## EmPower Contextual Safeguarding model and Multi Agency working update

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# The why....

The model has been developed to strengthen our multi agency and multi-disciplinary working and plans with some of our most vulnerable children who are at risk of exploitation, extra familial harm and/or who are at risk of experiencing breakdowns in their family relationships and to reduce the number of children who become looked after as a result.

We will ensure that we have the right practitioners within the teams and links with the right professionals to ensure the right needs of children and families are being met. We will ensure that our workforce is sufficiently trained in trauma informed, relationship based, family safeguarding practice and that they will have good understanding of adolescent development and how to address abuse outside of the home.



### A Case for Change

An *Independent Review of Children's Social Care in England* commenced on 1st March 2021. It sought to review the whole children's social care system and asked the question: "How do we ensure children grow up in loving, stable and safe families and, where that is not possible, care provides the same foundation

As part of this review, on 17 June 2021, a Case for Change was published which calls for system wide reform and a change in practice and culture of child protection and social work. Key findings of the Case for Change include:

- We need to do more to help families
- We need a child protection system that keeps children safe through more effective support and decisive action
- The care system must build not break relationships
- Change will not happen without addressing the system causes in particular, multi-agency arrangements needing to take a multidisciplinary approach to working with children and families and the need for more cohesion between school, health, housing and children's social care.

Most relevant for our justification to rethink how we support our young people is that the case for change findings indicate that the system particularly fails teenagers who face harm outside of the home. Teenagers are the fastest growing group in both child protection and care (Department for Education, 2021) and many experience serious harm or die. There was a 60% increase in the number of 10-19 year olds being treated for knife wounds between 2012/13 and 2017/18 (Campbell & The Guardian, 2019). It suggests that government departments and safeguarding partners have failed to have an effective response to the risks that teenagers face. Different parts of the children's social care, police, education, justice and health systems are responding differently to the same teenagers and accountability for keeping these teenagers safe is lacking and is compounded by a confused multi agency- response.

The former child's commissioner explained how teenagers are trapped in criminal exploitation often desperate to escape, and that parents are "shocked and then exasperated" by the daily calls to one service or another, told repeatedly that nothing can be done to protect their children (Children's commissioner, 2019b)

The findings also refer to the lack of effectiveness of the system and how multi agency partnerships have grown in this vacuum where too much resource is directed to discussing the same children at different meetings. When children have met the threshold of child protection and are at risk of serious harm, we need to be more decisive in providing effective and intensive support to tackle often complex, entrenched and sometimes intergeneration **Laneashire** 

## **Key Principles and Priorities**

Children are at the centre of all we do and evert decision we make. Their engagement, participation and views are paramount.

Our Practice is strengthbased, trauma informed and relationship based Responses to exploitation and relationship breakdowns are complex and require robust multi agency support

Communities are valuable assets and families are the experts and may also need support.

Collaboration with families and partners is key to success Knowledge of exploitation and adolescent development is essential by all supporting the families





## Research

- Hertfordshire CIOC
- Bristol
- ACT Rochdale
- Kent
- Ealing
- Wolverhampton

The key commonality was the multi disciplinary aspect of the team

#### Outcomes and findings from multi disciplinary models Wigan, Rochdale and Greater Manchester

Edge of care -The evaluation report 2017) showed that none of the young people living at home and judged to be 'on the edge of care' came into care, and no young people in care have moved to out of area, high cost or secure placements during the period prior to the evaluation

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Children. Young people and family feedback - Young people have reported improvements in things that matter to them. like relationships. how they feel, and the attainment of personal goals and improved relationships with caregivers.

**Psychologists** -Embedding clinical psychotherapists in multi-agency Teams enabled all practitioners (Police, Social Workers. support workers, nurses, and wider partners) to receive timely support and expertise, to be more child centred and trauma informed in how they work with young people, their families and with other professionals in and outside of the teams. They developed their skills, knowledge, understanding, compet ence and resilience ultimately enabling the standard of support and safeguarding for young people and their parents to be bespoke. meaningful and enriched.

Finances -Across Greater Manchester authorities they were spending £8.9 million on out of borough homes for 130 young people, many with poor outcomes. The evaluation found that for every £1 spent, £5 was saved on accommodation costs alone

Financial contd -Across Greater Manchester Authorities children's records were audited and it was felt that there was substantial evidence that. without the intervention, the young people would have been very likely to have gone into residential care or, in 2 cases, into a secure placement. On the basis of these assumptions, and assuming the project would support 30 clients a year on running costs of £305k, it was estimated that there could be annual benefits of over £1.6m through reduced and avoided accommodation costs.

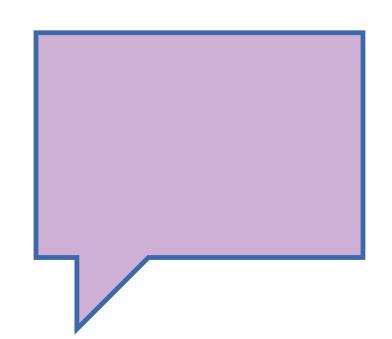
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### **Power 2 Evaluation Wolverhampto 1**

The Power2 Service is a multi-disciplinary, multi-agency partnership between Children's Social Care, Adult Social Care, Wolverhampton Clinical Commissioning Group, Public Health and the Voluntary Sector. It supports vulnerable young people aged 11-25 at risk of exploitation and family breakdown. The service provides a trauma informed approach enabling vulnerable young people and adults to develop a consistent, non-judgemental, one to one relationship with a case/key worker with the relationship being built on trust and stability. As a result of the model, Wolverhampton have seen:

- Reduction in homelessness
- Reduction in reoffending
- Reduction in substance misuse
- Reduction in missing episodes
- Reduction in risks of exploitation
- Reduction in NEET
- Reduction in spend on commissioned Placements and step down in social care status
- Reduction in permanent and fixed term Exclusions and improved attendance
- Reduction in A&E attendance and hospital admissions



## Benefits of the multi-disciplinary approach



Some benefits:

Enhanced and improved outcomes for children and young people, through a range of joined-up services, advice and support being readily available and easily accessible

- Helps to build consensus, strengthen partnership voice, break down
  professional boundaries and parochial attitudes
- Can help to build a more cohesive community approach through united multi-agency practitioners taking greater ownership and responsibility for addressing local needs jointly, thus avoiding duplication or overlap of provision
- Improved co-ordination of services resulting in better relationships, improved referrals and the addressing of joint targets
- Increased level of trust existing between partners/providers in relation to everyone knowing each can and will deliver
- Increased staff morale knowing that they do not work in isolation and that issues and problems can be resolved collaboratively
- More enthusiastic and committed staff who have high expectations of themselves and others.

## **Staffing structure**

EAST TEAM 1		EAST TEAM 2	
1 x Exploitation Social Worker		1 x Exploitation Social Worker	
3 x Social Worker		3 x Social Worker	
1 x Family Support Worker		2 x Family Support Worker	
1 x Missing From Home Worker		1 x Missing From Home Worker	
1 x Targeted Youth Worker		1 x Targeted Youth Worker	
CENTRAL TEAM 1	CENTRAL TEAM 2		CENTRAL TEAM 3
1 x Exploitation Social Worker	1x Exploitation Socia	l Worker	1 x Exploitation Social Worker
3 x Social Worker	3 x Social Worker		3 x Social Worker
1 x Family Support Worker	1 x Family Support Worker		1 x Family Support Worker
1 × Missing From Home Worker	1 x Missing From Home Worker		1 x Missing From Home Worker
1 x Targeted Youth Worker	1 x Targeted Youth Worker		1 x Targeted Youth Worker
NORTH TEAM 1		NORTH TEAM 2	
1 x Exploitation Social Worker		1 x Exploitation Social Worker	
3 x Social Worker		3 x Social Worker	
1 x Family Support Worker		1 x Family Support Worker	
1 x Missing From Home Worker		1 x Missing From Home Worker	
1 x Targeted Youth Worker		1 x Targeted Youth Worker	

1 x Parenting Support Worker, 1x mentor, 1 exploitation nurse, 1 specialist nurse and 1 PACE worker to assist both Teams

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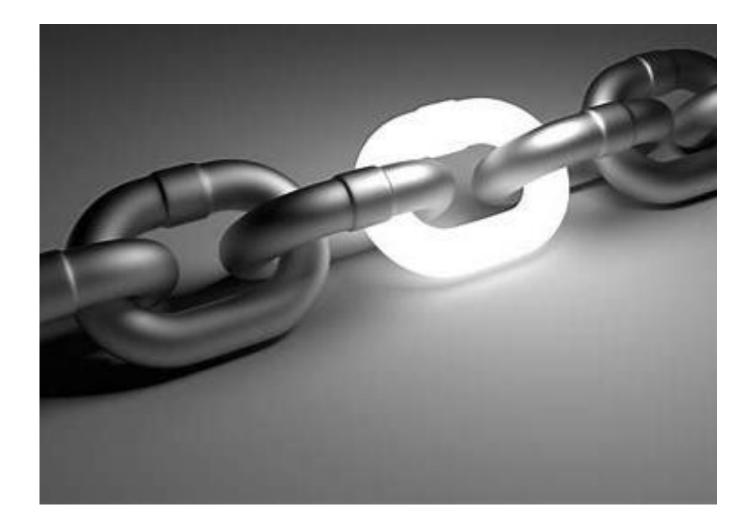
1 x Parenting Support Worker, 1x mentor, 1 exploitation nurse, 1 specialist nurse and 1 PACE (Lancaster children only) worker to assist both Teams

> Lancashire County Council

## Multi disciplinary roles - update

- Social Workers allocated and exploitation
- Child and Family Practitioners
- Parenting Workers
- Targeted Youth Workers
- Mentors
- Speech and Language Therapists
- Substance Misuse Workers
- Clinical Psychologist
- Mental Health Practitioners
- Specialist and exploitation nurses
- PACE workers





### Strengthened links

- VRN
- CYJS
- Inclusion and the virtual school
- Adoption support team
- Scayt
- Police



### CYJS/CS – Turnaround programme – Contextual mentoring pilot

National Prevention & Diversion funding from the MoJ until March 2025. Total grant value of £1,023,397.83 (including an additional £98,579.62 committed May 2023 to ASB hotspot areas.)

Now, three P&D teams based in each locality (North, South/Central, East) designed to build more localised partnerships internally and externally which will last beyond the lift of the funding

Commissioning a third sector provider to deliver a "Contextual Mentoring Pilot"

Utilising a whole-family, strengths-based, trusted relationships approach to reduce contextual risk associated with ASB and Exploitation

Linking in with ED Navigators to ensure a public health approach to supporting children at risk of violence

Enhancing relationships in communities, families and education settings

Support children to adopt pro-social relationships and activities thereby reducing the potential exploitative nature of gang and anti-social peer relationships

Pathways being developed with Lancashire Constabulary and children open to CSC can also access where they meet Turnaround criteria

### Triangulation Child comes to attention for ASB in the community Peer relationships characterised by lack of safety. Exploitation risk increases. Child faces additional Carrying weapons places and spaces may be normalised contextual risk

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#### **Development of Knife Crime Strategy**

- CYJS AND CST ARE DEVELOPING A KNIFE CRIME STRATEGY
- THE STRATEGY WILL DRAW ON THE BEST AVAILABLE EVIDENCE TO PRVENT KNIFE CRIME
- FROM THERE, CYJS AND CST WILL BUILD STAFF SKILLS AND INTERVENTIONS TO STRENGTHEN CHILDREN'S RESILIENCE TO CARRYING KNIVES

#### Voice of the Child and Family

- CHILDREN AND FAMILIES ARE AT THE HEART OF THE RESPONSE TO SYV
- THEY ARE EXPERTS OF THEIR EXPERIENCES AND THEIR VIEWS SHOULD FORM THE CORNERSTONE OF OUR INTERVENTIONS
- CYJS WILL UPDATE THEIR PARTICIPATION STRATEGY TO REFLECT THIS

#### Making Best use of Evidence

- CYJS AND CST WILL MAKE REGULAR USE OF THE YOUTH ENDOWMENT FUND'S TOOLKIT IN DEVELOPING APPROACHES
- WE WILL ADOPT A PUBLIC HEALTH APPROACH TO REDUCING THE RISK OF SYV
- WE WILL CONTRIBUTE TO LOCAL AND NATIONAL RESEARCH TO DRIVE BEST PRACTICE



**Serious Violence Duty** Preventing and reducing serious violence Statutory Guidance for responsible authorities

**England and Wales** 

## Serious violence duty

#### **Reducing Disproportionality**

- CYJS AND CST WILL SHARE DATA ABOUT WHETHER SOME CHILDREN ARE DISPROPORTIONALLY AFFECTED BY SYV
- A WORKING GROUP WILL BE ESTABLISHED TO ANALYSE THE DATA AND PLAN A RESPONSE
- BOTH SERVICES WILL STRIVE TO ENSURE EQUAL ACCESS TO SERVICES AND AN EQUAL RESPONSE FROM THE CRIMINAL JUSTICE SYSTEM

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#### Input to the Development of MASPs

- CYJS AND CST TO CONTRIBUTE TO THE DEVELOPMENT OF MULTI AGENCY SUPPORT PANELS AROUND THE COUNTY
- ENSURE PANELS WHICH DISCUSS CHILDREN ACROSS THE COUNTY ARE APPROPRIATELY MAPPED AND ALIGNED
- CST AND CYJS WILL ATTEND THE COUNTY-WIDE MASPS TO ENSURE CHILDREN ARE OFFERED THE CORRECT SUPPORT FROM THE CORRECT SERVICE