

ANNUAL REPORT

2020-2021

Essex Safeguarding Children Board



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Foreword

I am delighted to introduce the annual report of Essex Safeguarding Children Board (ESCB) for 2020/21, which covers the first full year of the new multi-agency safeguarding arrangements, which were implemented on 29 September 2019. As 2020 began, the three Statutory Safeguarding Partners (Police, Clinical Commissioning Groups, and the Council's Children's Social Care) were working together to fully implement and deliver their new joint and equal accountability for safeguarding children in Essex. This involved an important period of cultural change, and that joint and equal accountability led to an early decision to move to joint and equal funding of ESCB by the Statutory Partners, in a strong, clear, and confident statement of intent.

The strong relationships and partnership developed were soon exposed to the challenges of COVID-19, and the partnership responded magnificently, putting in place more frequent meetings, initially weekly, to work together, update on temporary service models, and ensure an even stronger spirit of partnership, cooperation, and commitment to ensuring that children and young people are safeguarded as well as possible. Delivering this joint response has without doubt further strengthened the partnership, leaving strong foundations for future joint working.

The partnership has experienced a particular peak in the number of cases requiring a review, and again has responded well. Although there have been some delays as the learning is extracted from these reviews, often for reasons beyond the partnership's control, good progress has been made. One of the priorities for the partnership going forward is to reduce the number of reviews, in order to free up more time to invest in implementing the learning from reviews. This is consistent with the approach taken by the National Panel.

Given the size of Essex, there is a crucial role for the four Stay Safe groups for each quadrant of the county, where local managers ensure effective practice, excellent working relationships, and the implementation of learning from reviews. The operation of the Stay Safe Groups has been reviewed, with new terms of reference, and joint chairing and vice-chairing, at a local level, by the three statutory partners.

Going forward, key priorities for the ESCB are completing existing reviews, implementing the learning, continuing to respond effectively to the challenges presented by COVID-19 and its aftermath, and maintaining and further developing the joint and equal accountability of the three Statutory Partners. The partnership and the safeguarding system across Essex has performed very well during this period, and is in a very strong position to continue to do so.

David Archibald Independent Chair/Facilitator



Introduction

Essex is a two Tier Local Authority with a population of around 1 ½ million people, of which over 310,000 are children.

Essex has lower levels of deprivation than two-thirds of English Local Authorities, but relatively high levels of deprivation when compared to counties across the south-east. It is a county of contrasts, with very wealthy and extremely deprived neighbourhoods; and the number of children living in poverty has doubled since 2015.

Health Services in Essex are provided by the five Clinical Commissioning Groups (CCGs) which are set to become three Integrated Care Systems (ICSs), all three of whom will work across more than one Local Authority area.

Policing services in Essex are provided by Essex Police who work across Southend, Essex and Thurrock (SET).

Children's Social Care is provided by Essex County Council.

Whilst Education is not a mandated Statutory Partner, we firmly see Education as our fourth partner and their involvement in and contribution to all we do is highly valued. We ensure that Education are well represented on the ESCB Executive and all of our Sub-Committees.

Governance

This is the annual Scrutiny Report of the Essex Safeguarding Children Board (ESCB) for 2020/21 and covers the period from April 2020 to September 2021.

COVID-19 has had a significant impact on the work of the ESCB during this 18-month period and will be discussed in more detail later in the report.

Function of the Local Safeguarding Arrangements/ National Requirements

The Essex Safeguarding Children Board is a Local Safeguarding Children Partnership, (LSCP). It was agreed that the new LSCP would maintain the name of the Essex Safeguarding Children Board, although in all other ways it is a LSCP. It was considered that the identity and brand of the ESCB was strong within the community and with partners and that the name should be maintained to provide a smooth transition into the new arrangements.

LSCP's are bound by Statutory Guidance for Partners, from universal services through the provision of preventative and early intervention services, to more complex statutory services. Working Together 2018 (WT 18) details the functions of the LSCP to support and enable local agencies and organisations to work together in a system to safeguard children and promote their welfare (WT 18 Chapter 3, Paragraphs 8-14).

All three of the Statutory Partners have an equal and joint responsibility for the local safeguarding arrangements. Should the lead representative delegate their functions this must be to a senior officer who has responsibility and authority for ensuring full participation whilst the lead representative remains accountable for actions and decisions taken on their behalf. The lead representative or their delegate must also be able to hold their own organisation to account on how effectively they participate and implement local arrangements.

The Essex Safeguarding Children Board (ESCB)

This partnership is firmly built on strong collaborative working relationships for children and young people in Essex and has continued to develop these working relationships further during 2020/21, which has been especially important given the challenges presented by COVID-19.

This collaborative approach extends to working closely with Southend and Thurrock Safeguarding Partnerships as well as others across the Eastern region and nationally. In Essex there are seven organisations who now are jointly responsible by law for the partnership arrangements for keeping children safe:

- Essex County Council
- Essex Police
- Five of the seven Clinical Commissioning Groups covering the county of Essex

They have identified relevant agencies which are legally required to cooperate with <u>local safeguarding arrangements</u>.

Funding Arrangements

The Statutory Partners have agreed a 2-step transition towards funding changes and the overall funding of the ESCB will be split into equal shares of 33% for each of the three partner agencies from next year (22/23). In addition, the ESCB receives small contributions from the Districts and Boroughs, the National Probation Service and previously the Community Rehabilitation Company.

Executive and Sub-Committees

The Board meets quarterly in the form of an Executive at which key agencies are represented. These include:

- Health Clinical Commissioning Groups (CCG)
- Police
- Local Authority

- Education
- National Probation Service**
- Community Rehabilitation Company** (**became one service June 2021)
- District, City and Borough Councils
- Health Providers
- Office of the Police Fire and Crime Commissioner
- Voluntary and Community Sector

The vision of the Essex Safeguarding Children Board is that multi-agency child safeguarding arrangements in Essex are of the highest quality, with the child at their heart; and that practice continuously improves and evolves across all agencies to reflect changing needs and circumstances.

This vision is underpinned in part by the work carried out by the Sub-Committees of the ESCB, which are:

- Child Safeguarding Practice Review
- Learning and Development (joint with Adults Board and Southend, Essex and Thurrock Domestic Abuse Board)
- Performance, Audit and Quality Assurance
- Child Exploitation and Missing

These Sub-Committees each carry out work linked to the ESCB Business Plan. The structure of the Board including its Sub-Committees can be found on the <u>ESCB</u> <u>website</u>. The flow of information to and from the ESCB Executive which illustrates how we develop our business priorities can also be found on the <u>website</u>.

In addition to the Sub-Committees there is a SET-wide working group that coordinates the updates to the Southend, Essex and Thurrock Child Protection Procedures.

Stay Safe Groups play a vital role and sit across each of the four quadrants in Essex, they are made up of a wide range of designated and named professionals or managers with safeguarding responsibilities including 0-19 services, education, acute and primary health providers, local council representatives, voluntary sector and police.

The terms of reference of our local Stay Safe Groups have been reviewed and refreshed and are chaired by Police, Health and the Local Authority. These focus on operational practice and also act as local learning hubs to disseminate learning as required such as sharing lessons from reviews – thereby allowing practice to be developed and embedded locally and improve outcomes. These groups are also a conduit for escalating issues and risk to the Statutory Partners and Executive - there is thus a constant link between strategic planning and operational issues and practice.

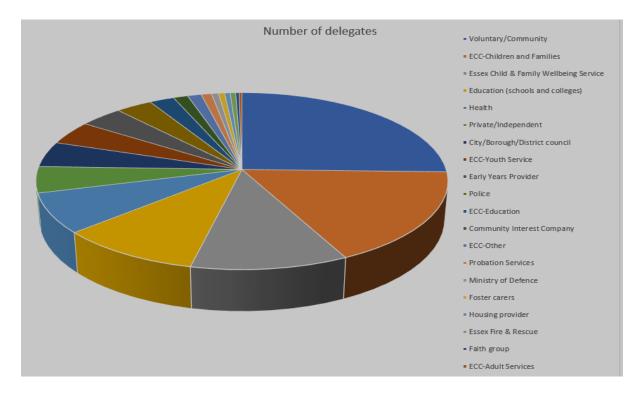
Quarterly meetings are held with the Stay Safe chairs, vice chairs and the Sub-Committee chairs and the Independent Chair/Facilitator and the ESCB Business Manager and Practice Development Manager to identify emerging issues and ensure how work is best shared and tackled across the various groups.

Working Together 2018 sets out in Chapters 31-35 an outline for independent scrutiny. It is tasked with providing assurance in judging the effectiveness of the Multi-Agency Safeguarding Arrangements (MASA) to safeguard and promote the welfare of children and includes the arrangements to identify and review serious child safeguarding cases. Statutory Partners must ensure that scrutiny is objective, acts as a critical friend and promotes reflection to drive continuous improvement. The Independent Scrutineer should consider the effectiveness of arrangements for children and their families as well as practitioners; in addition to how well the Statutory Partners provide strong leadership.

In Essex, we have taken the approach that the Independent Chair can provide independent scrutiny of the safeguarding activities of the Statutory Partnership. Our Chair provides an independent perspective on the effectiveness and impact of our multi-agency safeguarding children partnership. We trust our partnership arrangements to be open and transparent in terms of what works well, what may not work so well and what needs to be developed. Moving forward, we believe that the best scrutiny of our safeguarding activities come from those who receive this intervention, and we want to focus more on what our children and young people and their families tell us about these activities across the partnership. This can be captured from the audit activity that is undertaken both together and within agencies, our safeguarding reviews, feedback activities where we directly ask for views or from the complaints about service, and the compliments that highlight what we do well. We will continue to work across the region and national networks to build on this approach to scrutiny and respond to developments.

Training

The training offered by the ESCB has had a wide reach in terms of agencies who participate and notably community and voluntary sector organisations continue to be the biggest users of our training.



In addition to our own scheduled training, ESCB has received funding from the Violence and Vulnerability Unit to work in partnership with Southend and Thurrock Safeguarding Children Partnerships to deliver a programme of webinars under the theme of child exploitation and a series of courses focused on understanding and working with trauma.

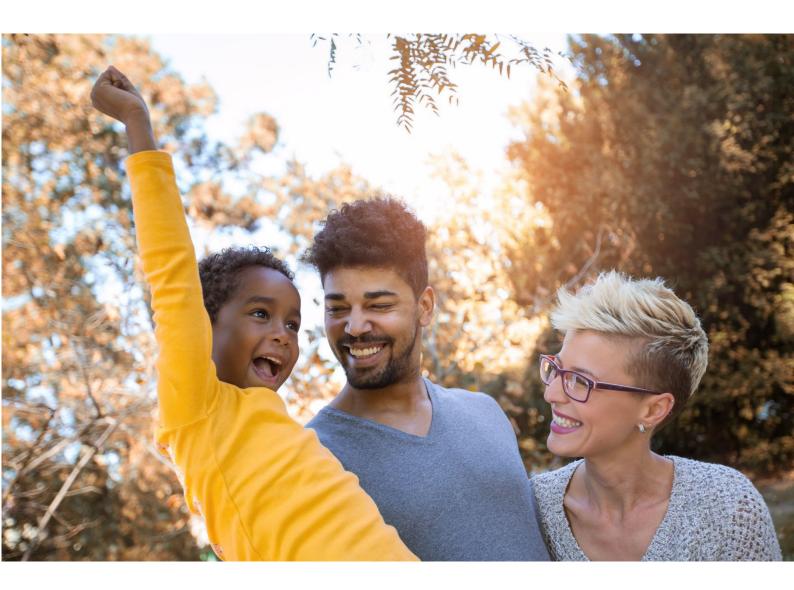
Feedback

Working with Trauma

'I don't think I've ever been on a course where I've learnt something that would have that much impact within such a short space of time. It's going to revolutionise how we chat to our Children and Young People at all levels.'

'The learning from the course is continuing to influence my day-to-day practice when working with trauma - from small pieces of guidance like not saying 'this is not your fault' / asking 'what' instead of 'why' and the rationale behind choice of language to understanding how to approach and discuss trauma and the impact of ACES (Adverse Childhood Experiences)' 'I have used the information provided to update any training packages I am delivering. I have shared the knowledge and information learnt via my team meetings with other staff members. Starting to embed learning into direct contact I have with young people, particularly the style of questions I use.'

Violence and Vulnerability Unit funded webinars on the theme of child exploitation '*Psychology of the offender has influenced the way we now work closer with the whole family using our family liaison worker.*'

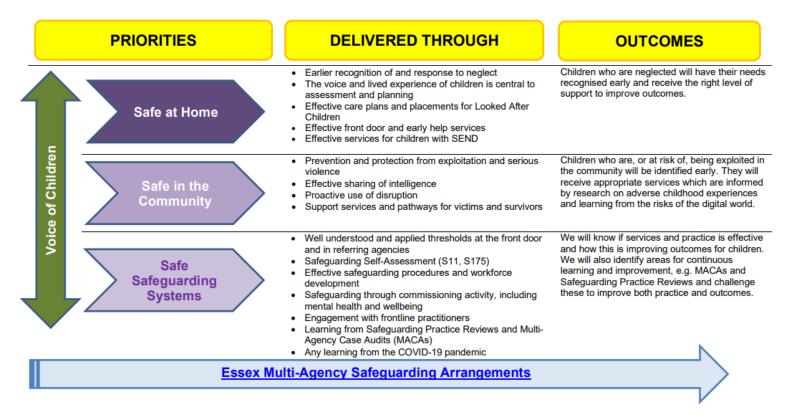


Business Plan

The ESCB has a two year Business Plan in place through to 2022. The identified priorities are that children and young people are **Safe at Home, Safe in the Community,** and there are, **Safe Safeguarding Systems**.

These priorities were set prior to the pandemic, and to varying degrees work targeted at these priorities has been interrupted as services and attention diverted to the pandemic response.

ESCB Business Plan Priorities 2020/22



Priority One – Safe at Home

Neglect is to be the subject of the next Multi-Agency Thematic Audit process to assist the partnership to develop an action plan to address this priority. There is a Neglect Working Group which continues to consider the multi-agency response.

Essex has four Team Around the Family Support Officers (TAFSOs) with a Team Manager. The TAFSOs do not case hold and operate within Level 2 of the Effective Support for Children & Families in Essex guidance. They will support all professionals in their quadrant to work with children and families using a whole family approach. This includes supporting and coaching professionals to act as the Lead Practitioner, facilitate professionals to coordinate a Team Around the Child process and undertake training.

In 2020/21 the TAFSO's have facilitated 418 Team Around the Family meetings (TAFs) which has more than trebled from the previous year. They have continued to coach practitioners in Early Help approaches and again their reach has nearly doubled since last year. The TAFSO's have facilitated 28 workshops, which is almost a third of the workshops delivered last year. They have attended 106 networking events which is almost the same as the previous year.

The reach of the TAFSO's has been broad and they have supported colleagues across all levels as well as acting into support roles with the commissioned domestic abuse services and supporting the Essex Child and Family Wellbeing Service responding to the needs of Essex residents caused by COVID-19.



Case Study

School Nurse was invited to a Team Around the Family (TAF) meeting by School for a 6-year-old child with a moderate developmental delay. The school were confused as how the child presented differed from what the mother had advised them. The School Nurse compiled a health chronology and identified multiple discrepancies in the record, compared to what the mother had told the school. As the case had a perplexing presentation a Professional meeting was arranged by Essex Child and Family Wellbeing Service with GP, Paediatrician, Dietician, Continence Nurse and Designated Nurse.

This meeting concluded that Mother appeared to be exaggerating and misreporting the child's symptoms. The outcome of this meeting was for the paediatrician to meet with the mother and clearly set out the details of the child's health needs. There was also a plan to reiterate this through TAF meetings.

The Mother was challenged in TAF meetings but persisted to exaggerate the child's health needs. To reduce the impact of this continued medicalisation on the child a decision was made (with the mother's full consent) to make a Request For Support.

A Social Worker is now liaising with health professionals and the family with the aim of gaining an understanding of the family dynamics and ultimately create a plan to allow the child to reach her full potential.

Feedback from professionals has been positive:

'The TAF meeting is going ahead tomorrow and feel like having this planning session with you has really upskilled my knowledge. I have already made up the templates you suggested on Who to Call in a crisis. I felt like I was out of my depth but you reassured me that I am offering and coordinating a lot of services for this family.' <u>Paediatric</u> <u>Dietitian, NHS</u>

'I found the session extremely helpful and will help me no end with regards to running my own TAF meetings and supporting my colleagues.' <u>Secondary School Designated Safeguarding Lead</u>

'I have since identified a potential family that would benefit from a Team Around the Family approach. I have emailed mum the flyer about it and awaiting her response at present. If mum would like to proceed I will then contact my local TAFSO. I do not think I would have had the confidence to do so prior to the training.' <u>Anon Professional</u>

Case Study

A six-year-old was subject to a Team Around the Family (TAF) meeting after having never attending school. The mother suggested that the child was highly anxious and felt attending school would increase the child's anxiety. The Child Missing in Education team were involved, but no progress was being made. The School Nurse presented this case to the Early Help Drop in. Within Early Help Drop in, the School Inclusions Team became involved. The TAF meetings are continuing, but there is now a robust multi-agency plan in place to support the mother and facilitate the child attending school with her peers.

Our Special Educational Needs and Disabilities (SEND) inspection in autumn 2019 identified three areas of improvement.

- 1. Over-identification of moderate learning difficulties (MLD) which could mask underlying difficulties in communication and language, or social, emotional and mental health.
- 2. The joint commissioning arrangements between the Local Authority and the Clinical Commissioning Groups (CCGs) did not work well enough to provide children and young people with SEND the services they need.
- 3. Education, Health and Care (EHC) plans do not include the information needed to secure high-quality outcomes for children and young people, and strategic oversight was not effective in making sure that EHC plans were fit for purpose.

Our Joint Written Statement of Action details our collective response to these areas of concern, and Education, Health and Social Care have worked in collaboration with Essex Family Forum (Parent/ Carer Forum) to address each issue. A review of the SEND governance arrangements was undertaken, resulting in new joint governance arrangements to oversee and drive forward SEND improvements across the local area. Workstreams have been established to address the significant areas of improvement, focusing on reviewing our strategies, processes and data relating to SEND in Essex to establish and implement the specific improvements needed.

Moderate Learning Difficulties (MLD)

Root cause analysis has informed training on accurate identification of needs, including speech, language and communication needs (SLCN) which has been rolled out to all schools and settings, as well as education, health and care staff. Alongside this, guidance to record needs on the census return was issued. Countywide data was assessed and schools targeted with further support and intervention from the Local Authority SEND teams where a need was identified. As a result we have realised a significant improvement in the data for MLD and SLCN, showing that Essex is now more in line with the national averages (January 21 census data).

Joint commissioning

A Joint commissioning group was established, and a final draft of the Joint Commissioning Strategy is awaiting signoff. Waiting times for assessment of Autism and Attention deficit hyperactivity disorder (ADHD) have been baselined across the county, with data being used to measure performance. Mapping of need, commissioning, and provision across the three therapy areas (SLCN, Occupational Therapy and Physiotherapy) and engagement with families, schools and other stakeholders has taken place.

The Local Offer website is undergoing extensive redesign and a 12-week discovery phase has been undertaken involving parents, carers, volunteers from local support groups and practitioners from across Education, Health and Social Care. An independent review of the Send Information Advice and Support (SENDIAS) service was delivered and recommendations have been implemented. An understanding of waiting times and trends for pieces of equipment was instigated alongside guidance for families around the process when a child may need equipment.

Improving quality of Education, Health and Care (EHC) Plans

An end-to-end review of EHC processes has been undertaken. Joint decision-making processes with Education, Health, and Social Care have been implemented. New Education, Health and Care Needs Assessment (EHCNA) guidance and criteria has been launched to clarify the purpose of an EHC Plan as well as other forms of additional support. A new quality assurance framework and process is in place. New guidance for supporting children and young people with medical needs in schools has been implemented.

Role of the Emotional Wellbeing & Mental Health (EWMH) Strategic Board – Shared Outcomes

The focus of this Board is to bring Education, Health, Social Care and Public Health together around the theme of Emotional Wellbeing and Mental Health. The Board reports into: the Children's Partnership Board and local boards, Essex Safeguarding Children Board and the Health and Wellbeing Board. It also liaises with the Essex Suicide Prevention Steering Board, Mental Health Partnership Board (South and Mid Sustainability Transformation Partnership), All Age Prevention of Suicide Group, SEND Strategic Governance Group, the Collaborative Commissioning Forum.

The Board worked with stakeholders, including children and young people, to identify and agree these six outcomes. Children and young people in Essex:

- 1. Feel safe (feel safe and be safe)
- 2. Have good self-worth and positive identity
- 3. Are resilient
- 4. Have trusting and positive relationships with adults parent/carer and significant adult in your life (not a professional)
- 5. Have trusting, healthy friendships and relationships with others (friends and peers, professional/education staff)
- 6. Have a connection with their community e.g. education, jobs, support groups, etc.

The work of the EWMH Strategic Board will focus on meeting these outcomes. One of the initial priorities of the EWMH Strategic Board was to develop a common language for emotional wellbeing and mental health. The Board produced new guidance in collaboration with the members of the board, SEND quadrant teams, Association of Secondary Headteacher in Essex and Essex Primary Headteachers Association along with children and young people forums and the Essex Family Forum. There are three versions of this guidance for practitioners, families and young people as well as a poster for young people. All are available to download from the <u>Essex</u> <u>Schools Infolink</u> as well as other resources from the 'Let's Talk' suite.

In September 2021 the EWMH Board launched the <u>new schools Infolink portal</u> for Social, Emotional and Mental Health and is now the 'go-to' place for Social, Emotional and Mental Health (SEMH) resources, advice and guidance for schools, settings and colleges.

Following the publication of the National Child Safeguarding Practice Review Panel's Report in 2020 'Out of Routine: A review of sudden unexpected death in infancy (SUDI) in families where the children are considered at risk of significant harm' it was decided that a local review would be conducted. This was undertaken with the Child Death Overview Panel. 17 cases were identified between December 2017 and September 2020 and audited. Whilst the report is yet to be finalised, the preliminary findings correspond to those in the national report.

Priority Two - Safe in the Community

The Child Exploitation Sub-Committee works closely with the Violence and Vulnerability Partnership. The Memorandum of Understanding for Missing has been relaunched with Care Providers, Missing and Child Exploitation (MACE) 1&2 (the operational and local strategic groups) have been reviewed with changes recommended and risk in the community workshops and exploitation training events have been held. A data subgroup is taking place to consider how best to use data from across the partnership to develop a problem profile which leads to an action plan to measure our impact. A Task & Finish group is meeting to consider various pathways for tackling exploitation across the partnership so we can define our 'Risk in the Community' approach. A partnership strategic online exploitation plan is also being developed with actions to be reviewed at each MACE 2, which aims to target resources where they are needed and raise understanding and skills of the workforce to identify and respond to online exploitation.

Going into 21/22 multi-agency e-learning on exploitation will be launched as well as release of a SET partnership child exploitation pathway tool. A task and finish group to explore improvements in the systems around missing has been agreed and the 'Imagine' pilot in North will help recognise reachable moments in working with girls and young women to help develop practice targeted to interrupt exploitation.

Operation Henderson was rolled out in June 2021 aimed to raise awareness of young people missing and/or vulnerable to exploitation using trains and taxis. This was a collective campaign across SET and included local policing and community safety partners, Youth Service, Social Care, British Transport Police, The Railway Children and Reach Every Generation. Total social media reach was 202,596 and total face to face engagements were 976. Discussions took place with train station staff, businesses local to train stations and taxi drivers as well as passengers. It is hoped that the campaign will be repeated twice next year and there has been interest from London Boroughs to join on a day of action, thus extending the reach even further.

The ESCB has linked with Active Essex and provided a training session for local sport clubs/after school club providers about signs of exploitation and how to report it. Discussions continue about raising awareness via their communication channels and further training events for volunteers, coaches and youth workers.

Violence and Vulnerability funded 'Every Contact Counts' sessions took place in 2021. Community Safety Partnerships allocated places to council workers in the community and it has been identified that exploitation training for those working in the night-time economy appears to be required so sessions planned for early 2022 will be offered to door security staff at nightclubs/pubs, taxi marshals, CCTV operators and call handlers for taxi operators. Investment for Essex Police included the formation of a Child Sexual Exploitation Investigations Team.

Operation Kirn (Makesafe) is a national initiative around educating hoteliers and similar accommodation providers, around recognising the signs of sexual and criminal exploitation. In May 2021, all hotels across SET were contacted and invited to participate in training funded by the Violence and Vulnerability Unit. Upon completion they were given a certificate, signed by a senior Police officer from Essex, to confirm staff have been suitability trained. They can then promote that accreditation on their advertising and display the certificate within their premises. Since May 2021, there has been some testing carried out by local policing teams and the council in Chelmsford and Epping Forest, which will be extended into more areas. There have been some positive results in these areas, however due to the high turnover of staff in hotels, the ESCB has developed a webpage for hotels. This outlines their roles and responsibilities to safeguard young people from exploitation. It includes safeguarding processes to be followed, obligations under the law, how police can respond if they fail in their duty and how to access staff training. The ESCB are working with colleagues in Southend and Thurrock to create a recorded presentation that hotels can use in staff training. Licensing teams have circulated the webpage to hotels and asked them to use this as a guide.

Operation Innerste went live in Sept 2020, it is the national operation developed as a multi-agency response to the complex issues surrounding missing unaccompanied migrant children. The focus is to deal with the children and young people who arrive without documents and to divert them from custody into local care placements. Between October 2020 and January 2021, Essex Police were able to divert 26 young people from custody.

In 2020, Essex Police also developed Operation Bluebird, the Force's response to any suspected incident or investigation into Organised Immigration Crime. Thus, acknowledging the serious and organised crime which lies behind immigration crime, rather than focusing solely on the immigration offences. Operation Bluebird was designed to ensure all available investigative and intelligence opportunities are captured, to ensure victims are safeguarded and suspects brought to justice.

Essex Police have created a dedicated Missing Person Prevention Sergeant post, this was a growth bid and was to fund a post to supervise the already established Missing Person Liaison Officer posts (MPLOs), aiming to improve the consistency of MPLO supervision and enhanced team working through a centralised Missing Person Prevention Team (MPPT), under Crime & Public Protection command. This team will be prevention led, working across our three local authority areas (Southend, Essex and Thurrock).

When a young person in Essex aged over 10 years goes missing from home or care they are offered a 'Missing Chat' from the Involvement Service. In lockdown, these face-to-face meetings were replaced with online discussions, supported by more regular and accessible contact via WhatsApp. Between March and October, responses to this offer increased from 108 in 2019 to 390 in 2020, while Parental Missing Chats increased from 202 to 329, despite the overall number of missing episodes actually going down. The more regular and accessible communication technology made the service more reachable to young people, resulting in more frequent communication, and these technologies will continue to be used even as face-to-face meetings are able to resume. All young people were sent activity and wellbeing packs, while mental health concerns that did emerge were more quickly identified and referred to partner agencies.

In 2020 the Youth Offending Service (YOS) completed a project known as 'Lived Experiences' involving the stories of 10 young people exposed to Child Criminal Exploitation and this captured a great deal of rich information about how young people felt professionals supported them (or not) and how well both families and professionals understood their thoughts, feelings and risks.

The stories were translated into four animations which are the basis of the online learning sessions that the YOS provides. The learning has been shared across the Eastern Region and targeted training is scheduled to commence in 2022.

This is an <u>explanatory video</u> of the work undertaken and some of the key messages.

In February 2021 Essex became aware of the Everyone's Invited website and the national and local campaigns that highlighted the prevalence of Harmful Sexual Behaviours and sexualised behaviours within education settings.

Essex Police organised a multi-agency forum to agree a joint strategic and operational approach during the Summer Term 2021. A clear referral pathway was created within existing systems to ensure that all partners knew where referrals should be directed. No formal referrals have been received by Essex Police and Operation Hydrant (the national response) have stopped reviewing the Everyone's Invited website. This recognises that it is up to victims to decide if they wish to report offences.

A variety of materials have been made available to education settings already via a dedicated section on the subject of Harmful Sexual Behaviour and sexualised behaviour on the Essex Schools Infolink. A Harmful Sexual Behaviour Guidance is expected for April 2022 as is a Common Language Framework and resources to support settings in Relationships, Sex and Health Education (RSHE) curriculum delivery which has been co-produced with the Essex Child and Family Wellbeing Service and Public Health.

The Head of Education Safeguarding and Wellbeing has communicated with schools on the outcomes of the National Safeguarding Review and the Essex County Council response in a range of ways, attending Secondary Schools Behaviour and Attendance Partnerships to brief schools, via the termly education setting safeguarding forums and also through other forums and written briefings. In addition, a whole day of training for secondary schools was held in June 2021 and contributors included Police, Children's Social Care and Youth Offending Service. Further training for primary schools, secondaries, and school governors will be offered in summer 2022. A guidance document on harmful sexual behaviour and a range of accompanying resources will be launched in the summer term 2022 and these will be highlighted at the safeguarding forums and by other means.

The Head of Education Safeguarding and Wellbeing has joined the Sexual Abuse Strategic Partnership Board to provide the link back into education settings. Trauma Perceptive Practice (TPP) is the Essex schools approach to understanding behaviour and supporting emotional wellbeing. All schools/settings are encouraged to become trauma perceptive in their practice and this programme has been developed for Essex practitioners by Essex practitioners to ensure that all settings hold a shared understanding of behaviour and know how best to respond when children and young people are faced with additional challenges.

The Trauma Perceptive Practice values are:

- Compassion and kindness instead of blame and shame
- Hope instead of hopelessness
- Connection and belonging rather than disconnection

There are already 300 settings which have started the training, with just under 50 others who have signed up for it. There has been such enthusiasm for the TPP approach from partners across Essex that we have also widened the TPP training offer further. This includes TPP now being embedded in Healthy Schools accreditation thanks to collaboration with the Essex Child and Family Wellbeing Service. They have also enabled a group of staff in their service to become trainers in TPP, who will be training their entire workforce and be able to support schools and settings with their healthy schools and TPP journey. TPP is now also offered as part of the Essex Teacher Training programme. An alternative version for families is currently in a pilot phase and two annual conferences have been held with over 200 attendees at each.

A series of awareness sessions has been delivered to share the main principles and values of TPP, as well as abridged TPP training sessions which are open to all service partners across education, health, social care and any interested partners within the community. This wider interest and enthusiasm is enabling a TPP cultural shift to be

embedded across the system, including aligning the common language, policy updates and best practice.

Through TPP, the 'KASH' Framework, a reflective tool to enable change in Knowledge, Attitudes, Skills and Habits has been introduced. While it can be difficult to measure the impact of TPP in isolation, the changes in the attitudes and habits of the workforce demonstrate some impact.

Social, Emotional and Mental Health (SEMH) Portal for Schools, Colleges and Settings – <u>SEMH Training</u> on Schools Infolink.

This is a huge commitment from education as we realise this is a change of culture and has seen a huge uptake for the training. This approach complements the training in other agencies and the across the Statutory Partners in Essex to develop a trauma informed workforce.

The Essex Youth Service continued to deliver a significant range of services to young people during the pandemic. The 'Good Man' and 'Sisters in Strength' mentoring programme for boys/young men and girls/young women providing education around the characteristics of healthy and unhealthy relationships saw a move to online sessions in lockdown. This proved popular, particularly to those whose anxiety made it difficult to attend in person, and waiting lists reduced from 3-4 months before lockdown to 1-2 months.

Youth workers based at Basildon A&E hospital working with vulnerable children (those with poor mental health, victims or perpetrators of violence and those with anxiety about being in hospital) provided an on-call and referral service to A&E during lockdown and kept in regular contact with young people through weekly online sessions, returning to shifts within the hospital from July 2020.

In August 2020, coinciding with children returning to school after lockdown, the Essex Safeguarding Children Board ran a week-long campaign around online child exploitation, with podcasts and videos promoted across social media platforms, a BBC Essex radio interview recorded by Essex Police and a livestream training event reaching over 100,000 people.

The ESCB have run an online safety campaign four times per year. This now includes Facebook live events whereby parents can ask any question of local experts. The events include evenings with 'The 2 Johns' and Brook (who develop school PSHE materials). We have developed a large library of up to date and useful resources, including podcasts by local experts from across the partnership, such as 'how to talk to your child about consent'. These are always accessible on the ESCB webpage. The campaign reach has been growing, in July 2021 it reached 326,546. Increasing online exploitation and low workforce confidence in identifying and responding to this has been a theme in the updated COVID-19 study. In response to this, there will be a SET workshop in February 2022 with 'The 2 Johns' and a working group is being formed to develop a partnership 'Thinking Tool' to guide professionals on how to identify and respond to online exploitation, which is part of the strategic plan.

DIDN'TKNOW!

When using social networking sites:

- there are a lot of fake accounts
- people can screenshot and share photos and videos without permission.

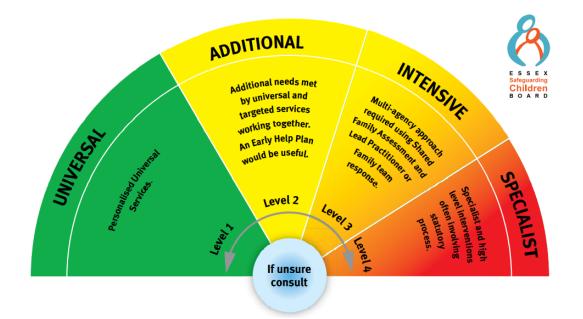






Priority Three - Safe Safeguarding Systems

The Essex Effective Support Windscreen



In Essex we have four levels of need for children: Universal, Additional, Intensive and Specialist. Services for children with additional and intensive needs are sometimes known as targeted services, such as behaviour support, additional help with learning in school, extra support to parents in early years or targeted help to involve young people through youth services. Children with additional needs are best supported by those who already work with them, such as Family Hubs or schools, organising additional support with local partners as needed. Our Team Around the Family Support Officers (TAFSO) and Family Solutions sit within the Targeted Services offer and Children's Social Care and Youth Offending Services delivers under Intensive Needs.

In 2020/21 the TAFSO's have facilitated 418 Team Around the Family meetings which has more than trebled from the previous year. They have continued to coach practitioners in early help approaches and again their reach has nearly doubled since last year. The TAFSO's have facilitated 28 workshops, which is almost a third of the workshops delivered last year. They have attended 106 networking events which almost the same as the previous year.

The demand on services at Tier 3 and 4 have changed during the first 12 months of the pandemic, so it is perhaps too soon to note if there are any trend changes within need.

Requests into the service were up by nearly 10% on the previous year, but a smaller percentage of these requests were progressed to contacts and then referrals than the previous year.

When work was progressed into the Child Protection Pathway however, of those children and young people who were heard at an Initial Child Protection Conference there was an increase in those progressed and made subject of a Protection Plan from the previous year. This might be a reflection of the comments that all agencies are making about the number of more complex families they are working with and the higher needs of these families.

Overall children who were subject of Child Protection Plans had reduced at the end of 2020/21 from 626 to 611 from the year before; 99.6% of our child protection conferences were held in timescale and 11.6% of children with a protection plan had had an earlier child protection plan within the previous 2 years. Essex have remained below the national average for children subject of a child protection plan for 2 years or more. Essex continues to maintain the second lowest numbers of children subject to child protection plans per 10,000 in the eastern region.

Of the nine Child Safeguarding Practice Reviews currently open, one child was subject of a protection plan and one child was about to progress for consideration of a child protection plan. We believe that this demonstrates that known, suspected and/or understood risk to children is managed well by the partners and that the right children are in the right part of the service.

Children who were looked after had increased slightly by the end of 2020/21 from 1071 to 1082 from the year before. By the end of 2020/21,100 or just under 10% of our Children in Care cohort was made up of unaccompanied asylum-seeking children.

In 2020/21 referrals into the Children's Workforce Allegations Team were reduced by 24% from the previous year, this was expected given the impact of COVID-19. 30% of referrals are categorised as allegations and 18% of these referrals concerns allegations of historical abuse and this is similar to previous years. 29% of our allegations concern children who are looked after which again is not unexpected when the effect of COVID-19 is factored in and care settings are the most referred setting. The highest outcome for Allegations is Substantiated (16%).

The team have begun to review the performance indictors they have previously been using and into the later part of this reporting period are looking more closely at those settings who do not make or feature in referrals, collating more quality assurance information where they have challenged professionals and starting to look at the 'Top 10' settings i.e. education, residentials and nurseries. This is enabling the team to liaise more with other teams and provide feedback and highlight where additional work, support or development may be needed within the workforce. This has led to the some working groups being set up to address problems arising.

The Education Safeguarding team has continued to provide regular (at least termly) safeguarding briefings to all schools (including independent) and other education settings. The termly safeguarding forums are regularly attended by over 400 settings each term. They moved online this year and have continued to be well attended.

The Education Safeguarding Team held the first Early Years Safeguarding Forum online in October 2020. 180 settings were able to attend and these will continue termly. The team also now provides an early years termly safeguarding briefing and other materials and resources to support settings with their safeguarding arrangements. This includes the safeguarding audit, model child protection policies and templates for reporting and recording concerns.

Child Death Reviews

Whilst the function of Child Death Review has moved away from the ESCB, this remains an important pathway of safeguarding activity that partners contribute to. There have been 98 child deaths reviews completed through the Child Death Overview Panel in 2020/21. Just over 60% of these children had no recorded modifiable factors identified and just under 40% did. A modifiable factor is not necessarily an indication of abuse or neglect but rather a factor that is a known risk to the mortality of children. This could include for example an acute medical or surgical condition, infection, deliberate self-harm or a deliberately inflicted injury.

Audit Activity

Multi-Agency Audits are organised into two categories; Multi-Agency 'Single' Case Audits (MACAs), and Multi-Agency Thematic Audits (MATAs), which draw upon the learning from a larger number of case examples with a common thematic practice element. MACA's were interrupted by COVID-19 and the programme was paused.

MATA's has proved to lend themselves to a wider impact and strategic approach. MACA's offer best value when there are unusual/unique sets of circumstances that warrant that deep dive and space for shared thinking and problem solving as a localised approach.

In October 2020, A MATA commenced regarding 'Working with Parental/ Adult Mental Health, this was an Essex wide audit looking at eight cases. 13 Agency Overview of Findings Reports were produced. 71 professionals attended from 18 agencies between both MATA findings meetings in October and January 2021. These meetings developed the Multi-Agency Cross Cutting Practice themes which have in turn informed a Draft Plan of Service Development Aspirations which is being progressed.

Working with other Boards

The ESCB works closely with other Boards - across SET, the eastern region and nationally. This is essential in order to avoid duplication of work, build on the joint understanding of cross cutting themes and ensure consistent messaging to our workforce.

In Essex the ESCB works with the Children's Partnership, Health and Wellbeing Board and the SET Violence and Vulnerability Unit, SET Domestic Abuse Board and the Adults Board (ESAB). We have joint work in place such as learning from reviews workshops bringing together key cross cutting themes to multi agency practitioners, child exploitation campaigns and joint webinars as well as a joint learning and development sub-committee formed of the Children, Adult and Domestic Abuse Boards. Measuring the impact of such work is still being monitored and work on avoiding duplication with other Boards is underway.

We also work closely with the neighbouring partnerships of Southend and Thurrock, as well as on joint initiatives across the multi-agency partnerships of the eastern region. Work strands within SET include the SET child protection procedures, CE and missing work and joint initiatives around learning from reviews. Links are also made with head teacher forums and the Health Executive forum via representatives of the ESCB Executive who sit on these groups.

These working relationships are set out in the flow chart and structure of the ESCB.

The ESCB statutory partners hold regular meetings, and they exercise clear strategic leadership in these meetings, while working very closely with the broader Executive.

Statutory partner meetings were set up across Southend Essex and Thurrock initially weekly in 2020 in response to COVID-19 in order to monitor the effectiveness of the safeguarding system. These built on existing SET (Southend, Essex and Thurrock) partnerships, and these meetings allowed partners to share information and coordinate actions as required – these included encouraging people to still attend hospital appointments and A&E in case of an emergency, learning from each other and reviewing any patterns such as neglect or child deaths. This coordinated action and sharing of information has been helpful in formulating responses to emerging risks. Attendance at school, mental wellbeing, supporting families and neglect are key themes emerging from these meetings, as well as the ongoing challenge of engaging with families via a mix of virtual and face to face meetings. Additionally, these meetings have also discussed the impact on staff both in terms of absence from the workplace but also on emotional health and wellbeing. These meetings now take place monthly.

The ESCB has agreed a programme of joint work with the Essex Safeguarding Adults Board (ESAB) in relation to 'Think Family' and Transitional Safeguarding.

Safeguarding Reviews

At the end of financial year 2019/20 there were seven reviews ongoing as agreed by the Serious Case Review/ Child Safeguarding Practice Review (SCR/ CSPR Sub-Committee.)

Since the change from Serious Case Reviews to Child Safeguarding Practice Reviews, the ESCB has been trialling a number of different formats and methodology to see what works best, the methodology is decided based on the needs of each individual case. At that stage not all reviews would have been classed as a CSPR, subsequent advice from the National Panel that any review of a case decided following the Rapid Review should be a Local CSPR is now in place.

The ESCB Child Safeguarding Practice Review Sub-Committee reviewed processes to ensure that they are also reflective of a partnership approach. All new CSPR referrals are initially considered and triaged by representatives from the three Statutory Partners to ensure they meet the criteria to progress to a Rapid Review.

One of the critical themes that has emerged from reviews is 'Think Family'. This concept is not as well embedded in Essex as we want it to be and a multi-agency piece of work has been started to begin to address this. This is being jointly undertaken with adult services and the partnership. We are working towards an inaugural Practitioner Summit involving first line managers and above to begin to develop ideas that will enable us to embed Think Family within existing agency structures by widening thinking, curiosity and changes in culture to improve communication and collaboration and break down barriers that prevent this happening.

Other themes which have emerged from these reviews have included:

- The sharing of information
- Notification to professionals of outcomes of assessments
- Lack of understanding of the expectations of 'others' roles and responsibilities
- That barriers that exist which prevent change being effective need to be addressed to make effective changes
- Reflective supervision to explore knowns and unknowns in a supported way to increase curiosity and understand risks
- Assessments of risks not being sufficiently explored or understood

There has been an increase in the number of children and young people being referred to the CSPR Sub-Committee for consideration for review during 2020/21 and this

increase in requests and subsequent CSPR's may now be slowing. The Business Manager will continue to monitor workloads and resources to ensure that quality of provision is maintained.

Work has started with the Statutory Partners to review our CSPR work to determine what has worked best and this will form the basis of a review and update of our guidance.

Learning from Reviews

This is a critical area of work for the ESCB which the partnership is continuing to develop. The partnership is also involved with regional and national initiatives around this via the Eastern Region Chairs and Business Managers group and also the National Association of Safeguarding Partners.

Some of the initiatives include:

- The ESCB is working on a new refreshed learning from reviews process this will focus on agencies providing evidence of the impact of learning from reviews as opposed to simply responding to what has been done to implement recommendations. This evidence of impact on practice will be quality assured by a multi-agency steering group formed of representatives from the statutory partners. This work will continue in 2021 to further strengthen the embedding of learning.
- Building on previous work, a working group of the Boards across adults, children and domestic abuse came together and produced a Podcast on the theme of Think Family to be released in October 2021.
- Looking at themes nationally, regionally and being involved in the development of initiatives to further share learning such as joint multi agency webinars and workshops.
- Work continues to assist agencies in sharing learning this includes via multi agency workshops and briefings. These activities are evaluated and the responsibilities of each agency to disseminate learning are clearly set out.
- The Section 11 and Section 175 audits (safeguarding audits for the partnership and education) are taking place in 2021; the S11 Audit was distributed at the end of June 2021 and the S175 Audit will commence after the autumn halfterm. Once the findings are analysed this will also enable the partnership to further monitor the impact of learning arising from reviews.
- In Autumn 2020, we began to look at new ways of gathering evidence of the impact of the learning from reviews from agencies. This replaced the previous actions plans which were sent out after each review.

• Workshops have been delivered to practitioners via the ESCB and within Children's Social Care regarding what to expect if involved in a CSPR. This has led to a video and presentation also being available on our website.

All of this work will continue in 2021/22 to ensure that agencies are taking forward the learning and recommendations from reviews and that they can evidence these changes.



COVID-19

This 18-month period has been a time like no other in history. It is impossible to overestimate the impact which the COVID-19 pandemic has had on children and young people, their families, communities, services and on staff. It has been the dominant factor of 2020 and 2021 and continues to be so as the effect of the Pandemic continues. Services have not all yet been able to re-establish business as usual operations or implement fully plans for recovery back into their usual working 'space'. It is important that we take this into account when scrutinising progress. Some services have reduced as funding has been squeezed in the not for profit/ voluntary sector and services are yet to understand the medium and long-term implications of COVID-19.

It is a testament to the courage and tenacity of the public, professional agencies and voluntary sectors regarding the speed and efficiency with which they responded to the challenge and the increased cooperation between agencies. It must also be acknowledged that as well as the heroic efforts of staff across the Local Safeguarding Children Partnership, staff wellbeing has been seriously affected. Staff are weary and for many, traumatised directly or vicariously by their experiences. Many of our staff are grieving for lost loved ones as well as supporting others who are also grieving.

The ESCB thanks all the staff and volunteers working across Essex for their hard work, diligence, and fortitude.

Impact of COVID-19

All agencies have reported that COVID-19 has had an immediate impact on requests for services with most seeing requests reduce during periods of lockdown and increase when restrictions are eased. Many partners are reflecting that the cases being referred were more complex and so pressure increased in the system in the greater support needs of these children and families. These complex presentations were heightened by COVID-19 anxiety, including mental health, substance misuse, return to school anxiety, domestic abuse, and online safety.

Throughout the pandemic, the lockdowns and the restrictions placed on everyday life and activities has reduced professional contact with children and their families. Professionals have been concerned about several potential risks that the pandemic may exacerbate for vulnerable children and families:

- Increased stress on family life, more conflict, increase in domestic abuse or neglect
- Reduction in referrals as children in less contact with professionals and abuse and harm going unseen/ unheard
- The mental and emotional health and wellbeing of children and young people and reduced access to support services

- Anxiety and depression increasing for children and young people caused by the pandemic, fear of contracting or passing on COVID-19
- Worsening mental ill health or emotional health for parents' and their children's experiences of this; increase in young carer responsibilities, more exposure to abuse and neglect
- Low take up of school places for vulnerable children
- Poverty, increased pressure on incomes already overstretched making it difficult to access food and hygiene products.

At the onset of the pandemic, Children's Social Care applied priority rating (RAG system) to open cases to ensure availability to respond to the highest/ most risky situations. Level of concern guided the level of response and oversight. Some visits changed to virtual formats, some visits were conducted outside and doorstep visits were completed. Most meetings initially changed to virtual formats and later hybrid meetings were offered which were more tailored to the needs of the family whilst still being unable to bring all professionals physically together. All group work was initially put on hold.

Some families were anxious about meeting with workers and asked not to be visited in person, this was particularly and noticeably seen for those parents of children with complex disability and additional health needs, with high levels of families shielding.

It is also likely that some families used the opportunity to keep professionals at a distance and away from their homes which reduced access to their children. To counter some of these anxieties and attempts to avoid workers Children's Social Care supported families through delivering care and activity packages, 'Boredom boxes', being involved in the roll out of digital equipment funded by government and supporting the delivery of essential support provided through the Essex Wellbeing Service.

There was a marked increase in members of the public referring to local services (up by 57.3%). This dramatic rise could have been attributable to a number of factors; as the community offer reduced or was less accessible or that the uplift in community spirit that saw communities coming together to support each other made families more visible to members of the public. And finally, the periods of lockdown and restrictions saw more people aggrieved when others did not follow the rules and saw an increase in reports of anti-social behaviour to the police and could have had the effect of motivating people to contact local services.

It became more difficult for some support services to operate within the pandemic including intervention and behaviour change work. This reduced the practical support available to families, in addition not all families have found it easy to work with professionals using virtual/ digital formats.

Entries to Family Solutions increased during the pandemic and it is believed that a 'new' cohort of families were being seen, i.e. those who would generally cope were affected by increasing stress factors worsened by the pandemic and this exacerbation led to requests for support.

Some providers also placed restrictions on face-to-face access to children, including some children's homes and young offender institutes. Foster carers experienced anxiety in having professionals in their home during the initial stages of the lockdown as well as concerns that children would be exposed to COVID-19 during Family Time. Agencies have responded by hosting a variety of events and information sharing forums in which some of these anxieties can be addressed and fears allayed. Essex County Council has worked closely with local representatives of Public Health England to ensure that messaging is accurate and consistent.

There has been a follow up study about the impact of COVID-19 on child exploitation and missing. This has reflected on the last 18 months of COVID-19 restrictions and the impact on children, families, service delivery and the workforce. In particular it has highlighted that exploitation methods have adapted because of COVID-19, online exploitation and exploitation within private residential addresses has increased, which has made exploitation harder to detect. Also, increased push/pull factors for young people impacted by COVID-19 means a larger volume of young people are vulnerable to being targeted for exploitation than before. It has also been shared that partners are experiencing long waiting lists for services and workforce exhaustion. However, this period has seen a rapid change in the use of technology which means there is more choice on engagement methods for children and families, in some situations the reach has increased, however communication through technology could be barrier to meaningful interactions and can give the wrong messages to young people about being safe online.

Fluctuations of crimes involving children and young people both as perpetrators and victims have largely followed the patterns of lockdowns, less crimes being noted during periods of lockdown.

This trend is also evident for cases of physical abuse where the investigation sat within the Child Abuse Investigation Team. Given that crimes held in this team involve family members, it was unclear why these trends followed the same patterns, as this group was less likely affected by the lack of opportunity that lockdown presented.

The need to use powers of police protection did however not change during periods of lockdown and locally we saw an increased need during periods of lockdown for police to exercise Section 136 (Police emergency powers to take someone from a public space to a place of safety based on concerns for the person's mental ill health as per

the Mental Health Act) for children and young people, indicating that children and young people were more likely to have a mental ill health crisis during periods of greater restriction.

There was some concern in the partnership community that domestic abuse would increase within the population as families had to spend more time together in pressurised conditions. The reported incidents do not reflect this. However, this may be that incidents have gone unreported as suspects have been home more and victims have been unable to call for assistance and alert their perpetrator to their actions to seek help. Patterns of reported domestic abuse usually experience a seasonal uplift in the summer and so there was no real discernible pattern related to COVID-19.

Attendances by children to Emergency Departments significantly dropped in March 2020 and at year end they also had not fully recovered to the pre-pandemic levels. In part this may be due to reduced contraction of ordinary disease in the population caused by better hygiene and social distancing and reduced physical activities leading to less injury but the biggest barrier was likely to be anxiety about entering the health system and exposure to COVID-19. The lack of recovery to pre-pandemic levels could be an indication of behaviour change within the population as they became more used to using non-emergency alternatives and an increased sense of value and need to protect the NHS. This does not remove the concern that children who might need emergency treatment may still not be presented via hospitals.

The partnership has been concerned about children and young people's emotional and mental health due to the pandemic. In the community, the Emotional Wellbeing and Mental Health Service provides the Child and Adolescent Mental Health Service Tier 3 service. In 2020/21 they saw a 15% reduction in referrals into the service and most notably these reductions have occurred during periods of lockdowns but at other times in the year seasonal fluctuations have been similar to the previous year. This is in contrast to the information from Police about the use of S136 but these are small numbers to draw any conclusions on. Despite the reduction in referrals, care contacts being made to young people have increased by nearly 4% showing that the need to 'touch in' with children and young people receiving services has been higher.

Case Study

A 17-year-old looked after young person was placed by Essex in another area, due to requiring a specialist residential provision. The young person had previous longterm Tier 4 Mental Health inpatient admissions. The Young Person was at high risk of placement breakdown due to escalation in risk taking behaviours, risk to self and others. The specialist residential provision gave notice due to concerns of 'death by misadventure'. Health professionals escalated their concerns and director conversations took place, however, access to mental health support was unsuccessful; a care coordinator was also not allocated. The Young Person is now supported in semi-independent accommodation out of area. Planning conversations were undertaken prior to this move to ensure the new area were fully aware of their complex needs and support they required. There has been frequent, informative, and purposeful contact between professionals. At times there has been intensive multiagency work in the form of twice weekly escalation calls over several months, involving senior health and social care representatives, looked after child health team both from originating area and in the placement area, transforming care team, CCG colleagues, Child and Adolescent Mental Health Service (CAMHS), placement team and staff from the placement.

There has been excellent communication between the multidisciplinary network in addition to the agreed professionals' meetings meaning that everyone could respond swiftly to any escalating concerns and increase support as required, ensuring robust safety planning in place. The Young Person has become more settled and a smaller professional network are now focused on transition planning post 18. Several assessments (including Autism Spectrum Disorder, sensory and Speech and Language Therapy) have been requested and commissioned to ensure we have as much information as possible about ongoing need so the right placement can be found post 18, as this Young Person will require long term support into adulthood. Currently comprehensive mental health support is in place from local CAMHS team, which is enabling support to the Young Person, together with review of their positive behaviour plan by the multiagency network. Placement requested supervision for staff so via the multiagency network it was agreed this could be provided by ECC mental health coordinator to protect and maintain the placement.

Extensive work has been undertaken by the multidisciplinary network which to date has prevented further Tier 4 admission. There has been a strong commitment from all the professionals involved to attend these regular meetings ensuring the best Through the work of the Child Death Review Team, some indirect factors have been identified which may have had an impact during this year:

- Late presentations to hospitals due to fear of COVID-19 or a desire to protect the NHS
- Voice of the child has been missing due to a lack of face-to-face consultations
- One young person who killed themselves was noted to be significantly affected by the impact of COVID-19 i.e. lack of structure, routines and contact with friends
- Organisations themselves not being clear what was being offered and no faceto-face reviews being undertaken.

Essex Child and Family Wellbeing Service (ECFWS) has seen consistent levels of demand on services to pre-COVID-19 levels, however the nature and complexity of needs coupled with the pressures on affiliated services has meant that staff are feeling stretched and tired, particularly given the psychological nature of the work they are doing.

This may indicate or reflect that families held-on and put-off seeking help or were selfsufficient during the preceding periods of lockdown, or that simply their vulnerabilities went unseen and unmet.

In short, complex need within vulnerable families should be expected to increase over the coming months and years and services must work in a joined-up way to maximise the impact they have and to maintain resilience.

It was noticed that in the initial months of the lockdown Child Protection plans throughput was reduced. This was when some agencies reduced face-to-face activity and behaviour change work was not possible. Visits were conducted in different ways with perhaps less ability to undertake direct work. This created some drift in progression for many cases and contributed to an initial rise in children subject to a Child Protection Plan.

Response to COVID-19

The challenge of COVID-19 required strong leadership and a multi-agency response, which we can evidence at various levels within the body of this report. Local responses included:

- Weekly meetings with statutory SET partners
- ESCB Coronavirus webpage
- Lockdown campaigns (safer sleeping, accidents in the home, online child exploitation)
- The Essex Wellbeing Service that addressed needs within the community for vulnerable residents and family including those who were shielding

• Promoting use of A&E

Services have had to adapt in how they have operated during COVID-19 to ensure that they can continue to engage in safeguarding activities. Some examples include:

- Measures put in place by front-line social care, police and health services including use of PPE during visits and risk assessments as well as virtual methods to see and meet with children and young people and their families
- Online engagement from Involvement service (e.g. annual It's My Life event)
- Online engagement from Essex Council for Voluntary Youth Services (ECVYS)
- Response from schools to partially open to the children of key workers and vulnerable children. There has been huge engagement from schools to stay in touch with those children who have stayed at home during the various lockdowns and restrictions
- Some clinics and health appointments moving to a telephone or online platform

Case Study

A 4-week-old baby lives alone with her mother. The mother has had her previous children removed by Social Care due to maternal mental health. In this pregnancy Social Care undertook a pre-birth assessment and decided there was no need for Child in Need or Child Protection Plans at that time. There was domestic abuse towards the mother from the baby's father. The Health Visitor referred the mother on to Compass and the Peri Natal Mental Health Team. Compass provided the support of an Independent Domestic Violence Advisor, who went on to support the mother to move to a new location. The Perinatal Mental Health team were able to support the mother with a change of medication that kept her mental health stable and did not impact on the care of her baby. The GP continues to support the mother's long term mental health condition. The Independent Domestic Violence Advisor has supported an application for a non-

In response the dramatic drop in children being presented through Emergency Departments at the beginning of the pandemic, significant work was undertaken across the partnership to publicise that hospitals and GP practices were open as usual. The Royal College Paediatrics & Child Health published traffic light e-posters for parents and carers and for young people to recognise signs of illness and deterioration. The poster for young people included a section on mental health.

Family Solutions (FS) have worked throughout the pandemic, families knew that they could contact their Family Worker and they would support them to keep safe at all times, this was particularly important at a time where many agencies were not available. FS worked together with foodbanks to ensure that all children had

emergency food and provisions delivered and stronger links were built with many voluntary sector agencies. Family Solutions also adapted to delivering programmes in virtual forums. There were successful parenting programmes delivered including Triple P, Non Violence Resistance and Piecing it Together.

At the start of the pandemic Child Protection Conferences were initially held in a virtual format; after some restrictions were lifted the team set up Hybrid conferences which included the family, the allocated social worker and the Child Protection Coordinator, other professionals joined virtually. These were seen as beneficial for parents to be in a safe space and with support.

During periods of lockdown schools remained open and available to vulnerable children. Schools worked incredibly hard with other partners to risk assess their pupils and provide a system of welfare checks for children not attending on site to keep them as safe as possible during their time out of school. As well as providing an education offer for pupils not attending, schools also provided a raft of support to children and families to address concerns at an early stage and signpost to appropriate services for support on a range of issues.

This meant schools needed to adapt to change and create a 'new normal'. For schools/settings this can be a challenge. Because of this, the Emotional Health and Wellbeing Board supported by creating a range of COVID-19 related guidance and resources with support from the Essex workforce, local schools/settings and children and young people. These aim to support the Recovery and Return for school staff, children and young people back to their Education Settings. The <u>pre-recorded</u> <u>webinars</u> were seen as particularly useful have been watched thousands of times.

To ensure that children in care felt supported and heard in the initial lockdown, there was regular contact with daily or weekly text, telephone or video calls as well as some distanced visiting. Activity sessions were carried out on Zoom (e.g. sessions on learning new skills) and individual 'boredom boxes' were delivered, containing activities to do at home as well as supportive information. Consultations with young people helped to identify how they were feeling and what services they needed to help get through the lockdown. Key messages from this research was used to produce a series of videos with quotes from young people sharing their experience of lockdown, which were published on the Children in Care Council website.

Lockdown Learning Thoughts and Feelings

Young people of the Children in Care Council (CICC) <u>talk about lockdown</u> and what advice they would give other young people.

These measures received very positive feedback from young people, who reported that they felt cared for during lockdown thanks to the regular communication and

range of activities. This helped to alleviate boredom and anxiety, while more joined-up work with internal and external partners helped to signpost young people to additional support (such as mental health services) more quickly. The more innovative use of different technologies helped make services feel more accessible, which will be continued post COVID-19 alongside more traditional practices. The combination of different needs and more regular contact meant that young people were able to help shape what support was offered as lockdowns progressed, making services more responsive to their needs.

A similar range of services and activities were offered for care leavers as well as the provision of food parcels and takeaway deliveries to ensure sufficient access to food, and greater support for addressing concerns around finances, housing and health. After six weeks of lockdown, the Involvement Service conducted a quick research project with care leavers to evaluate support provided in lockdown and identify any gaps in provision. This found that most young people had felt supported, with regular contact and quick access to support being identified as particularly important.

Some things that young people had found difficult were: being stuck inside, not seeing family or friends and seeing a rise in anxiety, particularly those who are themselves parents of young children. From this, greater support for young parents was provided with parental support groups set up, and an emphasis placed on ensuring better access to mental health services. The key findings from this were published in a lockdown newsletter produced by the Children in Care Council, written by and for care leavers. This also featured suggestions of things to do in lockdown and contact details for anyone who felt they needed additional support.

The Essex Youth Service also did additional work during lockdown, with over 30,000 email and telephone welfare checks conducted with young people between April and July, as well as over 2,000 online or remote youth sessions attended by over 6,000 young people. As a result of these welfare checks, they made nearly 700 referrals to other agencies. The service also took steps to help better safeguard young people during lockdown, working in partnership with the police in operations where large groups of the community had been gathering, and supporting young person's officers to visit young people in semi-independent accommodation for welfare checks and signposting to online provision. In addition, the Young Essex Assembly led an online campaign producing short videos and posters highlighting the importance of social distancing and why young people should follow government guidance. Posts on Facebook and Instagram received over 1,000 likes and reached an audience of 82,000 people.

Following the cancellation of the final part of the learning and development programme in March 2020, ESCB suspended the learning and development programme between April and August 2020, initially there was a plan that we may be

able to deliver face to face training later in the year, but this was not possible and a decision was made to move all learning and development virtually. This was easier for some training providers than others and some took longer to set this up than others.

ESCB has offered a total of 66 learning opportunities to 1631 people this year; although the table below shows the number of courses and number of delegates trained in previous years, this year's figures are not comparable as the learning and development programme only ran between September 2020 and March 2021. Virtual delivery has also meant that some trainers have requested smaller numbers on courses.

What our young people say

The Essex Council for Voluntary Youth Services (ECVYS) ran over 300 detached sessions with young people between April and August 2020, with over 6,000 people attending. The young people attending raised the key issues they were experiencing, such as concerns about their exams and future, missed opportunities and relationships, tensions at home and a lack of things to do. As a result of this, youth workers were able to help direct young people to mental health services, online activities and other relevant services, as well as discussing the importance of social distancing and ways of engaging with local councils to advocate for better facilities.

From April to June 2020, an ECVYS project 'Youth in Lockdown' involved sessions with over 200 children across 16 different youth groups across Essex asking questions about their experience of lockdown. Most said that they were 'OK' or doing well, enjoying a greater sense of community and appreciation for the environment. Online technology was important in helping to maintain relationships with friends and wider family, but young people still missed face-to-face interactions as well organised activities. The majority were concerned about their education and the impact this will have on their future, while youth workers expressed concern about those young people who do not have access to youth groups or a trusted adult to talk to.

In 2021, the ECVYS ran the Listening Project, which was designed to listen to people's views about youth violence across Southend, Essex and Thurrock and provide recommendations to inform the priorities of the Violence and Vulnerability Unit in 2021 and beyond.

95% of young people said that youth violence was an issue, up 20% on information captured in 2019. This was in contrast to 25% of young people being victims of youth violence. 53% of young people said they were fearful of being stabbed and information was shared about some young people feeling safer if they carried a knife.

Two thirds of youth groups felt they would like more education about gangs and youth violence plus saying that they wanted more structured youth activities and places to be safe both inside and outside in the community.

Whilst 76% of the wider community would go to the police if they needed help and support, only 27% of young people would do the same.

Young people reflected that COVID-19 and lockdowns had increased feelings of isolation, frustration and boredom as well as social restrictions causing an increase in mental health issues in young people alongside increased online activity and decreased adult monitoring and supervision.

18 recommendations were identified which have been shared with the Violence and Vulnerability Unit and also with the Essex Stay Safe Groups. These recommendations included activities aimed at increasing young people's confidence and relationship with the police and to help young people feel safer in the community.

The Involvement Service deliver an annual 'It's My Life' festival, which brings together young people receiving services from Essex Children and Families service. Traditionally, this takes place at an outdoor centre over five days but in 2020 this was not possible due to the pandemic. Instead, it was delivered as a partly online event with activity Zoom meetings, virtual discussions between young people and decision makers, as well as with some socially distanced face-to-face activities, including two evenings of an outdoor family cinema.

Over 300 young people attended the festival, with children in care, care leavers, unaccompanied asylum seeking children and those on Child in Need or Child Protection Plans taking part in research interviews about their experience of the pandemic. Topics covered included education, relationships with friends and adults as well as their own emotional health and wellbeing. Experiences in education were shared with Virtual School to communicate key learning with schools (e.g. some being slow to adapt to online learning), while it was identified that Unaccompanied Asylum Seeking Children and those on Child in Need and Child Protection Plans found lockdown particularly difficult.

The following quote from a young person was collected by the Youth Offending Service when they collected young people's views for their 'Lived experiences' work:

"You did not give up and were on me from day one. You were on me more than my boss and this made a difference. You were harder to shake and have a way of making me feel that the right choice was to do your stuff and sessions. There came a point where it twisted and pleasing you became more important than pleasing my boss. My boss only wanted me for what I could do for him, you wanted me to help me do things for me." (young person)

Inspection

Maternity Services at Essex Hospital - All providers have received CQC visits to maternity services and consistent themes have been identified, particularly relating to workforce in midwifery and obstetricians. Each Integrated Care System has a Local Maternity and Neonatal Systems Board (LMNSB) who are responsible for overseeing the CQC action plans and improvement to services.

Essex Children's Social Care was deemed Outstanding in the last Ofsted inspection of November 2018. Whilst this achievement is widely celebrated and the organisation is very proud of this attainment, it is also a reminder that there can be no complacency and Essex Children's Services continues to work hard to deliver top quality services to the children and families of Essex and continue to innovate and build on existing practice.

The last full Her Majesty's Inspectorate of Prisons (HMIP) inspection of Youth Offending Services was October 2018, and the service was rated Outstanding. In June 2020 Essex was one of 10 YOTs to have been inspected by HMIP to assure the HMIP about COVID-19 arrangements. The published report indicates that there was a high level of assurance.

Essex County Council maintains two children's homes for Children with Disabilities, both offer respite care. Lavender House in Colchester and The Maples in Harlow, both were rated as Good following their previous Ofsted inspections in February 2020 and September 2019 (respectively).

From these inspections, they both only had one requirement which was that all staff had attained their Level 3 Diploma for Residential Childcare within two years of starting work as they both had a member of staff who was unable to complete their diploma within the timescale. Remedial action was taken by both homes to remedy this situation.

Essex Partnership University Trust (EPUT) Child and Adolescent Mental Health Service (CAMHS) inpatient services underwent an unannounced CQC visit in May 2021; following this, in June 2021 EPUT were served with a Section 31 notice, immediately suspending all new admissions to EPUT CAMHS Inpatient Wards.

The CQC identified twenty-two areas for improvement (thirteen must do, nine should do) for which EPUT have developed an action plan to address these and taken immediate actions to make improvements, as part of this EPUT have weekly meetings of the CAMHS Clinical Intensive Support Group. Through collaboration of EPUT, NHS England and NHS Improvement (NHSE/I), East of England Provider Collaborative, local authorities and Pan-Essex CCGs the improvement agreement has been reviewed and agreed.

EPUT are attending weekly meetings with NHSE/I to monitor progress and achieve a sustained reopening of services; however, overarching accountability remains with EPUT to identify improvement support and resources to facilitate the safe and phased re-opening of EPUT tier 4 CAMHS wards, the CQC and NHSE/I have authorised the reopening of two beds at present.

Police OC Triage was Peer Reviewed on 4 December 2020 by invitation by a team from Children's Social Care.

The review was triggered by information that between 01 November 2019 to 31 October 2020, out of the <u>9,092</u> Requests for Support created from the Police 7,679 (85%) did not progress to Children's Social Care or Family Solutions for an intervention. Time incurred completing and processing these Requests have a significant resource implication on both agencies.

Where Section 47 threshold had been met, referral to the Children and Families Hub was timely.

As a result, training and policy / procedure has been reviewed, both deemed to provide sufficient guidance to officers. However, due to the varied and complex nature of frontline policing, additional training is arranged to be delivered as part of officers scheduled 'flex' training days to reinforce the key messages and processes to improve referral compliance / content. Following the first input 85% of officers 'agreed' or 'strongly agreed' their 'knowledge and understanding has improved as a result of this training'. Furthermore, the need for additional growth / staffing support for the Child and Family Operations Hub (C&FOH) is under review.

There are 555 schools in Essex (including Primary, Secondary and Special) and just over 88% have a Good or Outstanding Ofsted rating. There are also around 50 independent schools.

Unique events

In August 2021 during the Allies withdrawal of troops from Afghanistan, a number of Afghani families seeking asylum were placed in Essex on arrival in the UK. This was a fast paced and large-scale humanitarian crisis and operation. Essex had provision for Managed Quarantine Services (MQS), Bridging facilities and wider asylum contingency facilities locally. People and organisations came together quickly and willingly to respond to the needs of these families and there was good use of existing pathways processes including unaccompanied minors into safeguarding pathways. The local health system in particular faced additional pressures and local primary care was mobilised to manage initial health assessments and gateway people into appropriate services including maternity, child health, acute and mental health services. The voluntary sector responded quickly and at scale to support welfare across the Essex facilities.



Summary

The Essex Statutory Partners feel that together we work well as a partnership and our response to the Pandemic is seen as a particular strength. Clearly, we are on a journey of change as we have implemented the Multi-Agency Safeguarding Arrangements and are using opportunities to learn and grow from these early experiences and ultimately determine what works best for all partners. This scrutiny report has been useful to evaluate what we have been doing well and areas where we need to make further progress and we have highlighted that we need to do more to measure the impact of what we do.

COVID-19 has had a huge impact on services, both in terms of limitations and opportunities and what we have learnt is that we have an amazing capacity to be flexible, collaborative and collegiate in how we work together and within any limitations we face. We have seen that technology has largely been a benefit when we have faced times when face to face work is restricted and that adoption of more technology will be seen post COVID-19. Many families and children and young people have reported that this has been helpful and we have seen an uptake in professionals accessing meetings and training virtually.

Despite COVID-19, there has been a huge amount of work across the Partnership that focuses on our priorities. We accept that some work is just better when we can come face to face and so some pieces have been delayed and should COVID-19 continue to have an impact on ways of working, we will need to adapt in order to make progress.

We have found through this scrutiny report that evidencing our impact has been more difficult to achieve and we need to consider the measures and outcomes which will evidence this going forward. We have also found that we have a great deal of children and young people's feedback about safeguarding services but this does tend to be held by Children and Families Service and the Violence and Vulnerability Unit. We believe that this feedback needs to be wider across the partnership so we can evidence the voice of children and young people and understand what they say about the experience of having support and protection.

We have also found that whilst we consult with our staff on many issues, making the connection between the Board and practice has not always been obvious and is an area that we need to enhance.

Next steps

There continue to be times when the escalation process is not effectively used by partners and it is unclear what the barriers are to this being followed or the process understood. We will work to understand what the issues are and find solutions that work across the system.

Evidence of the direct impact of the work of the ESCB has been harder to evidence in particular for children and families and the workforce and we will revisit measurable and identifiable outcomes to answer this going forward.

The feedback from children and families in strong in certain parts of our safeguarding system, but could be stronger across the partnership and we will revisit this to look for opportunities to seek targeted feedback.

The feedback from our collective workforce is strong in certain aspects of what we do, but not consistent and we will look for the opportunities to strengthen feedback across the partnership.

Continued work to develop the function and purpose of the Sub-Committees and stay safe and ensure that feedback loops are used to feed actions and objectives both to and from Board.

Work with the Children and Families Hub and the wider partnership is needed to ensure that early help and intervention is considered and actioned prior to a Request for Support being raised, providing timely, proportionate support to children and their family.

The work across the partnership to develop the concept of Think Family and how this can be effectively embedded into practice and ensure that we embed the learning from reviews that focus on Think Family is in its infancy and we are committed to making progress.

Our partner agencies are keen to trial a pilot of Operation Encompass designed to improve the support available to children and young people in education who experience domestic abuse at home and we will be meeting to discuss implementation of this pilot.

That we have not made as much progress as we would have liked in our work with Neglect, mainly due to COVID-19 having stalled this work but have the plans in place to progress this action, initially via the planned Multi-Agency Thematic Audit and the working group.

Our new Business Plan is due for renewal in April 2022 and the above identified activity will be considered for inclusion in the plan whilst other activities will remain as part of our business as usual function.