

# Children, Schools and Families - Safeguarding Children Unit

# **Child Protection Conference Service Report**

#### Introduction

The Child Protection Conference Service is part of Surrey Children's Services Safeguarding Unit. Its role is to provide review and monitoring of all children subject to a Child Protection Plan (CPP), through an Independent Chair. There are 12 Independent Chairs accountable to a Service Coordinator, who are not responsible for the operational case-management. In the period from October 2012 to September 2013 the service held c.1, 900 conferences.\* These consist of initials – when a child is first referred for a conference and subsequently reviews. A CPP review takes place within three months of the Initial Child Protection Conference (ICPC) and then subsequently every five months.

#### Issues

Following the September 2012 Ofsted Inspection and a number of Serious Case Reviews (SCRs), the service were faced with a number of challenges:

- Child Protection Plans lacked clear tasks and engagement of all partner agencies
- > ICPC timelines was poor, and significantly out of step with our statistical neighbours
- Surrey's use of category was inconsistent with that of our statistical neighbours
- ➤ High prevalence of domestic abuse, mental ill-health and substance misuse in cases leading to a child protection plan
- Level of engagement by fathers and with fathers in CPPs
- Involvement of all partners in child protection planning

### **Child Protection Planning**

The Ofsted of 2012 identified that some of the Child Protection Plans lacked clear, timely and outcome-focused actions. Despite this it concluded that children in Surrey were kept safe, but that in some cases, plans could be more specific and targeted. Linked to this was concern that the role of the Family Support Worker was not adequately defined in CPP; this was also an issue highlighted in a case review.

The Unit in conjunction with the areas has made improvements in this regard. A major contributory factor was the change in the format of the Child Protection Plan on the ICS record system. This provides an opportunity to specify more clearly the outcome to be achieved; how this relates to identified risks, and what action professionals and families will take.

<sup>\*</sup> Owing to a change in the way statistics were measured, there is no data for March 2013 but on average 150 conferences are held each month.

In respect of the role of the Family Support Workers, (unqualified staff who undertake work directly with families under the guidance and instruction of social workers), the findings of the inspection and the agency's case review has led to a significant change in practice. This was acknowledged by Ofsted in June 2013 when they visited Surrey for the thematic audit on Neglect. The inspectors reported that they found the role of Family Support Workers in Child Protection Plans to be clearly outlined, focused and task-centred.

The majority of children remain the subject of a CPP for under 16 months. There are a small percentage that remain on a CPP for longer periods of time with a small percentage 6.7% continuing for more than 24 months (see Fig 1&2).\* Whilst this represents an increase on the total in the previous reporting year 2012/13 of 3.4%; this is the result of efforts made to progress children that had been subject to CPPs in April and May 2013. This was achieved through escalation to the Court arena, or identifying early help solutions to enable 'step-down' from a CPP.

#### **ICPC Timescales**

According to Working Together, an Initial Child Protection Conference should be held within 15 working days of the first strategy meeting. Surrey's performance had been poor in comparison to our statistical neighbours. Surrey's average performance level for 2012/13 was 45% as opposed to 68% for similar Local Authorities.

The Unit has worked hard to address this issue and the current performance for the service is 77% of conferences held within timescales. These were the measures taken:

- Switch to single contracts for all staff in the Unit, so that Chairs were dedicated Conference Chairs, or Independent Reviewing Officers – this ensured a dedicated service free from competing demands
- Creation of 15 dedicated slots per week for initial Child Protection Conferences
- Revised tracking process to ensure requests and invitations were received promptly
- Performance management discussions on a monthly basis to address practice issues

As a consequence of these measures performance improved in the second half of the 2012/13 reporting year with the figures from February 2012 onwards being consistently comparable to and often exceeding those of our statistical neighbours and often exceeding

## **Use of Category**

Surrey Children's Services use of category for Child Protection Plans was identified as inconsistent with that of other similar local authorities. In particular, the use of Emotional Abuse was disproportionate – over 50% of children subject to a CPP were categorised as such. The Safeguarding Unit carried out an audit of 100 cases to analyse the reasons for the disparity. Two factors were found to be affecting this statistic:

- The prevalence of domestic abuse as a major factor in cases. The effect of domestic abuse upon children caught in such dysfunctional parental relationship is one of emotional harm
- A reluctance on the part of some CP Chairs to 'name' the concern as Neglect out of concern that this would alienate families. Emotional Abuse was seen in these cases as implying less blame on parents and encouraging them to engage

<sup>\*</sup> All tables and graphs are in Appendix A.

The service and the Quality Assurance (QA) Team however, found this reasoning flawed. Firstly, domestic abuse was often accompanied by other problems such as parental substance misuse, or mental ill-health. In these circumstances the domestic abuse was a symptom of poor parenting and care. In these circumstances Neglect would be a more appropriate category.

Secondly, by labelling the abuse as Emotional the true underlying cause and the resulting impact upon the child can be missed. If poor parenting, neglect, or substance misuse is clearly identified as risk factors, then they can be addressed through concrete plans. They allowed the workers to confront parents with the specific needs that have to be addressed and changes to be made.

The result of this work and the subsequent guidance issued to CP Chairs has been a shift in the decision-making at conferences, so that our use of category corresponds more closely to that of our statistical neighbours (Fig 3).

## High levels of Domestic Abuse, Substance Misuse, Mental III-health.

Consistently over the past few years, the above factors have been the most prevalent in those cases that have led to a Child Protection Plan (Fig 4). In many cases the issues are inter-related, with Domestic Abuse (DA) linked to either alcohol, or drug misuse, or with mental ill-health. In these cases, DA is a symptom of the underlying issues. The focus of work has subsequently shifted away from outreach DA to tackling its causes within families. Whilst on the positive side, this indicates the success of partner agencies in identifying and sharing information; it also points to the need for earlier intervention to address the problems associated for children's life experiences.

The Directorate has led in the development of an Early Help Strategy to help ensure that services are available to tackle these problems, before they require statutory intervention. The partnership under Children's Services leadership has devised a level of needs document and gained agreement on the building of a wider Early Help, Safeguarding and Wellbeing system that ensures targeted and early intervention when needs are first identified.

### **Level of Engagement by Fathers**

A number of Serious Case Reviews (SCRs) have raised the need for Social Workers to include fathers / male partners in the Child Protection process. This means ensuring that their role in the family is thoroughly assessed; that their potential as a protective influence, or risk is fully understood, and that they are fully participating in the work of the CPP.

This was an area of our work that was examined by Ofsted in the thematic inspection in June. They fed back that had found good evidence of engagement with fathers, or male partners. The data from the CP Chairs quality assurance forms presents a moderate picture with in most quarters over 50% (Fig 5) attending all, or part of a conference.\* However, there is room for improvement. There are two concerning areas: the first is the high level of fathers not invited; where data is available for this (Fig 5) almost 25% of conferences report no father invited. There are some cases where this is appropriate or unavoidable: whereabouts unknown, mother unwilling to pass on details and in some cases father is in prison.

The second indication that we could improve the level of involvement is provided by the fact that fathers engagement with partner organisations is higher than that of attendance at conference, with over 60% of fathers engaging with at least one agency (see Fig 6).

<sup>\*</sup> In cases where there is violence in a relationship a conference can be split to allow each partner to attend separately.

There is a need to build upon the progress made in including male partners, or fathers and improve attendance at conference. The findings of serious case reviews have shown that they can be a protective factor, or key to the work needed as part of a CPP.

### **Involvement of Partner Agencies**

The involvement of partner agencies in CPPs is very variable, (Fig 7&8) with certain professionals demonstrating a much higher level of engagement than others. Police attendance at ICPC is almost 100%, dropping to approximately 20% at reviews. This shows a clear commitment and allocation of resource to the initial decision-making and ensuring they contribute to the analysis or risk. The lower level of attendance at reviews reflects a view that they have less involvement with most families as part of a CPP. They will usually attend only where there has been a further contact. The Police continue to show a strong commitment to reviews by providing reports to the conference in their absence; in 80% of review conferences a report is received from the Police.

Health agencies are usually involved in conferences and attend in the majority of cases. Health Visitors and School Nurses attend in the majority of cases. The former attend virtually all reviews to which they are invited and in the majority of cases – 88%. School Nurses attend 74% of conferences to which they re invited providing reports in 92% of these cases.

GP attendance is particularly poor, attending in only 2% of cases and providing reports in just 2% of cases. It is understandable that GP attendance to ICPCs is problematic, given the short-notice that is likely for conferences and the commitment to surgeries. It is however disappointing that so few reports are received for conferences, which is a lower percentage than any other professional group. In order to find a way of improving these figures a meeting has been arranged between the Head of Safeguarding and the Named GP.

Schools involvement in conferences remains consistently high, with attendance at 90% to reviews, dropping to 70% for initials. There has been an improvement in attendance due to the agreement reached by schools with Schools & Learning on attendance during school holidays.

### **Future Challenges:**

In addition to carrying out its statutory functions, the CPC Service will face a number of challenges in the coming year. These have been identified within its Business Plan for 2013/14:

Respond to the challenge of the Family Justice Review in ensuring that cases are progressed in a timely fashion and children are protected.

Respond to the changes in Working Together 2013. The service needs to incorporate the change to the Single Assessment, advice on timeliness of conferences and the requirement to provide a smooth transition from a CPP into targeted services that prevent re-referral.

Develop closer partnership working with adult services, particularly substance misuse and mental health workers to achieve greater engagement in Child Protection Planning.

Develop the CP Conference Service, so that it is integrated into the Safeguarding and Wellbeing System that enables a clear and robust "step-down" process from a CPP.

# Appendix:

Fig 1: How long has the child been on a Child Protection Plan?

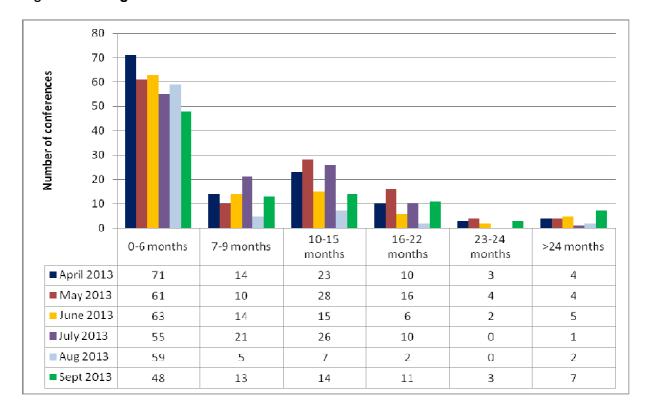
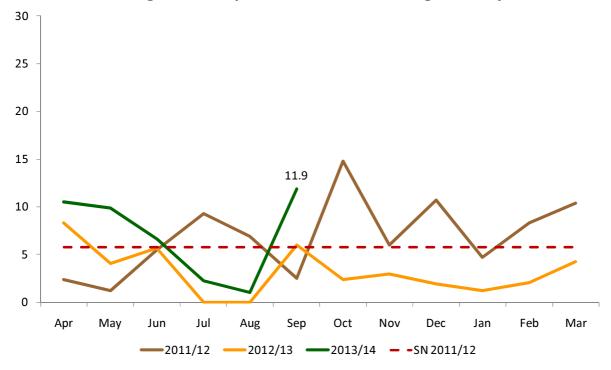


Fig 2:

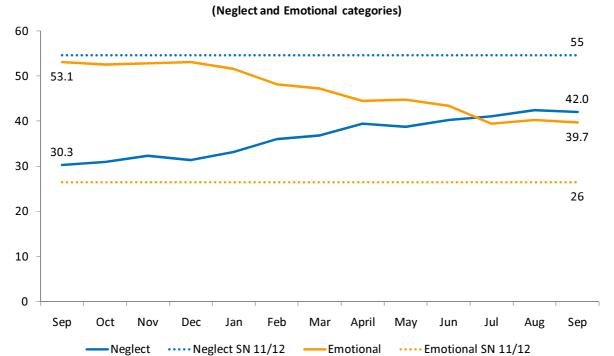
# Percentage of child protection cases ceasing after 2 years



Page 75 5

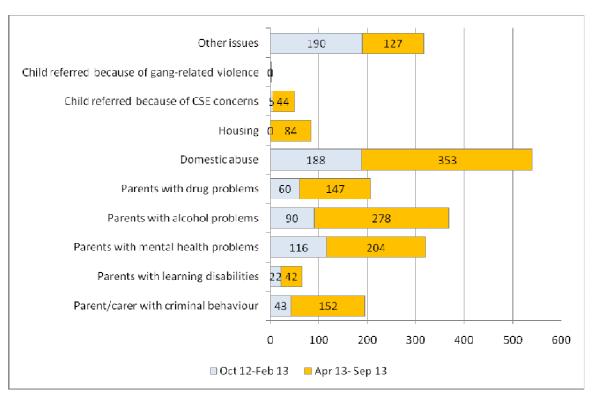
Fig 3:

# Percentage of child protection plans in each category



Page 76 6

Fig 4: Issues Identified in Child Protection Plans



- \*The above figures do not match the numbers of children subject to a plan, as more than one issue may be identified in a single child protection case.
- +The increase in the numbers of issues identified in the second six month period is due in part to the change in the format of the Child Protection Plan, which enabled greater clarity in identifying issues and improved reporting by partner agencies.

Fig 5: Attendance by fathers/male partners at Child Protection conferences

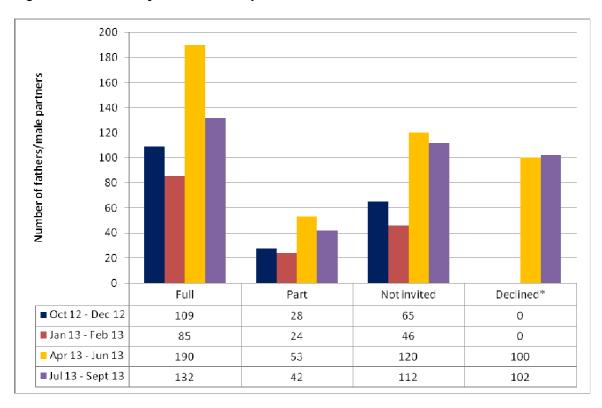


Fig 6: Fathers/male partners engagement with key agencies April – Sept 2013

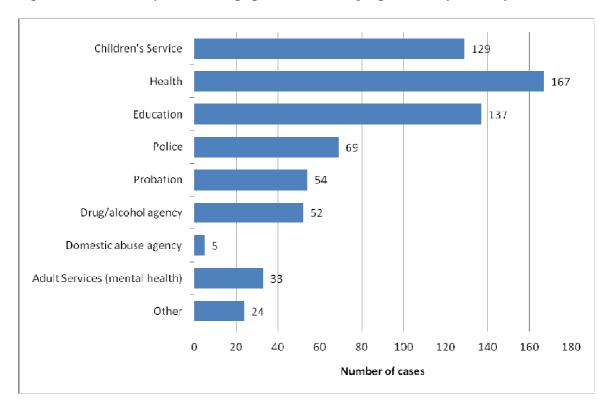


Fig 8: Which key agencies attended review child protection conferences (Apr-Sept 2013)

