Understanding Safeguarding; it’s everybody’s business!

Multi-Agency Partnership Events

27 January 2017

https://bromley.mylifeportal.co.uk/mape
Welcome

Ade Adetosoye OBE
Deputy Chief Executive & Executive Director
Education, Care and Health Services
The Child’s Journey in Bromley Context setting

Janet Bailey
Interim Director
Children’s Social Care Services
What we will achieve today

1. Understand more about Bromley’s thresholds

2. Learn about the services available for families

3. Improve our safeguarding pathways
Getting the right support for families

“By working together with agency partners, we will ensure that every child in Bromley has the right help at the right time to keep them safe, and to meet their needs, so that they achieve, thrive and reach their full potential”

The Children’s Social Care vision
Understanding the thresholds of need

- To make things clearer, today we are sharing the borough’s new draft *Thresholds of Need*:

- This replaces the Child’s Journey in Bromley
Our Front Door

Cornelia Fuehrbaum - MASH Manager
Gill Downton - CAF Manager
Deborah Cole - Senior FSPP Bromley Children Project
Thresholds of Need and Intervention

- Provision of right services and interventions at the earliest opportunity
- Promote the welfare and safety of vulnerable children and young people
- Clear framework and common understanding of need
- Promote a shared awareness of different interventions to effectively support children, young people and their families or carers
Thresholds of Need and Intervention

- **The Windscreen threshold model** provides a continuum of need and intervention and has four descriptors for these levels:

- **Universal Need - Level 1**
  (Needs can be met by universal services);

- **Additional Need - Level 2**
  (Needs can be met by targeted service alongside universal service);

- **Multiple/considerable/complex Needs - Level 3**
  (Coordinated multi-agency response)

- **Acute Need (specialist or safeguarding needs) - Level 4**
  (Specialist services coordinated through statutory process)
Thresholds of Need and Intervention

Practitioners who are working with children and their families should:

- **Identify** the holistic needs of a child or young person

- Inform assessments by understanding the needs of the child or young person within the context of their family and community; and to

- **Act** by working with the child, young person, family members / carers to develop mutually agreed solutions where additional support is available when required
Exploring a scenario
Case Scenario

Family composition:

Mother: Betty Boo - 32 years  
Child: Boris Becker - 13 years
Child: Belinda Beckham - 7 years
Child: Brian Boo - 2 years

• Ms Boo tells the Family Worker at Belinda’s school that she is tired and depressed. She says that she is struggling to manage Belinda’s behaviour. Ms Boo has heard about ADHD from a friend and would like a diagnosis.

• Within School Belinda’s behaviour can be challenging, she has poor concentration and is receiving extra support in numeracy and literacy.

• School have some concern about Belinda’s presentation which they have spoken to Mother about but there has been little change.
Next step? Initiating the CAF

Gill Downton
CAF Manager
Initiating the CAF (Common Assessment Framework)

Next steps:

• Check if a CAF is already in place
• Decide who within your organisation will complete the CAF
• Invite parent/carer in and explain the CAF process
• Confirm consent
• Complete CAF with parent/carer
• Parent/carer to sign CAF and add any comments.
• Implement CAF plan and set a review date
• Log a copy of the CAF with the CAF Team
Next step?
Early Intervention offer
Bromley Children Project

- Family Support and Parenting
  - By consent
  - ‘Key worker’ approach
  - Assessment of all life areas
  - Parent-led partnership working to achieve goals

- Parenting Programmes
  - Range of evidence based programmes

- Children and Family Centres
  - Targeted services
  - Universal services

- Information, Advice and Support Service (IASS)
Case Scenario ...
Additional information comes to light

• Further information from TAC: -

• Health Visitor - shares that she has seen Brian twice in the last two months, once at home and once at Clinic, on both occasions Brian was in a wet nappy and once taken off it was evident he had bad nappy rash. Health Visitor has provided Ms Boo with clear advice and will monitor at Clinic next month.

• Secondary School share that Boris’s attendance is at 76%, Boris is often tired in school. The Education Welfare Service are about to become involved.
Case Scenario ...
Additional information comes to light

• Belinda attends school and states that “Mummy got hurt last night by her new boyfriend.”
Case Scenario ...

Additional information comes to light (1)

• Ms Boo is invited into the school, and Staff note a red swelling to her eye.

• She tells the school that she and her partner (Bob), who she has known for six to eight weeks, went out last night.

• When they got home mother mentioned to her partner that she thought she might be pregnant. Mother’s partner then apparently became really angry and ended up hitting her.

• When asked who cared for the children whilst mother went out mother said that her eldest son Boris (13) was left in charge.
Case Scenario ...
Additional information comes to light (2)

• Member of staff speaks to Belinda

• Belinda says that she went downstairs when she heard shouting and saw Boris pulling Mummy’s boyfriend off her. She was frightened and ran upstairs to hide.

• WHAT NEXT?
Checklist:
A good referral to Children’s Social Care

- Are all the families’ details including dates of birth, names, addresses and other household members recorded correctly?

- Have you included telephone numbers of the families and professionals known to be involved enabling timely contact?

- Is there an appropriate amount of information and context to secure an evidence based decision?

- We value your professional expertise and analysis

- If a CAF was used or implemented it should be attached
Checklist:  
A good referral to Children’s Social Care (cont.)

• Have you considered the levels of need?

• Have you clearly outlined in your professional opinion what you think the risks and needs are that are presenting at this time? (“What are we worried about?”)

• Have there been times when the problem has been dealt with or was even a little better? (“What is working well?” / Safety)

• What do you think is the next step that should happen to get the worry sorted out? What does the child/family want? (“What needs to happen?”)

• What strategies have you put in place to date to endeavour to resolve these issues, reducing need and mitigating against risk?
Multi-Agency Strategy Discussion Protocol

Keith Warren
Group Manager: Children’s Social Care

DC Julian Seal
MASH, Referral & Assessment Procedure

1. Referral to MASH

2. MASH Manager identifies if a strategy discussion is needed

3. Immediately passed onto Referral & Assessment (R&A)

4. Strategy discussion held within 24 hours
   – decide whether to initiate enquiries under Section 47 (Children Act 1989)

5. Agencies invited to attend
   – if an agency cannot attend - expected to participate in conference call
Strategy discussions

- **Purpose** -
  - Set out the shared responsibility for undertaking multi-agency strategy meetings

- **Principles** -
  - Shared joint working practices
  - Shared responsibilities

- **Outcome** -
  - Working together with partner agencies = multi-agency response
    - child focused
    - best possible outcome
Strategy meetings

- Agencies provide written report
- Participants make decisions based on multi-agency information
- Agencies agree what action is required immediately & by whom
- Determine what information will be shared with the family
- Decisions & agreed actions are fully recorded & shared (within 48 hours)
Safeguarding & Care Planning

What we do

Penny Davies  
Interim Head  
Safeguarding & Care Planning

27 January 2017
CONTACT

REFERRAL

ASSESSMENT

Referral for other Services or NFA

Referral to other Services e.g. Safeguarding & Care Planning teams, voluntary agencies

Child in Need

Section 47 Investigation (with or without police)

Looked After Children

Legal Proceedings Framework

Child in Need visits

Child Protection Plan Statutory visits

Looked After Children Statutory visits

Emergency Protection Orders

Child Arrangement Orders

Permanency Planning (adoption, long term fostering, SGO)

Care Order
CSE & Missing
The Atlas Unit

Paula Stacey
CSE/ Missing Lead

DSI Trevor Lawry
Deputy Borough Commander
A drugs county lines enterprise almost always involves exploitation of (CSE, MISPERS) vulnerable youths and a degree of (gang) violence.

Bromley Gang Trident matrix currently run 44 gang nominals.
ATLAS Team

- CSE / Missing / Gangs - Co-ordinator
- 2 x Social Work Assistants
- Data Analyst
- Administrator
- 3 x Missing Persons Officers
- 1 x CSE Officer
- 2 x Gangs Officers
Jim Gamble QPM
Chair of the Bromley Safeguarding Children’s Board
BSCB
Bromley Safeguarding Children Board

• Who we are
• What we do
• Why and how escalation works
Next steps
Action your promises

Janet Bailey
Interim Director
Children’s Social Care Services
Councillor Fortune

Portfolio Holder for Education and Children’s Care Services

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