm to children
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children

The main duties of the LADO are to:

- Manage individual cases – referral and investigations
- Provide advice and guidance
- Liaise with police and other agencies (Ofsted)
- Monitor progress of cases for timeliness, thoroughness, and fairness

During the reporting period, the LADO has continued to deliver the management of allegations multi agency training, ensuring that the work force in Dudley is appropriately trained to deal with this. There is still work to be done around engaging faith organisations which is something we will update on in our next report.

Contact to referral conversion rates, 2021/22



The above chart shows the total number of contacts 351 for 2021-22 and percentage rate per quarter. Unusually quarter 3 is the lowest when previous years it has been quarter 2 as this tends to be a quieter period due to schools being closed. The picture is not clear as to why this is however the low figure may be due to the impact of relaxation following the pandemic and schools making adjustments as pupils returned to face-to-face teaching. 110 contacts progressed to a referral and the largest referring agency was 'education', followed by social workers.

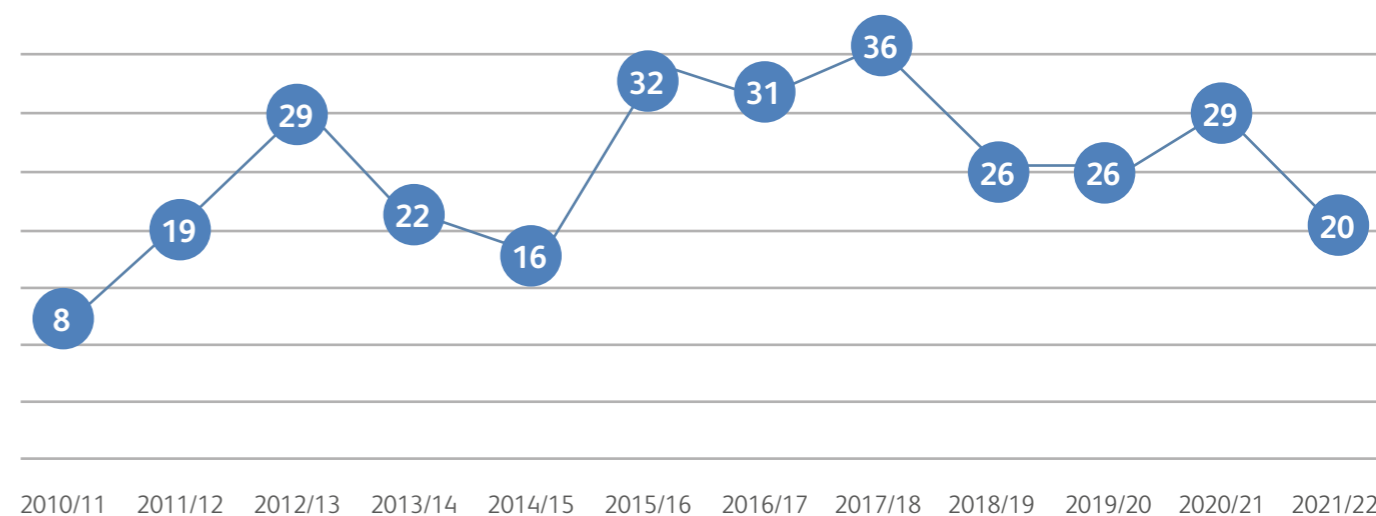




Private Fostering arrangements are often confused with a child being fostered by an Independent Fostering Agency. This is not the case; a Private Fostering arrangement is one that is arranged by the parent (person with Parental responsibility) and not the Local Authority. Parents retain the responsibility to support their child, this includes financial support for the Private Foster carer.

During the Covid Pandemic it has only been possible to promote Private fostering virtually.

Number of Private Fostering Arrangements open during the year



It is clear that since notifications were recorded, the number of Private Fostered children had increased within the Dudley Borough over the years, however during the Covid Pandemic numbers have dropped. This has been attributed to children from overseas travelling to the UK during lockdown.

It is evident that Children who are Privately Fostered can have complex needs including additional competing factors such as legal implications, social and Parental Responsibility (PR) issues, leaving this group of children potentially vulnerable. There is a continued commitment to have dedicated resources for Private Fostering it has been a positive year so far, not only in terms of statutory compliance but also with regards to the outcomes for children in Private Fostering arrangements.



Private Fostering

The Private Fostering Regulations apply when children, aged under 16 years (18 if they have a disability) live with a person who is not a close relative for 28 days or more. The term 'close relative' has a specific definition within the Children Act 1989, it includes grandparents, brothers, sisters, uncles and aunts (whether of full or half blood or by marriage) and step-parents. Children living with people who are not close relatives, such as a cousin, great aunt or family friend need to be assessed and reviewed under the Private Fostering Regulations to ensure the placement is able to safeguard and promote his/her welfare.



Learning from Reviews

Local Child Safeguarding Practice Reviews (LCSPR) are undertaken on 'serious child safeguarding cases' to learn lessons and improve the way in which local professionals and organisations work together to safeguard and promote the welfare of children.

Not all incidents that are reviewed will meet the definition of a 'serious child safeguarding case' but may still raise issues of importance. This might include cases where there has been good practice, poor practice or where there have been 'near misses'. In these circumstances the Partnership will decide whether to conduct a locally agreed learning exercise or case audit to ensure that learning is captured and shared with the workforce.

Activity in this period:

Five serious incident notifications were submitted to the National Child Safeguarding Practice Review Panel. This is more than we have previously submitted before Covid, which suggest the pandemic may have had an impact.

The Partnership's Rapid Review Panel met to consider the circumstances of these notifications. One review progressed to a Local Safeguarding Practice Review (LCSPR), one review has been undertaken as a Practice Learning Review and three did not meet criteria for review however due to crossover with a neighbouring local authority they will be identifying learning for their partnership through a Youth Justice review due to the peer on peer violence element.

The themes included within the serious incident notifications are:

- Neglect including cumulative neglect
- Non-Accidental Injury
- Child Sexual Exploitation including interfamilial sexual abuse
- Peer on per violence with elements of exploitation and County Lines
- Children missing education

Three of the children were male and two were female, the youngest child was aged five and half weeks and the eldest was 17 years at the time of incident.

The ethnicity of all children was not indicated on the LCSPR referrals, this is a learning point identified for the Partnership Rapid Review Panel, to consider any potential cultural issues in relation to safeguarding.

At the time of writing, an executive summary of the Practice Learning Review is due to be published on the Partnership website and the LCSPR is still in progress.

3 LCSPR's were published in 2021/22 relating to the previous reporting period, a summary of which can be found below:

Child Q and R

The review involved two children, from separate families, who sustained serious fractures while in the care of family members. Concern was noted that these could be a result of non-accidental injury, the cases were considered together due to the similarities. Both cases featured recent and historic concerns of domestic abuse, historic safeguarding concerns and maternal mental health issues.

The review findings included:

- The impact on domestic abuse during the Covid-19 pandemic
- Maternal mental health - the impact of ACES on children going into adulthood
- Partnership working in relation to strategy meetings
- Practitioners' ability to recognise non-accidental injury confidently and competently

Child YS

A review undertaken jointly with a neighbouring local authority; learning was identified for both partnerships.

YS and their family had lived in the Dudley borough for a number of years however had also recently started to use a property in a neighbouring borough belonging to father. Professionals had no knowledge of the other property until after the incident. YS and mother were assaulted in a violent attack by YS's father.

The review findings included:

- Assumptions about family traditions and cultural diversity should not be a barrier that inadvertently stifles professional curiosity
- Think Family – including consideration about a child's father and any other significant adults to gain a holistic picture.
- Nurturing professional curiosity and constructive challenge are fundamental aspects of working together to keep children safe.
- Developing a shared understanding of how people who have experienced trauma might engage with services is key to the success of interventions.
- Evidence based tools and methodologies should be used to support actions and learning that are grounded in the lived experience of the child.

Child Y

Child Y was nearly seven years old when they first started school and was significantly developmentally delayed due to neglect. The child lived with their parents who had managed to avoid professionals for several years. Indications of Child Y's significant developmental delay and neglect were not identified due to them being missing from education and because they had no contact with any professional for a few years.

The review findings included:

- Young children 'missing from education', the possibility of parental neglect should be considered
- Optimum and timely information sharing between professionals, to ensure a child's needs are met and consider the lived experience of the child
- The impact of COVID 19 in relation to parents who are hard to engage
- When there are concerns about a child, all agencies need to be clear about the child's place in the system and to challenge if there is a disagreement or delay

We disseminate our learning regularly via 7-minute briefings, practitioner learning briefings and we also have our annual conference booked in July 2022 which will also focus on learning from reviews. We will update more on how this goes in our next report.

Full details of the reviews and learning resources are now available on the DSPP website.

There are action plans in place for these reviews and progress is regularly reviewed by the Learning and Development sub group. For example we now have a Non Accidental Injury forum and have adopted the ICON programme in the Borough.

Learning from Audits

DSPP conducted four Multi-Agency Case File Audits (MACFAs) in 2021/22 on the following themes:

- Parental Mental Health
- Exploitation (Online Harm)
- Neglect
- Permanently Excluded Children

The audits provide a valuable opportunity to dip sample multi-agency practice on specific themes and for the partnership to assured about safeguarding practice. We noted several areas of good practice identified through the audits including:

- The importance of a trusted, consistent and meaningful relationship with a professional can make a difference to a child or young person.
- Engagement with a child's wider family network can have a positive outcome on children.
- Professional curiosity and Making Every Contact Count is paramount to support those at risk of exploitation.
- Schools are a steady part of children's lives and know children and their families well.

There were areas identified for improvement and these actions have been monitored by the quality assurance sub group.

- There is a need for all agencies to use the Child Exploitation Screening tool to identify and assess risk around young people
- The use of the Graded Care Profile2 assessment has not been consistently utilised in Dudley.
- Transition plans are not put in place in a timely manner, work is needed to ensure that they have consistent support and do not get lost in the system when transitioning to adulthood
- How agencies and professionals engage and work with fathers continues to be an area of practice that requires improvement as does inter professional communication and coordination of support and services for families





Multi-agency training and its impact

The rise and fall of the pandemic throughout the year impacted our training offer however we still delivered over 40 virtual training events delivered through the DSPP between 1st April 2021 and 31st March 2022.

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We offered 1263 places, of which 718 were used, and out of that 535 attended the virtual training sessions.

We found that 111 delegates cancelled, mainly due to capacity, but nearly 200 did not attend on the day, and again this was mainly due to operational service delivery issues. We recognise as a Partnership that we need to work with our partners to try and reduce the number of cancellations so that we have assurance that our workforce is appropriate skilled.

90% of our training was half day and 10% was full day, and we found that this suited attendees especially during the pandemic as it made the training accessible and modular.



19 virtual events for children were delivered through the financial year



Almost 2000 hours of virtual training has been undertaken by partner agencies in the Borough. Attendees reported improved knowledge following courses which will improve their practice:

“I found the training important so I can advise the new parents that: There are many different reasons for a baby to cry. I can show them in the leaflet that crying is normal and differs at different stages and times as baby grows That it’s not always easy with a new born and sometimes its ok to walk away as long as they are safe for a minute to calm down and have a breather.” – ICON eLearning course.

“The importance of the role of recruiting in safeguarding children. How questions can be formulated, and the references used to ensure safe recruitment practice. The importance of what needs to be done at pre recruitment, shortlisting, interview and post interview stages.” – Safer Recruitment

“The impacts of child neglect long-term e.g. the long-term effects on physical health, mental health, emotions, behaviour and educational outcomes Signs of neglect in relation to the covid 19 pandemic. Parenting styles can lead to children being neglected The impact that neglect can have on Brain development for example psychological problems, such as low self- esteem, which could later lead to high-risk behaviours, such as substance use.” – Child Neglect



573 places were offered on virtual courses with a total of 369 bookings made on the DSPP Event Management System. 102 delegates failed to attend.



Delegates representing 33 different services or organisations have been able to network and build relationships on multi-agency training



267 delegates have successfully completed approved training.

Training Evaluations and Data

What we can see from our data embedded in our Learning Management System is that:

- only 62% of people complete pre-evaluation
- only 45% of people complete post course evaluation
- only 8% of people complete post event stage 2

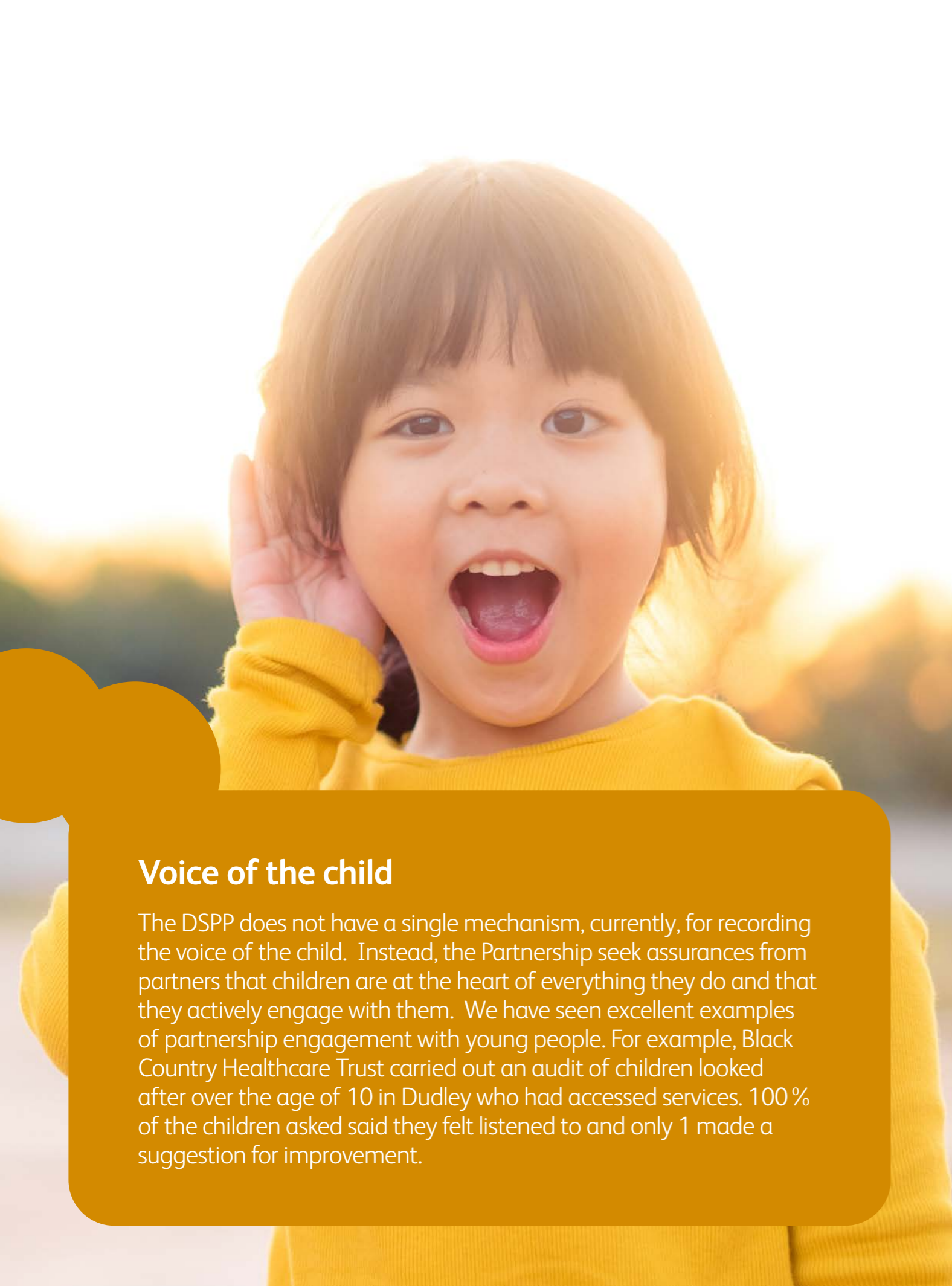
Learning Gain

Pre-booked average	Post Event Average	Learning Gain
3.04	4.27	1.23

Data collected from 01.04.2021 to 31.03.22

Our learning gain figures show that our training is improving professional knowledge which will in turn improve safeguarding practice. We regularly ask for feedback on our courses to ensure we are delivering the right material to the right audience. We are part of a regional learning and development group which enables us to share best practice. We are also working on growing our training pool of facilitators, which we will update on in our next report. We also know we need to get better at closing the loop on our learning and understanding where we have seen an improvement in practice as a result of our training and awareness raising. We are also increasing our face to face training, in a blended approach to multi-agency training. We know from feedback, that virtual training works well for some of our colleagues because of workload and capacity however we have also received feedback regarding some of our courses, that would benefit more from face to face discussion and interaction.





Voice of the child

The DSPP does not have a single mechanism, currently, for recording the voice of the child. Instead, the Partnership seek assurances from partners that children are at the heart of everything they do and that they actively engage with them. We have seen excellent examples of partnership engagement with young people. For example, Black Country Healthcare Trust carried out an audit of children looked after over the age of 10 in Dudley who had accessed services. 100% of the children asked said they felt listened to and only 1 made a suggestion for improvement.

Our Community and Voluntary Sector partners are vital to engaging children and young people. Some examples of their work include young people in Dudley, engaged through the sector, working as Young Commissioners to work on standards of homes for young people. This will meet Government's vision of regulated standards in accommodation. DMBC have worked with Police, charities and housing associations and involved young people supported by the sector.

In an example of lived experience, a parent whose child has been sexually abused has produced a case study report alongside her worker from the voluntary sector, this has been used to influence regional response to Victims of Child Sexual Abuse and local responses in training and consultation.

Moving forward, we will continue to use the information as assurance of our safeguarding practices across the Borough, but we recognise we need to do more to receive children and young people's feedback to influence and shape our work in the next twelve months.





Our priorities for 2022-2024

Our priorities have recently been revised in April 2022 along with our structure. We now need to formally launch the priorities. We will do this via our annual safeguarding conference and will be able to report on this in our next annual report.

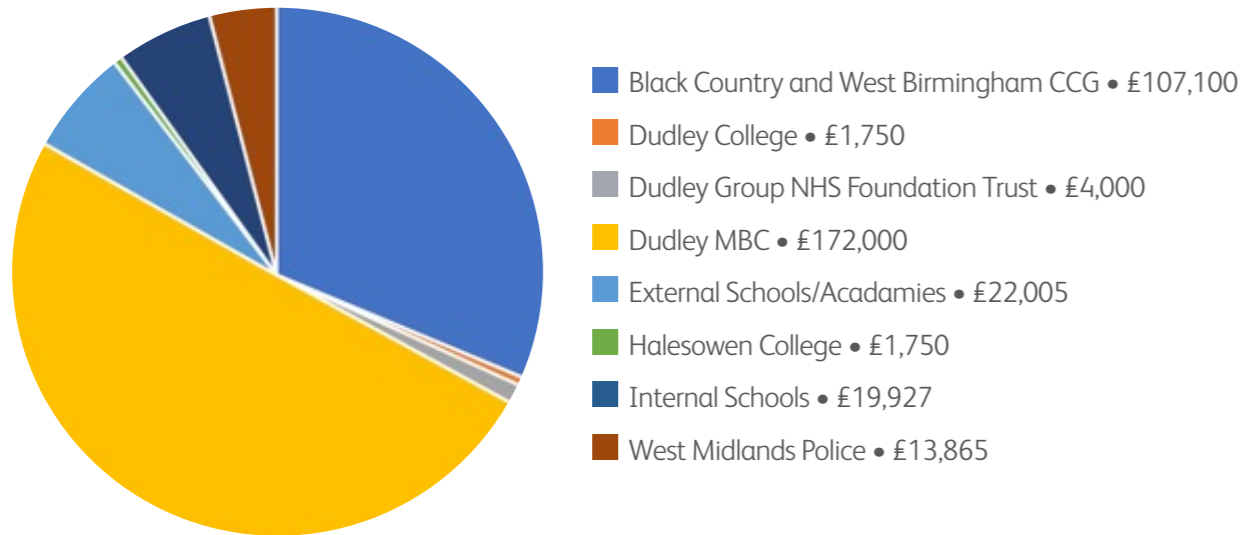
In the next twelve months we also need to:

1. Review our multi-agency threshold document to ensure the terminology reflects our right help, right time ethos. Development of an Integrated Front Door that enables children and families to receive support at the lowest effective level.
2. Redesign the 'Front Door' including MASH so that agencies are offered support before a referral. Referrers and families should be offered information, advice and guidance and signposting to access support, and only those who require potential social work intervention will become a formal referral. This will mean less families accessing support at a higher level and are supported to help themselves. This will be alongside out review of the threshold document.
3. Ensure that our partners are fully prepared for the implementation of Liberty Protections Safeguards, in preparation for the change
4. Review our current Multi Agency Case file Audit process, ensuring we focus on the quality of practice and the difference we make and analyse the findings and embed learning in our practice ensuring we have a shared understanding of what good looks like.
5. Ensure our dataset is truly multi-agency and reflects our revised priorities and that we know what we are doing is making a positive difference to children and young people
6. See a return to face-to-face training courses to enhance the opportunity for shared learning
7. Continue to work with our education colleagues to ensure we have a holistic view of safeguarding across the partnership
8. Ensure we have a robust approach to understanding use the voice of children and their families and this influences the work of our partnership and how we deliver services.



Appendix 1

DSPP funding arrangements 2021-22



Appendix 2

Case Study 1:

K was considered to be at high risk of Child Sexual Exploitation. However, there was also a context of K and her siblings experiencing neglectful parenting, with poor home conditions, a chaotic environment and a strained relationship with her mother. K had been subject to a Child Protection Plan, Child In Need planning and Early Help at different points during her journey, and has also come into the care of the Local Authority at times when her care arrangements at home or within her family have broken down. Analysis of the work undertaken shows the positive impact of Return Home Interviews being undertaken following missing episodes which led to a clear plan around managing risk with the intelligence gained regarding the risks identified. The exploitation screening tools were used to good effect with purposeful outcomes identified. The Social Worker approached the work in a relational way with K and her mother, attempting to repair the harm that had occurred in their relationship and ensuring the child's voice is evident throughout the assessment work which then influenced decision making and planning. When thresholds changed regarding the risk, Managers made effective decisions based on evidence to ensure the right help was offered at the right time, and involving partner agencies when appropriate. When K did need to come into the care of the Local Authority the help under a Family Group Conference arrangement was offered swiftly which led to K returning home within 12 weeks. Overall, the Social Worker and her manager worked with the family with tenacity and persistence, but maintained the focus on the child's voice and evidence of her lived experience, allowing the right help to be delivered as risks changed.

Case study 2:

Leah was admitted to the paediatric ward following several attendances at the Emergency department with aggressive and self-harming behaviour that her parents could no longer cope with. Leah was using negative language about herself and was using inappropriate language at home and at school. Whilst Leah had been known to CAMHS due to anxiety and self-harm, this was escalating behaviour patterns that Leah had not previously been displaying. Whilst on the ward, Leah's behaviour escalated further, and her parents were not able to manage them. She used inappropriate and offensive language, expressed feelings of wanting to die and feeling unloved. Staff were extremely upset and worried regarding Leah's behaviour and a safeguarding referral was made due to concerns for Leah's safety. A number of measures were put in place to try and support her. Later during her admission, Leah began to tell staff small but significant pieces of information that led staff to believe that she had been abused by someone close to her family. This information was shared with the appropriate agencies. Leah's story is a good example of how a child's voice often manifests in behaviours and actions that at first sight may not make it clear that there has been abuse. Opportunities were missed where Leah could have been asked more directly about what had happened to her, whether anyone was hurting her or if she felt safe. Giving children the opportunity to speak, by asking key questions and providing the time and space to hear, is an effective way of opening conversations and hearing their story.



Dudley Safeguarding
People Partnership