Multi-Agency Safeguarding Arrangements



Salford Safeguarding Children Partnership Annual Report 2019-20 "When I met my current worker, she was bubbly, hopeful, and approachable and I knew that she was interested in me and my life."

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Worried about a child?

Every child and young person has the right to be safe.

All reports or enquiries concerning the welfare or safety of a child must go straight to the **Bridge Partnership**, call: 0161 603 4500 or complete the online referral form on the worried about a child page.

The Bridge Partnership is available Monday to Friday from 8:30am to 4:30pm. If you need to speak to someone outside of these times, please contact the **Emergency Duty Team (EDT)** on **0161 794 8888**.

If a child is in immediate danger of being harmed or is home alone, call the **police** on **999**.



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FOREWORD



Jim Taylor Chief Executive Salford City Council



Steve Dixon
Accountable
Officer
Salford CCG



Shaun Donnellan

GMP Divisional

Commander

Salford

Our Vision

'All partners are committed to working together so that every child in Salford is safe, well and able to reach their full potential'.

All three safeguarding partners
have equal and joint responsibility for local
safeguarding arrangements.

This is the first annual report of the new Salford Safeguarding Children Partnership, it covers the period from 1st April 2019 to 31st March 2020. We want to first recognise that at the end of this period the global pandemic COVID 19 affected everyone in the Salford community.

We want to remember those who have sadly lost their lives and recognise the extraordinary efforts the people of Salford and employees of all our partners have made to continue to keep people as safe as possible during this time. This embodies the "Spirit of Salford".

In March, overnight the council and partners had to change the way many of its services were delivered, to keeping schools open for key workers' children and vulnerable children, to working out how to keep services running without face to face contact, to ensuring key workers are able to operate safely within PPE and safeguarding requirements.

This report recognises the progress the Salford Safeguarding Children Partnership (SSCP) has made throughout the year and the challenges that remain that we will continue to address in 2020/21.

Six Principles of the SSCP

- Empowerment: People being supported and encouraged to make their own decisions and with informed consent.
- Prevention: It is better to take action before harm occurs.
- Partnership: Local solutions through services working with their communities.
 Communities have a part to play in preventing, detecting and reporting safeguarding issues.
- **Proportionality**: The least intrusive response appropriate to the risk presented.
- Protection: Support and representation for those in greatest need.
- Accountability: Accountability and transparency in safeguarding practice

Safeguarding Executive and Safeguarding Operational Group

The Safeguarding Executive is the key decision-making body and consists of the executive leads of the three statutory partners.

Representatives from the three safeguarding partners, the Partnership Business Manager and Chair of the Safeguarding Effectiveness Group meet six times a year to undertake the operational activity of the Partnership. This includes ensuring the business of the Safeguarding Children Partnership is efficient and effective, deadlines are met, and include guiding the work of the business unit.

The published arrangements can be found through the link below or on the website. It is planned to review these during 2020/21.

https://safeguardingchildren.salford.gov.uk/about-the-partnership/

Quotes from young people

"Talk to us, take us seriously."

"Listen and show you're listening. "

WHAT WE KNOW ABOUT CHILDREN IN SALFORD



Key Needs Data

Overall, comparing local indicators with England averages, the health and wellbeing of children in Salford is worse than England. The rate of child inpatient admissions for mental health conditions at 93.4 per 100,000 is similar to England. The rate for self-harm at 581.9 per 100,000 is worse than England. Dental health is worse than England. 44.6% of 5 year olds have one or more decayed, filled or missing teeth.

(Source Child Health Profile - Public health England March 19)

Children living in low income families aged under 16 years (2019) 20.5% compared to England 15.3 %. During the period 2015-2019 Salford's income deprivation among children rank declined by 2 places to 28th most deprived (out of 317 LAs). (Source Indices of Deprivation 2019 - Salford)

School pupils with social, emotional and mental health needs (2018) 3.8% compared to England 2.4%.

Number of Child Protection Plans at 31/3/20 = 548 (rate 95.4 per 10K).

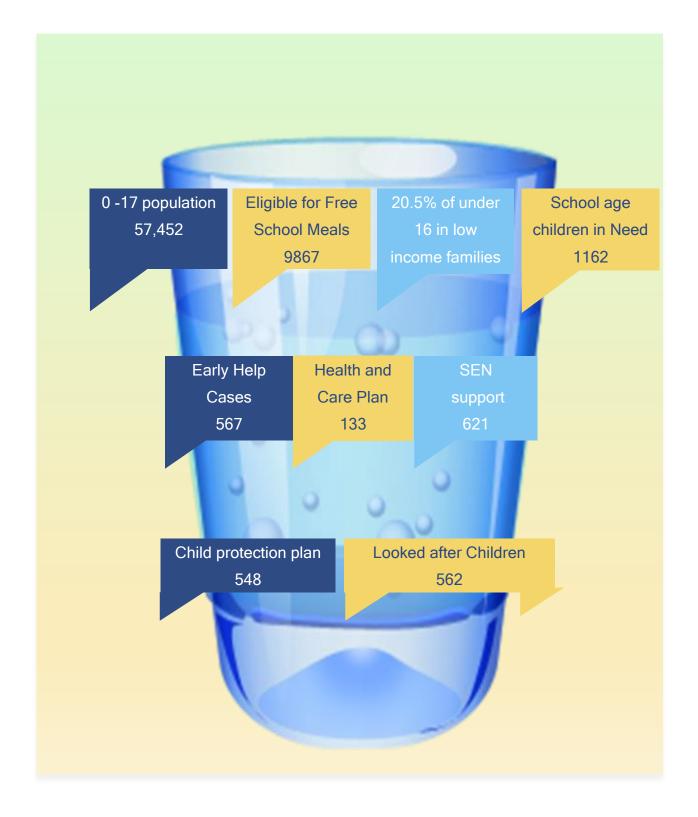
Looked After Children = 562 (rate 97.8 per 10k).

Number of Early help cases in 2019/20 = 567 (rate 98.7 per 10K).

School age children in need in Salford - 1164 - of those; 133 on a Health and care plan, 355 receiving SEN Support, 621 eligible for free school meals, 390 were the subject of a Child Protection Plan.

Source Children in need outcomes local authority tables: 2019

Key Needs Data



WHAT YOUNG PEOPLE SAID

Making a difference in Salford

Salford Youth Council have developed a short video, accessed through the link below, to explain our child Safeguarding Partnership Arrangements. https://twitter.com/salfordscp

The Listening Loop

This year we introduced the model of the listening loop to help guide our scrutiny of practice.



Voices of Children and Young People

Young People have shared their time, views and ideas generously in great work with different services in Salford e.g. Route 29, Ambitions for Health and Wellbeing. Also, through conversations, consultations and working partnerships such as Salford Youth Council, Voice of the Child, Fight for Change Council, YouCan, Hear our Voice. The Making a Difference Project aims to hear what young people are saying in all these places, to learn and make sure their views influence the way that services work with children and their families.

What Young People said they expect from people working with them

"Respect: being treated well"

"I feel like a newborn baby having to start again repeating myself.... if your worker changes, they should know basic information" "Being heard listened to"

"It's good to be listened to, and when they double check, I know they have heard what I said."

"Better understanding through sharing what you already know."

"Trust is really important, when it's broken, I won't share stuff with that person again." The Youth Council reminded us that collectively, all grown-ups everywhere have a duty to uphold Article 27 of the Convention on the Rights of the Child: the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development.

Young people contributed to the Neglect Summit planning by defining what children and young people in Salford need to grow up safe, well and the best they can be. Education - Expression - Understanding - Belonging - Respect of Emotions - Food - Home - Space - Safety - Time. They thought about children of different ages and lots of different needs and decided that these 10 essential needs must be met and not be left unmet or neglected. "When you have a baby you should put their needs first, they need love and good food and to be protected - they need to be able to trust you".

They produced the diagram below to tell us what they believe the SSCP needs to ensure is embedded in practice in safeguarding. Feedback was made to the youth council and multi agencies via the Neglect summit co-chaired by a young person.



WORKING WITH OTHER PARTNERSHIPS



Inter-Board Working

A protocol for Inter-board working was established in 2017 and updated this year.



In addition to the 'core four' partnerships, there are other specialist multi-agency boards and groups that co-operate and collaborate to ensure the well-being of the people of Salford and for whom the principles within the protocol apply:

- 0-25 Advisory Board
- · Strategic Housing Partnership
- · Skills and Work Board
- Youth Justice Board

Joint Seminar

In September 2019 A joint seminar was held with the Safeguarding Adults Board and the Community Safety partnership on Transitions and Safeguarding. This resulted in a Draft Multi-Agency Transition Policy and Process, agreed terms of reference and an operational model for the 16-25 Multi-Agency Hub, clarifying referral routes for those with complex needs.

Domestic Abuse - Operation Encompass Evaluation

This work is led and governed by the Community Safety Partnership. Continuing challenges focus around:

- Contacting schools that have not engaged to see if there are any other concerns academies and independent schools to engage.
- How we involve other universal services such as health into these incidents of domestic abuse - GPs and 0-19 service.
- It is important for agencies to use consistent language; we cannot minimise the impact of domestic abuse on the emotional health of children; this links to learning from Domestic Homicide Reviews.
- There remains a gap in capacity of therapeutic services to support children who have received domestic abuse and trauma.

GM Partnerships

Salford has continued to support the GM Children Safeguarding Partnership Chairs and Independent Advisors' network meeting to provide opportunities for sharing learning and practice. We hosted a GM wide seminar to share ideas about systems for delivering case reviews and share our learning as a DfE early adopter, of the practice model adopted in Salford. We continue to participate with the relevant GM workstreams and the implementation of the GM Safeguarding Children Alliance.

Pathway Guidance

Pathway Guidance is provided to enable Salford practitioners to interpret Greater Manchester procedures for implementation in Salford.

https://safeguardingchildren.salford.gov.uk/professionals/policies-and-procedures/pathway-guidance/

Secure Care in Salford

It is a requirement that this report includes evidence that the safeguarding partnership annually scrutinises the use of restraint in secure provision for children and young people located in the area.

In January 2020 Ofsted rated this facility as outstanding and wrote "Managers are open and transparent in their review of monitoring of, and learning from, the use of measures of control within the home. All incidents involving the use of physical restraint are reviewed by the registered manager, safeguarding lead manager and the designated officer on a weekly basis. These reviews include all CCTV coverage of an incident as well as records. This means that there is impartial as well as management oversight of the use of physical restraint and whether the use meets the relevant legislation and guidance."

The facility works pro-actively with the SSCP. It continues to have young people who are at risk of being exposed to a restrictive intervention. The home has a Restraint Policy and a Restraint Minimisation Policy which is reviewed annually.



All young people have an individualised behaviour management plan (BMP) and where necessary a Safety plan or Suicide and Serious Self Harm Plan(SASSH).

The full reporting period for Barton Moss spans two financial years from November 2018 to October 2019.

From April to October in the time frame of this report there has been 41 uses of an RPI. The main reason for use of physical intervention is to prevent serious injury or damage to others. Of all the interventions that have been reviewed by Local Authority Designated Officer in this period none met the threshold of harm and therefore were not referred as part of a safeguarding process.

KEY PRACTICE THEMES AND MESSAGES



Recognising and Building on Good Practice

We have refreshed the Salford Thresholds of Need

Salford Thresholds of Need and Response



If you are worried about a child contact The Bridge Partnership on **0161 603 4500** or email worriedaboutachild@salford.gov.uk

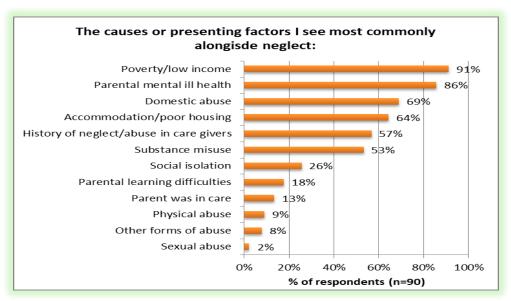
We have also:

- Introduced a quality assurance framework.
- Developed a new framework to address neglect, published our strategy and provided training and guidance.
- Implemented a comprehensive case review process, policy and toolkit and shared this across Greater Manchester.
- Updated the professional challenge and escalation guidance in response to learning from Case Reviews.
- Increased learning opportunities e.g. using lunchbowl events and online briefings.
- Provided guidance on how to complete chronologies and ecograms for all agencies.

https://safeguardingchildren.salford.gov.uk/media/1191/chronology_guidance_for_all_agencies.pdf

Neglect

A survey was undertaken to understand the range of views across the partnership. Professionals responding to the survey selected their top five causes or presenting factors that they see most commonly alongside neglect, which not only chimes with other evidence but also places the impact of poverty and parental mental ill health as present in over 75% of episodes of neglect.



In terms of a strategic approach and resources in the future, there was a consistent message and an understanding that early help is greater than that provided by the Local Authority early help services. The pressure on 'universal' and some specialist services such as schools, mental health and drug and alcohol services require urgent attention. Greater attention and focus are required on meeting children's needs and neglect much more preventatively, as a public health approach, responding to the causal chain to promote health, well-being, prevent neglect, develop resilience and foster equality, from pre-birth to transition to adulthood.

LEARNING FROM REVIEWS



In the financial year 2019/2020 SSCP carried out six Rapid Reviews, one CSPR and one MACR. The main referral reasons for the Rapid Reviews differed quite widely and ranged from Neglect (lack of supervision), to attempted filicide, suspected trafficking and sexual abuse.

Referral reason	2019 -20
Neglect	1
Physical abuse	1
Sexual abuse	1
Fabricated illness	1
Murder/attempt	2
Trafficking	1
Total referrals	7

Number per financial year 01 April - 31 March:	2018-19	2019-20
Referrals	12	7
Rapid Reviews	5	6
Salford Case Reviews	3	0
SCRs / CSPR	1	1
MA Concise Reviews	2	1
MA Working Group	5	1
MA Audit	1	1
Single agency review	0	0
Single agency actions	1	2
No Further action (NFA)*	2	1
Average number of days per review from decision to completion (SCR/CSPR)	461	159
Average spend on Lead Reviewer per review (SCR/CSPR/MACR)	£4584.10	£1000.00

*NFA: Reasons for NFA include other review ongoing e.g. DHR; child lives in a neighbouring LA therefore passed on to correct LSCB; practice issue requiring escalation or action via another forum.

Cost: The average cost of paying a Lead Reviewer has come down significantly over the last three years. This was helped by one of the reviews in 2019-20 being undertaken by two members of the Practice Review subgroup and therefore no additional payment was incurred.

Time: The length of time taken to complete a review has also come down significantly in 2019-20. Once again, the use of Practice Review subgroup members has had an impact on reducing the number of days taken to complete a review as well as reducing costs.

Of the seven referrals one was known as a child in need and the other six were not known to Salford Children's services at the time of the incident. None of the children were the subject of a child protection plan. Learning is shared via a range of methods e.g. seminars, 7 minute briefings, reflective discussions and E bulletins.

The learning arising from the CSPR was around trafficking procedures, age assessments and professional challenge and escalation.

The learning from the MACR was around sharing of safety plans, safe & healthy relationship education for children suffering sexual abuse and consideration of historical patterns of parenting capacity.

Analysis of 43 partnership recommendations from reviews over the last three years identified that the top four practice areas highlighted in partnership recommendations were:

- 1 Managing Risk (ten recommendations)
- 2 Children's Mental Health & Emotional Wellbeing (six recommendations)
- 3 Neglect (five recommendations) effective child protection practice i.e. changes in practice introduced
- Resistant Families

Recent referrals and reviews have highlighted the following new emerging issues:

- Age assessments and immigration processes
- Appropriate support for children who have suffered sexual abuse
- Children newly arrived in the country and not known to any services

National Review - Sudden unexpected death in infancy

Salford was one of the areas involved in the National Child Safeguarding Practice Review Panel - Review of sudden unexpected death in infancy (SUDI) in families where the children are considered at risk of significant harm.

This included a good practice example; "Safeguarding partners in Salford developed high-quality, role-specific guidance materials available for practitioners in a wide variety of roles, including those working primarily in adult safeguarding"

https://www.gov.uk/government/publications/safeguarding-children-at-risk-from-sudden-unexpected-infant-death

Key Learning

- 1. Advice may have limited impact because of other presenting issues e.g. parental capacity
- 2. Safe Sleep is a conversation and practitioners must be professionally curious
- 3. The community is protective factor
- 4. Visual information and social media are more appealing to parents

Strengths

- Learning continues to focus on the promotion of safe sleep messages
- Materials are under review to reflect risks in all settings
- Good visual information safe sleep materials
- Continue to reflect safe sleep in SSCP training programme e.g. 7MB and neglect training makes connections
- Good sense practitioners are working to a common approach
- Good safe sleep guidance provides a strong framework
- The intention is to link safe sleep with the new Salford neglect strategy

Areas for Improvement:

- 1. Pre-birth risk assessment completion before CP plans requires assurance
- 2. Audit understanding and application of the safe sleep guidance
- 3. Risk based model (traffic light system) in development
- 4. Capacity of universal services

In 2020/21 safeguarding partners will update safe sleep guidance in light of recent case reviews, the use of social media is planned development and an audit will be undertaken of understanding and application of the guidance. A risk based model (traffic light system) is in development and as part of the evaluation of the current local arrangements we will consider the how the partnership is assured about the effectiveness of its work to promote safer sleeping and reduce the risk of SUDI and plan for any new local action.



We have implemented our Safeguarding Effectiveness strategy and a learning and development framework and there are subgroups of the partnership that oversee this.

Safeguarding Effectiveness Strategy



The safeguarding effectiveness framework can be found here:

https://safeguardingchildren.salford.gov.uk/professionals/safeguarding-effectiveness/

There is a multi-agency scorecard of key performance measures, charts and a short narrative for each measure is produced on a quarterly basis. An outcomes summary is produced for the Safeguarding Children Partnership and Executive as a result of a range of evidence captured and discussed at the Safeguarding Effectiveness Group.



Neglect

We know that good leadership and governance are critical to be successful. There are a range of boards, groups and people who have neglect as part of their remit, with the SSCP taking a partnership lead.

Changes this year in strengthening the Neglect Sub-Group of the SSCP with a Chair from Public Health, increased membership and focus via the neglect strategy work are positive. Apart from the SSCP Neglect Sub-Group there is no single person(s) or team

responsible for this area, leading, championing and guiding across the system, such as in other areas, for example complex safeguarding and domestic abuse.

On 29th October 2019, 71 professionals and 7 young people attended Salford's Tackling Neglect Summit co-hosted by a member of the Youth Council. The co-ordinated approach to develop and promote the revised Neglect Strategy and Roadshows to promote the Graded Care Profile (GCP) gave the opportunity to raise awareness alongside training sessions.

Work with Schools

The strengths-based approach of the GCP supports schools to engage with families. Schools had input which led to work on recognising lack of attendance as a barrier and form of neglect. There has been increased coordination between education welfare, health and schools to identify and address concern. Early Help coordinators are being utilised in a more bespoke way - creating individualised action plans for their schools based upon their identified need and local challenges. This led to projects such as a School Readiness pilot, Train the Parent and Children Missing Education CME/Education on Track.

Gun and Knife Crime - Support for schools in dealing with incidents of weapons in school led to clear guidance and more consistency. Examples are: Operation Sycamore "Guidance for Schools in Salford for reporting Knife Crime and Weapons Found on School Premises" and "Searching and Confiscation Policy". Police engagement officers are working across some high schools to provide support in the education against crime.

CSA/Exploitation - Education Welfare Service work on neglect and CME/EHE has had a positive impact on identifying risk. Online Safety, Filtering & Monitoring aspects of Keeping Children Safe in Education (KCSIE) has emphasised the responsibility upon schools with regards to the risks posed to children and duties to educate, monitor and act when concerns are identified. The Peer on Peer Abuse policy has also been revised to support schools.

Neglect



Background

Referral from school. Single mum separated from long term partner 2 years ago. Three children. Eldest not at home. 13 year old and 3 year old with mum. Dad is inconsistent with contact.

13-year-old struggles with this and takes his frustrations out on mum; not listening, shouting and kicking doors. 13 year old has learning needs.

3 year old is not in nursery. When referral was received she was still on formula milk. Concerns around 13 year old - school attendance, caring for mum and younger sibling. Mum was unwell when school and EWO did a home visit and an ambulance was called.



How we shared learning

Sharing the learning through conversations with all agencies involved and asking them to support in certain areas, mainly around the safety aspect.

The impact of the thriving families assessment tool in gaining the child's voice has been shared as a positive.

Future sharing of the learning will be via the evaluation of the new tool in a report at the end of July 2020.

2

Assessed Needs

After screening it was sent to Early Help to provide support around routines and boundaries, school attendance.

Early Help Assessment completed and plan put in place. Health visitor was contacted regarding three year old. 13 year old to be less angry and mum to be able to cook and wash clothes at home. Cooker and washing machine had broken

There is clear love within the house and mum wants the best for her children

School were concerned about the 13 year old and mum not being able sustain changes.

8

What was done?

TAF meetings with school and health visitor were held at home so mum could attend. Mum initially engaged with home visits but later this slipped. White goods were provided for the family. Referrals to 42nd street, school counsellor, IYSS and safer families. 2-year funding was applied for.

Later it became apparent mum was struggling with her mental health so contact with GP was made. When mum's mental health was good, she was able to clean/tidy the house.

4

Thriving Families and Neglect Assessment Tool Impact Case Study

6

What we learnt

The new thriving families assessment tool was helpful in being able to identify the areas that needed support. One agency was concerned about the food that is eaten at home, but from the assessment there were no major concerns about this. The main areas improved are around safety for the 13-year due to his learning needs, also mum not knowing the best way to keep him safe when on the internet. Mum's poor mental health has impacted how quickly she has been able to make any changes. This was explored within the tool and changes were made with support.

Voice of the Child

13 year old says he is happy at home would like more contact with his dad but knows dad does not always come when he says he will do.

He wants to move house. Says he understands why mum says he cannot go to certain places.

6

Impact

If mum's mental health had been identified earlier then improvements could have been seen sooner and the 3 year old may have accessed the 2 year funding to help her develop her speech and language skills further. 13 year old finds it helpful speaking to the counsellor. If this had been identified earlier by school then this could have helped with his understanding of dad leaving. Mum wants to make the changes but struggles to always maintain them.

Gun Crime

1

Background

This 17 year old young person first came to Police attention in March 2019 for CCE concerns and was subsequently an open case in the Complex Safeguarding Hub (CSH). As a result of intelligence received, a drugs and firearms warrant was executed at his address where a firearm and ammunition were found concealed. He was arrested. charged and appeared at Court. He was remanded into LA care and was placed out of area. He pleaded guilty although denied the gun was his and he received an intense community order with YJS. He has received ongoing support throughout



How we shared learning

Working in a multi-agency where services are co located it means we can communicate learning much more efficiently and effectively.

There are daily and monthly governance meetings which enable us to share relevant information. That way we are all kept up to date regarding this young person and can share any ideas / concerns that we may have.

All staff working with the young person will have up to date knowledge.

2

Assessed Needs

It was believed that the young person had possibly been exploited and indirectly threatened to store the Firearm at his address. However, throughout the investigation, he refused to engage with Police, but worked very closely with the CSH, ASW and Youth Worker and a CSE risk management tool was completed with regards to his exploitation. He was deemed to be at risk of further exploitation and it was believed that he had been groomed in a subtle manner by a male from the community who was known for exploiting others. This would have made it easier for any exploitation to occur so that the young person would agree to conceal the Firearm.



What was done?

Direct interventions have been completed as partners have continued to work with this young person. He is no longer residing at the family home to reduce the risk for both himself and his family. He has acquired his SCSC card and has been working on building sites and states has kept away from his old friendship groups which will reduce the risk of further criminal activity.

Gun Crime Impact Case Study

6

What we learnt

Although the young person has not

engaged with Police despite efforts made, he has however engaged with other partner agencies. If the young person had been sent to prison / secure unit, it could have done more harm than good. He would have potentially mixed with others which could have had a detrimental impact on his future. He was on a trajectory for a life of crime. Instead, he has prospered from the support offered to him and as a

result has achieved his set goals.

Voice of the Child

The young person has continued to work with partner agencies and has engaged well, although he has never engaged with Police. It was felt that he would not engage with Police through fear of reprisals. There is a known culture of living in Salford that you do not speak to Police and that there will be consequences if you do.

6

Impact

The young person is now 18 and continues to be supported by YJS who have reported that the young person has now completed everything set in his goals. He finished his ISS on 28.3.20 but will continue his YRO for another 6 months. The plan is to keep him at YJS until the end of his order. He has regular contact with his family.

Child Sexual Abuse and Exploitation

9___

Background

Mia came to the police attention in 2016 for CSE related matters. Mia had multiple missing episodes and was reported to the police for minor offences. In 2018 Mia was 15 years of age when she was manipulated by a male perpetrator and found at his address. Mia refused to speak to police and found it difficult to engage with other agencies.

Mia was addicted to heroin and that became her main focus. In December 2019 Mia engaged with agencies and made a disclosure regarding her experience and the offences of the perpetrator.

V

How we shared learning

The CSE team are co-located with other key agencies. . Communication is easier and information is acted on quickly.

There are monthly governance meetings and daily meetings to inform other agencies of work carried out and discuss how to further work with Mia

Mia has an allocated social worker and Detective for continuity however the morning meeting allowed other members of the team to know where the case is up to. 2

Assessed Needs

Mia's main need was her addiction to drugs, her vulnerability around older males and the exploitation she received, the perpetrators having a hold over her by supplying her with drugs, thus showing a dependency to the perpetrator and being unable to leave a cycle of abuse.

Other needs were Mia's home life, the family structure, how effective was parenting. Mia was at risk due to her phone activity and her lack of education regarding online safety.

8

What was done?

Initially social services worked with the family. Mia attended drug rehabilitation.

She was enrolled into college and given the opportunity to work with the elderly. She worked with the university regarding mental health issues.

She has successfully transitioned to agencies for young adults now she is 18.

CSE/A

Impact Case

Study

6

What we learnt

It confirms how essential it is to work at the child's pace. Mia has been working with authorities since 2016. She was not ready to disclose and to have rushed her at that early stage would have been detrimental to her health and to any police prosecution.

Although this has taken a long time, Mia is in a very good place; she has achieved many goals and will be strong enough to attend court if necessary.

4

Voice of the Child

Initially Mia did not want to engage with any authorities.

Mia states that she is stronger now and drug free, this has given her the ability and the confidence to explain the ordeal she has been through.

She has shared her voce in several projects e.g. route 29, interview panels.

9

Impact

Mia is now at college and has become competent in painting and decoration, she has volunteered in the care system predominantly working with the elderly. She is substance free and aspires to work in the prison system. She has been able to build trusted relationships with people within agencies and she is now supporting a prosecution.

Communication and Engagement

In September 2019 we launched our brand new SSCP website.

https://safeguardingchildren.salford.gov.uk/

We issued 6 newsletters during the year and a special COVID-19 Briefing on Safeguarding Children Arrangements with a separate briefing for volunteers.

We have also developed a set of standards to give a consistent framework for professionals across the Partnership to strengthen our approach to listening to families. These can be accessed through the link below or from the website.

https://safeguardingchildren.salford.gov.uk/professionals/salford-standards-for-listening-to-families/

Emotional Health and CAMHS

We sought assurance during the year on the safeguarding elements of 'Salford Thrive' the former CAMHS Transformation Plan which was updated in March 2020. We were assured that plans to establish a single CAMHS budget and contract from 2021 were in place and in addition plans were updated for improved transition arrangements for young people to adult mental health services.

Knife Crime

This is an area led by the Community safety Partnership which the Safeguarding Partnership supports. Greater Manchester is one of the areas to receive extra government funding over the course of 2020 to 2021. The Violence Reduction Unit brings together GMP and other local agencies, to address and prevent the underlying causes of violent crime. The unit was launched in October 2019. This will provide expertise in Salford.

Also in 2019 the Broughton Trust, a Salford-based charity teamed up with a theatre company to stage a hard-hitting play about the consequences of knife crime at city schools.

INDEPENDENT SCRUTINY



Simon Westwood - Independent Advisor

Scrutiny Activity - I have attended Partnership and Safeguarding Executive Meetings. I also chaired the regional GM Children's independent advisors/chairs' meetings which promotes sharing learning across partnerships. I have been accessible to senior officers between meetings.

I provided feedback on key documents commenting on effectiveness and what has been working well; for example the progression of more effective multi-agency ownership and understanding of neglect; the revised case review processes; the development of a joined up approach to listening to children and young people through the listening standards and the swift and effective response in March to the COVID 19 Pandemic.

I have provided advice and guidance where required to support the operation of the business unit and provided independent advice on case reviews including communication and liaison with the national Child Safeguarding Review Panel. I have scrutinised reports and notes from the Safeguarding Effectiveness Group and commented on the evidence provided and current performance.

In response to comments in the National Panel Annual Report 2019 -2020 - Safeguarding partnerships may wish to examine their use of written agreements and assure themselves that they function in the way in which they are intended. Also, continue to focus on key themes e.g. risk assessment and decision making, information sharing, late or no escalation of concerns, over optimistic thinking, parental mental health or substance misuse.

Through this activity I have identified the following:

Evidence of Effectiveness

- Effective progress and development of the partnership from Early adopter to the fully implemented partnership - initial implementation plans were completed.
- I have observed at first hand a positive partnership culture which is reflective and has high ambition for continuous improvement.
- Relationships are good and mutually supportive, including openness to challenge.

- The Executive have a rotating Chair of the three statutory leads and leadership across
 the partnership is more dispersed than in the past at locality level strong leadership
 is demonstrated from the Salford City Council Director of People and the Director of
 Quality & Innovation of the CCG who have jointly Chaired the partnership this year.
- This report includes strong evidence of engagement and listening to the views of children and young people and providing learning and guidance for practitioners.

Areas for Monitoring

- I informed the Executive of the need to ensure the outstanding data transfer and information sharing agreements were in place and stressed the need to continue to reinvigorate the wider partnership work.
- The vacancy in the Partnership Business Unit of a performance officer had an impact on progress but this was filled in December and good progress has been made since then.
- A national inspection found that police forces have improved their understanding of the
 risks around vulnerable children; and that protecting vulnerable children is a priority for
 policing leaders, but it requires further resourcing.
 Source https://www.justiceinspectorates.gov.uk/hmicfrs/publications/national-child-protectioninspections-2019-thematic-report
- There is still a need to find a more equitable longer term funding base. There is work being led at regional level to resolve funding arrangements across Greater Manchester with GMP, however Police engagement at a local level has been effective and well engaged.
- Partners should consider whether needs assessment data should be updated. The Salford 0 to 25 Strategic Review: Supporting Data was last updated 2015, JSNA Safeguarding Children and Young People in Salford was last updated 2012. Given population changes and system change, updated information could assist in identifying whether there is a need for more targeting of safeguarding activity.

STRATEGIC PRIORITIES FOR 2020-2021

Action Priorities	These are the key areas that the Partnership will address in its
	business plan and why they are priorities
Priority 1: Neglect	Ensure that there is clarity across the system about what we mean by 'neglect' and 'meeting children's needs' so that every young person, parent, professional and leader is able to understand the standards / levels of need
Priority 2: Child Criminal Exploitation/Abuse	This remains a key priority as we know that children continue to be harmed. It is the core of the safeguarding work of the partnership and is expected to remain so on an ongoing basis
Priority 3: Expand and develop use of technology for service delivery	The new ways of working that have developed in response to COVID 19 have opened up opportunities to explore smarter ways of working to improve engagement of professionals in teams around the family and child, to improve listening and communication with children and young people and parents and carer, find new creative ways for them to be directly involved in planning for their future
Assurance Priorities	These are areas led by other partnerships but have key safeguarding elements
Assurance Area 1: Early Help/Adverse Childhood Experiences (ACES)	To avoid duplication of effort the SSCP will seek assurance updates from the 0-25 Board on progress implementing work to address ACES to reduce future safeguarding need We will also seek updates on the impact on safeguarding from the joint commissioning review and children's best value programme and innovation fund
Assurance Area 2: Children Affected by Domestic Abuse	As Covid 19 has affected services and people's access to help we need to ensure that service are able to respond to any increase in risk to children. Work to address domestic abuse in Salford is led by the Community Safety Partnership (CSP) and the Tackling Domestic Abuse Board. We will seek assurance updates from these bodies about how the safeguarding needs of children have been addressed
Assurance Area 3: The Safeguarding Elements of Mental, Emotional Health and Wellbeing	We will continue to monitor the implementation of 'Salford Thrive' the former CAMHS Transformation Plan, updated in March 2020 and also seek assurance on implementation of plans to establish a single CAMHS budget and contract from 2021 and the plans for improved transition arrangements for young people to adult mental health services.

APPENDIX

Budget Outturn

Income 2019-2020		Expenditure 2019-2020	
£		£	
		Staffing	
		SSCP Manager	
		Training Co-Ordinator	
		Performance & QA Officer	
		Training Officer	
		Senior Support Officer	
Salford City Council	151,383	Administration Officer	201,931
Health	84,801	Training	2693
GMP	13,500	Office Expenses	15,029
Probation		Professional Fees (includes Child death reviews, Case Reviews and Independent scrutiny)	59,496
CAFCASS		Other staff related costs	2135
Other (Non-Attendance at	1,330		
training)			
Total	251,014	Total	281,284
Balance B/fwd into 2019/20	0 57,122	Balance C/fwd into 2020/21	26,852

APPENDIX 2

Workforce Development - Key Achievements 2019-2020

- We established this as a joint group with the Safeguarding Adults board and reviewed the Strategic Workforce Learning & Development Strategy subgroup terms of reference and work plan to reflect both the SSCP and SSAB
- There is a well-established SSCP training team and training pool with a strong team
 ethic and relationships with a range of partners: utilising each other's strength, role and
 influence. This has saved expenditure of over £50k by utilising the skills and
 experience of trainers from partner agencies.
- We have consistently used the Beacon Centre, a youth/community centre as training venue to support training pool members. This has reduced cost by around 17K and added social value.
- We have developed additional training with key partners and experts to respond to specific training needs e.g. Youth Mental Health First Aid, Family Nurse Partnership modules, LGBT, Appreciative Inquiry, Root Cause Analysis, ACE's and Risk and Resilience
- Almost 1700 delegates accessed an SSCP course or seminar learning opportunity, this is a 7% increase compared to last year.
- There has also been a significant Increase in attendance from the voluntary and private sector

Examples of impact comments from practitioners

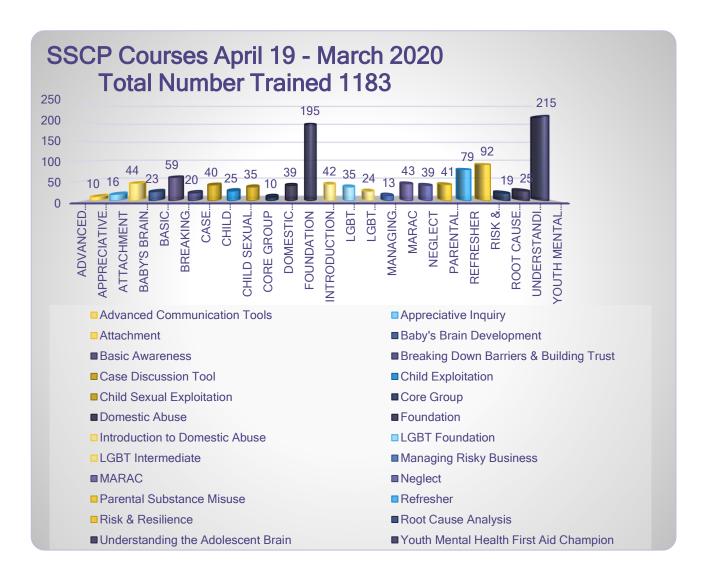
"More confident Able to use appropriate resources to broaden discussion with clients. Greater understanding of thresholds and referral protocols."

"What an amazing idea to bring in parents to explain their journey... the examples/vocabulary used today will help me to aid understanding to enable support to the child"

"Gave me a great insight into parental mental health which will assist in my practice and enable me to identify mental health issues."

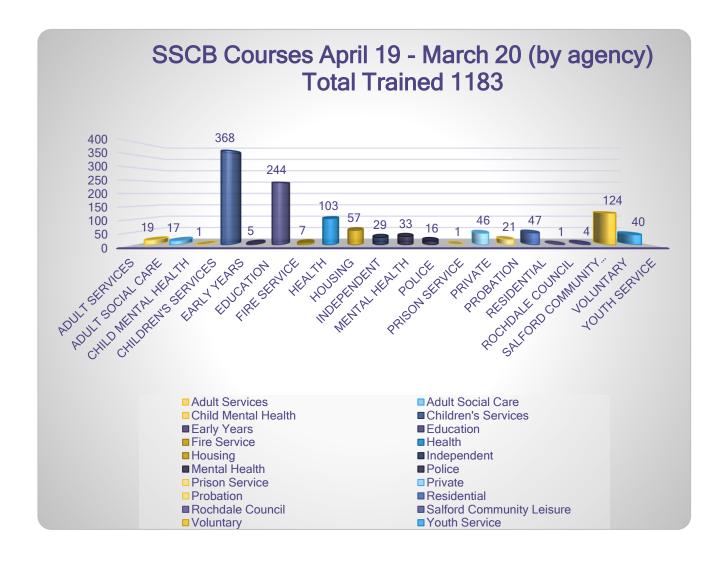
"The course was very strong on impact on children of DA and steps workers should take. I will look at how our projects can support more preventative work, influence greater use of DASH and safety plan tools."

"I am a more confident worker who understands Salford's Safeguarding procedures."



Key Challenges

- The SSCP Training pool requires a more balanced multi-agency representation from partner agencies.
- Mapping of training provision across local and GM Boards/Partnerships.
- Evaluating the long term impact of training on practice and outcomes effectively.
- For the subgroup to be truly joint the commitment and governance arrangements with the SSAB needs to be tightened.
- Receive assurance of commitment from other Partnerships/Boards on their responsibilities related to workforce development and how they link with the Strategic Workforce Development Subgroup in driving the joint priorities in Salford.
- Some agencies not accessing the programme.
- Some courses cancelled due to low nominations despite being priority areas e.g.
 Sexual Abuse and FGM.





APPENDIX 3

Covid-19 Action

As a result of the national emergency in March the Partners identified that children and young people may now be spending significantly more time at home, potentially placing them at increased risk of harm and that opportunities to spot abuse and neglect may be reduced or for them to access support, in turn increasing their vulnerability. The Partners worked together guided by a command structure and quickly developed new ways of working and systems to support vulnerable children during this time. A few examples of what were done are:

SSCP circulated

- a bulletin pulling together a range of information that all partners could access.
- a 7 Minute Briefing of Safeguarding Information for Volunteers.
- updated national guidance on serious incident notifications, rapid reviews, serious case reviews and local child safeguarding practice reviews in light of coronavirus.
- a variety of links to support Black, Minority Ethnic and Asian residents, including information on asylum seekers developed by Greater Manchester Centre for Voluntary Organisation.
- the Children's Commissioner children's guide to coronavirus to help explain the situation.

Also, a detailed guidance note was provided to children's social care staff about new working arrangements. These continue to be update and included:

- Decision making flowcharts for face to face visits.
- Safety advice during visits.
- COVID19 risk assessment guidance.
- · Guidance on virtual visits.
- Domestic Abuse.

Council staff were directed to public health advice on the Council intranet - MyZone-coronavirus information. A Spirit of Salford COVID Helpline was also established. A dedicated section was set up under the COVID section on the GMP website which included a list of resources for signposting to e.g. It's Not Okay and Trapped on Facebook and Twitter. Salford CCG produced a Citizens Panel newsletter and this was circulated to the voluntary sector by CVS.

APPENDIX 4

Glossary

CAFCASS	Children and Family Court Advisory and Support Service
CAMHS	Child and Adolescent Mental Health Service
CCG	Clinical Commissioning Group
CIN	Children in Need
CME	Children Missing Education
СРР	Child Protection Plan
CSA	Child Sexual Abuse
CSC	Children's Social Care
CSE	Child Sexual Exploitation
CSP	Community Safety Partnership
CWD	Children with Disabilities
DA	Domestic Abuse
DHR	Domestic Homicide Review
EHE	Elective Home Education
EHWB	Emotional Health and Wellbeing Board
EIP	Early Intervention and Prevention
FGM	Female Genital Mutilation
GCP	Graded Care Profile
GM	Greater Manchester
GMCA	Greater Manchester Combined Authorities
GMP	Greater Manchester Police
HWB	Health and Wellbeing Board
JSNA	Joint Strategic Needs Assessment
LA	Local Authority
LAC	Looked After Child(ren)
MAPPA	Multi-Agency Public Protection Arrangements
MARAC	Multi-agency Risk Assessment Conference
MARAM	Multi-agency Risk Assessment Model
MFH	Missing from Home
NPS	National Probation Service
OCG	Organised Crime Group
PCSO	Police Community Support Officer
PRU	Pupil Referral Unit
SCR	Serious Case Review
SEN	Special Educational Needs
SSAB	Salford Safeguarding Adult Board
SUDI	Sudden Unexpected Death in Infancy
TDAB	Tacking Domestic Abuse Board
YPP	Young Person's Plan
YPVA	Young Person Violence Advisor

