



Children England response to call for evidence from Dr. Eileen Munro, on reviewing child protection, issued on 30th July 2010

1. Introduction to Children England

Children England is the leading membership organisations for the children, young people and families' voluntary sector. First established in 1943, the organisation continues to provide a platform for the collective voice of the sector, campaigning for change nationally and delivering services that create real change on the ground for children and families.

This submission represents the views of members and partners as expressed in number of meetings and events on safeguarding held throughout our work to date, including significant parts of the evidence and practice examples from them that was gathered for the Laming Review in 2008, that we believe remains extremely pertinent to the subject of this 2010 Review. We will be glad to provide further detail in the ongoing work of the Review, in relation to any points raised in this submission.

2. Overarching points

We welcome the announcement of the Munro Review, and are supportive of the aims of improving and focussing child protection practice while removing unhelpful bureaucracy surrounding it. In defining what might be termed bureaucracy in this context, we would stress that while child protection social work has indeed been an established profession for many decades now, the spreading of child protection awareness and skills beyond paid statutory professionals remains far from completed or settled – in fact it has only relatively recently begun in any systematic way.

We would highlight the work and practice resources of SafeNetwork, (<http://www.safenetwork.org.uk>) which Children England delivers in partnership with the NSPCC, funded by the Department for Education. The programme is focussed entirely on raising the child protection awareness and confidence for volunteers and staff in some of the smallest community and activist groups in the country, reaching

those who may have never even considered their potential role in helping to protect children before. With Government ambitions to see more and more members of the community engaged in increasing levels of informal and unregulated activity with children and families in their communities, practical and direct engagement with them about what they can and should do, and how to develop their skills and judgements, where a child may be in danger, will be critical.

In seeking to strip away costly and ineffective layers of bureaucracy in professional practice, it will be essential to invest in the following, for the full breadth of the 'Big Society' to play their part in keep children safe:

- Practical **support and empowerment of children**, young people and parents themselves to speak out when they believe something is wrong, and to know there will be a fast, effective response
- **Open access to simple, practically-focussed awareness and skills training** for anyone wanting to learn about child protection in their community and what they can do, regardless of whether they are in any kind of paid or volunteer position
- Continued investment in the practical spreading of **skills and confident judgement for the voluntary and community sector**, who are so often among the first to come into contact with children and young people, and to be viewed as a safe person to speak to about problems at home
- With increasing flexibility within the children's workforce, and the increases in active citizenship envisaged, **CRB's need to become portable** for the person who has been checked, and routes made available for individuals to secure clearance without dependence on an employer processing them.

Where financial savings might be found from within the current costs of child protection practices and infrastructure, we would strongly urge that those funds released by changes should remain dedicated to, and **invested directly in the quality of services for, children at risk and in care**, who otherwise face a potentially devastating pressure on the local authority's 'looked after' budgets that are, for them, the equivalent of another child's parental/family income with which to support their daily standard of living.

On pages 11 and 12, at the end of this submission, we have offered a selection of good practice examples.

3. Understanding safeguarding priorities for the Third Sector

The Third Sector is rich in complexity and diversity and the priorities and challenges of safeguarding children across the sector reflect this. Safeguarding is relevant not

only to organisations in the children and young people's voluntary and community sector (CYPVCS), but to a much broader constituency. Large though the CYPVCS is, there are probably even more organisations whose primary focus is not on children but which involve children in their activities. Churches and faith groups, community groups, clubs and societies all involve children to a greater or lesser degree and sometimes it is these organisations whose main focus is not on children that have the least awareness of the need to put safeguards in place.

The safeguarding needs of a small organisation, perhaps comprising a handful of volunteers, will be different from those of a large national children's charity. The challenge is to help all Third Sector organisations put in place safeguards that are both effective and proportionate to their circumstances.

The notion of proportionality is vital. We know from our experience that many organisations in the VCS are anxious about the implications of safeguarding, particularly if their workforce is wholly or primarily made up of volunteers. Many such organisations believe that introducing safeguards and conducting CRB checks will have a negative impact on their members and their organisations. Indeed, some organisations have told us that they would rather not involve children than go through what they understand to be a draconian process.

We recognise that there are additional barriers preventing groups serving BME children and families getting safeguarding advice and training. These relate to lack of money for training, poor or non-existent relationships with social services, lack of information about what is available, lack of training in appropriate languages, lack of materials on safeguarding issues specifically relating to BME communities, such as forced marriages, female genital mutilation and honour killings.

Based on our experience of work with members and statutory partners we consider the following to be key safeguarding priorities for the sector:

- Increasing awareness that safeguarding is everybody's responsibility
- Clarity, simplicity and 'portability' of any vetting and record checking process
- Ensuring there are appropriate safeguarding measures in place to prevent abuse within an organisation, and that there is not an undue reliance on criminal records and vetting checks.
- Improving the relationships with, and consistent responses to and from, Children's Services departments and CYPVCS organisations on children in need and at risk
- Ensuring a proportionate approach to activities and events that does not stop children taking healthy risks.
- Contributing to wider safety net and early identification of children who are in need of additional services to prevent harm
- Being able to meet the expectations of insurers and commissioners in relation to safeguarding
- Having effective anti-bullying processes in place
- Enabling children's voices to be heard

4. Safeguarding and the CYPVCS – research and consultation evidence

Consistent messages were gathered from eight regional consultation events.¹ Practitioners from all agencies agreed the VCS had a vital role in safeguarding because of their unique role in working with groups in the community which do not or cannot access statutory services. However, practitioners felt there was scope for the VCS to develop their broad safeguarding role in the future. **VCS representatives attending these events felt that there were issues to be overcome such as being excluded from joint working and multi-agency training. Training was often free to statutory agencies but VCS organisations had to pay for it** (Ipsos-MORI 2007, p8).

VCS organisations felt that the issue of short-term funding made it difficult for them to plan and deliver consistent and well-resourced services. VCS organisations also appeared not to be treated as equals, mistrusted or viewed as unprofessional by statutory organisations.

In summary, in all the regions there was recognition that, in relation to safeguarding, the VCS could develop and grow. The VCS recognised some issues hindering progress. A lack of trust by statutory partners may be a barrier. Lengthy government documents were a barrier to developing effective practice. Face-to-face or distance-learning training accompanied by concise leaflets or booklets were far more effective (Stacey 2007, p5).

Similar findings were recorded by Packwood (2007) *Commissioning, Contracting and Delivery of Children's Services in the Voluntary and Community Sector*, VCS Engage, London, who surveyed 127 VCS organisations and found that:

- 10% felt they had a skills gap in child protection and safeguarding that prevented them from being commissioned;
- 27% felt that safeguarding training would help them become more commissioning ready;
- Of the groups already commissioned to provide services, 14% said they had to meet safeguarding and Child Protection (CP) standards
- 4% of commissioners felt that CP and safeguarding were a barrier to commissioning the VCS but also felt this could be overcome by training.

An additional obstacle is that of VCS organisations that are registered charities, 75% of the smaller ones, those with annual incomes less than £100,000, receive no public monies[□], and without funded relationships, have little direct interface with national or local government, whether for training and work coordination or in adhering to agreed statutory policies.

Barnardo's Yorkshire was commissioned in 2006 to research workforce issues in the VCS. The results published as Shepherd L. & Proctor S. (2007) *Final Report for the Children's Workforce Development Council of findings into research with Barnsley*

¹ DCSF (2008) Staying Safe Consultation Regional Reports DCSF [online] Available at: www.everychildmatters.gov.uk/resources-and-practice/RS00043

Voluntary, Community, Independent (Third) Sector involved 1718 staff and volunteers.

Of these only 24% had CRB checks, 2% were awaiting a check, 1% had none. 73% did not record an answer. The researchers recognised that it was likely some staff did not require CRB checks but felt that the limited responses gave some concern about whether VCS organisations met legal requirements (Shepherd and Proctor 2007, p6).

Only 17% of staff and volunteers were trained in safeguarding. Some of the training was old and therefore out of date. This research found that the overriding challenge for the sector was short-term funding. Sometimes the funding for the project would run out before the training course would be completed. Volunteers sometimes did not have the ability to attend because of other commitments.

Children England's own research work with members and the small organisations it supports directly shows both a worrying continued lack of awareness, both about safeguarding practice and its importance. In J. Thompson *Under the Radar* (2007), a survey of 108 small organisations;

- Only 38% of organisations reported having attended safeguarding training. That number dropped to 14% for organisations with no paid staff.
- In the same report, only 24% of respondents wanted more access to safeguarding training – the least desired training from the seven options they had to choose from.

Emerging data from Oct/Nov 2008 follow up survey of small organisations indicates that;

- Almost 25% of organisations say they have no or limited awareness of Every Child Matters
- When asked how aware they were of the new Independent Safeguarding Authority and the vetting and barring scheme, 33.7% of small organisations had never heard of it and just 45% knew it has to do with safer recruitment. Just 18% were aware of the start date for the scheme.

5. Training and front line practice issues

“Most reports following the death of a child have for decades identified 3 key themes. First of all, the professionals involved did not adequately communicate with each other. Secondly, there were always clear guidelines in place but one or more individuals failed to follow them. Thirdly, professionals were deceived by those caring for the child. This situation is not likely to be changed unless professionals have enhanced training and services are properly resourced. Local authorities have struggled for years to recruit appropriate professionals in the required numbers.....this is a particular difficulty in the inner city areas and especially in the London Boroughs. Frankly speaking, cases like Baby P do not encourage recruitment to this highly charged area of social care. Unless we review the training

and qualification of social workers and reward those who elect to serve in this highly volatile area we are unlikely to achieve the critical mass necessary to support children in need.” CEO of voluntary organisation and ex-Director of Social services.

One profession, no matter how well trained and supported cannot safeguard all children and young people. Currently training for the voluntary and community sector is inadequate in many areas. Indeed some colleagues have said clearly that there is less provision now than under the previous ACPC system. They attribute this to the way resources are now allocated, with statutory colleagues getting first preference on training. This is not a problem in itself, but becomes so when there are insufficient courses and places to meet demand even within these staff groups.

We believe **that one set of mandatory training and awareness raising courses** should be run in a local area for all those working with children, young people and families; rather than health colleagues local authority workers, police and VCS workers attending different training. or having safeguarding simply tagged on to some other course This would not only save money on training costs it would have all the additional benefits of local workers understanding each other’s agency better and having confidence in a joint level of skill and knowledge on safeguarding. Furthermore it could lead to a better understanding of each agencies responsibilities and encourage earlier contact, and reduce inappropriate referrals between agencies.

Additional comments made by respondents were;

- i. **Senior staff;** many areas have education managers taking the lead in safeguarding, both as DCS’s and chairing LSCB’s as well as in other senior management posts. While it would be nonsense to assume that only social services managers could possibly take a lead in this work it is nevertheless a specialist area and recently safeguarding has not achieved the same prominence as it once did, which is in some ways to be expected given the professional passions of those at the top, combined with the relentless pressure to improve educational attainment. A specific management qualification in relation to safeguarding should be developed to ensure a high standard of oversight at the most senior levels. Some elements of this training could also be made available to elected members.
- ii. **Special needs;** Children and some parents, with a range of special needs including autism, and other physical and mental disabilities which impede communication have a range of needs which Safeguarding staff often do not understand. The training available to those safeguarding children often does not include any input on children with complex needs, communication difficulties and particularly autism. This is vital for staff in education, health and voluntary sector settings as well as in social care.
- iii. **Teenagers and young men;** there is an increasing tendency not to accept referrals concerning teenage children and particularly older boys. This is part an issue of thresholds but also reflects a lack of understanding of the safeguarding needs of these groups and how they may present themselves.

The situation is more acute with refugee and asylum seeking young people and those from some BME communities where cultural misunderstandings and confusions compound the difficulties of timely and sensitive assessment of need and appropriate interventions.

Ongoing training, regularly updated to take account of the changing nature of abuse and exploitation, including on-line bullying and grooming etc. needs to be in place to ensure staff in all agencies are confident in serving the needs of these young people.

- iv. **Work with Fathers;** Voluntary sector colleagues point to a failure of social care and education agencies to support the safe engagement of fathers and paternal relatives in children's lives. Children's services social care staff, voluntary sector, education and health service workers need specific training to work with fathers (resident and non-resident)including involvement in case conferences, assessments, supporting access arrangements, and specific support in dealing with violent or threatening men.
- v. **Young children;** *"Children over two and under five can all too easily disappear from services. It is rare for a health visitor to consistently visit a three or four year old due to massive case loads and lack of time. There is also less of an expectation on a parent to attend clinic with a three or four years old. Some of my clients have not seen their Health Visitor for over two years, even though they have small children"* Family Support worker Children's charity.
- vi. **Listening to children and young people;** Children need more guarantees from people in authority when they disclose abuse, far too many children are still being put off from reporting abuse due to no guarantees that they won't be separated from siblings or sent back to their abuser due to lack of evidence or not meeting the threshold. In addition many workers are not confident in assessing the evidence they receive from children in relation to that provided by adults. There remains a tendency to de-value their views and experiences. The extension of advocacy services would assist with giving children the confidence, access to dedicated support and a voice independent of those having to assess cases and ration resources.
- vii. **Communication;** many organisations have said that they have no idea what happens after they have made a referral and find it difficult to get a response from the agency they made the referral to.

"There are delays in action when referrals are made to Social services when there is concern about a child and often after a home visit has been made, there appears to be no follow up procedure. This often results in apathy about referral." Manager of a Children's centre

6. Safeguarding or child protection

The move to Safeguarding children introduced a broader range of responsibilities to an already over worked group of professionals. No one would argue against the principal of safeguarding children in this broader sense, but the responsibilities have come without the requisite resources. The consequence of this on the ground is that the same small group of over stretched professionals have yet more to address and this comes at a cost. Many very well experienced social workers are leaving the profession blaming this widening of responsibility as well as the massive increase in bureaucracy \ form filling and the constant preparation for inspection.

“ there is still an overburdening of agencies that means they have had to significantly reduce their sessions with clients. Most now see clients 3 times!!! Few are like us and are able to maintain sufficient support.” CEO Voluntary Organisation

“I am particularly concerned that schools we work with are reluctant to start CAF’s because of workload”. CEO VCS Organisation

Schools and the teaching profession in general see children on a regular basis in several different settings, in education, sport and play. Schools should have a much higher profile in the Child Protection arena.

“Quite often when I have attended training it is a rarity for a employee from a school to be there yet these are the very people with the eyes and ears when identifying child abuse” Manager Children and young people’s charity

In addition concerns were expressed at the reduced emphasis on practice in inspection processes. While it is right that inspectors (across all agencies, not simply Ofsted) should pay rigorous attention to the process and procedures which underpin safeguarding and the robustness of interagency arrangements, front line practice remains the first line of protection and should receive a higher priority. In addition we fear that the separate inspectorates do not always take the same view of what is deemed adequate or good in safeguarding, which leads to confusing messages for those trying to work in a multi agency way.

7. Thresholds

Many of our members tell us that they feel Local Authorities and other agencies have too high thresholds when it comes to taking action on a referral. Comments included;

- The pressure on local authorities to cope with referrals means that the threshold for referral has been raised. The number of times authorities in whose area abuse has occurred attempt to pass the case to the authority in which the child’s parents live has increased exponentially.
- In the past children placed under the provisions of section 20 of the Children Act meant that they were visited by social workers, were the subjects of regular reviews etc. In efforts to reduce the number of “children looked after” some authorities now list these children as being cared for under Section 17

of the Act removing the safeguard of regular social work visits. This has reduced safeguarding but is another example of corner cutting by people under intense pressure to meet demand.

- Local Authorities and other agencies not being in agreement about what constitutes abuse/ neglect which often results in no action taking place, again thresholds come into play.
- The increasing thresholds required for social work intervention have meant that voluntary organisations are increasingly being asked to deal with more complex and difficult cases in community settings, but without additional resources or access to higher levels of training.
- VCS organisations which work across many authorities report widely varying practice in the acceptance of referrals and subsequent case management for children and young people with very similar needs and circumstances.

8. Instability within the parts of the system

There is a need to encourage and promote stability within the childcare system as a whole, but this is especially important within safeguarding. The relationships of trust and the understanding of protocols, accountability chains and agreed multi -agency referral procedures need time to bed in, be owned and used reliably by all those caring for children and young people in an area.

We sincerely hope that the recommendations from this review will not lead to increased churn, but rather to a strengthening and clarification of roles and responsibilities and the improved resourcing of some parts of the system. There are several causes of the current instability which might be addressed by the review;

- Many areas of work which impact on the quality and support for safeguarding are funded through time limited funding streams. The longevity of projects in both the statutory and voluntary sector that carry out excellent work and make positive change are often threatened through lack of funding, and lose good staff due to this insecurity.
- The well documented levels of social work staff turnover creates instability in continuity of recording and evidence gathering; there can be several Social Workers assigned to a case during quite intense CP Procedures
- In the last five years many organisations in the voluntary sector have experienced real difficulties because of the development of the commissioning environment which is financially and target driven. Most contracts are short term, in spite of the recommendations within the Compact. Often the pressure to cut costs leads to insufficient money to pay for robust recruitment and supervision, training or the support that makes for a high quality professional child-centred service, which are by their nature often expensive in comparison with other services.

- In addition the introduction of competitive drivers has made a virtue out of innovation and radical change, when in fact what many staff and service users tell us they need is continuity and consolidation of their services, allied with incremental improvement.
- The introduction of Children's Trusts and LSCB's plus the many changes to NHS structures has led to a protracted period of restructuring of local services and changes of personnel. This has disrupted long standing relationships and has to some degree destabilised the way child care services are provided. Time is needed for all sectors and agencies to have confidence in the new systems and their roles within them. Children England and many of our members work alongside the Children's Workforce Development Council, General Social Care Council and Skills for Care. We have seen how continual restructuring and change challenges the commitment, knowledge and expertise of individuals and teams.

9. Preventative work

Voluntary organisations often do not get the adequate funding they need to include undertake preventative work around child protection.

Real thought has to go into the causes of children being at risk in families. Engagement with families under stress has to happen early on. The support given should be holistic and tailored to each family, not every family does well in parenting groups for instance, especially when they already feel that they are bad parents. When people are in debt, have housing and relationship problems and their children have behavioral difficulties they need support and encouragement to build both their own and their children's self esteem.

What has been missing all too often is this level of support which is not provided by social services until families are in deep crisis. Voluntary groups work in this way to prevent families reaching crisis, by gaining their trust, they are then able to be honest about their parenting and by providing access to funding, outreach parenting support, therapeutic groups for them and groups for their children that address behaviour issues and build self esteem, families become happier there is an improvement in safeguarding practice and children have a better chance to reach their full potential.

The government needs to highlight and fully recognise the cost effective nature of this work, which because it is not aimed at those whose needs are already at crisis point, is often the first to suffer from budget reductions. Preventative work is seen as a "luxury" rather than as essential part of a properly balanced safeguarding system.

Voluntary groups doing excellent work in hard to reach communities, underpinning and reducing demand on statutory services have already had to close due to lack of funding following the reorganisation of the Children's Fund and the loss of other local funding streams.

10. Key messages from CYPVCS organisations

- There have been significant improvements in multi-agency working at strategic level on LSCB's and Children trust boards and at practice level. This is particularly positive within multi agency settings such as children's centres where professionals are taking a more holistic view of children and their needs. **Problems still remain at middle management** levels however where targets and budget decisions still appear to dominate the context of decision making and relationship negotiations.
- More children and young people in the care of the state have access to advocacy services. The **very best safeguard for children is empowering them to speak** out when something is wrong and we would like to see a far greater expansion of these services to all children and young people who are deemed in need or at risk. Not only would this provide welcome dedicated support to the children involved it would provide an added safeguard within the system, and provide cost effective support to hard pressed social workers, who are all too aware of the limited time they have to spend with the children in their care.
- Agencies are more open to sharing information in an informal way and in more formal settings such as "team around the child" meetings. Although needs are much more clearly articulated and understood through these processes there are often no resources to meet the needs identified. **VCS agencies are called in to offer increasing amounts of support to families with much higher levels of need that was the case two or three years ago.** In addition the meetings are often chaired by head teachers with no social services input. This highlights the issue of thresholds which we cover below, but also leads to some children's services colleagues having little input to or understanding of the type and extent of preventative work being undertaken in the community.

Some good practical examples we'd like to highlight

- Kirklees local authority have worked with their VCS to develop a handbook "Safe and Sound" which assists the sector in understanding referral routes and thresholds for intervention and how the sector can work in partnership with the authority to keep children and young people safe.
- Sheffield also have an excellent project which resources and supports the sector to improve safeguarding practice in the context of their local Children and young people's plan.
- The Solihull Model of multi agency support for children and families (called LINC) <http://www.solihullonevoice.org/index.php/scfsm> where they have

come to an agreement that the VCS will be able to initiate CAFs and then the LINC will take responsibility for identifying an appropriate Lead Professional to take the CAF process forward, thus engaging the sector whilst recognising their capacity issues. Also the sector can have the confidence to initiate a CAF knowing there is a clear and established system for allocating to an LP and that they will not be morally guilt tripped into taking on the role due to a lack of alternative arrangements.

- Almost all Children's Trusts now have a VCS representative on their Board and many on the LSCB, although this is less evident, and although the NSPCC provide welcome expert input to the majority of LSCB's links with the local sector often leaves much to be desired.
- Where multi-agency training has been prioritised it is paying dividends not only in improving practice but also in building the relationships of trust and respect which must underpin any effective safeguarding system. VCS colleagues report increased understanding of the constraints and context within which the wider system must operate and feel more confident in playing a supportive and appropriate role within it.