



**Haringey Council**

<b>Report for:</b>	<b>CYPS Scrutiny Panel 27 February 2014</b>	<b>Item Number:</b>	
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<b>Title:</b>	<b>Multi-Agency Safeguarding Hub (MASH) and First Response Service Information Sharing – Outcome of Audit</b>
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<b>Report Authorised by:</b>	<i>LISA REDFERN</i> <b>Lisa Redfern, Director of Children's Services (Acting)</b>
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<b>Lead Officer:</b>	<b>Iain Low, Principal Social Worker</b>
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<b>Ward(s) affected: All</b>	<b>Report for Non Key Decision</b>
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**1. Describe the issue under consideration**

- 1.1 As previously reported to Scrutiny Panel in July 2013, following the *AB CD* judgement in March 2013, the Director of Children and Young People's Service commissioned an independent review of S47 Child Protection Investigations conducted between May 2011 and March 2013.

**2. Recommendations**

- 2.1 Members are asked to note the contents of the independent report by Skylakes attached as Appendix1 and the improvements introduced by the service.

**3. Background information**

- 3.1 The scope of the specification was to:
- Review the process and procedure followed and whether they follow agreed social work practice and procedure;
  - Review whether parental consent was sought to share information for 10% of the sample. If not, the reasons why and whether relevant records were kept of such decision;
  - Review the decisions made, in particular, on threshold and reasonableness of such decision; and



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- Review whether there were full written records of the enquiries and the outcomes and whether they comply with best social work practice and procedure.

3.2 Following a process to identify a suitably qualified organisation to carry out the work, Skylakes (the delivery arm of Sanctuary Health and Social Care Group) was awarded the contract.

3.3 A random sample of cases where children or young people had been subject to a S47 Child Protection investigation during the period May 2011 to March 2013 were identified from record held on Framework-i (Haringey’s electronic social care records system).

3.4 The report identifies a number of areas where practice needed to improve and the table below lays out the actions that have been taken throughout last year and our on-going improvements this year:

Issue Identified	Action Taken by the Service
Letters of acknowledgment to referers not available on file	<p>All referers are contacted by allocated social workers on receipt of the referrals by letter; email or telephone.</p> <p>Standards letters of acknowledgement are sent to all NHS Hospitals.</p>
Chronologies need to be in place on all files	<p>Significant improvement in practice in ensuring chronologies on all files (all cases from First Response transfer with a chronology).</p> <p>Service training on chronologies.</p> <p>‘Chronology Days’ in Safeguarding and Support to give practitioners protected time to ensure there are up to date chronologies on file.</p> <p>The Haringey Children and Family Assessment Protocol refers to chronologies as a mandatory activity within the assessment process.</p> <p>Practice Development Workshops reinforce the need for chronologies on file and how practitioners can use chronologies with parents(s).</p> <p>From 1 January 2014 – Practice Induction Days for new members of staff will focus on key areas of social work practice including chronologies.</p>



<p>Consent element needs to be mandatory within FWI</p>	<p>Consent is now a mandatory field in the following templates within the workflow:-</p> <ul style="list-style-type: none"> <li>• Contact</li> <li>• Referral</li> <li>• Strategy Meeting</li> </ul>
<p>Recording of management oversight setting out clear justification for sharing information without consent needs to be evidenced</p>	<p>Revised information and protocols for MASH published.</p> <p>CYPS Practice Directive issued to all practitioners and managers regarding information sharing.</p> <p>Reinforced through Service and Team meetings.</p> <p>From 1 January 2014 – Practice Induction Days for new members of staff will focus on key areas of social work practice including chronologies.</p>
<p>Evidence that consent was sought retrospectively</p>	<p>The change in practice and mandatory fields within the workflow (see above) ensures that practitioners do not seek consent from parent(s) retrospectively.</p>
<p>Recorded management over-sight of the conduct of the section 47 investigation</p>	<p>All managers are aware through written guidance and management meetings of the expectation that the section 47 process must have recorded management oversight through the strategy episode.</p>
<p>Detail of the process of the investigation needs to be recorded</p>	<p>The S47 document within the FWi workflow is to be separated from the Child and Family assessment and become a standalone document.</p> <p>This will support better management oversight and recording of S47.</p> <p>The Deputy Heads of Service undertake a monthly audit of the strategy episode to quality assure the recording.</p> <p>Through our QA Framework audits identify good practice and where practice does not meet our standards.</p>
<p>Delays in completing the S47 in 15 days</p>	<p>The S47 document within the FWi workflow is to be separated from the Child and Family assessment and become a standalone document.</p> <p>This will support better management oversight and recording of S47.</p>



	This change will allow for management information to be made available to managers to track S47 better.
Files did not evidence reference to Achieving Best Evidence (ABE) procedures, risk assessment tools, London LSCB procedures or WT13	<p>Additional training of 10 social workers in Achieving Best Evidence (ABE).</p> <p>Ensuing the correct tools are utilised when working with children and young people in certain situations e.g. Co-ordinated Action Against Domestic Abuse (CAADA) – for Domestic Violence</p> <p>In recording issues around consent, practitioners and managers are referring to and recording <i>Working Together 2013</i> and London LSCB Procedures.</p> <p>The Haringey Children and Family Assessment Protocol (Draft) will reference a range of tools for practitioners to access when carrying out assessments with children and young people in certain circumstances.</p>
Missing information on files Notes of interviews Case history Supervision direction Analysis of information following checks	<p>Monthly reminders are sent by Heads of Service as to the ongoing necessity for the FWi file to be kept up to date.</p> <p>.</p>

**3.5** The report also notes many strengths in the work undertaken by the service. There was a strong safeguarding ethos in terms of the timeliness of the response to reported concerns; there was also evidence of the needs of other children in the household being considered. Common Assessment Framework (CAF) assessments were generally of good quality and information gathering and the co-ordination of a response with the police is recorded in a timely fashion. Furthermore the audits on the later cases demonstrated clearer management oversight and specifically addressed the issue of consent and the process to be followed in undertaking the investigations in accordance with best practice guidelines. These improvements are also noted in the Independent Member’s report on Section 47 investigations in which she notes that the standard of work was excellent in general.

**3.6** Nonetheless, there still remain areas that require continued focus to deliver the uniform standard we require. This will be a key focus of our training and development programme and quality assurance processes this year.



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**Appendix 1**

**Skylakes Audit report**