



Kingston and Richmond  
Safeguarding Children Partnership

# Annual Report

## 2020-21

*Working Together to keep children's safety and  
wellbeing at the heart of everything we do*

**Detective Superintendent Andrew Wadey KRSCP Chair**

## Introduction



### **Detective Superintendent Andrew Wadey, KRSCP Chair**

I have been delighted to chair the Safeguarding Children Partnership from June 2021, taking the baton from Detective Superintendent Owain Richards. Due to the COVID-19 pandemic and the impact of the Everyone's Invited website testimonies from so many young people about Harmful Sexual Behaviour, this has been a very challenging tenure for our families, workforce and volunteers in Kingston and Richmond. I wish to begin this report by extending my thanks to you all. This report is written for you, our local children, young people and their parents.

The three Strategic Partners, Ian Dodds, Director of Children's Social Care for Kingston Council and Richmond Council, Fergus Keegan Director of Quality for the Kingston and Richmond CCG (Clinical Commissioning Group) and I have seen local progress, despite our COVID-19 challenges this year, which we will outline, as our new safeguarding arrangements have settled.

Throughout my report you will find examples from some of our local Partners of their safeguarding work, their sharing of our Priorities, and the impact of our work on local children.

Across our two boroughs we are encouraging the use of Signs of Safety terminology in every agency and sector, which I will use for this report.

As my time as Partnership Chair ends in October, I am pleased to hand over to Fergus Keegan, as Chair, with our Priorities 2020-22 to take us forward, informed by our local young people and Partners:

- **Mental Health lead Fergus Keegan, Director of Quality, CCG,**
- **Contextual Safeguarding lead Detective Superintendent Andrew Wadey and**
- **Parental Vulnerabilities- Think Family, Early Help lead Ian Dodds, Director of Children's Services.**

**Detective Superintendent Andrew Wadey**

**6<sup>th</sup> October 2021**

# EXECUTIVE SUMMARY

## Local Safeguarding Assessment

- 1 As KRSCP Chair, statutory guidance requires me to answer two questions of Kingston and Richmond in a transparent way, these are:
  - How effective are our local arrangements?
  - What is the impact of our work on safeguarding outcomes for children?
- 2 The new safeguarding arrangements began in Kingston and Richmond in October 2019. These have taken some time to embed, hampered to an extent by the pandemic beginning six months later. Our updates to our local arrangements can be found in para 240 below.
- 3 From April 2020, the three statutory partners have met fortnightly online. They also met regularly with the Independent Scrutineer, Chris Robson, who left us in January 2021. This report includes an analysis of the way our local arrangements have been working and of our communications in para 300. This Executive Summary will bring some highlighted examples of impact and outcomes.
- 4 Ian Dodds meets regularly with each borough's children's lead members, Council Leader and Chief Executive- information is shared about local strengths and risks as well as Partnership decisions. Commander Elisabeth Chapple has joined our Statutory Partner meetings and Fergus Keegan regularly updates the CCG Chief Officer, Gloria Rowland. The KRSCP provides periodical updates to relevant agencies and the Strategic Leadership Group (SLG) minutes are published on the KRSCP website.
- 5 Sadly, we have had 20 child deaths during 2020-21 and 12 Rapid Reviews took place to consider serious incidents. The actions and learning arising from them are outlined in para 262 below.

## What is going well in Kingston and Richmond?

- 6 Agencies work well together in Kingston and Richmond. We are pleased to track impact in increases of referrals to the Single Point of Access (SPA) in Kingston and Richmond, after they initially fell in lockdown. This means more children and pregnant women were "seen" as schools locked down. Particularly there were increases in referrals around Domestic Abuse, one of our priorities around parental vulnerabilities- there are many reasons why, however I wished to highlight the increase in Domestic Abuse awareness at West Middlesex University Hospital this year. There are very few dispute resolutions which reach the SLG. We have strong attendance in our learning and development, which moved successfully to a secure online portal in April 2020, offering more courses this year. There is more information in para 277.

- 7 The pandemic immediately put incredible stress on local families and our workforce, as face to face work largely closed, and so I will give it a significant place in my introduction. As a speedy response, in April 2020, we decided to initiate a fortnightly Covid Planning group chaired by Louise Doherty, Kingston Designated Nurse, and Cassey Spratt, SPA (Single Point of Access) Manager, AfC. This group moved to meeting monthly in the summer 2020 and has helped to scrutinise arising needs and vulnerabilities. This led for example to the distribution of voluntary sector support networks to schools and other agencies, so they could direct families for aid, and public Communications campaigns to keep the child in sight in the community, as referrals to Children's Social Care fell. There were over 90 multi-agency actions arising from the group, most of which were completed. A COVID-19 good practice grid was prepared to identify good, innovative practice that would be continued beyond the pandemic time. For example, virtual meetings were popular for some young people in AfC and in CAMHS; and staff developed socially distant safe ways to meet or electronic means of multi-agency supervision, including group supervisions. The Partnership also highlighted when frontline staff were taken away from their safeguarding roles to help in other crisis situations. We developed parent and carer KRSCP website pages regarding COVID-19, which had 301 hits during the calendar year and a practitioner page which had 552 hits.
- 8 The Covid planning group has monitored drops in referrals to the SPA and Child Protection medicals, shared information on redeployment of staff and impact of easements, and helped Partners to prioritise, such as promoting Early Years funding for children. As a result of our Communications' campaigns and scrutiny, we then saw referrals from Police, GPs and Schools rise during the lockdowns. The group has considered vulnerable children attending schools, sharing of community locations to see families, and Housing Teams and Adults Social Care were engaged to support us in our local work together.
- 9 In a feedback survey, most respondents found the agency updates and data shared to be very useful, and all thought that the group had fulfilled its functions. This was verified by our Independent Scrutineer, Chris Robson in May 2020. Participants felt that the group enabled a "bird's eye-view of different topics" and "group problem-solving". The group focussed "different expertise onto a problem and was supportive". It highlighted voluntary and statutory sector resources and provided good learning and development, and information exchange. Heather Mathew, Children and Young Peoples Voluntary Sector Strategic Lead Manager, Richmond Council for Voluntary Service, said that the group helped shape ideas for Richmond voluntary sector to direct resources to best support the wider network of children's services.
- 10 Vicky Fraser, Designated Nurse for Children Looked After said that the group provided a virtual space after the Partnership had reconfigured to meet - there was an appetite for conversation. She felt that the group had grown and there was a local resilience, putting strength and empowerment into the system. Kavitha Ramakrishnan, Domestic and Sexual Violence Reduction Policy Officer, Safer Kingston commented that the group was a "bonus silver lining to the pandemic" - information filtered down into individual Risk Management Plans.
- 11 Karen Penny, Children and Young People Project Officer, Kingston Voluntary Action said that she took ideas from the group to other networks and it gave the Voluntary Sector a bigger picture of what was going on. This scrutiny led, for example, to two emergency DSL Forums in summer 2020 for our local schools.

12 This is feedback from the Covid Planning group evaluation.



13 Another innovation to promote, despite the pandemic, was the creation in autumn 2020 of our Safeguarding in Commissioning working group, chaired by Mirela Lopez, Kingston Council and supported by Tracey Welding, Deputy Partnership Manager. Working at a high level, this group aims to ensure safeguarding is part of procurement, contracts and contract management in our key partners. This will give Partners more assurance in providing local services. An agreed framework will be used when procuring services for children, ensuring suppliers are compliant with appropriate due diligence being undertaken. We will measure its impact including in relation to LADO (Local Authority Designated Officer) referrals.

14 We continue to track our Top 5 strengths and areas of improvement set in November 2019 as we began our new arrangements. We can see some progress in our stubborn areas, for example in GP reporting to Child Protection Conferences in Kingston, and Kingston timeliness of Initial Health Assessments for children newly looked after. However, we do continue to have administrative challenges in both those processes and so this needs to improve. We continue to oversee Elective Home Education, as numbers have risen in both boroughs this year.

15 Paragraph 262 onwards below outline our learning arising from case reviews. In summary, we have found new ways to share learning during lockdown such as webcasts from arising issues such as Think Family, Early Help Assessments, the newly launched Resilience Networks, Anti-Racist practice and Vicarious Trauma. We have held virtual Conferences, for the re-launch of the Early Help Partnership Strategy in November 2020 and the Journey to Exclusion Conference in January 2021. We are currently working on webcasts around Safer Sleep and Young Carers.

16 We have also used national research and evidence in our local Partnership work. We have disseminated learning from national reviews to our Partners and in our newsletters; and as a result of the Child Safeguarding Practice Review Panel's work on Sudden and Unexpected

Deaths in Infancy, we have begun a working group. "It was Hard to Escape", the Criminal Exploitation report published by the Child Safeguarding Practice Review Panel in March 2020, led to a senior leadership challenge conversation in August 2020 and audit work around mental health and MARVE (Multi Agency Risk & Vulnerability to Exploitation) Panel in December 2020. Several local families were considered in the "Hard to Escape" review.

- 17 Building on our learning and strengths, the following steps were taken to promote children's wellbeing during the year, for example:

A new Transition Hub began in the Virtual School for those new to care to help them access education, to support those in care at risk of exclusion and to provide a bridge when children enter into care. This initiative came from learning in our multi-agency audits considering Children Looked After in 2019.

The CCG reviewed its health offer, in the light of local learning, for Children Looked After and now annual health assessments can be brought forward flexibly, if a serious issue arises. Following local learning last year, the CCG also has worked hard to develop the relationship between Private semi-independent accommodation providers in our boroughs, who often care for those who have left care and their local GP practices. They have provided training and outreach.

- 18 Our Independent Scrutineer, Chris Robson, has provided assurance and challenge to us as Statutory Partners and this helps us understand our local arrangements better, our strengths and areas for improvement.
- 19 Chris Robson scrutinised our COVID-19 response in early summer 2020. He found our response good, including our Covid planning group work and Communications; Chris recommended we strengthened our Partnership Communications further, which we have done. The SLG accepted most of his recommendations. Please read para 300 below for more information.
- 20 What's going well? We moved our other Subgroups and meetings online too, and this has led to such good engagement and commitment that as an SLG we have taken the decision to meet primarily online going forward - having the occasional face to face Partnership meeting as needed. Most of our training will remain online with some face to face training beginning in January 2022. Child Safeguarding Practice Review Panel learning regarding the threshold for serious incidents has been circulated and discussed by the SLG and LLR Subgroup.
- 21 The London Partnership's MASA (Information Sharing Agreement) was shared with all agencies just before the end of the financial year; and we have assurance of their sign-offs. That gave us a good opportunity to remind all our workforce and volunteers of our information sharing policy and GDPR guidance in our March 2021 KRSCP newsletter.
- 22 We can perhaps attribute the improved identification of children's needs this year in part from the impact of multi-agency learning. The SPA (Single Point of Access) run by AfC, ran regular bite sized, virtual drop-ins to aid communication. We publicised the concept of Reachable moments in our newsletters and training and the pitfalls of relying solely on virtual meetings.
- 23 During this year, we worked hard to strengthen our multi-agency use of Early Help (EH). The Early Help Tool and Strategy has been reviewed through consultation workshops with

partners and was launched at a successful online event in November 2020, which reached 75 local practitioners. This then led to the establishment of the Early Help Strategic Board chaired by Ian Dodds and coordinated by Tracey Welding. An EH training webcast was developed January 2021 and shared widely with all partners to raise awareness of the newly developed Resilience Networks – there were 1,441 views as at the end of March 2021.

- 24 As agencies, we have an open attitude to learning and findings from case reviews, audits and our safeguarding self-evaluation work through Section 11s. Very few matters are escalated to senior managers through our dispute resolution process by either member of the public or practitioners.
- 25 How effectively are we promoting learning? We were very quickly able to host our learning on a secure Zoom platform and amended our training to support virtual delivery. Numbers attending our virtual learning have steadily grown and we have used webcasts and short bite-sized sessions, for paid staff and volunteers to spread our safeguarding messages. This year 944 delegates attended core training and 550 attended additional training, against 1,722 in total last year and 1,921 against 3,044 last year using our online learning.

Crying Sons has provided fortnightly professional online consultation sessions since autumn 2020. Feedback included- "Keep me in the loop for further sessions. Many thanks" ABC Housing "I can't wait to get back to work and try some of these things out." Youth worker "I will take away lots of things that I can quickly and easily apply." Social worker.

- 26 What is going well? Another strength is the Designated Safeguarding Lead network in our schools, which has real reach in terms of engagement and effective understanding of safeguarding issues and effective responses. Building on the strength of our DSL (Designated School Safeguarding Lead) Forums, the voice of education has been strong in the SLG. Education is our fourth statutory partner. An initiative from Sophie McGeoch, Headteacher Representative for Primary Schools, led to the Partnership winning a DfE grant in Spring 2021 of £37,000 for DSL supervision. This is currently being implemented. At the time of writing, 69 schools and 33 nurseries are taking part. We can also see a rise in Schools engaged in the Police Operation Encompass to 114 schools, including independent schools- a rise from 48 in December 2019. We will be working to increase this further during this year to Early Years' settings.
- 27 Our school network led to a swift response to the Everyone's Invited website in March 2021. We were able to provide support to all schools, GPs and health providers before schools broke up and an emergency DSL Forum in April, attended by 95 schools.
- 28 During the year, there have been two emergency DSL Forums in summer 2020 to respond to local issues raised by the pandemic- mental health concerns, Domestic Abuse and substance use. We can see its impact in these comments below from the 58 total responses received in June 2020.

*"Lucy MacArthur has visited our school and always takes the time to answer any questions which we may have. We are most grateful for her proactive, informative and positive approach to her role".*

*DSL Forum*

*The role is a very useful one bringing together key safeguarding themes and enabling networking and sharing good practice amongst DSLs.*

*Brilliant safeguarding practice-sharing information thank you so much for your invaluable support.*

*A very valuable role. Thank you Lucy for all the really useful info you update us with - you make a big difference. We have always found the DSL forums a very positive experience. We have a team of DSL/DDSLs and we share attendance between us. It is helpful for our termly staff training as we can cascade the information down. They are helpful too in terms of meeting other DSLs and sharing practice – and also the AfC/ Borough staff.*

*Really helpful and responsive.*

*As new to role this year I have particularly valued being able to contact Lucy with questions that I may have knowing that I will either receive the support I need directly or be signposted to the appropriate organisation. Thanks for all your hard work Lucy!*

*“The safeguarding team within Kingston and Richmond is excellent. I feel supported and feel I can ask Lucy anything”.*

*“Lucy is my go-to person for all things safeguarding, A true expert in her field. I am very grateful to know her.  
Thanks Lucy”..Debs*

*“Really useful and supportive this year, thank you. Especially when schools were closed it was great to know that the KRSCP was still working and sharing advice etc!”*

*“Excellent to have a coordinator to bring all schools together both primary and secondary (I enjoy networking with both) and organise excellent facilitators often in response to what has been voiced by the needs of the group. Safeguarding updates are also very important and interesting,  
Thank you Lucy”!*

29 From George Floyd’s death last June 2020, we have determined to have an anti-racism and diversity thread through all our work as Partners. As Chair and Partners, we published a statement in June 2020 about our local expectations and our aim is for all our working groups to consider this topic.

30 The SLG has considered its response to the report published in March 2021 by the Commission for Racial Equality. Therefore, we have asked all agencies not to use the term “BAME” (Black and Minority Ethnic) any longer but to identify the group that is being referred to. This report reflects that decision. Disproportionality is a grey area for us - we are some of the most affluent and safe boroughs in London, however a small number of children and their



families face multiple disadvantages, which stem in part from their race. We can see that children from a Black African, Black Caribbean or dual heritage background are more likely to be involved with Child Protection Services, MARAC, (Multi-Agency Risk Assessment Conference), to be Looked After, involved with Youth Resilience and/or Offending Services, or face fixed term school exclusions. In our DSL and Early Years Forums, anti-racism films have been disseminated and schools have shared good practice. A diversity area developed on the KRSCP website in August 2020 and has had 32 hits.

2019 - 2020	Kingston	Richmond	Total	2020 - 2021	Kingston	Richmond	Total
Autumn Term	29 (24 schools, 11 nil returns)	52 (37 schools, 20 nil returns)	81	Autumn Term	43 (35 schools, 17 nil returns)	57 (40 schools, 19 nil returns)	100
Spring Term	11 (26 schools, 18 nil returns)	21 (33 schools, 24 nil returns)	32	Spring Term	21 (36 schools, 24 nil returns)	18 (37 schools, 22 nil returns)	39
Summer Term	2 (24 schools, 22 nil returns)	1 (37 completed 36 nil returns)	3				

**Racist incidents reported (no. of schools who completed a form and no. of nil returns)**

- 31 The theme of diversity has extended to our DSL Forums, which have had sessions on racism and its impact in schools. As a result, we can see a rise in schools reporting about racist incidents- we are monitoring nil returns- asking if we are letting unconscious racial bias go unrecognised. So far, our work shows a fall in nil-returns. This table below shows the shows as an example the impact of the DSL Forum around the reporting of racist incidents in schools as part of the Golden Thread of anti-racism and anti-discrimination in all our work.
- 32 There was agreement across partners that Signs of Safety has already established itself across the partnership as a popular and widely adopted practice framework - and as Strategic Leaders, we have endorsed Signs of Safety more formally as the common way of working with families that all partners should adopt across Richmond and Kingston, in ways that work for their agency. During the spring, together with the Chair of the SABs in Kingston, Richmond and Wandsworth, we asked all agencies to include Safeguarding on every agenda as a standing item. We will be monitoring its impact.
- 33 As a Partnership we have a broad dataset which tracks and scrutinises, via the Quality and Innovation Subgroup (Q & I Subgroup), local performance for most significant Partners. Work is ongoing to develop our Police indicators across the Met in London.
- 34 We have been seeking to understand the reasons why some children were becoming subject to a Child Protection Plan for a second time, and the Q & I Subgroup carried out a multi-agency audit in spring 2020 over both boroughs, looking at children subject to Child Protection Plans for more than one time for neglect. We had planned a Neglect independent scrutiny theme in spring 2020, which was overtaken by the pandemic. This audit found some

encouraging practice and learning. There were themes of premature case closures, information sharing, sexual health and missed appointments. One recommendation was to review scrutiny for complex cases, which has led to multi agency working together to develop a reflective space to be piloted with practitioners for complex cases this autumn. Read more in Para 247 below.

## Stubborn Issues in Kingston and Richmond

- 35 What needs to improve? What are we worried about? At our first Strategic Leadership Group (SLG) in November 2019, Partners chose Top Five areas of vulnerability, which correlated to local stubborn issues identified in the last Annual Report, where improvement was needed. Everyone wanted a renewed focus on engagement of GPs in the Child Protection Conference process. There has been considerable effort made through a Task and Finish Group by the AfC Conference Team, Named GP and CCG Designated Nurses, and at the end of this financial year, we can see gains locally, as Quarter 4 2020-21 data illustrates here.

[ICPC-Initial Child Protection Conference, RCPC-Review Child Protection Conference]

	<b>GP reports</b>	<b>Jan 2021</b>	<b>Feb 2021</b>	<b>March 2021</b>
<b>Kingston</b> – total number of conferences - 76	Reports received 41 (54%)	ICPC - 3 - 2 reports received (67%)	ICPC - 9 - 5 reports received (56%)	ICPC - 10 - 8 reports received (80%)
		RCPC - 21 - 11 reports received (52%)	RCPC - 19 - 10 reports received (53%)	RCPC - 14 - 5 reports received (36%)
<b>Richmond</b> – total number of conferences - 82	Reports received 34 (42%)	ICPC - 7 - 4 reports received (57%)	ICPC - 9 - 4 reports received (44%)	ICPC - 7 - 6 reports received (86%)
		RCPC - 16 - 4 reports received (25%)	RCPC - 18 - 4 reports received (22%)	RCPC - 30 - 12 reports received (40%)

- 36 Timeliness of Initial Health Assessments (IHAs) for Children Looked After was another area to develop. This has been closely monitored by a Task and Finish Group during this year, chaired by Dr Sandy Kenyon, Designated Doctor for Children Looked After. As at the end of Quarter 4 2020-21, there was 22% timeliness [assessment takes place within 20 working days] for IHAs for Richmond and 64% for Kingston children. Why are we struggling? It would seem it is the combined challenges of working across two different providers in the two different boroughs, ensuring timely notifications by AfC and ensuring there is appropriate administrative support in sharing information when children become newly looked after. Bi-weekly health/permanency catch up meetings continue.
- 37 To address the issue of timeliness of IHAs, the Designated Nurse (DN) and Designated Doctor (DD) now attend the AfC Performance, Quality & Innovation Board Monthly and IHAs is a standing agenda item, so monitoring is consistent. The DN has met with the Practice Development Lead at AfC to discuss how teams can be supported to make referrals on time. And an online training module is under development.
- 38 HRCH (Hounslow and Richmond Community Healthcare) have employed a dedicated CLA (Children Looked After) administrator 14 hrs per week. A request has been made to YHC (Your Healthcare) for similar interim arrangements at Moor Lane but they currently do not have the resource to provide additional administration time.

- 39 Elective Home Education (EHE) remains a matter of our oversight. The local rise in EHE cases was discussed at the Covid Planning meeting on 16<sup>th</sup> December 2020. We took legal advice regarding sharing information about EHE with partners in August 2020, and this legal advice has been considered by the Education Welfare Manager in AfC. No changes are planned at present by AfC; they wish instead to wait for new Government legislation; the Designated Nurse in Kingston is meeting with AfC Managers. We will wish to understand these children's needs better as we go forward.
- 40 As at the end of Quarter 4, 2020-21, there were 393 children (Kingston 216, Richmond 167) being home educated. There has been a local and national rise this year, as at March 2020, there were 143 Kingston children in March 2020 and 138 Richmond children receiving home education. We will be seeking additional assurance that the increasing numbers of children who are Electively Home Educated are safe, that any risks to them are being effectively identified and responded to. We know that this can be a particular issue for independent schools during this pandemic period, as children can be not attending, families paying fees, but they are not deregistered.
- 41 One of our key areas of focus is emotional wellbeing and mental health. Referrals to CAMHS (Child and Adolescent Mental Health Services) have risen in both boroughs over the year. In Kingston referrals to the SPA (Single Point of Access) were 20% for child mental health concerns this year, and it is the most common factor identified in the single assessment. The figure was 22% for Richmond. We can see a year on year rise for referrals to CAMHS for both boroughs, 2,174 referrals for Kingston children and 2,294 for Richmond children this year. See para 105 below for more information.
- 42 What are we worried about? During the year, we have tracked growing numbers of children and young people in need of mental health support. CAMHS support in SPA has been augmented and we have promoted voluntary sector mental health support. This is a priority for us and there is much more to do to meet local needs in a timely way. The CCG is working on a CAMHS transformation plan and we look forward to its development.
- 43 At March 2021, 50% of Kingston care leavers and 56% Richmond care leavers were engaged in Education, Employment or Training and 84% were living in suitable accommodation; 94% of Richmond young people were living in suitable accommodation. For both boroughs there has been a small rise of young people in drug treatment – just under 50-60% of exits planned from treatment, 7% of those in treatment were re-referrals. At the end of 2019-20, 11 children who are Privately Fostered were identified in Richmond; in Kingston this was 19 children- a significant growth in agencies referring concerns.
- 44 Another worry-Transitions has remained a key issue and we carried a multi-agency audit of several transitions plans in September 2020- Children Looked After, CAMHS (Child and Adolescent Mental Health Services), EHCPs (Education, Health and Care Plans) and Youth Offending. In summer 2021, Roberta Evans, AD Early Help in AfC began a multi-agency Task and Finish Group to oversee the transitions of those known to MARVE who reach 18 years. It is hoped the model will be similar for all the boroughs in South West London.

## What is the impact of our work on safeguarding outcomes for children?

- 45 We can see impact and outcomes and this is a summary in paras 185 onwards. Overall, there has been a rise in significant safeguarding work, because of the COVID-19 pandemic. We see this especially around Domestic Abuse and mental health. I am particularly keen to highlight our work around Early Help and Contextual Safeguarding. There has been a focus on some of the elements of exploitation, such as modern slavery, locations, and Harmful Sexual Behaviour.
- 46 Communications and information sharing helped to raise referrals from schools, information shared by schools around mental health, substance use and Domestic Abuse during last year's lockdown. But as referrals have risen, we can see that fixed term exclusions from school have risen, despite lockdowns occurring. The Quality and Innovation Subgroup will be seeking to understand this apparent rise better and work towards improving the outcomes for these children.
- 47 During the year, two Child Safeguarding Practice Reviews were completed – a DHR (Domestic Homicide Review) and SCR (Serious Case Review) regarding Maria, the F Family from Richmond and a review of emotional wellbeing support in Kingston and Richmond. There are three ongoing reviews- a DHR regarding Young Person Q from Richmond which follows a practice review completed last year; Family T a practice review about inter-generational child sexual abuse in Richmond, and Ulric a practice review regarding a Kingston child. We track the impact of the learning further in this report in para 262.
- 48 The Domestic Homicide Review and Serious Case Review in relation to a Richmond F Family (Maria) was published in March 2021. There was learning around the stresses of financial pressures, particularly for those who do not speak English as their first language and the risk of suicide and self-harm as a result. As a result, agencies have been advised of financial support and debt counselling avenues, as there are considerable financial pressures facing families following the pandemic.
- 49 Our KRSCP completed Business Plan 2020-21 can be found here: [KRSCP BUSINESS PLAN 2020-21](#)

## Priorities 2020-22

- 50 In March 2020, following a consultation with local Partners, the SLG (Strategic Leadership Group) set priorities for the next two years for the Partnership with a Golden Thread throughout them all of diversity and anti-racism. They will continue to March 2022.
- **Contextual Safeguarding – Lead Det Super Andrew Wadey**
  - **Mental Health – Lead Fergus Keegan**
  - **Working with parents with vulnerabilities, Think Family, Early Help – Lead Ian Dodds**
- 51 This report is published on the KRSCP website here: [KRSCP ANNUAL REPORT](#)  
A copy of this report has been sent to the Child Safeguarding Practice Review Panel and the What Works Centre for Children's Social Care.



Kingston and Richmond  
Safeguarding Children Partnership

# Annual Report

## 2020-2021

*Working Together to keep children's safety and  
wellbeing at the heart of everything we do*

**Detective Superintendent Andrew Wadey KRSCP Chair**

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## Engagement with, and Participation of, Children and Young People

- 56 As a Partnership we have used partners' local agency feedback from children and families to inform our Priorities for our work 2020-22: Mental Health, Contextual Safeguarding and Parental Vulnerabilities.
- 67 As Statutory Partners, we have sought to engage young people in setting our direction. This has fed back into the Early Help Strategic Board chaired by Ian Dodds, for example; the Youth Outloud report on children and young people's mental health during COVID-19 and the Rocket Science peer research report on young people's needs, especially in relation to substance use and sexual health. Ian is also leading on Start Well in the Health and Care Plan in Kingston.
- 58 On a micro-level, as a means of addressing some disproportionality issues, for example, the AfC Review Service, which reviews planning for Children Looked After, listened to children who do not have English as their first language, and they now provide audio recorded translation meetings a couple of weeks after their Review meeting. The children can better understand their outcome letter and ask additional questions with the support of an interpreter. Children Looked After told the service what their Review outcome letters should include, and in direct response AfC Independent Reviewing Officers (IROs) now audio record Child Looked After Review meetings and write shorter summary letters. The Service is continuing to roll out the work of our Children in Care Council to fully embed 'HaveMySay', an online consultation tool that enables children to share their views in a different format.
- 59 The CCG has supported two care leavers in many practical ways during COVID-19. This has brought the young person's voice and lived experience into their daily work.
- 60 Children in Care Council members, such as Selina and Tom, have developed and now deliver Voices, Right and Choices training for staff to explore practical methods of how to meaningfully and effectively involve children and young people in care, and those leaving care.
- 61 Children designed a separate newsletter for primary and secondary children "In Safe Hands" for their peers in February 2021 as lockdown continued. The newsletters had information about keeping safe and looking out for their friends. They can be found here

### [KRSCP Newsletters](#)

And here:

### [In Safe Hands Newsletter](#)

Here is one of the poems in the newsletter:

"I am just here to tell my experience,  
I am just here as a symbol of resilience,  
No matter what happens I will not be furious  
For we must stay together to be victorious"

Mariam, Year 13

Crying Sons work with young people with high vulnerabilities- here is one young person's voice, talking about the impact of the intervention he received:

"I have cut down on smoking Flavours (very strong Cannabis) because it was letting me hear voices (young person) [Mentor] My son has stopped his aggressive behaviour towards me. (mum) I have not been stabbed again. (young person)".

- 62 There is excellent evidence across SWLStG CAMHS (Child and Adolescent Mental Health Services) of the Trust culture of listening to and taking children seriously. CAMHS has appointed a new service user involvement officer, who is actively recruiting young people to participate in service improvement starting with the development of the CAMHS website, and also looking at waiting areas. There is a bimonthly CAMHS participation newsletter, and there is a plan for a collaborative CAMHS Mental Health Workshop day. Service user representation is compulsory for all interview panels for posts of Band 7 and over. Young people worked with the Adolescent Outreach team to produce a video introducing the team for others.
- 63 SWLStG community meetings and business meetings also take place on the wards providing opportunities for both adults and young people to be involved in all aspects of ward ethos, environment, policy and development, and they even take turns chairing the meetings.



## Anstee Bridge

64 Following our priority around mental health and wellbeing, we focus on outcomes for children at Anstee Bridge, an initiative which supports young people with emotional health concerns to access education.

“Anstee Bridge has been fantastic for Shane. It's taught him so much about life skills, confidence, communication and it's made him shine as a person. Shane felt safe and he felt inspired whilst going to Anstee Bridge he will miss going.”

“Anstee has helped me to be more comfortable in myself. It taught me to go out of my comfort zone a little more and do things that I usually wouldn't consider. Anstee has helped me to become more confident in myself and what I am capable of.”  
“I've spoken to people more, I've shared my thoughts on things more, I Enjoy talking to new people and I don't feel “pressured” when having to do things”

“My daughter was not confident at all and suffers with mental health since being at Anstee Bridge she has come out of her shell. She is more confident than she has ever been and can work in small groups now.”

“Anstee has also helped my confidence - by being encouraged to talk to different people with all different backgrounds and stories. It has introduced me to amazing people - all the volunteers and other students, the staff and all the guests at the tea parties.”

“I really enjoyed the creative sessions where i could express myself - some of my favourites included the research pages, the collages, printing, clay etc. - even if it took me a while to get started. Another thing I enjoyed was the trips - they were so interesting and I learned a lot - I really liked the body worlds one and the museums.”

“My son's resilience has also improved, he has tried new things with Anstee Bridge that I didn't imagine he would do e.g river wading. He was able to get up in the morning to get to Anstee Bridge on time and his attendance to Anstee Bridge was really good.”

“Before the schools were closed due to the pandemic my son's attendance at school was back to being full time which was obviously a massive turn around to what it had been when he started at Anstee Bridge.”

## Youth Voice Mapping of Research

65 Many Partners have active participation groups which have informed our strategic work and information came to our Strategic Leadership Group in March 2020 and 2021. The following table gives examples of youth participation on several subjects during the year:

Topic	Detail
<p>Youth Needs consultation</p> <p>Throughout 2020 – Jan 2021 One Richmond (Hampton Fund and RPLC)</p>	<p>In Phase 1 of the research we trained 14 young peer researchers who interviewed 222 under 25s and in Phase 2 we spoke to 26 young people. Dec &amp; early Jan 2021 were spent analysing our findings and writing up a report which has now gone to oneRichmond.</p>
<p>Impact of Next Steps programme of careers guidance on SEND learners in Years 10 and 11 Ann Mason, 14-25 Manager AfC</p>	<p>We have developed a short survey for young people to complete after they have had a 1:2:1 careers interview with one of the careers advisers in the 14-25 team.</p>
<p>May 2020 - March 2021 Young people's mental &amp; physical health, access to health &amp; care services and to information, during the COVID-19 pandemic.</p> <p>Sara Rossi (Healthwatch Richmond) and Helena Wright (Healthwatch Kingston), working jointly on Youth Out Loud!</p> <p>Reviewing Sexual Health Services (Wolverton Centre, Kingston Hospital)</p> <p>Mental Health Awareness Week</p> <p>Young people's healthy eating, allergies and access to alternative foods during the COVID-19 pandemic.</p> <p>Sexual Health Awareness Week</p> <p>Young people's access to sexual health information and services</p>	<p>Survey</p> <p>15 Steps Challenge</p> <p>Electronic flyer with links and signposting information</p> <p>Social media photo challenge</p> <p>Video-Making</p> <p>Podcasts-making</p> <p>Electronic flyer with links and signposting information</p>

Healthy eating & eating disorders	
SEND Grace Over AfC SEND Participation Officer	We consult with and involve children and young people with SEN/D about their experiences, the services and support they receive (education, health and social care especially), the local area, rights and access, identity and much, much more.
Children in Care Council	The Children in Care Council meet weekly to share views. This is done weekly on Google Meet or in person at Heatham House. They also meet monthly with corporate parents

66 Following Rapid Reviews in autumn 2020, we are asking young people to take part in our autumn 2021 deep dive and independent scrutiny into the impact of parental mental health on their children, this will include the voice of Young Carers.

## Local Safeguarding Assessment

### Demographic

67 In Kingston, there is a total population of 176,313 people, of which 22% are children aged 17 or under. In Richmond there are 199,419 total inhabitants and 45,493 children aged 18 or under. In Kingston, 39% of people are from a Black and Minority Ethnic background, whilst 17% of people are from a Black and Minority Ethnic background in Richmond. In Kingston, we have significant populations of Tamils and Koreans, Black British and other Black African Caribbean and Black African families. There is a small Traveller population in both boroughs. In Richmond, 23% of children have a first language which is not English, this is 33% in Kingston. There is a significant Polish population in Richmond. 12% of Kingston children were living in low income families in 2016 (HMRC). The population is generally safe and affluent but there are areas of deprivation in both boroughs. Housing costs are high and there are growing numbers of families with children living in temporary accommodation, mainly outside their boroughs of origin. Low numbers of children live in poverty- 5% of children in Richmond were living in a low income family in 2018-19, and 14% of pupils were eligible to schools' meals. We anticipate this figure to rise due to the impact of poverty and loss of furlough arrangements in autumn 2021. Poverty is a key indicator in rises of child abuse and neglect. We have discussed the theme of poverty in anticipation of local rises, in our workstreams and will be challenging each Council regarding their poverty prevention work during summer 2021. These figures from the Children's Commissioner illustrate the prevalence of children facing issues of parental vulnerability in our boroughs.

#### Richmond

3.96% affected by parental alcohol use – 1,410 children  
5.74% affected by domestic abuse – 2,590 children  
12.14% affected by parental mental health concerns – 5,480 children  
0.89% of children have all 3 vulnerabilities – 400 children aged 0-17 (Children's Commissioner)

#### Kingston

3.52% of children affected by parental alcohol difficulties – 1,360 children  
6.14% of children affected by domestic abuse – 2,370 children

12.56% of children affected by parental mental health concerns – 4,850 children  
0.99% of children are affected by all 3 vulnerabilities – 380 children aged 0-17 (Children's Commissioner)

- 68 Much of our scrutiny work has centred on these strands of parental vulnerabilities, and we are undertaking a deep dive into Domestic Abuse, and MARAC (Multi Agency Risk Assessment Conference) and the impact on infants in early summer 2021.
- 69 In our boroughs, there are rising numbers of children with Special Educational Needs, particularly from an ADHD (Attention Deficit, Hyperactivity Disorder), and ASD (Autism Spectrum Disorder) background. Locally, we saw a rise in EHCPs (Education, Health and Care Plans) in 2018-19 – a rise of 47% in Kingston and 26.8% in Richmond compared to an outer London borough average rise of 8.5%. To an extent this represents our demographic but AfC is working with schools around preventive support in primary sectors.

## Child's Journey

- 70 Education is a key protective factor throughout childhood and schools are a key universal partner. What is going well? 76% of boys and 85% of girls had a good level of development in Richmond, and 69% of boys and 83% of girls in Kingston when they entered school; these are higher figures than the London average. Those receiving support are relatively low within national parameters. We know a proportion of those additional supports are for children with ASD (Autistic Spectrum Disorder) / ADHD (Attention Deficit Hyperactivity Disorder) conditions.
- 71 Missing school can place a child or young person at significant risk at times of exploitation, social isolation or involvement in crime or risky behaviour. This has been amplified by learning from our local reviews about vulnerable adolescents. We also are aware that many of the children considered at the MARVE (Multi-Agency Risk and Vulnerability to Exploitation) Panel have Special Educational Needs and Disabilities. We audited ten cases in autumn 2020 looking at the theme of "Journey to School Exclusion" in our learning hub work as part of the Quality and Innovation (Q&I) Subgroup and worked to raise awareness of School Governors to the recommendations of the Timpson Report with a Task and Finish Group chaired by our School Governor Lay Member, Aisha Bicknell, who attends our Q&I Subgroup. MP Edward Timpson, CBE wrote about school exclusions in a report for Government in 2019 (see para below 261).
- 72 The SLG accepted all the actions of the Scrutiny report, Journey to Exclusion by our Independent Scrutineer, Chris Robson, and the Assistant Director for Pupil Support, Sheldon Snashall is working on the action plan. This has led to a directory of enrichment services being sent to secondary and primary schools earlier this year to help support students and maintain them in School. There are now two NEET (Not in Education, Employment or Training) groups- Operational and Strategic which oversee those who are most vulnerable. One secondary school in Richmond is undertaking a Contextual Safeguarding pilot. The Virtual School has invested in a careers' advisor to work with older young people at risk of becoming NEET. This will encourage the protective factors of work or study and the building of alternative communities or places to belong for young people to join. There is also a review of post 16 education services for vulnerable young people taking place, which will help to

divert young people from serious youth violence and exploitation. The report can be found here: <https://kingstonandrighmondsafeguardingchildrenpartnership.org.uk/about-kingston-lscb/subgroups-39/quality-assurance-subgroup-102.php>

## Elective Home Education

- 73 Elective Home Education (EHE) involves families choosing to educate their children at home either temporarily or permanently. In March 2021, there were 167 EHE children in Richmond (138 as at the March 2019), a number that has grown from 60 in 2014-15. In Kingston there were 216 EHE children at the same time, against 143 last year. This is a vulnerability identified during our summer post-Covid planning meetings and we are working with School Nursing to ensure these children have some professional oversight. This vulnerability remains something we are worried about, as we identified in setting our TopFives in 2019.

## School Exclusions

- 74 What are we worried about? School exclusions can place children at risk and we have been tracking figures for some years, including children who have SEND (Special Educational Needs and Disabilities) or who are Looked After. We see disproportionate school exclusions for boys, children from a Black African and Black African Caribbean background and those with special needs; Richmond has a SEN figure slightly higher than the London average at 2.4% (2020 DfE). Clearly education was significantly disrupted by the lockdowns this year and returning to classroom teaching was a challenge for some children, and so we find school exclusion data reflects this; it will take some time for the AfC initiatives to address school exclusions to embed (see para 86 below).
- 75 We can see rises in exclusions for secondary school students for the academic year 2020-21 in both boroughs, particularly for Richmond after some steady outcomes, and progress in driving down these figures over the past few years. It is interesting to see the rise in primary school exclusions for Years 3 and 4 for Kingston. Following last year's statistics, exclusion rates have improved for Year 6 in Kingston and Richmond, which reflect the impact of the AfC work around vulnerability and transitions to secondary education.
- 76 In 2019-20 in Kingston, there were 270 fixed term and 8 permanent exclusions; the figures were respectively 384 fixed term and 9 permanent exclusions for Richmond. Please note that this data does not include independent schools, nor managed moves between schools. In comparison for the 2020-21 academic year, in Kingston there were 316 fixed term exclusions and 12 permanent exclusions and in Richmond, 579 fixed term exclusions and 5 permanent exclusions. The rise for Richmond may reflect a challenging year with home learning and the challenges in encouraging vulnerable children educated at home to attend school again. We have monitored the numbers of vulnerable children attending school this year through our Covid planning group work. In general, our figures have reflected the national figures for vulnerable children attending and there has been a concerted effort by schools to see children at home, when they have not returned to school.
- 77 6 Richmond and 2 Kingston Children Looked After had one or more fixed term exclusions in 2020-21. None of our children looked after from Kingston and Richmond have received permanent exclusions. For Richmond and Kingston young people, this was a significant amount of fixed term days during the first lockdown in spring 2020, however this improved from September 2020 to on average 7 days per month; showing the impact of nurturing support to re-access school. There were small numbers of children looked after who were not on a school roll or missing education and 4 Richmond children and 5 Kingston children at any one point had less than 25 hours of education per week (statutory minimum).

### Kingston School Exclusions 2017-21 by school year

	2017-18	2018-19	2019-20	2020-21
Year 7	64	34	15	30
Year 8	93	74	36	72
Year 9	115	144	72	62
Year 10	94	149	96	93
Year 11	54	64	59	29

### Richmond School exclusions 2017-21 by school year

	2017-18	2018-19	2019-20	2020-21
Year 7	113	63	40	107
Year 8	111	136	61	105
Year 9	184	134	101	134
Year 10	155	173	90	130
Year 11	126	100	101	73

### Kingston School exclusions 2016-21

Year	Fixed term	Permanent
2016-17	701	16
2017-18	674	14
2018-19	588	17
2019-20	270	8
2020-21	316	12

### Richmond School exclusions 2016-21

Year	Fixed term	Permanent
2016-17	701	16
2017-18	674	14
2018-19	588	17
2019-20	384	9
2020-21	579	5

### Richmond Fixed Term Exclusions

Qtr 1 April-June'20	Qtr 2 July-Sept'20	Qtr 3 Oct-Dec'20	Qtr 4 Jan-Mar'21
Primary 0/ 0 with EHCP	Primary 1/2 with EHCP 50%	Primary 3/9 with EHCP 33%	Primary 5/7 with EHCP 60%
Secondary 0/ 0 with EHCP	Secondary 7 /45 with EHCP 16%	Secondary 24 / 198 with EHCP 12%	Secondary 9/55 with EHCP 16%

78 Children with an EHCP (Education, Health and Care Plan), although there are low numbers in both Primary and Secondary Schools, continue to feature as subject to fixed term exclusions; we have drilled down into these exclusions for several years in our Q&I Subgroup, and as a result we can track a decrease in those exclusions. Local provision and support to schools has been changed and improved by AfC. We can see improvements

overall in a general drop in fixed term exclusions over the last few years for Richmond and Kingston, which is very encouraging. AfC Youth Resilience is working with schools to support the transition to secondary school for primary school children deemed as more vulnerable. We want to see these improvements continuing for these vulnerable children.

### Kingston Fixed Term Exclusions

Qtr 1 April-June'20	Qtr 2 July-Sept'20	Qtr 3 Oct-Dec'20	Qtr 4 Jan-Mar'21
Primary 1/1 with EHCP 100%	Primary 2/4 with EHCP 50%	Primary 3/9 with EHCP 33%	Primary 3/5 with EHCP 60%
Secondary 0/0 with EHCP	Secondary 6/36 with EHCP 17%	Secondary 7/104 with EHCP 7%	Secondary 5 /42 with EHCP 12%

### Kingston Primary School exclusions 2017-21

Year 3		Year 4		Year 5		Year 6	
<b>2017-18</b>	11	<b>2017-18</b>	8	<b>2017-18</b>	3	<b>2017-18</b>	19
<b>2018-19</b>	19	<b>2018-19</b>	27	<b>2018-19</b>	34	<b>2018-19</b>	13
<b>2019-20</b>	7	<b>2019-20</b>	10	<b>2019-20</b>	13	<b>2019-20</b>	15
<b>2020-21</b>	10	<b>2020-21</b>	15	<b>2020-21</b>	9	<b>2020-21</b>	2

### Richmond Primary School exclusions 2017-21

Year 3		Year 4		Year 5		Year 6	
<b>2017-18</b>	13	<b>2017-18</b>	19	<b>2017-18</b>	10	<b>2017-18</b>	13
<b>2018-19</b>	6	<b>2018-19</b>	4	<b>2018-19</b>	9	<b>2018-19</b>	3
<b>2019-20</b>	8	<b>2019-20</b>	3	<b>2019-20</b>	3	<b>2019-20</b>	12
<b>2020-21</b>	4		3		3		7

79 The table below shows the ethnic breakdown figures 2016-21 for Secondary School excludees. Figures are mainly stable, which means things are generally going very well, although there are higher comparative exclusion figures, for those from a dual heritage or Black Caribbean or any other Black background, compared to the borough's demographic and the numbers of White British students excluded in both boroughs, although these are small numbers. For Kingston, these are significant rises in the last year. For example, in Kingston, if you are from a Black Caribbean background you are seven times more likely to be excluded than if you are from a White British background. There is a rise in a child's ethnicity not yet being recorded fully in Richmond this year. We will consider whether these statistics deflect other issues of disproportionality, such as poverty which affected students whilst they were studying at home.

### Ethnicity of students excluded in Richmond and Kingston

<b>Richmond</b>	Excluees as % of ethnic group 2016-17	Excluees as % of ethnic group 2017-18	Excluees as % of ethnic group 2018-19	Excluees as % of ethnic group 2019-20	Excluees as % of ethnic group 2020-21
<b>White British</b>	4.8	4.4	4.5	2.9	3.2
<b>Irish</b>	7.1	2.9	2.6	1.3	-
<b>Traveller Irish</b>	0	50	100	0	2.3
<b>Any Other White</b>	3.3	4.2	2.6	1.5	-
<b>White &amp; Black Caribbean</b>	13.5	12.6	11.9	6.4	11.5
<b>White and Black African</b>	9.8	8.7	9.0	3.0	3.4
<b>White &amp; Asian</b>	3.1	3.3	3.7	1.5	1.3
<b>Any Other Mixed</b>	7.2	4.9	3.0	1.6	3.8
<b>Indian</b>	1.2	1.1	1.5	0.5	0.4
<b>Pakistani</b>	2.0	2.8	3.1	0.7	2.6
<b>B/Deshi</b>	3.6	1.6	3.1	0	2.1
<b>Any Other Asian</b>	5.2	4.0	5.7	2.2	3.3
<b>Caribbean</b>	14.1	9.6	12.5	10.4	5.7
<b>African</b>	10.3	9.3	5.5	4.5	4.1
<b>Any Other Black</b>	10.5	7.8	2.7	4.5	12.7
<b>Chinese</b>	2.2	0	0	0	1.5
<b>Any Other</b>	3.8	5.2	1.3	2.7	4.2
<b>Information Not Known/Refused</b>	0.9	6.1	1.1	2.6	9.1

<b>Kingston</b>	Excluees as % of ethnic group 2016-17	Excluees as % of ethnic group 2017-18	Excluees as % of ethnic group 2018-19	Excluees as % of ethnic group 2019-20	Excluees as % of ethnic group 2020-21
<b>White British</b>	3.6	3.5	3.6	2.9	2.2
<b>Irish</b>	0	5.9	4.1	1.3	0
<b>Traveller Irish heritage</b>	0	0	25	0	0
<b>Any other white</b>	2.0	0.1	3.4	1.5	1.5
<b>White &amp; Black Caribbean</b>	7.5	12.5	10.3	6.4	5.4
<b>White &amp; Black African</b>	5.9	11.5	13.7	3	4.3
<b>White &amp; Asian</b>	2.3	1.2	1.3	1.5	1.2
<b>Any other mixed</b>	2.7	3.8	5.9	1.6	2.3
<b>Indian</b>	1.5	1.6	0.8	0.5	0
<b>Pakistani</b>	0.9	1.1	1.8	0.7	0.8
<b>B/deshi</b>	1.3	0	0.7	0	2.2
<b>Any other Asian</b>	0.7	2.5	3.1	2.2	1
<b>Caribbean</b>	5.4	6.3	4.2	10.4	7
<b>African</b>	5.9	4.3	5.4	4.5	3.3
<b>Any other Black</b>	13.1	21.7	10.9	4.5	9.8
<b>Chinese</b>	0	0	0	0	0
<b>Any other</b>	1.5	0	0	2.7	0
<b>Information not known / refused</b>	1.5	1.4	1.4	2.6	1.5



## NEET (Not in Education, Employment or Training)

- 80 Our data ensures we consider the needs of children looked after and care leavers. One significant national and local issue is the percentage of young people Not in Education, Employment or Training (NEET). For boroughs with small numbers of Children Looked After, this figure should be low. In Kingston at the end of Quarter 4 2020, 48% of Care Leavers aged 19-21 years were NEET compared to a local population of 1.9% for 16-19 year olds. This figure was 34% NEET against a local population of 2% in Richmond. This is an improvement of 20% on last year in Richmond. Black African, Black Caribbean and Black young people from a dual heritage background are not more likely to be NEET. There have been very considerable interventions by the 14-25 Team in AfC this year which has led to this positive impact on our young people and local Councils and businesses are keen to engage with cohort as Corporate Parents. See para 211 below re the Kickstart Initiative.
- 81 In Quarter 4, the Independent Reviewing Officers and the Virtual School and College Leadership Team considered the records of twelve children aged 16 or 17, who were looked after and who were experiencing difficulties with their education. This totalled 4.6% of the 264 children who were looked after; 6 children from each borough. This is a key area of potential vulnerability. This audit found that the longer the child is accessing support from the Virtual School and College and the more stable their care situation, the more positive their outcomes are for their education, employment and training opportunities. This audit found evidence that the Child Looked After Review had robustly considered the educational needs of all 12 children demonstrating the effectiveness of the review drawing professionals together to review the plan and the effectiveness of the Independent Reviewing Officer in maintaining thorough independent oversight and scrutiny of the child's educational needs. The post 16 personal educational planning meeting document has been reviewed to support a shared understanding of the child's educational history. The Virtual School is working with Richmond Council to increase council employment opportunities for children looked after and care experienced and this is being considered at policy level. This will be considered with Kingston Council for Kingston children. We will be tracking this progress.
- 84 The AfC 14-25 Team for Young People Not in Education, Employment and Training (NEET) have been delivering Next Steps interviews to SEND young people in Years 10 and 11 - this is the fourth year of delivery. This is a KPI (Key Performance Indicator) for both SEND Transformation Boards. They prioritised Year 11 learners with EHCPs (and some with SEN Support) in autumn term 2020, given the deadlines for school sixth form and College applications. The interviews are a 1:2:1 interview to explore post 16 options. This academic year, many interviews have of course been held virtually and so there has been more parental involvement. Pupil support has created a very helpful directory of enrichment services available for those facing or excluded from school.

"In the autumn term, 104 interviews were held, including a number of Year 11 learners in out of borough schools. Learners who express an interest in vocational pathways can be given information and advice on supported internships and apprenticeships as well as the Positive Directions programme (EBP). In summer 2020 our teams followed up on young people who did not have an offer in learning for September and were able to refer some of them on to Positive Directions, which offers on line vocational learning, help with English and maths, employability skills and some on line mentoring".

## Special Educational Needs and Disabilities (SEND)

- 85 In Kingston and Richmond, we now have established multi-agency SEND Partnerships, which include representation from children, young people, parents and carers. The Boards direct improvement work through agreed transformation plans and by responding to evidence provided through a quarterly dataset.
- 86 This year, the Assistant Director for Pupil Inclusion, AfC Sheldon Snashall has led several working groups regarding minimising school exclusions and managed moves and developing good practice. This has built on learning from the Journey to Exclusion Independent Scrutiny report and will be addressing its recommendations, which were all accepted by the SLG. The actions are reporting into the Early Help Strategic Board. The Pupil Support Strategy 2020-24 was considered in terms of disproportionality in February 2021, and showed no increase exclusion for non-White British students, and a reduction in EHCPs, and reduction in those missing education.
- 87 A major priority for the Pupil Support Service will be the launching and embedding of the Emotional Related School Avoidance [ERSA] toolkit which uses evidence based approaches to the identification and intervention to support those at risk of refusing to attend school based on these grounds. A new support group has been set up My Mind which has no waiting list, and there is the development of reflective practice groups for staff. As a result of local learning, a Quality First Teaching Inclusion Charter, particularly for those with SEND support needs has been set up, together with Alternative Curriculum Pathways for students with additional needs, and an Early Identification and Intervention Programme.

## Young Carers

- 88 As part of our focus on vulnerability, we take care to highlight the needs of Young Carers. Through our scrutiny of data in the Q & I Subgroup this year, it has been clear that our identification of Young Carers fell during the pandemic- they will have been particularly isolated during lockdowns. At the end of Quarter 4, there were 769 Young Carers identified in Kingston, a rise from 668 last year. In Richmond there were 453 identified in Quarter 4 against 456 last year. This scrutiny for growth has led to awareness campaigns around the DSL (Designated Safeguarding Lead) networks, through our KRSCP newsletter, and Think Family reminders, for those who work or volunteer with adults. SWLStG and CLCH staff supervision include the consideration of whether there is a Young Carer in the home, and this will be a standing part of the agenda for ROME (Risk of Missing Education) and CFC (Cause for Concern) Panels in AfC. Young Carers is now part of SWLStG safeguarding training at Level 3. The SWLStG Named Doctor flagged this Young Carers' learning with the CAMHS team and is developing a "team champion" for Young Carers, whose role it is in the team to be thinking about carers, when cases are discussed. We can see an impact, as referrals to Young Carers have already risen in the first Quarter of 2021-22.

## Domestic Abuse

- 89 Domestic Abuse is a key vulnerability for children and their families from both a physical and emotional risk perspective. Both boroughs run multi-agency Panels to look at victims at high risk of Domestic Abuse and violence. Via the Community Safety Partnerships, KRSCP provides the online and face to face multi-agency training. This year has seen steep rises in Domestic Abuse referrals to services and to MARAC (Multi-Agency Risk Assessment Conferences) in both boroughs, because of the pressures of lockdown and financial strains.

What has gone well? Child Protection Planning is now stronger in identifying children aged under 5 as being at risk of physical abuse in the risk category of abuse chosen. There has been a particular rise in repeat referrals this year to the MARACs (Multi-Agency Risk Assessment Conference), a monthly meeting which consider high-risk Domestic Abuse cases. This may relate to the seriousness of cases presented or the continued partnership awareness raising regarding Domestic Abuse this year; it may signify that plans were not sufficiently strong when cases were first presented or reflect the difficulties in victims effectively separating from partners during lockdown.

90 West Middlesex Hospital can measure the impact (see para 221 onwards below) of employing a Domestic Abuse lead this year as referrals to MARAC have grown considerably. Richmond saw a rise in MARAC cases with disability, and young people aged 16-17 years old being identified. Kingston shows us a rise in children being discussed, which is positive. Despite having similar demographics and some shared staff between the boroughs, the differences in figures are interesting and both boroughs can learn from each other around identification of people at risk. We know that in the months of COVID-19 lockdown, targeted safeguarding, and Domestic Abuse communication in the key community languages of Korean and Tamil in Kingston led to a rise in referrals to Police and MARAC. The Domestic Abuse figures were regularly discussed in our Covid Planning group, which led to awareness campaigns in general and a focus.

91 There have been more MARAC emergency meetings this year. We can see lower numbers of males and people with disability being referred, as well as those aged 16-17. We are continuing to highlight this and our focus in the summer deep dive and independent scrutiny was around parental Domestic Abuse and its impact on young children.

92 Operation Encompass was rolled out to maintained schools in autumn 2019 and as at October 2021, 117 schools were involved across both boroughs,. [Police inform schools each day of Domestic Abuse call-outs, so that schools are prepared to support the children and young people involved]. This confidential and limited information makes a lot of difference to the children involved, as schools will understand any distress and can put in silent support, without relying on the child to disclose. We hope this can be extended to more schools, and nurseries as time goes on, and to include missing children alerts too.

#### Referrals to Richmond and Kingston MARACs 2016-21

<b>Richmond</b>	2016-17	2017-18	2018-19	2019-20	2020-21
Total cases discussed	249	251	230	246	288
Repeat cases	28%	31%	29%	26%	40%
Number of children	255	259	252	154	386
Police referrals	38%	35%	33%	33%	164
IDVA (Independent Domestic Violence Advocate) referrals	37%	35%	26%	33%	104
BME cases	27%	22%	25%	28%	33%
Disability	8.4%	12%	12%	9%	23%
LGBT cases	1.7%	2%	1%	1.2%	7%
Males	4%	4%	6%	6%	8%
Victims aged 16-17	2%	1.2%	2%	1%	5%

<b>Kingston</b>	2016-17	2017-18	2018-19	2019-20	2020-21
Total cases discussed	164	188	200	219	338
Repeat cases	16%	21%	26%	23%	37%
Number of children	168	200	250	223	400
Police referrals	36%	37%	40%	37%	43%
IDVA (Independent Domestic Violence Advocate) referrals	25%	-	22%	27%	29%
BME cases	27%	24%	21%	24%	25%
Disability	-	3.7%	7.5% (1 male)	9%	5%
LGBT cases	6%	14.4%	3%	2%	1.7%
Males	9%	8.5%	3%	8%	8%
Victims aged 16-17		1%	1 person	2%	1 person

- 93 A COVID-19 Domestic Abuse recovery group has been set up across Kingston, Richmond, Wandsworth and Merton with Police, Community Safety Partnerships and Domestic Abuse organisations to help plan support, communications and responses.
- 94 The MOPAC (Mayor's Office for Policing and Crime) dashboard for crime shows us 1,286 Domestic Abuse offences for Richmond for the year June 2020-June 2021 and 1,460 for Kingston; that is 6.5. per 1,000 inhabitants in Richmond and 8.4. per 1,000 inhabitants in Kingston. Therefore, Domestic Abuse affects at least 250 children in each borough and we need to be assured that we have the means to identify and support these children. These trends are above average for the last 3 months. There were 454 sexual offences in Kingston in that period and 286 in Richmond.
- 95 Volume and rates of Domestic Abuse crimes are higher than the average for both Richmond and Kingston for the last rolling months, although the figures are comparatively small for London [MOPAC]. For Kingston and Richmond, the ethnicity of victims largely matched the local demographic.

## Early Help and Prevention

- 96 What has gone well? Early Help and the response to parental vulnerabilities has been one of our priorities since March 2020, and the Early Help (EH) Strategy was launched at a multi-agency Conference in November 2020. This built on work ongoing from March 2020 when Early Help workshops took place for all professionals to look at scenarios and together prepare a draft EH template. This has brought much strength to our local working, and credit must go to Tracey Welding, Deputy Partnership Manager, for leading this strand of our work. This autumn we plan to track the outcomes and impact for children and families discussed at the first meetings of the Resilience Networks in early 2021.
- 97 The Early Help Tool has been revised, several consultations have taken place and Resilience Networks developed in each borough from January 2021. Those Resilience Network meetings have seen a rise in children being discussed as time has progressed. AfC Pupil Support, Housing, Young Carers, Police, Voluntary Sector organisations, CLCH and YHC Named Nurses are part of those meetings and ensure supervision is used to consider the use of the Early Help Tool. CLCH is working towards all School Nurses being engaged in vulnerable conversations in all relevant schools, especially around mental health, in order to

spread the Early Help offer, and prevention wider. Our September 2020 Newsletter was a showcase around the role of School Nursing to encourage schools to engage their nurse as strongly as possible.

- 98 We can track the impact of this initiative and the support of the Early Help Strategic Board to embed this approach. During 2020-21, 137 (Early Help Assessments) EHAs were begun in Richmond and 158 in Kingston. We can begin to see some agencies other than Family Support in AfC leading the EHAs as the year has gone on, which is very positive, and a change from previous years, with Schools, Health and Children’s Centres being Lead Professional. During the year, just over 80% of EHAs in both boroughs ended with positive outcomes. Approximately 10% of cases from each borough stepped up to Children’s Social Care. Schools were one of the top referral sources and this is a result of training being delivered regarding Early Help and parental vulnerabilities to the DSL and Early Years Forums.
- 99 The Early Help Strategic Board scrutinises data and this shows a good upward trend in involved agencies and Assessments. Engagement in Early Help has been a stubborn issue for us promote over recent years. Buy-in has been strong from Partners, and multi-agency consultation into the new way of working together has been the key to a different refreshed approach. We produced training in the Early Help Partnership tool as a webcast which has had 1,441 views, and a further webcast which had 32 views during the year.
- 100 We saw a rise in Early Help interventions for neglect and rise in referrals to SPA when tested in April 2021. We are pleased that other documents now are accepted as Early Help Assessments within different agencies and sectors.
- 101 During the year, 405 new referrals were made to Family Support in Kingston and 536 in Richmond. Most children were aged 11-19 years. In the last year, AfC’s Early Help model has helped the organisation to release almost £3m in savings across children’s services in Kingston and Richmond and has reduced demand on expensive specialist social care services.

**Early Help Assessments 2018-21**

	2018-19	2019-20	2020-21
<b>Kingston</b>	295	143	158
<b>Richmond</b>	281	153	137

## Risky Behaviour

- 102 Kingston and Richmond Public Health teams carried out separate needs’ surveys and some joint work in relation to risky behaviour this year. Reports were presented to the April 2018 Joint Board and there is an action plan. Risky behaviour particularly relates to smoking, mental health concerns, sexual activity and substance misuse. With AfC Substance Misuse Services and the Public Health Teams, we distributed a targeted newsletter last summer holidays to highlight safe substance use practice at festivals. This is an area we remain worried about, as we see local serious incidents related to the use of substances.
- 103 Improvements were made, with the inclusion of brief interventions in AfC’s Substance Misuse Service to ensure the local multi-agency workforce was appropriately supported in responding well to substance misuse concerns that fall below Tier 3 threshold. An Autumn

2020 review of AfC Substance Misuse Services found that it received appropriate referrals and was able to work effectively with Children and Young People, and other agencies to reduce risk of harm, identifying any issues of diversity. 313 children from Kingston and 337 from Richmond accessed Substance Misuse Services this year.

- 104 The rolling number of young people aged under 18 seen in treatment (National Drug Treatment Monitoring System submission) (statutory) shows a rise over the year in Kingston and Richmond, potentially because of lockdowns.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Kingston	17	20	28	33
Richmond	18	22	28	31

- 105 Richmond 15-year-olds identified as having smoked present the highest rate in England; 24.5% reported being drunk in the last four weeks, the worst result in London; 19% had tried cannabis, the highest percentage in London and the third highest in England – the London average was 11%; hospital admissions for self-harm were the third highest in London (up from 2016-17); the mental wellbeing score for Richmond’s 15-year-olds was the fourth worst of all London boroughs. The risky behaviour work in Kingston and Richmond by Public Health has found that some traditional risk behaviours such as smoking appeared to be in decline, issues relating to drug and alcohol use and sexual activity remained, and there was growing concern about the apparent increase in children and young people suffering from poor emotional health.
- 106 Additional groups identified included young people from affluent families and young people, who have more than one vulnerability e.g., LGBTQ young people with autism. The role of new technology and changing social and cultural norms amongst this age group have led to a rise in social media and smartphone use, shifts in drug type and mode of purchase, and changes to sexual behaviour following exposure to inappropriate imagery.

## Mental Health

- 107 Emotional wellbeing and mental health are a priority for us as a Partnership 2020-22. We are still worried about children with mental health needs. During the year, referrals have risen to CAMHS Tiers 3 and 4, provided by SWLStG, and Tier 2, the Emotional Health Service (EHS), run by AfC. We see the EHS as a preventive support and their data is analysed through the EHSB (Early Help Strategic Board). There has been a considerable pressure on our local (and national) services due to the lockdowns and the CCG South West London CAMHS transformation is ongoing and has details of our own findings from the Emotional Health Review we published in early 2021 here: <https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-krscp/child-safeguarding-practice-reviews-110.php>
- 106 In Quarter 4 2020-21, in response to the rise in demand, extra capacity was provided for screening of CAMHS referrals in the SPA and to CAMHS itself, so that more children received appropriate support. We can see more Richmond children attended A&E directly with mental health concerns this year compared to last year. Figures for Kingston children are like last year. Timeliness of seeing children and young people has varied during this year and is much the same as last year for both boroughs. There have been delays for Kingston and Richmond children offered an initial assessment in 8 weeks - this timescale has been met for approx. 73% of Kingston and approx. 80% of Richmond children.

107 Most referrals to EHS were for those aged 11-19 years, which reflects the anxieties of lockdown, exam changes, and the loss of socialisation. There were significant issues noted around Domestic Abuse, and relatively high percentages of young people with EHCPs and SEND.

#### Referrals to the Emotional Health Service (EHS) Tier 2 2020-21

	0-4 years	5-10 years	11-19 years	Total
Kingston	1	84	195	280
Richmond	2	71	128	201

#### 2020-21 Kingston and Richmond CAMHS data

	Q1	Q2	Q3	Q4
Number of Kingston children attending A&E due to self-harming/attempted suicide/alcohol harm referred to CAMHS	37	36	67	47
Number of Richmond children attending A&E due to self-harming/attempted suicide/alcohol harm	79	142	177	83
Number of Kingston young people referred to CAMHS during this period	707	438	528	507
Number of Richmond young people referred to CAMHS during this period	701	453	566	574
Kingston young people referred to CAMHS as an emergency seen within 24 hours (number and percentage)	96%	100%	100%	100%
Richmond young people referred to CAMHS as an emergency seen within 24 hours (number and percentage)	100%	100%	100%	100%
Kingston young people referred to CAMHS for an urgent appointment seen within 5 working days (number and percentage)	71%	92%	94%	77%
Richmond young people referred to CAMHS for an urgent appointment seen within 5 working days (number and percentage)	90%	100%	89%	92%

108 In Kingston, referrals to the SPA in Quarter 4 were 22% for mental health concerns and it is the most common factor identified in a single assessment. The figure is 29% for Richmond for the same Quarter; against 21% at the same time last year. The Emotional Health Service (EHS) in AfC has referrals for Tier 2 CAMHS and they have equally high figures. Parental mental health referrals were higher this year too – Richmond 39% of referrals and Kingston 30%. Mental Health was identified as an issue in 75% of Richmond single assessments and 56 % of Kingston single assessments; this is in comparison to figures of approx. 63% for Richmond and 55% for Kingston at the end of the last two years. This is a significant rise for Richmond, and throughout the pandemic we have sought to highlight preventive support for children in both boroughs to try to mitigate this rise.

### Total referrals to CAMHS per year 2016-21

	2016-17	2017-18	2018-19	2019-20	2020-21
<b>Kingston Tier 3</b>	447	549	436		182
<b>Tier 2</b>					507
<b>SPA</b>	1,656	1,899	2,194	2,551	1,966
<b>Richmond Tier 3</b>	428	557	541		468
<b>Tier 2</b>					574
<b>SPA</b>	1,622	2,088	2,205	2,574	2,286

- 109 Local schools have embraced opportunities for mental health learning and development for example regarding suicide safer initiatives, and SWL CCG Mental Health Trailblazer and Mental Health Ambassadors in schools. Many schools now employ their own counsellors and run nurture groups. As a result of local learning from a Rapid Review in autumn 2020, a CAMHS Consultant began providing weekly consultation to Tier 2 AfC Emotional Wellbeing in early 2021 and some screening of referrals. This has led to some swift responses to urgent concerns and this good practice was recognised in a Rapid Review in March 2021.
- 110 Many Partners have taken up the mental health thread in their work. In Your Healthcare, secondary age children receive a RCADS (Revised Children Anxiety and Depression Scale) assessment, as per NICE guidance. There is a screening tool with scoring in the pre-therapeutic range. Then up to 6 sessions of support are offered by School Health Team. This is an example of preventive support.
- 111 Mental Health training has been offered to the Voluntary Sector and the CCG Commissioners have been working on transitions around Mental Health across the SW London footprint. The CCG, Youth Offending Services and SEND have been working together regarding Mental Health provision. A Therapies' Review took place in January 2021 to include support around speech and language and trauma.
- 112 We noted the need in early 2021 to provide preventive support and promoted the online counselling of KOOTH. This then led to a rise in referrals to KOOTH in Quarter 4, meaning more young people received interventions during lockdown. A 7-minute KRSCP briefing on mental health and emotional well-being was published April 2020 and re-circulated January 2021 as a means of ensuring learning was reiterated across our boroughs. Youth Out Loud developed a film around self-harm in Spring 2020; this had 100 views to March 2021.
- 113 Suicide is a key issue of concern for us in our boroughs. There are community action plans in place and a regional monitoring group for issues of contagion. We coordinate the offer of training around mental health first aid and suicide awareness with the Public Health Teams. 6 half day YMHFA (Youth Mental Health First Aid) webinars have been delivered with the Public Health Teams since June 2020, and more school staff have attended training around suicide prevention.



## Children’s Social Care

- 114 We can see rises year this year for work with children in Achieving for Children (AfC) for both boroughs, and this growth goes through the system from child in need to child protection to children looked after. Referrals faltered during each lockdown and we held multi-agency Communications’ campaigns to draw attention to people who could “see the child”- this did have an impact as we monitored referrals in our Covid planning and Q & I Groups.
- 115 We can see the effect of the pandemic with a drop in contacts in Kingston immediately in April 2020; this happened later in Richmond. Since then, there have been some months with rises- January –May 2021 6,593 contacts against 5,994 in the same period last year in Kingston. There has been a smaller comparative rise in Richmond 6,589 contacts January – May 2021 compared to 6,479 the previous year. A higher number of contacts for 2021 translated into referrals to CSC in Richmond, compared to Kingston. We also saw a rise in complex LADO referrals during the lockdowns, though an overall drop in LADO referrals (see para 236 below).

### Richmond and Kingston open cases in Children’s Social Care 2017-21

Richmond	March 2017	March 2018	March 2019	March 2020	March 2021
Open Cases	844	796	801	821	880
Child in Need & per 10,000	190	239	238	176	243
Child Protection actual & per 10,000	112 25	97 22	98 22	165 34	155 34
CLA actual & per 10,000	113 25	103 23	118 26	122 26.5	134 29

Kingston	March 2017	March 2018	March 2019	March 2020	March 2021
Open Cases	777	766	909	971	925
Child in Need & per 10,000	207	208	243 238	222	239
Child Protection actual & per 10,000	142 38	138 36	129 34	212 44	150 39
CLA actual & per 10,000	114 30	130 34	129	124	130

## Child Protection Planning

- 116 As at March 2021, 155 Richmond children and 150 Kingston children were subject to Child Protection Plans. This is a significant decrease for Kingston despite the pandemic. Between 90% and 100% of Initial Child Protection, and 100% of Review Conferences were held in timescale in both boroughs, and the service was quickly provided in a virtual manner. There were surges in demand after children returned to school after the lockdowns during the year. AfC has audited its Child Protection Plans and has been assured that decisions were consistent and appropriate.

- 117 Richmond remains consistently below the statistical average at 34 per 100,000 children subject to Child Protection Plans; Kingston matches its neighbours. The service moved its Conferences online as the pandemic began- this worked well for professionals involved but was harder for families, who preferred face to face meetings, and so the service will be reverting to physical Conferences as soon as it is safe to do so. The service is currently embedding an online tool for young people to contribute called HaveMySay. This has been delayed due to the impact of the pandemic. During the year, the service also piloted seven paperless Conferences, using an electronic tool for documents. This is being considered as a future option. There were four parents who accessed the KRSCP's Complaints in relation to Child Protection Conferences. All were resolved at Stage 1.
- 118 Feedback from Conference attendees was firstly suspended due to the pandemic. In Quarters 3 and 4 2020-21, AfC reintroduced the feedback tool with the addition of three questions specifically asking about how the attendee found the virtual meeting. During 2020-21, AfC received 102 responses from attendees at Child Protection Conferences; 56 regarding Kingston children and 46 regarding Richmond children. Almost all the feedback was very positive regarding the system.
- 119 Here are some anonymised stories of work that the Conference chairs have done with children. Names have been changed, but the stories are real examples over this reporting year.

*Kingston Emma is 15 years old and she lived with her mum. Emma saw her mum and her mum's boyfriend take drugs and the boyfriend threatened to kill Emma and her mum. Emma saw her mum try to end her life by taking an overdose. There were worries that Emma was beginning to be exploited in the community. Through the child protection plan, Emma's mum worked hard, but wanted to stay with her boyfriend. Emma decided that she would live with her father, but this did not work for Emma. The family were supported to help Emma think about her future and Emma is now living with her maternal grandparents. This is assessed as a safe place for Emma. Emma has been able to stay at the same school, which was important to her. She sees her mother, father and siblings regularly. She is happy and settled.*

*Richmond Amy is 5 months old and lives with her mum and dad. Amy's needs were considered at a child protection conference before she was born; her mum has learning needs and was unable to care for Amy's maternal siblings, and her dad had mental health needs and had used drugs before when things were tough. Amy's mum and dad worked hard, and they asked for help from their family network. When Amy was born, she and her parents moved to live with her paternal grandparents. There was great support work offered to the family by professionals. Her parents are still working hard and there are arrangements that if they cannot care for Amy in the future that she will live with other family members. Amy is happy and thriving with her family.*

- 120 The Child Protection Conference system has not engaged with local GPs in our boroughs as strongly as it could over some years. Our local audit work has also identified a need to involve GPs more in the MARVE process. The Child Protection Conference team, Named GP, and CCG colleagues have been working with GP leads to improve this situation. This has been identified as a key local risk and a TopFive area for improvement. We have seen some progress this year in this arena though the hard work of the Named GP, AfC Conference Team and the Designated Nurses.

Here are the Quarter 4 figures for 2020-21 for GP reporting to Child Protection Conferences:

	January 2021	February 2021	March 2021
<b>Kingston</b>	ICPC 2/3 reports	ICPC 5/9	ICPC 8/10
	RCPC 11/21	RCPC 10/19	RCPC 5/14
<b>Richmond</b>	ICPC 4/7	ICPC 4/9	ICPC 6/7
	RCPC 4/16	RCPC 4/18	RCPC 12/30

121 Our COVID-19 year has led to a rise in concerns of physical abuse in the referrals to both boroughs. This could go with the rise of concerns for Domestic Abuse or an indicator of the strains of prolonged home schooling for vulnerable children. This is worrying. Lists of children with vulnerabilities were ragged by AfC as lockdown began in March 2020 and these children were offered school places by local schools. These figures were monitored very closely by the Covid Planning Group, as for a time face to face home visits were not being undertaken by any agency.

This table shows the category of abuse for child protection plans in Kingston 2016 onwards:

Category of Abuse	2016-17	2017/18	2018-19	2019-20	2020-21
Emotional	80	44	36	63	69
Neglect	51	53	63	67	37
Physical	17	36	20	81	37
Sexual	1	5	11	1	7

This table shows the category of abuse for child protection plans in Richmond 2016 onwards:

Category of Abuse	2016-17	2017/18	2018-19	2019-20	2020-21
Emotional	81	46	37	56	66
Neglect	21	29	26	48	46
Physical	7	17	28	51	34
Sexual	4	5	7	10	9

122 Most Child Protection plans have lasted 10 months on average, which is an increase for Kingston average lengths. This could be an improvement, as the result of learning from our neglect audit in summer 2020, which saw some cases closing prematurely. In Richmond, there is an equal balance of boys and girls subject to plans. In Richmond, there is a growing proportion of plans for teenagers which might reflect the work around Contextual Safeguarding. In Kingston we can see some small growth in the identification of risk of sexual abuse as a category for Child Protection Plans but overall falls in planning for risks of physical abuse and neglect.

123 A higher proportion of plans are for teenagers in Kingston, whereas this is for children aged under 10 in Richmond. In Kingston more males than females are subject to plans – 120 males to 90 females. There is ongoing work currently to identify Child Sexual Abuse, as a response to local learning. The Q & I Subgroup has been scrutinising the attendance at strategy meetings as a means of taking this forward.

**Age distribution of Child Protection Planning in Richmond 2016 onwards:**

Age	2016-17	2017-18	2018-19	2019-20	2020-21
Unborn	3	0	3	2	3
Under 1	7	13	11	10	12
1-4	28	25	34	38	36
5-9	39	24	30	43	24
10-15	35	32	19	66	63
16+	0	3	1	6	16

**Age distribution of Child Protection Planning in Kingston 2016 onwards:**

Age	2016-17	2017-18	2018-19	2019-20	2020-21
Unborn	1	2	6	2	1
Under 1	11	12	7	16	15
1-4	28	25	29	52	26
5-9	39	24	37	59	51
10-15	35	32	48	74	49
16+	0	3	3	9	8

- 124 We should generally see large numbers of plans for the most vulnerable children, who are arguably the youngest. In both boroughs we can see higher numbers of older children, who may be affected by exploitation, particularly in Richmond, and this certainly highlights our learning reviews around risky behaviour and vulnerability, and the numbers of children who go missing.
- 125 As with school exclusions, we can see some higher figures for children from Black African and Black Caribbean backgrounds becoming subject to Child Protection plans in Kingston as against the demographic. The number of Child Protection plans for White British children does not reflect the White British population, in Richmond. Figures are much the same as last year but there has been a rise in numbers for children from any other White background and any other Asian background in Richmond. The number distribution may be due to higher levels of deprivation or affluence for different ethnic groups and indicate those groups more affected by the pandemic.

**Child Protection Planning by ethnicity in Richmond 2017-21**

Ethnicity	2017-18	2018-19	2019-20	2020-21
White British	54	57	68	60
White Irish	0	0	0	0
Other White background	13	4	14	21
Traveller of Irish heritage	0	0	6	1
White & Black Caribbean	3	9	20	6
White & Black African	0	3	8	3
White & Asian	2	1	4	2
Any other mixed background	10	6	16	17
Indian	0	0	2	0
Bangladeshi	1	0	0	0
Pakistani	0	0	2	6
Any other Asian background	5	2	6	12
Black Caribbean	0	0	2	0
Black African	5	9	9	9
Any other Black background	0	2	3	2

Chinese	0	0	0	2
Other ethnic group	3	2	4	5
Information not yet obtained	1	2	1	9
Information not known	0	1	0	0

- 126 The London Innovation and Improvement Alliance analysis of the 2019-20 Child in Need census data shows that a Black child in Richmond is more likely to experience a range of events, including having an assessment started, a Section 47 child protection investigation started and an Initial Child Protection Conference. Exploration of this situation is taking place through Partnership auditing and looking at more recent data when it becomes available. There were number of children with no ethnicity identified (9) which is a rise from other years. This chimes with our local audit and learning review work, where we wish to see better identification of diversity issues and consideration of their impact on safeguarding. We are now not using the term “BAME” (Black and Minority Ethnic) but rather seeking to distinguish identity in specific ways.

#### Child Protection Planning by ethnicity in Kingston 2017-21

Ethnicity	2017-18	2018-19	2019-20	2020-21
White British	76	58	83	81
White Irish	0	2	0	0
Traveller of Irish heritage	-	-	-	-
Other white background	6	3	12	7
White & Black Caribbean	9	10	21	12
White & Black African	6	4	8	2
White & Asian	0	4	2	2
Any other mixed background	10	9	20	12
Any other Asian background	12	13	42	18
Indian	2	0	2	1
Pakistani	1	4	0	0
Bangladeshi	1	0	3	0
Black Caribbean	1	0	2	0
Black African	0	1	1	0
Any Other Black background	4	0	1	6
Chinese	0	1	1	0
Other ethnic group	4	7	11	8
Information not yet obtained	0	8	3	1
Information not yet known	0	2	0	0

- 127 During the year, there was considerable good work around Contextual Safeguarding undertaken with the AfC pilot of CS&E (Contextual Safeguarding and Exploitation Conferences) beginning in November 2020 and extending to March 2022. In common with other areas, there was a wish to recognise the unique safeguarding demands of extra- familial abuse which Contextual Safeguarding highlights. In November 2020, AfC launched the CS&E (Contextual Safeguarding and Exploitation) Conference pilot, which has been extended from its initial 6 months trial for a further year to March 2022 due to good feedback. The pilot considered 8 young people from November 2020-March 2021. The WIT / SHiFT Project worked with 6 young people to March 2021 from these CS&E Conferences. We can trace a growing impact and stronger engagement with parents due to this initiative. Currently there is ongoing work regarding developing a Contextual Safeguarding threshold and a process for the four boroughs in relation to Child Exploitation. The service is also considering the use of a Conference Chair to oversee Supervision Orders. This is positive.

## Children Looked After

- 128 At the end of March 2021, 134 children were looked after in Richmond (122 last year) and 130 in Kingston (125 last year) - a slight rise for both boroughs. 27% of Kingston children were placed more than 20 miles away from home; in Richmond, 23% were placed more than 20 miles from home, and for both boroughs, children were usually in stable placements. Most reviews were timely and only 1% of children did not express their views during the review process, which is excellent. Independent Reviewing Officers (IRO) are in the privileged position to hear the views expressed directly by children through their own direct work, via advocates and view-sharing tools. Most statutory social work visits took place within timescales (84%) which is a lower figure for Richmond than last year, but reflects the crisis work during this year.

### Impact story:

Sarah, Kingston is 18 years old. Sarah became looked after when she was 10 years old and had the same IRO throughout her time in care. Sarah often did not want to attend her Review meetings although she would attend partially with lots of support and encouragement. Sometimes Sarah only felt able to speak to her IRO from the other side of her closed bedroom door. Sarah decided to attend her final Review meeting in 2020 and positively contributed to her Review discussion. Sarah sent her IRO a video of herself singing 'everything is going to be alright' to say thank you. Sarah was sad to say goodbye to her IRO saying that this was her most enduring relationship throughout her time in care. Once lockdown restrictions eased, Sarah's IRO met with Sarah to reflect on her journey and how far she had come. This example highlights the value and importance of enduring professional relationships and how we say goodbye to children well.

- 129 During the year the IROs raised 75 pre-escalations regarding 75 children; 28 pre-escalations were for Kingston children and 47 pre-escalations were for Richmond children. Escalations by IROs were raised about three broad areas: a delay in children being transferred to the Leaving Care Team in AfC, administrative issues and drift in actions within the child's care plan. No IRO escalations to CAF/CASS were made during this year, which is good, and illustrates the impact of a good reviewing service and strong working relationships between teams and agencies, putting children's needs first and working through professional challenges.
- 130 The review service raised a combined formal escalation to the attention of the Director of Children's Social Care in respect of 34 children; 18 Kingston children and 16 Richmond children. All were aged 16 to 18 years and awaiting case transfer to the leaving care service. This escalation was resolved after 33 working days when additional staffing capacity was provided to the Leaving Care Service and arrangements were agreed for all the children to transfer. For the remaining five escalations regarding Kingston children, four were resolved within 0 to 20 working days, with the average being 12 working days. For the remaining 21 escalations regarding Richmond children, 20 were resolved within 0 to 20 working days, with the average being seven working days. Escalations raised by IROs were resolved at the following levels of management: 38% by a Head of Service, 5% by an Associate Director and 57% by the Director for Children's Social Care.
- 131 In 2018-19, the IROs raised 31 formal escalations but no pre-escalation work was captured. In 2019-20, the IROs raised 18 formal escalations and addressed 75 issues for children using pre-escalation. In 2020-21, the IROs raised 60 formal escalations and addressed 75 issues for children using pre-escalation. This increase in the use of the dispute resolution process reflects the improving oversight and quality assurance of IROs, on behalf of children. There were no children or parents who accessed the complaints process in relation to the service provided by the child's IRO.

- 132 Reviews quickly took place online, due to the lockdowns and children and attendees' feedback was not sought for Quarters 1 and 2. Feedback was again gained from Quarter 3 for both boroughs. Of the 70 responses from attendees at Looked After Reviews regarding Kingston children, 4 were from parents, 2 were from family members, 14 were from foster carers and 50 were from professionals. 63 respondents (90%) attended the meeting via video link and 7 (10%) via a telephone call. Most attendees felt that the Review worked well remotely. 90% of respondents said that they knew what to expect when they came to the review because they had received all the information and preparation that they needed. 99% of the respondents said that the IRO made sure everything was explained clearly to them.
- 133 Of the 53 responses from attendees at Looked After reviews regarding Richmond children, 3 were completed by the child, three were from parents, 2 were from family members, 9 were from foster carers and 36 were from professionals. 44 respondents (83%) attended the meeting via video link and seven (13%) via telephone. 2 respondents attended the meeting physically. 91% felt that the review worked well remotely. The respondents said that they knew what to expect when they came to the review because they had received all the information and preparation that they needed.

Some respondents included comments in their feedback. Here are some examples, which show what a system which is working very well:

- I don't think it could have gone any better.
- The IRO is always child centred and includes all the network in the review.
- I cannot praise the IRO enough for their consistent high level of practice.
- Reviews have always been polite, professional and friendly.
- The IRO ran a fantastic meeting which we should all have left feeling reassured that the review was successful and things will move forward for the child and we are all up to speed.
- Truly impressed with this session today, it has given us hope that the child will be able to stop worrying about the adult side of the issues and just concern himself about being a boy and processing his losses the best he can – that's all he should be doing right now. Thank you so much!
- I think it was a positively led review.
- The review worked very well. The IRO knows the child and carers well and the young person later commented that he felt comfortable talking to his IRO. Everyone was included and listened to.

- 134 During the year, 21 new UASC (Unaccompanied Asylum Seeking Children) were accommodated in our boroughs. Only 4 were aged under 16 years. At the end of the year for Richmond, most children looked after were aged over 13 years – 83 young people in total. In Kingston 76 children were aged 13+.
- 135 In July 2020, the AfC Head of Permanence and Head of Conferencing and Review selected four Children Looked After (1 Kingston, 3 Richmond), who were in unratified placements and were supported by a social worker within the Permanence Service. The audit looked at the thought and planning around permanence within the child's care plan, placement plan and within the last child looked after review. The audit found that permanence was driven through with clear SMART actions with reviews considering the impact of the permanence options on the child.

- 136 In Quarter 2, the IROs spoke to 25 children, totalling 10% of the children who were looked after; 7 children were from Kingston and 18 children were from Richmond. The IROs spoke to five children each about what makes a great social worker. They asked each child to explain what made this social worker great in their opinion, so that we could take this learning and share it so all social workers can build amazing relationships with our children who are looked after. 23 children (92%) were able to identify and name a social worker who they considered to be 'great'. 6 children continue to work with their 'great' social worker and other social workers named continue to work for AfC, although no longer with the child.
- 137 Children said that some of the qualities found in their 'great' social worker was that they felt listened to, that their social worker was fun, consistent and communicated openly telling the child what they needed to know even if this meant that the child felt angry sometimes. This audit found that children who are younger and going through times of change and uncertainty awaiting permanency are likely to need more of their social worker and independent reviewing officer's time. These findings were shared with operational managers and social workers with practice recommendations that social workers will have a relational discussion with the child, to support a fuller understanding of what the child wants and needs from them. It is also a summer AfC workshop topic.
- 138 Performance is generally stable for Children Looked After, however I am still worried about the Initial Health Assessments (IHA) for children newly looked after; this has been a stubborn issue for some years without improvement in Richmond. IHAs should take place within 20 working days of a child becoming looked after, to ensure that any health needs are identified and treated. IHAs averaged 33% timeliness in Richmond during the year (against 34% in Richmond last year) and 66% in Kingston (against 60% last year). At a time, medicals were only virtual but face to face visits were scheduled as soon as this was safe to do so. There is detail regarding improvement work in para 37 above.
- 139 Annual health assessments stand at 90% for Richmond Children Looked After; 51% had at least annual dental checks and 50% immunisations, but only 9% had seen an optician, albeit during the restrictions of the pandemic. 98% of Kingston children had an annual health assessment (a rise of 8% on last year), and 59% a dental check; 23% had seen an optician. These figures could indicate the impact of the pandemic, but generally are consistent figures on the last years.
- 140 For children looked after for both boroughs, compared to the local demographic, we can see fewer White children are looked after, and more children from a Black background. This has fluctuated slightly over the past 5 years- we will continue to consider this aspect of disproportionality in our Q & I Subgroup work. We are planning a summer audit into the safeguarding and health of care experienced young people aged over 18, following our local learning reviews. This will be led by the Designated Doctor, Sandhya Kenyon and Designated Nurse, Vicky Fraser for Children Looked After. Transitions as outlined above, will be part of that work.

## Youth Justice

- 144 The Q & I Subgroup has tracked a fall of first-time entrants to the Youth Justice System this year compared to last year, although numbers did grow for Kingston Quarter 4, and there have been some court delays due to the pandemic. In January 2020, we included the YOS cohort as part of Integrated Offender Management into our MARVE Panel meetings, which has ensured better information sharing and risk management. Several our Rapid Reviews have featured issues of Contextual Safeguarding and the involvement of YOS young people. This led to our consideration of good practice in March 2021, as agencies worked well



together to use a reachable moment for a Richmond young person. This has been anonymised into a 7 minute briefing, and included in learning from the London Partnership around Serious Youth Violence here:  
[https://kingstonandrighmondsafeguardingchildrenpartnership.org.uk/media/upload/fck/file/7%20Minute%20briefing%20KRSCP%20London%20best%20practice%20around%20Serious%20Youth%20Violence%20\(SYV\)%20V2.pdf](https://kingstonandrighmondsafeguardingchildrenpartnership.org.uk/media/upload/fck/file/7%20Minute%20briefing%20KRSCP%20London%20best%20practice%20around%20Serious%20Youth%20Violence%20(SYV)%20V2.pdf)

- 145 3 young people were sentenced to custody this year, which is positive; over Kingston and Richmond this comes to 0.17% with statistical neighbours at 0.6%, and the London average of 0.21%. During the year, no Richmond young people were remanded to an institution; 1 Kingston young person was sent to Youth Offending Institute and no one was sent to a secure training centre. Substance misuse, speech, language and communication needs, and emotional wellbeing continue to be predominant needs of young people receiving outcomes to the Youth Justice team. This supports the argument for dedicated speech and language therapist within the YOS team, as raised by the HMIP (Her Majesty's Inspectorate of Prisons) inspection in 2020.
- 146 Violence against the person and drugs offences are the most prevalent offences in 2020-21, like last year but it is worth noting a significant drop in Robberies from 21 in the previous year down to 4. There has also been a drop in Knife Crime, which may be linked to the drop in Robberies. This could be the result of Police good practice in visiting likely Youth Offending candidates at home, as lockdown began in Spring 2020.
- 147 Approximately 51% of the Youth Resilience Services children and young people are from a Black British, Black African or dual heritage background in Kingston and Richmond. Disproportionality is evident within the Youth Justice cohort for Kingston and has been agreed as a Strategic Priority for the next 3 years for the YOS Management Board and Partnership to address.
- 148 There are small numbers of young people and young people from a Black African, Black Caribbean and dual heritage background across the Youth Justice cohort, however the outcomes within this cohort are often poor and require a specific focus going forward. AfC's recent thematic audit into Knife Crime offences in 2019-20 further highlights concerns regarding disproportionality. In Kingston, 7/10 knife crime offences and in Richmond 5/8 knife crime offences involved young people from a Black and Minority Ethnic background.
- 149 Looking at the MPAC dashboard, there were 14 knife crime victims aged 1-24 in Richmond and in 9 Kingston for the year June 2020-21. There were in total 83 and 72 knife crime offences in Richmond and Kingston respectively - higher than previous borough averages there were 31 injuries in Richmond and 21 in Kingston.
- 150 Project X works with children at risk of Serious Youth Violence and Criminal Exploitation. The project has positive engagement by children at Tiers 3 and 4 and has been recognised by HMIP (Her Majesty's Inspectorate of Prisons) in its practice and outcomes. We also use Project X, launched in August 2020, to engage with children via Youth Services whilst they are in custody. Police and YOS use arrest, custody remand, and Court appearances as critical moments for change. In the same way, Project X focuses on teachable, reachable moments for engagement and these include point of arrest. Following the thematic knife crime audit, the Youth Safety Strategy was developed by the CSPs (Richmond Community Safety Partnership and Safer Kingston) in partnership with KRSCP and YJS Management Board partners to take learning forward. Progress has been made and recommendations from the audit have informed practice and action plans.
- 151 The Youth Safety Strategy has been Consultation was launched in June 2021. This Strategy will ensure strategic coherence in responding to issues of youth safety and serious youth

violence. At the same time, a threshold document for locations in Contextual Safeguarding is being developed.

- 152 Children in Custody are notified to the Local Authority in a timely way by Police. During this year, Daily Risk Briefing (DRB) have been developed with Police, Children's Social Care and YOS in the SPA (Single Point of Access)- this has enabled the consideration of Early Help from the point of notification and the capturing of any new trends. Multi-agency planning occurs for children within 24 hours of contact with the police ensuring interventions at teachable, reachable moments and timely safeguarding. YOS ensure that a child's SEND support is clearly recorded in assetplus and SEN record information.
- 153 Level 1 monitoring via YIOM (Youth Integrated Offending Management) is utilised for children known to the YJ (Youth Justice) services and who are deemed to be a public protection risk There is a good transition of young offenders to adult management services- YJS have a seconded Probation officer and clear protocol for transitions to the NPS (National Probation Service) and (formerly the CRC - Community Rehabilitation Company).
- 154 Neighbourhood Police are trained and tasked with youth engagement and problem solving. Master Classes were rolled out to officers following an audit in January 2021. Police have been notifying YOS of all children who come to their attention, including Stop and Searches from autumn 2020, initially as a pilot, which has now been extended.

#### **RICHMOND 2016-21**

	<b>2016-17 OUTTURN</b>	<b>2017-18 OUTTURN</b>	<b>2018-19 OUTTURN</b>	<b>2019-20 OUTTURN</b>	<b>2020-21</b>
<b>Total number of First Time Entrants into the Youth Justice System</b>	46	37	19	29	13
<b>Number of young people sentenced to custody as a % of overall disposals</b>	0.6%	5.5%	0.9%	7.7%	0.17% (K&R)

#### **KINGSTON 2016-21**

	<b>2016-17 OUTTURN</b>	<b>2017-18 OUTTURN</b>	<b>2018-19 OUTTURN</b>	<b>2019-20 OUTTURN</b>	<b>2020-21</b>
<b>Total number of First Time Entrants into the Youth Justice System</b>	21	43	37	24	11
<b>Number of young people sentenced to custody as a % of overall disposals</b>	0.3%	7.14%	3%	6%	0.17% (K&R)

## Radicalisation and Extremism

- 155 We are unable to outline referral figures for radicalisation and extremism, however this is an issue with which all agencies must deal. We have worked with the SABs to streamline the Prevent training offer to all agencies. London-wide there are issues about far-right extremism in particular at present.

## Honour Based and Harmful Practices

- 156 Learning about so-called “Honour-Based Practices” are part of our learning and development offering. FGM (Female Genital Mutilation), Forced Marriage, and Breast Ironing, which is on the rise in Britain, are all identified at times in our boroughs. There is London –wide work with Police at present regarding data for these offences. FGM is prevalent in some of the communities we see in our local boroughs and our policy was refreshed. The CCG chairs a Subgroup across both boroughs and Councils to raise so-called Honour Based Violence awareness, and we held together a mini virtual Harmful Practices Learning Morning on Child Abuse Linked to Faith and Belief supported by the Community Safety Partnerships and delivered by Merton, Richmond, Kingston, Wandsworth & South West BCU took place in February 2021. 190 delegates attended.

## Privately Fostered Children

- 157 It is often hard for universal agencies to identify children and young people who are privately fostered locally. Referrals should be made when there are suspicions of private fostering for the local Authority to then investigate. Referrals should be made to CSC for a statutory assessment and support, if required. In total, 12 children in Kingston and 14 in Richmond were identified as Privately Fostered at the end of their single assessment during the year, which illustrates the impact of broad awareness raising. At the first lockdown, we publicised our work on Private Fostering amongst local schools and all boarding schools assured us that no children were privately fostered. This has ensured those children in independent education were safeguarded if they were away from home for any length of time. We developed a short online Private Fostering quiz in August 2020 to raise awareness. We have developed a short cartoon film around Private Fostering which has had 317 views to date.

## Exploitation, Missing Children and Contextual Safeguarding

- 158 Contextual Safeguarding has been a priority for our boroughs since March 2020. The establishment of a Contextual Safeguarding Manager post in AfC, Andre Vlok, in January 2020 has made a big difference to our work in driving it forward, and the post has been extended into 2022. This strand of work is overseen by the VCA (Vulnerable Child & Adolescent) Subgroup (see para 276 below).
- 159 At present, there is ongoing work around aligning our MARVE (Multi Agency Risk and Vulnerability to Exploitation) Panel with Merton and Wandsworth and with the pan London CSE protocol, updated in March 2021.
- 160 The MARVE Panels, chaired by DI James Dickson Leach and Sara Doyle, Associate Director for Identification & Assessment, AfC are moving to a more strategic viewpoint and have worked on identifying themes and focussed meetings. For example, in 2020-21, there was a focus on children with EHCPs, following local learning from the Reviews regarding Young Person S from Kingston, Young Person Q from Richmond, and Polly from Richmond. This has led to plans having more emphasis on education and SEND and there has been a

noticeable drive to encourage children back into education when they have been missing. We can see this impact in practice following our learning hub theme and Conference in January 2021 regarding the Journey to School Exclusion.

- 161 All MARVE referrals to AfC are analysed – the Panel targets all agencies to ensure a good referral rate. Training therefore has been targeted to Midwifery and GPs.
- 162 The MARVE Chairs have worked to ensure that because of our learning from HSB (Harmful Sexual Behaviour) audits in summer 2020, issues of boys' sexual health are considered more often in MARVE. This improvement is evidenced in the MARVE panel minutes. Children, where there are concerns of CSE (Child Sexual Exploitation) cannot go through the Panel without sexual health actions. In March 2021 this was tested by a dip sample, and in April 2021 the MARVE Business Support sent a reminder to AfC staff around ensuring sexual health is included in any assessments and referrals. All cases which are removed from MARVE are tracked to ensure they are not closed in AfC.
- 163 Our HSB audit in Summer 2020 identified good Police practice for one particular young person which has led to this case study: [Multi Agency Case Study](#) The study has been disseminated throughout Police in the SWL BCU and amongst the Partnership.
- 164 Learning about Young Person Q Richmond has led to a further change for MARVE. Now out of borough children placed in Kingston and Richmond are considered as appropriate in referrals and at MARVE. So far, we see one child from Surrey considered in 2020-21. MARVE assures that there is a single plan for each individual young person and that rationale is added to risk reduction decisions.
- 165 In February 2021, there was a deep dive into CSE cases in AfC, and those which did not meet the threshold criteria for MARVE, as they were low risk. There has been learning around ensuring GPs are aware of exploitation concerns for children. The Designated Nurse for Kingston now attends the MARVE where possible and she receives minutes. She then contacts GPs to let them know of all new cases being discussed at MARVE. This learning was presented to the GP Safeguarding Leads' Forum along with an update re contextual safeguarding and exploitation in Spring 2021.
- 166 The Contextual Safeguarding Manager has ensured that there is a greater focus on disruption in local locations. The plans we produce are clear on disruption activity and the joint investigation with Police. Strategy meetings and Multi-Agency Professional Meetings are recorded well. The Contextual Safeguarding Manager has been meeting with partners, both Councils, and walking around locations, so that the MARVE Panel knows those areas better and can understand their vulnerabilities. Learning from MARVE is disseminated in the VCA Subgroup quarterly meetings.
- 167 There have been over 15 locations considered in 2020-21. 6 locations were monitored at Level 3 (complex issues), including with a walkabout. 9 locations are considered in Spaces and Places (Level 2) to March 2021 and walkabouts were carried out despite lockdowns to identify any community actions which could be undertaken. 3 locations were monitored at Level 1. This means more areas are receiving support to keep safe.
- 168 Multi-agency joint supervision has been used for complex or "stuck" cases. All disabled children are assessed for exploitation risks recognising their additional vulnerabilities and our findings that young people with SEND needs are disproportionately seen in MARVE referrals.
- 169 There was a total of 15 new referrals (12 Kingston, 3 Richmond) to Crying Sons (a voluntary sector organisation which works with young people around youth violence). There has been a steady increase in referrals for consultation, one to one work and group work from the start of the project. Fortnightly consultation opened to Partners from autumn 2020.

170 We can see good multi-agency engagement with the theme of Contextual Safeguarding, with measurable outcomes across practice. Neighbourhood Police distributed a Partnership letter re Criminal Exploitation and trafficking January 2021 as they visited barbers, nailbars, and car washes, despite the lockdown as these have been places where our local young people have worked and then gone missing. The Police had training on the issue, which made the encounters more meaningful.

SWLSTG- the new Met Police exploitation operations protocol was circulated to all CAMHS Teams. Lev 3 safeguarding children training covers radicalisation, sexual and criminal exploitation. There is now an in-House criminal exploitation elearning for young adults and one for those aged under 18.

Named Nurse CLCH worked with the Team re Contextual Safeguarding and produced an exemplar. CLCH attends MARVE & Misper Panels, cascading information back to the team; e.g., themes, hotspots, Edibles.

Your Healthcare attends CS&E meeting and reviews. The School Nurse Manager liaises with AfC Lead on Contextual Safeguarding via a quarterly meeting. School Health Team is involved as Community Champions to consider spaces and places.

171 As with other parts of London, Contextual Safeguarding, which covers issues of exploitation and missing children is a strong area of scrutiny held by the VCA (Vulnerable Child & Adolescent) Subgroup chaired by Alison Twynam, and DCIs Clair Kelland and Amanda Mawhinney this year. The Subgroup's action plan has detailed instances of impact.

172 One strength of this group has been its scrutiny of MARVE and missing data. We have been helped by the refresh of the dataset by Paloma Casey, AfC, which has received much praise.

173 At the end of the single assessment following referral to the SPA, the following percentage issues of Contextual Safeguarding were identified, which can be broken down into the following themes. As the table shows, we can see some small growth in identification of Contextual Safeguarding issues, especially in Richmond, which illustrates the impact in keeping young people safer, as more issues are being identified, despite the limitations of two lockdowns.

174 Missing figures fell particularly in the first lockdown – we can attribute this in part to Police Officers proactively visiting some vulnerable young people to remind them about keeping safe. This was a reachable moment with a clear result.

	Trafficking	CSE	Gangs	Missing
<b>Richmond 2019-20</b>	1%	5%	3%	5%
<b>Richmond 2020-21</b>	2%	7%	4%	6%
<b>Kingston 2019-20</b>	1%	4%	4%	4%
<b>Kingston 2020-21</b>	2%	4%	4%	4%

175 The Misper Panel is chaired by Yvette Lima, AfC and this year is has worked to achieve the following outcomes:

- The Panel attendees include representative from Health, Virtual School and Police;
- Consistent chair with good knowledge of risks pertaining to MISPER
- Social Care Team having regular time slots

- Information and knowledge sharing in terms of different teams being able to hear about other young people on the agenda that may be related or also associated with other young people across various teams
- MISPER Agenda and previous minutes are shared in advance, these are of good quality/succinct
- Sharing of information / intelligence between professionals has enabled greater accountability and use of different opinions to mitigate risk.
- Gathering intelligence and linking peers & areas (e.g., Schools, etc.)

- 176 The Modern Slavery working group began this year, chaired jointly by Gemma Blunt, Kingston Corporate Head of Service, Adults Social Care and Andre Vlok, AfC Contextual Safeguarding Manager. This has helped to develop a local approach across Richmond and Kingston for both adults and children. We have been considering the vulnerability of Unaccompanied Asylum-Seeking Young people and identifying those places where they may go when they leave care after the age of 18.
- 177 49 children were considered at MARVE during the financial year. Most were male. Our data scrutiny has highlighted a growth in referrals for criminal exploitation but a drop in girls being referred for CSE and general Harmful Sexual Behaviour referrals. Everyone's Invited, as a website, has magnified this issue of HSB for us locally in our scrutiny work following March 2021. We will seek to ensure agencies have more training on HSB. Almost equal numbers of children from each borough are referred but a disproportionate number are from a Black dual heritage background. During the year, 66% of children have had substance misuse as a significant factor.
- 178 Overall, 86 children in Kingston were assessed to be at risk of CSE during the year and there were 72 referrals for concerns of contextual safeguarding and exploitation. In Richmond, 93 children were assessed to be at risk of CSE and there were 67 referrals for contextual safeguarding and exploitation.
- 179 During the financial year, we have monitored trends of children going missing from home and care. Numbers have grown in Kingston and have been affected by the periods of lockdown with missing numbers falling starkly in both boroughs in January 2021 after rises in August and December. Most males than females go missing. In Kingston, approx 40% of missing episodes lead to a Return Interview against approx. 30% in Richmond taking place within 72 hours. Often young people will wish to decline this. In December 2020 the Philomena Protocol was launched between Police, AfC and residential care units- 32 people were trained by Police- this will also have had an impact of reports of missing children.
- 180 Lockdown has led to the return interview team working to find alternative ways to engage with young people which remain helpful as life begins to return to normal:

The Return Interview Team have been meeting children out in the community where possible, examples have been in the park and in a cafe, taking into account confidentiality. Walking and talking with the child out in the community can be beneficial as the child does not have to have eye contact and this can be more comfortable for the child and they may talk more openly.

181 In December 2020, we carried out a multi-agency audit of young people open to Kingston and Richmond MARVE from a mental health perspective. The audit found high levels of complexity in the five young people considered, of whom four were known to CAMHS. Children with neurodevelopmental disorders were overrepresented at MARVE. CAMHS teams were not consistently aware of cases being discussed at MARVE, and so there was room for improvement in information sharing. Dr Riddel, CAMHS who attended, planned to write a reflective piece on the learning from this and present at the SWLStG Executive Safeguarding Meeting.

## Phoenix Project (AfC)

182 The Phoenix Project provides outreach support to survivors of Child Sexual Exploitation. This year, the Phoenix Project worked online to respond to the Pandemic. They have delivered one to one sessions and family sessions via Zoom, Google Meets and WhatsApp video call, depending on the platform of choice for the family. For some young people this has not been accessible, as they were uncomfortable accessing video calls, and the developing and maintaining of a warm and safe relationship has not worked for all young people using virtual platforms. In those cases, they have worked out of doors with walk and talk sessions in parks.

183 For one young person the weekly walks not only added consistency to the relationship allowing Phoenix to continue the work through conversation and reflection about different situations and relationships, but enabled her to spend time with someone other than her family, as contact with other family members and her friends was restricted. In her evaluation, she mentioned 'the walks' as one of her favourite things.

184 2020 -21 has seen a continued increase in the requests for young people to receive Phoenix support, with 36 newly referred young people (17 Kingston, 19 Richmond) and 4 young people in ongoing consultation, a considerable increase on the previous year where 16 young people were engaged with. 45 young people received services from the Phoenix Project in 2020-21. 9 young people continued to work from the previous year. 21 young people were from a White British background and 4 young men were referred.

### New Referrals by Age

Age	One to one work	Consultations	Totals
10-12	2	4	6
13-15	5	12	17
16-17	2	10	12
18+	0	1	1
<b>Total</b>	<b>9</b>	<b>27</b>	<b>36</b>

Here are some examples of feedback:

*"It gave me a chance to be me and help see myself as other people see me. It also helped me to be more confident and comfortable"*

*"This has really helped xxx, she has also mentioned several times how your work that you have done will help her when she goes to university." (Foster Carer)*

*"I trusted the worker and was able to talk about potentially awkward things comfortably."*

## Services' Engagement and Impact

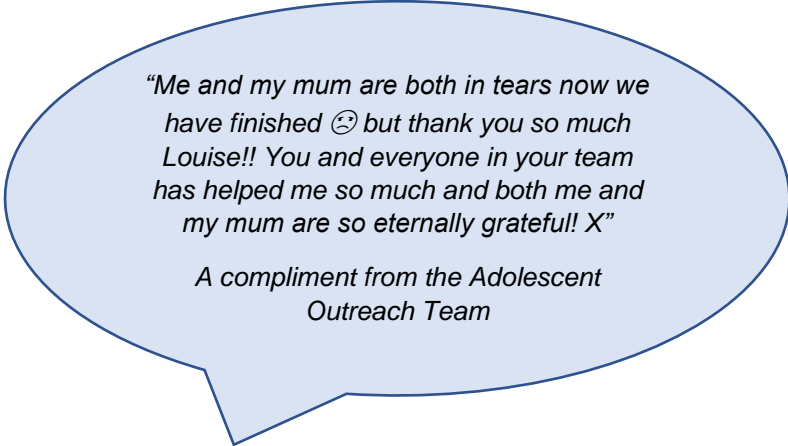
- 185 We have sought to give examples of the child's voice throughout this report. These paragraphs focus more closely on further Partnership actions, their impact and outcomes for children. We can see some differences in activity between the boroughs despite their rates of crime and poverty being similar, and there being more children in Richmond. There have been significant rises in child protection planning for both boroughs, partially because of the pandemic and lockdowns.
- 186 During the year, most multi-agency independent inspections were cancelled in general. However, there was a Youth Offending Services inspection for both boroughs in autumn 2020. I am pleased that this found our local work to be good-our Partnership working was particularly praised. AfC Youth Offending Services demonstrated high quality support to those young people who are involved in criminal activity. More work was needed on out of court planning and delivery, but much of the court disposal work was outstanding. Joint work was a particular strength and it was felt that the Partnership had an in-depth understanding of its local challenges. There was a strong emphasis of partnership working in many cases and there was evidence that each child was treated as an individual. Locally, we undertook preparations for a JTAI (Joint Targeted Area Inspection) in Kingston and Richmond with our Partners, as a means of preparation, led by Tracey Welding. During the year, there have been few major agency changes, although the three AfC clusters were changed to two operational areas in May 2020.
- 187 I consider that our focussed work around raising awareness of safeguarding and child protection issues helped focus our professionals, and community about keeping the child in sight and recognising the drawbacks of virtual contacts.
- 188 As a Partnership, during the lockdown we wrote to all Supplementary Schools and Language Schools to remind them of their safeguarding responsibilities in case they were having contact with children and young people. We offered outreach support.
- 189 During this crisis period, there were many examples this year of staff and volunteers going the extra mile to support our communities across both boroughs, which demonstrates our impact. A number of health members staff were seconded to the NHS to help with local capacity issues and the local rollout of the vaccination programme. Many schools organised food deliveries to families and made home visits. They worked hard to encourage vulnerable children to attend school. The examples below are a small snapshot of the impact of our local Partnership work. Thank you everyone.
- 190 The Kingston charity Growbaby, working across both boroughs, from March 2020 distributed 698 cartons of Formula, 1,657 packs of nappies, 7,721 pouches or jars of food 7,721 and 1,197 packs of wipes, as well as other practical support to local families. As poverty is often a driver of child abuse and neglect, this practical action will have made a difference to safety outcomes for our local children.
- 191 AfC youth centres in Kingston supported the delivery of 8,000 meals to vulnerable families' and our children and young people from Anstee Bridge made 300 cupcakes with ingredients provided by the Coop and then delivered these to key workers. AfC introduced schemes to support vulnerable families who have needed additional support with food and heating bills this year and established holiday activity and food programmes for vulnerable children. AfC created a dedicated Youth Services Instagram page, which now has 1,300 followers, and launched a TikTok account on International Women's Day with staff and young people sharing about the women who inspire them – this resulted in over 3,500 views.



- 192 AfC's Family and Adolescent Resilience Services continued to work with families with complex needs to keep them together and to avoid children unnecessarily coming into care. They provided support to 395 families facing multiple issues including mental health needs, Domestic Abuse, drug and alcohol abuse, and unemployment via the Strengthening Families service.
- 193 A SWLStG Trust Domestic Abuse worker was recruited and began work in May 2021 and a Trust-wide Domestic Abuse policy was agreed. In March 2021, the Trust wide supervision 6-weekly level was 84.3%. nearly at the Trust wide target of 85%. Referrals have tripled to the CAMHS Eating Disorder team during the year, and there has been increasing acuity within children on the waiting list to be reviewed. A contingency plan has been agreed, and there are discussions at local and national level regarding how to support these young people. The Eating Disorder teams in response to local rises delivered a learning event in June 2021, facilitated by the SW London CCG aimed at professionals working with young people focusing on early response and support to young people with concerns around eating. There were over 220 delegates.
- 194 As a result of emerging learning from a local review, SWLStG perinatal teams attend vulnerable women meetings in our local Hospitals, and a new self-harm policy has been launched. The Named Nurse delivered two training sessions to Trust staff on safeguarding the newborn children of mothers with severe mental illness as part of the perinatal team's awareness day.
- 195 In SWLStG, the safeguarding leads participated into an internal audit into practice around the seclusion and isolation of patients for infection control reasons, how they were supporting them, respecting their rights and keeping them safe. There was some learning from this audit around the recording and practice on the wards. Aquarius CAMHS ward was noted for its exemplary practice in respecting the rights of children and supporting them creatively during periods of isolation.
- 196 All SWLStG staff access training in safeguarding children at induction, and then clinical staff have further training as part of their mandatory training requirements. All staff have been trained at inter-collegiate appropriate level, Level 3. Safeguarding children is a standing item in all children and adults' team meetings. 966 staff completed in-house Lev 3 training in 2020/1 using teams as the platform. The second Trust Domestic Abuse Conference: 'Ending the Silence', delivered twice in December 2020 was a huge success with a total of 250 individuals logged in. We can trace the impact to an ongoing rise in MARAC referrals, for example.
- 197 The SWLStG Named Doctor delivered very well-received learning around suicide prevention in young people to Trust staff and external guests as part of the Trust suicide prevention summit. The need for multiagency practice and issues around consent and information sharing in young people were covered.
- 198 There was an escalation from the Kingston Designate Nurse to SWLStG, concerned that Kingston GPs felt that mental health clinician discharge summaries did not acknowledge risks to children. As a result, cases were reviewed, and the Home Treatment Teams have agreed to include 'Safeguarding' as a section within discharge summary templates.
- 199 There was previously a concern locally and nationally that the COVID-19 emergency would cause a drop in child safeguarding reports due to reduced staff capacity and reduced numbers of face to face contacts. However, SWLStG has noted instead that there has been a rise in child safeguarding incident reports. The data may be indicative of the fact that the

Trust has managed to deliver safeguarding children training to a wider range of staff, who may now have heightened awareness of safeguarding children concerns.

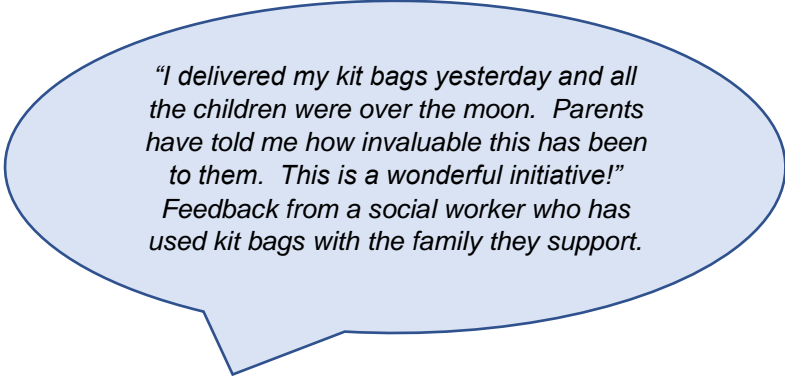
- 200 High levels of incident reports continue from Orchid Mental Health Emergency Service, Aquarius ward and IAPT services. The newly expanded Mental Health Support Line (MHSL) staff have all been offered enhanced safeguarding children training and it is noticeable how the safeguarding children incident reports are increasing from that service, from 0 in January to 7 reports in March, while overall incident reports from the MHSL have increased from 2 in January to 20 in March 2021.
- 201 The Trust Complaints advisors run surgeries on the CAMHS wards to hear the young people's views - both compliments and complaints. Issues raised are followed up by the team, and outcomes shared with the young people in the following surgery. Here is an example:



*"Me and my mum are both in tears now we have finished 😊 but thank you so much Louise!! You and everyone in your team has helped me so much and both me and my mum are so eternally grateful! X"*

*A compliment from the Adolescent Outreach Team*

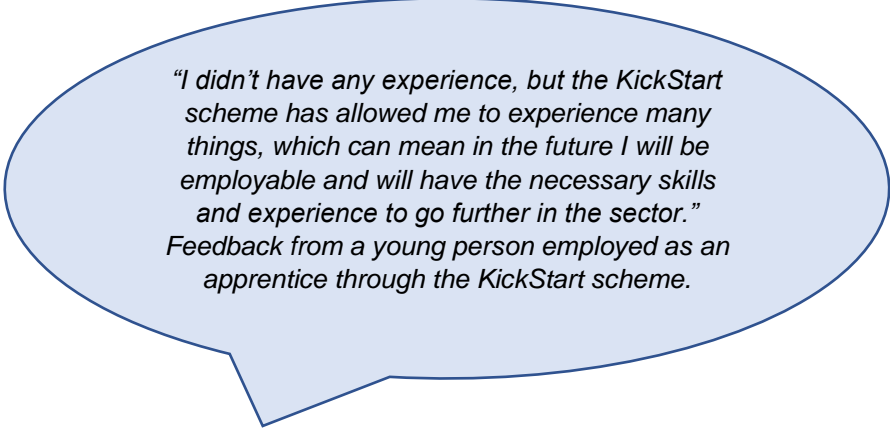
- 202 The AfC contact centre in Twickenham safely provided over 3,000 hours of contact between children, young people and families taking into account COVID -19 restrictions. Over 75% of AfC employees worked from home, hosting children's centre and youth centre sessions on Facebook, communicating with young people via podcasts, delivering training virtually and via webinars, and communicating with care leavers via regular video calls. AfC supported over 20,000 families through the COVID-19 Winter Support Grant across all three boroughs. The aim of the grant is to help vulnerable households and families with children who were particularly affected by the pandemic throughout winter.
- 203 AfC secured funding in Richmond from a local charity to create and deliver 130 'kit bags' for children aged 2 to 13 years who are supported by social care services. The kit bags support virtual visiting and direct work with younger children and sibling groups by providing creative material and activities which help practitioners to engage with the children and capture their voices.



*"I delivered my kit bags yesterday and all the children were over the moon. Parents have told me how invaluable this has been to them. This is a wonderful initiative!"*  
*Feedback from a social worker who has used kit bags with the family they support.*

- 204 Project X as a means of reducing serious youth violence and knife crime, has supported 161 young people to engage in structured positive activities such as X-ercise, with a focus on fitness through one-on-one and group sessions' Gourmet X: a virtual online cooking project, X-press yourself: a creative music course and X-cast: a podcast project.
- 205 CLCH (Central London Community Healthcare) and Your Healthcare (YH) health visitors maintained face-to-face contact with families where possible to ensure the health and development of young children and rolled out the 'safe baby' toolkit in response to national concerns about the added risk to babies during lockdown. Moving to the virtual platforms was a rapid change at the initial phase of the pandemic and staff have adapted to this change and are now fully competent in using various platforms to communicate with colleagues and patients. Home visiting and the desire for staff to return to this so rapidly was a credit to the staff resilience during the pandemic. Staff developed their working methods to the virtual world rapidly and worked around some initial teething problems with technology.
- 206 AfC launched the new SEND Register in Kingston and Richmond to capture the details of more children and young people with SEND to encourage greater engagement with families. Since the launch of the new register in mid-March 2021, there have been over 1,000 families sign up, with new registrations coming in every day. All those that sign up receive a Disability Awareness Card, which was designed in collaboration with children and parents, and it provides proof of a child's disability.
- 207 AfC's new purpose-built short break centre for children and young people with disabilities, Rainbow House, opened in June 2021 and Enhanceable have been appointed as the commissioned provider to deliver the service. The seven-bed centre provides overnight short break care for children and young people aged from 8 to 18 years who may have multiple disabilities, complex medical needs or challenging behaviours. The design, planning and even naming of the centre, has been heavily informed by the views and experiences of children, young people and families. AfC's new residential children's home in Teddington, Hope House, opened in October 2020 following a successful registration process, and is now accommodating three young people. Ofsted described the home as 'beautiful' during their registration visit.
- 208 By strengthening its online engagement, 5,000 young people have been supported by AfC Youth Services to take part in positive activities. Through a range of initiatives, including the VALU project and the Esteem project, AfC supported over 400 young people who are currently receiving support from early help and social care services and who were engaged in risky behaviour, on the edge of care, or who are at risk of social isolation. The AfC Way2Work team has provided excellent support to its apprentices, and as a result their progression rates are extremely good with over 80% of employers offering advanced apprenticeships or permanent employment opportunities.
- 209 Despite COVID-19 restrictions, eight young people with SEND were supported to commence AfC independent travel training with five successfully completing the training in 2020-21. The training supports children and young people to become more independent by learning the skills and building the confidence to use public transport safely.
- 210 The AfC Emotional Health Service (EHS) launched a new online resource hub for professionals, families and young people to 'help families help themselves' to improve the mental health and wellbeing of our families. The resource hub contains links to online therapy providers such as Kooth, advice pages, information leaflets for young people, an online video library for parents with presentations on a range of topics from helping with sleep, supporting your child's anxiety to being ready to start primary school.

211 AfC is an official partner in the Government's KickStart scheme and have been approved to recruit up to 121 16 to 24 year olds across 31 organisations in Kingston and Richmond. The young people will be supported to complete six months of paid work to gain valuable work skills, knowledge and experience. Nine of the 16 internal Kickstart roles have been offered so far, with five offered to care leavers or young people with EHCPs, and 11 young people have already started jobs with partner employers with a further 37 are currently in the recruitment stage.



*"I didn't have any experience, but the KickStart scheme has allowed me to experience many things, which can mean in the future I will be employable and will have the necessary skills and experience to go further in the sector."*  
*Feedback from a young person employed as an apprentice through the KickStart scheme.*

212 AfC launched the Virtual College to improve the experience of our older young people who are looked after, by creating clearer pathways and opportunities for students aged 16 to 25 years old. The College is part of the wider Virtual School offer, which has been rated as 'outstanding' by Ofsted and which seeks to support the education of all our looked after children. The AfC independent fostering agency which operates across all three boroughs, had its most successful year yet in terms of recruiting mainstream carers with 18 households recruited across our operational areas.

213 AfC's Educational Psychology Service worked with 44 schools to deliver the Attachment Aware Schools Award, which provides a framework of support and understanding for schools within which children and young people who have experienced adversity, can heal, thrive, play, and learn.

214 In partnership with St Mary's University in Twickenham and Barnet Council, AfC successfully secured an extension to its Transition Hub project, which so far, has supported 40 future students in care aged 11 to 14 years old, including unaccompanied asylum seeking children, to improve their long-term outcomes using an evidence-informed and tailored programme of support.

215 All Children Looked After had face to face health checks as a priority, after the checks only were online at the height of the lockdowns. Care leavers were rag rated by the Named professionals in relation to their needs and health needs to support in understanding who would need to follow shielding guidance. A letter was sent to all foster carers, semi-independent settings and young people outlining what services would be available to them and where they could access support.

216 As part of the easements made possible by the COVID-19 Act, Adult Health medicals for foster carers were by self-declaration only with no oversight by the agency Medical Advisors. This was reviewed with AfC and it was agreed that from Quarter 2 the documents would be reviewed before carers were presented to the Fostering Panel as good practice. It was requested that carers were seen virtually by GPs and recalled for a physical examination at the earliest opportunity. In Quarter 2, all foster carer health self-declarations were reviewed by the Medical Advisor prior to being presented at Fostering Panel. From Quarter 3, new

guidance stipulated that if GPs were unable to see prospective carers for a medical, they must corroborate the self-declaration for review by the Medical Advisor. Support has been given to the Fostering Team to liaise with GPs to expedite these reports.

- 217 A monthly health virtual drop-in teaching session is now offered to social work teams and these are well attended. Topics covered so far have been Foetal Alcohol Spectrum Disorder, sexual health, Health needs of Unaccompanied Asylum Seeking Children, common childhood illnesses and when to attend Accident and Emergency. These sessions have been attended, on average, by 25 social workers.
- 218 The Designated Professionals continue to meet the Children's Commissioner monthly. As a result of local learning regarding older young people in semi-independent living 2018-20, in both boroughs, each semi-independent setting has identified a preferred GP Practice. The Designated Professionals for Children Looked After (CLA) are advocating that there is one named GP for CLA (usually the Safeguarding Lead) in each setting to ensure continuity of care. Local providers of semi-independent accommodation have been contacted to gather information regarding their preferred GP and GP Safeguarding Leads have been identified. The CCG Named GP has prepared a best practice guide for the GP surgeries attached to semi-independent housing providers to help them support the young people there. This guide was launched at an event for the identified GP Safeguarding Leads in March 2021.
- 219 The AfC Emotional Health Service (EHS) and CLA Health Teams meet monthly to reflect on complex cases and plan care. A 3-month pilot to assess the mental health needs of CLA as part of the Initial Health Assessment commenced in January 2021. The project uses the International Trauma Questionnaire and other screening tools to assess the emotional and mental health needs of children and young people on entry to care and understand what support and interventions will be required.
- 220 Specialist Nurses for CLA have now been trained and can access the Virtual School Personal Education Plan record keeping system. This will ensure that the educational needs of children are understood and will inform Review Health Assessments. The Leaving Care Team in AfC have now identified a cohort of CLA and care leavers where an EHCP has been ceased and seek for them to be reinstated where possible. Some of these young people with Learning Disabilities and autism will also be monitored on the Dynamic Support Register.
- 221 The Chelsea and Westminster NHS Foundation Trust has reported a rise in safeguarding referrals, which means more children have been seen and safeguarded. Over 185 MARAC referrals (72 in West Middlesex, with 12 for Kingston and Richmond subjects) were made in 2020-21 compared to 146 in 2019-20. This is a 95% increase from 2019-20 for West Middlesex. There was also a 15% increase in IDVA (Independent Domestic Violence Advocate) referrals; 131 referrals were made in West Middlesex. 39% (72) of referrals came from West Middlesex sites in 2021, which is a 19% rise on the last year. 11% of those referrals were from Maternity. West Middlesex Adult Emergency Department saw the largest increase (338%) in MARAC referrals made, from 8 in 2019-20 to 35 in 2020-21.
- 222 These rises in the recognition of Domestic Abuse could in part be a result of increased training around Domestic Abuse and a Trust level Domestic Abuse Coordinator being employed from 2018. A total of 36 Domestic Abuse Leads have been trained this year. The Trust has a total of 324 Leads with 83 (25%) at West Middlesex, across a range of disciplines, with the highest 40 number in maternity and 2 in paediatrics. Our planned summer 2021 Domestic Abuse deep dive, with an emphasis on infants is therefore timely.
- 223 A key Domestic Abuse training achievement of this year has been obtaining a regular Level 2 training slot on the Trust's Level 3 Safeguarding Children and Adults training, which

enabled core staff members to receive Domestic Abuse training as part of mandatory training requirements.

- 224 The Domestic Abuse Coordinator has refreshed Domestic Abuse pathways, provided dedicated training, and included routine enquiry prompts throughout the Trust, including within the GUM (Genito-urinary Medicine) and HIV Teams at West Middlesex. This table shows the overall impact.

<b>Table 5: West Middlesex University Hospital Domestic Abuse Referrals 2018-19 – 2020-21</b>					
<b>IDVA Referrals</b>					
<b>Year</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Total</b>
2018/19	37	32	23	32	124
2019/20	28	33	27	22	110
2020/21	13	37	41	40	131
<b>MARAC Referrals</b>					
<b>Year</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Total</b>
2018/19*	0	1	2	0	3
2019/20	4	11	7	15	37
2020/21	13	13	24	22	72

### **Domestic Abuse Training Feedback:**

**Level 2:**

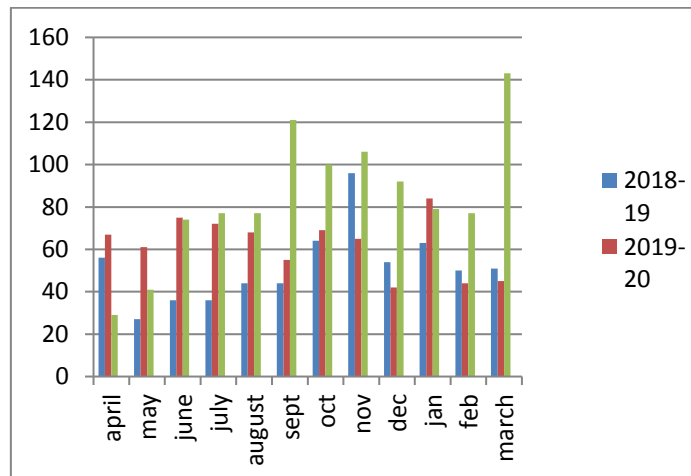
*“I feel more confident and can now address domestic abuse concerns. [I] know how to document and escalate my concerns.”*

*“I will be more active in asking women about DA and more confident to respond to a disclosure and refer.”*

*“I have increased in confidence and pathways of support / policies within the Trust and outside the Trust.”*

*“With my knowledge regarding domestic abuse widened, I can understand the person who is undergoing such a situation. I can identify indicators and can manage the situation better, and/or if needs to be escalated.”*

- 225 There are monthly multi-agency Socially Complex and Vulnerable Families meetings which are chaired by the Safeguarding Specialist Midwives and include representation from Children’s Services, perinatal mental health midwife, team leader of the young mother’s group, and safeguarding health visitors, The remit of the group is to review safeguarding / socially complex cases, provide safeguarding supervision, and act as a safety net to ensure good information sharing and planning is in place.
- 226 The safeguarding midwives attend the meeting with the Perinatal Mental Health liaison / psych teams to ensure plans have been put in place for women and families. The consultant midwife has been working with the Early Help lead in the different boroughs to try and improve links and therefore referrals into these services.
- 227 A new pilot programme- “Supportive Signposting” was launched within Maternity in July 2020. This was based on the Social Prescribing Model based in Primary Care with the aim of increasing referrals to early intervention and early help services. The evidence for use of such a model was positive and linked in well when considering families with inequalities or who had a history of previous or current adversity. This has been adopted by the CCG throughout North West London. Posters were put up all around the maternity unit and accepted referrals either directly from women or from midwives.
- 228 The service to date has received more than 180 referrals and on evaluation follow up phone calls with women and families demonstrated a reported 70% increase in user’s emotional and social wellbeing. More than 60% of users were from a Black Caribbean or Black African, or dual heritage Black background or from an area of deprivation. Referrals to Children’s Social Care have risen for every borough the Hospital works with, as the graph on the next page illustrates.



**HRCH (Hounslow and Richmond Community Healthcare)**

- 229 During 2020-21 the HRCH health visiting service received an additional 16 safeguarding supervision sessions in addition to their 3 monthly supervision mandatory requirement. During 2020-21 safeguarding supervision compliance was noted to be good and compliance levels have been maintained between 90-100% for many teams that have direct face to face clinical work with children and young people.

- 230 All health visitors have now completed Domestic Abuse training via e-learning for health. Risk assessment training for the health visiting service is being provided on an ongoing basis via Microsoft teams by the safeguarding team and Practice development lead. An Audit was undertaken of the Richmond and Hounslow children that were seen for medicals. The audit was undertaken against the RCPCH standards and EHCP / SEN issues.

## Early Years

- 231 We are supported by Elanor Hughes, Lucy Chester and Helen Swan for our Partnership work in AfC Early Years. Below they highlight their work in support of our local Priorities this year.

### Family and Mental Health:

- Sent out communications in relation to mental health, including training available via Early Years newsletters and dedicated emails to the whole Early Years workforce;
- Contacted settings to find out procedures in place to support children's mental wellbeing during lock down and since returning to the setting;
- Annual update of the Early Years Safeguarding Booklet which is shared with all the Early Years providers, KRSCP, SPA and LADO;
- We have recently included mental health training as part of the advisory team core safeguarding training, which is updated at least every three years;
- Asked KRSCP to put on mental health training for the early years' providers;
- Shared the Anna Freud Centre for Children and Families [RETURNING TO NURSERY](#) materials to support this year's transition.

### Parental Vulnerability:

- Childcare provider network included information from the Children's Centre Manager around the provision for parents including play sessions for vulnerable families, 1-1 information, advice and guidance sessions and online workshops;
- Our Families Information and Brokerage services have supported families to access essential childcare;
- Across 2021, we have distributed Food Vouchers to support 2, 3, & 4 year old Kingston or Richmond resident children who meet the economic eligibility for 2 year funding or meet the criteria for Early Years Pupil Premium. Families have received £15 per week, per eligible child, to purchase groceries across the holiday periods.

### Contextual Safeguarding:

- Promoted KRSCP Contextual Safeguarding training to the Early Years' team and to the Early Years' providers;
- Safeguarding updates is included in all early years' newsletters and at childcare provider networks;
- Helen Swan and Lucy Chester deliver the introduction to childminder course which includes Level 1 safeguarding, signs and symptoms as well as discussion on scenarios and safeguarding procedures;
- Termly LADO meetings - cross-reference cases / share themes;
- Supported 40 safeguarding cases in early years and childcare settings from July 2020.



## Voluntary Sector

232 Kingston Voluntary Sector is represented by Karen Penny, Children & Young People Policy Officer. Karen writes “Kingston Voluntary Action (KVA) offers infrastructure support to the voluntary and community sector in Kingston upon Thames. The sector is diverse, covering environmental and heritage work, sports and membership groups, but the largest demand comes from organisations working in health and social care, including mental and physical health and disability and the children and young people’s sector.

“KVA runs a Children and Young People Network offers a quarterly meeting for groups working with children and young people, giving the opportunity for groups to meet, network and learn from each other, the KRSCP is represented at all meetings and the training opportunities and support from the partnership is discussed and areas where the sector would like more support are fed back. Updates are sent out regularly listing training opportunities, funding opportunities and items of interest from the NSPCC’s CASPAR update for example, as well as local news and updates.

“Organisations are actively encouraged to undertake training offered by KRSCP as well as that by KVA which has been given jointly with KRSCP (for example Trustee safeguarding training). 2020-21 was a very difficult year with a large proportion of time devoted to COVID-19 support. KVA staff were redeployed to support Kingston Stronger Together’s Tier 3; specifically working around voluntary sector support, food provision and supporting volunteers in the community. Many meetings and support work were postponed until later in the year. However, safeguarding remained a priority and we were fortunate to be able to undertake work including:

- Four Children & Young People’s network meetings and two Trustee Training sessions;
- Twelve network updates;
- Representing the Sector in the Covid Planning Group, Pan London Food Poverty discussions, Learning & Development Subgroup, and the Early Help Strategic Board.

Richmond CVS is an infrastructure organisation that supports the voluntary and community sector across all aspects of their business. Heather Mathew, Children and Young Peoples Voluntary Sector Strategic Lead Manager represents the sector on the Partnership. Heather writes, “The activity that the voluntary sector covers is broad and includes arts and heritage, social welfare, sports, support for children with disabilities, support for carers, the environment, and mental health. A third of the workforce delivering the activity and governance are volunteers and there is a wide variation in skill sets and experience. Each organisation is governed independently and there is a large variety in the level of engagement in, and understanding of, their safeguarding responsibilities.

233 “More than ever before, the voluntary and community sector has been in the frontline responding to a wide variety of community need, and mobilising rapidly, including online delivery. In the first phase of the pandemic some of these services were delivered by informal groups with a strong desire to help, but little or no awareness of safeguarding risks, or what to do if they had a concern.

234 “Our consistent message through-out is that safeguarding is everybody’s business. The context we are delivering in has changed dramatically but our responsibilities to keep children safe have not. The legal and charity commission framework remain, and trustees continue to have a legal responsibility to have oversight of their charities operations to be assured that appropriate measures are in place to minimise harm. The sector has responded extremely positively, and it is encouraging that those we have worked with this year come

from across the spectrum of provision and have recognised the need to update or create policies in line with new demands on their services. There is a real commitment to reaching those most in need and doing this in a safe and responsible way.

235 “The role of Richmond CVS in relation to safeguarding is to inform and update the sector on their legal responsibilities, to connect them to training and good practice, to advise on policies and procedures, and to represent their interests and challenges to the partnership. In 2020-21 our work included:

- Providing intensive support to 18 organisations to create or update their child protection and safeguarding policies and procedures " It is such a help to have your input and be able to know that we are working robustly as possible in line with council recommendations" (Friends of Barnes Common)
- Creating a range of downloadable resources to support the sector in the delivery of their safeguarding responsibilities, including safer recruitment and volunteer management, and safe delivery of services online. During the first phase of the pandemic, we provided a wide range of advice to informal and neighbourhood groups, and worked with KRSCP training to make a suite of basic awareness training available for volunteers online
- Delivering two safeguarding training sessions specific to the needs of the voluntary sector – Safeguarding for Trustees and Safe Recruitment and Management of Volunteers which included a presentation from the LADO to highlight the duty to refer
- Representing the sector on the KRSCP Covid Planning Group connecting providers to support in the community for children and families. We compiled 2 regularly updated lists identifying sources of food, essentials and financial support and local, regional and national sources of support across all aspects of family life including mental health and well- being, bereavement and debt management. These lists were shared across the partnership, including the local councillors and both borough MPs.
- Produced a monthly e-digest of resources, with a safeguarding specific section featuring training, research and legal updates from statutory agencies and sector specific experts such as The National Centre for Cyber Security and the NSPCC reaching 300+ subscribers.”

## Managing Allegations against Staff and Volunteers Working with Children

236 Both boroughs are supported by the AfC LADO (Local Authority Designated Officer), who oversee investigations into allegations made against staff and volunteers, who work or volunteer with children; this could be relating to allegations or concern about conduct or a worker's personal life. We tracked LADO referrals during the Covid planning group meetings. Of particular concern were the referrals for those professionals accessing indecent images

at home and, as a result, we redoubled our campaigns around esafety and online grooming for children.

237 In total, 121 LADO referrals were made in Richmond and 150 in Kingston in 2020-21, which we will seek to understand as the year develops as Richmond has the larger (child) population. 83% of cases were concluded in 12 weeks. There was a 33% decrease in referrals in Richmond and 12% decrease in Kingston. In Richmond, just around 1% of referrals had an esafety or technical element, against 12.65% Kingston's technical element. There was an increase in referrals for fostering and residential care sectors, which indicates the impact of COVID-19 on living conditions and stresses for Children Looked After. One shared priority is for the LADO to continue to engage with faith networks in both boroughs. There is also attendance at the DSL Forums. Tracey Welding meets regularly with the LADO to consider learning themes relating to voluntary sector, community and faith settings. A Safe in Faith Conference is planned for autumn 2021 considering the theme of online safety involving the LADO and the NSPCC.

#### LADO referrals 2016-21 in Richmond (source of referral)

	2016/17	2017/18	2018/19	2019-20	2020-21
Education	64	44	61	81	33%
Health	9	9	8	5	4%
Member of the Public	-	-	11		6%
Early Years	39	32	20	42	17%
Ofsted	4	6		3	
Police	1	9	13	-	10%
Social Care External	-	8	4		6%
Children's Social Care	21	31	27		21%
Other, including Sports	18	19	13	18	9%
Other LA Services	6	8		3	
Voluntary Sector/ Faith Groups	8	6	5	16	2%
Probation	-	-	-		
<b>Total</b>	<b>179</b>	<b>168</b>	<b>158</b>	<b>183</b>	<b>121</b>

#### LADO referrals 2016-21 in Kingston (source of referral)

	2016/17	2017/18	2018/19	2019/20	2020-21
Education	31	44	52	64	21%
Health	2	12	8	16	6%
Member of the Public	11	-	8		3%
Early Years	15	17	16	16	12%
Ofsted	0	5			
Police	12	12	13	3	5%
Social care external	13	40	8		10%
Children's Social Care	42	43	37	25	27%
Other, including sports	14	30	18		13%
Transport	0	-			
Voluntary Sector / Faith Groups	6	5	7	5	3%
<b>Total</b>	<b>146</b>	<b>171</b>	<b>167</b>	<b>171</b>	<b>150</b>

*'I would like to highlight that the support and the way in which my referral was handled was exceptional. I was very impressed with the timely response that I got following my referral. I also appreciated the advice that LADO was able to offer me about how to proceed in reducing the risk that my young person was exposed to within their placement. The meetings that I have attended have all been very positive and focussed on the issue that has impacted on the young person's needs. I have observed that LADO has maintained a very sensitive approach to managing the meetings. The meetings were well attended but also ensured that confidentiality was maintained for the professionals that were subject to the investigation. All those involved in the meeting had a chance to make their views known*

- 238 From a Commissioning perspective, one of our gains this year has been the creation of the Safeguarding in Commissioning Working Group, led by Tracey Welding and Mirela Lopez, Corporate Head of Commissioning and Procurement, Kingston Council. This group of senior leaders across the CCG, Kingston, Richmond and Wandsworth Councils are working to develop the Section 11 safeguarding assurance framework further and a set of commissioning standards, with the ambition of its use over our six south London boroughs, which contain the CCG footprint. This will work from the other perspective of assuring our standards of service provision with relation to safeguarding vulnerable adults and children.
- 239 In our Team, Tracey Welding has led our work for the voluntary sector, community and faith groups. In April 2020, recognising the role of volunteers, a new area was set up in the website for resources, elearning was developed and a short film was made with key safeguarding points for those working with vulnerable adults or children. During the year, as part of her support work, Tracey has reviewed 24 voluntary sector funding applications and their safeguarding policies, in Kingston and Richmond to support the Councils and AfC in making these funding decisions. This has strengthened the sector and led to improvements in their practice. Termly newsletters have been produced for both sectors supporting volunteering safeguarding practices, Covid signposting and online safety. These are shared with both Voluntary sector leads and interfaith forum groups for Kingston and Richmond.

## KRSCP Safeguarding Arrangements

- 240 The LSCB (Local Safeguarding Children Board) in Kingston and Richmond joined in 2014 and was superseded by the KSRCP (Kingston and Richmond Safeguarding Children Partnership) on 1<sup>st</sup> October 2019, according to statutory requirements set out in Working Together 2018. The first Chair of the Partnership was Ian Thomas CBE, Chief Executive Kingston Council. He served a tenure of a year as agreed and then stood down, handing over to Detective Superintendent Owain Richards, in October 2020. Owain left the local BCU in June 2021 and handed over to me.

- 241 Since our arrangements were published, the SLG has made some small changes. The Workforce Development Subgroup is now called the Learning and Development Subgroup and Local Learning Hub is now known as the Quality and Innovation Subgroup.
- 242 In January 2021, the Independent Scrutineer, Chris Robson stood down and in March the SLG considered methods of independent scrutiny going forward. They decided to use a model of bespoke independent scrutiny using experts for themes, instead of employing one Independent Scrutineer. This would give expert flexibility and the ability to commission participation groups to support our work. Instead of one Scrutineer attending our SLG meetings, the Scrutineer who has worked on the individual piece of work attends the SLG to feedback. It is planned that instead of the Independent Scrutineer mediating between any local agencies if there were escalated concerns, the KRSCP Chair would do this or a delegated independent person, if required.

## Structure – Kingston and Richmond Safeguarding Children Partnership



- 243 The Executive, the SLG, of the Partnership meets quarterly and has included education as a fourth Statutory Partner from October 2019, when arrangements were published- with Headteachers from a Primary School in Richmond, Sophie McGeoch, Meadlands Primary, and a Secondary School in Kingston, Sophie Cavanagh, Kingston Academy. The SLG had its first development day in early March 2020, where it set its priorities.
- 244 The Partnership is supported by a small team of full and part-time staff. Richmond and Wandsworth Shared Services, Clare O'Connor, Chief Executive's Division, manages the team and the Local Authority hosts them. During the year, Elisabeth Major, Partnership Manager, has worked 4 days a week, Tracey Welding, Deputy Partnership Manager and Daksha Mistry, Learning and Development Manager have worked full-time; Sarah Bennett, part-time CDOP and part-time KRSCP Coordinator has worked fulltime; Lucy MacArthur, Education Safeguarding Coordinator has worked 4 days a week term time with education settings and Jay Wylie-Board has worked full-time as our Administrator. In summer 2020,

both Lucy MacArthur and Elisabeth Major gave work time to Richmond Council and AfC to support other teams in lockdown. A Team review and consultation took place during the year. We plan an online meeting in October 2021 with our relevant agencies as a means of sharing our Annual Report and Independent Scrutiny and, most importantly, meeting together.

### Lay Members

- 245 Our lay members provide us with invaluable professional support, advice and feedback on our local community. The SLG has encouraged them to be tied into a Subgroup. Noni Farrelly (Kingston faith group member) attended our Learning and Development Subgroup until she left in early 2021. Debbie Ramsay (Richmond community member) supports our learning and development. Aisha Bicknell is our School Governor Member (Richmond) and attends the Q & I Subgroup. We would like to thank them all for their support and scrutiny as critical friends. We are currently recruiting a lay member from Kingston to support our VCA (Vulnerable Child and Adolescent Subgroup).

## KRSCP Subgroups

- 246 From April 2020, our subgroups have been meeting online. This has been very successful, cutting down on travel time and giving good attendance. The SLG has decided that our ongoing meetings will mainly remain online. Subgroup chairs will be meeting together from autumn 2021 and have been invited to attend the SLG from summer 2021.

### Quality and Innovation (Q & I) Subgroup

- 247 The Quality and Innovation Subgroup across Kingston and Richmond has been chaired by Sian Thomas Designated Nurse Richmond, and Louise Doherty, Designated Nurse for Kingston. The Subgroups are part of our learning and improvement framework. The group has worked hard on a new partner dataset, which is regularly scrutinised by the Subgroup. It meets five times a year.
- 248 This year, the group has considered Section 11 safeguarding self-evaluations for schools, Early Years' Settings, and GPs; (See para 255). We develop themes for deep dives, oversee the multi-agency audits and workstreams that accompany them.
- 249 Several multi-agency audits have taken place over the year in addition to our deep dive audits. To develop a baseline for the new Early Help Strategic Board, we quality assured six Early Help Assessments in December 2020. One Kingston case was escalated. This showed the need to link parents and carers' needs assessments to the support provided to their children; the importance of the use of careful strengths' based language in interventions and reports and strengthening the Team Around the Child (TAC) Meetings. This audit will be revisited in December 2021.
- 250 We carried out a multi-agency Neglect deep dive in summer 2020 by virtual means. This was to test our Neglect strategy and focus on the neglect toolkit and local training. AfC selected ten children, five from each borough, who were all subject to repeat Child Protection Plans under the category of Neglect, ensuring there was a spread of age ranges. Multi-agency audit forms were sent to partners involved with the 10 children.

There were several common characteristics amongst the cases, these included:

- Adverse Childhood Experiences (formerly known as the “toxic trio”) - the mothers, in these cases had suffered from mental health concerns, Domestic Abuse and substance misuse issues. The families had been known to services for many years and there had been several previous plans and interventions for all ten children;
- Parental and environmental vulnerabilities and risks - there were children with complex needs, with several vulnerabilities in their families- including parental mental health, allegations or evidence of child sexual abuse, there was a danger that the voice and lived experience of the child was lost in a focus on parental difficulties;
- Premature closing of cases with cases opening again after concerns were raised in a short period of time;
- Information sharing could be extended to all involved professionals, particularly GPs, College;
- Response to missed appointments, e.g., dental decay and poor school attendance.

251 One Kingston case was escalated to Children’s Social Care, one Richmond case was locked for confidentiality reasons, and so could not be fully audited. As a result of emerging learning, the multi-agency Was Not Brought protocol was re-highlighted to practitioners in May 2020.

252 Our Independent Scrutineer, Chris Robson as the third learning hub theme, scrutinised the Journey to School Exclusion during autumn 2020, culminating in a Learning Hub Event and Conference in January 2021. The report is here: <https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-kingston-lscb/subgroups-39/quality-assurance-subgroup-102.php> The scrutiny report provided assurance to the Partnership and the action plans lie with Sheldon Snashall AD for Pupil Inclusion in AfC. The Conference was very successful:155 delegates attended online and the deep dive involved participation from young people, a multi-agency audit of children facing exclusion from school, and an action learning set, which included the voice of the young person.

253 The young people in our audit had several vulnerabilities in common which has helped to inform our work going forward- we could see how easily they could be groomed into extremism; they often faced domestic abuse in their families of origin and many did not have a male role model in the home. They were disproportionately boys, from a Black African and Black Caribbean background, who often had faced difficulties at school from their primary years.

254 The Subgroup is currently working on a multi-agency reflective model for repeat or long-term Child Protection Plans. During the year, it has scrutinised LADO and Child Protection Conferencing Annual Reports, a rise in concerns about Eating Disorders, leading to a mini conference in June 2021, Domestic Abuse involving 16 and 17 year olds and MARAC referrals, and the Partnership’s Pandemic Communications’ response.

### **Section 11 Duties**

255 All local relevant agencies were informed of our safeguarding arrangements and their duties in summer 2019, when the new Partnership was formed. During the year, the local Section 11 themes have been GPs, Early Years settings and Schools in Kingston and Richmond. This is scrutinised by the Q & I Subgroup.

256 Almost all schools (150) submitted an annual Section 11, with 11 schools outstanding, which are being followed up. The evaluations exhibited a strong safeguarding culture in schools, with DSL Forums involving 70% of maintained schools and 85% of independent schools.





Care Settings. Learning from multi-agency audits and local learning reviews had been actively promoted across the GP system.

- 261 Feeding into the Q & I Subgroup was a Governors' Task and Finish group in autumn 2020, chaired by our School Governor lay member, Aisha Bicknell. This group of 9 Governors from a mix of schools in both our boroughs (primary, secondary, independent, academy and state maintained) scrutinised local data and the Timpson report. The group's work found a lack of understanding regarding school exclusions and the off-rolling process, lack of knowledge to ask the right questions and recommended the inclusion of the Timpson findings in Governor training, early identification of difficulties, and schools appointing an Exclusion Governor as a critical friend. The findings will be revisited in autumn 2021.

## Local Learning Review (LLR) Subgroup

- 262 During the year, the Local Learning Review Subgroup has been chaired by Trish Stewart, Associate Director of Safeguarding and Mandy Harper, Named Nurse, (CLCH). Mandy has stepped down, and Louise Doherty, Kingston Designated Nurse has taken over. It now meets approx. every 6 weeks. This subgroup oversees any action plans arising from local learning. In 2019-20, the group scrutinised 3 serious incidents compared to 12 being referred in 2017. However, for this year, it has considered 12 serious incidents, which followed Independent Scrutiny by Chris Robson of the serious incident process in Kingston and Richmond in summer 2020. Chris found some improvements were needed to processes and recognition of incidents in the Partnership. The report is here: <https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-kingston-lscb/subgroups-39/quality-assurance-subgroup-102.php>

## Rapid Reviews

- 263 12 Rapid or Serious Incident Reviews took place during the year; 11 were for individual children and one for a school. We keep a tracker to monitor the actions and impact of the learning identified. It seems that many of our serious incidents and Rapid Reviews have been for children who are from a Black, dual heritage, White European or Asian ethnic background, and we are considering issues of bias, and deprivation to understand this more. We have noted some disability matters in terms of mental health concerns for parents and carers but have not yet been able to drill down into issues of poverty. Only 1 young person was looked after at the time of the serious incident. 3 of the young people were from a White British background.
- 264 3 of our local Rapid Reviews were for issues around Serious Youth Violence, all involving children from a non-White British background. We know too that there has been a disproportionate impact of COVID-19 on people of a non-White British background and in areas of higher deprivation in the UK. The impact of the pandemic on the serious incident itself is discussed at every Rapid Review. Our local child mortality statistics show that the Rapid Review trend is similar to the child mortality trends in Richmond and Kingston.
- 265 The learning from these Rapid Reviews has been driven forward by Partners at the subgroup, and also disseminated into the local workforce in a number of ways such as in single agency supervision, newsletters, learning and development and 7 minute briefings; we have some significant local learning regarding mental health, pre-birth assessments and working with infants; supervision and professional escalation and resolution of disagreements; working with affluent or challenging families; managing allegations; online safety; creating reachable moments; and safeguarding disabled children. This learning around mental health will be tested in the autumn 2021 in our deep dive, with the focus on

the impact of parental mental ill-health on children. We will be involving some children and young people in this independent scrutiny. In spring 2022, we return to our 2019 deep dive of Missing Children to track our progress and impact. We will involve the voices of parents and carers again as Independent Scrutineers through the CS&E (Child Sexual & Exploitation) Conference Chair, Charlotte Parkinson's engagement work in AfC.

Here are some examples of our local themes identified in our Rapid Reviews and action taken to date to improve our local practice:

<b>Information sharing</b>
SWLStG - GPs copied into all clinical letters and often schools depending on consent.
CAMHS working closely with schools. CLCH systems in place for 0-19 team – regular liaison with GPs, attendance at monthly Kingston Hospital & WMUH maternity concerns meetings and Misper meetings. CLCH staff member working with Richmond CAMHS.
<b>Following up on referrals made</b>
SWLStG policy re follow up of referrals. YHC – Once referral has been sent we receive a standard letter confirming that referral has been received.
<b>Mental Health vulnerabilities</b>
CLCH School Nurses have completed Mental Health First Aid Training & CLCH is carrying out training needs analysis. CAMHS part of a social contagion group currently active at a Richmond School, chaired by social care. SWLStG joint-adult Mental Health presentation planned for School Nursing Teams
<b>Think Family</b>
KRSCP Think Family webcast made
In YHC adult services staff have access to safeguarding support & supervision from both adult safeguarding & child safeguarding team to help them Think Family. It includes Think Family in its Lev 2 safeguarding training for all staff.
CLCH promoted Think Family in June 21 as part of safeguarding week and the voice of child.
Think Family is a SWLStG priority; the Trust is reviewing records & improving recording. SWLStG involved in the triangle of care. New Domestic Abuse lead began work May 2021- mapping what SWLStG needs to do to improve services around Think Family.

266 We have a Learning and Improvement tracker which follows the multi-agency actions following the learning from our Rapid Reviews. During this year, we can see impacts on the workforce and on outcomes for children- more information is available, but I have included some examples below.

### **Impact of our Rapid Reviews on outcomes for local children**

267 A need was identified in an autumn 2020 Rapid Review for a CAMHS consultant to oversee referrals to the SPA around ADHD and mental health needs. This was in place by March 2021, when it led to good practice for a young person as his emergency needs were quickly and flexibly responded to. A subsequent Serious Incident Review charted good practice for a young man and identified some positive learning around the usefulness of using Reachable moments. A 7 minute briefing was prepared to highlight this positive practice.

[7 Minute Briefing Serious Youth Violence](#)

268 The concept of using reachable moments to give space for children to disclose abuse and neglect or to turn in a different direction was developed by the Child Safeguarding Practice Review Panel and was highlighted in our KRSCP newsletter in August 2020, DSL Forums, and used in professional supervision in CLCH, SWLStG CAMHS, and Adults' Services this year. Top Ten safeguarding tips for Schools were also produced by Lucy MacArthur, and the Education representatives, Sophie McGeoch and Sophie Cavanagh to promote ways to work with children during lockdown in February 2021.

269 A Rapid Review involving a school identified good practice around responding to allegations made about staff and volunteers and the management of online safety issues. This led to the refresh of the online safety strategy and the development of a webcast in autumn 2020. Subsequently, referrals to MARVE for online safety issues have grown in Quarter 4. The Online Safety Strategy has had 225 website hits. A 7 minute briefing was created about good practice in working with allegations here:

[7 Minute Briefing Good Practice in Working with Allegations](#)

270 The CSA (Child Sexual Abuse) medical pathway was revised in Quarter 4 because of learning from a Rapid Review, and there has been a slight rise in children being made subject to Child Protection Plans for Sexual Abuse in Richmond to 10% in Quarter 3, and Kingston 5% throughout the year, and a rise in CSA Strategy meetings from 27 in Quarter 1 to 99 in Quarter 4 in Kingston. One Kingston CSA strategy meeting involved a paediatrician in Quarter 4 which is a slight improvement against 7 in Richmond for the year. This is an area of focus for our Q & I Subgroup.

**Here are some examples of the impact of our Rapid Reviews on local practice:**

- The School has put in support for all pupils and identified those who may be more vulnerable; they have informed all local Headteachers re following up referrals made to other agencies.
- GPs copied into all letters by SWLStG.
- Named GP has undertaken S11 audit and identified that some surgeries require support. A policy template is to be developed. Feedback at GP forums following S11 is that GPs are being more proactive.
- CLCH Policy re DNA- planning audit of policy & how it works. Promotion of WNB responses.
- CMNHS has reinstated regular tier 2-3 interface meetings and are developing some shared pathways (tics and sleep.)
- YRS working with adult services re substance misuse transitions Public Health & YRS support the development of substance misuse / vulnerability pathway for all involved agencies There is a clear pathway of support, triggers, referrals for young people at risk of substance misuse – scoping meeting March 2020 Substance misuse information is given as part of year 6-year 7 transitions & as part of KS4 school leavers transitions.

271 The Subgroup also considers national learning from other cases reviews, research and findings from the “National Panel” (Child Safeguarding Practice Review Panel), which are shared in our newsletters. During the year it considered the findings of the National Panel report on SUDI (Sudden Unexplained Death in Infancy) which was also a learning from one of our Rapid Reviews. As a result, there is a Task and Finish Group re SUDI, which began in May 2021, chaired by the Kingston Designate Nurse, and supported by Sarah Bennett. Three strands of work were identified; standardisation of literature used locally, development of a risk assessment tool that multi-agency practitioners can use with families to highlight

any risk factors for Sudden Infant Deaths and how to mitigate them, and any training required. Actions from the group have led to local practitioners developing a webcast for practitioners; AfC includes safe sleeping in its assessments, as well as Health Visitors and Midwives.

- 272 The National Review Panel report on Safeguarding Children at risk from Criminal Exploitation, learning from serious incidents case reviews, published in March 2020, led to a challenge conversation in the summer between senior multi-agency leaders to review our local work. This report considered two local cases. We identified a need to continue work on transitions, placements for young people released from custody and holistic health assessments. It led us to consider gaps in our post-16 education provision and mental health engagement. We planned to develop multi-agency practice standards so that all organisations knew what good looks like- these were completed in July 2021. The conversation led to work with GPs around the MARVE Panel and exploitation and an audit into the mental health needs of MARVE young people in December 2020. Information sharing from MARVE was strengthened to GPs. Elisabeth Major has met with the previous National Panel Chair, Karen Manners during the year to talk about our local Rapid Reviews. These are all overseen by the KRSCP Chair and SLG.

## Child Safeguarding Practice Reviews

- 273 In November 2020 a Child Safeguarding Practice Review (CSPR) regarding mental wellbeing across both boroughs was published here .  
<https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/media/upload/fck/file/KRSCP%20Mental%20Wellbeing%20Report%20Nov%202020.pdf> It contained several recommendations which are held at the Mental Wellbeing Board, chaired by Dr Phil Moore, which are being taken forward as part of the SWL CCG CAMHS transformation plan. Practitioners and children attended focus groups, provided by our Reviewer Seb Birch, SWLStG. The children provided this additional valuable feedback here in an Appendix <https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-krscp/child-safeguarding-practice-reviews-110.php>.
- 274 In March 2021, a Domestic Homicide Review (DHR) and Serious Case Review Maria or Family F was published by Richmond Community Safety Partnership. The reviewer was Bill Griffiths. This was a very sad incident where the father killed the mother and two children. There were actions for us around suicide risks where there are financial pressures and sources of support for those for whom English is not their first language, including around debt. This learning has been disseminated to both the KRSCP and the Safeguarding Adults' Board.
- 275 At the time of writing, there are three ongoing reviews- a DHR (Domestic Homicide Review) regarding Young Person Q from Richmond which follows a practice review completed last year, which was not published; Family T a local CSPR (Child Safeguarding Practice Review) about inter-generational child sexual abuse in Richmond, and a CSPR regarding a Kingston child. Emerging learning has been identified and disseminated around working with mental health issues, child sexual abuse, and safeguarding disabled children.

## Vulnerable Child and Adolescent (VCA) Subgroup

- 276 This joint subgroup was chaired by Alison Twynam (DCS) and DCI Clair Kelland this year. The group has a wide membership and has met four times. Attendance has been very strong

online. This year, the group has looked at County Lines and trafficking, the local work of Rescue and Respond, the Missing Children independent scrutiny, Contextual Safeguarding, Harmful Sexual Behaviour, substance misuse, our local learning reviews and modern slavery. There is considerable impact in terms of the difference this Subgroup's scrutiny and oversight has provided this year outlined in detail in para 158 onwards above. However, we would like to highlight how MARVE meetings have evolved during the year from casework to looking at themes; taking learning from our local data, subgroup discussions and audits. So, for example, now minutes demonstrate the focus on boys as well as girls' sexual health, locations and as the summer begins, we can see a rise in referrals to the SPA for CSE and HSB, which we have wished to see. This places the MARVE in a good position to transition into MACE and pre-MACE meetings in line with the pan-London CSE protocol in October 2021.

## Learning and Development (L&D) Subgroup

- 277 This Subgroup is chaired by Suzanne Parrott, Headteacher of the Virtual School and College, AfC, coordinated by Daksha Mistry, Learning & Development Manager. During the year, this Subgroup met four times. We changed swiftly to provided solely online training from April 2020. From the point at which KRSCP started to deliver training sessions on Zoom, we had to offer considerable support to course participants to help them join the courses and get used to attending training in this way. An additional challenge was that some partners had blocked Zoom on work laptops and so we had to support participants to join our courses using a browser. Delivering the training programme remotely has involved considerable input from Daksha Mistry and Jay Wylie-Board to ensure everything ran smoothly-this included one of them being present throughout the courses to be available to support any IT issues.
- 278 We are pleased that more people have attended our additional training this year and we have delivered more courses (114 again 30 last year). We can see falls in those using our elearning and attending core training during the year, which we attribute to the crisis working situations and staff being very stretched. Therefore, the heathy use of webcasts and brief bite sized learning have been a helpful complement. We have a pool of KRSCP local agency trainers and 25 stepped forward to provide training this year. This brings our safeguarding training back into their agency as well as providing a variety of trainers with local frontline experience.
- 279 We identified a gap in safeguarding training for volunteers, who came forward to assist our local agencies in high numbers locally during the lockdowns. So, we commissioned ME learning to set up a specific elearning module on safeguarding for volunteers at the beginning of the pandemic. This has been very popular and helped to give us assurance, as volunteers were often our eyes and ears in seeing vulnerable families in our community during the lockdowns.
- 280 By September 2020, we were offering a full safeguarding training programme and since establishing training delivery in this way, we have found an increase in attendance at our training courses and that we can deliver more courses, as we are not now restricted by venue availability and cost. However, because of the complexities of delivering training remotely we did deliver all our courses with reduced attendance numbers until December 2020.
- 281 Since the other platforms have now caught up with Zoom in terms of functionality we are now also offering training and other learning events on Microsoft Teams and Googlemeets, as well as Zoom. We also were able to deliver bespoke safeguarding training to schools,

Food Matters-a Richmond based charity, lone working training to the Leaving Care Team in AfC, and the Virtual School, for example.

#### Attendance data

The table below breaks down the attendance data for 2019-21 into quarters.

Core Training	Q1 April – June	Q2 July - Sept	Q3 Oct - Dec	Q4 Jan - Mar	Total
2019/20	294 + ME 565 Total = 860	196 + ME 632 Total = 828	329 + ME 705 Total = 1,034	285 + ME 613 Total = 898	1,104 + ME 2,515 Total = 3,619
2020/21	191 + ME 424 Total = 615	185 + ME 564 Total = 749	231 + ME 521 Total = 752	179 + ME 420 Total = 599	786 + ME 1,929 Total = 2,715

Additional Training	Q1 April - June	Q2 July - Sept	Q3 Oct - Dec	Q4 Jan - Mar	Total
2019/20	109	54	196	89	359
2020/21	118	78	155	190	541

282 We reviewed our offer and began to offer targeted safeguarding training support for volunteers by means of elearning, cartoons, pre-recorded webcasts and short films. This has led to new practice and developing videos which can be watched according to the individual's time pressures, such as about Think Family- a theme which arose from several Rapid Reviews. We recognise that interaction between partners is lost in solely online learning and so from January 2022 we are planning a blended model of training.

283 Through scrutiny of attendees, the group identified that increases in Justice agency and London Fire Brigade Participants were important, so they have targeted these groups and seen rises in delegates' attendance. As a Partnership Team we have also delivered bespoke training to different sectors on a wide range of topics; e.g., Richmond Mind Safeguarding Awareness Training, Westbury House School Inset, Police Safer Neighbourhood's Team training on exploitation, trafficking and modern day slavery; Kingston Music Service Inset and Level 2 Safeguarding Training Special Educational Needs & Disability Team.

#### Learning and Development impact

284 As a Partnership we consider in our Subgroup how effectively the new arrangements are promoting learning and outcomes for staff and children, and the Learning and Development Annual Report is considered each year by the SLG. The Subgroup seeks to measure impact on frontline practice and outcomes for children. Here are some examples of feedback from learning opportunities:

- It has given me more confidence in my role and I felt we were given more information on referrals and how it works.

- The course was very evenly balanced of practical, delivered information and course materials to read.
- This training has made me become more aware who may be vulnerable and why.
- The training met my need as it refreshed my understanding of topic.
- It was an excellent session, I learnt a lot of new terms regarding on-line safety and have been given plenty of documents/links to support my work with our adult learners and study programme learners
- This awareness is essential for everyone working with children.
- Well run, interesting, thought provoking course. Doesn't need to improve.
- It will help me improve my operational duties and increase my knowledge.

44 delegates attended CSE training during the year. All the delegates who responded, stated that the training course met its aims and that it was a good use of their time. Almost everyone described the training as Thought Provoking, or Reflective and Challenging.

One delegate said “the training will help me be more aware of the signs and circumstances of Criminal Exploitation and CSE; it helped me understand how to best react and how to help. It made me be more reflective about children's stories, how to approach a situation like this and what effects CE and CSE have on their life, mental health, physical and emotional development.”

80% uptake of available Contextual Safeguarding training/video places and evaluation outcomes report increased knowledge and confidence in participants.

An Early Help training webcast was developed January 2021 and shared widely with all partners to raise awareness – 1,441 views to March 31<sup>st</sup> 2021.

285 The Subgroup “owns” the Online Safety strategy, which was relaunched in November 2020, with the help of embedded learning from a Rapid Review in September. A short film was made to highlight the policy which has had 225 website hits since its relaunch. We saw a corresponding rise in online safety MARVE referrals follows in Quarter 4 2020-21, as evidence of its impact. In response to requests, early in the pandemic in 2020, we provided guidance for all schools on online learning and safety for staff and children- this will have had an impact for many local children.

### **Think Family**

Several KRSCP Rapid Reviews identified that adults' services mental health workers when working with adult members of the family did not see the children with regards to the impact of the parental mental illness on the child and safeguarding risks and the vulnerability of the children. It was felt that it would be effective to develop a webcast which included both adult and children's services concerns to raise awareness across both adults and children's services.

The webcast included a variety of professionals from both adults and children services and focussed on a include a discussion based on a case study which incorporated themes of adult mental ill health, domestic abuse and the impact of the Covid 19 pandemic. The discussion around the case study aimed to illustrated points at which professionals could identify vulnerabilities in the family and risk to children and points of intervention.

A short audio of a parent and child scenario was developed and this was followed with a scripted panel discussion which aimed to offer insight and understanding of both child and adult safeguarding issues and the importance of information sharing across all agencies and adult and children services.

286 Our Learning and Development Annual Report 2020-21 can be found here:  
<https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-krscp/subgroups-39/learning-and-development-subgroup-103.php>

During the forthcoming year, we plan to focus on measuring impact at the three months interval following training; developing our offers around Mental Health and Domestic Abuse with partners in both boroughs across Children's and Adults' Services, involving young people in the delivery of our training, and designing a Learning and Development passport.

### Conference – The Journey to Exclusion

287 The KRSCP hosted the Journey to School Exclusion Conference in January 2021. It was attended by 84 practitioners from Kingston and Richmond. See below some of the comments that people left about the day.

Amazing!  
Thank you.

Thank you, this was a really informative event with inspirational speakers.

The training was really insightful and thought provoking. I loved how young person centred it was and valued the different insights from colleagues in different professions who attended

Thanks so much everyone, really enjoyable day, wasn't long enough!  
Thank you for organising

Thank you, what a great and successful day!



- 288 The Conference was followed by a Learning Hub workshop which aimed to enable practitioners across different disciplines to work collaboratively and in partnership with families and young people to focus on early intervention of children who are at risk of school exclusion-28 practitioners attended. The session focussed on a video case study where an actor outlined 2 versions of what happened to him where in one scenario he was excluded from school and in the second scenario he was offered appropriate support. This highlighted the potential impact of positive multi agency intervention and enabled practitioner discussions.
- 289 Sarah Bennett has supported the Designated Professionals in the CCG run a Private Health Network which reaches out to independent school health professionals, Private GPs and Hospitals. The group has met remotely during the year and enabled practitioners to focus on emerging issues. Through the years, our learning has highlighted the important role of private health providers and we have wanted to embed them into our local safeguarding culture. Members of the group responded to an impact survey, which highlighted that the group had added value to their practice.

## Complaints, Concerns and Escalations

- 290 During the year, there have been no formal complaints to the KRSCP.

### Child Death Overview Panel (CDOP)

- 291 There is a statutory duty that all child deaths, expected and unexpected are independently reviewed and any learning identified and fed back into the system to improve outcomes for children and families. In September 2019, the CDOP (Child Death Overview Panel) moved from being an LSCB responsibility to the child death review partners, the CCG and Local Authority. South West London CDOP is a regional partnership across Croydon, Kingston, Merton, Richmond, Sutton, and Wandsworth. It is currently chaired by Gwen Kennedy, Director of Nursing Leadership and Quality for NHS England & Improvements, on an interim basis. The CDOP meets monthly. CDOP meetings were suspended in early 2020-2021 in the context of the coronavirus pandemic; however, it was possible to resume these from June 2020.
- 292 During 2020-21 across SWL CDOP, there were 80 child deaths notified and 78 child death reviews completed (these include deaths that occurred in 2020-21 or previous years). Of the reviews completed, 26 cases representing one third (33%) were completed in the six months completion requirement which is an improvement on the previous year.
- 293 14% of the deaths reviewed by across SWL during 2020-21 were found to have modifiable factors, defined as those by through which local or nationally achievable interventions could be modified to reduce the risk of future child deaths.
- 294 Of the deaths reviewed by SWL CDOP during 2020-21, 45% of children had a white background, 17% had a black background, 15% had an Asian background, 13 were of mixed ethnic background, and for a final 10% the ethnicity was not known/recorded.
- 295 18 of the child deaths reviewed during 2020-21 had required a Joint Agency Response – a process initiated where a child’s death is:

- Is or could be due to external causes;
- Is sudden, and there is no immediately apparent cause (including SUDIC);
- Where the initial circumstances raise any suspicions that the death may not have been natural; or,
- In the case of a stillbirth where no healthcare professional was in attendance.

296 Child Death Review Meetings (CDRMs) are now principally the responsibility of the local hospital trust where a child's death is confirmed. During 2020-21, Kingston Hospital NHS Foundation Trust held CDRMs in respect of 7 deaths (4 residents in Kingston & Richmond and 3 residents in other boroughs). The local CDR Coordinator also supported two additional CDRMs for trusts in boroughs outside Kingston and Richmond.

297 As at 31<sup>st</sup> March 2021 there were 65 open cases in the region. A detailed breakdown for Kingston and Richmond specifically during this period can be seen in the table below:

**Notifications, reviews and open cases in 2020-21.**

	<b>Notifications</b>	<b>Reviews</b>	<b>Open Cases</b>
<b>Kingston</b>	8	6	6
<b>Richmond</b>	12	9	13

298 As a result of local and national learning we have sought to assure the Partnership regarding the use of asthma and allergy plans in schools. During the year, 85 responses were received to the local survey around schools using asthma and allergy plans to support children affected by these conditions. Awareness has been raised in those schools for whom this is not consistent practice. This learning has been scrutinised by the Q&I Subgroup and will be presented by Your Healthcare to the Health and Safety Conference for schools in both boroughs in the autumn. The full CDOP Annual Report for the region 2020-21 can be found here: <https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-krscp/child-death-overview-panel-40.php>

299 During the forthcoming year, the SWL CDOP plans to:

- I. Continue to support the acute Hospitals to implement their local systems with improved joint working between local and specialist hospital panels to improve the quality of contributions from local Child Death Review Meetings.
- II. Reflect the regional footprint within reporting on child death reviews.
- III. Identify trends in child deaths in the South-West London area, to conduct themed reviews involving specialists on specific issues.
- IV. Implement a system of feedback of shared learning from Child Death Overview Panel meetings as part of the CDOP's contribution to the organizational response to child deaths in the integrated care system. This will be compatible with the integrated care system and upcoming National Patient Safety Strategy. The purpose of this is to support professionals to reflect on practice, and provide scope for improved collaborative learning, better health, and public safety provision.
- V. Define measures of effectiveness arising from implementation of actions from recommendations made from child death reviews.
- VI. Measure the effectiveness of support bereavement experience, and to continue to ensure all families are offered bereavement support in South-West London.
- VII. Improve feedback to families by way of notification of actions taken.
- VIII. Complete representation of panel membership with an Independent Chair, Designated Doctors, Neonatologist, and a Quality/Patient Safety Representative.
- IX. Consider the recruitment of a Lay Person to panel membership for input from the public on the Child Death Review Process.

## Communication

300 The Partnership relies on good communication at all levels, particularly through periods of change. The SLG quarterly meeting minutes are available redacted on our KRSCP website, and the Chair sends out a Partner letter after each meeting. We have an active Twitter account with 875 followers and produce monthly KRSCP newsletters with a distribution to 600 local partners; Tracey Welding publishes a termly Neglect Newsletter and Voluntary Sector and Faith Safeguarding newsletters and Lucy MacArthur sends a half termly DSL newsletter to all local schools and Early Years' settings. Chris Robson scrutinised our response as a Partnership to the pandemic and our Communications to Partners, coordinated by Sarah Bennett, in summer 2020. He found our Communications "excellent and well received" but recommended we focussed more on our Partnership branding and outreach, which we seek to do. Chris' Independent Scrutiny report can be found here: <https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-krscp/subgroups-39/quality-and-innovation-subgroup-102.php>

### Priorities 2020-22

301 In March 2020, following a consultation with local Partners, the SLG set priorities for the next two years for the Partnership with a golden thread throughout them all of diversity and anti-discrimination. They will continue to 2022.

- **Contextual Safeguarding – Lead Detective Superintendent Andrew Wadey**
- **Mental Health – Lead Fergus Keegan**
- **Working with parents with vulnerabilities, Think Family, Early Help – Lead Ian Dodds**

302 This report was presented to the Strategic Leadership Group and agreed on 14<sup>th</sup> October 2021. This report was then presented to the Partnership on 20<sup>th</sup> October 2021.

**Our Business Plan 2020-22 can be found here:**

[KRSCP Business Plan 2020-22](#)

## Appendix 1: Independent Scrutiny Professor Jenny Pearce

- 303 As set out in Working Together 2018, the role of independent scrutiny is to provide assurance in judging the effectiveness of multi-agency arrangements to safeguard and promote the welfare of all children in a local area, including arrangements to identify and review serious child safeguarding cases.
- 304 Whilst the decision on how best to implement a robust system of independent scrutiny is to be made locally, safeguarding partners should ensure that the scrutiny is objective, acts as a constructive critical friend and promotes reflection to drive continuous improvement.
- 305 The Independent Scrutineer should consider how effectively the arrangements are working for children and families as well as for practitioners, and how well the safeguarding partners are providing strong leadership and agree with the safeguarding partners how this will be reported.

### Executive Summary

- A. This Independent Scrutiny was commissioned to review Kingston and Richmond Safeguarding Children Arrangements (2020 to 2021) against the expectations outlined in Working Together to Safeguard Children (HMG 2018). It was a time limited, one off piece of work.
- B. Findings are outlined in the 'Kingston and Richmond Safeguarding Children Partnership; Independent Scrutiny Report' (September 2021). This report identifies KRSCP strengths, noting recommendations for continuing good practice and for addressing challenges. While some of these challenges are locally based, others reflect national problems and contexts, such as the changing landscape for health and social care provision and the management of the impact of Covid-19 on children, young people, families and service providers. The recommendations in this report should be understood within this context.
- C. The KRSCP has effective leadership arrangements compliant with Working Together 2018. The delegated leadership arrangements work well with good modelling at senior leadership level of joint multiagency partnership working. There are clear lines of communication to and from the Senior Leadership Group across the partnership, with examples of appropriate and efficient escalation of problems and problem solving activity. The KRSCP sub groups cover required focus on questions of Child and Adolescent Vulnerability; Local Learning and Review; Learning and Development; and Quality and Innovation. The co-chairing arrangements for these subgroups ensure that relevant leads from different agencies within the partnership meet regularly to share information and oversee multi-agency practice development. Core and relevant partners attendance at subgroup meetings has been affected by the additional demands on staff time emerging from Covid-19. This needs addressing through continued monitoring of staff attendance in the future.
- D. The report recommends that further work be done to ensure that review of progress of KRSCP activity takes place against the KRSCP priorities, with a particular focus on considering the impact of the work on outcomes for children. It is recommended that senior leads engage in a bi-annual review of progress of work activity against the KRSCP priorities and KRSCP business plan.

- E. The strategic leadership of the KRSCP could further link with other relevant Partnerships, Boards and Trusts to review activity on agreed priorities. In particular this includes the relevant Safeguarding Adult Boards for questions of transition from Children to Adult Services, and the Community Safety Partnerships for questions of Contextual Safeguarding.
- F. Some reoccurring problems were identified regarding some health staff engagement in Initial Health Assessments of children coming into care and of GP reporting into Child Protection Conferences. There were also suggestions that further connection is made between mental health services and services supporting children and young people who have problems with substance misuse. The report also noted that further activity could review the content of the MERLIN reports submitted by police to identify and assess reoccurring themes. The report recommends that the KRSCP address these questions in future work planning.
- G. The commissioning of services to work with children and young people is effective and strategic. There is further scope to look at the commissioning of accessible, young person friendly, sexual health services; to undertake a review to ensure that commissioners receive full information about the quality and accessibility of commissioned services; and for taking consideration of the reach of services into some faith communities and communities that may be marginalised from mainstream services.
- H. The large body of work addressing questions of racism, and the disproportionate representation of black African and black Caribbean children in some areas of work could be supported through creating a regular item on all KRSCP subgroup agendas on 'how we are addressing questions of disproportionality'.
- I. There is evidence of a substantial and impressive body of work underway to engage with 'Contextual Safeguarding' of children outside of the home. This could be enhanced through strategic connection with the private sector with further development of licencing arrangements.
- J. The KRSCP is engaged in a range of innovative activities with and for children and young people affected by safeguarding concerns. While this is taking place at a practice level, findings from the work do not appear to be communicating into assessment of KRSCP progress against priorities and into future priority setting. The scrutiny report makes some suggestions as to how the strategic engagement of children and young people in KRSCP activity could take place.
- K. There is evidence of a strong relationship between data collection and sharing, learning from deep dives, scrutiny, local and national reviews and the development of training and workforce development activity. This could be further developed by relevant subgroups undertaking thematic reviews of how local learning has impacted on practice and how learning from rapid reviews and serious incidents is being embedded across the partnership.
- L. In summary, there are excellent examples of work safeguarding children through KRSCP activities. Recommendations outlined in the scrutiny report aim to build on this good practice in the continuing aim to improve safeguarding of children and young people.

Jenny's full report can be found here:

<https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/about-kingston-lscb/subgroups-39/quality-assurance-subgroup-102.php>

## Appendix 2: KRSCP Team

Elisabeth Major Partnership Manager

Tracey Welding Deputy Partnership Manager

Daksha Mistry Learning & Development Manager

Sarah Bennett CDOP Coordinator / Coordinator

Lucy MacArthur Education Safeguarding Coordinator (term time)

Jay Wylie-Board Business Support

## Appendix 3: KRSCP Finances 2020-21

306 Partners provide financial and support in kind. The Metropolitan Police (MOPAC) figure is an agreed figure for London.

### KRSCP Income 2020-21

Agency	2020-21
AfC for Kingston and Richmond	48,500
Richmond Council	140,000
Kingston Council	100,000
Kingston & Richmond CCG (£18,000 for the CDOP post)	77,000
Metropolitan Police	10,000
London Fire Brigade	500
Probation	2,000
Cafcass	1,100
Training income	30,886
<b>Total</b>	<b>432,086</b>

### KRSCP expenditure 2020-21

Item	Actual
Staffing (inclusive of NI, pensions etc) KRSCP Team plus Independent Scrutineer*	325,597 (*10,200)
Training	82,865
Child Safeguarding Practice Reviews	6,950
Legal fees (SLLP)	5,000
Miscellaneous (website, hardware, clerking meetings, staff training, etc)	13,000
Communications	2,406
<b>Total</b>	<b>454,449</b>