

Solihull Safeguarding Children Partnership (SSCP)

Peer Challenge of new Multi-Agency Safeguarding Arrangements

8th – 10th October 2019

Feedback Report

1 Executive Summary

Solihull is an early adopter for the implementation of new safeguarding partnership arrangements as set out in Working Together 2018. The purpose of this peer challenge is to provide an early assessment of these new arrangements and identify further opportunities to strengthen these so that an effective model of multi-agency working can be embedded to safeguard children.

Given that the new safeguarding partnership arrangements have only been in place a matter of months it is too early to tell how effective these will be. But the timing of this peer challenge does provide an opportunity to reflect, refine and further shape these arrangements before you embed an agreed approach.

Engagement from all partners and at all levels, from strategic leaders to frontline practitioners, is good. Many examples of this collaboration were highlighted either through strategic decisions or frontline practice. This provides a very strong platform to develop formal arrangements to ensure multi agency ownership and leadership for safeguarding children.

There is an urgent need to develop a robust, multi-agency, performance framework that will ensure the SSCP has a clear understanding of the key issues and strengths across the children's safeguarding system. This will provide a single place that strategic leaders and practitioners can refer to assess and monitor progress.

There needs to be a stronger focus on how SSCP is able to evidence impact and outcomes and understand what difference has been made. Developing clear processes and systems that enable the measurement and analysis of information which can then demonstrate the effectiveness of activity and approaches that have been agreed and implemented.

There is a tendency to over complicate structures and processes and a number of partners want to keep things simple. For example, the structure for the new safeguarding partnership arrangements seem sensible but this has been complicated by overlaying language from a theoretical model that is confusing most partners (at both strategic and operational levels)

Communication is key to making the new safeguarding partnership work. Solihull will want to invest time and resource and consider new ways of communicating that ensure there is an awareness and understanding of the role, priorities and impact of the Solihull Safeguarding Children Partnership.

2 Summary of the peer challenge approach

The aim of this peer challenge is to help SSCP assess the implementation and potential effectiveness of the newly implemented multi agency safeguarding arrangements. It is important to remember that a challenge is not an inspection; it provides a critical friend to challenge the council and its partners in assessing their strengths and identify areas that could be improved.

The peer team

Peer challenges are delivered by experienced professionals. The make-up of the peer team reflected the requirements and the focus of the peer challenge. Peers were selected on the basis of their relevant experience and expertise and their

participation was agreed with you. The peers who delivered the peer challenge in Solihull were:

- Lead Peer Steve Ashley, Safeguarding Partnership Scrutineer, Lancashire
- Social Care Peer Anna Gianfrancesco, Head of Safeguarding and Quality Assurance, Brighton and Hove Council
- Health Peer Wendy Thorogood, LGA Associate
- Education Peer Nick Jaques, Safeguarding Director, Carr Manor Community School
- Police Peer Heather Pearson, LGA Associate
- Peer Challenge Manager Richard Cooke, National Programme Manager (Children's Services), LGA

3 Scope and Focus

Following the publication of Working Together 2018, all areas have been required to introduce revised governance of safeguarding partnership arrangements. SSCP have worked with the LGA to pilot a new peer challenge focusing on these arrangements and framed around four key themes:

- Effectiveness of structure and process
- Governance, accountability and resources
- Strategic partnerships
- Impact and outcomes

4 Main Findings

4.1 Effectiveness of structure and process

The peer team were quickly able to establish that there is good engagement from all partners in safeguarding arrangements. Partners spoke positively about the relationships they have been able to build and how this has enabled effective collaboration. It is important that this engagement also appears to be pitched at the right level with senior leaders involved in high level strategic discussions whilst their more operational colleagues are working together to develop and embed effective approaches to practice. The three strategic leaders for the local authority, police and health are strongly committed to drive change, get things right and embed the safeguarding partnership arrangements. Whilst the SSCP is seen as the formal vehicle for how they collectively safeguard children there are also many informal interactions between these three leaders which is building a strong and effective working relationship.

The fact that Solihull has pushed ahead to move into the new safeguarding partnership arrangements early is another demonstration of the strong partnership platform that is being built upon and, equally, the ambition to improve and refine the existing model.

There is good take up of the multi-agency safeguarding training offer and feedback from partners was that training was high quality and well regarded. The use of a pool of multi-agency peers to deliver the training also ensures that the experience, expertise and skills are being utilised from across the partnership. It is also positive that significant numbers of staff have been trained in the use of the Graded Care Profile. However, this has not translated into any real change in practice and there is little evidence of increasing use of the Graded Care Profile or analysis of the impact of the training. A clear and shared plan needs to be developed, agreed and communicated that will build on the training delivered and articulate the next steps to embed the Graded Care Profile into practice.

It is acknowledged that the structure and processes around the new safeguarding partnership arrangements have only recently been introduced. However, there was very little understanding or ownership of these or even in some instances an awareness that changes had occurred. It is also clear that the use of David Kolb experiential learning theory to describe the different phases of the meeting cycle is causing unnecessary confusion.

The principle of a strategic group supported by a group focussed on delivery and one focussed on assurance seems a sensible approach. However, the reporting processes between the three seems overly complicated, linear and on paper suggests a rather laborious process from the identification of an issue to the implementation of a response.

On a more practical level, you are aware that agendas and the accompanying number of papers presented, is currently unmanageable and does not allow an appropriate level of discussion and challenge within meetings. There is also a need to formalise how the Partnership is able to respond to urgent issues that do not fit within the existing cycle of meetings.

There should now be a concerted focus on communication, transparency and engagement not only with the workforce but also with children and families and the wider public. Ensuring the new arrangements are well understood, their purpose is clear, and it is clear how to engage. There is a real opportunity to consider a better use of social media and technology to enable this.

4.2 Governance, accountability and resources

The Lead Member for Children, Education and Skills is very experienced and has a good understanding of children's services, including the current strengths and challenges for services in Solihull in how they protect and safeguard children. The Lead Member is actively engaged in a number of children's focussed strategic forums at both a local and national level and is committed to ensuring that these are able to improve outcomes.

There are good and established partnership links across the West Midlands region and recognition that this provides the opportunity to effectively collaborate around themes of work. This working on a regional and sub regional footprint has helped to develop practice and learning and implement new approaches in a number of areas including the new Rapid Review approach and the Tri.x (the online portal to access social care policy and procedures) policy updates.

You have acknowledged that there is a need to unpick and articulate clearly the inter relationships between several strategic partnership boards that exist in Solihull. This work has already begun and once finalised will help partners to understand how key partnerships such as the Health and Wellbeing Board, Adult Safeguarding Board, SSCP and Corporate Parenting Board work together and minimise the duplication of resources and capacity.

The establishment of the Exploitation Reduction Group is positive and will be a key forum to drive multi-agency change to improve outcomes for vulnerable children and adults at risk of exploitation. There is senior leader commitment that this Group will be action focussed and appropriate representation across all relevant partner agencies to ensure a coherent response to emerging issues.

The multi-agency audit model is well established in Solihull and is clearly understood by practitioners and their managers. The Partnership will want to continue to invest capacity and resource into this model, ensure it is focussed around key priorities and that the learning is shared and used to improve practice.

The terms of reference for SSCP need to reviewed and refreshed to ensure they are fit for purpose. For example, it is not clear at the moment around the role of the education representative, the expectations of this role and the contribution they would make. In addition, the SSCP needs to clarify how the voluntary sector will engage in these new partnership arrangements.

Decision making also needs to be refined to ensure a partnership model that is not only robust but responsive and recognises the seniority and expertise of officers engaged, for example in the Response and Delivery Group and the Assurance and Review Group.

Communication and engagement is a key challenge for the SSCP. The peer team spoke to frontline practitioners and whilst some were aware that new partnership arrangements had been implemented, many were not aware and nobody was able to describe these changes. It is understood that these changes have taken place very recently but there is little recognition of this by frontline practitioners. There is an opportunity for the Business Unit to develop and drive an improved approach around communication and engagement and be far more visible across the Partnership at all levels, from strategic to frontline.

The role of the scrutineer is still unclear and further work needs to be undertaken to ensure that partners understand that the role is different from that of the Independent Chair and what these differences are.

There does not appear to be widespread clarity around the SSCP budget, the contributions that are made and how these are used to fund activity. The delivery of the training programme is an example of this with uncertainty from some partners around how their financial contributions are used, when free training places are available and when some incur a charge.

SSCP needs to maintain a strong focus on how it is embeds and sustains new partnership activity and approaches and the evidence it will collect and measure to assure itself that this is happening. Wrapping a programme management approach around key delivery priorities to manage and ensure successful implementation.

4.3 Strategic partnerships

There is widespread recognition that engagement with a complex health economy is good and works well. However, there is also acknowledgement that not all partners understand fully the different parts of the health system, what they deliver and the recent restructures that have taken place. It will be important, if this positive engagement is to be maintained, that there is a sustained effort from across the partnership that continues to work hard at maintaining an effective relationship with health providers and commissioners.

Whilst there has been significant restructuring and change across a number of sectors and organisations this does not appear to have impacted negatively on service delivery or on how partners are working together.

Engagement from education establishments is very positive and the Education and Learning Relevant Agencies Group (ELRAG) is well attended and provides a useful forum to ensure schools, colleges and early years settings are informing the work of the SSCP. More generally, head teachers demonstrated a willingness to work with the Council and other partners.

There is evidence that some key strategic decisions have been able to make a positive impact on the effectiveness of practice. One example of this is the decision to add an education professional into MASH which has strengthened the relationship with schools. Another is the recent restructure of the Council's Early Help services which again has been positively received by partners and especially schools.

It is positive that the current Scrutineer was previously the Independent Chair as this has provided some stability through the transition period to new arrangements. The Scrutineer has also been able to use his knowledge of previous process, structure and relationships to help shape and inform the newly formed SSCP.

The peer team were not able to find a clearly articulated vision and set of principles that partner organisations have developed, signed up to and own. If these do not exist, it will be something you may want to develop quickly as the foundation for future partnership working through the SSCP.

There needs to be more clarity around who the SSCP is accountable to and how it engages with other key strategic partnerships such as the Health and Wellbeing Board. You anticipate that the work that began in August 2019 to review multi agency boards and partnerships will address this.

Partners have identified that emotional wellbeing and mental health are key priorities for children and young people. The peer team felt that given this focus it would be beneficial to consider further how the mental health providers are engaged in the Partnership and the opportunity to formalise this through the SSCP.

As has been mentioned previously, whilst engagement with the health sector is good, there is still a lack of understanding from some partners around the changes in structure and delivery that have taken place across health – for example through the bringing together of Birmingham and Solihull Commissioning Groups into one organisation. It was suggested that a clear structure map would be extremely helpful, if it is possible to produce this for what is a highly complex system.

4.4 Impact and outcomes

The last SIF Ofsted Inspection in 2016 judged the effectiveness of the LSCB to be good. It is positive that these strong foundations have been maintained and built upon in the new arrangements. As part of this transition to new arrangements the Chair has been able to provide direction and focus minds, challenging the Partnership with questions such as 'what have we done to make a difference?'

There is a significant gap around how the voice and experience of children and young people is embedded across the work of the Partnership and how this is providing evidence of impact and is informing priorities and new activity. The peer team were impressed with the way the ELRAG is collecting children's voice across all year groups and also how children and parents are involved in MACE meetings. These provide an opportunity to use existing mechanisms and practice to ensure children and young people's voice is embedded across the work of SSCP.

The Exploitation Reduction Group is providing a catalyst for different ways of working across children's and adult services and also linking with the Community Safety Partnership. This is driven through a very clear focus and a determination to engage the right services that will make a difference.

Some work is underway to report multi agency performance information on the three SSCP priorities:

- To support the delivery of Early Help services.
- To promote positive and promising practice on neglect and gather evidence of the impact.
- To help children at risk of exploitation and provide support into adulthood

However, it is important that SSCP is able to monitor and track the performance of core child protection issues. There is an urgent need to develop a single, multi-agency safeguarding dataset.

It also unclear what evidence was used to determine the three priorities. The peer team is not suggesting that these are the wrong priorities but could not see the underlying evidence and were aware that these three same priorities had been in place for a number of years. It was also apparent that these three priorities are not well understood and there does not seem to be a clear plan that describes how SSCP will deliver against these priorities, what will be measured to assess impact and outcomes and how this will be reported.

5 Next Steps

The Local Government Association would be happy to discuss how we could help you further through the LGA's Principal Adviser Helen Murray Telephone 07884 312235 or e-mail <u>helen.murray@local.gov.uk</u>, and Claire Burgess, the Children's Improvement Adviser, Telephone 07854 407337 or e-mail <u>claire.burgess23@gmail.com</u>.