

# *Tameside Safeguarding Children Partnership* **Annual Report**



**2021 - 2022**

# CONTENTS

**4**

Section 1  
**Introduction**

**6**

**SCRUTINIZING THE  
SAFEGUARDING  
CHILDREN  
PARTNERSHIP IN  
TAMESIDE**

**9**

Section 2  
**The Town  
of Tameside**

**10**

Section 3  
**Vulnerable  
Children in  
Tameside**

**13**

Section 4  
**Partnership Working**

• Tameside Children’s Service .....	13
• Early Years, Early Help and Neighbourhoods .....	15
• Education .....	19
• Greater Manchester Police – Tameside Division .....	21
• Tameside and Glossop Clinical Commissioning Group .....	24
• Tameside and Glossop Integrated Care NHS Foundation Trust ...	28
• Pennine Care NHS Foundation Trust .....	31
• Action Together .....	32

**34**  
Section 5  
**Partnership  
Structure**

**35**  
Section 6  
**Work to contribute to  
our Strategic Outcomes**

- Learning and Development  
(sub group and work stream contributions) ..35
- Quality Assurance and  
Performance Management ..... 36
- Complex Safeguarding ..... 38
- Learning Reviews ..... 40
- TSCP programme of learning 2021/22 ..... 41

**43**  
Section 7  
**Scrutiny**

**44**  
Section 8  
**Moving Forward**

# Section 1 - Introduction

Tameside Safeguarding Children Partnership (TSCP) are responsible for making sure that children of all ages and abilities get the help and protection that they need in Tameside. The Children and Social Work Act (2017) set out provisions led by 3 safeguarding partners (local authorities, chief officers of police and clinical commissioning groups (changed to Integrated Health Care Organisation July 22), and places a duty on those partners to make arrangements to work together with any relevant agencies for the purpose of safeguarding and promoting the welfare of children within the area. This is set out in the guidance [Working Together 2018](#)

Tameside Safeguarding Children Partnership (TSCP) brings together those Statutory Safeguarding Partners to work in close collaboration with relevant agencies to safeguard and promote the welfare of all children and young people in Tameside. This is achieved through the co-ordination of collaborative partnership activity at a local level to identify and respond to local safeguarding need, ensure local arrangements for the safeguarding of children are fit for purpose and provide scrutiny of, and challenge to, those arrangements where appropriate.

We are committed to putting children first, to empowering families to take good care of themselves and their children, and to providing professional, personalised services that recognise each family as unique and listen and respond to their individual circumstances. Running through the core of our priorities is the requirement to take account of the voice and lived experience of children in such a way that it influences assessment and planning at all levels of intervention. At the same time we challenge one another to do better, to learn and to aspire for more - much as we all do for our own children. The [Tameside-Safeguarding Arrangements](#) outline how we achieve that ambition and this Annual Report 2021/22 discusses how we as a Partnership have worked over the last 12 months to strive to achieve this work.

Our focus during 21/22 has been on the Partnership priorities:-

- **Trio of Risk & Vulnerability**  
At both local and national level, the toxic trio effects parental/carer ability to care of their children. TSCP completed case reviews during 2017-20 in which in the toxic trio have featured heavily; reducing toxic trio in the population, therefore, is a partnership priority, alongside mitigating risk to children whose lived experience is affected by these risk factors.
- **Transitions**  
Ensuring safeguarding is prioritised in any context of transition
- **Complex & Contextual Safeguarding –**  
TSCP will have the strategic oversight of the contribution of Partners, individually and collectively, to safeguard and protect children at risk from all forms of exploitation. TSCP strive for a Partnership approach to improve wellbeing, safety and outcomes for adolescents.

- **Trauma informed professional practice –**

Local reviews have informed TSCP response to identify this as priority. Across Tameside there are pockets of good practice where ACES and trauma informed practice build resilience and can improve outcomes for the individuals, families and communities.

TSCP will embrace this work to inform and contribute to the development of this area of work, to provide a workforce that is trauma informed and able to apply an ACE lens to ensure their practice is informed by trauma.

- **Early help offer and thresholds**

This remains a continuation of the work that TSCP have been involved in to date. TSCP are committed to gain assurance that there are clear pathways so that thresholds are:-

- understood
- consistently applied

And

- that there is effective multi-agency working in responding to early identified needs.

# SCRUTINIZING THE SAFEGUARDING CHILDREN PARTNERSHIP IN TAMESIDE (APRIL 2021 TO MARCH 2022) – Dr Henri Giller, Independent Chair of the Tameside Safeguarding Children Partnership



The new safeguarding arrangements, introduced by the Children and Social Work Act 2017 and Working Together to Safeguard Children 2018, require that they include provision for the scrutiny by an independent person of the effectiveness of the arrangements. This section of the report provides the scrutiny of the Independent Chair of the Tameside Partnership of the third working year of the new partnership arrangements. The criteria for scrutiny is that contained in the report “Six Steps for Independent Scrutiny” as updated by the national survey of what is currently being scrutinised, by who and how (Pearce, Stratton, Parker & Thorpe, 2022).

## **TSCP Leadership**

TSCP Partner Leads are clearly identified and accountable for TSCP activities safeguarding children. In addition to their participation in the Partnership Executive meetings, the Partner leads meet as a leadership group with the Independent Chair and the Partnership business manager on a monthly basis, to consider on-going strategic safeguarding priorities and operational matters arising that may impact upon those priorities. The leadership group also oversees the development of the agenda for quarterly Executive meetings. The Partnership leads are represented at allied boards and partnerships (the safeguarding adult board, community safety partnership and the health and wellbeing board) and report back to the Executive on safeguarding initiatives undertaken by these bodies and safeguarding issues emergent in their policy areas. Delegated representatives of the three statutory partners participate in relevant sub- groups and working groups of the Safeguarding Partnership. The structures of the Partnership were reviewed in this period and a revised body to oversee the operational functioning of the Partnership, the business group, was proposed. This became operational in May 2022.

## **Engagement of Relevant Agencies**

All relevant agencies are engaged with the safeguarding children partnership, are aware of local information sharing protocols and training initiatives and participate in partnership development events and reviews of strategic priorities. New members to the partnership are provided with induction materials by the business manager and a safeguarding newsletter is regularly circulated to representatives of relevant agencies informing them of local and national reviews and research and training and workforce development opportunities.



The level of engagement of an agency's staff during this period was critically affected by the on-going Covid 19 pandemic. This had significant impact with respect to staffing levels in children's social care, the police and with NHS providers. This situation impacted on the quoracy of

Safeguarding meetings, the timeliness of reviews and the delivery of appointments for safeguarding services. With respect to children's social care the pressures on staffing caused by Covid compounded an already critical position with respect to the recruitment and retention of qualified social workers. This situation was picked up by Ofsted in a visit to the local authority in April 2022. The statutory partners continued to meet regularly (as they had since the start of the pandemic) to oversee the pattern of disruption caused by the pandemic in safeguarding agencies and to initiate preventive or remedial actions as appropriate. As lockdown restrictions eased so the evolving local patterns of pressure on safeguarding demand were responded to with increasing agility (e.g. supporting vulnerable children back into schools).

In two instances major reviews of the existing engagement arrangements of agencies were on-going in the period. With respect to NHS staff, the impending introduction of the integrated care system (ICS) initiated a review of the roles and responsibilities of health staff with a safeguarding responsibility in the clinical commissioning group (CCG). This review continued into 2022-23. With respect to the police, a critical review of the GMP's functioning by HMICFRS led to a review of the deployment of safeguarding officers across the force. As a consequence, an increase in the number of designated police officers with safeguarding responsibilities deployed in Tameside was commenced in this period.

## **Outcomes for Children and Young People**

Listening to the voice of the child both from the perspective of quality assurance of safeguarding service delivery and to inform service development has been a feature of the Tameside arrangements since the inception of the revised partnership. The current annual report clearly illustrates that this approach continues to be employed across the statutory partners and their relevant contributor organisations. The report demonstrates that gleaning the views of young people is not restricted to those with only marginal safeguarding concerns but focuses on those with significant and complex needs that, if unattended, may lead them to be hard to reach.

## **Quality Assurance & Information Sharing**

The Quality Assurance Performance Group (QAPM) undertook a full programme of assurance exercises sampling agency activity on a multi-agency, bi-agency and single agency basis. The exercises demonstrated both strengths in current key practice areas but also opportunities for substantial improvements to take place. This was the case in topics such as neglect, children's mental health, sexual harmful behaviours and complex safeguarding. Programmes of development work were initiated in each of these areas in the period under review and changes in operational procedures proposed and/or initiated. These developments continue to be progressed in 2022-23.

## **Learning from Local & National Reviews & Research**

Learning reviews undertaken in this period related to issues of neglect, mental health (both child and parental), transitions, complex and contextual safeguarding, trauma informed practice and the pathways to access early help.

Recommendations for improving or enhancing service included:

- Revising the assessment tools used to identify neglect
- Improving access to mental health service for children and ensuring that parental mental health needs are identified along with a child's
- Initiating revisions to the transitions pathway
- Increasing the capacity of the complex safeguarding team
- Prioritising trauma informed practice as a key learning goal in the local safeguarding system

National research findings continue to be circulated and promoted through the partnership newsletter and inform the content of the partnership's training programme.

## **Multi-Agency Safeguarding Training & Workforce Development**

The commitment to a multi-agency training strategy continues to be a strength of the Tameside partnership. A substantial number of staff from across relevant agencies have engaged with the training opportunities available in the period and, as the pandemic eased, so the take up of face-to-face training increased. A range of training modules were delivered in the period – both core or foundation as well as modules specifically tailored to progress the strategic priorities of the partnership's business plan. The availability of a variety of training delivery mechanisms was sustained in the period and is planned to continue into 2022-23.

The challenge of having an adequate workforce to undertake safeguarding activities continues across all relevant agencies, and Tameside inevitably competes with the nine other GM boroughs to fill staffing vacancies. Consideration of how to “grow one's own” skilled workforce increasingly comes to the fore.



## Section 2 - The Town of Tameside

Tameside is a Metropolitan District within Greater Manchester. According to the latest Official National Statistics estimates contain **227,117** people of which **50,956** are **0-17 years of age**. It is classified as within the **20% most deprived areas in England** with **19% of children living in low income families** (Tameside Profile 2019). We have seen an increase in percentage of Free School Meal eligibility from **26% (2020/21)** to **29% (2021/22)**.

In Year 6, **21% of children are classified as obese** (Tameside Profile 2019).

	Cohort	% FSM	% SEN EHCP	% SEN Support
Tameside	37499	29%	4.10%	13.40%
Primary	22091	30%	2.20%	14.40%
Secondary	14567	26%	2.00%	12.10%
SEN/PRU	715	43%	99.40%	0.60%

Ofsted Ratings	Apr-20	Mar-21	Mar-22
Pupils in Good or Outstanding Schools - Secondary (%)	73%	66%	67%
Pupils in Good or Outstanding Schools - Primary (%)	89%	89%	91%
Pupils in Good or Outstanding Schools - Special (%)	71%	71%	72%

# Section 3 - Vulnerable Children in Tameside

## Children Social Care Demographics

	2017/18	2018/19	2019/20	2020/21	2021/22
CIN	1456	1440	1187	1258	1709
CP	468	363	366	388	377
Cared for Children (LAC)	625	653	703	682	665

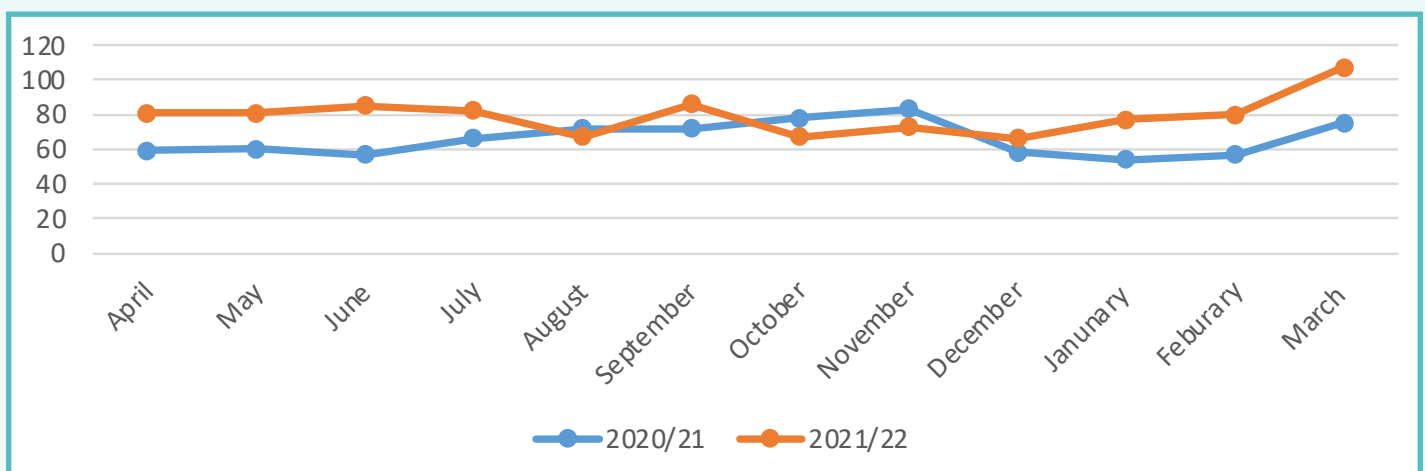
## Domestic Abuse Notifications from Police to Children Services

The number of Domestic abuse notifications has steadily increased in number plus the number of high risk notifications have also increased.

	2019/20	2020/21	2021/22
Overall	1858	2609	3222
High Risk	299	466	628

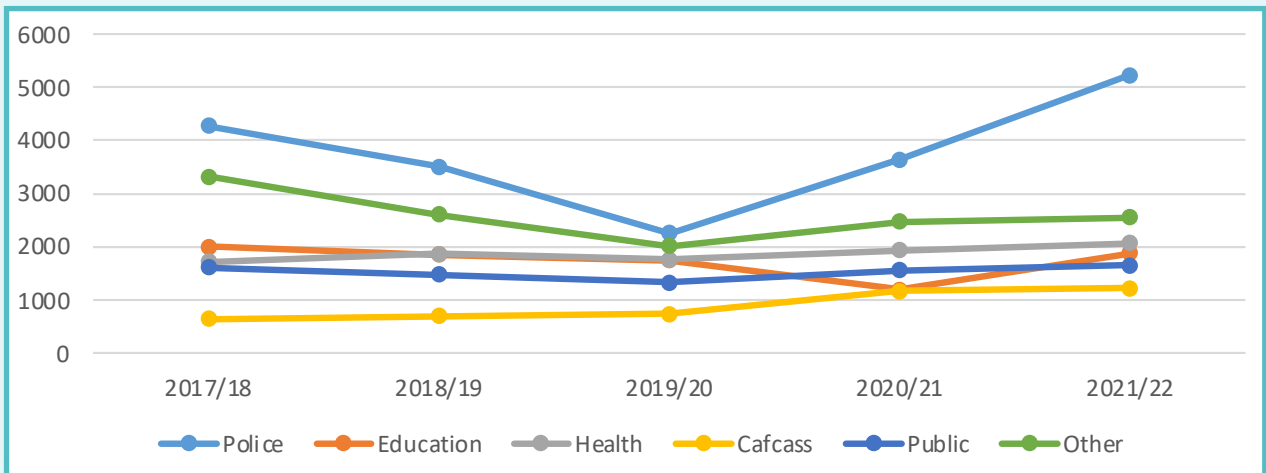
## Missing from Home

There is a **10% increase** of children missing from Home.



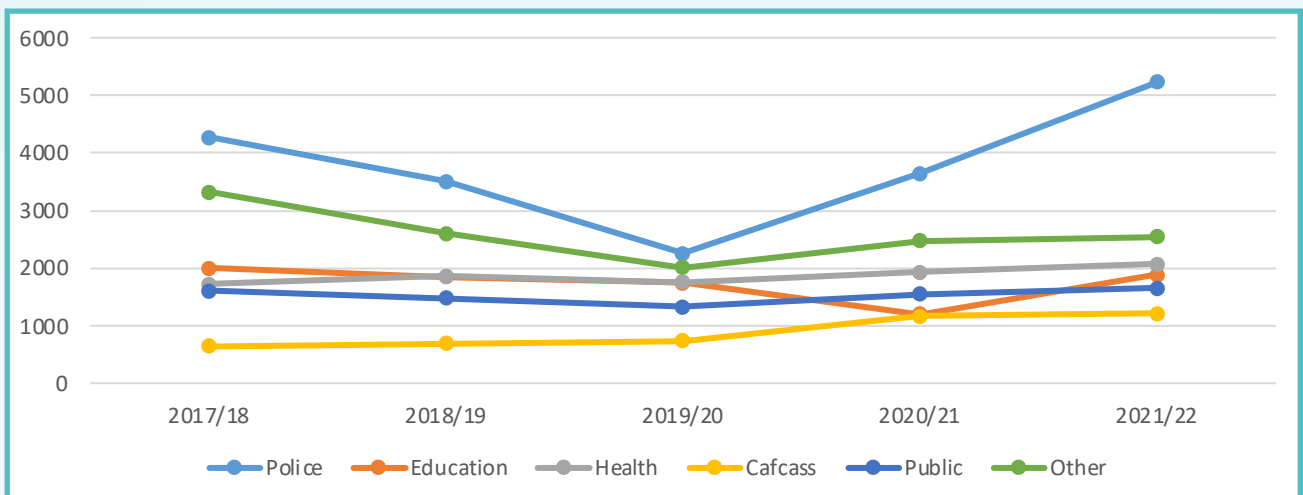
## Children Social Care Demographics

Last year safeguarding contacts were in excess of **14,000**

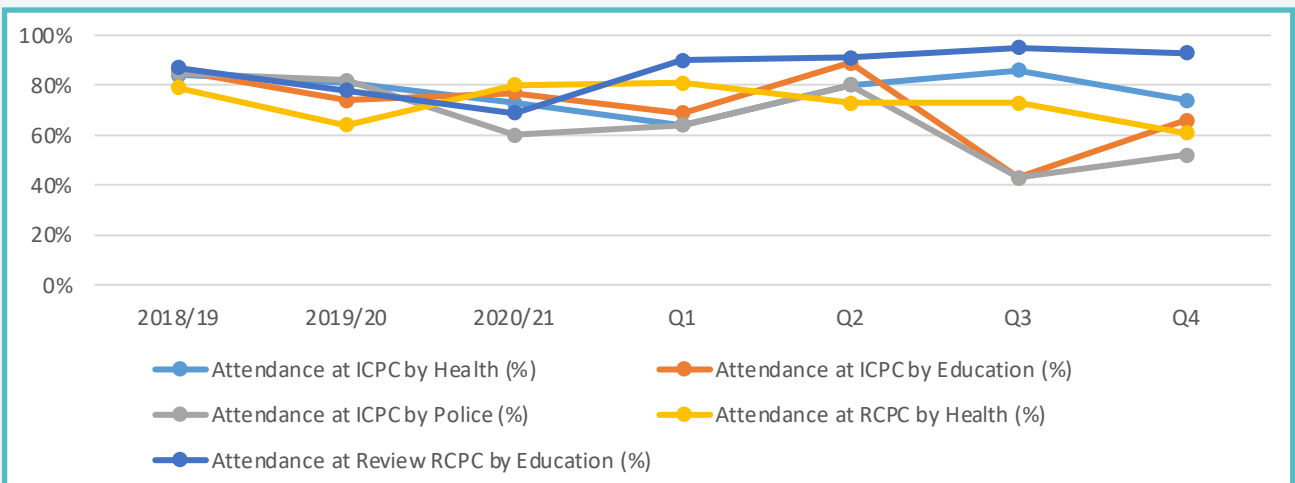


## Number of referrals to Children Services by Agencies

Referrals to Children Social Care in excess of **3,500**



## Agency attendance at meetings



## Timeliness of multiagency meetings

	2019/20	2020/21	Q1	Q2	Q3	Q4
Initial Child Protection Conferences held under 15 Working Days (%)	75.0%	81.0%	75.0%	64.0%	80.0%	82.0%
% of children subject to CP with stat visit within 6 weeks	93%	96%	94%	88%	87%	93%
Core groups held within timescales (%)	72%	67%	45%	60%	64%	80%
Child Protection Conference held within time scales (%)	96%	78%	87%	67%	66%	91%
Social work reports at Safeguarding unit 2 days before Child Protection Conference (%)	60%	38%	68%	53%	51%	29%
Percentage of CIN meeting with timelines	72%	56%	68%	61%	54%	58%
Number of C&F assessments completed within 45 days	77.0%	70.0%	79.0%	50.7%	62.0%	57.0%
Looked After Child Reviews in Timescale (%)	92%	77%	77%	62%	70%	88%

# Section 4 - Partnership Working

In tackling our priorities we have collaborated with other partnerships in Tameside:-

## **Tameside Community Safety Partnership**

## **Tameside Adults Safeguarding Partnership Board**

## **Health and Wellbeing Board**

Strong leadership, accountability and scrutiny is demonstrated through alignment of Business Plans and actions and processes that take account of Greater Manchester wide initiatives.

The work of the Partnership in response to these priorities also contributes to **TMBC Corporate Plan**, and the **Police and Crime Plan**

During 21/22, this collaboration has influenced changes in the Safeguarding Business Unit. We agreed a Service redesign in Feb 2022 to support this approach and work to embed this will continue into 22/23.

The Partnership are assured that during 21/22 work has been ongoing to demonstrate how effective these arrangements have been in practice.

## **Tameside Children's Services**



## **Key issues that have been the focus for 21/22**

- Providing a safe and responsive service during the epidemic and periods of lock down and virtual working.
- Increased demand with numbers of referrals to CSC
- Recruitment & Retention of Qualified Social Work Staff
- Lack of available agency social work staff to cover vacancies

## **What went well in 2021/22?**

### **Continuous Improvement Of Service Delivery**

- Co-located MASH & EHAP into the 3rd Floor T1
- £0.5M investment into creating a Signs of Safety delivery team.
- Extra resource to increase staffing within the MASH, Neighbourhood and Permanence Teams
- Created posts of ASYE Co-ordinator and PLO manager
- Developed a robust induction programme for all new starters with protected case load for initial 2 weeks.
- Social Workers in Schools project embedded within eight High Schools
- Qualified social workers and managers in the multi-agency safeguarding hub (MASH) undertake timely initial screening of children who are referred to children's social care. They identify those at immediate risk and refer them immediately for social work assessment.
- Child-focused decision-making and support ensure that many disabled children have their needs met through a range of responsive services that work well together. Services have been adapted to children's changing needs and clear and responsive decision-making is in place

## **Ensuring Compliance And Quality Of Safeguarding Arrangements**

- Monthly audit programme established with monthly Quality Assurance and Performance Management Meetings attended by Heads of Service & Service Unit Managers
- Introduced Practice Week Model
- Multi-agency audit program established
- Focused briefings with front line staff on key learning from Rapid Reviews & Practice Learning Reviews
- Worked with partners in practice to develop strengthened quality assurance processes across the frontline practice teams.

## **Response To Strategic Priorities And Emerging Need**

### **Neglect**

- Reviewed and relaunched Graded Care Profile to the Tameside Neglect Action Plan and staff training program rolled out
- Engaged and shared learning from the findings of the Tameside Poverty Truth Commission

### **Mental Health**

- The GM I-Thrive Framework has been rolled out across Tameside to frontline staff in a variety of practitioner forums via Early Help, Social Care and the Partnership. The model considers the current multi-agency system supporting Children and Young People's psychological and emotional wellbeing

### **Transitions**

- Impact of capacity with adult service to effectively transition plan into suitable services post 18 years

## **What were the major challenges / issues faced?**

- Significant pressures on recruitment and retention of suitably qualified social workers
- Sufficiency of placements including residential therapeutic placements for adolescents with significant and complex mental health needs.

## **What areas have been identified for improvements in 2022/23?**

- Improved retention and recruitment of qualified social work staff
- Strengthened Early Help offer to prevent escalation into statutory services
- Revised Multi-Agency Threshold Protocol

## **Predicted demand / challenges for next 12 months**

- Recruitment & Retention of qualified and experienced social workers
- Placement sufficiency
- Impact of Covid & Lockdown and complexity of Children's mental health having been out of school



# Early Years, Early Help and Neighbourhoods

## Key issues that have been the focus for 21/22

- Building back better from Lockdown
- Mental Health
- Develop parenting offer
- Domestic abuse
- Redesigning neglect documentation
- Developing intervention champions across teams
- Develop the EH offer to provide help and support at the earliest opportunity

## What went well in 2021/22?

### Continuous Improvement Of Service Delivery

Staff recruitment and retention across the service is a strength and alongside the robust staff induction allows us to have well established and skilled teams across Early Years, Early Help and Neighbourhoods.

Tameside's Parenting Offer strives to support families when it is needed most. We offer a range of courses and services to suit the needs of all parents and children in Tameside.

We have a robust and multi-agency parenting panel in place to ensure all referrals are screened thoroughly making sure the right courses are available to all.

The EHAP is an integral part of the 'front door' of Tameside's Children's Services and the identification of the right support for Children, Young People and Families at the right time to prevent further escalation of need/risk. Pathways developed from the EHAP allow families to receive timely support (within 5 working days) from the right service at the right time, including the introduction of Family Group Conference.

Team Around Approach has 72% of setting engaged and aims to empower Schools, PVI's, Colleges and families to access support much earlier for children & families and build relationships to ensure an effective and sustained change. This has led to an increase of partners completing ERALY Help Assessments across the borough.

Developing champion roles across the whole service has been successful in line with Evidence based practice to ensure interventions are timely and change is sustained within families.

TFT South and West have provided interventions to **506** Families (**1194** children/ Young People).

Breakdown of the **506** Families TFT North and East have completed interventions with over the past 12 Months.

- **376** Families supported at Early Help Threshold Level 2
- **130** Families support as part of C.I.N/ C.P plans
- **167** Families stepped down to Level 1
- **51** Multi- Agency Early Help Panels have taken place, discussing 371 families.
- **21** Families have been supported by TFT following Team Around the School

TFT South and West have provided interventions to **530** Families (**1259** children/ Young People).

Breakdown of the **530** Families TFT South and West have completed interventions with over the past 12 Months.

- **356** Families supported at Early Help Threshold Level 2
- **174** Families support as part of C.I.N/ C.P plans
- **51** Multi- Agency Early Help Panels have taken place, discussing 368 families.
- **27** Families have been supported by TFT following Team Around the School.

Better working relationships with CSC step-downs in relation to Step-downs, CIN interventions and the request of duty to ensure family's needs are responding too in a timely manner. The Top interventions requested from Panel and Children Social Care are around Parenting, behaviour management and mental health issues.

The development of SEND FIWs within each TFT team to support with parentings, behaviour management to support family stability.

### **Ensuring Compliance And Quality Of Safeguarding Arrangements**

Regular audit activity as well as team sessions on all 7 minute briefings ensure all opportunities to develop and improve practice takes place.

All staff have access to all training offered i.e. EHA, Tameside Neglect Action Plan, Eco Mapping, Professional Curiosity and analytical overview including changes/additions to workforce development are made to meet family's changing needs and current needs.

All teams work to a set of practice standards as well as the policies and procedures relevant to their individual roles.

We have recently taken part in Practice week both having practice observed as well as observing that of other teams.

Feedback from Practice Week: Tania Brown from TFT South

*'Abby*

*I just wanted to let you know I spoke to Jane this morning and her feedback about you was amazing*

*She said she had not had a good experience with previous workers but working with you has been really good and very different. She said you are approachable, supportive and understanding. One of the things she said has made a difference is contact with you, you always return her calls when you are free and always on the same day. She commented that if you are ever running late you always ring and let her know and she has found this really helpful as she is not left waiting not knowing if you will turn up or not.*

*She said you have been really understanding about her work commitments and have arranged meetings outside her working hours which has been really helpful to her.*

*You have shared plans with her and have been amenable to change details when asked and prior to sharing with others or in meetings*

*When asked what she would change about how you work with her she couldn't think of anything at all*

*She described you as professional and organised and passionate about your work*

*In the questions she scored everyone a TEN*

*This feedback from her is so good I just wanted to share it with you and your managers and say well done- it was lovely to speak to a parent who was being so positive about you and the service you provide and the difference you are making to her family*

*Take care and thank you for working with me through practice week*

*Tania'*

## **Response To Strategic Priorities And Emerging Need**

### **Neglect**

We have redesigned and developed the TNAP and screening tool to ensure we include family's changing needs and contextual risks that were not included within the GCP – online safety, Obesity, rooms in each house etc.

This was co designed and produced through multi-agency task and finish groups for the 4 sections but also the development of the new section – Parenting capacity to ensure that we understand the parentings ability to change and sustain change. We have identified multi agency champions within areas to roll out the TNAPs and TNAP. The Neglect strategy has been refreshed and is now being mandatory to complete in EHM and being developed within LCS.

### **Mental Health**

We now have the FITS team co-located with EH providing consultation and training to enhance the existing skills of the workforce to become trauma informed with the aim of embedding trauma informed practice across children's services.

We continue to work using the THRIVE model and have the SPOA co located with EHAP and MASH with regular meeting and discussion on referrals to ensure all YP receive a service appropriate for their need.

### **Trio of Risk & Vulnerability**

We continue to ensure all staff are trained within each of these areas to ensure that the needs of all children are identified and met, we know that there is a clear link between the toxic trio and an increased risk of abuse and neglect in children and young people.

### **Transitions**

We do work around transition from PVI into school through Portage, by way of support and information sharing as a minimum

Work being started on 16 – 18 year old young carers to support transition to adult services

We provide support for schools/families to ensure robust transition of EHA between settings and within exclusions from education.

## **Complex & Contextual Safeguarding –**

To ensure we identify and provide interventions at the earliest opportunity to keep young people safe, we have developed the following:

- Tameside Early Help Child at Risk of Exploitation practice standards
- Tameside Child at Risk of exploitation Guidance
- Tameside Pre-screening tool
- Tameside Child at Risk of exploitation tool kit

This tool kit has been devised for professionals to use with young people to help open up and have discussions around safety and risky situations whilst also giving some hints to some safer situations. Risk is an essential component of a balanced childhood, young people need to understand what risk means and that being in risky situations can lead to something unpleasant might happening. The idea behind this toolkit is that it gives young people information about risky situations. It also provides some hints as to what might constitute safer situations. It also allows professionals to raise issues of safety with young people in a way, which is non-accusatory. Completing an ecomap alongside the tool kit would offer more understanding of the young person's family, friendship and community relationships. The different coloured sections address different areas. Historic concerns are considered as it has noted within rapid reviews the importance of taking into consideration past concerns.

### **Trauma informed professional practice**

We now have the FITS team co-located with EH providing consultation and training to enhance the existing skills of the workforce to become trauma informed with the aim of embedding trauma informed practice across children's services.

All teams use eco maps and cultural genograms to understand past history and the TNAP includes parenting capacity to understand previous trauma and ACES of the parent.

Trauma informed practice is a golden thread through all area of our service

### **Early help offer and thresholds**

The service has 3 key areas and teams that offer range of targeted and universal services, all this can be found on the EH website

These are a range of Early Years activities and pathways through children centre, portage, crèche and Outreach

Early Help support and evidence based interventions for children, young people and families through Tameside Families Together, Edge of Care, Special Guardianship team, Child Protection FIW, Family Time Centre, Family Group Conference, and SEND FIWs

Our EH Neighbourhood offer through the Early Help Access Point, Families Information Service, Neighbourhood Co-ordinators, Early Help Assessment advisors, Parenting coordinators, STARS team and Young Carers.

There is currently a review of the Threshold document

## What were the major challenges / issues faced?

- Impact of lockdown on all services
- Capacity of partners and their engagement and commitment to EH through attending meeting. Being represented at panels, non-attendance at TAS etc.
- Police referrals and the appropriateness and timeliness of these
- Cost of living for staff and families, this is continuing to impact and will only get worse
- Recruitment to some vacancies by way of few applicants and/or not the right applicants

## What areas have been identified for improvements in 2022/23?

- Data – to work to improve the EHM to allow the right data to be extracted
- Thresholds – to review the thresholds document
- EHA – to finalise the EHA document and supporting guidance and tools in response to the pilot and feedback from partners.
- CRE – to finalise the documents and launch this with partners and within Childrens Service
- TNAP – gather data and continue to develop the Neglect steering group and champions roles
- To reduce demand coming in through the front door to include a relaunch of EH neighbourhood offer to include roles and processes
- Development of the SEND offer through EY, family intervention and Active

## Predicted demand / challenges for next 12 months

- Cost of living for staff and families leading to increase in demand on services re MH, financial hardship, foodbanks etc.
- Introduction of regressions check in SF
- More demand coming in across the service
- Continued capacity of partners and their engagement and commitment to EH

## Education

### Key issues that have been the focus for 21/22

- Peer on Peer abuse
- On line safety
- neglect

### What has gone well?

#### **Continuous Improvement Of Service Delivery**

Having a dedicated person representing education sitting in MASH, Education safeguarding support officer Lisa Fox. This has really enhanced the working relationship between MASH and schools and the gathering of information to be considered when MASH are assessing has been much more timely from schools.

#### **Ensuring Compliance And Quality Of Safeguarding Arrangements**

Section 175 audits were updated by Ian Webb, TSCP QA officer, in line with Keeping Children Safe in Education statutory guidance 2021 these were sent out to all schools and returns collated by TSCP

In order for schools to meet the statutory guidance in keeping Children safe in Education 2021 and the DFE Sexual violence and sexual harassment between children in schools and colleges guidance; training was commissioned from Safeguarding Network. 2 half-day sessions were arranged and attendance was really good. The training gave staff in schools the tools to be able to have robust policies and to be able to recognise and deal with this type of abuse.

Following the campaign “everyone’s invited” and the subsequent review by OFSTED of sexual violence and harassment in schools a report was presented to TSCP executive board with assurances of how we were supporting schools to meet the recommendations

## Response To Strategic Priorities And Emerging Need

### **Neglect**

Schools were consulted about the new neglect strategy and the Tameside Neglect Action plans. Each school identified a neglect lead and training and briefing sessions were provided by early help, these were very well attended and schools really valued being included in the consultation and their views being listened to and acted on

### **Mental Health**

Termly network meetings have been held with DSL in schools. Guest speakers have included KOOTH, TOG mind and CAMHS who have been able to update schools on what support they can offer, referral pathways etc. This is ongoing and these services attend the termly meetings to provide updates for staff in schools

We have continued to work with Stone wall , digital safeguarding who have briefed staff on current on line trends such as children and body image, viewing pornography and the impact this can have on children’s mental health

### **Trio of Risk & Vulnerability**

There have been some issues with operation Encompass – when the police have not notified a school that there has been an incident of domestic abuse- this is being raised to the police each time the LA are made aware this has been the case for them to take up with their staff

### **Transitions**

Schools are predominately involved in transitions at certain stages of a child’s life when they move from nursery to primary school, primary to secondary, secondary to college and also when the child changes school advice has been disseminated from education welfare and also guidance in Keeping Children Safe in Education from a safeguarding perspective, transfer of CP files

### **Complex & Contextual Safeguarding**

Staff from the complex safeguarding team provided a number of virtual briefing sessions for staff in schools and also an evening session was provided for school governors. The sessions covered what to look for, vulnerabilities, risks and what to do if it was suspected that a child was at risk. Training was also provided through TSCP in relation to complex safeguarding

### **Trauma informed professional practice**

This will be addressed in 2022/23



## Early help offer and thresholds

Schools engage with Team around the school and also with neighbourhood. They have a named lead in early help, early help advisor and neighbourhood co-ordinator. They can access Early help access point and MASH for advice. Early help have a regular slot on the network meetings to keep schools up to date on support they can offer

## What were the major challenges?

Many briefing sessions and training courses have been held virtually, some like the network will continue to do so. Whilst this have proved popular with attendees it can be hard to gage if we have the full attention of people in the meetings

## What areas have been identified for improvement for 22/23?

Use of dedicated school safeguarding email addresses to ensure that more than one person receives notifications of meetings, requests for information etc.

## Predicted Demand and Challenges for 22/23?

High numbers of children needing support either at early help or higher levels of need staff in schools already being stretched with case loads

## Greater Manchester Police – Tameside Division



## Key issues that have been the focus for 21/22

- GMP has gone through significant strategic change during 2021/22 'plan on a page'
- Respond to incident and emergencies.
- Investigate and solve crime.
- Prevent and reduce crime, harm and ASB.
- Deliver an outstanding service.
- Build trust and confidence

## What went well in 2021/22?

### Continuous Improvement Of Service Delivery.

Police at Tameside have drastically improved our response times for emergency calls. Tameside current 52-week average is 82.4% with week-on-week improvements current week as of 09/10/2022 attendance is 92% of all our emergency calls (G1) within the national guidelines.

Solved crime is continuing to improve with a focus on child protection offences and violence committed against women and girls.

Tameside has the highest solved outcome rate in the GM area at 9.2% against a GMP average of 8%.

In September 2022 Tameside implemented a 'prevention hub'. This has been a commitment of additional police resources including a dedicated Sergeant and Inspector leading this team. The purpose of this multi-agency team is to reduce demand on all partner agencies to problem solve and prevent future demand.

## **Ensuring Compliance And Quality Of Safeguarding Arrangements**

Since the Ofsted focus visit in April 2022 there has been significant improvement to ensure there is compliance with our statutory obligations under 'working together 2018'. GMP have implemented local processes to track attendance at meetings and quality check the information that is being shared at the meetings to safeguard children. Tameside have invested in an additional Detective Inspector to directly manage the MASH and safeguarding partnership arrangements. Tameside have maintained a Detective Inspector to directly supervise child protection investigation, therefore quality assuring timely progress and positive outcomes for victims .

GMP does record the Voice of the Child when they attend domestic abuse incidents. This gives children the opportunity to talk about their experiences and how domestic abuse is affecting them in the home. GMP also refer all domestic abuse incidents involving children to Schools through the Op Encompass process which allows Schools to pick up further experiences of children which can then be later fed back to GMP by partner agencies. Officers responding to incidents provide safety advice to children in various formats including providing internet safety advice when online concerns have been raised, including those that arise from social media and messenger formats. Sometimes this may result in additional work by specialist teams such as the Complex Safeguarding Hub who will undertake CSE / CCE work with the child.

On other occasions this may result in additional one on one work with the child, those with parental responsibility and a Social Worker or through referral to Early Help. This will be documented in the DAB / CAP / Crime write-ups. Safety plans are completed with children when joint visits are undertaken by Children's Services and Police. This involves giving children information and advice about how to keep safe. This can be verbally, through referral to other support services or through advice on voluntary organisations which assist with keeping children safe. Actions take into consideration the needs and feelings of the children concerned. This will be documented in the DAB / CAP / Crime write-ups.

When Missing Children are returned home, a safe and well check is completed with them. This will explore safety considerations with the child and their views will be considered when completing this. In some circumstances this might result in the recording of a CAP for additional support. This will be documented on the Missing Report and any linked CAPs. When officers take children into Police Protection, they are required to seek the views of the children (where able to) in the decision making about what they would like to happen. This involves the child in the safety planning process. This will be documented on the Police Protection paperwork.

PIPPA assessments are conducted with vulnerable children prior to them being video interviewed about matters. This process is designed to have the child's best interests at heart and during it information is often provided to children about how to feel safe. It is also an important rapport building process with children so that the officer is better able to take their wishes and feelings into account when making decisions about next steps. The type and format of this will be determined by the age and capability of the child in question and will be assessed by the specialist trained officer. This will be documented in the officer's interview plan / report. GMP does get feedback from partner agencies in relation to children views. This feedback is used to inform and improve our practices. Children's Services obtain feedback from children and they pass this onto GMP on a regular basis so that we can make sure that the children's voice informs our practice.

Officers and staff have undergone multi-agency training, trauma informed practice and other children focused training practices to upskill our officers and staff in how they respond to incidents involving children. Escalations are sometimes raised by partner agencies regarding a response to an incident or investigation. This is welcome feedback and acts as a check and balances practice.

When escalations are raised, this is reviewed and any learning is fed back to teams so that learning can be put into place. This is often documented in email format in response to the escalation / comment / complaint, verbally to those teams and individuals involved and sometimes results in additional training / CPD or inputs to raise awareness / amend practice. These act as case audits

## Response To Strategic Priorities And Emerging Need

### **Neglect**

GMP/Tameside have had a focus on child neglect, specifically neglect stemming from domestic abuse and the impact this has on children. Officers are taking positive action and arresting offenders when attending domestic incidents (where applicable) for child neglect. Child neglect awareness training is delivered to all front line responders and reiterated at daily management briefings.

### **Mental Health**

GMP continue to deliver a high level of service for those with mental health needs. There has been work with Tameside health providers to improve the pathway for those detained under the mental health act.

### **Trio of Risk & Vulnerability**

GMP are in the process of delivering DA matters training with Safe Lives. This will be delivered to all front-line police officers. Within that training there is specific emphasis on the trio of risk. Tameside MASH officers review all referral submitted and apply the trio of risk whilst triaging reports and refer/escalate to partner agencies where required.

### **Complex & Contextual Safeguarding**

Tameside police are leading the way with our response to complex and contextual safeguarding. Tameside have a dedicated Child Criminal Exploitation unit led by a Detective Sergeant. This team are trailblazers for GMP and achieving outstanding results of diverting children away from crime, as well as achieving successful prosecutions for modern day slavery offences. This unit work closely within a multi-agency arrangement within the complex safeguarding team. Tameside has also committed resources to focus of criminal sexual exploitation; a separate Detective Sergeant leads a team of officers specifically focussed on children that are being sexually exploited. The CSE team work closely with the complex safeguarding team.

### **Trauma informed professional practice**

Working within safeguarding it is important that we recognise the impact and nature plus regularity of incidents that cause trauma to our staff. GMP/Tameside are a learning organisation and ensure that we have regular debriefing reviews to understand what worked well and where improvements are required. We regularly use the TRIM process to help officers manage traumatic incidents.

### **Early help offer and thresholds**

GMP contribute, where possible and necessary to early help offers. This is covered in safeguarding children training. Staff are also able to seek advice on thresholds through the MASH police team.

## What were the major challenges / issues faced?

GMP were placed into special measures. As such the new Chief Constable had to make significant cultural changes to working practices. A significant challenge for GMP in this period was trying to increase/recruit police officer and police staffing numbers. As we increased the staffing numbers it was recognised that inexperience of officers that were dealing with critical matters. As we've changed the culture of taking positive action has increased the amount of retained workload and pressures within the criminal justice system.

## What areas have been identified for improvements in 2022/23?

- Building performance momentum
- Instilling pride and effectiveness in our work
- Overcoming inexperience with a learning environment

## Predicted demand / challenges for next 12 months

- There are no exceptional predicted demands other than the year on year's demands of the public.
- Our challenge is to re-establish GMP as giants within policing. GMP have made significant improvements in the last year. We are seeing green shoots of operational improvement across all areas and can already evidence substantially better results. We have a challenge to continue to recruit and retain our workforce. The challenge is to deliver on GMP being the most improved police service in the UK.

## Tameside and Glossop Clinical Commissioning Group



## Key issues that have been the focus for 21/22

On July 1st 2022, , NHS Tameside & Glossop CCG ceased to operate, statutory functions and responsibilities of CCGs transferred to a new statutory NHS body called Greater Manchester NHS Integrated Care (GM NHS) replacing 10 CCGs in GM. This new organisation, overseen by a Board, is in charge of the NHS money and making sure services are in place to put plans into action and is part of the wider system - GM Integrated Care Partnership. The partnership operates at three levels: neighbourhood, locality and Greater Manchester and will have a single vision and strategy. We have been working hard to ensure that NHS safeguarding functions transfer safely to GM NHS ensuring that the locality teams stay connected to the safeguarding partnership arrangements and priorities.

## What has gone well?

### **Continuous Improvement Of Service Delivery**

We continue to engage with safeguarding partnership boards through the work of the learning improvement and accountability groups to disseminate and embed learning from reviews and share good practice. The Safeguarding Team leads the co-ordination and contribution of health providers in reviews working with clinical areas to identify any learning, generating actions to strengthen practice and improvements. Learning is incorporated into training, awareness raising and communications.

We have developed a Primary Care Safeguarding Snippet Sessions alongside longer GP leads meetings and increased the number of sessions over the year , topics include:

- Change Grow Live, alcohol and drug abuse.
- Medicines Management team on Covert Medication
- Weight Management and Child Neglect.
- Alcohol exposed pregnancies, and an update on
  - Adult safeguarding
  - Domestic Abuse act.
  - Self-harm pathway
  - Sharing learning from drug related deaths panel
  - GP specialist trainees on all aspects of safeguarding
- TARGET session (regular GP education session) on FII and Perplexing Presentations and
- The NHS recognise the benefits to working in partnership with people and communities, It means better decisions about service changes and how money is spent, It supports collaborative and meaningful partnerships that start with people and focus on what really matters to our communities. We have been working with CYP and families in the borough to support integration and personalisation of care and support that addresses health inequalities and improves quality care.
- The new OKE Navigator Service has provided 19 workshops so far this year, with topics based on feedback and trends coming through for advice.
- Active Tameside deliver part of the SEND Family Support offer with Early Help, and through listening to families and young people they have developed new activity sessions such as Dungeons and Dragons, and also have launched a SEND Youth Council to enable children to shape provision in the future.
- The ADHD/ASC pathway acceptance letter has been coproduced with families in the Parent Care Forum to feel more welcoming and informative to parents.
- Community Hive was co-produced from inception which was launched December 2021, TOG Mind also have the HOPE co-production group that are continuing to support development and the Hear our stories website. Hear our Stories is a co-produced project created by young people to share their personal stories and experiences of mental health

### **Ensuring Compliance And Quality Of Safeguarding Arrangements**

Arrangements for safeguarding assurance for CCG commissioned services and providers includes annual self-assessment with compliance against the Greater Manchester Safeguarding Contractual Standards Tool, assurance visits and quality reports, Section 11 Audit, and attendance at provider safeguarding performance and operational committees. Assurance is a continuous cycle and will continue into 22/23.

We have contributed to multi agency audit throughout the year.

## **Response To Strategic Priorities And Emerging Need**

### **Neglect**

The CCG contributed to the review of the current Tameside graded care profile and increased uptake of use. Neglect champions have been identified in the health provider organisations. Further work is ongoing to review the children's neglect strategy.



## **Mental Health**

Following a capacity and demand review GM MHS – Tameside has provided additional investment to CAMHS and the neuro-developmental pathway. This resource will be used to recruit new staff to provide additional capacity to enable delivery of identified needs and alleviate the huge pressures on waiting lists. A mobilisation plan is in place that is also looking at areas such as accuracy and processes around data and admin for example.

We have increased the resource in the dedicated Cared For Children Psychology Team and have worked with partners to update the service offer to include bespoke training for in house residential staff, increase consultation clinics available to professionals and increased direct work with Cared for Children.

Community Mental Health offer was launched and increased access into locality bases, working with CAMHS single point of access. There is a Co-located single point of access with early help and safeguarding to improve joint working and referral flow – no wrong door to get the right support. Mental Health Support Team in schools mobilised in 18 settings and planned to double in 22/23 to increase early intervention and access to mental health for young people. We have expanded the commissioned online of service offer with Kooth and Qwell, for age 10+. The Worry Wizard for earliest messages around self-regulation and emotional wellbeing

## **Trio of Risk & Vulnerability**

GM NHS Tameside have supported the work of the domestic abuse strategic plan. We have contribute to the strategic and operational groups to ensure health partners support the work to improve DA services in Tameside. Have contributed to the DA workforce training offer and workforce surveys.

We have worked with commissioned providers to ensure procedures are in place to recognise and respond to support victims of domestic abuse. GM NHS has secured funding for each locality to improve identification, referral and support of victims of DV in primary care – in Tameside we have commissioned a three year IRIS programme in primary care.

We continue to contribute to the Domestic Homicide Review (DHR) process by ensuring that individual management reviews are completed either as a direct author or through panel representation.

## **Transitions**

We have Increased awareness and understanding of neurodiversity for professionals working with CYP through training programme

GM NHS Tameside Individualised CYP Commissioner has established a multi-agency transitions panel to review and support timely packages of care to ensure CY and professionals understand and continue to meet CYP needs through various transition points

GM NHS Tameside have identified a lead commissioner with responsibility for Transitions. Raised the profile of preparing for adulthood and transitions who are at risk of complex safeguarding



## **Complex & Contextual Safeguarding**

GM NHS Tameside commission a full time complex safeguarding nurse within the complex safeguarding team. This role is co-located with the CST however and provided by Tameside & Glossop ICFT.

The aim of the role is to coordinate effective health provision to meet health needs, the role has made improvements to the communication between health professionals and providers. A focus has been to develop pathways and fast track to services for vulnerable young people. There are improved links with sexual health, universal services and primary care.

GM NHS has recruited a health practitioner to support the GM complex safeguarding peer review schedule. We have been working with the GM hub to develop a health data set to contribute to the insights and impact framework.

## **Trauma informed professional practice**

We have coordinated the GM PACES and trauma responsive training plan to ensure Tameside workforce have access to training to support this priority. In addition to the GM training the Family Intervention and Therapy Service to support CYP on the edge of care with a history of ACEs and have provided bespoke training to EH and CSC teams.

## **Early help offer and thresholds**

We have Invested in a Health Navigator Service that will provide out of hours support to families waiting for services or who are no longer needing health services but need that extra support.

Family Support Offer for families who may have difficulties with emerging neurodiversity, who may or may not be on a diagnostic pathway but who may need additional peer support, help with strategies or additional services input.

Awareness sessions have been held for schools and General Practice on the Co-located SPOA – safeguarding, early help and mental health.

Mencap are running a 2 year project in Tameside to listen to families with under 5's to develop a peer support offer and parenting programme. They are currently engaging in rich discussions with families that will help us with commissioning plans in future.

## **What were the major challenges?**

- Health and social care act – transition of functions to new NHS body
- Demand and capacity , recovery from Covid and acute pressures across health and wider safeguarding system
- Turnover of staffing across partnership organisations- start again syndrome

## **What areas have been identified for improvement for 22/23?**

- Development of a local strategy/vision for ACES and trauma responsive workforce
- Increased awareness around identifying young people earlier before crisis, especially those with LD/A and those cared for on the edge of care
- Continue developments with partners for an intensive support offer with the 'Ealing' model for LD/A, and additional support with the Barnados Keyworker, to prevent crisis situations earlier.
- Continue recruitment and mobilise all CAMHS pathways to age 18.

## Predicted Demand and Challenges for 22/23?

- Recruitment – national issues well documented affecting NHS staffing. Locality mental health, 0-19's and paediatrician recruitment particularly difficult.
- Increased waiting times across health service
- Increase in demand at all levels.
- Increased complexities in child and family presentations - either new or exacerbated.
- Supporting Ofsted improvement plan

## Tameside and Glossop Integrated Care NHS Foundation Trust



We have continued to promote, create and ensure safeguarding is our everyday business, culture and whole organisational approach that is firmly embedded within the wider duties and all areas and activities of the Trust.

Ongoing development of the Complex Safeguarding Agenda across the Trust in response to emerging themes and priorities.

## What went well in 2021/22?

### Continuous Improvement Of Service Delivery

- Launched our integrated safeguarding newsletter
- Each week throughout November 2021, we held the spotlight on Safeguarding by creating a time to focus on the safeguarding life course, by raising awareness and providing opportunities for learning to support and promote a culture and organisational approach, that safeguarding is 'Our Everyday Business'.
- Embedded safeguarding at the daily sight huddle, providing key messages, updates, and informing management of risks, incidents and concerns. This continues to generate useful conversations where actions and learning is identified and shared, when relevant.
- Included Safeguarding as a standard in the Trust's new Quality Assurance Round and Accreditation Programme. Safeguarding Leads are actively engaged with this programme of work and are part of the accreditation team.
- Promoted 'Adverse Childhood Experiences' (ACEs).
- The Trust has further strengthened the safeguarding structure key to our integration journey through the recruitment of;
- Lead Nurse for Integrated Safeguarding
- Complex Safeguarding Specialist Nurse
- Specialist Mental Capacity Act Nurse
- Commissioned a two day safeguarding supervision course that was attended in quarter 2 2021 by the integrated safeguarding team, Named Doctor, Designated Doctor, Cared for Children's Nurses and Pathway Lead for Children's Universal & Universal Plus Services and FNP Supervisor. This has supported the introduction of a safeguarding restorative supervision model and approach in the Trust.

### Ensuring Compliance And Quality Of Safeguarding Arrangements

- Continued to actively contribute to the work of the safeguarding partnerships and align Trust safeguarding work plan to partnership priorities.
- Participated and consistently attended Tameside Safeguarding Children's Partnership (TSCP) Board and subgroups.

- Contributed to the daily functioning of the Multi-Agency Safeguarding Hub and attended the MASH operational and steering groups.
- Contributed to the development of a new monthly Multi-Agency Communication and Practitioner Forum attended by our practitioners and have actively represented at the Strategic Communication group.
- Responded to Ofsted feedback with our partners with regards improving attendance at multi-agency meetings and timeliness of health assessments for children in care through pro-active engagement in the partnership improvement work and actively contributed to a multi-agency group focused on attendance at multi-agency meetings (Strategy Meetings, Child Protection Conferences, Core groups and LAC reviews). We have ongoing focus on the system wide challenges with convening, contributing and attending multi-agency safeguarding meetings for children and their families.
- Promoted statutory guidance 'Working Together to Safeguard Children' to ensure our staff are aware of our statutory duties.
- Identified a Named Nurse for Cared for Children. This post ensures compliance with our contractual standards aligned to the intercollegiate framework. This Nurse manages the cared for children's team and leads the operationalisation of the Trusts Statutory duties as detailed in the Statutory guidance for Improving the Health and Wellbeing of Looked after Children (2015).
- Contributed to the multi-agency, Local Authority led panels; Permanency Panel, resource panel, care leaver's panel.

## Response To Strategic Priorities And Emerging Need

### Trio of Risk & Vulnerability

- Welcomed an Independent Domestic Violence Advocate (IDVA) funded fixed term to work in the Trusts Emergency Department, AMU and Maternity Services with an aim to; Improve identification of victims of interpersonal violence; provide an effective, consistent presence in A&E to advocate for the service and improve the response to victims of interpersonal violence, by supporting, empowering and training clinical staff to identify signs of abuse and ask screening questions; work collectively as a team with our staff, to offer a safe space where support is provided and choices are offered for immediate safeguarding and provide on-the-spot advice, support and safety planning to victims of abuse and violence at the point of crisis.
- Taken steps to implement 'Ask Ani' campaign in our Pharmacy Department which was launched in quarter 1 2022.

### Transitions

- Introduced a daily report of the 16 and 17 year olds admitted to adult wards in the Trust, providing the opportunity for oversight and provision of specialist advice from Heads of Nursing, Paediatric Matrons, and Cared for Childrens Nurse and the Safeguarding Team. Work is ongoing with divisional teams to introduce policy and procedure for young people residing in adult wards and accessing our adult services.

### Complex & Contextual Safeguarding

- Appointed a Complex Safeguarding Specialist Nurse following a vacancy.
- Attended the monthly complex safeguarding operational group where a multi-agency action plan in response to the GM complex safeguarding strategy is the current focus for development.
- Actively contributed to the GM week of action focussed on Online Safety and Car Crime
- Prepared and shared a 7 minute briefing to raise awareness of complex safeguarding.

- A Complex Safeguarding Training group email was set up and information in regards to current trends, updates and training is shared with over 150 members of acute and community members of staff.
- Contributed to the Greater Manchester Peer Review of Tameside's Complex safeguarding arrangements and practice.
- A number of pathways have been developed to ensure that health remains a priority for the young people open to the Complex Safeguarding Team and communication between services is seamless and up to date.
- The Week of Action in March was a success. The Complex Safeguarding Specialist Nurse, along with the Lead Nurse for Integrated Safeguarding completed walk around of the hospital, raising awareness of Complex Safeguarding and their role. An article was added to the Trusts Weekly Digest and the Complex Safeguarding specialist Nurse spoke directly with parents who were visiting the hospital, providing resources and goodies.
- The Complex Safeguarding Training delivered in March was very well attended with over 70 health staff from across acute and community taking part

## What were the major challenges / issues faced?

Despite the impact and challenges faced over the last twelve months, safeguarding has remained a priority across the Trust. Tameside and Glossop Integrated Care Foundation Trust (TGICFT) recognises that one of the most important principles of safeguarding is that it is 'Everyone's Responsibility' and must be our 'Everyday Business'. Safeguarding children, young people and adults cannot be done in isolation; it is only truly effective when we work collaboratively and restoratively within our own organisation and with our partner agencies to 'Think Family' and protect all those at risk of harm, abuse or neglect. We are proud of our achievements and progress against our key priorities, however it is recognised the pace and progress of the work plan overall and action against some of the previous year's priorities, has been limited due to the ongoing significant operational pressures and continuing challenges felt from the ongoing Covid-19 pandemic during 2021-2022, both in the safeguarding service and across the organisation and specifically in our Emergency Department, Cared for Children Service, ISCAN, Health Visiting and School Health services.

## What areas have been identified for improvements in 2022/23?

The Trust has identified a number of actions required to strengthen the Safeguarding service. Actions and priorities are determined from our internal practice and review, regulatory and contractual requirements, safeguarding case reviews and from lessons learned. Multi-agency enablers and national drivers are also key to informing and prioritising our work plan for 2022/2023.

A summary of our priorities for 2022- 2023 is as follows:

- Continue to actively engage and work collaboratively with partners in responding to the multi-agency improvement plan (specifically following SEND inspection and Ofsted monitoring visits of Tameside Children's Services) to improve outcome for children, young people and their families.
- Prepare the Trust for the transition to and implementation of Liberty Protection Safeguarding (LPS).
- Continue to work in collaboration with partners to deliver against multi-agency priorities and work plans.
- Work in partnership with TSCP to respond to the national enquiries and reviews for child protection.

- Take a 'Back to Basics' approach to support the front line workforce in delivering safeguarding and to refocus on their roles and responsibilities in working together to 'think family', promote early help and intervention and safeguard adults at risk, unborn babies, children, young people and their families.
- Have a continued focus on Domestic Abuse and re-launch the domestic abuse champion model.
- Implement a Safeguarding Champions Model in the Trust to further strengthen our Trust vision that safeguarding is our everyday business.
- Being ACE aware, taking a think family approach across the lifespan and putting safeguarding at the heart of everything we do, underpinned by our values and behaviours continues to be our ambition.
- A continued focus on the recovery of safeguarding mandatory training requirements and compliance; specifically level 3 safeguarding children

## Pennine Care NHS Foundation Trust



**Pennine Care**  
NHS Foundation Trust

### Key issues that have been the focus for 21/22

- Ensuring that Trust staff are equipped to recognise domestic abuse.
- Reviewing and designing a trust model for representation at MARAC.
- Safeguarding Training strategy has been designed and is now live.
- Ensuring safeguarding is implemented at leadership level across the trust and with partner agencies.
- Review of Looked after Children Training

### What went well in 2021/22?

#### **Continuous Improvement Of Service Delivery**

- A model and funding for Trust representation at MARAC has been approved and recruitment is set to take place.
- Childrens Safeguarding Supervision audit suggests that there is good engagement with supervision.
- Ensuring Compliance And Quality Of Safeguarding Arrangements
- The Safeguarding Strategic Group has been enforced, to include heads of quality for each area, ensuring that compliance is scrutinised even further.
- Compliance with safeguarding children's training is continually monitored. Level 3 is currently under threshold, due to capacity, the safeguarding team have provided additional sessions to meet demand.

#### **Response To Strategic Priorities And Emerging Need**

The PCFT duty team offer consultation for all PCFT in response to all safeguarding priorities and emerging needs, providing safeguarding oversight and supporting to inform decisions, actions and escalations.

#### **Neglect**

This is covered in level 2 and 3 safeguarding children training. This will also be highlighted as part of the developing "was not brought" policy.

#### **Mental Health**

PCFT continue to deliver a high level of service for those with mental health needs. There has been work within the Trust on a self-harm pathway.



### **Trio of Risk & Vulnerability**

This is supported by PCFT drug and alcohol teams. The recently released Domestic Abuse Awareness training within the trust is also a response to this. This is covered in level 2 and 3 safeguarding children training.

### **Complex & Contextual Safeguarding**

The safeguarding team have good links with complex safeguarding teams. This is covered in level 2 and 3 safeguarding children training.

### **Trauma informed professional practice**

The nature of PCFT service means that professional practice is trauma informed.

### **Early help offer and thresholds**

PCFT contribute, where possible and necessary to early help offers. This is covered in level 2 and 3 safeguarding children training. Staff are also able to seek advice on thresholds through the safeguarding duty team.

## **What were the major challenges / issues faced?**

- Gaging the knowledge of our services in Early Help offers – this is to be analysed through Quality Walks.
- Safeguarding team capacity in response to increasing demand in consultation, serious reviews, training and supervision.
- What areas have been identified for improvements in 2022/23?
- Safeguarding audit to continue to ensure compliance, including an audit of safeguarding supervision.
- Was not brought pathways to continue to be developed.
- Compliance with looked after children training.
- Robust quality walks to be developed, post Covid, to gage staff knowledge and subsequent response to findings.

## **Predicted demand / challenges for next 12 months**

- Safeguarding consultations with our centralised duty team have increased significantly annually, it is expected that this demand will continue.
- LPS to include 16-18 year olds – PCFT to continue to develop towards implementation of this.

## **Action Together**



## **What went well in 2021/22?**

### **Madrasah Safeguarding**

- Action Together deliver the Level 1 Child Protection Training to the VCSFE.
- Delivered Level 1 Child Protection Awareness to 12 Madrassah teachers (October 21). Feedback was very positive, teachers said they had a greater understanding of different types of abuse and what to do. This has led to concerns re bruising, leading to contact with safeguarding lead at school.
- Work is taking place to roll out the training to other Madrassah's in 2022 /23.



## **7 Minute Briefing Training – 10th September 2021**

- Children Services Safeguarding and Quality manager delivered 7 Minute Briefing Training to the VCFSE.

## **VCFSE Safeguarding Briefing - 5th October 2021**

- The briefings covered Role of the Local Authority Designated Officer, safe working practices and the Practitioner Safeguarding Communication Forum, the role of the Complex Safeguarding Team, signs of exploitation and the ACT model and a consultation re the Neglect Strategy and screening tool.

## **What areas have been identified for improvements in 2022/23?**

- Continue to build a working relationship/partnership between the VCFSE and Tameside Safeguarding Children's Partnership
- Promote Tameside Safeguarding training offer and increase access to Tameside Safeguarding Children Partnership by VCFSE, for example Signs of Safety, Neglect and 7-minute briefing training
- Practitioners Forums, deliver forums with multi agency partners and increase VCFSE attendance
- Invisible men, form VCFSE partnership to support delivery of the strategy
- Reporting mechanism for the work is via the Learning and Improvement Group. Predicted demand / challenges for next 12 months

## **Predicted demand / challenges for next 12 months**

- Our capacity to support VCFSE groups will not change in the short term – 1 year.
- We will continue to develop appropriate support for VCFSE groups re: Safeguarding.
- Our resource is finite, we will not be able to take on additional responsibilities.

# Section 5 - Partnership Structure

TSCP introduced a refreshed Strategy in 21/22. To support this Strategy we reviewed our Governance Arrangements and updated these to support achieving our Priorities. The Sub Groups supporting the Partnership are fundamental in helping us to achieve our strategic outcomes:-

- Best possible practice is the norm across all practitioners in Tameside.
- Maintenance of high professional standards through wide dissemination of learning across all settings where change and improvement will be monitored.
- A healthy culture of professional challenge and escalation where necessary.
- Safeguarding issues identified and responded to as early as possible.
- A workforce that fully understands their duty to safeguard and promote the welfare of children and is confident to fulfil this.
- Children, young people and their families receive the appropriate level of help and intervention through robust management of thresholds and levels of need.
- Voice and lived experience of children will influence assessment, planning and services.
- To develop an Adolescent Safeguarding Strategy that addresses the key priorities as identified at Greater Manchester level.

This work complements the published Safeguarding Arrangements which will also be revised and published in 2022/23 to reflect the introduction of the reviewed approach and changes to relevant organisations.

The Partnership are financed by contributions from Partners in Tameside:-

Contributions/Income 2021/22	Income Position
LA	74,360
CCG	66,680
GMP	13,200
Jigsaw	1,382
NPS	3,569
Schools	60,410
Academies	48,790
Total Contributions	207,981

# Section 6 - Work to contribute to our Strategic Outcomes

## Learning and Development (sub group and work stream contributions)

To support the Learning and Development Meeting to respond to the Annual Priorities to progress the TSCP Strategic Plan and Annual Business Plan a Neglect work stream has been established to promote and develop a response to the TSCP Neglect Strategy that is communicated across the workforce. The remit of the group is to monitor the progress of the strategy, responding to recommendations from the Learning and Development Meeting and in turn making recommendations to the Learning and Development Meeting for actions required to meet the objectives of the Neglect Strategy.

The multi-agency group has developed a selection of guidance and tools to support the workforce in identifying and responding appropriately to Neglect

- Risk factors and learning for improved practice around Neglect
- Neglect tool guidance
- Neglect tool

The Launch of the TNAP went really well, we completed 6 sessions in total – 4 virtual sessions and 2 face to face sessions. These were really well attended and the feedback was positive, stating the information was informative and a good transition from the GCP to the TNAP itself. In total, over 200 practitioners and managers attended.

Partners also really liked the CFC input into the logo and the description around this:

- The Heart – to show we care for each other within our families
- The Words – calm, love, security – what we want to achieve and feel
- The Rainbow – to be inclusive of all families, but also reach the pot of gold at the end – and to be everything we can be.

Greater Manchester has developed a strategic framework for ACEs and trauma-responsive practice sets out a case for cultural and pragmatic change – prompting a paradigm shift, which will prevent, mitigate, or heal the impacts of adverse childhood experiences and trauma for children and for adults. It is an all-age approach. Tameside has now identified senior level system lead to drive and promote the implementation plan locally, share learning, and best practice with GM peers. We have established a local ACES and Trauma-responsive steering group whilst in its infancy it is expected that this group will work closely with Learning and Development members to ensure safeguarding partners are contributing to the delivery of the GM plan. Learning and Development members have supported the coordination of GM training offer, which comprised of 4 levels of training that reached around 150 staff in the borough.

Further GM funding for additional courses and places is expected in 2022/23. The sub group will continue to support the steering group to ensure the right professionals are targeted for additional training. Next steps include development of a GM Online PACES and Trauma Portal to be populated and developed with locality information to provide workforce with access to information, advice and training.

Recognising and responding to Sexualised behaviour in Children and young people Guidance for professionals has also been an area that we have focused on during 21/22. Guidance has been published and available for staff and a training programme has been identified to be delivered during 22/23. This work contributes to our strategic outcomes:-

- Best possible practice is the norm across all practitioners in Tameside.
- Maintenance of high professional standards through wide dissemination of learning across all settings where change and improvement will be
- Monitored.
- A healthy culture of professional challenge and escalation where necessary.
- Safeguarding issues identified and responded to as early as possible.
- A workforce that fully understands their duty to safeguard and promote the welfare of children and is confident to fulfil this.

In response to the refreshed Strategy, the Governance Arrangements have identified work streams that will also support our work. The Learning and Development Group have agreed the Terms of Reference for Training work stream and the Policy and Procedures work stream. These groups and these will become established to support the business during 22/23

## Quality Assurance and Performance Management

The Quality Assurance Performance Group (QAPM) conducted a range of assurance exercises which ranges from collecting Key Performance Indicators (KPI), Multi-agency Audit program, Bi-agency audits. Neglect, Mental Health, Trio of risk, complex safeguarding and contextual safeguarding.

### Standard Audits

Section 11 audits were not carried out during 2021/22 as these are conducted every two years. Section 175 audits are carried out annually, based on Keeping Children Safe in Education (KCSIE). The vast majority of schools completed the audit (96%) with some areas identified for improvement. During the self-assessment audit, 276 actions were identified by schools. The main themes centred around; mental health, child on child abuse (linked to sexual harmful behaviour guidance issued in June 2021).

### Key themes from KPI

Attendance by agencies at multi agency meetings has been raised as an ongoing concern and a subgroup has been identified to focus on improving attendance at meeting and recording of meetings.

The lack of use of the Graded Care Profile and rise in Neglect cases at CIN. A Neglect task and finish group was set up to review the neglect screening tools and for wider consultation with the work force. An update on the neglect subgroup is given to the Learning & Development sub group. A key discussion point during 2021/22 was the increase in levels of contacts, referrals, domestic abuse notifications, missing from home and rise in mental health attendance at A&E, impact with low staffing number suggests resources are getting stretched.

### Multi-agency audits

**Sexual harmful Behaviour-** six agencies were involved representing; Aim Project, Children Social Care, Early Help, Education, Health and Police. Seven cases were examined from AIM and Children Social Care. Overall concerns were raised around quality of Children Social Care response to sexual harmful behaviour, with 3 out of 7 cases schools had escalated concerns prior to audit.

**Neglect-** eight agencies were involved in the multi-agency audit which involved; Adult's mental health, Children Social Care, CCG (GPs audit), CGL (Alcohol treatment service), Early Attachment Services, Early Help, Education, Greater Manchester Police, and Health Visitors. Part of the scope of the audit was to examine adult services support for families (Adult mental health & CGL) and their interaction with children services. Overall, we found there were missed opportunities earlier on to support children. However, when services were involved in the cases 5 out of 6 saw an improvement within the family.

**Private/Voluntary Sector assurance exercise-** All children's home providers based in Tameside's geographical boundaries or that host Tameside's Cared for Children, were invited to conduct a self-assessment around sexual harmful behaviour. Generally, assurances were given around how Children's Home deal with sexual harmful behaviour but some issues emerged around sharing protocols with private/voluntary sector.

### **Bi-agency audits**

**Communication Social Care and GP audit-** A dip sample audit was conducted to test the communication between children social care and GPs. Overall, GP practices didn't have correct information regarding who is flagged as Cared for Child (LAC). A re-run of the audit will take place in 2022/23

**Pre Birth audit (health and social care)-** A dual audit was conducted with Children Services and Midwifery services. Numerous improvements have been suggested including; planning, there is not the time to have appropriate plans in place despite referrals being made in time, delays in system and good engagement from health colleagues.

### **Single agency audits**

**CPIS:** Following the neglect audit a further Children Social Care Audit took place around CPIS. A Dip sample audit. Overall a number of issues were raised in the audit and a follow-up audit will take place 2022/23 to see if issues have been addressed.

**Core Group & MA involvement-** The aim was to examine multi-agency representation at meetings. Some key findings include; the need to improve recording of meetings, mixed attendance at meetings, and good contributions from Health in the core group meetings.

### **Consultations**

**Early Help Toolkit-** A workforce questionnaire was sent out across agencies in support of the Early Help Toolkit. Overall 71 professionals took part in the consultation which informed the development of the Early Help Toolkit.

**Neglect Screening Tools-** A workforce questionnaire was sent out across agencies in support of the Early Help Toolkit. Overall, 170 professionals took part in the questionnaire which informed of Tameside Neglect toolkit and guidance regarding neglect.

### **Assurance Exercises**

**Mental Health-** A lead for mental health gave QAPM members a state of play for children's mental health. Overall, some positive work around the further adoption of I-thrive model, integrating mental health into the Early Help support offer. However concerns were raised around the increase in demand for services whilst having a number of unfilled posts. This in addition raised concerns regarding data received from A&E around in an increase in attendance due to self-harm.

**Escalation Policy-** An escalation process has been in operation for over a year that has a four step process, with TSCP only being made aware in step 3 and step 4. The TSCP reported that they had not received any notifications of escalation. All agencies who attended the QAPM meeting gave assurances that the escalation process was working and being kept at step 1 and step 2.

## Complex Safeguarding

	Quarter 1 2020/21	Quarter 2 2020/21	Quarter 3 2020/21	Quarter 4 2020/21	Quarter 1 2021/22	Quarter 2 2021/22	Quarter 3 2021/22	Quarter 4 2021/22
Number of referrals	15	26	18	21	12	20	20	16
Number of referrals into the Complex Safeguarding Team closed (NFA)	3	11	13	7	4	6	13	8
Number of re-referrals	1	2	5	2	1	1	3	1

	Quarter 1 2020/21	Quarter 2 2020/21	Quarter 3 2020/21	Quarter 4 2020/21	Quarter 1 2021/22	Quarter 2 2021/22	Quarter 3 2021/22	Quarter 4 2021/22
Current children and young people open to Complex Safeguarding Team	29	40	39	38	36	39	36	35

Partner organisations focus on the best possible outcomes is informed by working with children to ensure services meet their needs in a co-ordinated way. Complex Safeguarding Team collate feedback regarding the service every 6 months from the Children they work with.

This demonstrates the work in response to the Tameside Voice of a Child Strategy, **“I am the expert in being me. You are the expert in your field. If we truly join forces and work together as equals. I can be a better me. And you would be able to help more young people, which would make you a better you.”**



Sample of the information shared by the young people supported by the Complex Team:-

	Strongly disagree	Disagree	Agree	Strongly agree
<b>The Complex Safeguarding Team workers worked well with me</b>	1 (this young person did not feel they needed support from the team)	0	4	19
<b>I now understand more about exploitation and how to keep safe</b>	0	0	6	18
<b>I now know where to look if I need more information on exploitation</b>	0	0	4	20
<b>I felt involved in discussions</b>	0	0	2	22

Overall, what is good about the Complex Safeguarding Team? Please be honest!

- *Weekly visits, communication was amazing. Worked on understanding and/or for future reference. Spoke around my own everyday life as well as safeguarding work. Brilliant.*
- *The good thing about the team is that it was fun to talk to them. They helped me throughout my time working with them.*
- *You keep kids safe.*
- *You sort stuff out.*
- *Good conversations.*
- *At the start, I didn't know anything, but as they came each time I started to learn about it. It's good that they came and went through the sessions with me, just in case something like that happened to me, so I knew what to do.*
- *They listen and care.*
- *By doing the work with me, they helped with my missing episodes.*
- *Gave me confidence about what I knew.*
- *She was friendly, kind and had a wicked sense of humour. She taught me a lot of stuff I didn't know before, I'm sad to see her go.*
- *They didn't make me feel like a small child, they treated me properly, always made me smile. Even though we spoke about difficult things, I always looked forward to seeing her.*
- *I feel comfortable talking to them and feel I can tell them most things.*
- *They keep me informed on any and all things that affect me.*

## Learning Reviews

In 2021/2022 year TSCP commissioned 6 new safeguarding reviews. In addition there were 3 reviews which had not closed and have outstanding action plans. Some joint learning has been identified from Safeguarding Adult and children reviews. These raise learning about a think family approach to Safeguarding and transitional arrangements for children entering adult services.

### **Neglect**

In one case the primary reason for review was that neglect leading to a child suffering significant harm was identified. Features of early neglect, however, were evident in all other reviews which took place. A Neglect Task and Finish group was initiated and led by Early Help Services. A revision of the Graded Care Profile assessment tool and an audit of its use was initiated. A training programme was rolled out which helped practitioners in the use of the tool. Further work will occur in 2022/23 to launch the tool formally and to make further revision to the Children's neglect strategy.

### **Mental Health**

In two reviews parental mental ill health was identified which had not considered at the time of assessment of the family specifically considering the impact which this may have on a person's capacity to parent. Practitioners were not always making appropriate referrals to mental health services. In addition mental health services were not consistently making referral to children's social care when working with an adult who may have children – even if the only need was to share information with families.

Reviews identified that children and young people were not always able to have timely access for assessment and treatment of mental health issues. Work is ongoing within mental health services to ensure that the parenting capacity of adults with children is assessed as part of an overall mental health assessment. In addition an electronic self-referral pathway for practitioners and parents wishing to make referral to mental health services has been developed. This is added as a link on the early help website.

Work is ongoing with commissioners of mental health services for children to ensure that there is a prompt and appropriate response to children. Focus for 2022/23 will focus on implementation of the IThrive model of care delivery.

### **Transitions**

Two reviews identified a disconnect between adult and children's multi agency services across Tameside as vulnerable young people reach the age when they need to move from children to adult services. Work was commenced in early 2021 to ensure that there was a continued service offer to those young people who were leaving care. Reviews have identified the need for further service offers to work with vulnerable young people but who are not care leavers. A key example of the work which continues to be focused upon is young people with learning disability and those with a diagnosis of autism.

Work is ongoing with commissioners to ensure that there is a robust offer of service provision to young people with an identified learning disability or autism.

### **Complex & Contextual Safeguarding**

Four child practice reviews focused on young people who had received physical injury and included the death of a young person. A consistent theme of these reviews was that all the young people were known to services within Tameside and concerns about complex safeguarding issues had already previously been identified.

In addition work was ongoing with the young people involved at the time of the incidents having occurred. Further work is planned to ensure that complex and contextual safeguarding issues are consistently identified and addressed in Tameside.

### Trauma informed professional practice

An overriding theme identified within the children’s reviews undertaken in Tameside was the need for practitioners across all agencies to review their approaches to children and families which demonstrate that there is an understanding of the impact of adverse childhood experiences on both children and adults within the family. Furthermore the need to ensure that a trauma informed approach is incorporated into any work undertaken by practitioners going forward. The objective of taking this approach is to address negative behaviours and perspectives of families, brought about by present and previous adverse experiences so that changes can be made to prevent further harm and to improve outcomes for children and families.

### Early help offer and thresholds

Reviews have identified the benefit of services working together to ensure that support can be offered to families at all levels of the Tameside safeguarding thresholds for children and young people. 2021/22 saw a “one stop front door” for concerns about families in which early help services and the Multi Agency Safeguarding Hub are co- located. This has resulted in families receiving more robust assessments and receiving help and support relevant to their level of need.

### TSCP programme of learning 2021/22

TSCP are committed to facilitating a workforce that fully understands their duty to safeguard and promote the welfare of children and is confident to fulfil this. In response to the learning from local and national reviews we host a number of Practitioner forums during the course of a year. This year these forums have focused on topics such as: - Between 01/04/21 and 31/03/22 there were three TSCP Practitioner events held:-

29/07/21: Practitioner event regarding ‘Alex’ LCSPR	17/09/21: Practitioner event regarding ‘Ben’ LCSPR	03/02/22: Practitioner event regarding ‘Ellie’ LCSPR
Strategy Meetings	Strategy Meetings	How do we measure impact of parental mental ill health on children including parenting capacity?
Voice of the Child	Assessments including Graded Care Profile	Young Carers assessments? What is the process?
Support provided to the child	Child Protection Conference Procedures	Assessment of domestic abuse when children are the alleged perpetrators
How we performance managed the support	How do we assess whether support intervention is proving successful	Referral to Adult Social Care for parents who are identified as vulnerable?
Child Protection Conference Procedures	Hospital Discharge and Information Sharing at Discharge	Diagnosis of autism- so What?
Covid Consideration	Covid Consideration	Transition from children to adult services.

We facilitate the Partnership Training to support the workforce to inform the strategic priorities and provided the following training modules during 21/22:-.

Virtual event/topic.	Number of times delivered.	Training responding to Strategic Priority Areas Y/N
Working Together to Safeguard Children – Virtual Foundation Course.	5	
Virtual Neglect Training.	5	Y
Virtual Domestic Abuse Awareness.	2	Y
Virtual Reducing Parental Conflict Practitioner Training.	3	
Solihull Approach Awareness Virtual Training.	2	
Virtual Professional Challenge Course.	2	
Virtual refresher training in child protection.	1	
Safeguarding vulnerable teenagers: Making a connection using trauma informed practice.	2	Y
Safeguarding Children & Parental Mental Health.	2	Y
Virtual Forced Marriage & Honour Based Violence awareness briefing.	1	
Understanding Exploitation.	1	Y

# Section 7-Scrutiny

## Peer Review

A peer review process was conducted by Oldham Safeguarding Children Partnership (OSCP) to reflect on the effectiveness and impact of multi-agency safeguarding arrangements and improved outcomes for children and young people.

A peer review is the provision of a critical friend in assessing strengths and identifying areas for improvement from the point of view of peer reviewers against their own experiences and government guidance.

The key Area of focus of the review was to:-

***Evaluate the impact of rapid reviews and child safeguarding practice reviews on improving multi-agency practice.***

It was proposed that the impact on Tameside's Early Help Offer be reviewed in relation to:

- Information sharing and interface between early help provision and statutory intervention
- Early help mental health offer and pathway
- Application of the pre-birth protocol
- Tackling neglect and the use of the Graded Care Profile

The outcome of the Review was thought to be a positive experience and the key learning points were defined as opportunities. The review's focus on Partnership Working, acknowledged structures were changing in response to the need to reform. We were satisfied that there is evidence that learning from reviews is given importance by senior leaders. This outcome was echoed in the monitoring and signing off of action plans, as it was apparent the support from strategic leads facilitated the opportunities for frontline practitioners to participate in reviews. The new governance arrangements introduced a Business Group who will enhance this approach and play a strong role in driving forward and monitoring recommendations.

Seven minute briefings were viewed as a positive response to communicate learning and the Practitioner forums. To enrich this work we will include in training and newsletters "useful links" to the TSCP websites and external resources related to the subject matter. We were also satisfied that the Peer Review observed evidence of professional challenge and escalation in Partnerships and sub-groups and this contributes the effectiveness and impact of multi-agency safeguarding arrangements and improved outcomes for children and young people.

We will use the outcome from the Peer Review to inform and improve the Partnership Work during 22/23.

# Section 8 - Moving Forward

We agreed our priorities in the TSCP Development Session July 2021 and in the autumn of 2021 developed these to be the focus of the TSCP Strategy 2021 – 2024. The latter part of 21/22 has been concentrated on establishing the Governance Arrangements to support the strategy and ensure that there are sustainable systems in place to progress this strategy. As a Partnership we acknowledge whilst we remain steadfast to ensure safeguarding is our everyday business and to be assured it is of our Partner Organisations, the approach to embed the new strategy is evolving and work to evaluate these arrangements will be key to ensuring the successful outcomes we strive to achieve.

## **Priority areas of Business for 22/23:-**

- Develop and implement a Learning Strategy
- Develop and implement Communication Strategy
- Embedding of Neglect Screening Tool in order that issues of childhood neglect can be identified and responded to as early as possible
- Assessment and analysis of risk of exploitation in Tameside and early identification
- Assessment and analysis of risk of exploitation and response/activity to support Care Leavers
- Section 11 Audit for agencies to complete for transitions against NICE Guidance documents to provide assurance to TSCP and provide any recommendations for single agencies action
- Multi-agency audit on Transitions to Identify six cases who have gone through the process from children to adult services and identify recommendations