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Paula Wedd, Cheshire and Merseyside Integrated Commissioning Partnership
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Dear Cheshire East Local Safeguarding Partnership

Joint targeted area inspection of Cheshire East

This letter summarises the findings of the joint targeted area inspection (JTAI) of the multi-agency response to the criminal exploitation of children in Cheshire East.

This inspection took place from 11 to 15 July 2022. It was carried out by inspectors from Ofsted, the Care Quality Commission (CQC) and His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).

Headline findings

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. Notwithstanding the tangible commitment and ambition of all partners to improving services, there is insufficient senior leadership analysis of the underlying complexities or understanding of the day-to-day experiences of these vulnerable children. These are serious and fundamental weaknesses, leaving some children in situations of unassessed risk and harm. Multi-agency action plans are ineffective. Evaluation is not based on a systematic analysis of the impact of frontline work across services; instead, there is too much focus on process. Leaders have identified areas for development, but changes have not been implemented quickly enough. The pace of change for exploited children is too slow.

Area for priority action

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. Priority action should be taken across the following three main areas:

- 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. 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.
- Across the partnership, leaders should ensure that operational practice reduces risk of exploitation of children:
 - 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.
 - 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.
 - Multi-agency partners need to secure appropriate education for exploited children as a protective factor.
 - 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 partners.
- 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.

What needs to improve?

- The consistent recording and analysis of children's voices across all agencies' records.
- Children missing from home and at risk of exploitation are quickly and consistently identified by the multi-agency integrated front door.
- The quality and effectiveness of multi-agency strategy meetings across teams and services for children at risk of exploitation.
- Prompt and updated action planning by the multi-agency child exploitation and integrated front door weekly meetings that demonstrates reduced risks to children.
- Systematic review of the efficacy of multiple safety plans, child protection plans and care planning for children in care and young people leaving care.
- 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.

- LSCP strategic oversight and understanding about exploited children's experiences, including through the quality, accuracy and effectiveness of audits.
- Evidence-based contingency planning, including challenge by practitioners and leaders who hold each other to account.
- Systematic reporting, recording and analysis by all leaders to increase understanding of why children go missing.
- Clarity on expected standards of practice for all staff across agencies, supported by specific multi-agency child criminal and sexual exploitation training.
- 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.
- Fast-track health referrals for exploited children with autism spectrum disorder and attention deficit hyperactivity disorder to ensure that they can access appropriate support.

Strengths

- Partners were receptive to the feedback from this inspection and are motivated to make the necessary changes to drive the much-needed development and reform.
- Emerging evidence of targeted disruption work in the community by youth justice staff, youth workers and police officers. A recent initiative by police and health partners has sought to raise awareness in the community about signs and indicators of exploitation.
- Experienced local authority '@ct staff' with an array of relevant skills, expertise, knowledge and passion provide intensive support to exploited children and their family members.
- Children benefit from bespoke targeted multi-agency early help work, including from commissioned services, delivered at their pace, reducing risk of exploitation to children.
- The safeguarding children in education settings (SCIES) team is highly valued by schools. School leaders find the advice and support they receive from the SCIES team beneficial in helping them make safer decisions for children.
- Recognition of the links between exploited children's poor mental health, sexual health and substance misuse has resulted in effective commissioning and collaboration across the health networks between child and adolescent mental health services (CAMHS), youth justice services, young person's recovery service and children in care teams.

Main findings

While the LSCP meets regularly and receives numerous reports, 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. These are serious shortcomings, as they did not know about the extent of the weaknesses in helping and protecting children until this inspection. In several cases brought to their attention by inspectors, managers and leaders had to act to ensure that exploited children's needs were met, or that plans to protect children from harm were progressed quickly.

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

Recent changes to strengthen the local authority Cheshire East consultation service into an integrated front door (IFD) involving the co-location of relevant safeguarding partners are positive. Professionals complete a specifically designed child exploitation screening tool that assists them in identifying risks before referring to children's social care IFD. Children at risk of exploitation are then referred to a weekly multi-agency IFD meeting. However, significant harm thresholds for exploited and missing children are not rigorously evaluated or action plans put in place following IFD 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. Senior leaders acted while inspectors were on site to ensure that when referred to children's services all exploited children are now recorded on the electronic system and reviewed by managers. Children at risk of criminal and sexual exploitation are not consistently having their needs and risks considered on presentation at emergency departments. Furthermore, children presenting at the emergency department of Cheshire East NHS Trust are not having their voices heard. Staff need to be more curious so that broader safeguarding needs are identified, understood and responded to quickly. 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.

All partners, including police, education and health, participate in multi-agency meetings, such as trigger meetings following some incidents of children going missing. Hard work by committed social care and early help practitioners, teachers, healthcare professionals, youth services and police at the monthly operational criminal exploitation meetings ensures that risk to many exploited children is reviewed and actions about the way forward are agreed. Inspectors observed current communication being shared effectively about individual children, their associates and potential perpetrators. This effective multi-agency approach is linked to the strategic serious organised crime meetings. These are critical forums on which to build, further develop and measure whether practitioner interventions are making a sustainable difference to protecting exploited children in the longer term.

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. 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.

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.

Senior leaders across partners do not have an accurate view of the impact of high workloads on their staff. Social work caseloads are too high in many teams. Contingency planning is absent for too many children. Inspectors identified examples where crucial police intelligence concerning children at risk of exploitation was not being shared promptly enough, due to policing capacity. 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. Despite high caseloads, staff make strenuous efforts to work together to help children and their families.

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. Partners do not challenge each other or have sufficiently robust plans to address low engagement in education. 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. Some children told inspectors that they were bored and want to go back to school.

When children and young people are at risk of criminalisation, partners work together to consider viable options, including out-of-court disposals. For instance, targeted disruption work in the community by youth support workers and police officers is beginning to identify individual adults who exploit children. Workers show commitment and persistence in engaging children at risk of exploitation in successful face-to-face direct work in the evening and at weekends across the local authority area.

Experienced staff with relevant skills provide children and their parents with timely access to an array of commissioned services. Dedicated child exploitation workers in the young person's recovery service support children who are vulnerable to exploitation through their involvement in drugs activity. Joint targeted work between services such as social care early help practitioners, teachers and the CAMHS youth justice-dedicated nurses is effective in building trusting relationships with some vulnerable children who experience poor emotional and mental health. Referrals to the national referral scheme by the police are increasing.

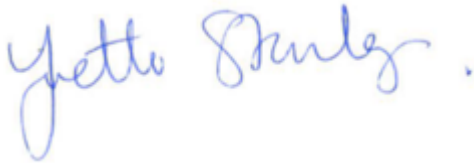
Identification flags on partners' electronic systems are consistently used to highlight risk levels of children at risk of exploitation and going missing. The LSCP is intending to take action to ensure that awareness-raising and preventative work is systematically and strategically in place across communities and businesses, and with parents and children, to alert them to the risk of child exploitation.

Next steps

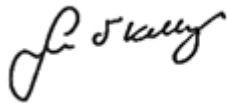
We have determined that Cheshire East Council is the principal authority and should prepare a written statement of proposed action responding to the findings outlined in this letter. This should be a multi-agency response involving the individuals and agencies that this report is addressed to. The response should set out the actions for the partnership and, when appropriate, individual agencies. The local safeguarding partners should oversee implementation of the action plan through their local multi-agency safeguarding arrangements.

The local authority should send the written statement of action to ProtectionOfChildren@ofsted.gov.uk by 5 January 2023. This statement will inform the lines of enquiry at any future joint or single-agency activity by the inspectorates.

Yours sincerely



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