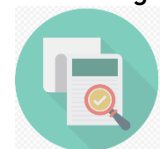


# CSCP multi-agency audit 2021: children at risk of neglect and cross-cutting abuse during the pandemic.



**Purpose:** During the pandemic, the way in which professionals engaged with families was adapted due to the social distancing measures placed to contain the virus. In Camden, a RAG rated risk assessment system promptly commenced to prioritise face-to-face visits and safety plan. As a Partnership, assurance was required in terms of how the partners worked together on cases which featured neglect as a risk factor.

**Method:** The audit was generated to focus on 10 cases which were allocated to services from Early Help to Child Protection between April 2020 – March 2021 for neglect and associated risk factors. The age profile was under 13 years of age. All services working with a family were required to complete an audit form, including services both working with children and adults. These returns were subsequently scrutinised by an independent auditor who collectively reviewed audits received and produce an overview report sharing good practice and learning. A summary of good practice/ areas of learning shared below.



## The independent auditor identified the following as areas of good practice:

- ✓ Strong evidence of good and excellent multi-disciplinary working across the network and around the family being which is integral to the planning and outcomes for the child.
- ✓ Cases are progressed and outcomes for children are improving and when outcomes were not improving, it was recognised, and plans were reviewed.
- ✓ Professionals showed commitment and tenacity in moving things forward to improve circumstances for families.
- ✓ Clear indication that where a child is on a Child Protection Plan or in care proceedings, that the GPs are fully informed and an integral part of the thinking about the child.
- ✓ The audits describe a partnership that is working well together, particularly on high-risk cases.
- ✓ Partners adapted to provide provision of practical support and maintained connectivity and visibility of children/ families. Hybrid contact was established enabling children's plans being progressed.
- ✓ A third of cases reviewed featured domestic abuse as a factor, part of a bigger picture of long-term neglect and emotional harm.
- ✓ It was evident from the audits that a practice model based on the development of purposeful relationships to bring about change is embedded with Children's Social Care, Early Help services, Health visiting and schools.
- ✓ Camden are noted as gold standard across the country due to the high proportion of CP conferences receiving a GP report on time.
- ✓ Robust partnership established with agencies not always involved in multi-agency audits contributing such as adult mental health, housing and GPs.

## Areas of learning identified by Independent Auditor:

1. **Repeat referrals:** 7 out of 10 of the cases selected for the audit were re-referred cases and therefore

further scrutiny of re-referrals was completed to identify if repeat referrals in relation to neglect was disproportionate.

**RESPONSE:** Scrutiny of front door repeat referrals took place and it was found that the repeat referral rate for neglect was not raised as an area of concern and was not disproportionate compared to other categories.



2. **Virtual contact:** one case where auditors felt that virtual contact didn't work as effectively or hindered

the planning. Cases considered high-risk were seen face-to-face during the pandemic and others virtually. **RESPONSE:** Since the time of this report, many services have resumed face-to-face contact with families. During the pandemic partners retained focus on the provision of practical support and on maintaining connection with families and maintain their visibility and connectivity.



**3. Adopting a relational approach:** the audit did not provide clarity on how all services have adopted a relational approach and how this has been understood or used by other partners to secure engagement. **RESPONSE:** Relational safeguarding has been identified as a priority for the CSCP in 2022-24. This will support partners to develop a shared language, ethos and common approach to working with children and families, reflecting on family's origin and history and the impact of this on the family's functioning and approach to support. All partners are encouraged to build open and trusting relationships with families that promote engagement. Partners will look to work with community-based groups to better enable children and families to have a strengthened voice/ ownership of their safeguarding plans.



**4. School Nurse engagement:** for cases involving school nursing, over half were rated as Requires Improvement or Inadequate. It's important to note that during the time of the audit, school nurses were redeployed to support acute settings during the pandemic, which impacted service delivery.



**RESPONSE:** Following the audit, the school nursing service reviewed practice to provide assurance that children's needs are being met. A detailed action plan has been devised to focusing on themes; contact with parents and process in place for escalating non-contact, consideration for Emergency Department attendance and follow up, record keeping, improvements for plans of care and the impact of virtual reviews. Teaching sessions have taken place with frontline staff to consider themes and roles of School Nurses, this will be part a cycle of events to disseminate learning and improve practice.

**5. Strengthening communication with GPs and Early Help:** 3 out of 10 audits suggested that liaison with GPs could be improved when children are known to Early Help services.

**RESPONSE:** A review of current practice regarding liaison with GPs in early help/ non-statutory cases is underway. Early Help are joining the GP Forum to collectively explore options for better information sharing and feeding back to referring agencies.

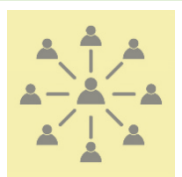


**6. Following up cases which were not brought (WNB) and did not attend (DNA) medical appointments:** 2 out of 10 cases provided no evidence to ascertain whether local Hospitals followed up with the network when a child did not attend a medical appointment.

**RESPONSE:** Local Hospitals have been tasked to reaffirm procedures for involvement and follow up with other agencies when a child does not attend a medical appointment, including virtual appointments.

**7. Housing communication:** Audit found it was extremely positive that Housing were engaged in audits, however, there were communication difficulties in 3 out 10 cases, which delayed housing matters being resolved that impacted the lived experience of children and their families.

**RESPONSE:** Further work will take place to strengthen partners awareness of Housing services and what they offer through briefings, training and engagement at CSCP meetings.



**8. Multi-agency audit form and process:** **RESPONSE:** The CSCP are reviewing the multi-agency audit process to streamline for 2022-23. This will include updating the audit form to provide greater emphasis on audit theme, make the form more accessible to all agencies involved in the audit process and offering increased guidance for all agencies completing the form.



Multi-agency audits are used as a dynamic tool to make system improvements. The CSCP is open to learning and will respond accordingly to ensure that practitioners are well supported to work with safeguarding cases. A multi-agency working group has been established to take forward the recommendations raised in this audit and regular updates will be provided to the Quality Assurance Subgroup to ensure that progress is being made and that outcomes for children are improved.