



# Action Plan to address the findings from the Joint Targeted Area Inspection on Criminal Exploitation of Children

**July 2022 – December 2023**

Progress updates from December 2022



Cheshire East Safeguarding  
Children's Partnership

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# Introduction

This is our partnership action plan to address the findings from the joint targeted area inspection (JTAI) of criminal exploitation of children in Cheshire East which took place in July 2022. All the findings from the inspection are summarised in a letter which is available on the [Ofsted website](#). The inspection demonstrated that there were areas of our work that needed significant improvement to effectively protect children and young people at risk of exploitation. This plan sets out how we will do this and is our written statement of action. It will be submitted to Ofsted by the 5 January 2023 as set out in the letter dated 26 September 2022.

As a partnership we are committed to improving outcomes for children and young people. This plan responds to the areas inspectors identified in the inspection letter as areas for priority action, areas we need to improve, and the wider inspection findings.

The plan starts with children and young people’s voices and lived experiences, as it is essential that these underpin all areas of our work. It then follows the child’s journey. The plan is split into the following sections:

1. Children and young people’s voices and lived experience
2. Identifying needs and information sharing
3. Swift support for children and young people at risk
4. Protecting children and young people at risk
5. Supporting good practice
6. Strategic Leadership.

Our plan sets out the actions we will take; some of these are multi-agency actions which will be led by the Safeguarding Children’s Partnership, for example multi-agency training or guidance, and some are single agency improvements, for example on how practitioners record within their own systems or improving service capacity. Some action owners are a partnership group, which reflects that the action needs to be collectively owned and delivered; the person ultimately responsible for delivering this action is the chair of the group.

Each action is rated as red, amber, or green to indicate progress:

| Colour | Definition  |
|--------|---|
| Red    | Delayed or at risk of not being achieved within timescale |
| Amber  | In progress and on track to be delivered within timescale |
| Green  | Action completed  |

We know that it is not enough to complete the actions, we need to evaluate that these are having the right impact.

We have set up dedicated governance arrangements to scrutinise progress against this plan. This includes a chief officers’ group (called the JTAI Executive Oversight Board) consisting of the Chief Constable of Cheshire Constabulary, the Chief Executive of Cheshire East Council, the Chief Nurse of NHS Cheshire and Merseyside, and the Place Director for Cheshire East. This is supported by an independently chaired

JTAI Improvement Board at the strategic level, and a JTAI MASA Improvement Group who are focusing on the delivery of the plan. This ensures improvements in relation to the JTAI are prioritised, without taking capacity or focus away from other areas of business within the Safeguarding Children’s Partnership. It ensures there is a partnership approach to improving services and scrutinising progress at all levels. These groups are also supported by scrutiny arrangements within each agency.

Progress against the plan is reviewed monthly by all three partnership JTAI groups to ensure that we stay on track and continually evaluate the impact our actions are having on outcomes for children and young people.

We will use a variety of sources to assess our impact, including:

- Listening to children and young people’s experiences
- Single agency and multi-agency audits
- Performance information
- Listening to practitioners and managers across the partnership
- Observing practice
- Recruitment and retention information
- Training attendance and evaluations
- Independent review from the independent scrutineer.

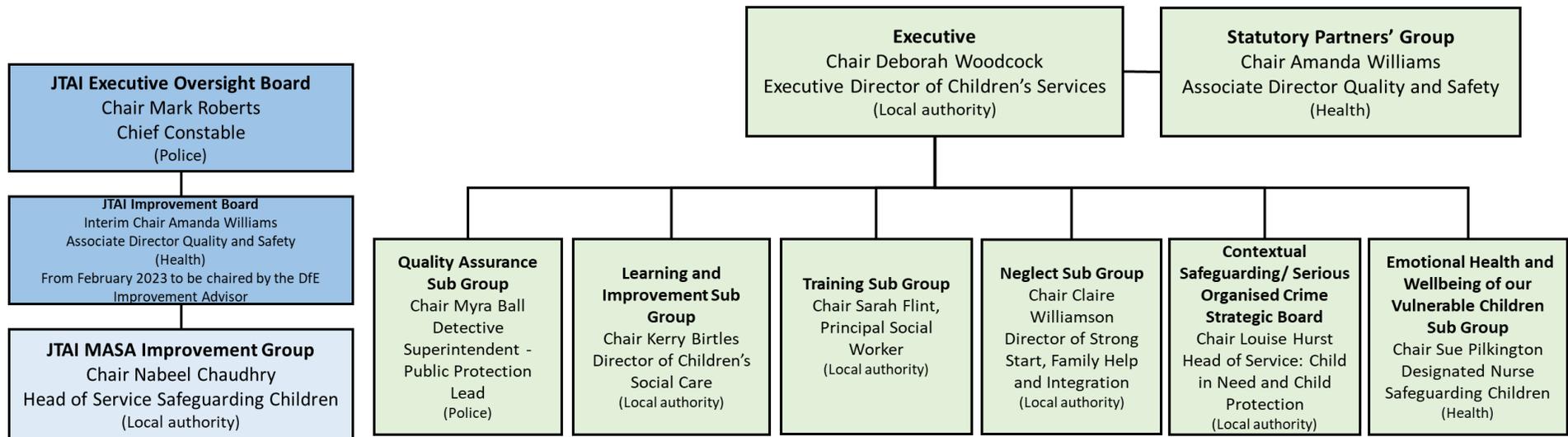
Once we have enough evidence to show that a priority area for action or a finding from the inspection has been addressed, this will be reported to the JTAI Improvement Board. The JTAI Improvement Board will review this and will agree, as a partnership, whether we are satisfied that this has been fully

addressed. When it has been agreed that an area has been fully addressed, the Board will also agree how this will continue to be monitored outside of the JTAI governance arrangements to ensure that progress continues to be sustained.

### Glossary

| Acronym | Meaning   |
|---------|---|
| ADHD    | Attention deficit hyperactivity disorder          |
| CP-IS   | Child Protection Information System               |
| CS/SOC  | Contextual Safeguarding/Serious Organised Crime   |
| CSC     | Children's Social Care                            |
| CSE     | Child sexual exploitation                         |
| CWP     | Cheshire and Wirral Partnership                   |
| ECT     | East Cheshire Trust                               |
| ED      | Emergency Department                              |
| IFD     | Integrated Front Door                             |
| JTAI    | Joint targeted area inspection                    |
| LSCP    | Local Safeguarding Children Partnership           |
| MASA    | Multi-agency Safeguarding Arrangements            |
| MCHFT   | Mid Cheshire Hospitals Foundation Trust           |
| MFH     | Missing from home                                 |
| MLE     | Managed Learning Environment                      |
| PST     | Problem Solving Team                              |
| RAG     | Red Amber Green                                   |
| SGU     | Safeguarding Governance Unit                      |
| VH      | Vulnerability Hub                                 |
| VPAs    | Vulnerable Person Assessments                     |
| WCHCFT  | Wirral Community Health and Care Foundation Trust |

# Governance Arrangements – Safeguarding Children’s Partnership



**Key**

- Sole focus on scrutiny of JTAI improvements
- Sole focus on delivery of JTAI improvements

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# JTAI Action Plan

Date of progress updates: 14 December 2022

## 1. Children and young people's voices and lived experiences

### 1.1 Partnership practice

| <b>What needs to improve</b> | The consistent recording and analysis of children's voices across all agencies' records.  |                |              |     |   |
|------------------------------|---|----------------|--------------|-----|---|
| <b>What inspectors found</b> | <p>This training deficit [in relation to multi-agency training on exploited children], in part, leads to a general lack of consistent recording and analysis of children's voices and their reasons for going missing within case records across the partners.</p> <p>Children presenting at the emergency department of Cheshire East NHS Trust are not having their voices heard.*</p> <p><i>*Please note actions relating to improving practice within East Cheshire Trust are included in section 2.3</i></p> |                |              |     |   |
| Ref                          | Action<br><i>What we will do</i>  | Action Owner   | Due by       | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
| 1.1a                         | Embed a culture across the partnership of working together with children and young people and seeking and listening to their voices and experiences, starting with a focus on exploitation. Share this message through key communications, senior managers modelling working together with children and young people and ensuring activity at all levels is focused on impact on outcomes for children and young people.  | LSCP Executive | 13 July 2023 | A   | <p>Since the inspection, senior leaders have been focused on the importance of impact on outcomes for children and young people - and have continually shared this message in discussions with partners, managers, and frontline staff.</p> <p>Working together with children and young people and listening to their lived experiences will be a key message at the child conference exploitation conference on 31 January. A young person will be attending the conference to speak on their experiences.</p> |

|      |   |  |                  |   |   |
|------|---|--|------------------|---|---|
| 1.1b | Develop partnership guidance on how to capture and record the voice of children and young people and analyse what this is telling us about their lived experience.  | LSCP task and finish group on voice of the child | 28 February 2023 | A | Work is underway to develop this guidance.  |
| 1.1c | Deliver a campaign within the constabulary to highlight the voice of children and young people.   | Detective Chief Inspector Littlewood             | 1 December 2022  | G | Cheshire Constabulary have launched a 12-month campaign to improve the voice of child updates provided by frontline officers. A video from an officer's perspective has been created on what the voice of the child means to them. The campaign will see activity each month including consolidation of learning via questionnaires and audit. A child centred policing strategy has been launched utilising national research from the Vulnerability and Knowledge Practice Programme.   |
| 1.1d | Hold masterclasses for social work practitioners on recording the child's voice and reflecting on their experiences to enable practitioners to understand the impact of their children and young people's situations on their lives.      | Principal Social Worker                          | 7 November 2022  | G | <p>Masterclasses on meaningful recording of the child's voice took place in practice week from 7-11 November 2022. Some feedback from the practitioners who took part in the training included:</p> <p>"Brought into perspective what we are writing e.g., do our case notes really reflect what the child is actually saying?"</p> <p>"I'm going to try and write the pen picture with the child from now on";</p> <p>"Really powerful, made me think when mum and dad are shouting, how must that feel for the child?"</p> <p>"Will have more of a focus on the feelings the child is experiencing, not just describing what is happening".</p> |
| 1.1e | Review Trust and health provider policies and pathways in view of child exploitation and safeguarding to ensure these include how to capture the child/ young person's and family voice and the importance of understanding the impact of | All Health Safeguarding Leads                    | 30 November 2022 | G | Safeguarding policies, pathways and training packages have been reviewed within East Cheshire Trust (ECT), Mid Cheshire Hospitals Foundation Trust (MCHFT), Cheshire and Wirral Partnership (CWP), Wirral Community Health and Care Foundation Trust (WCHCFT), Change Grow Live (alcohol services), and sexual health. The services will also complete  |

|      |   |                             |               |   |  |
|------|---|-----------------------------|---------------|---|--|
|      | exploitation on children and young people.  |                             |               |   | <p>their annual Children Act Section 11 safeguarding children's audit which are due for submission on 31 January 2023.</p> <p>The child/ young person's voice is audited through the safeguarding daily assurance checks/audits. All audits evidence improvements.</p> <p>The Designated Doctor and Designated Nurse have dip sampled audits of supervision notes and evidence of the voice of the child, which found that impact for the child/ young person are clearly present.</p> |
| 1.1f | Thematic report, including performance and joint case reviews, on the quality of recording children and young people's voices, to be completed to evaluate the impact of work in this area. | JTAI MASA Improvement Group | 30 April 2023 | A | First thematic report planned for April 2023.  |

## 1.2 Strategic oversight and understanding of children's lived experiences

|                              |   |                        |                 |            |  |
|------------------------------|---|------------------------|-----------------|------------|--|
| <b>What needs to improve</b> | LSCP strategic oversight and understanding about exploited children's experiences, including through the quality, accuracy and effectiveness of audits.   |                        |                 |            |  |
| <b>What inspectors found</b> | <p>There is insufficient senior leadership analysis of the underlying complexities or understanding of the day-to-day experiences of these vulnerable children.</p> <p>Senior leaders across the wider partnership have failed to evaluate and understand exploited children's lived experiences.</p> <p>Evaluation is not based on a systematic analysis of the impact of frontline work across services; instead, there is too much focus on process.</p> |                        |                 |            |  |
| <b>Ref</b>                   | <b>Action</b><br><i>What we will do</i>   | <b>Action Owner</b>    | <b>Due by</b>   | <b>RAG</b> | <b>Progress and impact to date</b><br><i>What we've done so far and evidence of what difference this has made</i>  |
| 1.2a                         | The independent scrutineer to review the current quality assurance and learning methodology and support the LSCP to have an   | Independent Scrutineer | 3 February 2023 | A          | The first session for this work took place on 16 November 2022. The proposed approach and scope for this work was included in the independent scrutineer's presentation to the LSCP Executive on 12 December 2022. |

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|      | improved understanding of the lived experience of children, young people, and their families.   |   |   |   |  |
| 1.2b | Implement the recommendations from the independent scrutineer's work on quality assurance.  | LSCP Executive                          | To be determined based on the recommendations | A | To be completed once the independent scrutineer has completed their recommendations.   |
| 1.2c | Develop an annual programme for senior leaders to visit and speak to children and young people about their experiences. To focus on children and young people at risk of exploitation initially.                  | LSCP Business Manager                   | 28 February 2023                              | A | Work on the developing the programme is underway.  |
| 1.2d | LSCP Executive meetings to have a standing item on children and young people's lived experiences to ensure meetings remain focused on impact and outcomes for children and young people.                          | LSCP Business Manager                   | 8 February 2023                               | A | A standing item has been agreed to start from the LSCP Executive in February 2023. Plans are being put in place to explore arrangements for involving children and young people. Arrangements were discussed during the LSCP Executive meeting on 12 December. |
| 1.2e | Determine the programme of LSCP audits for the year, including audits on the front door and children and young people at risk of exploitation.  | Chair of Quality Assurance subgroup     | 12 December 2022                              | G | The audit plan was scrutinised by the Quality Assurance subgroup on the 24 November and was agreed in the LSCP Executive on the 12 December.   |
| 1.2f | Carry out a multi-agency audit of children and young people at risk of exploitation as part of the multi-agency audit programme to evaluate the impact of improvements on outcomes for children and young people. | Chair of Quality and Assurance subgroup | 30 June 2023                                  | A | This is included within the LSCP audit plan.   |

## 2. Identifying needs and information sharing

### 2.1 Quality and timeliness of police recording and information sharing

| <b>Priority Action</b>       | The police should improve quality and timeliness of recording on systems and prompt intelligence-sharing with partners about exploited children at risk of significant harm and those missing from home and care.   |                                      |                 |     |  |
|------------------------------|---|--------------------------------------|-----------------|-----|--|
| <b>What inspectors found</b> | Inspectors identified examples where crucial police intelligence concerning children at risk of exploitation was not being shared promptly enough, due to policing capacity.  |                                      |                 |     |  |
| Ref                          | Action<br><i>What we will do</i>  | Action Owner                         | Due by          | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
| 2.1a                         | Instruct all staff on the consistent use of Public Protection templates within Niche to ensure recording is accurate and timely, paying particular attention to:<br>a) Child sexual exploitation (CSE) screening tools<br>b) Missing from home (MFH) problem profiles<br>c) Strategy meetings | Detective Chief Inspector Littlewood | 20 October 2022 | G   | Formal direction regarding MFH and CSE screening was issued on 18 September 2022. Detailed focus groups have and are taking place on child exploitation flagging, with the last one being held on 31 December 2022. The force has reviewed the application and consistency of Niche reporting mechanisms. This position has allowed scrutiny of recording on police systems to enable one point of reference for matters affecting children who are missing from home, screening tools, and strategy meetings.<br><br>In a review of strategy meetings that occurred during October 2022, 21 of 25 had the pre-requisite template. Of the 4 remaining: 3 are not yet closed and 1 is a duplicate. This is high assurance that there is consistency in the use of templates. A review of the use of missing from home problem solving profiles has been completed by Inspector Jim Adams which also demonstrated that consistency is being applied. |
| 2.1b                         | Review the child sexual exploitation flagging process to ensure information is recorded appropriately.  | Detective Chief Inspector Littlewood | 1 December 2022 | G   | A multi-agency review of the children identified as at risk of child sexual exploitation using flags across all services was completed. All agencies were satisfied with the flagging process.   |

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|------|--|--------------------------------------|-----------------|---|--|
| 2.1c | Examine and review the daily system for sharing intelligence through the VPA and exploitation screening tools and ensure that this is shared in a timely way.  | Detective Chief Inspector Littlewood | 1 December 2022 | G | <p>The force has included an interim measure of notification of missing children to the local authority. This measure will be in place until an IT fix can be secured (likely June 2023). Governance is in place for the Vulnerability Hub (VH) to share every morning the details of children currently missing; the performance of this is managed by a daily police operational focus meeting. When the child is found/returned a notification is completed through the VPA mechanism and using missing from home problem solving team submissions into the commissioned missing from home service 'We are with you'. This allows We are with you to complete their statutory intervention.</p> <p>Timeliness and scrutiny of VPA sharing into the integrated front door has been progressed since June 2022. VPA submissions to police remain stable at 30-50 per day and the yearly number into the front door approximately 2,900. The Constabulary will be moving to a 7 day a week service from April 2023 to manage the spikes in VPAs received on Monday and Tuesday (due to no weekend working). Current audit suggests that for the first 14 days in November, we had 7 days in which we were dealing with VPAs within 24 hours.</p> |
| 2.1d | Examine and scrutinise monthly missing from home data sets for any deficiencies in information sharing or increase in demand. Map this against the daily notifications that police sent to children's social care. | Detective Superintendent Ball        | 31 January 2023 | A | <p>Monthly tactical missing from home and child sexual exploitation data set has been developed. A prototype of the document has been shared with JTAI MASA Improvement Group who agreed that this provides good oversight of our population. This will be shared through the CS/SOC Strategic Board following sign off by police senior analyst and head of crime / intelligence.</p>   |
| 2.1e | Introduce a daily multi-agency information sharing meeting in the integrated front door to support effective intelligence sharing between agencies.  | Detective Chief Inspector Littlewood | 17 October 2022 | G | <p>The daily multi-agency information sharing meeting was introduced from 17 October 2022. The multi-agency team review VPAs in the meeting and agree what action is needed. Feedback from service managers is positive - awaiting formal review.</p>  |

## 2.2 Identifying children at risk of exploitation within emergency departments

**Priority Action** Health leaders should ensure that children at risk of exploitation are identified when they attend an emergency department and their needs are consistently analysed using the LSCP-approved screening tool, with findings swiftly communicated to multi-agency partners.

| Ref  | Action<br><i>What we will do</i>  | Action Owner  | Due by           | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
|------|---|---|------------------|-----|--|
| 2.2a | Ensure that health staff who work in emergency departments (ED) are equipped with the knowledge and skills to recognise and respond to children who are at risk of exploitation through a range of methods, including staff briefings, supervision and training. Promote the use of the pan-Cheshire child exploitation screening tool. | MCHFT and ECT Named Nurses and Designated Doctors for Safeguarding Children | 30 November 2022 | G   | <p>Each Trust has delivered targeted ED training for ED staff including use of the screening tools. East Cheshire Trust (ECT) and Mid Cheshire Hospitals Foundation Trust (MCHFT) have included child exploitation into level 3 safeguarding training.</p> <p>Training PowerPoints have been reviewed and compliance is monitored quarterly. As of 30 November 2022, ECT staff are at 85% compliance and MCHFT are at 83%. Both trust safeguarding teams have a level 3 safeguarding training improvement plan in place and there are extra sessions being facilitated specifically for ED staff.</p> <p>All training PowerPoints include current information regarding recognition and response to child exploitation.</p> <p>Both ECT and MCHFT Named Nurses report an increase in the use of ED staff using the pan-Cheshire exploitation screening tool. MCHFT and ECT have implemented revised ED documentation which includes a specific child exploitation question which prompts to complete the screening tool if indicated.</p> <p>Both trusts have increased their safeguarding supervision sessions within ED and the Designated Doctor for safeguarding children is available for consultation, case management and complex case debrief.</p> <p>Both trusts have developed a safeguarding briefing available for staff, these include examples of good practice, learning from practice learning reviews and local safeguarding updates.</p> |

|      |   |   |                 |   |   |
|------|---|---|-----------------|---|---|
|      |   |   |                 |   | <p>ECT and MCHFT safeguarding team members attend their EDs on weekdays to go through cases and discuss referrals made with staff.</p> <p>Alert flags have been added to the electronic patient system to prompt medical staff to check that the safeguarding risk assessment has been completed and child exploitation considered as part of the medical consultation.</p>   |
| 2.2b | <p>Monitor and evaluate the impact on practice through the partnership JTAI groups, including:</p> <ul style="list-style-type: none"> <li>• that ED records, CP-IS and safeguarding referrals evidence timely and consistent information sharing to multi-agency partners for children and young people at risk of exploitation</li> <li>• use of exploitation screening tools in EDs via monthly audits with the designated nurse team scrutiny and oversight.</li> <li>• that safeguarding flags are correctly put on the ED system to highlight any child identified at risk of exploitation.</li> </ul> | MCHFT and ECT Named Nurses and Designated Doctors for Safeguarding Children | 31 January 2023 | A | <p>ECT undertake daily Clinical Excellence Framework Audits. Learning is fed back to the individual clinician/nurse for positive feedback or areas for development. A quarterly audit report was received at the Safeguarding Assurance meeting on 26 October 2022. All audits evidence improvements. Of the 61 ED cards relating to paediatric attendances to the department that were audited in quarter 2, the existing risk assessment had been completed in 53 (87%) cases. This is a significant improvement from Q1 where 11 out of 36 (30%) had been completed.</p> <p>MCHFT safeguarding ED audits are reported into the monthly Trust Safeguarding meeting, which is attended by all the Trust department leads, representatives from the Integrated Care Board and adult social care. Awaiting the audit data for MCHFT to demonstrate improvement and impact.</p> <p>ECT and MCHFT safeguarding teams complete weekly auditing of the safeguarding risk assessments which are fed back to the ED team to drive improvements in practice and continue to evidence compliance with completion of the ED risk assessment.</p> <p>The Designated Nurse and Designated Doctor for Safeguarding Children visited ECT and MCHFT emergency departments on 9 November 2022 and dip sampled ED records. The dip sample evidenced there was a clear analysis of risk for children presenting to both EDs. There was also a good use of chronologies and evidence of timely information sharing. ED staff in both trusts were able to demonstrate the use of the pathways, the new updated ED documentation and the use of the liaison safeguarding team.</p> <p>The use of safeguarding flags has been audited across all health providers and flags have been appropriate and up to date.</p> |

## 2.3 Identifying and responding to children and young people with additional complex needs

|                              |   |
|------------------------------|---|
| <b>Priority Action</b>       | East Cheshire NHS Trust should improve wider safeguarding practice in emergency departments so that risks to children with additional complex needs are identified, understood and responded to.  |
| <b>What inspectors found</b> | <p>Children at risk of criminal and sexual exploitation are not consistently having their needs and risks considered on presentation at emergency departments.</p> <p>Furthermore, children presenting at the emergency department of Cheshire East NHS Trust are not having their voices heard.</p> <p>Staff need to be more curious so that broader safeguarding needs are identified, understood and responded to quickly.</p> |

| Ref  | Action<br><i>What we will do</i>   | Action Owner                             | Due by            | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
|------|--|--|-------------------|-----|--|
| 2.3a | Ensure emergency department (ED) staff are equipped with the knowledge and skills to recognise and respond to children who are at risk of exploitation through a range of methods, including staff briefings, morning huddles, feedback following safeguarding team reviews, group supervision and training. | Head of Safeguarding East Cheshire Trust | 30 September 2022 | G   | <p>Immediately following verbal feedback from the JTAI, the safeguarding team arranged to attend departmental meetings for Band 5, 6 and 7 staff to discuss child safeguarding and areas of learning from the JTAI. Group safeguarding supervision is now provided to staff through these meetings to support learning and reflection on practice. Attendance of staff at these meetings will be reviewed quarterly and staff who have not attended these meetings and accessed supervision will be followed up by the safeguarding team.</p> <p>The safeguarding team attended the 7.30 and 4.30 safety briefings in the department daily (Monday – Friday) for 3 weeks following the inspection, to raise awareness of the various forms of exploitation, risk indicators, the pan-Cheshire child exploitation screening tool, and referral pathways.</p> <p>The team continues to attend the 7.30 and 4.30 safety briefs once a week to raise awareness of professional curiosity, ongoing learning from the JTAI - including capturing the voice of the child, and the national Safeguarding review following the deaths of Star Hobson and Arthur Labinjo-Hughes.</p> <p>The Safeguarding team also attends the daily 9am huddle/handover (Monday – Friday) to support staff with professional curiosity,</p> |

|      |   |  |                  |   |   |
|------|---|--|------------------|---|---|
|      |   |  |                  |   | capturing the voice of the child, risk assessment and decision making. This is also used to feed back cases where additional learning is required or examples of good practice. Case examples have been anonymised and used to inform 'bite size' training sessions provided at the early morning and afternoon safety briefs and huddles in the ED, and in supervision sessions.   |
| 2.3b | For every child that is discharged from the ED, the safeguarding team to review whether all concerns have been responded to appropriately and take action where necessary to ensure all safeguarding concerns are responded to. | Head of Safeguarding East Cheshire Trust | 28 November 2022 | G | <p>For every child that is discharged from the ED, the safeguarding team access the records and review whether appropriate risk assessments have been completed and whether all concerns have been responded to appropriately. The actions from the safeguarding team are now included within the medical documentation so there is a clear record of the actions taken as a result of this review.</p> <p>Every child / young person's attendance at the ED is checked for safeguarding flags, frequent attendances and triaged as either:</p> <ul style="list-style-type: none"> <li>• Requiring further safeguarding intervention, and assessed to see whether any additional information and action is required</li> <li>• Liaison with no further action required - routine information sharing to School Nurse /Health Visiting hub.</li> </ul> <p>In cases when the child left before clinical assessment, self-discharged or if insufficient information is documented on the GP letter, the ED card is reviewed for triage information to ascertain whether further action is required. The team gather further information and share information with agencies as appropriate. Any action taken is shared with the school nurse, health visiting hub and the safeguarding team. The safeguarding team also update the GP letter with actions taken by the team which is then printed for inclusion in the ED records.</p> |
| 2.3c | Emergency department documentation to be redesigned and rolled out to teams to support good practice.   | Lead Nurse ED                            | 1 December 2022  | G | <p>The ED card has been revised to include prompts that support the recording of professional curiosity.</p> <p>The safeguarding risk assessment has been reviewed and updated to include guidance and prompts about next steps to be taken by staff following identification of risk factors, use of the child exploitation and domestic abuse screening tools and onward referral pathways.</p>   |

|      |  |  |                 |   |  |
|------|--|--|-----------------|---|--|
|      |  |  |                 |   | The new documentation was implemented on 21 November 2022.   |
| 2.3d | Medical staff documentation process / template to be reviewed and updated to ensure that this accurately records safeguarding concerns, professional curiosity, and actions taken. Ensure that a copy of the GP letter which provides a summary of the medical care provided is added to the patient's ED card following discharge from the department to provide a complete record. | Clinical Lead ED   | 7 November 2022 | G | <p>Medical staff documentation process and template has been reviewed and updated. The Clinical Lead for ED, and the Consultant leading on child safeguarding in the department have both discussed expectations in relation to the standard of medical staff documentation at the ED Consultant meeting and the ED Governance meetings in August and September 2022.</p> <p>Admin support has been identified from 7 November 2022 for filing the GP letters to ensure these are consistently included within the patient's ED card.</p>  |
| 2.3e | Single agency audits (including the Clinical Excellence Framework audit) to be reinstated, to assess the impact of improvements on outcomes for children and young people.   | Head of Safeguarding, East Cheshire Trust, and Lead Nurse ED | 31 October 2022 | G | <p>In addition to the safeguarding team's daily review of ED documentation for children and young people's attendances to ED, the safeguarding team has established a robust programme of audit to monitor compliance with safeguarding standards and requirements. The team has developed a tool to guide audit in the department which mirrors the tool used on the paediatric ward and includes review of evidence of professional curiosity and the voice of the child.</p> <p>Oversight of medical staff documentation standards is maintained by the Clinical Lead for ED, who audits 5 children's records each day when on duty. Feedback from audits is provided individually via huddles.</p> <p>Clinical Excellence Framework audits are completed daily in the ED by the Senior Sister, with assurances regarding standards and actions to be taken being provided to the Deputy Head and Head of Nursing for the Directorate. This is embedded in practice within the department. The audit is undertaken by the Band 7 nurse in charge to provide assurance regarding the completion of risk assessments. The safeguarding team are also undertaking this daily and findings are fed back to individual staff.</p> <p>These audits are being used to support learning, practice development and compliance with the expected standards.</p> |

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|  |  |  |  |  | <p>Audits in November show improvements in practice. Of 22 cases audited:</p> <ul style="list-style-type: none"> <li>• 20 (91%) children had a safeguarding risk assessment</li> <li>• 20 (91%) evidenced that the CP-IS system had been checked</li> <li>• 17 (77%) showed clear planning for children</li> <li>• 20 (91%) the safeguarding team felt the discharge plan adequately safeguarded the children. Further action was taken by the safeguarding team for to safeguard the remaining two children.</li> <li>• Of the 16 children where it would have been appropriate for them to be seen alone, 14 were seen alone (88%).</li> </ul> <p>A quarterly summary audit report will be reported to the Safeguarding Assurance Committee on 21 December.</p> |
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### 3. Swift support for children and young people at risk

#### 3.1 Front door

|                              |  |
|------------------------------|--|
| <b>Priority Action</b>       | All partners in the integrated front door and local authority social work teams should ensure that exploited children requiring statutory intervention receive it swiftly from all agencies.   |
| <b>What needs to improve</b> | Children missing from home and at risk of exploitation are quickly and consistently identified by the multi-agency integrated front door. Prompt and updated action planning by the multi-agency child exploitation and integrated front door weekly meetings that demonstrates reduced risks to children.   |
| <b>What inspectors found</b> | Significant harm thresholds for exploited and missing children are not rigorously evaluated, or action plans put in place following integrated front door meetings that address risk effectively. For instance, some children who met threshold for a child protection strategy meeting were not identified as such and so waited too long to have their needs risk assessed and investigated. |

| Ref  | Action<br><i>What we will do</i>  | Action Owner  | Due by       | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
|------|---|---|--------------|-----|---|
| 3.1a | <p>All exploitation screening tools received by the front door will be reviewed within 24 hours and managed as a contact, in line with <a href="#">Working Together 2018</a>. This involves partnership information gathering, analysis by an experienced social worker and management approval of the most appropriate course of action.</p> <p>A decision will be made on the same day either to progress to a referral to children's social care and allocated to a social worker or into early help and prevention and allocated to an early help</p> | Head of Service for Child in Need and Child Protection, Cheshire East Council | 13 July 2022 | A   | <p>From 13 July 2022 (during inspection) the process was changed to ensure all exploitation screening tools received into the front door are required to be reviewed within 24 hours and managed as a contact. This involves partnership information gathering, analysis by an experienced social worker and management approval of the most appropriate course of action.</p> <p>Decision should be made on the same day either to progress to a referral to children's social care and allocated to a social worker or into early help and prevention and allocated to an early help practitioner.</p> <p>Although the new process is in place, this action is coded as amber as dip sampling has identified that although all exploitation tools received by the front door are opened as a contact on the same day, due to challenges with staffing capacity not all are reviewed within 24 hours. Performance in this area will continue to be reviewed on a regular basis by fortnightly front door dip samples. As of 28 November, 77%</p> |

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|      | practitioner. Statutory intervention commences immediately including a visit to the child and the initiation of a child and family assessment, and specific risk mitigation now begins without delay.   |   |                  |   | screening tools were reviewed within 24 hours. This action will remain amber until performance is at 95% or higher.<br><br>Performance is monitored on twice a month by the Director of Children's Social Care and shared monthly with the JTAI partnership groups. |
| 3.1b | Social work teams will receive police intelligence, VPAs and screening tools on the same day they are submitted to the integrated front door rather than being disseminated at the integrated front door meeting to ensure that swift action is taken at the point of identification of new risk. | Head of Service for Child in Need and Child Protection, Cheshire East Council | 13 July 2022     | G | Social work teams now receive police intelligence, VPAs and screening tools on the same day they are submitted to the integrated front door which ensures that swift action is taken at the point of identification of new risk.                                    |
| 3.1c | Introduce a requirement for a strategy meeting to be held for all young people who are missing for more than 48 hours. This will ensure that these young people receive coordinated multi-agency support.   | Head of Service for Child in Need and Child Protection, Cheshire East Council | 31 July 2022     | G | This requirement has been introduced and strategy meetings have increased as a result. A fortnightly performance update will be provided to ensure compliance in this area.   |
| 3.1d | Develop practice guidance 'Expectations for a good quality contact' to support frontline practitioners in the integrated front door to support decision making.   | Head of Service for Child in Need and Child Protection, Cheshire East Council | 31 October 2022  | G | Completed and shared with the team. This is also part of the induction for new team members.  |
| 3.1e | The safeguarding service manager will offer challenge and support to the group of partnership practitioners who undertake monthly dip samples on themed areas in the front door. These dip  | Head of Service for Children's Safeguarding, Cheshire East Council            | 30 November 2022 | G | The safeguarding service manager joined the audit group on 10 November 2022 and is part of the group that meets every other Thursday to focus on themed areas. The first dip sample on the 10 November was on exploitation.   |

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|      | samples will include a focus on child exploitation.  |   |                |   |  |
| 3.1f | The weekly integrated front door meeting will retrospectively review the immediate safety planning for children at risk of exploitation following receipt of a screening tool and a contact. | Head of Service for Child in Need and Child Protection, Cheshire East Council | 1 October 2022 | G | The weekly integrated front door meeting now retrospectively reviews the immediate safety planning for all children at risk of exploitation following a screening tool being received a contact completed. This reviews and monitors that the risk to children has been identified by statutory agencies swiftly and that safety planning has been put into place without delay. This also ensures that actions are owned by partner agencies with clear timescales. |

## 3.2 Strategy meetings

### What needs to improve

The quality and effectiveness of multi-agency strategy meetings across teams and services for children at risk of exploitation.

| Ref  | Action<br><i>What we will do</i>  | Action Owner  | Due by           | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
|------|---|---|------------------|-----|--|
| 3.2a | Establish a rota for police attendance at strategy meetings to ensure strategy meetings can take place swiftly. | Safeguarding Detective Inspector  | 1 September 2022 | G   | A rota is in place for police attendance at strategy meetings to ensure strategy meetings can take place swiftly. Feedback from the team has been that it's been easier to arrange meetings. |
| 3.2b | Refresh the expectations on strategy meetings with the partnership practitioners.                               | Head of Service for Child in Need and Child Protection, Cheshire East Council | 7 November 2022  | G   | Partnership practitioners asked on 7 November 2022 to ensure that they review the section 47 guidance, so they fully understand the purpose and impact of strategy discussions.              |
| 3.2c | Ensure that minutes from strategy discussions are shared with all partners within timescales.                   | Head of Service for Child in Need and Child Protection, and Head of Service   | 31 December 2022 | A   | Teams have been reminded about the requirement to do this. An audit has been completed to assess the percentage of minutes shared within 10 days:  |

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|  |  | for Cared for Children and Care Leavers, Cheshire East Council |  |  | <ul style="list-style-type: none"> <li>• Child in Need and Child Protection Team – Macclesfield – 100% (of 21 strategy discussions in October)</li> <li>• Child in Need and Child Protection Team – Crewe – 73% (of 30 strategy discussions in October)</li> <li>• Children with Disabilities Team – 0% (of 2 strategy discussions in October)</li> <li>• Cared for Service – 70% (of 30 strategy discussions in September and October).</li> </ul> <p>The audit identified good practice that will be implemented across all teams.</p> |
|--|--|--|--|--|--|

### 3.3 Threshold guidance

|                              |  |
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| <b>What inspectors found</b> | Threshold guidance for professionals has not been revised since 2018 and does not include reference to criminal exploitation or contextual safeguarding; this adds to confusion about referral pathways. |
|------------------------------|--|

| Ref  | Action<br><i>What we will do</i>   | Action Owner                            | Due by           | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
|------|--|---|------------------|-----|---|
| 3.3a | Review and update the threshold of need document to make explicit the necessity to respond immediately to the risk associated with child exploitation, including those who go missing. | Director of Strong Start and Prevention | 28 February 2023 | A   | Work is underway. The thresholds document has been revised and aligned with the new supporting families' framework and is currently out for consultation with partners until 16 December 2022. A consultation session is being held on 6 December 2022. We are planning to launch the new document in February 2023 following approval from the LSCP Executive. |

### 3.4 Fast-track health referrals

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| <b>What needs to improve</b> | Fast-track health referrals for exploited children with autism spectrum disorder and attention deficit hyperactivity disorder to ensure that they can access appropriate support. |
|------------------------------|---|

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| <b>What inspectors found</b> | Exploited children with autism spectrum disorder and attention deficit hyperactivity disorder are experiencing delays in having their health needs met due to the lack of an efficient fast-track process for referrals. |
|------------------------------|--|

| Ref  | Action<br><i>What we will do</i>   | Action Owner  | Due by        | RA<br>G | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
|------|--|---|---------------|---------|---|
| 3.4a | Assess how many children with Autism and ADHD are experiencing delays, and the extent of these delays. Based on this understanding, evaluate the best way to support exploited children and young people with Autism and ADHD. | NHS Cheshire and Merseyside Integrated Care Board<br>Programme Lead for Mental Health, Learning Difficulties and Autism | 31 March 2023 | A       | <p>Work is ongoing in this area. An update was requested from the programme lead on the process for expediting referrals in CWP including information about their process for prioritisation which is an internal 'expedition' checklist they use on request from a referrer to expedite. This issue was raised as an item to be discussed by all providers at the Autism Clinical Network in October 2022. The pathways have been reviewed, and changes are being implemented following the review.</p> <p>Many children and young people waiting for an assessment could be considered vulnerable in terms of their presenting needs, which presents a challenge in developing a fast-track process linked to vulnerability. The potential impact of this for children and young people at risk of exploitation is being considered alongside the needs of other vulnerable groups.</p> |

## 4. Protecting children and young people at risk

### 4.1 Appropriate education

| <b>Priority Action</b>       | Multi-agency partners need to secure appropriate education for exploited children as a protective factor.  |   |                 |     |   |
|------------------------------|--|---|-----------------|-----|---|
| <b>What inspectors found</b> | <p>The role of education as a protective factor is not high profile enough in multi-agency work. Too often, children at risk of exploitation do not attend school or are engaged in minimal tuition. This increases the risk to their safety and limits their life chances.</p> <p>Partners do not challenge each other or have sufficiently robust plans to address low engagement in education.</p> <p>In addition, the impact of placement moves on children's education is not sufficiently considered by multi-agency partners. Too often, placement moves result in a breakdown in education which exacerbates the risk of children being exploited.</p> |   |                 |     |   |
| Ref                          | Action<br><i>What we will do</i>   | Action Owner  | Due by          | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
| 4.1a                         | Hold awareness raising sessions on education as a protective factor to improve joint working around supporting children and young people to engage in education and other activities which disrupt their ability to experience harm.   | Head of Service: Education Participation and Pupil Support, Cheshire East Council | 8 February 2023 | A   | <p>Attendance awareness raising sessions have been delivered to the following stakeholders:</p> <ul style="list-style-type: none"> <li>• 22 September – Cheshire East Association of Secondary Headteachers (secondary headteachers)</li> <li>• 29 September – East Cheshire Association of Primary Headteachers Executive (primary school headteacher locality representatives)</li> <li>• 14 October – School Governors' conference</li> <li>• 19 October – Education Recovery Group (contains representatives from primary, secondary and special schools)</li> <li>• 18 November and 6 December – Cheshire East Council's Children's Services Staff Conferences, with two further sessions being held in January 2023.</li> <li>• 29 November - Designated Leads for Cared for Children.</li> </ul> <p>Awareness raising session will continue in January and February across partnership forums such as the Safeguarding Adults Board.</p> |

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| 4.1b | Develop a new partnership process for children and young people at risk of exploitation who are not in education full time. The multi-agency team around the child/ young person will work together to develop a timetable of planned activity for the child, including education, to act as a protective factor. Timetables will be reviewed through multi-agency meetings on the child's plan.        | Head of Service:<br>Education<br>Participation and<br>Pupil Support,<br>Cheshire East<br>Council | New<br>process to<br>be launched<br>on 9<br>January<br>2023 | A | <p>The new process has been developed - the multi-agency team around the child/ young person work together to develop a timetable of planned activity for the child, including education, to act as a protective factor. Timetables will be reviewed through multi-agency meetings on the child's plan. Our expectation is that children/ young people will have 10 sessions a week in their timetables to disrupt their ability to experience harm.</p> <p>The new process has been shared with teams through the awareness raising sessions and is already underway in some areas. It will be launched in January for the whole partnership for all children and young people at risk of exploitation.</p> <p>Tuition has been increased to 5 hours per week for children and young people who are able to manage this in line with their health needs.</p> |
| 4.1c | Webinars/ light bitesize sessions will be rolled out from January frontline staff across the partnership to support the roll out of the new process around supporting children and young people to engage in education and other activities which disrupt their ability to experience harm. This will also include the importance of considering the impact of placement moves on children's education. | Head of Service:<br>Education<br>Participation and<br>Pupil Support,<br>Cheshire East<br>Council | 28 February<br>2023   | A | Planned for roll out in January 2023.   |
| 4.1d | Develop a partnership practice guide which explains how education can be a protective factor, and to support the new process for timetables of activities. To include that planning for education needs to happen at the earliest opportunity, and that education needs to be   | Head of Service:<br>Education<br>Participation and<br>Pupil Support,<br>Cheshire East<br>Council | 28 February<br>2023   | A | This is being developed. Consultation with partners will take place in January for launch in February 2023.   |

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|      | considered within contingency planning.   |   |               |   |  |
| 4.1e | Produce a position statement to the LSCP Executive on securing appropriate education for exploited children and young people to assess the impact of work in this area to date, and to understand any barriers. | Head of Service: Education Participation and Pupil Support, Cheshire East Council | 24 April 2023 | A | Planned to be received by the LSCP Executive meeting in April. |

## 4.2 Quality assessments

### What inspectors found

The quality of social work assessments about children and their experiences are highly variable. Some children receive a thorough assessment with a resolute emphasis on understanding the impact of exploitation and children's wider lived experiences, supported by effective planning which addresses emerging issues and risks. For other children, however, assessments of their needs and vulnerabilities are subject to narrow analysis, using a screening tool that results in over-optimism, leaving them in situations of harm for longer.

| Ref  | Action<br><i>What we will do</i>  | Action Owner                       | Due by          | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
|------|---|------------------------------------|-----------------|-----|--|
| 4.2a | Continue our strategic focus on embedding consistently good quality assessments and plans within children's social care leading to greater consistency of assessment and intervention.  | Director of Children's Social Care | 30 August 2022  | G   | Continual focus is being driven through the senior leadership team for children's social care.   |
| 4.2b | Refresh the masterclass programme (bitesize training for social work teams) in line with the findings from the inspection to support good quality practice. This will include conducting assessments, plans, and capturing the child's voice. | Principal Social Worker            | 5 December 2022 | G   | Masterclasses have been refreshed in line with the findings from the inspection and were relaunched on 28 November 2022. Impact of the masterclasses is reviewed by the Principal Social Worker and Lead Practitioner team and will be reported to the JTAI partnership groups via this plan. A masterclass on writing good quality plans and assessments will take place on 21 December 2022. |

| 4.3 Review of multiple plans            |  |   |                  |     |  |
|---|--|---|------------------|-----|--|
| What needs to improve                   |  | Systematic review of the efficacy of multiple safety plans, child protection plans, and care planning for children in care and young people leaving care.   |                  |     |  |
| What inspectors found                   |  | Some children have a range of teams working with them and are the subject of several different plans. Not all professionals involved with the child have the most up-to-date and overarching plan or are invited to attend review meetings. This is confusing for the child and their family and makes it difficult for them, and the professionals working with them, to understand what the priorities are and what they need to do to drive forward the actions. |                  |     |  |
| Ref                                     | Action<br><i>What we will do</i>   | Action Owner  | Due by           | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
| 4.3a                                    | Implement one plan and one process which follows the child through their journey, so there is a consistent process for developing and reviewing children's plans together with them. | Principal Social Worker   | 31 January 2023  | A   | The new plan has been designed and built in the child's record system. It is currently being piloted by a small team to ensure that the system functions as expected. The new plan format should streamline recording requirements for social workers, reducing the time spent completing information which is already available on the system. The plan will be rolled out in January 2023. |
| 4.3b                                    | Ensure there is a consistent approach to consulting with and inviting professionals to attend meetings for children and young people, and for sharing the latest plan.               | Director of Children's Services   | 31 December 2022 | A   | We are currently reviewing where there is consistently good practice within teams so these features can be incorporated into a new process.  |
| 4.4 Evidence-based contingency planning |  |   |                  |     |  |
| What needs to improve                   |  | Evidence-based contingency planning, including challenge by practitioners and leaders who hold each other to account.   |                  |     |  |
| What inspectors found                   |  | Contingency planning is absent for too many children.   |                  |     |  |

| Ref  | Action<br><i>What we will do</i>   | Action Owner                   | Due by           | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
|------|--|--------------------------------|------------------|-----|---|
| 4.4a | The exploitation conference, training and practice guidance for practitioners will include the importance of contingency planning for children and young people, considering education as part of this, and challenging that contingency plans are in place. | Chair of the Training subgroup | 31 January 2023  | A   | A new awareness session for partnership practitioners on child exploitation has been developed. A pilot of the session was run on 29 November. The practice guidance will align with the new exploitation strategy, and they will be launched together at the child exploitation conference in January 2023. These will cover the importance of contingency planning. |
| 4.4b | Masterclasses to be held on contingency planning for social care practitioners.  | Principal Social Worker        | 31 December 2022 | A   | Masterclasses on planning (including contingency planning) are taking place as part of the regular masterclass programme. A masterclass on writing good quality plans and assessments will take place on 21 December 2022.  |

## 5. Supporting good practice

### 5.1 Practice standards and training on exploitation

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|------------------------------|---|
| <b>What needs to improve</b> | Clarity on expected standards of practice for all staff across agencies, supported by specific multi-agency child criminal and sexual exploitation training.  |
| <b>What inspectors found</b> | <p>The absence of a discrete multi-agency training strategy or budget for exploited children means that many staff do not have the requisite skills or knowledge to consistently help and protect exploited and missing children.</p> <p>This training deficit, in part, leads to a general lack of consistent recording and analysis of children's voices and their reasons for going missing within case records across the partners.</p> |

| Ref  | Action<br><i>What we will do</i>  | Action Owner                   | Due by          | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
|------|---|--------------------------------|-----------------|-----|--|
| 5.1a | Develop partnership practice guidance for child exploitation alongside the new strategy.  | Chair of the Training subgroup | 31 January 2023 | A   | The practice guidance will align with the new exploitation strategy, and they will be launched together at the child exploitation conference in January 2023.  |
| 5.1b | Develop a new training offer for child exploitation, which will focus on the voice of the child.  | Chair of the Training subgroup | 31 January 2023 | A   | A new awareness session for practitioners on child exploitation has been developed. A pilot of the session was run on 29 November 2022.  |
| 5.1c | Hold a conference on child exploitation for a cross section of partnership staff at all levels. This conference will include a national speaker who will share the latest learning from research and will be used to develop understanding of child exploitation. | LSCP Business Manager          | 31 January 2023 | A   | The conference will take place on 31 January 2023. Initial planning meeting with the keynote speaker took place on 15 November 2022. A draft proposal for the event was presented to the LSCP Executive on 12 December 2022. |
| 5.1d | Determine the priorities for training and review and refresh the training offer in response to all the needs  | Chair of the Training subgroup | 31 January 2023 | A   | The Training subgroup meeting on 24 November 2022 considered training priorities, which are now out with partners for consultation. The refreshed training plan will come to the Training subgroup in January                |

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|      | of the partnership. LSCP training plan to be reviewed and refreshed.  |                                |                 |   | and to the LSCP Executive in February for endorsement. Delivery of training to start from March 2023.   |
| 5.1e | Develop a way to evaluate the impact of training on frontline practice, including speaking to attendees and their managers following the training to assess impact. | Chair of the Training subgroup | 31 March 2023   | A | A proposal will come to the meeting in Training subgroup meeting in January. Evaluations and bookings to be supported through a system which will ensure evaluations are completed. |
| 5.1f | Review the options for resourcing the partnership including a review of the existing training budget.   | LSCP Executive                 | 8 February 2023 | A | An options paper on the budget for the partnership, including training, will be completed for the LSCP Executive in February.   |

## 5.2 Learning and action from rapid reviews

### What inspectors found

Learning and action from some rapid reviews are not prioritised, leading to significant delay.

| Ref  | Action<br><i>What we will do</i>   | Action Owner                                   | Due by          | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
|------|--|--|-----------------|-----|---|
| 5.2a | Determine the actions required, owners and timescales for delivery, for the rapid reviews conducted to date.       | LSCP Business Manager                          | 31 January 2023 | A   | An initial working group has ensured there are actions in place to meet the recommendations from local child safeguarding practice reviews and rapid reviews. The Learning and Improvement subgroup are tracking the actions and progress to ensure that owners are held to account and deliver within timescales. Work will be undertaken with the independent scrutineer regarding prioritising and tracking the actions. |
| 5.2b | Track the progress against actions from rapid reviews, and regularly report to the LSCP Executive on the progress. | Chair of the Learning and Improvement subgroup | 31 March 2023   | A   | The Executive meeting in October 2022 was provided with a tracker outlining all actions and progress to date against the recommendations from the LCPRS and rapid reviews. The Learning and Improvement subgroup in December also reported to the LSCP Executive on the progress of rapid review actions.   |

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| 5.2c | Themes and learning from rapid reviews to be shared across the partnership. | Chair of the Learning and Improvement Sub Group | 28 February 2023 | A | <p>The partnership is holding a learning week from 30 January and the findings from rapid reviews will be shared during this week. Agency leads have also communicated the findings to teams.</p> <p>The Training Sub Group in November agreed the proposal from the LSCP Training Manager on how to integrate the themes from this learning into the partnership training plan.</p> |
|------|---|---|------------------|---|--|

### 5.3 Supervision and management oversight

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| <b>What needs to improve</b> | The regularity, quality and impact of staff supervision and management oversight across agencies, with clearly recorded analysis by managers about whether children are safer as a result of support and intervention.  |
| <b>What inspectors found</b> | Supervision across the multi-agency partnership concerning exploited and missing children is sometimes infrequent and often cursory, with little evidence of reflection or consideration of whether plans are effective or sustaining change. Safeguarding supervision for some health staff is stronger. |

| Ref  | Action<br><i>What we will do</i>  | Action Owner                         | Due by           | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
|------|---|--------------------------------------|------------------|-----|---|
| 5.3a | Develop shared partnership principles for supervision – including the purpose and expected outcome of supervision to cover safeguarding and make children and young people safer. | Task and finish group on supervision | 30 April 2023    | A   | Work is underway and will be finalised following the recommendations from the independent scrutineer.   |
| 5.3b | Relaunch the expectations for supervision with social work managers.  | Principal Social Worker              | 31 August 2022   | G   | All managers attended a supervision development session with the Principal Social Worker in August 2022. At the end of November there was 80% compliance with case file supervision.  |
| 5.3c | Increase social work team management capacity to support teams and ensure regular supervision is provided for practitioners.  | Director of Social Care              | 30 November 2022 | G   | Additional capacity is now in place. In addition, the managed social work service will be supporting the cared for service for 6 months from week commencing 5 December 2022, which will add an additional team to the service. |

|      |   |                             |                  |   |   |
|------|---|-----------------------------|------------------|---|---|
| 5.3d | Ensure health providers have clear and robust safeguarding supervision arrangements in place including a supervision policy.  | All Safeguarding Leads      | 30 November 2022 | G | <p>Within East Cheshire NHS Trust, supervision processes with nursing staff have been implemented and are being used to discuss cases, learning from the JTAI, and national child death reviews. Supervision case discussion is provided at Band 5, 6 and 7 team meetings. The safeguarding team also attend the 7.30 handover once a week. The safeguarding team also attends 9am handovers to support professional curiosity, risk assessment and case management. The safeguarding team are also available for case discussion as required Monday to Friday 8am – 5pm.</p> <p>MCHFT have commenced twice weekly supervision sessions with the safeguarding team for staff. These have created safe spaces for staff and are supported by examples of good practice and improvements from the safeguarding team. These are supported by the Heads of Nursing.</p> <p>Supervision policies have been reviewed by the Designated Nurses for ECT, Wirral Community Health and Care Foundation Trust (WCHCFT), MCHFT, Cheshire and Wirral Partnership (CWP) and sexual health.</p> <p>New supervision plans have been implemented in quarter 3, the impact of this on outcomes for children will be audited in quarter 4.</p> |
| 5.3e | Thematic report, including performance and joint case reviews, on supervision and the impact on children's outcomes, to be completed to evaluate the impact of work in this area. | JTAI MASA Improvement Group | 30 April 2023    | A | First thematic report planned for April 2023.   |

## 5.4 Staffing Capacity

|                              |  |
|------------------------------|--|
| <b>What needs to improve</b> | Increased staffing capacity across social work teams and in the police child sexual exploitation and missing children coordinators teams in order to respond to improve the quality of service for children. |
| <b>What inspectors found</b> | Senior leaders across partners do not have an accurate view of the impact of high workloads on their staff.<br>Social work caseloads are too high in many teams.   |

Inspectors identified examples where crucial police intelligence concerning children at risk of exploitation was not being shared promptly enough, due to policing capacity.

| Ref  | Action<br><i>What we will do</i>   | Action Owner                        | Due by          | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>  |
|------|--|-------------------------------------|-----------------|-----|---|
| 5.4a | Executive meetings to include a standing item on workloads and pressures to ensure there is oversight across the partnership.  | LSCP Business Manager               | 31 October 2022 | G   | This is a standing item on the Executive agenda. Discussion on recruitment and staffing pressures took place in the Executive meeting in October 2022 and December 2022.  |
| 5.4b | Consider creating a dedicated contextual safeguarding team which will include co-located social work, police and health services, modelled on best practice in Stockport.  | Chair of the CS/SOC Strategic Board | 30 August 2023  | A   | This is progressing well and meetings are set with partners and Stockport (sector lead improvement partner) in January to plan how this is developed.   |
| 5.4c | Continue monthly strategic review of caseloads across all social work teams prioritising work and understanding pressure points across the system. Implement mitigations, for example offering support from other teams. | Director of Children's Social Care  | 13 August 2023  | G   | This is continuing to take place monthly by the Executive Director of Children's Services and Director of Children's Social Care. Tracking is taking place monthly by social worker to identify trends and marginal increases/decreases in caseloads.                             |
| 5.4d | Increase starting salaries for social workers to bring us in line with neighbouring authorities.   | Director of Children's Social Care  | 1 October 2022  | G   | We have increased salaries in line with neighbouring authorities. Starting salaries for social workers new into post took effect from 1 October. Salaries for existing workers at grade 8 in year 2 of their early professional development have been uplifted from January 2023. |
| 5.4e | Increase social work team manager and family support work capacity within teams to provide additional support to teams.  | Director of Children's Social Care  | 30 August 2022  | G   | Additional capacity is now in place. In addition, the managed social work service will be supporting the cared for service for 6 months from week commencing 5 December 2022, which will add an additional team to the service.   |

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| 5.4f | Rebrand and relaunch social work in Cheshire East. Attend the regional social work recruitment day to promote opportunities in Cheshire East.                  | Principal Social Worker  | 3 October 2022  | G | Completed. This has increased our visibility in the region, and we are developing a programme of events to support social work recruitment.   |
| 5.4g | Examine and scrutinise problem orientated policing / trigger plans within missing from home teams and exploitation investigations monthly to assess workloads. | Inspector Adams,<br>Detective Chief<br>Inspector Littlewood,<br>and Detective Chief<br>Inspector Whittaker | 1 December 2022 | G | Performance is monitored monthly and fed into the JTAI improvement group. To date, there are no issues in Vulnerability Hub or MFH Problem Solving Team with capacity or escalations. |

## 6. Strategic Leadership

### 6.1 Function, purpose and impact of the LSCP

|                              |   |
|------------------------------|---|
| <b>Priority Action</b>       | Leaders of the LSCP should address the strategic weaknesses in the leadership, function, purpose and impact of the work of the LSCP and its sub-groups.   |
| <b>What inspectors found</b> | <p>A lack of critical enquiry, combined with limited resources, has led to ineffective independent analysis and challenge. Consequently, despite intentions to work in partnership and collaborate, senior leaders across the wider partnership have failed to evaluate and understand exploited children's lived experiences.</p> <p>Weaknesses are exacerbated by the absence of an independent scrutineer.</p> <p>Subgroups to drive the work of the LSCP are not effective; despite the evidence of good attendance and intentions, they lack direction, purpose and leadership.</p> <p>Leaders have identified areas for development, but changes have not been implemented quickly enough. The pace of change for exploited children is too slow.</p> |

| Ref  | Action<br><i>What we will do</i>   | Action Owner           | Due by  | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
|------|--|------------------------|---|-----|--|
| 6.1a | Increase the frequency of the LSCP Executive meetings to bi-monthly from quarterly to support increased focus on children's outcomes and increased pace of change. | LSCP Business Manager  | 13 July 2022                                      | G   | Meetings have been taking place bi-monthly since August 2022.  |
| 6.1b | Recruit a high calibre independent scrutineer to provide scrutiny to the partnership.  | LSCP Executive         | 15 August 2022                                    | G   | Independent scrutineer has been recruited - Jane Shuttleworth. Weekly updates are being provided to senior leaders in the partnership on the independent review activity.  |
| 6.1c | Independent scrutineer to conduct a review of the LSCP Executive and the subgroups with recommendations on   | Independent scrutineer | First stage of the report will be available on 23 | A   | The findings from the first stage of the review were considered by the LSCP Executive on 12 December. The findings of the first stage of the review will be finalised on 23 December 2022 and shared with strategic leads. |

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|      | developments to enable the partnership to improve its effectiveness and impact for children and young people.  |                       | December 2022 and the full review will be completed on 3 February 2023 |   |  |
| 6.1d | Ensure greater line of sight between the Executive and the LSCP priority groups and subgroups by implementing the recommendations from the independent review. | LSCP Business Manager | 28 February 2023   | A | Actions to be agreed following completion of the first stage of the independent review which will be received on 23 December 2022.                   |
| 6.1e | Resources for the partnership to be considered and agreed in line with the review of the independent scrutineer.   | LSCP Executive        | 8 February 2023  | A | Resources to be considered based on the changes as a result of the first stage of the independent review which will be received on 23 December 2022. |

## 6.2 Understanding the risks of exploitation to children and young people in Cheshire East

|                              |   |
|------------------------------|---|
| <b>Priority Action</b>       | <p>This should include gaining a full understanding of the risks of exploitation to children across the local area, and ensuring that this understanding leads to analysis, provision and commissioning of services that reduce risk for children effectively.</p> <p>Across the partnership, leaders should ensure that operational practice reduces the risk of exploitation to children.</p>   |
| <b>What inspectors found</b> | <p>Urgent action is required to understand and address the underlying complexities and continuing risks to exploited and missing children across all agencies and services, as too many children remain in situations of risk and harm. Until this inspection, strategic multi-agency partners did not understand the extent and impact of the failure to protect children and drive forward plans for those who are at risk of, or are victims of, criminal and sexual exploitation.</p> <p>These are serious and fundamental weaknesses, leaving some children in situations of unassessed risk and harm. Multi-agency action plans are ineffective.</p> <p>Despite intentions to work in partnership and collaborate, senior leaders across the wider partnership have failed to evaluate and understand exploited children's lived experiences.</p> <p>Multi-agency safeguarding arrangements through the LSCP to monitor, promote and evaluate the work of the statutory partners are underdeveloped and weaknesses are exacerbated by the absence of an independent scrutineer.</p> |

| Ref  | Action<br><i>What we will do</i>   | Action Owner                        | Due by          | RAG | Progress and impact to date<br><i>What we've done so far and evidence of what difference this has made</i>   |
|------|--|-------------------------------------|-----------------|-----|--|
| 6.2a | Complete a partnership review of all children and young people at risk of exploitation to ensure the right plans are in place to protect them from harm.   | LSCP Executive                      | 22 July 2022    | G   | Review completed immediately following the inspection and actions taken to ensure the right plans are in place for all children and young people. No child was identified as having experienced further harm or as being at immediate risk.  |
| 6.2b | Bring together a profile/performance across the partnership of children and young people at risk of exploitation to ensure our population is understood, and to inform an assessment of any gaps in services and need for commissioning. | Chair of the CS/SOC Strategic Board | 8 February 2023 | A   | Cheshire Constabulary have developed a draft profile which is being used as this basis for this work. The profile will be developed by the CS/SOC Strategic Board and reported to the LSCP Executive to ensure that there is strategic oversight and understanding of those at risk of exploitation.   |
| 6.2c | Refresh and relaunch the Serious Organised Crime and Exploitation Strategy.  | Chair of the CS/SOC Strategic Board | 31 January 2023 | A   | Refresh of the strategy is set to be completed by January 2023 and will be launched on 31 January 2023 at the LSCP Child Exploitation Conference. A draft of the strategy has been considered by the CS/SOC Strategic Board on 23 November 2022 and the LSCP Executive on 12 December. The strategy covers how to reduce the risk of exploitation. |
| 6.2d | Develop a multi-agency exploitation scorecard which will be reported to the LSCP Executive on a regular basis.   | Chair of the CS/SOC Strategic Board | 8 February 2023 | A   | Measures for the scorecard were agreed in the CS/SOC Strategic Board on 7 September 2022. A copy of the scorecard will go the LSCP Executive in February.  |

### 6.3 Understanding why children and young people go missing and addressing these reasons

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|------------------------------|---|
| <b>What needs to improve</b> | Systematic reporting, recording and analysis by all leaders to increase understanding of why children go missing. |
|------------------------------|---|

| Ref | Action | Action Owner | Due by | RAG | Progress and impact to date |
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|      | <i>What we will do</i>  |   |                  |   | <i>What we've done so far and evidence of what difference this has made</i>   |
|------|---|---|------------------|---|---|
| 6.3a | The Contextual Safeguarding Steering Group will produce a regular report to CS/SOC Strategic Board and the LSCP Executive on children and young people who go missing and the drivers for this. | Chair of the Contextual Safeguarding Steering Group | 16 February 2023 | A | The group will report on drivers and trends for children and young people going missing on a bimonthly basis to the CS/SOC Strategic Board, and the LSCP Executive. |