

Overview, Scrutiny and Policy Development Committee

The Effectiveness of Collaborative Working in North Tyneside



March 2019



North Tyneside Council

Contents

	Page
1. Background to the study	3
2. Methodology	3
3. Findings	4
4. The Multi-Agency Safeguarding Hub (MASH)	4
5. North Tyneside Safeguarding Children Board	6
6. The Tyneside Alliance	9
7. Adopt North East	11
8. North of Tyne Collaboration Programme	12
9. Schools and School Improvement Service	13
10. North Tyneside Council	14
10.1 Signs of Safety	14
10.2 Looked after Children and Care Leavers	15
10.3 Keeping Families Connected	16
10.4 Practice Week	16
10.5 Others	17
10.6 Overall	18
11. Conclusion	19
12. Acknowledgements	19
13. Background Information	20
14. Appendices	
Appendix 1 - Acknowledgements	21
Appendix 2 - List of background papers	22
Appendix 3 - Recommendations	23

1. Background to the study

- 1.1. On 9 July 2018 the Children, Education and Skills Sub-committee agreed to establish a Sub Group to review the collaborative working practices of the Authority to ensure they were improving outcomes for children and their families with a focus on the most vulnerable and in need.
- 1.2. Councillors Joanne Cassidy, Cath Davis, Joe Kirwin, Maureen Madden, Pat Oliver and John O'Shea volunteered to be members of the Sub Group. Unfortunately Cllr Kirwin had to withdraw from the group part way through the study.
- 1.3. In determining that it was an appropriate topic for an in-depth investigation the sub-committee considered recent developments in the sector.
- 1.4. In March 2018 it was announced that the Department of Education had awarded £15m of funding to eight "partners in practice", a peer support programme that sees leading children's services departments work with other local authorities to improve standards. North Tyneside Council and South Tyneside Council working in partnership was one of the eight and was known as the Tyneside Alliance. The Tyneside Alliance was committed to working with up to 10 other Authorities during the two years of the programme to develop and share strong practice and deliver hands-on peer support to help and improve outcomes for more children and their families.
- 1.5. The Children's and Social Work Act 2017 had made changes to safeguarding requirements by replacing the local safeguarding children's board with Safeguarding Partners (the local authority, the clinical commissioning group (CCG) and the police) and they will be responsible for exercising the functions for the purpose of safeguarding and promoting the welfare of children in the area.
- 1.6. The multi-agency safeguarding hub (MASH) had been established in North Tyneside to coordinate support and protection services for children and vulnerable adults and was well established; now was a good time to review the implementation and its working practices to see if they could be replicated elsewhere.
- 1.7. In light of the above it was agreed that a review of the collaborative working arrangements to ensure that each organisation understood what their and the other agencies responsibilities were, that they shared information efficiently and that the Authority meets its obligations was appropriate at this time. The topic would also allow Members to contribute to new policies and strategies in the area and provide the opportunity to improve the service available to the borough's children and their families.

2. Methodology

- 2.1. The remit of the Sub Group was to examine the collaborative working practices of the Authority, to include existing arrangements, the MASH (multi-agency safeguarding hub), the Tyneside Alliance, the North of Tyne Collaboration and proposals relating to the local safeguarding children board.

2.2. Key questions to be considered included:

- a) Who is doing what?
- b) Who should be doing what?
- c) What could be done better?

2.3. The Sub Group met on a number of occasions to receive information from Officers and discuss their findings and also met:

- the Independent Chair of the North Tyneside Safeguarding Children Board;
- representatives of the North Tyneside Clinical Commissioning Group (CCG);
- with social workers and front line staff in Children's Services;
- with a representative of Northumbria Police; and
- with senior managers within the Health, Education, Care and Safeguarding Service.

3. Findings

The report will look at the key areas in turn and will make recommendations relating to each at the end of the respective section. The recommendations also form appendix 3 of the report.

4. The Multi-Agency Safeguarding Hub (MASH)

4.1. One of the first sessions of the Sub Group was to meet with representatives from the Multi-Agency Safeguarding Hub (MASH), namely the Senior Manager for Safeguarding and the Safeguarding Lead Nurse 0-19 Children's Public Health Service.

4.2. The MASH coordinates support and protection services for children and vulnerable adults in North Tyneside. It brings together professionals from across the Authority, Northumbria Police, health agencies and Harbour (a domestic abuse charity) in one team to improve information sharing, identify safeguarding concerns quicker and manage cases more efficiently.

4.3. The MASH was highlighted as a highly effective multi-agency partnership with seamless links to and from the social work assessment team and early help services during the Ofsted Inspection of May 2018. The work of all partners was acknowledged and described as a real strength with Inspectors describing the Authority's staff and partners as highly motivated, conscientious and committed to safeguarding children and young people in North Tyneside.

4.4. The Sub Group was informed that that MASH could receive over 50 reports a week but the average was more like 30.

4.5. The Sub Group was given examples of how the MASH had improved practice by having all the information available about a child. All members of the MASH team were experienced practitioners and provided soft intelligence, which in turn enabled earlier conversations with the relevant information. For example, Council Tax records are available from the officer from Housing; health visitors will have

information on whether there is a baby or young children in the household.

- 4.6. At the beginning of the operation of the MASH one of the gaps in information was from the education side. Now a position had been seconded after a pilot (split across three teachers all with a safeguarding in education background) and there was an education representative as part of the MASH. The MASH had helped smooth things over with schools with regards to changes relating to the completions of the Early Help Assessment forms.
- 4.7. The Sub Group was also informed that the Probation Service had been a missing factor in the MASH. The information was provided but it took time and as an officer was not physically present the soft intelligence or the advice and support, which was invaluable, was not available.
- 4.8. As part of its work the Sub Group also met with a group of front line social workers and managers. Overall the response to the MASH and how it was working was very positive as the ability to be able to walk across an office and have a conversation with all the key partners and get an overview of a family really quickly was really useful; for those not in the MASH appointments had to be made. When asked if any agency was missing it was commented by the frontline staff that it would be useful to have a link with CAMHS (Children and Adolescent Mental Health Services); the managers stated that a representative from CAMHS was there once a week and had a good presence in the locality teams.
- 4.9. The Sub Group also met with an Inspector from Northumbria Police to talk about their involvement with the MASH both in North Tyneside and in the other local authorities in the region.
- 4.10. The Inspector informed the Sub Group that the MASHs' around the region had different organisation and focus but Northumbria Police's establishment was the same across all six. It would have been helpful for all six to use the same IT system, Liquid Logic, so they were able to access all information but accepted that different authorities had different needs. The Dynamic MARAC (multi-agency risk assessment conferences) would be a useful addition to the MASH process but overall North Tyneside's MASH was in a very good position and it was going well. The Police invested a lot of resources in the MASHs but did so because of the identifiable benefits.
- 4.11. The Inspector detailed the resources and processes they gave to the MASH. Whilst it was acknowledged that it would be great to have everyone involved in safeguarding on the one site it was not practicable and core partners were good at drawing information from other services, for example mental health. There had been no resistance to engagement or the new way of working in the MASH; partnerships had been long established between individual services.
- 4.12. Representatives from the Clinical Commissioning Group (CCG) also attended a meeting of the Sub Group and gave their perspective on the MASH and recent changes to collaborative working. Attending were the Designated Nurse Looked After Children and Safeguarding Children and Adults Officer and the GP Lead for Safeguarding Adults and Children.

- 4.13. The MASH was now one year old and had been very successful. The next step was to embed the processes and ensure interventions were made as early as possible, that there was appropriate support for all partners and also appropriate challenge. It was reported that the responses felt more co-ordinated and that being able to understand other colleagues' roles helped too.
- 4.14. The Chair of the North Tyneside Safeguarding Children Board called the MASH "tremendously exciting" but believed there were challenges about next steps and the long term commitment of the partners to the model.
- 4.15. The Sub Group were very impressed with the enthusiasm, commitment and hard work of the representatives from the MASH and considered that its creation and progress was something the Authority and the team were rightly proud of. This example of collaborative working was working well and it appeared that, subject to all partners retaining their current commitment, the appropriate steps were in place to ensure it continued to thrive and make a positive impact on children's lives.
- 4.16. Taking all of the above into account, the Sub Group makes the following recommendations in relation to the Multi-Agency Safeguarding Hub:

Recommendation 1 - Cabinet notes that the Children, Education and Skills Sub-committee considers the education role in the MASH vital and recommends continued funding for the seconded post for education in the MASH for future years.

Recommendation 2 - Cabinet requests the Head of Health, Education, Care and Safeguarding considers increasing the membership of the MASH to include on a more formal basis:

- a) a mental health and drug and alcohol and /or CAMHS professional/advocate;
- b) a Learning disabled advocate; and
- c) the Dynamic MARAC (multi-agency risk assessment conferences)

5. North Tyneside Safeguarding Children Board

- 5.1. Local Safeguarding Children Boards (LSCBs) were established by the Children Act 2004. The Board was the means by which organisations came together to agree on how they would cooperate with one another to safeguard and promote the welfare of children. The Board's role was to scrutinise and monitor this process, and to ensure that local agencies cooperate and worked well to achieve this.
- 5.2. The LSCB's core objectives are set out in the Children Act 2004 and the functions are set out in the 2015 statutory guidance *Working Together to Safeguard Children*. They include communication, quality assurance, learning from serious case reviews, reviewing child deaths and ensuring sound safeguarding policies and procedures are in place.
- 5.3. The Children and Social Work Act 2017 (the Act) replaces LSCBs with new local safeguarding arrangements, led by three safeguarding partners (local authorities, chief officers of police, and clinical commissioning groups). These arrangements need to be in place by September 2019. It also places a duty on child death review partners (local authorities and clinical commissioning groups) to review the deaths of

children normally resident in the local area.

- 5.4. LSCBs must continue to carry out all of their statutory functions, until the point at which safeguarding partner arrangements begin to operate in a local area. They must also continue to ensure that the review of each death of a child normally resident in the LSCB area is undertaken by the established child death overview panel (CDOP), until the point at which new child death review partner arrangements are in place.
- 5.5. Mr Richard Burrows, the Independent Chair of the North Tyneside Safeguarding Children Board (the Board), provided the Sub Group with his opinion on how collaborative working was functioning between the many organisations and partners involved in the Board.
- 5.6. Mr Burrows stated that he believed the Board was working well and cited the work with the schools as a good example. North Tyneside Council had an effective relationship with all schools in the borough with no distinction between community and non-community schools; this was not something which was replicated across the country. There was representation from primary schools and secondary schools and this provided a positive environment for collaboration.
- 5.7. The Board had an active model whereby if an organisation had a seat on the Board they were expected to *do* something. All Members of the Board were reminded that the role of the Board was to hold each other to account and to do so they must collaborate and participate; each organisation was there to help the others understand where they were and how they got there, rather than want went wrong and whose fault it was.
- 5.8. Each organisation had different cultures, agenda and performance management targets however each one was expected to account for their areas of expertise. The Board provided a common set of guideline and procedures and at most meetings people were honest and open but this attitude did change when the Board undertook a Serious Case Review.
- 5.9. The Council's *Our North Tyneside Plan* provided a coherent framework around which all partners could align their work. The work undertaken in light of the Rotherham abuse scandal and the Serious Case Review after the 'Primark case'¹ showed how important a linkage between all authorities was; that being punitive was counterproductive; and gave an appreciation of softer connections between what people did.
- 5.10. The Authority were going to run a 'Practice week' and this was welcomed by Mr Burrows (please see section 10, *North Tyneside Council* for more information about Practice Week).
- 5.11. It was acknowledged that the role of the Board in Community Safety should have more focus; more could be done collectively to raise the awareness of the public to understand what to look for and how to report matters of concern and to increase the value of the information obtained from these contacts.
- 5.12. When discussing this aspect of Mr Burrow's evidence, Members shared his concern

¹ <https://www.bbc.co.uk/news/resources/idx-5667c315-a69c-4e5d-a683-e4e7771eb04d>

and considered whether in addition to community centres, council buildings, surgeries and police stations other organisations and businesses, like supermarkets and soft play centres, could display posters with key contact details for the Front Door service. This would help increase the general public's awareness of what to do and who to contact if abuse or suspected abuse was witnessed.

- 5.13. Members also wondered whether council officers who worked outside of Children's Services, for example refuse collectors, and Members themselves, knew about how to report safeguarding concerns about any resident and what to look out for. Examples of what might be a sign that something was wrong were bins not being put out as regularly as usual or the build-up of post just inside a front door.
- 5.14. Concerns raised by Members about Electively Home Educated children were shared by Mr Burrows and he made reference to a strategy employed by Darlington Borough Council and Durham County Council regarding assurance on the welfare of children being educated at home.
- 5.15. Further enquiries were made by the Sub Group with the Authority's Fair Access Team in Education. The Sub Group was informed that there had been a meeting with colleagues at Darlington Council and discussions with the MASH team which had led to a review of the Authority's procedure and the establishment of a clear escalation process if no response from the parent/carer was received or if no evidence was received of satisfactory education. A copy of the guidance and a flowchart showing the processes around elective home education was provided to Members.
- 5.16. The Sub Group was pleased to note that the revised procedure was a result of effective collaborative working.
- 5.17. With regards to the implications for the future of the Board as set out in the Children and Social Work Act 2017, Mr Burrows stated that nationally other safeguarding children boards also had difficulty understanding the logic behind the changes and uncertainty as to how they would make things better. Six local authorities (North Tyneside, Newcastle, South Tyneside, Gateshead, Sunderland and Northumberland) had formed a North and South of Tyne Strategic Safeguarding Forum to examine what model their new arrangements might take and work was on-going.
- 5.18. The importance of ensuring there was a local mechanism for delivering whatever model was one of the main questions to be answered as the local structure was often undervalued in safeguarding. Mr Burrows also expressed concern that the level of engagement may drop when attendance and participation was no longer statutory for many organisations.
- 5.19. Representatives from the Clinical Commissioning Group (CCG) also attended a meeting of the Sub Group and spoke about their involvement with the Board. It was considered that the Board worked very well in most ways and had a good participation at Board level however this was not always repeated at sub groups (the Quality, Improvement, Learning and Performance sub group and the Training sub group) often due to other work commitments. The example cited was education representatives as an individual teacher from a school was not sufficient, it needed to be a senior leader to disseminate the information and learning from these meetings

to all schools in the borough. See paragraph 9.6 for the Assistant Director for Education, Learning and Skills' response to this comment.

- 5.20. With regard to the forthcoming changes to the Board it was acknowledged by the representatives from the CCG that it was a significant change with the Police, the CCG and the Local Authority having an equal shared responsibility as 'safeguarding partners'. Whilst there was always room for improvement the current arrangement had created a cohesive group that had good working relationships. Work on establishing the new arrangement had begun with consideration as to which organisations would be formally named as 'relevant partners' and the role of lay members.
- 5.21. The Sub Group considered that the existing arrangements and the Board was very effective and was ensuring that children and young people in North Tyneside were protected and kept as safe as possible; that all organisations, their leaders and their practitioners were working effectively together to safeguard children and young people; and that people were open to learning, transparent about what they did and were focused on improving outcomes for children and young people.
- 5.22. As the current arrangements were working so well the Sub Group was concerned that the changes to the arrangements for local safeguarding children boards would struggle to replicate this and the impact the disruption would have on what was an effective partnership between all key organisations for child protection. The Sub Group welcomed the creation of the North and South of Tyne Strategic Safeguarding Forum and looked forward to hearing the proposals at a meeting of the Children, Education and Skills Sub-committee in due course.
- 5.23. Taking all of the above into account, the Sub Group makes the following recommendations:

Recommendation 3 - Cabinet requests the Head of Health, Education, Care and Safeguarding to consider producing a universal 'brand' for use by all partners, including the community safety partnership and businesses in the area, to inform the general public in North Tyneside about what to do if they have concerns about a child or vulnerable adult so that the issue, how to identify it and what to do about it becomes familiar to the general public.

Recommendation 4 - Cabinet informs the Head of Health, Education, Care and Safeguarding that the Children, Education and Skills Sub-committee advocates the appointment of an Independent Chairperson for the new local safeguarding arrangements and the inclusion of schools, lay people and the ambulance service in the new arrangements and puts this forward to the North and South of Tyne Strategic Safeguarding Forum.

6. The Tyneside Alliance (Partners in Practice)

- 6.1. The Partners in Practice (PiP) programme was a national initiative developed and funded by the Department for Education (DfE). The programme aimed to increase joint working between central and local government by working with the best performing local authorities in relation to children's social care to improve the overall system.

- 6.2. North Tyneside Council, in partnership with South Tyneside Council, had successfully secured PiP status and funding in March 2018. Acting as the Tyneside Alliance, the two Authorities would jointly deliver sector-led improvement activity to local authorities across the country that had been identified as, or had identified themselves as, requiring improvement to their children's services. Both authorities had received funding for two years from the DfE in order to deliver this work.
- 6.3. The Sector Led Improvement support was committed to delivering improvement activity with up to ten local authorities over a period of two years. The improvement work would be a mixture of onsite and offsite activity, including review and analysis, collaborative improvement work, monitoring and evaluation. Funding across both authorities for the Sector Led Improvement work was £1,600,000 over two years: £860,000 in 2018/19 and £740,000 in 2019/20.

Expenditure of the grant would cover:

- i. Funding to enable the Authority and South Tyneside Council respectively to resource sufficient capacity within their own organisation, enabling senior managers and practitioners to work with host authorities to help them improve.
 - ii. Funding for 'Improvement Associates' – a pool of highly skilled and experienced sector experts that would work with the Tyneside Alliance to deliver improvement work.
 - iii. Funding for a core team that would support the mobilisation and delivery of the programme through all phases.
 - iv. Funding for travel, accommodation, supplies and services associated with delivery of work with individual authorities as well as hosting regional and national events to share best practice.
- 6.4. The Sub Group was informed that the Tyneside Alliance was working well and discussions were taking place about what would happen after the end of the funding with an option of a traded service offer.
- 6.5. The Senior Manager: Transformation informed the Sub Group of the process undertaken with each client authority and that it was at least a three to four month exercise.
- 6.6. It was acknowledged that the Tyneside Alliance work did take North Tyneside's workforce away but the funding had provided for posts to be backfilled or to increase capacity; any new staff employed had been appointed on a two year contract, for the length of the programme. Officers were also mindful of the risk to the performance of North Tyneside and their priority was to ensure the Authority's performance was not impaired.
- 6.7. The social worker managers commented that they were concerned that the programme might take away resources from the North Tyneside team and that it was another thing to contend with amongst the other changes within the last two years to the service.

- 6.8. The Sub Group, whilst acknowledging the prestige that the award of the Partners in Practice status had given the Authority and that the work was going well, was concerned about the impact on existing frontline officers whose knowledge of the programme appeared to be minimal. This lack of knowledge had led to uncertainty and anxiety due to the appearance of resources being taken away from the day job. Members were also concerned about the impact of having temporary, possibly new and inexperienced officers working for the Authority whilst the experience was helping other local authorities elsewhere.

Recommendation 5 - Cabinet reassures itself that the steps taken to “resource sufficient capacity within their own organisation, enabling senior managers and practitioners to work with host authorities to help them improve” for the Tyneside Alliance had left the Authority with sufficient experience and capacity to retain its own high level of performance.

7. Adopt North East

- 7.1. The development of Regional Adoption Agencies was part of the national adoption agenda set out in the Department for Education (DfE) paper ‘Regionalising Adoption’ in June 2015 which was further developed by Government in ‘Adoption: A Vision for Change’ in March 2016 which signalled a clear intention that by 2020 all local authorities would be part of regional agencies.
- 7.2. Newcastle City Council had received funding from the DfE to develop a regional Adoption Agency on behalf of Northumberland County Council, North Tyneside Council, Gateshead MBC, South Tyneside Council and Newcastle City Council and four voluntary adoption agencies: After Adoption; Barnardos; ARC NE; and Durham Family Welfare. It was acknowledged that all the Councils provided high performing adoption services however Government anticipated that Regional Adoption Agencies would be better able to target the recruitment of prospective adopters, speed up the matching and placement of children, improve adoption support services and potentially create efficiency savings.
- 7.3. Adopt North East would be formed from the staff groups currently working across the local authority adoption services. Staff would transfer into North Tyneside and work to develop the service to meet the needs of the children across the area who required permanence by adoption. It was anticipated that Adopt North East would be formed from a staff group of approximately 50 people including: social workers who worked directly with prospective adopters; staff who engaged in recruitment of people interested in adoption and social work; and other staff who provided post adoption support to children and families.
- 7.4. Adopt North East became a service on the 1 December 2018.
- 7.5. The Sub Group was assured that there was nothing about the individual adoption services which had required the creation of a regional adoption agency; it was based on a very clear direction of travel from Government. That North Tyneside Council had been chosen as the host authority illustrated how well regarded the service was in the region. The social workers managers were pleased that the new service would be based in North Tyneside and believed that all members of the team being in the same place would be a help; the challenge was still finding the correct match for

each child, not finding adoptive parents.

- 7.6. It was reported by the Senior Manager for Looked After Children that the shared pool of experience with all officers being based on one site was an immediate benefit and all officers involved were highly motivated and focused on improving practice and being innovative. The new agency was being seen as an opportunity to establish and share best practice and as South Tyneside's adoption service was an 'Outstanding service', North Tyneside and others were happy to learn from them, particularly in the life story work and with harder to place children.
- 7.7. The management team for Adopt North East was mindful that this was a significant change for staff and was being as supportive as possible with a clear workforce development plan. There was some anxiety in the team about some changes, for example that some locally accepted 'work arounds' would no longer be acceptable and people might have to work in a different way to their habit to ensure all officers worked in the same way.
- 7.8. Whilst it is still early days for Adopt North East the Sub Group was very impressed with how quickly the service had been developed once it had been agreed North Tyneside would be the host and the impact the positive approach and attitude towards this change had made to such a significant piece of work. The successful transfer of staff, agreement on funding and governance arrangements, the creation of a brand and refurbished office space being achieved in the time it had was impressive and to be commended. The Sub Group hoped it would be a model for future collaborative projects in the future; Adopt North East showed it could be done.

8. North of Tyne Collaboration Programme

- 8.1. The Department for Education's Children's Social Care Innovation programme seeks to develop, test and share effective ways of supporting children who need help from social care services. Newcastle, North Tyneside and Northumberland Councils submitted a successful bid to the Innovation Programme in 2016 and established the North of Tyne Collaboration Programme. This was outwith the North of Tyne devolution agenda.
- 8.2. The programme began by developing a plan to work more closely on practical proposals to make a difference, with initial opportunities relating to the Authorities' response to domestic abuse; workforce planning and quality; elements of their services for looked after children; and what could be done to improve outcomes for each areas' residents.
- 8.3. There was also an examination of common problems, one of which was placement capacity; others included looking at specialist provision and collective responsibility to the NHS. Operational relationships were effective, the difficulties came when agreement had to be made on funding; however a real strength was the collective voice to the NHS and on a national level.
- 8.4. The funding from the Innovation Programme was then used to create capacity to allow the team to work together. Whilst there was some synergy each local authority kept its own identity as each local authority had its own culture, political landscape and geography. The services were still regulated and inspected in the way they

always had been but the collaboration ensured that if something was not working somewhere it was picked up quickly and changed; as the teams knew each other there was a willingness to learn and build. The three local authorities had shared policies, for example on kinship, but not every policy was shared. The Programme also assisted the relationship between the Directors of Children's Services in each Authority to become trusted, healthy and constructive.

- 8.5. The Sub Group was reminded that it was important to remember that integrated services did not always save money but the three authorities were choosing to continue to work collaboratively because of the known benefits to each Authority for what they chose to do collaboratively. For example, combining fostering was counterproductive because of the distances involved across the three local authorities; young people have a significant local area identity and placing a child from North Shields in Wallsend could be too far away. Alternatively combining staff training did have benefits. It was anticipated that increased collaborative working would grow naturally, bringing the officers with them to ensure its success.
- 8.6. The Sub Group were not very familiar with the North of Tyne Collaboration before they began their work and were pleased to see the commitment and enthusiasm of the officers involved to making it work. It was clear to the Members that the key message of the project to improve outcomes for residents was embedded in the project. There was also an appreciation that at some point collaboration can become unhelpful and/or inefficient and the bigger picture needs to be kept in mind at all times.

9. Schools and the School Improvement Service

- 9.1. The Sub Group also met with the training and development officer for the School Improvement Service (SIS) who delivered the safeguarding training to schools. Her role was to deliver child protection training to every member of staff who required it (3,500 people), the designated safeguarding leads in schools in the borough and people new to a child protection role. Many schools had a training pathway for child protection issues which included a brief introduction on the first day; a more in-depth presentation with the safeguarding lead in the first week and the in-depth training provided by the SIS in the first term.
- 9.2. Each designated safeguarding lead (each school had at least two) received a quarterly update which they then disseminated to staff; it was expected regularly but required annually although the quality control of that dissemination was inconsistent. Over a course of three years everyone in a school should have received the in-depth training provided by the SIS. This training covered the signs and indicators and the different categories of abuse and neglect; other ways a child might be vulnerable; and how to flag concerns. The training also provided information on the Local Authority's systems; how the different mechanisms worked; the work of the locality teams; and what the requirements of Ofsted were.
- 9.3. A challenge was keeping schools up to date with new issues and different schools has different vulnerabilities; some schools had pastoral leads that "do it all day" whereas others did not have the resources for that and so there was less opportunity for expertise to develop.

- 9.4. Each child at school had to be measured as part of the national child measuring programme in Reception and Year 6 and all school nurses were highly trained in safeguarding matters and knew their responsibilities and reporting pathways.
- 9.5. The SIS became involved in anything new to try and engage schools and was currently working with the Police on Operation Encompass; this was a process where if a family was involved in a reported domestic abuse incident the school of any children of the family were notified by 10.00am the next day.
- 9.6. The Assistant Director for Education, Learning and Skills responded to the comments made by the representatives of the CCG regarding the dissemination of information from the Board and its sub groups to the individual schools. She informed the Sub Group that the two school representatives on the North Tyneside Safeguarding Children Board were both senior leaders at their own school and were also members of regular forums and meetings for head teachers; the PLP for primary heads and the EIP for secondary heads. There was also a forum for heads of special schools to meet known as SHOG. Feedback from school representatives on the Board was to be a standing agenda item at each of these meetings. In addition a Higher Education representative and the Training and Development Officer for the School Improvement Service attended the training strategy sub group of the North Tyneside Safeguarding Children Board.
- 9.7. The social workers reported a good relationship with schools, each had their own reporting processes either including a pastoral team or not although the quality of that was patchy with some being better than others. It was suggested that this was because some schools were more confident than others but it was important to remember that social care was the social workers business and education was the schools business.
- 9.8. The role of schools in safeguarding was vital and the programme of support available to all schools through the SIS was an important element of collaborative working and would be integral to the new local safeguarding arrangements (see recommendation 4). The Sub Group considered the pilot of Operation Encompass to be an important addition to ensuring schools and practitioners had a view of the whole family when making decisions about an individual child; another example of good collaborative working.

10. North Tyneside Council

During the Sub Group's meetings with witnesses other elements of the Authority's recent changes and projects were mentioned; those which demonstrated collaborative working are included below.

10.1. Signs of Safety

- 10.1.1 Signs of Safety was a practice model for children in need of a statutory assessment which had been implemented within the Authority and partner agencies since 2017.
- 10.1.2 School nurses had reported positively on the Signs of Safety model forms as freeing up time to do more. Two days of training had been required but it was now used in their practice. Forms and paperwork had been adapted to reflect the Signs of Safety

Principles as it clearly captured the child's views and wishes. It also helped the family to see the same information and format of forms from their health visitor and social worker.

- 10.1.3 The social workers considered that Signs of Safety and the MASH made them feel like the service was a step ahead of other Authorities; it was commented that the focus on risk and the honesty in using the practice was to be welcomed; although it was acknowledged that the transition into using the practice in looked after children had been difficult because it came halfway through some young people's assessments.
- 10.1.4 The Inspector from Northumbria Police stated that they had attended training on the Signs of Safety Practice Model and it was now used across most of the six Local Authority areas and was working well. She considered that it was the right way to go as it supported the whole family and concentrated on cases and areas of improvement.
- 10.1.5 The principles of Signs of Safety had been built in to the safeguarding training and the practice model was supported by the training and development officer, she considered that it was really good as it made people be reflective.

10.2 Looked after Children and Care Leavers

- 10.2.1 It was reported that the multi-agency approach for looked after children and care leavers was strong with all agencies working well together; it was acknowledged that the mental health element could be strengthened and a pilot had begun to include a mental health assessment as soon as a child became looked after by the Authority.
- 10.2.2 The representatives from the CCG mentioned that late notification or imprecise details on notifications from the Local Authority to the designated doctor for Children in Care could cause unnecessary delay as the doctor had to unpick what was meant in the referral with the family instead of being fully prepared before meeting the family and the child involved. It would be helpful for the notification to have some narrative and background to the case as doctors were not involved at the initial discussions and meeting in the MASH. There was no suggestion that a GP should be on the MASH as improved communication of the background situation should resolve the issue. If MASH needed the information for the initial discussion they would approach the GP and it would be provided for them.
- 10.2.3 Over recent years a huge amount of work between all partners had been undertaken to improve the service and information sharing. A frustration now was not receiving information from the Local Authority. For example, the return figures on the statutory Section 47 response rates² for the CCG were recorded as 'poor' but GPs stated that they were completing the report on time. There was a set process which used a report template and a secure email but some GPs were receiving phone calls and not emails. The Local Authority had not provided the CCG with enough information to allow them to audit the responses to see where the problem may lay.

² 'Section 47' refers to section 47 of the Children Act 1989 and refers to a multi-agency assessment which is undertaken when there are concerns of significant harm to a child or children.

- 10.2.4 In addition, there was a problem in that the Local Authority (LA) were not always notifying GPs when a child ceased to be Looked After and currently did not have a robust system in place for doing this. This was important information to have recorded on a child's medical file, not least to be able to support them later on in adult life.
- 10.2.5 When the Authority's Senior Manager, Safeguarding and Children's Services was asked about the CCG's concerns he acknowledged that there was an issue in that the data was indicating non-compliance with the statutory framework but that it was difficult to discover where the non-compliance lay and that a practical solution to the problem was still to be found. The Authority shared the CCG's desire to improve the process but evidence was required to see where the weakness lay.

10.3 Keeping Families Connected

- 10.3.1 The Keeping Families Connected project was an edge of care initiative to create a new, integrated service with education and health to support children to live safely at home. The primary objective was to maximise the number of children and young people supported to remain at home by having effective edge of care provision that reduced the number of looked after children and effectively enabled those children that were looked after to return home safely.
- 10.3.2 The Authority had been awarded £1,086,760 over a period of two years; £538,380 in 2018/19 and £548,380 in 2019/20. The service model incorporated:
- A multi-professional, co-located team (including clinical psychology, youth offending, education, nursing, fostering, and outreach staff)
 - Additional therapeutic restorative services
 - Additional programmes of education support to keep children in school
 - New short stay provision via foster care
 - Shared staff training and development, including foster carers
 - A single key worker model with safeguarding oversight and risk management from Social Workers
- 10.3.3 The police had also dedicated resources to the project as part of reducing crime and the NHS had also allocated resources for it. The staff in the project would be handpicked as the culture and attitude towards the service would be a vital part of its success.

10.4 Practice Week

- 10.4.1 The Sub Group was provided more information about Practice Week from the Senior Manager, Safeguarding and Children's Services. It took place in the first week of December 2018 and Members of the Senior Management Team undertook observations of front-line practice across services from an agreed schedule of planned safeguarding activities.

Activity observed included:

- A Multi-Agency Core Group
- MASH Triage of a Safeguarding Case
- MASH and Police Pre-Triage of potential Contacts

- Multi-Agency Review Child Protection Conference and 20 Day Looked After Review
- Multi-Agency Team Around the Family Meeting
- Multi-Agency Locality Meeting

10.4.2 The process was one of appreciative inquiry, gathering information and stories about what was working well from the practice observed. It was important that staff did not perceive the week as an exercise in fault-finding and enabled the development of a sense of the practice wanted by the Authority.

10.4.3 Key findings included:

1. Senior Managers noted positively the use of the Signs of Safety approach in practice, evidencing its effective implementation across the safeguarding continuum and its use in a wide variety of different safeguarding activities.
2. Senior Managers all commented upon the care, warmth, sensitivity, compassion and emotional skill of the practitioners that they observed when working with vulnerable children, young people, parents and carers.
3. Senior Managers were consistently struck by the child-centred focus of practitioners.
4. Senior Managers commented that practitioners were intentional in identifying 'strengths' – this suggests that the implementation of Signs of Safety was positively shifting understanding about risk.
5. Senior Managers noted strong systems and processes underpinning practice across services.
6. When asked, service users were positive about the support that they received.

10.4.4 The Sub Group welcomed this initiative and was pleased to note that it was something which would be repeated on a regular basis. The Sub Group considered that it was important for senior managers to be seen by frontline staff as well as for frontline staff to be seen by senior managers and the suggestion that it could be widened out to include other partners, like the police or members of the NTSCB was encouraged.

10.5 Others

10.5.1 The Sub Group was informed that the recent transition of the 0-19 health service into the Council had involved a lot of discussion and challenge but had worked very well.

10.5.2 The RHELAC (Raising Health and Education for Looked after Children) Team was a multi-agency team whose purpose was to raise the health and educational outcomes for Looked after Children. The CCG part funded a counsellor and the team as a whole were doing really good work.

10.5.3 For children with additional needs on an Education, Health and Care Plan a joint visit with a children's services social worker and a social worker from the child disability team was undertaken as they both had different assessments to undertake. A joint

visit also helped manage a family's expectations. There was a representative for children with a learning disability on the MASH although concern was raised that children with ADHD or Autism might slip through the net as they didn't meet the threshold for CAMHS as they were not mental health matters.

- 10.5.4 A positive relationship with Northumbria Police was also reported especially by the Youth Offending team (YOT). The Police were forthcoming with information and would attend reviews if asked and were available at the end of a telephone if a direct conversation was needed. It had been different with the probation team but a secondment by a probation officer into the YOT had been successful.
- 10.5.5 The importance of keeping officers in the same post over a number of years and reducing the amount of agency staff was also emphasised as long term relationships were invaluable; the senior management structure in the service at the Local Authority was now robust and permanent. The lack of experienced social workers and retaining staff who might be tempted to work for other local authorities who paid more was an issue but the case load had reduced. In response it was reported that significant work had been undertaken by Safeguarding and Children's Services to stabilise the workforce and the benefits of that were already being seen.
- 10.5.6 The dissemination of information regarding major changes within the Council, for example the Regional Adoption Agency and the North of Tyne Collaboration, were not really well known to the front line social workers. The Independent Chair of the NTSCB also believed a challenge was keeping the front line up-to-date with information about what they needed to know due to the high turnover in staff. He noted that the Authority was aware of the issue and suggested that they could look and see how other organisations ensure information is disseminated to all staff in a timely manner.
- 10.5.7 Liquid Logic was still bedding in and areas of improvement had been identified, for example the information recorded on a "child's story" and "outcomes" needed to be improved. It had been recognised by the Local Authority that this was the case.

10.6 Overall

- 10.6.1 As can be seen by the many different aspects of the service referred to above there had been a lot of change within children's services which had led to concern and uncertainty. However, no witnesses had given any indication that the Head of Service and the Senior Management Team as a whole had not acknowledged this or that support had been lacking. It was considered by the Sub Group that the service as a whole had coped with this prolonged period of change well and collaborative working across the service was working well, albeit if communication of changes could be improved.
- 10.6.2 Taking all of the above into account, the Sub Group makes the following recommendations:

Recommendation 6 - Cabinet requests the Head of Health, Education, Care and Safeguarding to ensure that Corporate Parenting Committee receives information on a quarterly basis on the percentage of the initial healthcare assessment which are being completed within the statutory period of 20 working days.

Recommendation 7 - Cabinet requests the Head of Health, Education, Care and Safeguarding to:

- a) ensure that when social workers are referring children for Initial Assessments, they always give the detail (in the referral form) of why the child has become looked after and do not leave it vague e.g. 'family breakdown'. This will assist the doctor who undertakes the Initial Health Assessment, to have a full picture of the circumstances and improve planning for the child;
- b) develop a robust process that ensures the health staff based in the RHELAC team receive a request for an Initial Health Assessment for a child who has become Looked After including the consent form, within the set time-scales so that the child can receive the assessment within the statutory time-scale of 20 working days; and
- c) develop a robust system to ensure that GPs are always notified in a timely manner of when a child ceases to be 'Looked After'.

Recommendation 8 - Cabinet requests the Head of Health, Education, Care and Safeguarding to review the process of dissemination of information to front line staff regarding changes at the strategic level to ensure it is efficient and effective.

11 Conclusion

- 11.1 Whilst there will always be competing priorities and the inevitable debates over budgets and funding the Sub Group was very pleased to note that overall the Authority had very good collaborative working relationships with its statutory partners, its neighbouring local authorities and internally. The trusting relationships developed between organisations, services and officers allowed for criticisms to facilitate improved services and actions and also to provide assurance to the Sub Group that it was unlikely that an issue would be allowed to fall between any gaps. That there was some scope for improvement was reflected in the recommendations but in a challenging environment with competing demands the Sub Group felt satisfied that collaborative working was providing benefit to the Authority. Overall the balance between collaborative working and ensuring the service for North Tyneside residents was the best it could be was right and the effort taken to achieve this balance was not to be underestimated.
- 11.2 The enthusiasm and commitment shown by everyone who gave up their time to attend a meeting with the Sub Group was felt and appreciated by all members of the Sub Group. That this commitment was evident when everyone faced challenges and was busy was to be commended and it gave the Sub Group confidence that collaborative working was being managed effectively and would continue to be so.

12 Acknowledgements

The Sub Group would like to place on record its thanks and appreciation to those officers and representatives of external organisations for their assistance in providing the evidence on which this report is based. A full list of all those individuals who helped the Sub Group with its work is set out in appendix 1.

13 Background Information

The background papers and research reports listed in appendix 2 have been used in the compilation of this report and copies of these documents are available from the Democratic Services Officer.

Acknowledgements

The working group would like to place on record its thanks and appreciation to the following individuals for their assistance to the Sub Group:

North Tyneside Council:

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Inspector Lisa Musgrove, Northumbria Police

List of Background Papers

The following background papers have been used in the compilation of this report and copies of these documents are available from Elizabeth Kerr, Democratic Services, e-mail: elizabeth.kerr@northtyneside.gov.uk Tel: 0191 643 5322

- [Children and Social Work Act 2017](#)
- Elective Home Education - Guidance for Parents and Carers, North Tyneside Council
- Elective Home Education Process Flowchart
- [Get in on the Act: Children and Social Work Act 2017](#), Local Government Association
- [Keeping Children Safe in Education 2018](#)
- *Newcastle Primark kidnap teenagers sentenced*, BBC News Website, published 18 July 2016 accessed 18 December 2018 <https://www.bbc.co.uk/news/resources/idt-5667c315-a69c-4e5d-a683-e4e7771eb04d>
- [North Tyneside Safeguarding Children Board Annual Report 2017/18](#)
- [Ofsted Inspection of services for children in need of help and protection, children looked after and care leavers in North Tyneside 2017](#)
- [Our North Tyneside Plan](#)
- [Working Together to Safeguard Children 2018](#)

Recommendations

1. Cabinet notes that the Children, Education and Skills Sub-committee considers the education role in the MASH vital and recommends continued funding for the seconded post for education in the MASH for future years.
2. Cabinet requests the Head of Health, Education, Care and Safeguarding considers increasing the membership of the MASH to include on a more formal basis:
 - a) a mental health and drug and alcohol and /or CAMHS professional/advocate;
 - b) a Learning disabled advocate; and
 - c) the Dynamic MARAC (multi-agency risk assessment conferences)
3. Cabinet requests the Head of Health, Education, Care and Safeguarding to consider producing a universal 'brand' for use by all partners, including the community safety partnership and businesses in the area, to inform the general public in North Tyneside about what to do if they have concerns about a child or vulnerable adult so that the issue, how to identify it and what to do about it becomes familiar to the general public.
4. Cabinet informs the Head of Health, Education, Care and Safeguarding that the Children, Education and Skills Sub-committee advocates the appointment of an Independent Chairperson for the new local safeguarding arrangements and the inclusion of schools, lay people and the ambulance service in the new arrangements and puts this forward to the North and South of Tyne Strategic Safeguarding Forum.
5. Cabinet reassures itself that the steps taken to "resource sufficient capacity within their own organisation, enabling senior managers and practitioners to work with host authorities to help them improve" for the Tyneside Alliance have left the Authority with sufficient experience and capacity to retain its own high level of performance.
6. Cabinet requests the Head of Health, Education, Care and Safeguarding to ensure that Corporate Parenting Committee receives information on a quarterly basis on the percentage of the initial healthcare assessment which are being completed within the statutory period of 20 working days.
7. Cabinet requests the Head of Health, Education, Care and Safeguarding to:
 - a) ensure that when social workers are referring children for Initial Assessments, they always give the detail (in the referral form) of why the child has become looked after and do not leave it vague e.g. 'family breakdown'. This will assist the doctor who undertakes the Initial Health Assessment, to have a full picture of the circumstances and improve planning for the child;
 - b) develop a robust process that ensures the health staff based in the RHELAC team receive a request for an Initial Health Assessment for a child who has

become Looked After including the consent form, within the set time-scales so that the child can receive the assessment within the statutory time-scale of 20 working days; and

c) develop a robust system to ensure that GPs are always notified in a timely manner of when a child ceases to be 'Looked After'.

8. Cabinet requests the Head of Health, Education, Care and Safeguarding to review the process of dissemination of information to front line staff regarding changes at the Strategic Level to ensure it is efficient and effective.