



Dudley Safeguarding  
People Partnership

# ANNUAL REPORT 2020/21

## Dudley Safeguarding Children Partnership Group

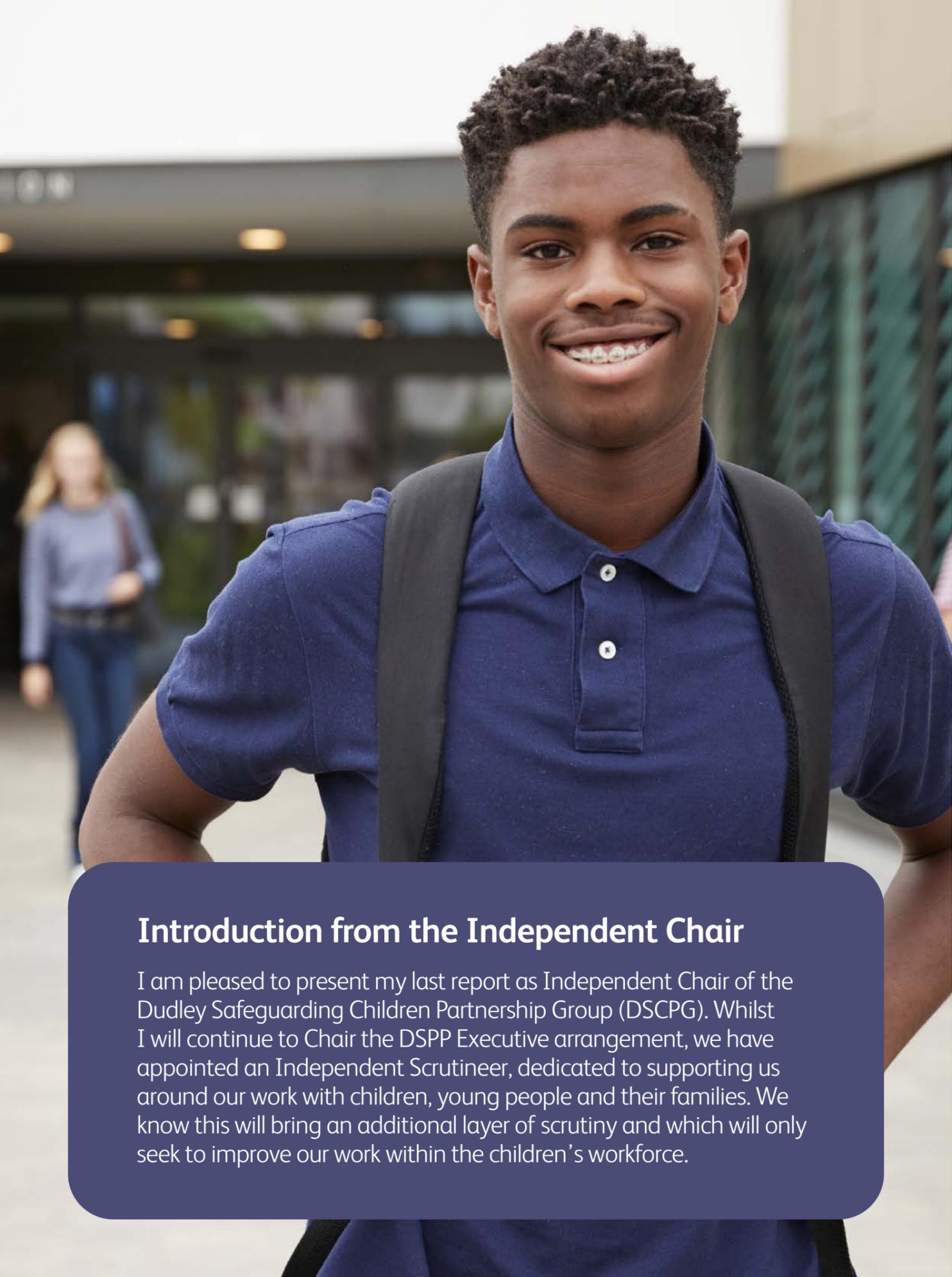
Reporting Period April 2020 – March 2021





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## Introduction from the Independent Chair

I am pleased to present my last report as Independent Chair of the Dudley Safeguarding Children Partnership Group (DSCPG). Whilst I will continue to Chair the DSPP Executive arrangement, we have appointed an Independent Scrutineer, dedicated to supporting us around our work with children, young people and their families. We know this will bring an additional layer of scrutiny and which will only seek to improve our work within the children's workforce.

Last year, we discussed our work as we entered the first lockdown of Covid-19. The report covers the second and third lockdowns and highlights the excellent work of the people of Dudley in order to ensure that safeguarding our most vulnerable children and young people has not suffered despite the enormous challenges everyone faced. It must not go unnoticed, the sacrifices and losses that have touched each and every one of us.

Not only has the pandemic dictated how we operate both strategically and operationally, but we have encountered changes to legislation that has meant professionals have had to adapt quickly and effectively. The Covid 19 Prioritisation with Community Services Guidance, The COVID 2020 Act, Changes to the Care Act 2014 and the various Covid-19 related Guidance, have all emphasised that safeguarding children and adults is as critical during the pandemic as at any other time. With this in mind, we are also working on the introduction to the new Liberty Protection Safeguards, now delayed until April 2022, but which will bring with it a major change to the current Deprivation of Liberty Safeguards process and one which will impact children and adults. In addition to this we await the findings of the Independent Care Review, an independent and evidence based review of our children's care system, which will undoubtedly impact on children's services.

The global Covid-19 pandemic is unprecedented and the impact for individuals, families, communities and wider society is significant and will be long lasting. Due to the restrictions in place, many children and adults have become at increased risk of harm such as exploitation, domestic abuse and financial scamming. The most vulnerable in our society have been hidden from day to day services that would normally have provided a protective shield, and it is likely that the true impact of harm to these individuals will not be fully known for many more months.

Our greatest worry of all is the impact that Covid-19 has had on our youth as a result of the cessation of many diversionary activities some groups reporting a sense that they have lost some young people to risk taking behaviours and crime. In addition we have seen a rise in the number of mental health referrals and domestic abuse as well as disrupted education for our generation. There is a new unmet need and a backlog of concern to work our way through as a Partnership.

As we focus on our 'recovery' I would like to thank the dedicated people who work across all of the organisations in Dudley who are working to promote the welfare and safety of children and support children, young people and their families, particularly in these challenging times. I have seen first-hand the amazing and inspiring work carried out daily by our partners, key workers and voluntary organisations to keep people safe in the Borough.

We will continue to ensure that safeguarding children remains a priority to everyone.

Finally, I would like to thank the chairs of the subgroups and to the Safeguarding Business Unit for their hard work and support during these unprecedented times.

**Dr. Paul Kingston**  
**Independent Chair, Dudley Safeguarding Children Partnership Group**





# Deprivation, Child Poverty and Family Income

A total of 76,306 children and young people aged 0 to 19 live in Dudley (Mid-Year population estimates 2020). This is 23.67% of the total population in the area.

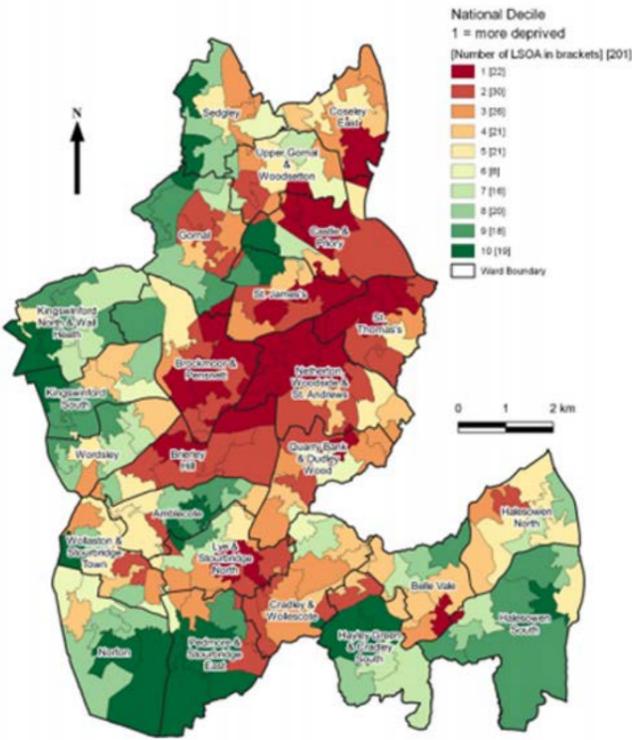
The proportion of children and young people from minority ethnic groups is rising and in January 2020, they represented 20.3% of the school population up from 16.0% in 2012. The number of children for whom English is an additional language is 11.0% in January 2020 up from 10.7% in 2012.<sup>1</sup>

Both absolute and relative child poverty has remained an issue in Dudley with rates significantly higher than England. The most recent data available 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.<sup>2</sup>

The proportion of people in receipt of Jobseeker's Allowance in Dudley in July 2021, 1,459 people in Dudley Borough were claiming Jobseeker's Allowance (JSA). This is 210 people more than October 2019. The claimant rate for Universal Credit July 2021 in Dudley (6.4%) is lower than the West Midlands percentage (6.5%) and England percentage (5.5%).<sup>3</sup>

The mean annual wage for Dudley residents working full-time was £29,995 in 2020, below the national figure of £32,237.

The median gross weekly earnings for full time employees in Dudley is £563.30 ONS annual survey of hours and earnings - resident analysis. This is higher than the West Midlands average (£551.70) but lower than England (£587.10)



Source: Indices of Deprivation 2019, MHCLG  
Produced by: Intelligence Team, Dudley MBC, 2019  
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## 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 and Walsall and the city of Wolverhampton.

The population has been growing at a modest but sustained rate in recent years, with 16,441 more people in the Borough now compared to the 2001 estimate.

## Education, Employment & Training amongst Young People

The number of young people (aged 18-24) claiming Job Seekers Allowance (JSA) had continued to decline up until the onset of the Covid-19 pandemic. In October 2020, there were 70 (0.3%) compared with October 2019 where this was 25 (0.1%). Dudley is equal to both the regional (0.3%) and national (0.3%) percentages. 21.4% of claimants aged 18-24 in the Borough had been claiming JSA for longer than 2 years, higher than both regional (21.3%) and national (17.0%) averages.

## Health Inequalities

The infant mortality rate in Dudley is 4.1 per 1,000 live births for 2017-19. This is a reduction from 5.4% per 1000 live births in 2015-17. This is similar compared to the England value of 3.9% per 1000 live births.<sup>4</sup>

Smoking in early pregnancy in 2018/19 was 15.7%, statistically significantly higher than the West Midlands and England average.<sup>5</sup>

Smoking status at the time of delivery in Dudley shows no significant change from 2018/19 where the value was 12.8% although the value has gone down in Dudley for 2019/20 to 11.3%. This is below the West Midlands 12.1% but above the score for England which is 10.4%.

Breastfeeding prevalence at 6-8 weeks has seen a healthy increase during 2018/19 (1,311 children) over 2017/18 (895). However, issues with data quality mean the data cannot be easily benchmarked alongside regional and national performance. For 2019/20 a continuing data quality issue has meant this value has not been published. Breast milk being babies first feed is 61.3% for 2018/19 lower than the England average of 67.4% for the same period.<sup>6</sup>

Primary course immunisation coverage in the first year of life in 2019/20 within Dudley is 95.4%. Dudley did improve from 94.8% in 2018/19. The 2019/20 result was above the England average of 92.6% and the World Health Organisation (WHO) target of 95%.

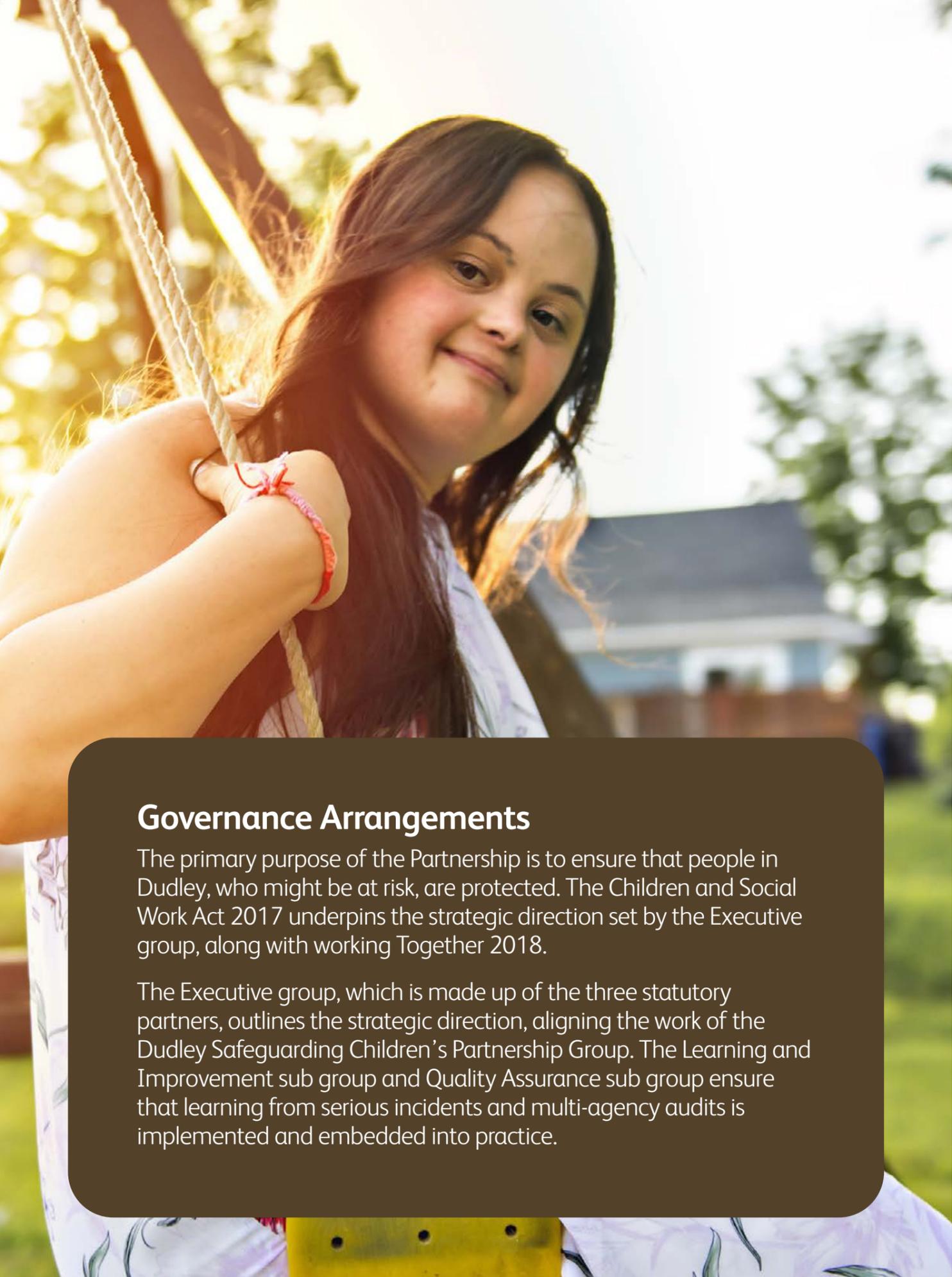
Reception children overweight (including obesity) rates in 2019/20 are greater in Dudley (27.1%) compared to England (23.0%) and the West Midlands (24.6%). There has been no significant change in the difference between Dudley and England and has been for the past 7 years. Reception: Prevalence of obesity (including severe obesity) in Dudley in 2019/20 stands at 12.3\* and England 9.9% and the West Midlands 12.2%. The data for Dudley does need to be treated with caution as per the source guidelines.<sup>7</sup>

Currently Dudley's under 18 conception rate (19.3 per 1,000) to the West Midlands (19.1 per 1,000) but is higher than England (16.7 per 1,000). The latest data available for this indicator is for 2018, there is no new data made available for 2019/2020 for any indicator.

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 March 2019 show that 28% of primary school pupils said they had been bullied at or near school in the past 12 months. Down 1% from last year.<sup>8</sup>

1. Source: School Place Planning team/ School census
2. Source: PHE. Public Health Outcomes Framework
3. Source: NOMIS
4. PHE Public Health Profiles
5. Source: Public Health Outcomes Framework, Public Health England
6. Source: Public Health Outcomes Framework, Public Health England
7. Source: Public Health Outcomes Framework, Public Health England
8. Source: Health Related Behaviour Questionnaire

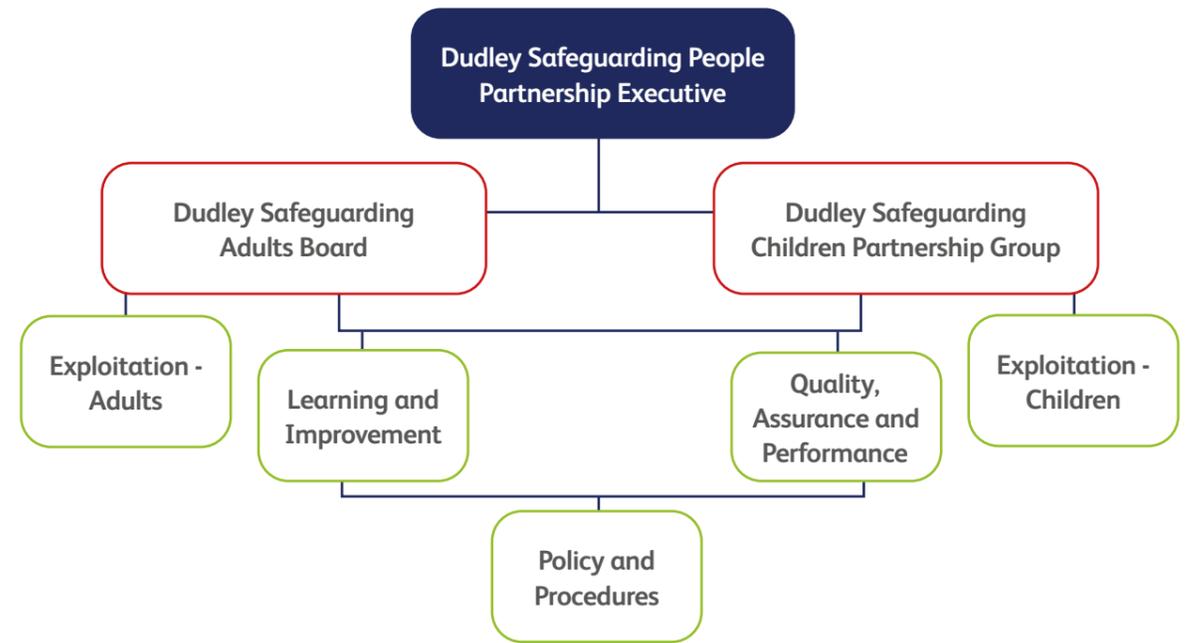




## Governance Arrangements

The primary purpose of the Partnership is to ensure that people in Dudley, who might be at risk, are protected. The Children and Social Work Act 2017 underpins the strategic direction set by the Executive group, along with working Together 2018.

The Executive group, which is made up of the three statutory partners, outlines the strategic direction, aligning the work of the Dudley Safeguarding Children's Partnership Group. The Learning and Improvement sub group and Quality Assurance sub group ensure that learning from serious incidents and multi-agency audits is implemented and embedded into practice.



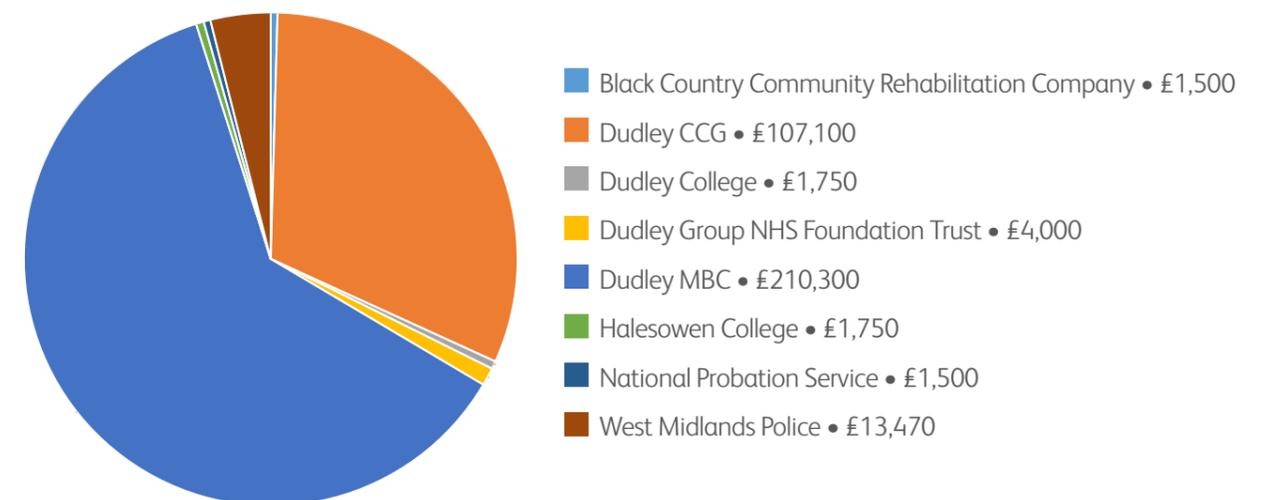
\*We have now amended our governance structure, to include a neglect sub group which focusses on a priority of neglect. In addition we have separated our quality, assurance and performance subgroup to allow a focus directly on children's work, allowing for discussion where work overlaps with adulthood for example, preparing for adulthood. Our priority of preventing harm across the life course underpins all of our work. A more detailed update will be provided in our next annual report\*

### Overview 2020-21

The priorities of the DSPP, namely preventing exploitation across the life course, preventing harm across the life course and neglect have remained the same as the previous year, during this reporting period. Despite the impact of Covid-19, safeguarding activities remained a priority and activity did not decrease. It was inevitable that some changes were made, for example, our multi-agency face to face training offer was converted to eLearning and all sub group meetings and practice events were held virtually. The partners, despite the extraordinary challenges faced on the frontline, remained fully committed to Partnership working.

### Funding Arrangements

Below is the overall annual income as agreed by partners for 2020/21 to support the delivery of the DSCPG functions and objectives. This includes covering the cost of any reviews, funding a training programme, agreed events; including annual conferences, annual licenses and subscription costs, and any independently commissioned pieces of work, including costs for the Independent Chair. The income revenue from partners also supports the resourcing of a business unit.



## Key achievements

- We refocused the work of the Quality Assurance and Performance sub group. The sub group had previously been a sub group covering the life course and has now separated into two groups, one dedicated to children's and one to adults. By revising the terms of reference, the group has focussed on emerging themes and trends as well as developing a robust multi-agency dataset specifically to children.
- We maintained all sub group activity and Child Safeguarding Practice Review (CSPR) referrals within time scale, despite operating virtually across the Partnership.
- Increased the Executive activity, meeting weekly during the height of the pandemic, to ensure statutory functions were maintained and safeguarding assurances were provided.
- We converted all face to face training courses to e-learning, ensuring everyone was still able to access vital training from home, including lessons learnt from CSPR's. As a result of this, the number of people accessing training has increased. Those who completed pre and post evaluation feedback reported a learning gain of nearly 1.5%. They said their knowledge and awareness of safeguarding topics had increased.<sup>9</sup>
- We successfully delivered 16 virtual training events, ensuring that where attendees need the ability interact with the trainer, they are able to do so. Those who took part in these sessions, reported positively and how the ability to talk through scenarios was beneficial both personally and professionally.
- We developed a bi monthly newsletter, (weekly during Covid) to ensure all of our partners are kept up to date with the work of the Partnership. Partners reported that this was particularly useful to have all information from one place, given the volume of information and quick changes to guidance and legislation during Covid.
- We produced a programme of Safer7 briefings, ensuring real time and targeted information was shared with everyone. In doing so, frontline practice felt informed and up to date with new legislation and learning from CSPRs. Some Safer7's were a reminder of existing guidance and frontline practitioners reported feeling more confident in their work as a result of reading these.
- Developed a raising awareness campaign around safeguarding to be placed in vaccination centres to help volunteers and people accessing the service who might be unaware of the help available to protect them and families.
- We implemented a dedicated Exploitation Hub, consisting of multi-agency partners. Part of this work included a revised Exploitation Strategy and development of 'My Safety Plan' for children and young people considered at risk of exploitation. It is too early for us state what impact this has had for young people; however we will report on this in our next report.
- A Multi-Agency Safeguarding Hub (MASH) project team was set up to improve the progress and practice within the Hub. This is supported further by a MASH operational and strategic group, dedicated to ensuring the quality of referrals and appropriate use of thresholds is improved.<sup>10</sup> We have since revised our thresholds document, and are seeing more appropriate use of this when referrals are made. We will be able to report more fully on this in our next report.
- A revised and newly promoted resolution and escalation process has been shared by the Partnership. This has ensured that professionals have a route to raise a disagreement, ensuring Dudley has an open, safe and transparent way of working. During the reporting period, we received three escalation notifications (two from health organisations and one from an education setting) which were resolved at level 2 (without DSPP intervention). We identified learning from a Serious Case Review that highlighted we needed to improve in this area. We know that more escalations have been received and some requiring DSPP intervention, these will be reported in our next report. This suggests that where there is professional disagreement, practitioners are more confident to escalate matters thus ensuring the right help is provided to children, young people and families. Outside of the reporting period for this report, we have continued to see escalations raised between organisations although majority are resolved line manager to line manager satisfactorily without the need for further intervention.
- The Online Harms page and Educational Resources page on the Safe and Sound website have been updated to ensure information, links (including to relevant eLearning) and resources are up to date and relevant.

<sup>9</sup> We have no comparative data as our previous learning management system did not capture this information.

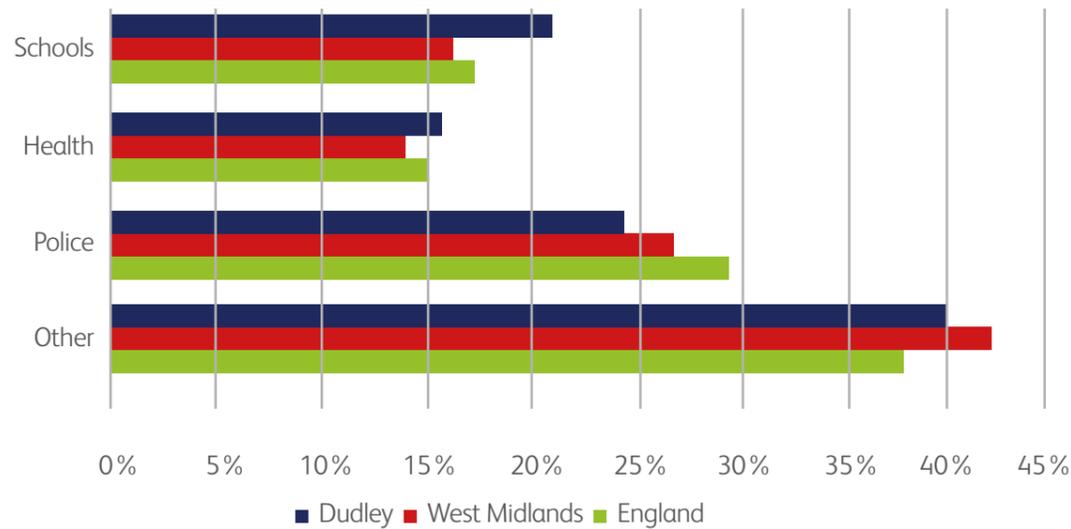
<sup>10</sup> We are now seeing an improvement in the quality of referrals and the timeliness of cases referred into the MASH however, there is no data for this reporting period. This will be covered fully in next year's annual report.



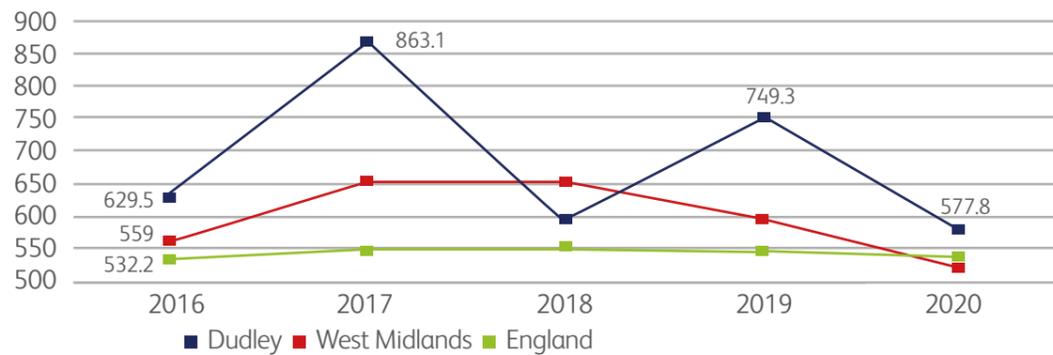
# Performance Data

## Referral by source

Contacts referred for Assessment by Source 2019-20



Rate of referrals per 10k child population 2016 - 2020

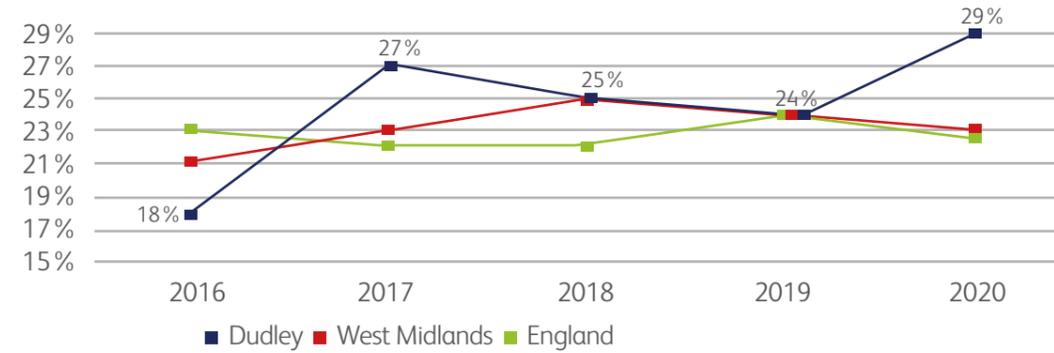


In 2019 the number of referrals per 10k child population in Dudley was higher than regional and national figures, there has also been a significant increase in referrals compared to the previous year (595.5 in 2018 to 749.3 in 2019).

Numbers of Strategy Discussions and S47 investigations which did not progress to ICPC had been increasing and were again very high in 2019. Dudley Threshold Guidance and Framework for support 2019 was published in Sept 2019 to help all partners in their decision making for referral and to emphasise the role of the early help offer.

Data available for 2021 shows that the rate of referrals in Dudley was slightly lower than the 2020 Dudley levels and were similar to the all England average

% of referrals that were re-referrals within a 12 month period, 2016 - 2020



The percentage of referrals that led to a re-referral within 12 months has decreased in Dudley between 2017 and 2019, the reason for an increase in 2020 is unclear without further detailed analysis however early 2021 data shows that this figure has decreased to 17% and suggests that more families are receiving the right help at the right time.

## Early Help

There was a 14% decrease in the number of Early Help Assessments (EHAs) completed in 2020/21 compared to 2019/20.

|  | Total 2018/19 | Total 2019/20 | Total 2020/21 |
|--|---------------|---------------|---------------|
| Completed LA EHA's                               | 1191          | 1340          | 1345          |
| Completed Wider Partnership EHA's                | 941           | 1133          | 634           |
| Total No. of EHA's                               | 2132          | 2473          | 1979          |
| Total No. of contacts received at Family Centres | 4072          | 5215          | 5258          |

- The number of EHAs submitted via the Local Authority (LA) remained the same, but there was a decrease in referrals from the wider Partnership by 44%.
  - In previous years there was an even split between local authority and wider partnership completions of EHA. However, in 2020/21 there were 68% completed by the LA compared to 32% by wider partners
- In the last 6 months Family Support has worked with 1249 families. In the same period in 2020 1037 families were supported. In the same period in 2019 (pre pandemic) 1195 families were supported. Through the pandemic the number of families support by Family Support has seen a 4.5% increase in comparison to

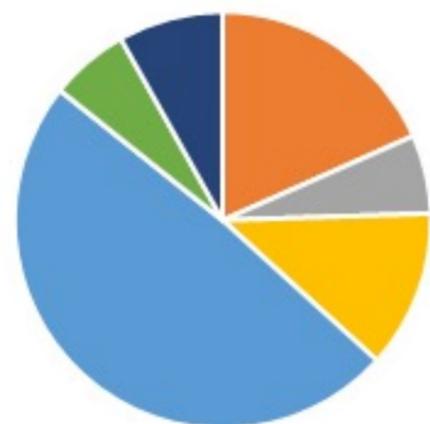
2019. There has however been a reduction of Early Help Assessments (EHA) completed by partners. This data shows that Family Support have picked up Early Help work from partners through the pandemic. At year end 2019 2413 EHAs had been undertaken with a split of 1357 council (56%) and 1056 partnership (44%). In the last 6 months (April 2021 to September 2021), a total of 1,208 Early Help Assessments have been completed. Of these, 787 (65%) have been completed by the council, whereas 421 (35%) have been completed by the partnership. This demonstrates that work has been required to engage partners in the COVID recovery period. This work has begun via Early Help Enables attending team meetings with School Nurses, Health Visitors and CAMHS to offer re engagement support.

- In 2020/21, 84% of closed Early Help Cases that were not open to Level 4 Services within 6 months of closure.
- The number of Contacts received into Family Centres in 2020-21 increased by 1%.
- There has been investment in the Family Group Conference (FGC) including an expansion of capacity by four full time posts. This resulted in 346 referrals which was an increase 83.06% from previous year and 103 FGC plans being delivered which was an increase of 66.12% from the previous year.

The diagram below highlights that Children Looked After in the first diagram, were no longer under Children Looked After (CLA) status 3 months after their FGCs and no children moved into CLA status 3 months following an FGC. This evidences that children either remained at home within their immediate or extended family or as a result of their FGC returned home from being looked after.

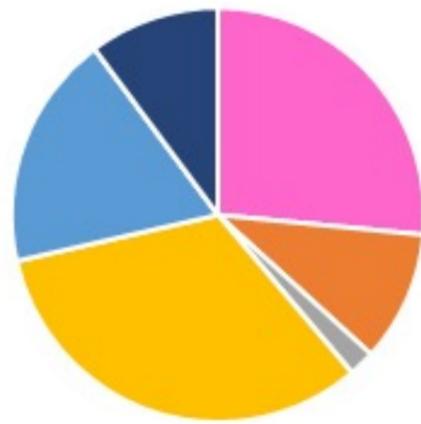
**Legal Status at time of Referral**

For FGC Cases which completed 1/12/20 - 31/3/21



**Legal Status 3 months after Case Closure**

For FGC Cases which completed 1/12/20 - 31/3/21



- Level 1/2
- Early Help
- Assessment
- CIN
- CP
- PLO
- CLA

The increase in the second diagram of CIN status, represents those who were stepped down from Child Protection (CP) and Public Law Outline (PLO) status. These outcomes highlight how families can work in a Restorative manner and use the FGC process to produce positive plans to ensure their children remain safely within their own families and also highlights for those families initially at PLO level, were all stepped down after their FGC. It is clear therefore that FGC is effective at PLO level as well as Early Help stages in preventing children from becoming CLA. It is often a clear focus for families to come together during a time of crisis, pool their resources and strengths and generate a positive Family Plan.

In addition, those on Child Protection Plans were also dramatically reduced and stepped down to Child In Need plans following their FGC.

This reaffirms the need for the FGC process to be used at all points of a child's journey but specifically when making decision-making at the earliest stage to try and prevent escalation and social work intervention commencing or continuing.

The work of the Family Group Conference Service has been widely complimented by both professionals (internally and externally) These are a few testimonies from families and professionals:

"Family stated that their FGC had been really good and had bonded them as a family, better than they expected."

(1.7.20)

"This is fantastic work, thank you for this, it is extremely helpful and thanks for your hard work in this case. The children's voices were captured in very innovative way"

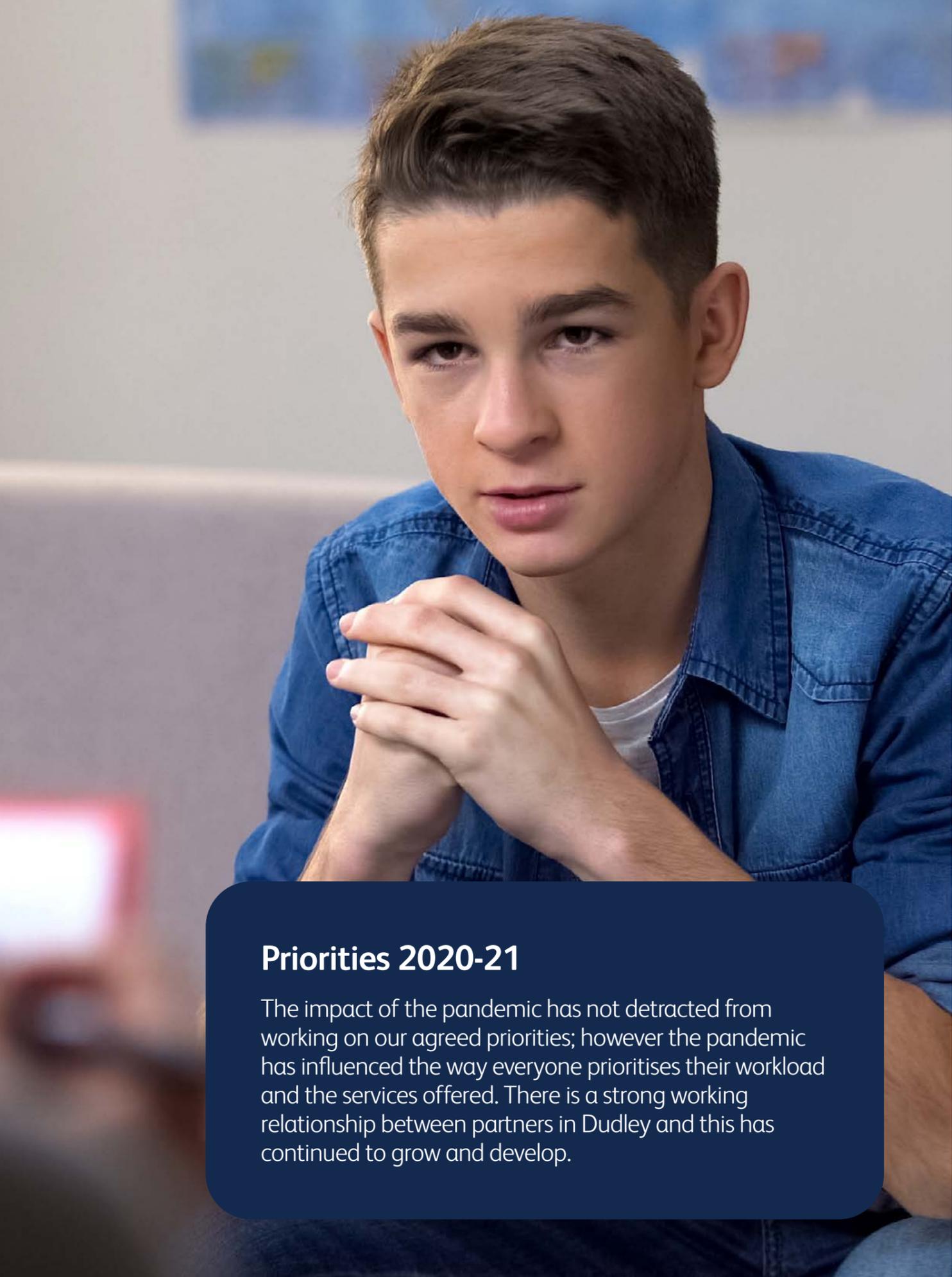
(CAFCASS 4.6.20)

"I think the family conference was a good idea to do, between us all we worked out a plan which has helped us support the children's mum better with everyone knowing the plan if something comes up, we all know to follow the plan which is working well.

Thank you for the support."

(Gran 7.7.20)

- A strong partnership with Public Health enabled growth in delivery of parenting groups and interventions from 400 parents to over 700 which is a 75% increase. For many families, mental health has a major impact on family life, how they raise their child and the children's lived experiences. Evaluations indicate all parents who have completed a group evidenced some improvements in their well-being, resulting in a positive impact on how they raise their children.



## Priorities 2020-21

The impact of the pandemic has not detracted from working on our agreed priorities; however the pandemic has influenced the way everyone prioritises their workload and the services offered. There is a strong working relationship between partners in Dudley and this has continued to grow and develop.

Our focus is now on ‘recovery’ with a view to living with Covid. We need to understand that the challenges faced so far are not over but may present themselves in different ways, and this is likely to be our focus in next year’s report.

Our priorities for the forthcoming year remain the same, and we continue our focus on preventing harm across the life course, preventing exploitation across the life course and prevention neglect and self-neglect. In many ways, these priorities have become even more important as the impact of the pandemic may take years to fully understand.

### DSPP Priorities 2020 – 2022

Neglect  
across the life course

Preventing harm across the  
life course

Exploitation  
across the life course

#### Key achievements and progress

##### Neglect

- The DSPP continue to promote and embed the use of the Graded Care Profile2 (GCP2). Alongside this, Dudley are also taking part in the Graded Care Profile2 Antenatal (GCP2A) programme. A review of the programme has highlighted a need to better record the use of the tool and a need to increase the number of people trained to use the tool. In doing so, this increase the chances of spotting signs of neglect at an earlier stage, enabling help and support to be provided in a timely and appropriate way.

One GCP2 training course took place in 2020/21, with 7 delegates attending and 4 delegates did not attend. We anticipated training 150 people during 2020/21 – however due to the pandemic we had to cease all face-to-face training from March 2020. Unfortunately no post course feedback was received from the attendees. We know we need to do more to understand how effective this training is on practice and what this means for the families we work with and will be exploring further ways of obtaining this information. We also need to ensure more frontline practitioners are trained in the use of this tool and are working closely with our partners to raise awareness and encourage training.

The GCP2 training is a national tool designed by NSPCC (National Society for Prevention of Child Cruelty) and was developed to be delivered face to face. During November 2020 we piloted a new virtual delivery of GCP2, with feedback about the ongoing difficulty of delivery and poor attendee experience. We created a small focus group with Public Health Dudley and DSPP and jointly developed an online module to complement the virtual learning between December and February 2021.

|    | No. of Assessments | No. of families GCP2 used with | No. of children GCP2 has been used with |
|----|--------------------|--------------------------------|---|
| Q1 | 1                  | 1                              | 1                                       |
| Q2 | 11                 | 2                              | 6                                       |
| Q3 | 1                  | 3                              | 9                                       |
| Q4 | 8                  | 4                              | 8                                       |

- Community and Voluntary groups have diversified and provided a range of virtual counselling and emotional health and wellbeing support online during the pandemic. Services have reported an increase in the number of referrals for mental health services and play therapy.

## Preventing Harm Across the Life course

- In May 2020, a change to children’s social care recording now means all domestic abuse information is recorded as a contact, however this does mean there is an increase in contacts recorded. The short / medium term consequence was a significant rise in the number of Contacts being progressed by MASH which contributed to a fall in the timeliness of Contacts being progressed by MASH by the next working day. Whilst this allows for improved information sharing and the ability to identify patterns of behaviour, so children and families are better supported either through early help or child protection, the process has since been amended so to allow vital information on domestic abuse reach the key worker or social worker directly.
- Increased partnership work with Clinical Commissioning Group (CCG) and CAMHS to raise awareness of the increase in children and young people experiencing substance abuse and mental health problems. This ensures that the right help and support is provided to children and young people.
- Health Related Behaviours Questionnaire was commissioned by Public Health Dudley. This is a survey to assess impact of Covid-19 on children and their lifestyle, to include online behaviour and impact of lockdown. By fully understanding the lived experience, a range of support packages are available around healthy lifestyles, parenting support, family support, children and young people’s support and substance, alcohol and sexual health support.
- Publication of a Transgender and Gender Questioning guidance, toolkit, and training offer for schools. The Partnership were made aware of two incidents where young people were attending an education establishment and transitioning. In the absence of local guidance at the time, the Partnership developed guidance to support frontline practice to better support children and young people. In response to the guidance and training, one delegate said:

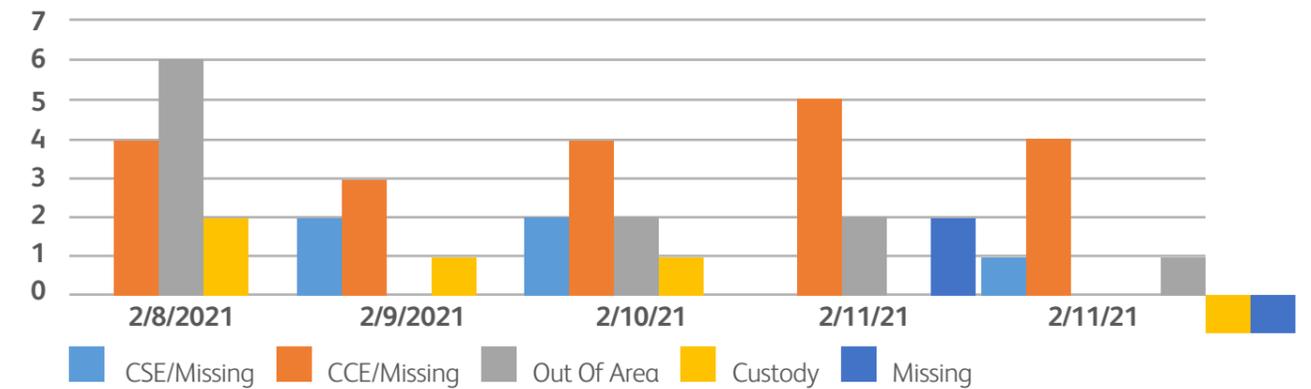
“The training that [...] carried out was excellent and the content was very informative, the training highlighted gaps in my knowledge and helped me to understand. Overall I thought the training fitted my needs very well and gave everyone opportunities to speak openly and ask questions, many thanks to the trainer for sharing knowledge and experience and being on hand if anyone required additional support.”

- Introduced role of Education Officer in MASH, to include attendance at Domestic Abuse Response Team (DART) meetings, Multi-Agency Risk Assessment Conferences (MARAC) and act as the representative for Operation Encompass. It is too early to assess the impact of the role however they are currently supporting schools with advice and guidance and we will be able to report fully in our next report.



## Exploitation

- Implementation of daily triage of children who go missing with Exploitation Hub team, Multi-Agency Safeguarding Hub (MASH) and police.  
During County Lines Awareness Week, the daily triage meeting discussed arrests, MASH referrals for exploitation and missing children over the past 24 hours and the daily activity of those discussed each day are as follows:



- Dudley Neighbourhood Policing Unit has secured additional funding to invest in local school programs where ex-gang members, now turned mentors, can talk to the ‘risk’ schools’ pupils and offer support to prevent them from being exploited into criminal activity
- Development of weekly partnership exploitation panels
- Development of Child Exploitation strategy – established an integrated exploitation pathway
- Introduction of an integrated screening tool for all forms of exploitation
- Introduction of Exploitation dashboard and dataset
- The Safer Places Sub-Group of the Community Safety Partnership (Safe and Sound) have addressed concerns related to anti-social behaviour (ASB), public safety and welfare that are highlighted through a document produced by West Midlands Police based on demand for service. Work has included reducing missing episodes from unregulated children’s accommodation resulting in better protection and support for those vulnerable people. This work is ongoing.

### LADO (Local Authority Designated Officer)

On behalf of DSPP the Designated Officer (DO) nationally known as the LADO oversees allegations against adults in a position of trust who work or volunteer with children and young people. The LADO’s role is to keep children safe from adults they come into contact within organised environments. During this reporting period, the LADO has focussed on the voice of the child, ensuring it is captured within the LADO procedures and that a professional working with the child speaks to the child as part of the process.<sup>11</sup>

### Child Death Overview Panel (CDOP)

During the reporting period there were 5 child deaths reported to the panel. The Partnership have supported a Public Health Dudley campaign around Safer Sleeping and will continue to focus on unsafe sleeping arrangements in 2021. There were no Dudley suicide deaths reported in 2020 – 2021, however the Strategic Partners across the Black Country were concerned about the unusual number of deaths by probable suicide reported in 2020 – 2021. As a result of an increase in the number of suicides/probable suicides between October 2020 – March 2021, a deep dive was carried out by child death review partners to assess whether there were any patterns or trends highlighted for immediate action. The report found that there were no obvious trends or patterns and no direct action arising for Dudley. It identified that few comparisons can be made with regards to age and gender, although more males than females have died by probable suicide.

<sup>11</sup> At the time of writing the LADO annual report is not available.



## Multi-Agency Training



**93% of our training** was half day and 7% was full day, and we found that this suited our partners especially during the pandemic, as it made the training accessible and modular.



**16 courses** were delivered through the financial year



Almost **500 hours** of virtual training has been undertaken by partner agencies in the Borough. Attendees reported improved knowledge following courses which will improve their practice:



**362 places** were offered on virtual courses with a total of 239 bookings made on the DSPP Event Management System. **53 delegates** failed to attend.



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



**186 delegates** have successfully completed approved training.

During 2020-21, the pandemic meant we had to change the way we delivered training and deliver our core offer and learning from serious incidents, in a different way.

“Importance of working in partnership with the child and their family. Everyone in that child’s life has a responsibility for identifying concerns and should communicate effectively. More detailed understanding of need for stages of Early Help.”

*(Working Together in Dudley)*

“Children who are coerced into committing crimes are victims in need and safe guarding and support. child criminal exploitation is child abuse where children and young people are manipulated and coerced into committing crimes. It’s everyone’s duty to safeguard children”

*(CCE Level 1)*

“Domestic abuse can take many forms such as psychological, emotional, physical and sexual. Over 2 million people across the UK experience some form of domestic abuse each year. People who are LGBT are much more likely to suffer domestic abuse in their life”

*(Introduction to Domestic Abuse Level 1)*

### Training Evaluations and Data

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

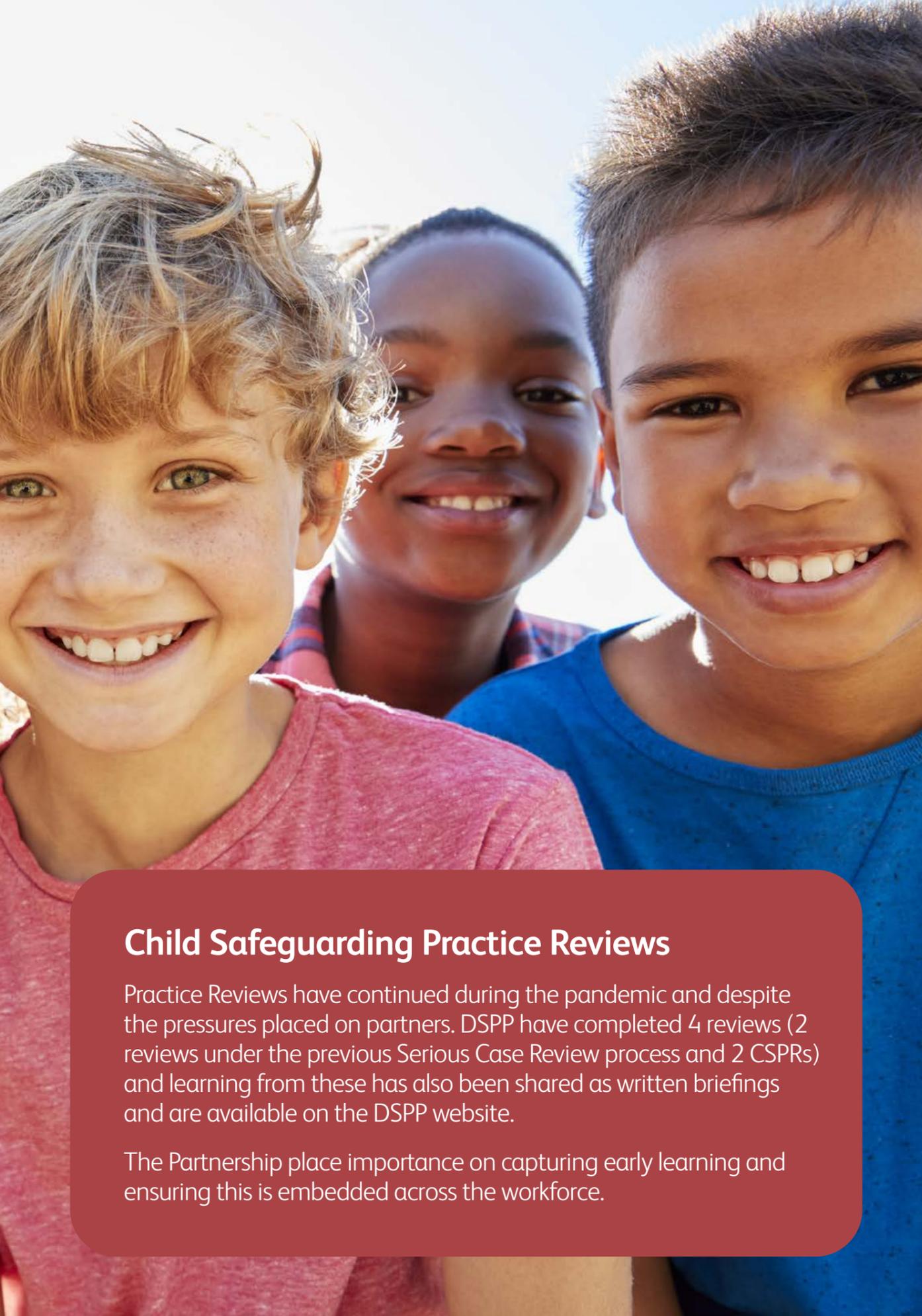
- only 36.1% of people complete pre-evaluation
- only 25.5% of people complete post course evaluation
- only 4.7% of people complete post event stage 2

### Learning Gain

| Pre-booked average | Post Event Average | Learning Gain |
|--------------------|--------------------|---------------|
| 3.02               | 4.25               | 1.23          |

Data collected from 01.04.2020 to 31.03.21

We are looking at ways to increase the completion of training evaluation as well as revisiting practice to measure the impact on practice after training courses. We will be able to report further on this in our next annual report.

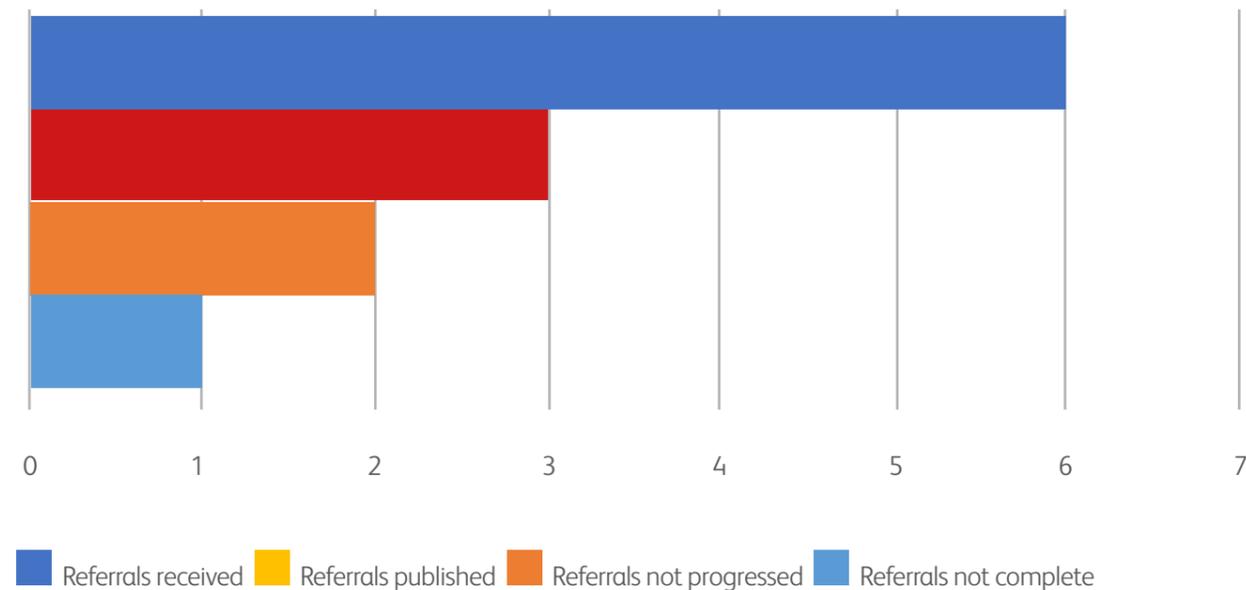


## Child Safeguarding Practice Reviews

Practice Reviews have continued during the pandemic and despite the pressures placed on partners. DSPP have completed 4 reviews (2 reviews under the previous Serious Case Review process and 2 CSPRs) and learning from these has also been shared as written briefings and are available on the DSPP website.

The Partnership place importance on capturing early learning and ensuring this is embedded across the workforce.

CSPR Referrals 2020/21



Key themes identified from our reviews included:

- Alcohol and substance misuse
- Co and safe sleeping
- Information sharing
- Resolution and escalation
- Lack of professional curiosity
- Parental mental health issues
- Incidents being viewed in isolation
- A lack of a think family approach

A Multi-Agency Case File Audit looking at Parental Mental Health scheduled for Quarter 1 2021/22 will explore one of these themes further and identify areas for practice improvement. The DSPP are also supporting the Public Health Dudley 'KNoW More' campaign, which promotes safe sleeping. The multi-agency Resolution and Escalation document has been revised and promoted, which has seen an increase in the use of the policy across partners. Multi-agency training has also incorporated awareness of information sharing, professional curiosity and isolated incidents. In addition to a multi-agency approach, the DSPP also seek assurance that single agencies are embedding learning from serious incidents.

### Case Study

Child T was living with mother and her new partner. Concerns were raised regarding Child T's school attendance and family engagement with staff. Attempts to provide support from Early Help and Children's Services were also met with resistance. Child T and their mother were physically assaulted at home by the mothers partner.

Themes identified by the review were agencies working in silo, the impact on support due to confrontation from mother's partner, information sharing and appropriate use of resolution and escalation protocols.

As a result the partnership increased awareness of the Resolution and Escalation Protocol, a 7 minute briefing has been published around Clare's Law and practice guidance for dealing with hostile and aggressive parents has been produced.

## Voice of the Child

In our last report, we acknowledged we had more work to do around incorporating the voice of the child. However we continue to ensure that children are at the heart of our decision making as well as during our practice reviews.

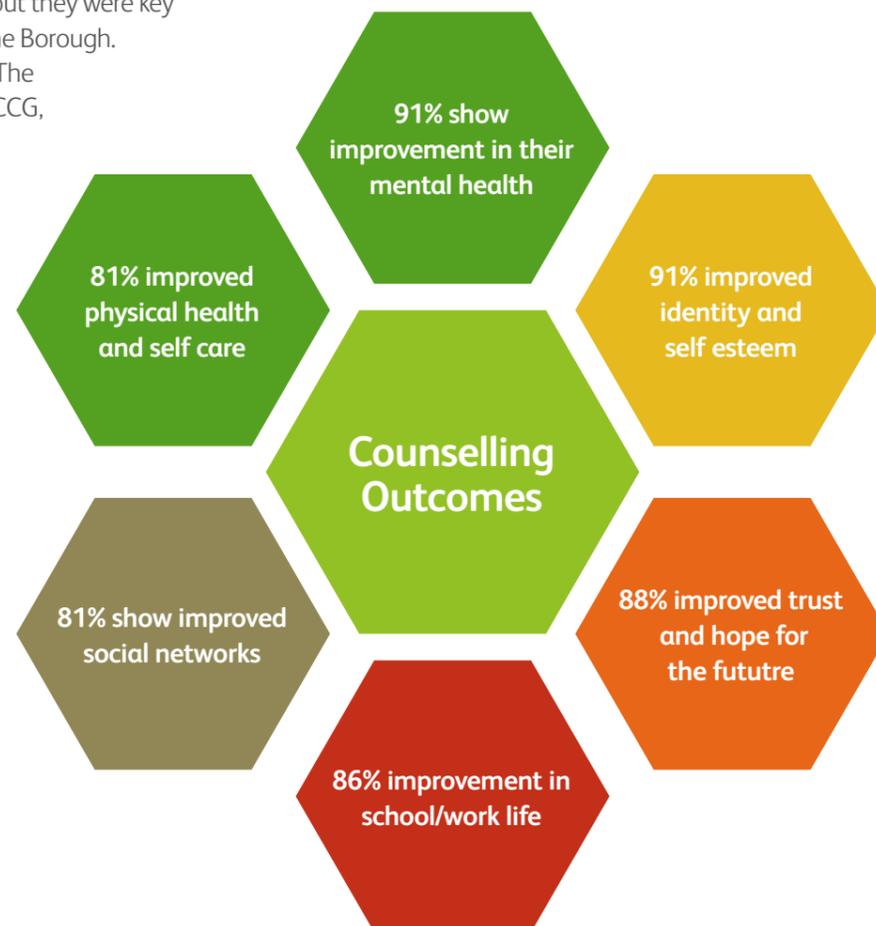
In addition to this we have adopted a Restorative Practice approach across our work which will further enhance our work with children and young people. This will be covered more in our next Annual Report. Last year, via our Dudley Community and Voluntary Sector (DCVS) partners, we are pleased to highlight key areas of achievement which include an increase in the number of Black and Minority Ethnic (BAME) and Special Educational Needs and Disability (SEND) children and young people accessing and getting involved in youth forums. We are encouraged that this has also taken place during the year of Covid-19, when children may have needed help more than before but faced restrictions in accessing support.

In addition to this, DCVS have developed a Covid Young Health Champions Scheme and Future Voices. These schemes ensure children and young people are fully involved in decisions that affect their lives and those of their peers.

Future Voices is for young people who have complex health needs or a disability and who are transitioning from children to adult services. They are working with key stakeholders to make this a much more positive experience.

The pandemic hit all charities hard, but they were key to maintaining a link to children in the Borough.

During the height of the pandemic, The What? Centre supported by Dudley CCG, The Community Fund and Mind, went from receiving around 6 new counselling referrals per day to an average of 17 new referrals per day, the highest number on one day in November 2020 was 22. Following interventions with young people, they reported:

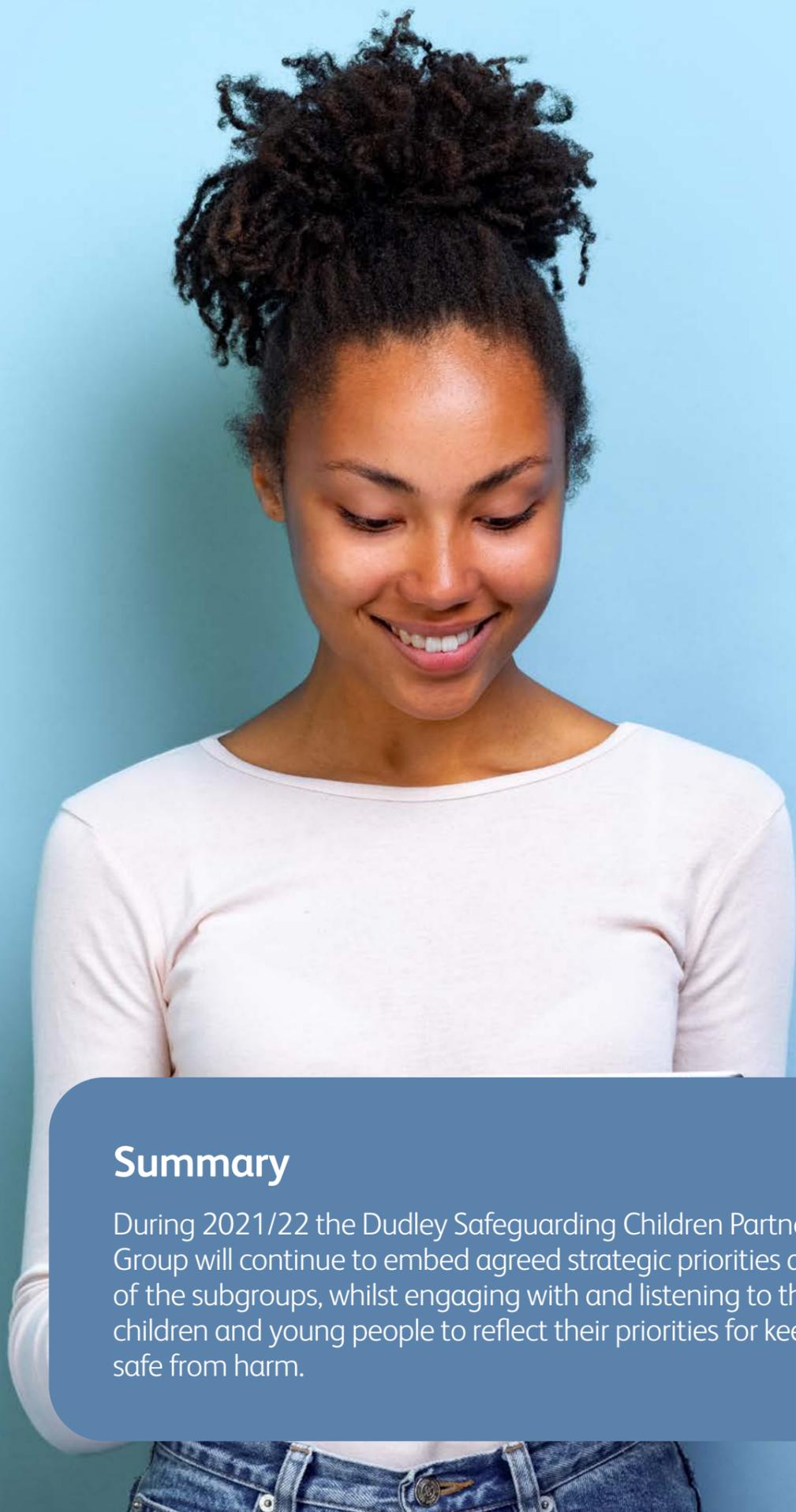


Young person with history of witnessing and hearing domestic violence in relation to parent relationships. Young person receiving weekly support with CAMHS due to ongoing family dynamics in the home environment triggering episodes of self-harm increasing suicidal ideation including hospital admissions.

The young person has received ongoing long term support with a community keyworker from CAMHS with regular involvement on a weekly basis face to face or over the telephone.

Following an admission to hospital, the young person felt safely supported by CAMHS staff on the ward and disclosed safeguarding risks in the family home about feelings and life experienced in the home, this initiated a safeguarding referral initially prompting a social care assessment, however liaison with the internal safeguarding team encouraged a joint assessment between CAMHS and Social Care holistically for the young person and the family.

This has led to the young person expressing a return to resume their education and restart fitness training and the family are working together with both agencies preventing the escalation of crisis contact. Both services continue to work with the family leading to stabilising the home environment due to the regular support and communication with agencies.



## Summary

During 2021/22 the Dudley Safeguarding Children Partnership Group will continue to embed agreed strategic priorities and the work of the subgroups, whilst engaging with and listening to the voice of children and young people to reflect their priorities for keeping them safe from harm.

We aim to do this by including more people with lived experiences in our sub group work and ensuring that the voice of the child is heard throughout our multi-agency case file audit process. There will also be additional learning from Covid-19 which has impacted in so many ways. In 2022, we will come together as a Partnership to review our priorities to make sure that we focus on what is really important to the people of Dudley. We know our focus may change following Covid-19, but what does not change is our commitment across the Partnership to ensuring everyone who needs help, receives the right help.

In our next report, we hope to be able report more on the recovery and how we are living with Covid, to be able to 'see' our colleagues and people who access our services more, where appropriate and safe to do so. We will also know more about the Care Review and how that will impact services for children in Dudley. We will continue to learn from our practice reviews, ensuring timely and appropriate dissemination of themes and trends and to use this information to underpin our training and influence our strategic direction.

We will continue to support the most vulnerable children and, those with complex needs and disabilities to achieve a good transition into adulthood and work with partners to provide the right help and support where it is needed.

## Message from Vicky Buchanan, new DSPP Independent Scrutineer

I am delighted to be joining Dudley Safeguarding People Partnership as the Independent Safeguarding Scrutineer. This role has a specific children's focus and demonstrates the commitment of the partnership to enhancing the partnership approach to safeguarding children in Dudley.

Over the coming months I will work with the Children's Partnership to further enhance the culture of high support and high challenge. I see my role as very much asking the 'so what' question, so that as a partnership we understand what difference we make to ensuring that children in Dudley feel safe and protected and that we meet the priorities we have agreed as partnership. I have a strong commitment to ensuring that we keep children at the heart of all that we do and listen to what they are telling us, and I am equally committed to hearing the voice of frontline workers who undertake the very important work of ensuring that the children of Dudley are safeguarded and supported.





Dudley Safeguarding  
People Partnership