Manchester Complex Safeguarding Hub

Annual Report 2020/2021

Susan Butlin, Head of Locality Claire McNicholls, Named nurse Safeguarding





Complex Safeguarding Hub

- Overview of the Complex Safeguarding Hub
- Partnership Arrangements
- Governance, Accountability and Assurance Arrangements
- Response to Covid 19
- Achieving Change Together Model (ACT)
- Performance and Outcomes
- Impact
- Priorities 2021/2022

Complex Safeguarding Hub

- Multi agency co-located hub: Children's Social Care, Police, Health, Trusted Relationship Children's Psychologist, Adult Social Worker, Early Help Team, Missing teams, Probation, virtual links to Youth Justice, Education and Youth Providers.
- Provides joined up response to child sexual exploitation, criminal exploitation and county lines, serious youth violence and links to organised crime and children missing from home and care.
- The hub is intelligence led and provides joint work in managing the response to complex safeguarding and demonstrates good multi agency coordination and planning in response to emerging safeguarding threats.
- Daily risk meetings, mapping, safety planning, joint operations, specialist knowledge and expertise.
- Links into wider social work teams, and multi agency partnerships
- Trusted relationship model and understanding of vulnerabilities and harm underpins the approach

Complex Safeguarding Social Work Team Offer





Bespoke interventions

Young person led

Based on <u>trusted relationships</u> and <u>trauma informed</u> <u>approach</u>

Joint approach with locality social workers and team around the child

Focus on aspiration and building resilience



- 15 day exploitation assessment using <u>Phoenix tool</u> and specialist knowledge.
- Pulls together information from <u>child, family / carers</u> and partners

Consideration of <u>who</u> is best place to undertake intervention – <u>clarity of roles of professionals</u>

• ACT social worker caseloads of <u>up to 5 assessments</u>



- Delivery of Complex Safeguarding <u>training across</u> <u>the partnership</u>
- Social Work locality links with input into MFH / Edge of Care / Channels Panels.
- Links into <u>community / voluntary sector groups</u>
- Sharing <u>learning</u> and input into national research.

Intervention

Assessment

Advice and Guidance / Wider Support and Input

Governance, Accountability and Assurance Arrangements

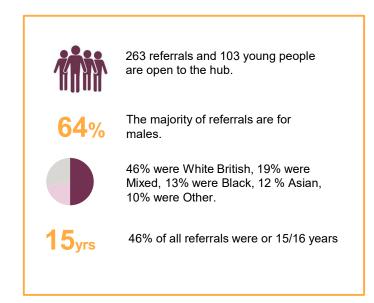
- Multi- layered and effective governance arrangements driven by the Complex Safeguarding
 Executive Partnership Group and Manchester Safeguarding Complex Safeguarding Sub group.
- Learning from policy, practice, peer reviews, audits, feedback and performance information are scrutinised and developed thorough the partnership arrangements.
- In Nov 20 GM Peer Audit on the hub reviewed 4 young people and confirmed the strong partnership working, the effectiveness of the trusted relationship model and management oversight. The role of the CSE Specialist Nurse was highlighted in engaging wider health services e.g. CAMHS and Sexual Health and the Police Officers response was a high standard.
- The culture was the right one with appropriate language and approach.
- Areas for development included more opportunities for case reflection, stronger exploration of identity and family dynamics within assessments and review of the requirements of the National Referral Mechanism.
- All actions were completed and case formulation led by the psychologist and the GM 'Listen Up'
 Project are providing a wider understanding of family dynamics, of barriers and greater
 understanding of equality, diversity and inclusion.

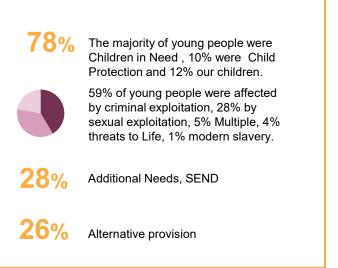
Response to Covid 19

- Continued offer and response with a flexible approach to maintain relationships with young people throughout the pandemic.
- Exploitation remained irrespective of lockdown conditions and demand and requests for support has been consistent with previous years.
- Reports of children missing did reduce in comparison to the previous year with a reduction of 683 episodes.
- Joint work with British Transport Police and a proactive approach in the city centre demonstrated the effectiveness of prevention and joint work with partners.

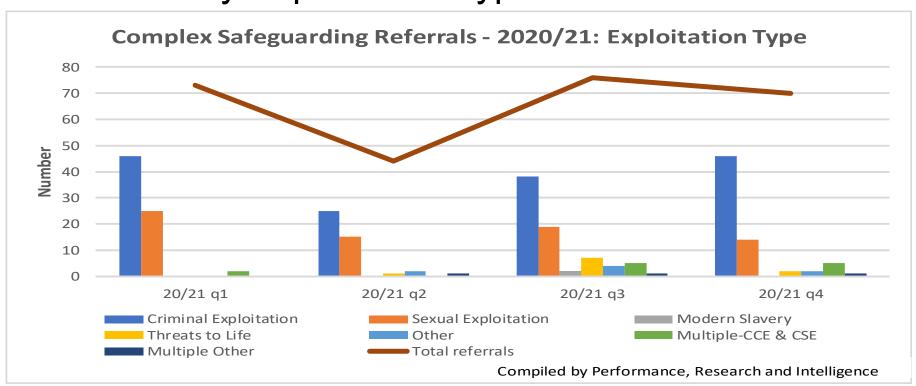
Profile of Young People

There are more males than females referred for support, overrepresentation is an issue, the majority of young people live at home with their family and there is a predominance of young people with additional needs and in alternative educational provision.





Referrals by Exploitation Type



Executive Summary: ACT

Achieving Change Together (ACT) is a strength and relationship-based model aimed at finding alternatives to high-cost and secure accommodation for young people affected by exploitation. The project was based on findings from action research and co-designed with input from young people. It takes a 'future-focused' approach to reducing risk, acknowledging that meaningful and trusting relationships with professionals are key to achieving successful outcomes for young people affected by exploitation. The model incorporates an intensive approach to supporting young people, engaging them in relationship building activities and working with them to identify their goals and build a plan for the future



ACT worked with 22 young people during the evaluation period June 2019 – February 2021

64%

The majority of Act clients were female



Half of the cohort were White British. 22% were from an Asian or Asian British background

15_{yrs}

The average age of the cohort was 15 years. 2/3 of young people were aged 14-15 years at the time of their referral



Over half the cohort were from Central Manchester, particularly Hulme, Moss Side, and Rusholme



41% of the cohort were affected by Child Sexual Exploitation, 36% by Child Criminal Exploitation, and 22% by both CCE and CSE

47%

Just under half of cases were open for a period between 10-15 months

336

The average case duration was 336 days

days

Quantitative Findings from ACT

Phoenix RMT scores and police data were analysed to determine impact in six outcome areas identified through the wider GMCA evaluation. Four case studies were analysed for actual and projected cost savings resulting from intervention.

Outcome Areas

The GMCA Cost Benefit Analysis identified six outcome areas to be evaluated for evidence of success:

- Mental Health and emotional wellbeing
- · Missing from home episodes
- Safe and stable accommodation
- Relationships with peers and adults outside of the family
- Interest and engagement in education
- · Substance and alcohol use

Impact in the above areas was analysed using Phoenix RMT scores, case study analysis, and police data 100%

of young people had been reported missing in the 12 months prior to referral

55%

had offended in the 12 months prior to referral

91%

frequently used drugs and/or alcohol

Were Looked After Children at the point of referral

1/3

Attended a Pupil Referral Unit



Missing from Home and Care

- There were 3,993 episodes concerning 1,068 children.
- There were 2,316 Return Interviews carried out.
- The average age at time of missing is 16 years.
- Staying out and meeting with friends/peers is the overriding reason why young people go missing from care.
- A parenting offer is being delivered by the Children's Society to prevent and reduce recurrent missing.
- Peer audit programme in place to develop the return interviews

Impact and Outcomes:

- Complex Safeguarding Operations continued throughout Covid and several of perpetrators are currently under investigation for child exploitation offences
- Following a successful joint operation, in July a perpetrator Amjid Hussain
 was sentenced to 10 years in prison after pleading guilty to grooming and
 engage in sexual communication with a child for one victim, sexual activity
 with a child and grooming in relation to a second and pleaded guilty to paying
 for sexual services of a child for a third. The offence of making an indecent
 image of a child lie on file.

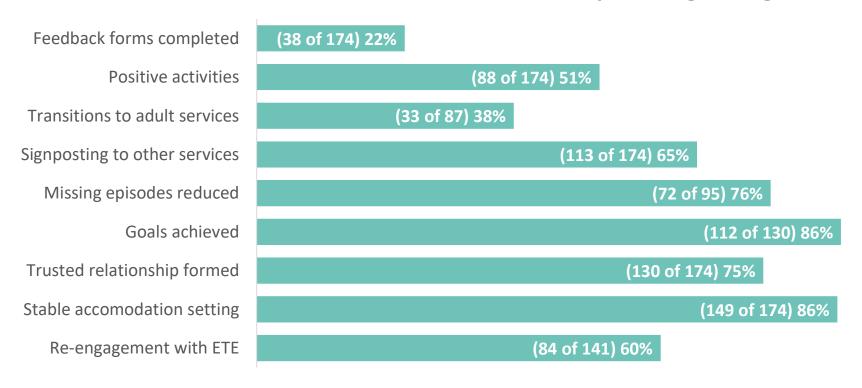
Impact and Outcomes

- The outcomes data shows the impact on young people of interventions with improved numbers of young people who have stable accommodation, are in employment, education or training, have a trusted relationship and take part in positive activities.
- By achieving these outcomes young people are well equipped to manage impact of trauma they have experienced and these outcomes are priorities in our partnership and intervention work.
- CSE Nurse has provided health updates in relation to 225 children in the daily briefings and ensured the allocated GP was informed of referrals and closures in relation to 273 young people.
- Impact statement: The complex safeguarding hub achieves improved safeguarding, and good outcomes for children and young people.



Case Closures 2020-21

2020-21 Outcomes recorded on closure to Complex Safeguarding Team



Priorities 2021/2022

- Develop an effective offer in relation to transitions and test out the approach, pathway and co-production via a pilot focusing on 17-year olds requiring a transitional safeguarding offer.
- Develop service delivery to reflect the strategic priority of ensuring children's voice and experience is informing and influencing the development of the CS Hub.
- Work with partners to address and respond to overrepresentation and ensure the outcomes of the EDI project 'Listen
 Up' inform and develop service delivery.
- Ensure the CS Hub evidence impact by development of an integrated dashboard with partners, learning from audits and driving the quality of practice.
- Work together with partners to achieve impact and good outcomes from the Complex Safeguarding Strategy and action plan.

Summary

- The annual summary on the CS Hub demonstrates the work of the hub is complex and the model of partnership delivery is effective in preventing, protecting and disrupting exploitation
- The trusted relationship model, the culture and approach in the hub are effective in achieving engagement and improved outcomes