



CHILD JANE SERIOUS CASE REVIEW

KSCB RESPONSE – WHAT HAVE WE DONE

Knowsley Safeguarding Children Board (KSCB) accepts the findings of the review and is committed to learn the lessons, which are identified in the report.

Knowsley Safeguarding Children Board (KSCB) has developed an effective multi-agency partnership. The partnership is wide ranging and comprises of large organisations such as the local authority, the Clinical Commissioning Group and Merseyside Police.

Other local agencies such as probation services, health organisations such as Whiston Hospital and Health visiting services, Schools and the Youth Offending Service are also represented on the board.

Of equal importance are the contributions from the local community through two local lay members.

All KSCB members are accountable for their agencies making a full contribution to services to meet the needs of vulnerable children and their families in Knowsley.

There have been real improvements in safeguarding and promoting the welfare of children in Knowsley. They have identified a number of key priorities, which are reflected in the business plan for 2018/2020.

These include ensuring Children in Knowsley are safeguarded and protected from harm, including abuse, neglect and exploitation.

Learning from the serious case reviews, practice reviews, audits of multi-agency work and listening to staff working every day with vulnerable children, has improved KSCB's understanding of the need to focus on specific areas of work.

A total of 10 recommendations were made by the author, which are listed below;

Recommendation 1:

KSCB, local authority procedures and MASH procedures should be amended to include:

'When there are concerns that a child may have been sexually abused, the views of specialist child protection medical practitioners should be considered when deciding whether a child protection medical is required'.

There is already a requirement that the rationale for the final decision in respect of medical examinations should be clearly recorded within the strategy meeting document.

Recommendation 2:

KSCB should oversee the development of a multi-agency referral pathway for children who require a paediatric forensic assessment. This should be consistent with the Royal College of Paediatrics and Child Health document: 'Service specification for the clinical evaluation of children and young people who have been sexually abused (2015)'.

Recommendation 3:

Where there are suspicions that a child has been sexually abused, the strategy meeting should commission a joint Police/CSC planning meeting to consider the feasibility of conducting an ABE interview.

Recommendation 4:

KSCB should require the police and CSC to agree, and implement, a joint process which will ensure that when an ABE interview is required; actions which follow are consistent with the Ministry of Justice guidance; 'Achieving Best Evidence in Criminal Proceedings': Guidance on interviewing victims and witnesses, and guidance on using special measures (2011).

Recommendation 5:

KSCB should consider, as part of its quality assurance process, auditing the extent to which strategy meetings are being conducted and recorded in ways which:

- *make clear what influenced decision-making; and*
- *Make explicit why actions have been agreed or recommended.*

Recommendation 6:

The current review of child in need processes should include the requirement that:

'When strategy meetings determine that 'child in need' assessments should be undertaken; these assessments must consider whether the original safeguarding concerns have been resolved satisfactorily'.

Recommendation 7:

KSCB should be assured that the local authority's safety plans constitute viable child protection measures in practice.

Recommendation 8:

Agencies and organisations which comprise KSCB should be required to develop a communication plan to raise practitioners' awareness of the KSCB's dispute resolution and escalation process and to take any necessary steps to increase confidence in its use.

Recommendation 9:

Commissioners of services for children who have been sexually abused should consider the viability of developing a specialist resource for pre-school children

Recommendation 10:

Policies, procedures and training relating to child protection medicals and child witnesses in police investigations should stress that, where parents are separated, both should be provided with appropriate information about what these processes entail and how the parent can support their child.

The board has made significant strides to address these key areas, which is summarised within our response;

The local reflective review which was undertaken prior to the serious case review, recommended the development of a multi-agency pathway describing how children should be referred for a paediatric forensic assessment. This was recently approved by KSCB.

The board acknowledged this was a key issue. To reflect its significance, a communication plan has been developed, to raise awareness of practitioners of their roles and responsibilities in facilitating a paediatric forensic assessment. The 'CSA pathway' will be disseminated to LSCBs for implementation across Merseyside. This means there will be a consistent approach for children requiring these specialised assessments.

The designated Doctor for children in Knowsley has delivered a series of presentations to practitioners, who were also afforded the opportunity to visit the Sexual Assault Referral Centre (SARC) and familiarise themselves with the procedures managed within the unit. This approach has raised their awareness of the purpose and conduct of child protection medical examinations.

At an early stage of the review process The Multi-Agency Safeguarding Hub (MASH), which receives all referrals for children's services reviewed their systems and process and made

changes to the strategy meeting document, ensuring that the rationale for the final decision in respect of medical examinations is clearly recorded.

The board looked at this issue in a wider context and recognised there were occasions when professionals were-not recording their decisions in sufficient detail. It was not suggested that the decisions made were incorrect, but a lack of detail on occasions presents difficulties in establishing the rationale for such decisions.

In an attempt to provide some practical support the KSCB commissioned research to be undertaken to identify an appropriate decision making model, that could be used a point of reference for professionals.

An aide memoir, under the title "Top tips for decision making" was approved by the board. The document provides a concise point of reference for professionals to follow when recording their decisions.

Workforce Development has agreed to include decision making as a quarterly theme for training.

Senior Managers from Merseyside police and Children's Social Care are reviewing the joint Achieving Best Evidence (ABE) protocol. They are seeking to develop systems and processes that will facilitate the interview planning process.

The LSCB will commission a series of audits to quality assure the issues highlighted within the report. These include decision making during strategy meetings, Child in need assessments and an audit of strategy meetings to quality assure the decision making process.

The LSCB will commission an audit of Children in Need assessments to establish if initial risks have been resolved.

Children's Social Care has replaced the use of 'Written Agreements' in social work practice, and has introduced additional safety planning tools, which are now in place. There is a commitment to raise practitioner's awareness on the use of safety planning tools, which is delivered across the partnership and is included in multi-agency domestic abuse training. KSCB has written a 'professional challenge' course, which is intended to raise practitioners awareness and equip them with the tools and tactical options to address such an issue. This training will be incorporated into KSCB's training plan for the forthcoming year.

The board was grateful for the views of the father of Child Jane who expressed concern about the lack of specialist resources for children whose development stage is immature.

The board acknowledged the benefits such a service would bring and commissioned some research into the matter. There are currently no specific services children who have been sexually abused, however we have noted that Alder Hey has appointed a Clinical Psychologist in the SARC to work with children of all ages, which is funded by the NHS on regional basis.

The board has acknowledged the concern raised by the father of Child Jane in keeping both parents updated, particularly when they are estranged. This will be incorporated into 'Working Together' training for practitioners

KSCB have developed a 7 minute briefing under the title "*Working Effectively with Men in Families*" which will be cascaded to practitioners across the partnership.

In summary KSCB is determined to deliver our strategic priorities and ensure that children in Knowsley are able to grow up safely, be healthy, feel listened to and are given the right opportunities to achieve their potential.