

Safeguarding, Child Protection and Prevention

Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring children are growing up in circumstances consistent with the provision of safe and effective care.

Child protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Effective child protection is essential as part of wider work to safeguard and promote the welfare of children. However, all agencies and individuals should aim to proactively safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced. This key element makes it important that staff in all agencies understand the importance and relevance of multi agency working.

A key preventive role for multi agency staff is to enable vulnerable children and families to access and benefit from universal and specialist preventive services which may avoid the need for child protection interventions.

In many cases families come to the attention of professionals when there is a clear need for child protection. Many families however can benefit from early intervention services and this will be the subject of discussions between the Local Safeguarding Children Board and Stockton-on-Tees Children's Trust. Discussions are to take place with the aim of agreeing a working protocol between the two Boards that may see the Local Safeguarding Children Board focussing mainly on Child Protection and universal and specialist preventative services being led by the Children's Trust.

This will enable Stockton Local Safeguarding Children Board to revert back to the scope of a Local Safeguarding Children Board as referred to in Working Together, which includes safeguarding and promoting the welfare of children in three broad areas of activity:

1. Activity that affects all children and aims to identify and prevent maltreatment, or impairment of health or development, and ensure children are growing up in circumstances consistent with safe and effective care.
2. Proactive work that aims to target particular groups
3. Responsive work to protect children who are suffering, or are likely to suffer significant harm

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Who's
Responsible
for
Safeguarding
Children?

Everyone Is!

We're on the web
www.stockton.gov.uk/slscb

You can also find us at:

SLSCB
The Review Unit, Parkside
Melrose Avenue, Billingham
Stockton-on-Tees
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PRIVATE FOSTERING

What is Private Fostering?

Private Fostering is very different from the care of children provided by local councils through approved foster carers. It occurs when a child under 16 (if disabled, under 18) is looked after for more than 28 days by an adult that is not a relative and is a private arrangement between parent and carer.

This arrangement could be due to factors such as children living with a friend's family after separation, divorce or arguments at home, children coming from abroad to access education and health systems or teenagers living with the family of a boyfriend or girlfriend. It does not refer to children on weekend or holiday visits

Children's Social Care is not involved in making private fostering arrangements but is responsible for checking that the arrangements are suitable for the child or young person.

They must therefore be notified of any arrangements as the Local Authority has a duty to assess the situation and to provide support & advice to parents and private foster carers in accordance with the Children (Private Arrangements for Fostering) Regulations 2005 & the National Minimum Standards for Private Fostering 2005. It is therefore a requirement that anyone who is aware of or thinks a child or young person may be Privately Fostered lets the Local Authority know. This will help protect the child against abuse or neglect and provide some reassurance that the child is being looked after properly.

Notification of or enquires regarding Private Fostering should be made in the first instance to:

First Contact Team

Tel: 01642 527764 Minicom: (01642) 527769
Email: firstcontact@stockton.gov.uk

Further information relating to Private Fostering can be found on the SLSCB web pages

www.stockton.gov.uk/slsch and www.privatefostering.org.uk/



STOCKTON LSCB CASE REVIEWS

Local Safeguarding Children Boards can undertake multi agency case reviews when the criteria for a Serious Case Review is not met as detailed in Chapter 8 of Working Together 2010. It may do this if it thinks there are lessons to be learned by agencies and individuals to improve the way in which they work both individually and collectively to safeguard and promote the welfare of children.

In Stockton we have recently concluded a few Management Reviews under this process. The following is a summary of their findings.

The names used are not those of the children involved.

DANIEL:

Background

Unborn baby Daniel, his sibling and two half siblings were made subject to child protection plans under the primary category of physical abuse. The concerns were in relation to parental domestic violence and drug misuse. Two weeks after Daniel was born the protection plan was removed. The protection plans for his siblings had also been removed.

Key Issues Gleaned from a Facilitated Discussion

These were identified as:

- No assessment had been undertaken in relation to unborn baby Daniel, and the focus was on the three children already in the family.
- Some staff were intimidated by the father
- Some conference attendees didn't take ownership of their information, share or act on advice provided to them by their agency.
- The report was seen as the Social Workers report and not a multi agency report to conference.
- The plan was removed before the second Review Conference, which is contrary to SLSCB Procedures.

Lessons Learned

- Multi-agency child protection procedures should be followed and no plan should normally be removed within 3 months unless there are exceptional circumstances.
- Section 7.10.3.3 of the LSCB multi-agency procedures should be updated to include examples of what "exceptional circumstances" are appropriate as above.
- Where decisions are taken that are not compliant with multi-agency procedures the reasons why procedures have not been followed needs to be carefully explained and a record made, including the details of who was consulted.
- Multi Agency Reports need to be produced in time to allow all professionals to see the report well in

advance of the meeting. Verbal updates to be captured in conference minutes.

- Agency views must be correctly represented in CP conferences.
- Unborn babies need to be included as the subject of ICPCs alongside the other children in the family.
- The date of entry on RAISE records should not be backdated; they should reflect the real date of completing the documentation.
- The title of the report to the Child Protection Review Conference should be altered so that it is not recorded as being the Social Worker's Report.
- A recommendation section should be added to Part 1 of the multi-agency reports.
- Practitioners to be reminded or made aware of how to work with un-cooperative families and intimidating family members

EDWARD:

Background

A young boy was subjected to a sexual assault by a member of the public (a young man), who was a volunteer at the Neighbourhood Centre where the assault took place. The perpetrator was at the time of the assault under a Supervision Order from the Probation Service for offences not related to sexualised behaviour.

Key Issues

Identified that were a cause of concern:

- The perpetrator had previous offences of sexualised behaviour.
- What safeguarding measures are in place in Neighbourhood Centres?
- Do staff, paid and unpaid in Neighbourhood Centres receive safeguarding training?

Lessons Learned

There is a need:

- To review and support safeguarding arrangements in Neighbourhood Centres.
- Raise awareness about Sexual Offending by Young People

HOW TO... DEAL WITH INTIMIDATING FAMILIES

Extract from Community Care 8 September 2011.

Ray Braithwaite offers guidance on managing highly resistant behaviour

Two serious case reviews published in July 2011 highlighted a key issue facing child protection social workers: in both situations, the parents or carers used intimidation and disguised compliance to keep social workers at arm's length. The wrong decisions were made and crucial signs of abuse were missed.

Intimidation has many forms ranging from the more obvious threats, such as shouting and use of abusive language, to the less obvious use of silence, creating a powerful presence and constant bullying. Some family members will even imply that their social worker is incompetent or displaying inappropriate behaviour, and request a replacement.

Here is a guide to managing highly resistant behaviour.

1 Always ensure you are safe

Find out whether you can access training on managing aggression. Take responsibility for your own personal safety and follow procedures such as visiting in pairs, carrying a mobile phone, having a call-back procedure at the end of your visit and parking your car facing the way you intend to leave.

2 Identify resistant behaviour yourself

Keep factual notes with dates and descriptions of any behaviour that indicates intimidation. Look back at the case history on a regular basis to see if there is a recurring pattern. Time spent reading case information is always useful and may reduce the amount of time you need to invest in working with the family further down the line.

3 Consider a fresh approach

If possible, find out what any previously allocated social workers or other staff did to manage resistant behaviour from that particular family. Was their approach successful? If not, you may need to find another way to work with the family, using the following as a guide.

4 Be open with the family

If you think a parent or carer is using resistant behaviour, tell them as soon as you recognise it. Use straightforward, jargon-free language and back up your argument with dates and examples. Some examples you could relay to the family include:

- Agreeing to keep appointments and not doing so
- Hostility or non co-operation
- Agreeing to undertake individual actions and failing to achieve or complete them
- Putting little effort into making changes work
- Co-operating with some services but not making important changes
- No significant changes identified at reviews
- Changes do occur but as a result of the input of workers and not the parent or carer.

5 Establish or re-establish a written contract with the parent or carer

Identify a set of alternative behaviours you consider acceptable and achievable using the SMART goals: specific, measurable, achievable, realistic and timed. Be clear with the parent about the reason for your visits. Let them know you will be making unannounced visits and will want to see other parts of the house, such as where the child slept the night before.

6 Outline reasons why the parent or carer should co-operate

Talk through what the service user has to gain from co-operating and offer something, if possible, which may be perceived as a reward for compliance. This may include compliments and recognition, child minding or baby sitting to allow parents additional free time, a Yoga or massage session for the parent, financial incentive or additional social work input. Equally important is to detail the negative consequences of continued resistant behaviour.

7 Remember the child is the focus

On each visit, make sure you see and talk to the child away from the carer or parent, if the child's age and ability permits. Again, make unannounced visits and look in other parts of the property, not just the room you are shown into.

8 Keep to a fixed timetable, and have a plan of action of changes do not occur

Monitor any changes and provide positive feedback to the parent or carer on each visit, clearly outlining any improvements. Identify any lack of progress, identify reasons for the lack of progress and help the family identify ways of overcoming these. The importance of good-quality, reflective supervision cannot be over-stressed here, because it is within such sessions that the social worker can identify progress or the lack of it.

Ray Braithwaite is a freelance trainer specialising in aggression and stress

PROFESSIONAL CHALLENGE

Professional challenge is a positive activity and a sign of good professional practice, a healthy organisation and effective multiagency working. Being professionally challenged should not be seen as a slur on the person's professional capabilities.

Many serious case reviews, both nationally and locally, have identified an apparent reluctance to challenge interagency decision making. The serious case reviews have often identified one, if not more, professional(s) who is/are concerned with a decision made by a different agency. However the serious case reviews have identified that their concerns have not been followed up with robust professional challenge which may have altered the professional response.

Professional challenge and critical reflection about the focus and intended outcome of intervention should include questioning and being open to professional challenge from colleagues as well as being confident to challenge others.

Professional challenge is a fundamental professional responsibility. In this context it is about challenging decisions, practice or actions which could jeopardise the safety or well-being of a child or young person or his/her family.

Many professional challenges will be resolved on an informal basis by contact between the professional raising the challenge (or their manager) and agency receiving the challenge and will end there.

Resolution Process for Looked After Children.

All Local Authorities are required to have a Resolution Process in accordance with the Adoption and Children Act 2002 where there is a concern or disagreement concerning a child in care. This requirement is clearly stipulated in the guidance for Independent Reviewing Officers (IRO). One of the Independent Reviewing Officer's key roles is problem resolution. Where an issue of poor practice is identified the IRO will negotiate with the Local Authority management up to the highest level if needed. In the last resort the IRO has the power to refer a case to the Children and Family Court Advisory and Support Service (CAFCASS). The IRO will also work with the Local Authority complaints officer and advocates where necessary for the resolution of a problem.

If a professional is unhappy about the way a case involving a child in care is being dealt with the professional should contact the child's Independent Reviewing Officer.



WHOSE ASSESSMENT IS IT?

Every professional providing help to children and families will be involved in making assessments and plans, as part of their day-to-day work. Risk Assessment relies on the skills, knowledge and abilities of all of the professionals involved in a child's life. While some professionals may not define their core role as a 'child protection' one (e.g. professionals who may be working primarily with the adults in the household), their information and involvement may be crucial in ascertaining and managing present and future risks to a child or young person. Different levels of assessment will be undertaken by professionals depending upon their professional role and proportionate to need.

Where there are concerns about a child's safety, agencies must **work together to undertake an assessment**. A collective view of risk can then be achieved, based on all of the information available. The agencies must collectively agree the assessment report and contributions to the report should be acknowledged and owned by the agency providing the information.

Assessments are a process of gathering information which is then analysed. It is not an event and should not be done in isolation. Children, young people and their families should be involved in the assessment process and not have it done to them.

***“Involving children and young people in finding solutions to their problems can also help build resilience.”
(Daniel et al. 1999).***

An open and transparent approach that actively involves all concerned, including children and families is of clear benefit in that:

- Parents and children are often very aware of what they need. Parents and children themselves may be the first people to recognise that there is a significant risk to the child's welfare.
- Children form strong bonds with those that care for them. Even when affective bonds are distorted by trauma, dysfunction or abuse, these bonds can continue to represent a degree of security for the child.
- Not all parents and carers accept professional help, or work in partnership to safeguard the child. It is therefore very important to assess the effectiveness of any intervention to ensure any 'apparent' partnership does actually result in change.
- Professionals should pay particular attention to the "rule of optimism". Many significant case reviews have illustrated that professionals' views can be strongly influenced by factors such as accepting at face value apparent indicators of progress or apparent compliance and cooperation. In order for the child or young person to be safe, such factors need to be balanced against the overall weight of evidence and actual risks.
- Children and families need to understand why sharing information with professionals is necessary; they can help professionals distinguish what information is significant and work with professionals to analyse the information appropriately to reach an agreed plan.
- Even in cases where compulsory action is necessary, research has shown outcomes for children are better by working collaboratively with families.

It is imperative that:

- Adult services **MUST ALWAYS** consider any potential risks for any child linked to adult service users.

- Children's services **MUST ALWAYS** ascertain whether any adult services are involved with the child or family.
- All services **MUST ALWAYS** ensure there is effective communication where there are concerns about the protection of a child.
- Assessment Reports are shared with those contributing to them to enable agreement and ownership of the information.
- Reports are shared with families in advance of them seeing or receiving it at a conference or other meeting where it is being presented.



THE SAFE NETWORK

The Safe Network is a project that was set up by DfE to help keep children safe when taking part in activities outside the home. It is run as a partnership between the NSPCC, Children England and the Child Accident Prevention Trust.

On their website – www.safenetwork.org.uk – you'll find free resources and comprehensive information on safeguarding matters for voluntary organisations and community groups. They also run training events, an enquiry service and community based support through regional development managers, champions and other Voluntary & Community Service partners.

The 'Making the Link' project which works along side the Safe Network is run by the Child Accident Prevention Trust (CAPT) which aims to support senior policymakers and practitioners in child accident prevention. Their site – www.makingthelink.net contains a fee guide to partnership working in child injury prevention, case studies and the latest policy developments and statistics in this area. CAPT joined forces with Safe Network in early 2011.



NATIONAL REVIEWS & REPORTS

The documents listed below may be of interest. To access them on line click on the title. Alternatively if you contact the SLSCB Business Unit we will email a copy to you. slscb@stockton.gov.uk

- Beds.ac.uk [What's Going On to safeguard children and young people from sexual exploitation?](#)
- DfE [A Child-Centred System. The Governments Response To Munro Review Of Child Protection](#)
- DfE [The protection of children online: a briefing review to identify vulnerable groups](#)
- HMIP [Care of LAC in Custody](#)
- HMIP [Resettlement Provision For Children And Young People.](#)
- Ofsted [Ages of concern: learning lessons from Serious Case Reviews April 2007 - March 2011](#)
- Ofsted [Good Practice by Local Safeguarding Children Boards](#)
- Ofsted [Safeguarding in Schools - Best Practice](#)
- Shelter [Improving Outcomes for Children and Young People in Housing Need](#)
- YJB [Behaviour Management Across the Secure Estate for Children & Young People.](#)
- YJB [Young Peoples Views on Safeguarding in the Secure Estate](#)

MAPPA & LSCB PROTOCOL

The four Local Safeguarding Children Boards in the Tees area; Hartlepool, Middlesbrough, Redcar & Cleveland and Stockton-on-Tees have agreed a working protocol with the Tees MAPPA (Multi-Agency Public Protection Arrangements) that determines the inter-relationship between the statutory boards.

It is a formal agreement reflecting their working relationship.

A copy of the protocol is available at; <http://www.stockton.gov.uk/resources/socialcare/lscb/mappa/lscbmappa.pdf>

STOCKTON LOCAL SAFEGUARDING CHILDREN BOARD PROCEDURES.

Staff in all the agencies working with children and their families in Stockton should refer to the Stockton LSCB Procedures to find out or remind themselves what to do in certain situations.

They are known as:-
[Procedures for Working Together to Safeguard Children in Stockton-on-Tees](#) and can be accessed by clicking on the title link.

Hard copies of the procedures are not available as continuous updating takes place to reflect required changes.

Training is available linked to the procedures, details of which can be obtained from Stockton-on-Tees Borough Council Childrens Workforce Development Team. childrens.workforcedevelopment@stockton.gov.uk

Please share information contained within this Briefing, in particular the lessons learned from reviews, with all staff

On behalf of the Board and Business Unit I would like to take this opportunity to wish you seasonal good wishes and a peaceful new year.

Thank you for all your hard work during 2011.

Colin Morris
SLSCB Chair

*Merry
Christmas*