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Agenda for a meeting of the Children's Services Overview and Scrutiny Committee to be held on Wednesday, 15 February 2023 at 4.30 pm in Council Chamber - City Hall, Bradford

Members of the Committee - Councillors

LABOUR	CONSERVATIVE	LIBERAL DEMOCRAT	BRADFORD INDEPENDENT GROUP
Alipoor Humphreys Berry Shafiq Thirkill	Winnard Pollard	J Sunderland	Sajawal

Alternates:

LABOUR	CONSERVATIVE	LIBERAL DEMOCRAT	BRADFORD INDEPENDENT GROUP
Mukhtar Walsh Johnson Regan	K Green Felstead	Stubbs	Elahi

VOTING CO-OPTED MEMBERS:

Church representative:

Joyce Simpson (CE)

Parent Governor Representatives:

Fauzia Raza & Shifa Simab

NON VOTING CO-OPTED MEMBERS:

Teacher Secondary School Representative

Tom Bright

Children's Social Care: Dr Samina Karim

Notes:

- This agenda can be made available in Braille, large print or tape format on request by contacting the Agenda contact shown below.
- The taking of photographs, filming and sound recording of the meeting is allowed except if Councillors vote to exclude the public to discuss confidential matters covered by Schedule 12A of the Local Government Act 1972. Recording activity should be respectful to the conduct of the meeting and behaviour that disrupts the meeting (such as oral commentary) will not be permitted. Anyone attending the meeting who wishes to record or film the meeting's proceedings is advised to liaise with the Agenda Contact who will provide guidance and ensure that any necessary arrangements are in place. Those present who are invited to make spoken contributions to the meeting should be aware that they may be filmed or sound recorded.
- If any further information is required about any item on this agenda, please contact the officer named at the foot of that agenda item.

From:

Asif Ibrahim

Director of Legal and Governance

Agenda Contact: Kanwal Amrez/Farzana Mughal

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A. PROCEDURAL ITEMS

1. ALTERNATE MEMBERS (Standing Order 34)

The Director of Legal and Governance will report the names of alternate Members who are attending the meeting in place of appointed Members.

2. DISCLOSURES OF INTEREST

(Members Code of Conduct – Part 4A of the Constitution)

To receive disclosures of interests from members and co-opted members on matters to be considered at the meeting. The disclosure must include the nature of the interest.

An interest must also be disclosed in the meeting when it becomes apparent to the member during the meeting.

Notes:

(1) Members must consider their interests, and act according to the following:

Type of Interest	You must:
Disclosable Pecuniary Interests	Disclose the interest; not participate in the discussion or vote; and leave the meeting unless you have a dispensation.
Other Registrable Interests (Directly Related) OR Non-Registrable Interests (Directly Related)	Disclose the interest; speak on the item onlif the public are also allowed to speak but otherwise not participate in the discussion c vote; and leave the meeting unless you hav a dispensation.
Other Registrable Interests (Affects) OR Non-Registrable Interests (Affects)	Disclose the interest; remain in the meeting participate and vote <u>unless</u> the matter affec the financial interest or well-being (a) to a greater extent than it affects the financial interests of a majority of inhabitants of the affected ward, and (b) a reasonable member of the public knowing all the facts would believe that it would affect your view of the wider public interest; in which case speak on the item <u>only if</u> the public are also allowed to speak but otherwise not do not participate in the discussion or vote; and leave the meeting

- (2) Disclosable pecuniary interests relate to the Member concerned or their spouse/partner.
- (3) Members in arrears of Council Tax by more than two months must not vote in decisions on, or which might affect, budget calculations, and must disclose at the meeting that this restriction applies to them. A failure to comply with these requirements is a criminal offence under section 106 of the Local Government Finance Act 1992.
- (4) Officers must disclose interests in accordance with Council Standing Order 44.

3. MINUTES

Recommended -

That the minutes of the meeting held on 18 January 2023 be signed as a correct record.

(Kanwal Amrez/Farzana Mughal – 07929 070228/07811504164)

4. INSPECTION OF REPORTS AND BACKGROUND PAPERS

(Access to Information Procedure Rules – Part 3B of the Constitution)

Reports and background papers for agenda items may be inspected by contacting the person shown after each agenda item. Certain reports and background papers may be restricted.

Any request to remove the restriction on a report or background paper should be made to the relevant Strategic Director or Assistant Director whose name is shown on the front page of the report.

If that request is refused, there is a right of appeal to this meeting.

Please contact the officer shown below in advance of the meeting if you wish to appeal.

(Kanwal Amrez/Farzana Mughal – 07929 070228/07811504164)

5. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE

The following referrals have been made to this Committee up to and including the date of publication of this agenda.

The Committee is asked to note the referrals listed above and decide how it wishes to proceed, for example by incorporating the item into the work programme, requesting that it be subject to more detailed examination, or refer it to an appropriate Working Group/Committee.

6. MENTAL HEALTH ISSUES RELATING TO CHILDREN'S SOCIAL CARE

1 - 18

The Director of Integrated Health and Care will submit a report (**Document "S"**) which provides an overview of the current autism and ADHD assessment services for children and young people and describes the increased investment into the autism and ADHD service. The paper also highlights the challenges that exist in terms of meeting increasing demand for assessments across Bradford district and Craven and the impact on our waiting lists.

The paper outlines the current work to address the special educational needs and disabilities (SEND) Written Statement of Action (WSOA) requirements of improving the service offer for children and young people with autism and/or ADHD.

The paper describes the aims of the on-going deep dive into autism and ADHD currently taking place across the West Yorkshire ICS footprint.

The paper also outlines elements of the *Digitally* Acting Together As One (DATA 1) research programme that is being undertaken in the Bradford district.

Recommended -

- That Members of the Committee note the content of this report and recognise the continuing challenges faced by the assessment and diagnostic services despite the increased financial investment;
- That Members of the Committee note and support the work currently being undertaken to develop an action plan to address the requirements of the SEND WSOA and the work being done to closely involve children and young people, their families and carers;
- That Members of the Committee note the work being undertaken across WY ICB and to receive further updates as this work develops;

 That Members of the Committee note the development of the Digitally Acting Together as One programme and to receive further updates at a future meeting. The Committee to recognise that this digital project could lead to a further increase in referrals for assessment.

(Ruth Shaw - 07976 0530407)

7. EXPLOITATION ANNUAL REPORT

19 - 46

The Assistant Director Office of the Chief Executive presents a report (**Document "T"**) which provides an annual update on the information to be presented to the Overview and Scrutiny (Children) regarding the issue of exploitation. It focuses on the strategic partnership response to all forms of child and adult exploitation and how partners from the Bradford District Safeguarding Children Partnership, and the Bradford Safeguarding Adults Board work to drive improvements across the district and hold agencies to account for their work in their area.

Recommended -

- i. That Members of Children's Services Overview and Scrutiny Committee note the report;
- ii. That the Children's Services Overview and Scrutiny Committee commit to working closely with partners to continue to raise awareness of exploitation of both adult and children:
- iii. That the Overview and Scrutiny committee are provided with an update report by the partnership in 12 months' time.

(Darren Minton – 01274 434361)

8. CHILDREN'S SERVICES OVERVIEW AND SCRUTINY COMMITTEE 47 - 48 - WORK PROGRAMME 2022/2023

The report of the Chair of the Children's Services Overview and Scrutiny Committee (**Document "U"**) includes the Children's Services Overview and Scrutiny Committee work programme for 2022/23.

Recommended -

- i. That Members consider and comment on areas of work included in the work programme.
- ii. That Members consider any detailed scrutiny reviews that they may wish to conduct.

(Mustansir Butt – 01274 432574)

THIS AGENDA AND ACCOMPANYING DOCUMENTS HAVE BEEN PRODUCED, WHEREVER POSSIBLE, ON RECYCLED PAPER





Report of the Director of Integrated Health and Care to the meeting of Children's Overview and Scrutiny Committee to be held on Wednesday 15 February 2023

S

Subject:

Autism and ADHD assessments for Children and Young People

Summary statement:

This paper gives an overview of the current autism and ADHD assessment services for children and young people and describes the increased investment into the autism and ADHD service. The paper also highlights the challenges that exist in terms of meeting increasing demand for assessments across Bradford district and Craven and the impact on our waiting lists.

The paper outlines the current work to address the special educational needs and disabilities (SEND) Written Statement of Action (WSOA) requirements of improving the service offer for children and young people with autism and/or ADHD.

The paper describes the aims of the on-going deep dive into autism and ADHD currently taking place across the West Yorkshire ICS footprint.

The paper also outlines elements of the *Digitally* Acting Together As One (DATA 1) research programme that is being undertaken in the Bradford district.

Ali Jan Haider Director of Integrated Health and Care

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Diane Daley, General Manager, Autism Services

Portfolio:

Health & Wellbeing and Children's Services

Overview & Scrutiny Area:

Health & Wellbeing and Children's Services

1. SUMMARY

- 1.1 Bradford District Health and Care Partnership recognise the importance of early identification and access to support for children and young people who are neurodiverse (for the purposes of this paper we are referring to Autism Spectrum Condition [autism] and Attention Deficit Hyperactivity Disorder [ADHD]). See Appendix for descriptions of autism and ADHD
- 1.2 In 2021 the health system increased the financial investment into the assessment and diagnostic service to both address the backlog of long waits (£1.73 m) and increase the recurrent capacity for assessments (an additional £721k) to meet the then known demand this recurrent funding became available to providers from April 2022. Our investment means our assessment process is in line with national good practice.
- 1.3 Increasing referral rates (in part a result of opening the referral process to allow direct referrals from education providers), coupled with workforce shortages, has resulted in demand increasing beyond the current capacity.
- 1.4 The Written Statement of Action (WSOA) describes how we will work together to respond to the OFSTED and CQC inspection of SEND services. This work has commenced and includes refining our current diagnostic and assessment pathway and improving the partnership offer of support made to families by all relevant services, including universal services, prevention and early help, education, diagnostic and assessment services and those providing support following assessment.
- 1.5 The increasing demand for autism and ADHD assessments is a national issue and the challenge to meet this need is being felt by all health and care systems. As a result of this we are working regionally through the West Yorkshire Integrated Care System (WY ICS) to carry out a deep dive into the assessment and diagnosis process across our regional footprint with a view to identifying opportunities for service improvements across the ICS.
- 1.6 We recognise that challenges to our assessment process and timeliness continue to be impacted by a workforce shortage in key specialist fields, again this is a national issue and we have recently improved our recruitment to these roles locally. As noted in this update (2.3.6) this means that we have delivered 277 fewer assessments that we would have undertaken if we had a full complement of colleagues in all roles from April 2022.
- 1.7 The paper also outlines two elements of the *Digitally* Acting Together as One (DATA 1) research programme testing data-led approaches to early identification of children and young people and support in schools, being trialled in the Bradford district. Education, health, care and VCSE colleagues across the Bradford District and Carven Health and Care Partnership (which members may hear described as our place-based partnership) are supporting the development and delivery of the different elements of this research programme.
- 1.8 The DATA 1 programme represents to us the beginning of what we want to be a substantial, longer-term partnership driven by our Born in Bradford research family,

- and including schools, education, care, policing and other services. DATA 1 is characterised by a focus on early, evidence-led interventions, community ownership and 'place'.
- 1.9 We see those characteristics, and the partnership driving the work as vital, to move us beyond 'fire-fighting', to the effective, multi-agency services for neurodiverse children (and adults) we need across our District. We are developing a new Neurodiversity Strategy (all age) to confirm the actions and resources needed to deliver that goal and what social and economic benefits we should expect from meeting it. We would be keen to return to speak to Committee members once we have a first draft.
- 1.10 We would also like to invite members to visit our services and see the work that our broad range of partners are doing to support people once they are diagnosed. This will also give members an opportunity to find out more about the life events that can impact on someone's wellbeing.

2. BACKGROUND

2.1 Following discussions at COSC in November 2021, members asked for an update on progress to address the challenges described during the meeting. This report particularly focuses on how we are targeting an improved timeliness of autism assessments and diagnosis as requested by members of COSC. The purpose of this paper is to provide an update on the work that is currently taking place across the Bradford District and Craven Health and Care Partnership to improve the assessment process for children and young people requiring a diagnosis for autism and/or ADHD.

2.2 The assessment and diagnostic offer for Children and Young People with Autism and/or ADHD

- 2.2.1 The autism/ADHD assessment process is complex and the timescale for completion is variable dependent on the complexity and needs of each individual child or young person.
 See Appendix for a flow chart summary of the assessment process across the Bradford District and Craven
- 2.2.2 In line with national good practice we have introduced an assessment process which combines the assessment for autism and ADHD for children and young people aged over 7 years where they have traits consistent with both conditions, preventing duplication of assessment and the need to be referred between waiting lists. Assessments are provided via an age range pathway as follows:
 - 0-2.5 years: seen be a community paediatrician at either Airedale NHS Foundation Trust or Bradford Teaching Hospitals NHS Foundation Trust
 - 2.5 7 years: seen in the Child Development Service at either Airedale NHS Foundation Trust or Bradford Teaching Hospitals NHS Foundation Trust

Over 7 years: Seen in the Child and Adolescent Mental Health Service (CAMHS) at

- Bradford District Care NHS Foundation Trust.
- 2.2.3 Our assessment services prioritise the assessment of children in care wherever possible.
- 2.2.4 A pilot has commenced to increase collaboration between the paediatric and CAMHS service providers to ensure that ADHD assessments for the under 7s can also be completed alongside autism assessments to reduce duplication of assessments and improve the overall experience of the assessment process for families.

2.3 New Investment to Address Waiting List Issues

- 2.3.1 Following concerns around the increasing length of waits for children and young people requiring an assessment for autism and/or ADHD a business case to increase assessment capacity was approved in September 2021.
- 2.3.2 The funding option that was approved in 2021 was intended to support the delivery of National Institute for Health and Care Excellence (NICE) guidance expectations of an assessment commencing within three months of referral with an expectation at that time that this would be achieved by September 2024.
- 2.3.3 £1.73m of non-recurrent funding was identified to address the backlog of long waits. Contracts were placed with external assessment providers allowing us to purchase over 1,000 additional assessments, many of which are now completed with the remaining in progress.
- 2.3.4 £721,509 of recurrent funding was added to the £1,168,411 already available, to increase our monthly assessment capacity to meet the then demand of 1,078 assessments per year, or 90 assessments per month (with funding made available to NHS providers from April 2022). This took the total recurrent funding available to £1,889,920.
- 2.3.5 The shortage of appropriately qualified workforce because of national shortages of paediatricians, speech and language therapists and mental health professionals resulting in delays in recruitment, has meant that we have not been able to deliver all the expected assessment capacity.
- 2.3.6 The latest available activity data shows that in the period April November 2022 our NHS providers were unable to deliver 277 expected assessments. These providers have worked to increase their assessment capacity in line with the new recurrent funding allocation.
- 2.3.7 As a system we are looking at alternative approaches to address this gap in capacity to ensure we utilise all available funding, including further use of our external assessment providers using vacancy funding.
- 2.3.8 Since early November 2022 recruitment has improved with many staff now in post. This is a positive step, when set against the wider workforce challenges we are seeing across health and care nationally, regionally and locally.

2.4 The current waiting list position

- 2.4.1 Despite a fluctuating month-on-month referral position we have seen a consistent year on year increase in referral numbers, with the highest number of referrals seen in July 2022 with 305 referrals against the current assessment capacity of 90 per month. We did see a slight reduction before seeing an increase to 210 referrals in November 2022.
- 2.4.2 The demand used to inform the business case was calculated using the July 2020 June 2021 data. The increased investment took our funded capacity for diagnostics assessments to 1,078 per year. However, the annual referral number for 2021/22 was higher than predicted in the business case at 1,977. In November 2023 there were 2,630 children waiting to commence the assessment process.
- 2.4.3 There are many complexities involved when seeking to anticipate demand and levels of referral. These can be impacted by external factors including media or social media stories that highlight signs and symptoms of conditions such as autism and ADHD. In addition we have opened up referrals from a broader range of professionals including those working within education settings.
- 2.4.4 It is not possible to provide comparative waiting list data with other areas of the country as this is not data that is collected centrally.
- 2.4.5 However, the WY ICS Deep Dive outlined in section 2.7 has allowed us to take a snapshot of the average wait time in weeks across the ICS. It should be noted that with no central reporting mechanism areas have taken different approaches to reporting which makes it impossible to make direct comparisons.

 See Appendix for wait time in weeks data.
- 2.4.6 Colleagues across the WY ICS have also reported increases in referral rates for assessment and diagnosis of autism and/or ADHD resulting in the deep dive which is outlined in section 2.7.
- 2.4.7 As part of our work to address inequalities in respect of access to services we have opened the referral pathway to allow direct access from educational settings. This was to address issues highlighted by colleagues in educational settings about difficulties they faced in making referrals; and to improve access and timeliness of referral by removing the need for families having to be reviewed by another professional such as the GP, school nurse or health visitor, thereby adding another delay to the assessment pathway.

This has contributed to the increase in referrals outlined in 2.4.1, with the majority of referrals received now being from education which does also result in some seasonal variation in referrals according to school term times. Whilst the increase in referrals creates additional resource pressure on our health and care system, we welcome the increasing referrals through education partners as it shows colleagues understand and recognise signs of neurodiversity.

- 2.4.8 Although we have broadened our referral pathway resulting in increased referrals, our positive diagnosis rates have been above 90% since January 2022 suggesting we are addressing an element of unmet need.
- 2.4.9 In March 2021 we adjusted our waiting list reporting, specifically the waiting list 'clock stop', this changed from referral to feedback and is now calculated from referral to first appointment (to put us in line with other WY ICB areas). In March 2021 our longest wait in weeks (from referral to commencement of assessment) was 158 weeks. As a result of the change of the 'clock stop' and the positive impact of outsourcing to external providers; our longest waits reduced to 88 weeks in November 2022. We are now in a better position to benchmark against other WY ICB areas and hopefully this will help assure members that future updates are using a more standardised approach to data across West Yorkshire.
- 2.4.10 We recognise and understand that waiting for assessments and appointments creates further concern for people. While our benchmarking against other places across the ICS, shows that we are broadly in line with others we want to move further and faster as much as the resource available to us allows.
- 2.4.11 The district waiting list profile breaks down the number of weeks waiting for children on the assessment waiting list. Through the continuing clinical validation of all our long waits we have seen a shift in the waiting list profile and the average wait has reduced from 50 weeks in March 2021 to 36 weeks in November 2022.
- 2.4.12 Referral data highlights the increase in children and young people being referred for a complex assessment including both ASC and ADHD assessment compared to a standard single assessment.
- 2.4.13 We are aware that there is the potential for unmet need in terms of females who it is recognised frequently mask their symptoms (females currently make up a third of referrals) and South Asian families who may decline assessment for cultural reasons. Work will continue across the health, education and care system to better understand and address this issue. We understand that this could lead to an increase in referrals and impact on our assessment processes, including waiting lists.
 - See Appendix for % split of gender of referrals by place across WY ICS.

2.5 Support for families whilst children are on the waiting list

- 2.5.1 We are mindful of the need to ensure that families have access to support whilst children are on the waiting list for a diagnostic assessment. All families are provided with information about autism and/or ADHD, the assessment process in our district and information about and signposting to relevant support.
- 2.5.2 As a result of the SEND Written Statement of Action (WSOA) we are reviewing the offer of support across the system to include self-help, early help and universal services (see 2.6.1). We will work to ensure this is consistently made available to all families as children and young people are added to the waiting list and will also be available on the SEND Local Offer website (https://localoffer.bradford.gov.uk/). We would welcome the support of members in sharing the website through their communication channels such as newsletters and social media.

- 2.5.3 Airedale and Wharfedale Autism Resource (AWARE) are commissioned to provide the Bradford Early Advice Team (BEAT) who have developed and delivered prediagnosis training and support for families whose children are on the assessment pathway. The model uses parent support workers and trainers (from the local community) and was developed with colleagues from Early Help and the Cygnet team. The delivery of the service had to be adapted during COVID but the move to more on-line provision was seen to increase the engagement of dads and grandparents.
- 2.5.4 The CAMHS team in Bradford District Care NHS Foundation Trust was successful in their bid for an Icare Innovation Award to create and develop a website that aims to promote knowledge, awareness and understanding of neurodevelopmental disorders such as Autism and ADHD, and provide access to quality, evidence-based support and guidance. This will be aimed at parents, schools and young people in order for them to be able to create a mentally healthy environment, especially in the period of time between referral acceptance and the initial appointment.
- 2.5.5 The WSOA outlines the need for us to actively involve, understand and learn from the experiences of children and young people, their families and carers. We are working with partners to develop an approach that is based on the principles of co-production. We are establishing a service level agreement and communication charter, working with children and families and involving partners such as the Parents' Forum for Bradford and Airedale (https://pfba.org.uk/).
- 2.6 The special educational needs and disabilities (SEND) Written Statement of Action
- 2.6.1 The SEND inspection which took place in 2022 resulted in a Written Statement of Action (WSOA) requiring us to reduce the waiting times for autism/ADHD assessment and strengthen the support offer whilst waiting for assessment. The following key actions have been agreed with the Ofsted/CQC inspectors:

Activity	Success/Measure
Review the service offer across all key stakeholders to understand the current service pathway and provision for autism and ADHD.	By March 2023 – current service pathway is mapped and all key stakeholders are aware of the current service offer
Review, define and communicate the referral criteria for autism and ADHD assessment to all key stakeholder to ensure that only CYP who need assessment are referred.	By March 2023 – referral criteria is reviewed and signed off and is shared with key stakeholders including children, young people and families.
Using a co-production approach improve service provision, including review of offer across the self-help,	By March 2023 – Self-help, universal and early help pathway is agreed
universal and early intervention offer for Autism and ADHD to ensure support is available whilst CYP wait for assessment and to ensure that CYP	By March 2023 – Evidence of signposting to support whilst waiting for autism/ADHD assessment
and their families receive advice and support as early as possible to reduce the need for referral to specialist service.	By September 2023 – Evidence of the delivery of the support pathway for autism/ADHD from self-help, universal offer and early help services

- 2.6.2 An action plan has been developed to support delivery of the above WSOA requirements.
- 2.6.3 A Senior Leaders Oversight Group has been established (first meeting 27 January 2023) which will link the work of the Autism Business Case Delivery Group and the Clinical Forum with the newly established Children, Young People and Families Health and Care Partnership Board.
- 2.6.4 The outcome indicators that have been agreed with the SEND inspection team have broadened the previous focus on achievement of the NICE guidance 'referral to commencement three-month timescale' (although this is included) and now includes a focus on average and longest wait times. Successful achievement of these outcome indicators is caveated by the need to model and provide the additional resource required.
 See Appendix for Outcome Indicators

2.7 West Yorkshire ICB Autism and ADHD Deep Dive

- 2.7.1 Colleagues from across the Bradford District and Craven Health and Care Partnership are supporting the WY ICS Autism and ADHD Deep Dive.
- 2.7.2 Funded through the Transforming Care Programme (TCP) the all-age review across West Yorkshire aims to:

- Understand the current experience of users and families of Autism and ADHD services. Map existing Autism provision, analyse existing pathways, services, governance, costs in each place.
- Assess place-based and West Yorkshire system wide initiatives and ways of working to see if these are/could improve how the system works and the impact on individuals and families
- Identify projected future gaps/issues to address
- Explore options to proactively address future projected need/areas of work

As part of completing this review, the ambition is to make the best use of the collective expertise to improve services and shape the wider determinants of health; particularly addressing social inequalities faced by neurodivergent people or those seeking a diagnosis of Autism or/and ADHD.

- 2.7.3 This Deep Dive will explore the following areas:
 - Pre-referral access
 - Waiting for assessment/accepted on to waiting list
 - During assessment
 - Post assessment
- 2.7.4 There is an expectation that the deep dive will result in a set of clear recommendations and an action plan for consideration by the WY ICS. We will update members of the COSC on the recommendations and action plan once the deep dive is complete and the recommendations and action plan are available.

2.8 Digitally Acting Together as One: 'Building Neurodiverse Friendly Schools'

- 2.8.1 This is a genuine 'whole system' project that is currently being undertaken as a research trial, designed and delivered by a partnership including our health, education, schools and communities with our research partners from Born in Bradford (BiB), specifically the Centre for Applied Education Research, part of the BiB research family. It was commissioned through the system transformation programmes (previously referred to as Act as One, hence *Digitally* Acting as One).
- 2.8.2 This project aims to build capacity within and around schools, to ensure children with neurodiverse conditions have their learning and support needs recognised and met, earlier in their lives. The project has two parts: in-school; and specialist services, as described below:

2.8.3 An **in-school** element:

- a. using research backed 'screening' tools the 'neurodiversity profiling tool' and an advice bank of proven interventions, developed in Bradford, drawing from the Born in Bradford research
- b. to help teachers, parents and SENCOs identify and meet the learning and support needs of neurodiverse children, in the classroom and the home.

We will be trialling these tools across 12 primary schools over the autumn, winter and spring terms, in three localities: Manningham and Girlington; Holme Wood;

Keighley Central.

The first phase of work will run from w/c 27 February to the end of the summer term.

To note. While addressing the issues around wait times for assessment is essential, feedback from families is clear: they want the right support for their child. The 'queue' becomes the focus of their anger because for many, a diagnosis has been presented as the only way to get that support.

The 'Neurodiverse Friendly Schools' project recognises this. And the evidence from Born in Bradford shows us that schools allow us to identify and respond to these kinds of needs much earlier in children's lives than is possible for most health professionals.

We are assuming that that if parents of neurodiverse children see their child's needs acknowledged and being met effectively in school, without the need for a diagnosis, they may still seek a referral, but their frustration with the assessment process should be reduced.

The Committee should note therefore, that we are not measuring the success of this project against any reduction in referrals. In truth, we should be prepared for some increase in demand, as more neurodiverse children have their needs acknowledged by schools.

Evaluation will run through August and September. It will be carried out by the Centre for Applied Education Research. We are aiming for and will test through our evaluation the impact on outputs and outcomes, including:

- a. The number of children recognised as neurodiverse
- b. The nature of support provided to those children, ensuring all support is evidence-backed
- c. Behaviour and attendance, in and out of school
- d. Education performance
- e. Teacher and parent and child wellbeing

2.8.4 A 'specialist services' element:

Working with professionals and families to map the [currently complex] pathways families need to take through education, health, care services, to build the support package they need.

By working with our research partners we will be able to describe more clearly how this complex model creates costs to the individual and the system.

Then, using the same combination of data visualisation and co-production, we will develop and model proposals to simplify those pathways, by changing the way in which professionals interact with families, in our chosen localities.

By working with our research partners we will be able to set out using data and modelling how the proposed changes will generate efficiencies and better outcomes, for the individual and the system.

2.9 Digitally Acting Together as One: 'Harnessing the power of linked data'

- This project is at an early stage but is important to flag to the Committee. In summary, we know that:
 - across our three NHS trusts, the information clinicians require to carry out an autism/ADHD assessment is collected and recorded differently
 - where a 'whole district' view of information is required for example on the assessment queue – these inconsistencies make it difficult to collate information securely – we are still relying on email and spreadsheets.
 - the information available to clinicians also varies, due for example to inconsistencies in what information is provided by different schools
 - o the collation of this information is often a manual exercise
- At the same time, our 'Connected Bradford' database offers a regularly updated record for all our children, including health data and the routine education data that is useful to but not consistently or efficiently available to clinicians carrying out assessments.
- Connected Bradford is currently accessible only as a research platform.
 Information is pseudonymised, meaning individuals cannot be identified. The platform allows researchers to look at patterns in vulnerability, by location, ethnicity etc, and how different vulnerabilities make it more likely other issues will arise.
- It is possible however, to reidentify children from Connected Bradford. In other words, we have available to us a resource able to automatically, efficiently and consistently, deliver to clinicians the broad set of routine health, education and care data they need for assessment.
- The challenges we will need to address are practical, technical and ethical:
 - We will need to adapt and improve the capture and recording of information onto SystmOne and equivalent systems used by schools etc, to ensure that Connected Bradford can, in turn, draw that information together.
 - We will need to map and then work through the information governance barriers that would currently make it impossible to flow identifiable information in and out of Connected Bradford, to clinicians. In doing so, security of information will be the most important consideration.
- These are significant challenges, but success would be transformative. If we can demonstrate improvements in efficiency, quality and security of the autism

and ADHD assessment process, we will be able to repeat the approach for any other interactions between front line staff and children, where information from other services is or could be valuable

- As an example we also want to make available to clinicians the digital record created by teachers, SENCOs and parents via the neurodiversity profiling tool [above]. The information recorded will describe many of the behaviours and characteristics clinicians need to consider in their assessment, so providing a readout from the profiling took should remove the need to collect that data again, to support the diagnostic procedure.
- We would request time at a future Committee meeting to provide an update on progress and an opportunity for challenge and support.

3. OTHER CONSIDERATIONS

3.1 As all the above work develops it will be shared with appropriate forums such as the SEND Partnership Board and the Children, Young People's and Families Health and Care Partnership Board.

4. FINANCIAL & RESOURCE APPRAISAL

4.1 As this work progresses there are likely to be financial and resource implications. Business cases will be developed and shared with appropriate provider and commissioning forums.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 The governance of this work will sit with the Children, Young People and Families Health and Care Partnership Board.

6. LEGAL APPRAISAL

6.1 Not applicable.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

7.1.1 Not applicable

7.2 GREENHOUSE GAS EMISSIONS IMPACTS

7.2.1 Not applicable

7.3 COMMUNITY SAFETY IMPLICATIONS

7.4 HUMAN RIGHTS ACT

7.4.1 Not applicable

7.5 TRADE UNION

7.5.1 Not applicable

7.6 WARD IMPLICATIONS

7.6.1 Not applicable

7.7 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)

7.7.1 Not applicable

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

7.8.1 This paper outlines service developments that will improve the timeliness of assessment and diagnosis for neurodiverse children and young people as well as enhancing the support offer to these children and their families.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESSMENT

7.9.1 Not applicable

8. NOT FOR PUBLICATION DOCUMENTS

8.1 None

9. OPTIONS

9.1 Not applicable

10. RECOMMENDATIONS

- 10.1 The Committee are asked to note the content of this report and recognise the continuing challenges faced by the assessment and diagnostic services despite the increased financial investment.
- 10.2 The Committee are asked to note and support the work currently being undertaken to develop an action plan to address the requirements of the SEND WSOA and the work being done to closely involve children and young people, their families and carers.
- 10.3 The Committee are asked to note the work being undertaken across WY ICB and to receive further updates as this work develops.
- 10.4 The Committee are asked to note the development of the *Digitally* Acting Together as One programme and to receive further updates at a future meeting. The Committee to recognise that this digital project could lead to a further increase in referrals for assessment.

11. APPENDICES

- 11.1 Included
- 12. BACKGROUND DOCUMENTS
- 12.1 None

APPENDIX

Links to 1.1

What is Autism Spectrum Condition (ASC)?

Autism is a lifelong developmental condition affecting social, communication and imagination skills. People with autism understand the world in a different way to people without autism. How autism impacts on people varies from person to person; however, there are some common themes. For example:

- Autism can impact on how people communicate (verbally and non-verbally).
- It can also impact on social relationships and ways of interacting with other people and the world, and the development of play and imagination.
- People with autism may have a preference for routine and predictability, highly specific and/or strong interests in certain things and sensory sensitivities.

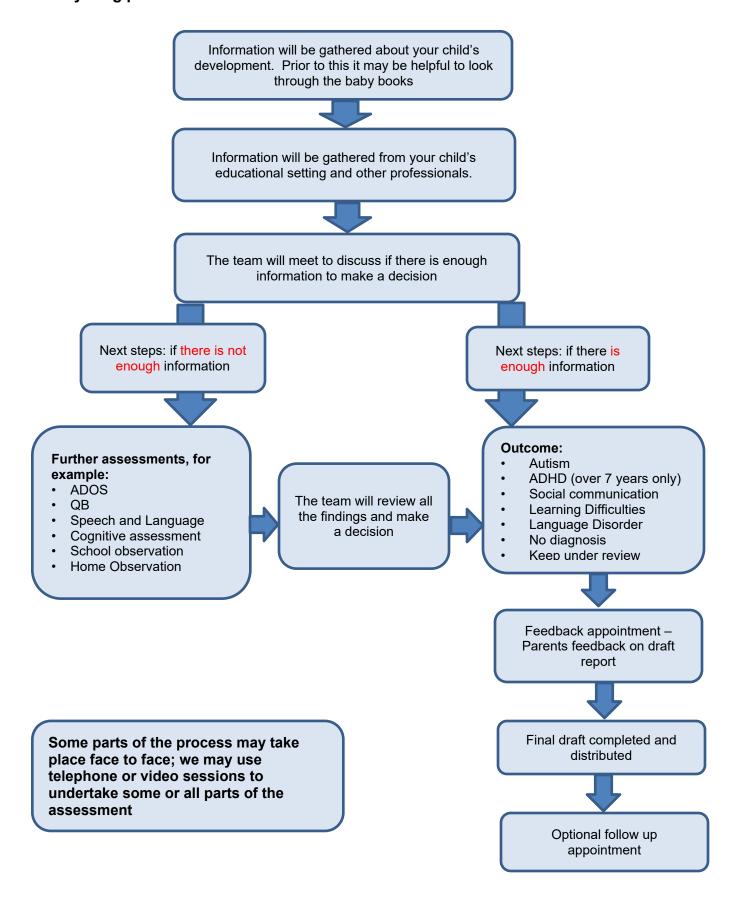
What is Attention Deficit Hyperactivity Disorder (ADHD)?

ADHD is a lifelong condition. The 3 main characteristics are:

- Inattention individuals find it difficult to concentrate and remember information.
- Hyperactivity individuals have a lot of energy and seem constantly on the move.
 This can lead to poor sleep.
- Impulsivity refers to acting without thinking first. People with symptoms of impulsivity are often impatient with waiting their turn or waiting in line.

Links to 2.2.1

Example of flow chart for an assessment – this may vary and is tailored to your child/young person



Links to 2.4.4

Wait times in Weeks WY ICS

Wait times	Bradford dual	Calderdale* dual (referral received not referral accepted)	Kirklees* dual (referral received not referral accepted)	Leeds dual	Leeds ADHD	Leeds autism	Leeds under 5 autism	Wakefield ADHD	Wakefield autism
Average wait in weeks Oct 20 – Mar 22	33.7	36.1	76.4	35.7	34.4	28.9	48	15	20
Average wait in weeks Apr 21 – Mar 22	32.4	40.2	82.1	29.3	25.7	23.4	51.4	14.3	21.9

^{*}Calderdale and Kirklees measure from date referral received rather than date accepted on wait list

Source: WY ICB Deep Dive Information Pack

Links to 2.4.11

% split of gender of referral by place

Gender of accepted referrals	Bra	dford Du	al	Calderdale	Kirklees		Le	eds		Wak	efield
	Dual	ADHD	Autism	Dual	Dual	Dual	ADHD	Autism	Under 5s Autism	ADHD	Autism
Total Count	682	561	1249	349	1264	350	489	1001	639	847	1914
Male	66%	76%	65%	63%	69%	64%	70%	57%	73%	77%	65%
Female	33.7%	24%	35%	36.60%	31%	36%	30%	43%	27%	23%	35%
Non- binary	0.30%			0.60%	0.07%						

Source: WY ICB Deep Dive Information Pack

Written Statement of Action Outcome Indicators – Autism/ADHD

Link to 2.6.4

Outcome Indicators	Current baseline	March 23	Sept 23	Mar 24	Sept 24
Average length of wait in weeks between referral and first appointment at the end of the reporting month (total)	31 weeks (June 2022)	31 weeks	29 weeks	27 weeks	26 weeks
Longest wait in weeks between referral and first appointment at the end of the reporting month (total)	101 weeks (June 2022)	90 weeks	60 weeks	52 weeks	45 weeks
% of referrals for diagnostic assessment started within 13 weeks of referral*	0%	0.5%	3%	6%	12%
Caveat: To deliver the all NICE guidance will be un		•			o achieve
By March 2023 signposting information will be available for CYP/Parent Carers about the support that is available while CYP are waiting for ADHD/Autism assessment		Signposting information available			

^{*}proxy for NICE guidance expectation that assessment commences within 3 months of referral



Report of the Chief Executive Office to the meeting Children's Services Overview and Scrutiny Committee to be held on the 15th February 2023

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Subject: Protecting Children & Vulnerable Adults at Risk of Exploitation

Summary statement:

This report provides an annual update on the information to be presented to the Overview and Scrutiny (Children) regarding the issue of exploitation. It focuses on the strategic partnership response to all forms of child and adult exploitation and how partners from the Bradford District Safeguarding Children Partnership, and the Bradford Safeguarding Adults Board work to drive improvements across the district and hold agencies to account for their work in their area.

EQUALITY & DIVERSITY:

Abuse and Exploitation affects people from all communities, but more victims come from disadvantaged communities. Services are designed to be accessible in communities and to focus on areas of need.

Jenny Cryer
Assistant Director Office of the Chief
Executive

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Portfolio: Children & Families

Overview & Scrutiny Area:

Children Services

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1. SUMMARY

- 1.1 This report provides an annual update on the information to the Council Executive regarding the issue of Exploitation. The Bradford District Safeguarding Children Partnership (BDSCP) scrutinises the district's responses to this and provides a professional challenge to these responses.
- 1.1 This report will focus on the strategic response to all forms of exploitation of Children and Adults and how partners contribute to improving service provision across the district. This ensures that partners work to improve how children and adults at risk are supported and protected and to seek assurance for work in this area. Partners continue to work together to protect vulnerable children and adults through increased collaboration between BDSCP, Bradford Safeguarding Adults Board (BSAB) and the Community Safety Partnership (CSP). This has been achieved through improved awareness and understanding, enabling professionals to recognise and respond at an earlier stage to broader types of exploitation.

2. BACKGROUND

- 2.1 Nationally and locally, safeguarding partners are addressing the emergence of interlinked exploitation themes, including Serious & Organised Crime, County Lines, Cyber-enabled crime, Modern Day Slavery and Criminal Exploitation, as threats in a similar way to the same conversations in the last decade around Child Sexual Exploitation.
- 2.2 This is not only within children's safeguarding arrangements but also recognising that vulnerable Adults can be exploited in the same way. These complex safeguarding matters impact the Bradford District Safeguarding Children Partnership (BDSCP), Bradford Safeguarding Adults Board (BSAB) and the Community Safety Partnership (CSP). Scrutiny and quality assurance have also increased through the media, inspections and inquiries locally and nationally.
- 2.3 In Bradford the response to exploitation is led by the All Age Exploitation Sub Group of the Safeguarding Partnership.
- 2.4 Key strands of work include:
 - The All Age Exploitation Sub Group
 - Exploitation Hub
 - Non recent CSE prosecutions
 - Education and safeguarding in schools
 - Supporting victims
 - Cyber CE
 - Missing children and the Philomena Protocol

2.5 The All Age Exploitation Sub Group

2.6 Bradford's All Age Exploitation Group has been established as a sub-group of both Children and Adult Safeguarding Partnerships and the City's Community Safety Partnership specifically to focus on the issue of exploitation. It is supported by the

- Safeguarding Business Unit and chaired by a Senior Police Officer who ensures a focus on the exploitation of children and adults, including those in transition to adulthood.
- 2.7 The Group is full of committed professionals from various sectors, including health, social care, policing, education and third sector organisations such as Barnardo's and the Bridge Project. The purpose of the group is to get partners working together as effectively as possible to understand, prevent and combat exploitation, whilst focusing on the most effective support to those subject to various types of exploitation.
- Over the past year, a key piece of work has been the creation of a Bradford Partnership Exploitation Profile. In September 2021, over 100 partners from a wide array of partner agencies and organisations and some people with lived experience were brought together at Valley Parade for an all-day facilitated workshop. This allowed the harvesting of information, experience and expertise regarding the current harms and threats in Bradford and emerging issues of concern. There was also an exploration of what the partnership is doing well and where we can improve. Over the following months, with the support of analysts from West Yorkshire Police, a small task and finish Group analysed the data from the event and a range of other data from various sources to create an exploitation profile for Bradford.
- 2.9 The expanded task and finish group, which has representatives from various sectors, is now developing a City-wide Exploitation Strategy and Delivery Plan, will be formally launched in early 2023. This not only takes account of the recently produced exploitation profile but also the product created as a result of a mapping exercise of provision for those subject to exploitation in Bradford. The mapping exercise, initiated by the All Age Exploitation Group, was completed with the assistance of a PhD student at Huddersfield University and identified gaps in provision.
- 2.10 The regular meetings of the All-Age Group and the energy of the business unit and Chairs team have helped create genuine momentum amongst partners in focussing on exploitation. There has been a willingness to share and receive learning from local practitioners and the involvement of external contributors from across the Country. By way of example, this has included an understanding of the work of the Lotus Project in the use of Navigators to support adults subject to exploitation, an exploration of financial abuse led by the West Yorkshire Joint Services Team, a focus on online exploitation including ways to better support victims and the families of perpetrators amongst numerous other aspects of exploitation. There has also been regular support and oversight of the development of the recently formed Bradford Exploitation Hub. The Chair of the All-Age Group was honoured to speak to about 200 front-line workers at the recent Exploitation Hub launch event.
- 2.11 The Group has also been keen to reflect on how it can continually improve its effectiveness. This has included a session dedicated to such a review, where feedback was received from Group members and considered. An indication of the momentum that has been seen is the number of organisations and individuals seeking to join the Group. Whilst membership has grown, we are now at the stage there is a danger that the Group does become unwieldy, and the interactive nature could be impacted. Therefore, we are working with interested organisations whether

their contribution could be realised through one of the other subgroups.

2.12 Exploitation Hub

- 2.13 Following a substantial investment of nearly 1 million pounds, on the 16th of June 2022 the new multi-agency exploitation hub was launched. The hub now consists of several specialist practitioners from a variety of partner agencies that have enhanced and built upon existing practices across the district and is led by an experienced Head of Service who are working together to reduce and mitigate the risk of children and young adults being involved in or being subject to exploitation.
- 2.14 The multi-agency work and the development of the Hub are now in place. Multiagency policies and procedures around both exploited and children who go missing have been reviewed and refreshed. The protocols for Exploitation and Missing are currently being published online.
- 2.15 The Exploitation Team are now co-located and fed into the district's ambitions to have an all-age exploitation plan. This has led to investment by adult services to place an adult exploitation worker in the Hub for the cohort of 18 years old and above who may still be vulnerable and ensure robust transitional planning for children in our care.
- 2.16 Transitional Safeguarding has been a priority area for the partnership
- 2.17 Exploitation does not stop when a victim or potential victim turns 18. Young people need ongoing support and safeguarding as they reach the legal age of adulthood.
- 2.18 Nationally, regionally and locally, the transition into adulthood has been raised as a significant gap in safeguarding provision for several years. To support this work locally, an investment in a resource of an adult social care worker has been allocated to work with and work alongside the exploitation hub to focus primarily on the identified age range of 18-25-year-olds who fall outside the legislation for adult social care provision
- 2.19 Distinct strengths exist in multi-agency and multi-disciplinary working. As of early September 2022, the Police Child Vulnerable to Exploitation (CVET) team is colocated in the Hub alongside the exploitation social workers, exploitation nurses and the Education Safeguarding Officer. Previously, the team were virtually co-located and working intensively together. The anticipated benefits include improved information sharing and intelligence gathering, leading to more opportunities to promote safety, improve the outcome for children and young people, and intervene at an earlier stage.
- 2.20 The Police CVET is a considerable resource of 22 officers CVET including investigative officers, joint intervention officers, and a Detective Sergeant and led by the Detective Inspector responsible for the Integrated Front Door and Exploitation.
- 2.21 Health has recently increased its investment into the Hub by providing a second nurse focusing on children affected by exploitation. To address waiting lists for health intervention, the nurses have established a drop-in in partnership with

- Barnardo's and PACE workers work with parents and this is a restorative approach to trauma recovery and enabling practice for parents to support their children.
- 2.22 The Hub also benefits from an Education Safeguarding Officer responsible for information flow and training in schools; this officer provides a vital role in working with parents around EHCPs and managing challenging conversations between social care and education; and is linked into the RAM meeting (RAM explained below). In partnership with the Children's Society (children's voice), the officer is being trained to train the trainers with a programme to target all the Designated Safeguarding Leads in schools in the areas of highest need initially, then to move on to other areas.
- 2.23 The Hub also tackles all forms of exploitation including online exploitation of children as well as more conventional examples of sexual harm. The hub offers additional support to children, families, wider communities, and partnerships both directly and virtually to help them reduce the risk of impending sexual harm and support recovery through trauma informed practices.
- 2.24 The Youth Service in Bradford has direct links with the Exploitation Hub with the Youth Commissioner attending MACE and RAM. Examples of youth work activity include: working with young people until age 25 as required; working very closely with young people out of hours; Police deterrent car, street reach locations, different hours, A and E presence, 1:1 direct work and link into safeguarding plans for the child; intense support; diversionary activities, youth dog, boxing, apprenticeships, drugs worker. This Breaking the Cycle approach benefits from a highly aligned and strong working relationship. Additional detail on Youth Service engagement can be found later in the report
- 2.25 There is an equally strong story with engagement and alignment with the Youth Justice Service.

2.27 Multi Agency Forums – RAM, MACE and Mapping Meetings

2.28 The series of multi-agency meetings are designed to enable effective partnership working to ensure a direct line of sight, early intervention and prevention for those children and young people most at risk of or experiencing exploitation. These meetings are explained in the following paragraphs.

2.29 RAM

2.30 The Risk Assessment Meeting (RAM) is a multi-agency meeting which triages information/risk assessments submitted by professionals, reviews the risk level for victims of Child Exploitation and identifies appropriate support services to meet the needs of the victim/potential victim. RAM meets daily and discusses up to seven young people at each meeting. RAM has Police and social care representation at the meeting health and education rep on the minutes. Social Workers presence at the RAM

2.31 **MACE**

- 2.32 The Multi-Agency Child Exploitation meeting (MACE) coordinates support and interventions to reduce the risk of child exploitation (CE), where risks are considered to be at medium/high risk of being exploited. MACE is managed and administered through the Partnership Exploitation and Missing Hub and meets every six weeks.
- 2.33 Any children or young persons considered 'high risk and stuck' are discussed at our 6 Weekly MACE (Multi-agency Child Exploitation) panel. Senior managers from Health, Education and the voluntary sector are also present. Leaders can 'unblock' any resource issues and provide senior manager oversight so young people can access timely support. Partners now produce combined MACE data and analysis and have recently expanded this to include youth justice and education data.
- 2.34 The meeting is structured into two sections so that local issues, demographics and data are considered alongside specific cases.
- 2.35 The first section considers district-wide focus and analysis of data, information and intelligence sharing. In this section, each agency provides and presents key information from their agency's perspective. This directly links to multi-agency planning around disrupting and targeted work to prevent or reduce identified risks.
- 2.36 The second section of the MACE meeting enables specific named young people and their families to be presented by the lead practitioner to the forum. Upon doing so, all agencies offer their support and services to reduce risks for the child and their family, as well as unblocking factors preventing positive outcomes from being achieved promptly.

2.37 Mapping meeting

2.38 Mapping Meetings take place to provide multiagency focus on two or more children or young people – bringing practitioners together for complex mapping conversations resulting in disruption and safety planning. The learning from mapping meetings helps to inform on hotspots of exploitation activity.

2.39 Non recent CSE – Operation Dalesway – West Yorkshire Police

2.40 What is the current demand?

- 2.41 There are currently 14 live complex non-recent CSE investigations underway in Bradford District under the policing operational name of Operation Dalesway. These are at various stages, from initial scoping to awaiting trial.
- 2.42 Since the last report, two investigations have been finalised, one re-opened, and five started. Initial scoping of the new investigations suggests that they will be smaller in scale than earlier ones, with fewer suspects involved.
- 2.43 Since the last report, eight offenders have been sentenced to 90 years in prison. There are currently 37 suspects charged and due to stand trial.

2.44 What is the anticipated future demand?

- 2.45 While it is hard to predict future demand, the West Yorkshire Police Force Management Statement forecasts that demand is levelling off. Although the number of open investigations has increased over the last period, the new investigations look to be of a smaller scale. A number of the open investigations are listed for trial or are already well advanced – most of the work in these investigations has been completed.
- 2.46 Police do not see a significant new wave of reports, but as the threat has evolved and changed over time, the emergence of new demand cannot be ruled out.

2.47 What is the current capacity/capability to meet demand?

- 2.48 The non-recent CSE team at Bradford has sufficient resources to meet the current demand. Most police officers and staff are trained and accredited to PIP (Professionalising the Investigation Process) 2 level. Some will attend a new 'Serious Sexual Abuse Investigators Development Programme'.
- 2.49 Following a review of safeguarding demand, capacity and capability across the force, policing resource has increased in safeguarding.
- 2.50 In the non-recent CSE investigation arena, there have been slight changes to the structure. There is now a Senior Investigating Officer (DCI rank, PIP3 major crime accredited) dedicated solely to non-recent CSE investigations in Bradford District. A PIP 4 accredited SIO provides strategic oversight of all non-recent CSE investigations across the force and reports to the Chief Officer Team.
- 2.51 The force has recently invested in dedicated police staff researchers and analysts to support non-recent CSE investigations.

2.52 What notable practice / good work is occurring?

- 2.53 The CPS and the non-recent CSE team have a close working relationship. Early in the investigation, there is consultation with the CPS. The significant cases may be dealt with by the newly formed CPS Organised Child Sexual Abuse Unit (OCSAU). Smaller cases are dealt with either by the regional Complex Case Unit (CCU) or RASSO (Rape And Serious Sexual Offences) unit.
- 2.54 In all cases, the CPS provides early investigative advice early in the investigation, which assists in focusing evidence gathering on those offences where a prosecution appears viable. The SIOs meet regularly with the management of the CPS teams to discuss progress with investigations.
- 2.55 A 'Gold' partnership group, consisting of strategic statutory partners from Police, the Local Authority and colleagues from Health, meets quarterly to oversee the partnership response. This includes verifying that sufficient support measures are in place for victims.
- 2.56 Officers in the team are committed to providing exemplary care and support to victims. This includes ensuring that "special" measures are offered to victims at Court.

2.57 Using an intermediary to assist a victim in giving evidence over a video link has been positive.

2.58 Education and safeguarding in schools

- 2.59 National research demonstrates how the continued engagement of exploited children in Education is crucial to promoting disruption, safety, and better outcomes.
- 2.60 The Education Safeguarding team placed a specialist Education Safeguarding Officer (ESO) into the Multi-Agency Exploitation Hub to strengthen relationships between Social Care and Education. The role of the ESO is to provide support and challenge to schools across Bradford when an exploited child is on the brink of exclusion. Exploitative traumas can manifest in many ways, including in the child's behaviour which can be challenging for agencies to support in isolation. By adopting a shared responsibility, professionals have ensured that exploited children continue to access learning alongside supportive interventions.
- 2.61 The Bradford district has 16 Safer School Police Officers. These officers are fully trained in recognising and identifying children and young people who may be a risk of exploitation and other contextual safeguarding issues.
- 2.62 To enhance the awareness of exploitation within the educational settings schools across the Bradford District have access to the aware winning Ineqe Safer Schools APP. The APP is available to staff, parents, carers and pupils to have :-
 - Access to credible, contemporary relevant information
 - Age-appropriate resources
 - · CPD courses for school staff, including Governors
 - Customised communications through push notifications
 - Advice, guidance & signposting to seek help
 - Artificial Intelligence Prompts

2.63 Supporting victims

2.64 The Youth Service

The Youth Service remains committed to its work around exploitation in all forms. Exploitation is a key element of our safeguarding children processes, and all staff are trained in safeguarding and contextual considerations through initial inductions and onward training.

Our locality-based youth provisions, in open access and street-based work, consistently support young people's information, advice and guidance to raise awareness around exploitation. This agenda is to ensure young people gain critical thinking skills and that they can identify when people do not have their good interests at heart. The area-based teams are well placed to identify early those young people who are vulnerable to exploitation or who are being actively exploited. The teams work directly with the young people by linking with other agencies and ensuring that the right support is given to each young person so that actions can be taken to protect the young person and disrupt the perpetrators of their exploitation.

- 2.66 Youth work practitioners are committed to ensuring young people develop voluntary solid relationships with youth workers, empowering young people to support them to make safe choices and consider safety when out with friends, in public spaces or travelling around the district.
- 2.67 Our youth work teams in the areas are working 1-1 with many young people through our "Youth in Mind Buddies" work. This work primarily focuses on young people with poor mental health. In mental distress, those who are anxious or isolated and through this work, we have supported several young people regarding their vulnerabilities to exploitation, particularly in some of our new communities where there are cultural differences. Working around what is acceptable and what constitutes a healthy relationship is a pivotal contributor to helping young people begin to see relationships of power imbalance and coercion and control.
- 2.68 The Youth Service is working with partners in key hotspot areas –this work continues to actively target and support young people to reduce their vulnerability to exploitation. This includes empowerment work to help increase reporting of hate crimes, verbal and physical abuse and has work that is targeted towards single genders and communities of interest to ensure the interventions are bespoke to meet the identified need.
- 2.69 The Youth Service has continued to develop work that supports criminally exploited young people. Breaking the Cycle work was identified by Ofsted in its recent visit as being effective as an intervention provider, something equally endorsed by the independent evaluations undertaken by Warwick University and the Violence Reduction Unit.
- 2.70 Breaking the Cycle, as a Youth Service project, has further developed work that identifies those young people who are vulnerable to exploitation and actively exploited. Youth Work practitioners who work on this piece of work are all highly skilled youth workers with specific trauma training to support their understanding of children and young people who have had adverse childhood experiences. Their delivery is undertaken against a resilience framework used to evidence the distance travelled by the young people.
- 2.71 The Service is committed to identifying victims as early as possible and, as such, has committed itself to work "upstream" of the core Breaking the Cycle work. This has seen youth work practitioners working in the BRI Accident and Emergency Department, working with young people who present at A&E due to an incident of violence, a sharp instrument injury or where medical or clinical staff are concerned that the story about the injury does not match the harm they are seeing. This work provides intervention opportunities that start in A&E but continue into treatment areas and inpatient wards. Also, it gives onward support to young people once they are discharged from the hospital. This work is held in high esteem by the funder. It has proven to be very effective in getting alongside young people in a moment that is considered a reachable moment to better support and understand what is going on for a young person. The hospital-provided provision works seven days a week, 365 days a year. This has been very successful as a pilot project and has secured another year of funding to ensure this work can continue.

- 2.72 The Breaking the Cycle team also work four nights a week alongside police colleagues as part of a response to incidents of violence on the street. This deployable mobile resource directly responds to calls for Service from police and the out-of-hours emergency duty team for Children's social care. They will also undertake follow-up visits to individuals involved in incidents of violence to reduce the likelihood of reprisals. In cases of child-to-parent violence, they have a role in helping to calm tensions and reduce placement breakdowns. The team will undertake initial interventions and provides onward support and work to address any identified issues.
- 2.73 We have youth work practitioners working within the refugee communities, providing targeted interventions and activities for young people who are new to the UK and are part of the Home Office resettlement programme. This work supports young people to understand better and spot signs of exploitation in all its forms and build their resilience.
- 2.74 The Youth Service continues to support the development of exploitation services across the district and plays a vital role in the ever-developing integrated exploitation hub. The Exploitation Hub is working hard to become a centre of excellence in respect of joined-up working across services and supporting victims, tackling exploitation locations and disrupting exploiters. This sees the Breaking the Cycle team working with health, education, social care, Barnardos and police colleagues daily to manage risk and flag young people identified as being at risk of / who are being actively exploited. This process ensures each young person has their risks appropriately managed and monitors responses to ensure interventions are effective. Where appropriate, the team will also make referrals to the National Referral Mechanism, a national framework for identifying and referring victims of modern slavery. A young person who receives conclusive or positive grounds conclusions will be flagged within national police databases ensuring they are recorded as exploitation victims. Where concerns around the exploitation risks escalating, or where young people are 18+, their flag status is discussed at the MACE meeting, a strategic meeting attended by Youth Service management that looks at more creative responses to support or disrupt exploitation for exploitation individuals.
- 2.75 Nationally the Service continues to work with the NSPCC, BBC Childline and Missing People UK in further developing the Service. "Is this ok?". Initially developed and piloted in Bradford, the success of this free, confidential, anonymous chat service for young people 13-18 years is now being rolled out across more local authorities.

2.76 Barnados-Turnaround Project

Turnaround meets a need for specialist trauma-informed support to young people assessed by the Child Exploitation Team as being at moderate or significant risk of CSE. The young people referred have been affected by or are suspected to be affected by CSE and the trauma associated with this. Many have experienced multiple and complex trauma. The service offers:

Specialist assessments completed in collaboration with the young person

- Plan of support identifying strengths and protective factors; how to build on these; and worries and vulnerabilities; and how to address these. If the risk is assessed as higher or lower than when referred, feedback to RAM/CSC/support network is provided
- Regular reviews of the support offered
- Support tailored to the needs of the individual
- Individual support is delivered using a trauma-informed approach, exploring topics such as coping strategies and grounding techniques, relationships; grooming; sexual health; consent; the law, and managing risk and safety strategies.
- Support to access sexual health services
- Specialist support through the criminal justice process. This can involve supporting young people to meet with the police to give police statements; and supporting them through court.
- Specialist consultation and support to other professionals supporting young people at risk of CSE
- Attendance at multi-agency meetings
- Information and intelligence sharing to disrupt child exploitation
- 2.77 Turnaround works in partnership with the CE Hub and attends the daily RAM meetings. The service continues to take a flexible approach led by young people's support needs; for example, direct contacts have been carried out in a range of settings, including; on doorsteps, in gardens, in houses, in community settings and at Listerhills.
- 2.78 In 2021/2022, Turnaround has seen an increase in referrals for young people from the Eastern European (17% overall referrals) and Roma communities (13% of overall referrals) where there are trafficking/modern-day slavery concerns. This has seen a reduction of White British referrals from over 50% in 2020/2021 to 40% in 2021/2022. Turnaround has also seen an increase in young people using Class A drugs, including crack cocaine and heroin. This includes an increase in intravenous drug use. The age range of referrals for young people at significant risk range from 17 years old to as young as nine years old.
- 2.79 Since June 2022, Turnaround has seen a significant increase in referrals, and consequently, this has left several young people waiting for support. The service has responded by increasing the caseload of practitioners and providing weekly contact with the young people awaiting support. Within the weekly contact, face-to-face visits are arranged with the young people to start building a relationship with the service and conducting an assessment to establish an accurate evaluation of their needs. Turnaround is developing a weekly group work support session for moderate-risk young people, which will be in partnership with health.
- 2.80 This year has seen the implementation of a weekly CSE Health Drop-In hosted at Listerhills (Barnardo's office). This is an opportunity for young people from Turnaround and Trusted Relationships to engage with health professionals to meet their health and wellbeing needs. This new provision has already seen around 20 young people engaging since May 2022 who have previously refused to access sexual health services, resulting in receiving treatment and contraception. The Turnaround staff and health also integrate wellbeing activities to support young people's emotional and mental wellbeing.

2.81 On exit from the service, young people's risk status is consistently reduced by the Child Exploitation Multi-Agency Team as a result of young people's engagement with their dedicated Turnaround worker. This has been evidenced in **case studies 2**, 3 and 4 (Appendix A)

Barnardo's have been informed that the Turnaround project will be decommissioned at the end of March 2023. Referrals into the service stopped from the exploitation hub in November 20222 and allocations of a practitioner in December 2022. All young people open to the service are currently being supported with a positive ending.

2.82 Trusted Relationships (TR):

The Trusted Relationships programme reduces young people's involvement in exploitation and abuse as victims and/ or perpetrators through:

- increasing the consistency and quality of support for children and young people at risk of becoming involved in exploitation and abuse;
- improving trust between young people and adults who are there to support them:
- developing protective factors that build resilience in children and young people (including support networks; positive role models; a sense of purpose; self-esteem; critical thinking skills).
- 2.83 Trusted Relationships has two distinct strands; one-to-one preventative and targeted group work in Bradford East (from April 2022, this was extended to all Bradford District).
- 2.84 The programme is an established (Home Office Funded from 2018) and successful early intervention service with specialists and experienced practitioners. It has continued to have a positive impact on reducing the risk of CE for young people by supporting them to:
 - Provide intensive 1-1 support to ensure risk does not escalate
 - Support engagement in education, health and youth provisions
 - Targeted group work in schools across the district
 - Community activities during the school holidays
 - Opportunity to reconnect with Trusted Worker for advice/guidance when they feel vulnerable and need advice.
- 2.85 TR continues to provide stability and reassurance to young people at their most vulnerable periods, including providing intensive emotional support when young people are removed from their families. This programme's significant impact on young people within a year is highlighted with the overall reduction in risk through the services support was 75% (based on 103 young people). This has been evidenced in **case study 1.**
- 2.86 The funding for TR has not been extended, and as such, the service is due to come to an end on the 30th of September, 2022. Referrals into the service stopped from the CE Hub and allocations of a TR practitioner on the 30th of June 2022. All young people open to the service are currently being supported with a positive ending.

2.87 Cyber Exploitation

Bradford District Polit and Cyber Team

- 2.88 Child sexual abuse and exploitation continue to be identified across the district. This is particularly true of online abuse wherever-more-sophisticated digital tools protect anonymity and where apps encourage children to engage in risky behaviour. This has been the subject of increased concern when the district was in increased lockdown due to Covid-19, where children isolated at home are at an even higher risk of being targeted by online groomers for abuse.
- 2.89 Law enforcement agencies, including the Police, are working with partners from the industry and voluntary sector partners, both in the UK and abroad, to raise awareness and support children and parents. TBP has published guidance for parents on the Safer Bradford website for advice about signs of this form of abuse.
- 2.90 Bradford Polit Team has successfully executed 120 warrants in the last year. They have also dealt with over 220 offenders in the Bradford District for various child sexual offences. The team acts on the relevant Partner Agency's intelligence to identify and locate offenders.
- 2.91 Bradford District Cyber Team, which has been in place since 2015, has significantly contributed to the educational sector and targeted establishments that have vital connections to early intervention, safeguarding and other vulnerabilities.

2.92 Missing children, Return Home Interviews and the Philomena Protocol

Our partnership response to missing has been strengthened. For example, Missing Coordinators are aligned to Residential Homes; we have bespoke learning and development packages for LA staff and partners; we have advice, information, and a direct line for the district.

2.93 All missing children will have a return home interview to explore the missing episode and future safety. Return home interviews (RHI`S) for looked after children are currently completed by our commissioned service Voice ability. For children not looked after, the RHI's are conducted by our in-house Missing Officers, who are attached to the Exploitation Hub. By including the missing team within the Hub, the team are able to explore the link between children experiencing exploitation and repeat missing episodes.

2.94 Return interviews

2.95 The Children's Society is the commissioned Return Interview service. The majority of children and young people are offered a return interview in time – 90%. Where this is not the case, it is because we feel it is not appropriate to complete them at that time (within 72 hours). Reasons for this include: the child is suffering with MH in crisis; in hospital; in police custody; or has reported abuse, and we are undertaking other assessment's 24/7. Most of these children are open to social work, and we ask for the interview to be completed alongside any other assessment. Quality of practice is through an ongoing approach and is integral to work. For example,

before sign-off, all screening of missing and exploitation contacts, risk assessments, return interviews, and missing trigger plans (Philomena) are reviewed by Team Manager, Practice Supervisor, or Senior Missing Practitioner. Also, individual audit cases and dip samples as directed strategically via MACE or Head of Service.

2.96 Philomena Protocol

- 2.97 Bradford has embedded the Philomena Protocol specifically to support, understand and respond to children in residential care reported missing, mitigate high numbers of missing periods, and tackle why children and young people go missing. The rolling average of missing episodes for children in care and not in care is reducing.
- 2.99 The protocol has allowed closer working relationships between West Yorkshire Police and our care providers. Children Social Care have been invited to guest speak at the National Policing College conference on the 23rd May on this issue, demonstrating that partnership work in this area is deemed a centre of excellence for child exploitation and joint working between Police and Children Social Care
- 2.100 The number of children in care missing from residential placements has reduced significantly since the launch of the Philomena protocol. The protocol ensures every child placed in a residential provision has their own personalised missing trigger plan, irrespective of whether they have the propensity to go missing. The plan is agreed upon with the Social Worker, Residential provider and West Yorkshire Police upon a child's initial placement. It sets out the child's networks, frequent locations, key contacts and a photograph. In addition, several reasonable actions agreed that the placement must carry out before the child is reported as missing. Below is an extract from one of our young people regarding their experiences with the protocol:

"Knowing that the staff will look for me if I don't come home now makes me feel wanted and loved. This is the first time I have ever felt this way whilst in a care home."

2.101 The principles adopted in the protocol expect care providers to exercise normal parenting responsibilities and undertake reasonable actions to establish the child's whereabouts. For example, a child late home from a party should not be regarded as missing until the carer has undertaken enquiries to locate the child. Our data regarding the number of children missing from care tells us that the protocol has a positive impact. In addition, we can see resources being deployed for missing children at the right time, ensuring interventions are efficient and effective.

2.103 Adult Exploitation Awareness

The Bradford Safeguarding Adults Board Adult Exploitation Awareness Conference was held on 23 November 2022. The conference attracted over 100 delegates and was oversubscribed. The conference had several local and regional speakers who provided professionals with opportunities to challenge, learn and showcase the work across the district and included service user voice experiences. This conference was led by BSAB and had service user voice experiences.

2.104 This conference was designed and developed by Darren Minton Safeguarding Partnership Business Manager with the support of BSAB and the Business Unit. The feedback and evaluation have been highly positive and was a great success. It attracted positive social media feedback. As a consequence, the conference identified a number of other opportunities of awareness raising and preventative activity through additional training of council officers such as street wardens etc.

3. OTHER CONSIDERATIONS

> There are no other considerations

4. FINANCIAL & RESOURCE APPRAISAL

There are no financial implications

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 The protection of Children and Vulnerable Adults is the highest priority for the Council and its partners when considering the implications of exploitation, as is the provision of services to support those who are victims of this abuse. Failure to protect and provide appropriate services significantly increases the risk to Children and vulnerable Adults in the District. It would also lead to significantly reduced public confidence in Bradford Council, West Yorkshire Police and other partners, as has been demonstrated in some other Districts.

6. LEGAL APPRAISAL

- 6.1 Concerning the protection of children and vulnerable adults, the report engages many legislative areas, including the Children Act 1989, Children Act 2004, Children and Families Act 2014, Children and Social Work Act 2017 and Working Together Guidance 2018, Care Act 2014, Modern Day Slavery Act 2015, Forced Marriage (Civil Protection) Act 2007, Mental Capacity Act 2005, Equality Act 2010, and Safeguarding Vulnerable Groups Act 2006.
- 6.2 This report is, of necessity, a very high-level description of key activities undertaken by the Council in order to protect the members of the local population who are at risk of unlawful exploitation due to their vulnerability. The statutory safeguarding duties of the Council under both the Care Act and the Children Act are of preeminent significance and involve complex co-operative activities with both local and national partners. Effectively discharging these duties requires their integration into all the other activities undertaken by the Council. For this reason, any list of specific statutory provisions must be qualitied by the need to consider the practical effect of each and specifically whether it may lead to or facilitate unlawful exploitation.
- 6.3 The exchange of information with other statutory or involved agencies to facilitate measures to combat exploitation is a permitted form of data processing but requires the Council to undertake risk-assessments to ensure that the correct level and detail of information is communicated.

7. OTHER IMPLICATIONS

There are no other implications

7.1 SUSTAINABILITY IMPLICATIONS

None

7.2 GREENHOUSE GAS EMISSIONS IMPACTS

None

7.3 COMMUNITY SAFETY IMPLICATIONS

- 7.31 The exploitation of Children and Vulnerable Adults is a criminal offence. The consequences of exploitation can be long-standing for the victim, and there is growing evidence that CE victims are over-represented among young people coming to the attention of police services as potential offenders. In addition, exploitation has lasting consequences for families of victims and perpetrators and has potential implications for community relations.
- 7.32 The Community Safety Partnership (CSP) currently oversees the commissioning of funding from the passporting of funding from the West Yorkshire Deputy Mayor for Police and Crime against critical priorities, including CSE and broader exploitation themes.

7.4 HUMAN RIGHTS ACT

7.41 Exploitation is a wide concept; and there is no direct provision that deals with it in the Human Rights Act. The abusive or criminal exploitation of vulnerable people, whether they are adults or children, will inevitably breach specific human rights. Where the Council becomes aware of this it will have a duty, as a public body, to take all proportionate steps to prevent such abuse and to enable all persons to effectively assert their human rights. The arrangements made by the Local Authority and partners are intended to both prevent the human rights of children, young people and adults being breached and to enable those right to be effectively asserted.

7.5 TRADE UNION

None

7.6 WARD IMPLICATIONS

It is recommended that each Area Committee receives an update report regarding exploitation response in the next 6 months.

7.7 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)

None

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

- 7.81 National and local evidence shows that children who are looked after by the local authority are more likely to become victims of Child Exploitation than other groups. This means that concerning safeguarding and corporate parenting responsibilities, partners must understand the safeguarding risks facing children, especially in relation to Child Exploitation.
- 7.82 The current cost of living crisis creating further poverty can a factor in children and vulnerable adults being at risk due to the stresses it creates in families and the limitations it places in choice, thereby making individuals more vulnerable to exploitation.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

7.91 Sexual and Criminal Exploitation work requires partners to manage confidential matters and data under GDPR regulations per individual agency guidelines. There is no sensitive data included in this report that needs a Privacy Impact Assessment.

8. NOT FOR PUBLICATION DOCUMENTS

Nil

9. OPTIONS

None

10. RECOMMENDATIONS

- 10.1 That the Members of Children's Services Overview and Scrutiny committee note the report;
- 10.2 That the Children's Services Overview and Scrutiny committee commit to working closely with partners to continue to raise awareness of exploitation of both adult and children;
- 10.3 That the Overview and Scrutiny committee are provided with an update report by the partnership in 12 months' time.

11. APPENDICES

APPENDIX A – Case studies (Barnados & Hub)

- Case Study 1
- Case Study 2
- Case Study 3
- Case Study 4
- Case Study 5

APPENDIX B – Local Data

12. BACKGROUND DOCUMENTS

Nil

Case Study 1

B was referred to Trusted Relationships for 1:1 after concerns were highlighted by residential staff relating to B

- Speaking inappropriately to unknown older males via social media.
- Sending indecent images to older males via social media.
- Using sexual language and sexual gestures towards staff and young people
- Exposing herself in public places as well as within the residential unit
- making allegations of a sexual nature about residential and school staff

B could be described as having no sense of personal boundaries, both physically and psychologically with other people, B has SEMH needs and a learning delay which makes B extremely vulnerable to the risk of exploitation.

Professionals around B were contacted and were able to gain contact with B through their support. Initial activity and information packs were sent out but was apparent that B struggled to communicate and engage via phone calls, so face-to-face session were organised at B's educational provision.

Challengers were had around engagement and trust of professionals however after continued relationship building B engaged in support and covered key themes. From the support, B was able to be 'settled and engaged'. Peer relationships had began to be formed and B's confidence and self-esteem improved. B said:

'Thank you for bringing me out to do activities... thank you for taking me to do horse riding and everything... I don't know where I'm going but they better always have horses'.

Case Study 2

Barnardo's Case study - Child S

Risk flag at referral – significant. Risk flag as closure – emerging

S's referrer was around CSE and CCE. Key issues were around CSE, missing and breakdown of family relationships as well as education concerns.

S was cautious of professionals and Turnaround Worker (TW) spent time to build a positive relationship with her. Session was completed with focusses around key themes of healthy relationships, trust, managing risk, safety strategies, and self-esteem. Support was tailored to meet her learning needs.

Emotional support, advice and guidance was also provided to mum who was supportive and engaged with the TW.

Support as highlighted above for S was effective with engagement with the health drop in, referral to Locala and Barnardo's WRAP service. S in addition benefitted from a change in education provision to a smaller setting.

Case Study 3

The community outreach sessions were inspired and delivered with the aim to engage two

young people at significant risk, who had refused to work with "professionals"

Both young people prior to the outreach well-being sessions had refused a service from Turnaround. Through perseverance and trying different ways to engage, eventually the young people allowed us into their worlds, their trauma, and their daily well-being. One of the key tools within the outreach sessions has been to reach out to the young people and see them in their safe space and their community.

One of the girls who we will name 'L', refused to come down for the first 30 minutes, whilst 'A' engaged straight away, 'L' came down and took part in the initial visiting session and since, has not missed one session and has been consistent with her engagement, looking forward to her sessions

One of the key concerns that was initially passed on was the influence that 'L' held over the other young person "A" in placement'. By bringing the well-being group to them as a collective took pressure off both young people and allowed them to engage in a positive activity together. In a short period of time 'L' went from saying that she wouldn't text us back and engage over the phone to contacting us to ask us about the next session. We have received positive feedback from social workers, placement workers and professionals chairing their child protection reviews at how well both girls have responded and spoke about us, as Barnardo's workers.

'L' is also reflecting about her journey in care, we have given her the space to explore this in an in depth way through an experienced trauma informed way of working: by tapping into the five senses of the human body, creative writing and reflecting, looking at photo's from childhood and allowing her to express her story through show and tell, giving the young people the opportunities to engage in activities that they otherwise would not have done.

The work has been groundbreaking, both young people have gone from not being able to express and recognise their potential, to consistently showing up, engaging outside of their sessions, and allowing us as Barnardo's workers into their world.

Case Study 4

YP referred September 2021. Risk flag at referral – significant.

YP had previously worked with the service and was re-referred following a significant change in circumstances leading to new concerns around CSE and missing. YP had previously lived with extended family (uncle) on a Special Guardianship Order. She has experienced a lot of trauma and loss throughout her life. YP was placed in a semi-independent accommodation. After a couple of months in the placement she reconnected with her mum, who is a known drug user. This led to YP spending much of her time with other adult drug users and street drinkers and she started to go missing. Prior to be being re-referred YP was seen by her Turnaround Worker (TW) with much older adult drug users and street drinkers and TW shared intelligence with partner agencies around this.

YP began to associate with an adult male know to pose a risk in terms of CSE and domestic abuse. He is also a drug user. There were concerns that YP's mum was exploiting her or facilitating exploitation.

YP welcomed the re-referral saying, "I'm so happy to have you back on my team".

YP has engaged consistently since she was referred and has received consistent intensive emotional support, using a trauma informed and strength-based approach.

YP has said that it means a lot having a worker who had known her a long time and that "just meeting and being able to talk to someone I trust (TW) is help"

TW has supported YP to access sexual health support and to have a Clair's Law disclosure in partnership with the police.

Concerns for YP have now reduced and with the support of the Police and Turnaround YP gave a statement and the CSE perpetrator was arrested and charged. He is now awaiting a court hearing date. YP has agreed to attend court and give her evidence in person with protective special measures in place.

YP is now in her second year of college received an achievement award for her attitude towards learning, skills and abilities at the end of her first year. She is also an active member of the Barnardo's Voice and Influence team; she has met with senior leaders and co-produced podcasts to raise awareness and have young people's voices heard on various issues.

Case Study 5

<u>Good practice case example – Direct work with exploited child</u> What were the issues / need for change?

Young person shared he is in a 'relationship' with an older male who is his sexual partner. The young person is very vulnerable online and in the local community, is approached by older males for exchange of drugs/money or sexual favours and this placing him at risk of significant harm. Ongoing missing episodes, at one occasion young person was missing for three days and being found in a car stating he was in Manchester. Known to spend time in hotels with these older males. We needed to contextually safeguard the young person from the risk of exploitation. What did we do? Joint home visit – carried out direct work with the young person to identify push factors and giving the young person a platform to express his feelings, gather his views and understanding of the concerns raised of exploitation with the hope that we can contextually safeguard him. Joint interventions with police to disrupt the perpetrators. Through sharing of all information and recognising this sexual harm alongside he criminal exploitation risks

What difference did it make?

Young person was able to share childhood difficulties / trauma as triggers for starting to use substances and how this developed to the further risk of him being exploited into county lines. He was able to acknowledge that he needs help mainly about crystal meth, which he is now addicted to, and using as a coping strategy to block out suicidal thoughts and hallucinations. The young person accepted support to get help from a drug and alcohol service (CGL). The aim is for him to become abstinent from substances which are a push factor to exploitation and having an impact on his mental health. Young person agreed to be moved to a different area away from his associates, currently in a placement in Lancashire and he plans to remain out of town preferably to reside in Leeds, he says he has no links in this town but not too far from family as well.

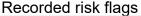
*Please note these figures are only valid at the time of writing and will be subject to change on a daily basis.

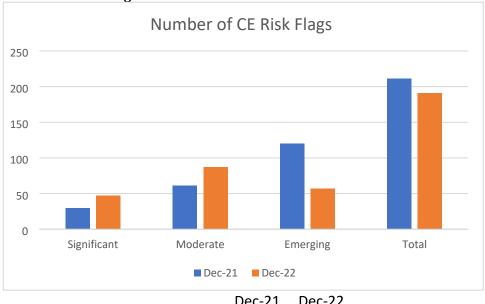
Victims:

There has been a 24% increase in YP flagged as CCE victims (239 – 298)

Improved recording has reduced the volume of 'unknown' from 40 to 10 and the biggest increases in numbers have been against drugs (140-199), gangs (11 - 27) and county lines/drugs (4 - 21)

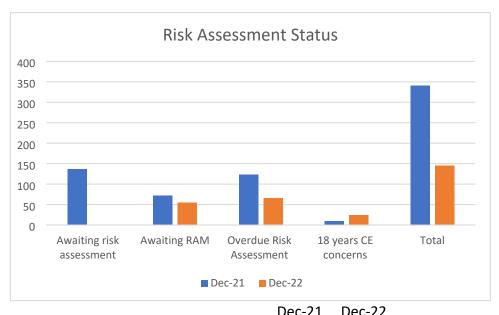
There has been a 77% increase in the number of younger children (12 years and under) (13-23) flagged and a 50% increase in the 13-15 age group (111-168) the older age group (16+) has seen a 7% decrease (115-107)





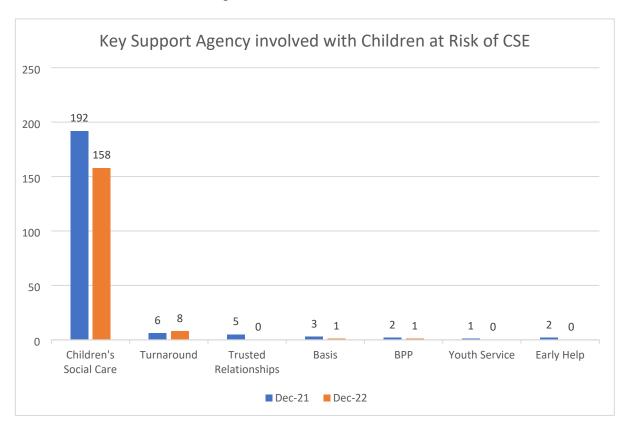
	Dec-21	Dec-22
Significant	30	47
Moderate	61	87
Emerging	120	57
Total	211	191

Number of flags recorded has dropped.

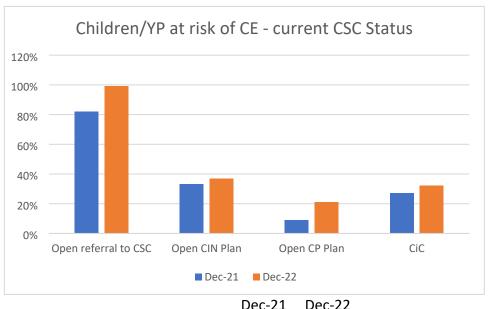


	Dec-21	Dec-22
Awaiting risk		
assessment	136	1
Awaiting RAM	72	55
Overdue Risk		
Assessment	123	65
18 years CE concerns	9	24
Total	340	145

Number of children/YP waiting assessment has more than halved

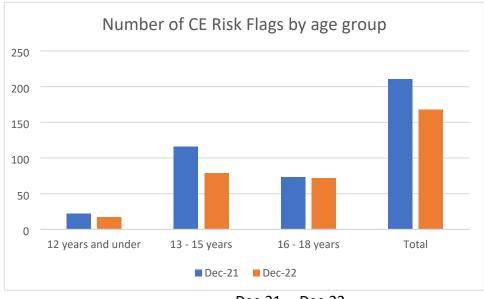


CSC are involved with fewer Children/YP with a flagged risk

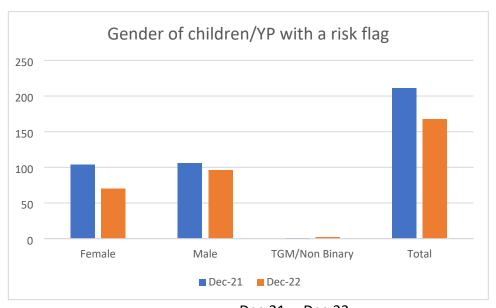


	DCC ZI	DCC 22
Open referral to		
CSC	82%	99%
Open CIN Plan	33%	37%
Open CP Plan	9%	21%
CiC	27%	32%

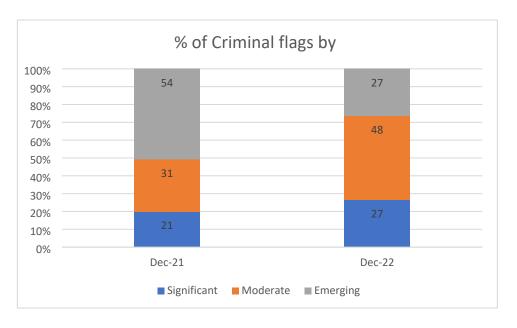
We are now involved with 99% of all children/yp flagged as having a CSE risk

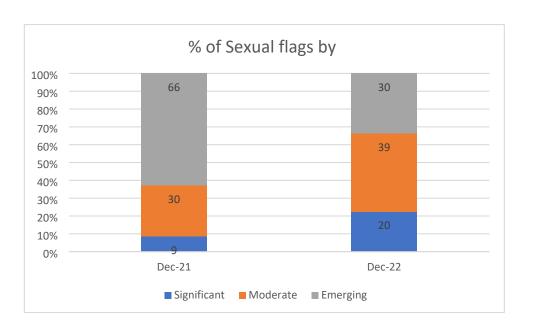


	Dec-21	Dec-22
12 years and		
under	22	17
13 - 15 years	116	79
16 - 18 years	73	72
Total	211	168



	Dec-21	Dec-22
Female	104	70
Male	106	96
TGM/Non		
Binary	1	2
Total	211	168









Report of the Chair of the Children's Services Overview and Scrutiny Committee to be held on Wednesday 15 February 2023

U

Subject:

Children's Services Overview and Scrutiny Committee – Work Programme 2022/23

Summary statement:

This report includes the Children's Services Overview and Scrutiny Committee work programme for 2022/23.

EQUALITY & DIVERSITY

Community Cohesion and Equalities related issues are part of the work remit for this Committee.

Cllr Geoff Winnard Chair – Children's Services Overview and Scrutiny Committee

Report Contact: Mustansir Butt Overview and Scrutiny Lead Phone: (01274) 432574

E-mail: mustansir.butt@bradford.gov.uk

Portfolio:

Children and Families

Overview & Scrutiny Area:

Children's Services

1. SUMMARY

- 1.1 This report includes the Children's Services Overview and Scrutiny Committee work programme for 2022/23, which is attached as appendix 1 to this report.
- 1.2 Also attached as appendix 2 to this report is a list of unscheduled topics for 2022/23.

2. BACKGROUND

2.1 The Council constitution requires all Overview and Scrutiny Committees to produce a work programme.

3. OTHER CONSIDERATIONS

- 3.1 The Children's Services Overview and Scrutiny Committee has the responsibility for "the strategies, plans, policies, functions and services directly relevant to the corporate priority about services to children and young people." (Council Constitution, Part 2, 6.3.1).
- 3.2 Best practice published by the Centre for Public Scrutiny suggests that "work programming should be a continuous process". It is important to review work programmes, so that important or urgent issues that arise during the year are able to be scrutinised. Furthermore, at a time of limited resources, it should also be possible to remove areas of work which have become less relevant or timely. For this reason, it is proposed that the Committee's work programme be regularly reviewed by members of the committee throughout the municipal year.
- 3.3 The work programme as agreed by the Committee will form the basis for the Committee's work during the year, but will be amended as issues arise during the year.
- 3.4 This Committee has agreed to undertake a programme of detailed scrutiny reviews, with the Committee already having started the Elective Home Education Scrutiny Review. The other scrutiny reviews include:
 - Looked after Children.
 - Children's Homes.
 - Fostering.
 - Children's Mental Health.
 - Recruitment and retention of Social Workers.
 - SEND, (Special Educational Needs and Disabilities).
 - YOT, (Youth Offending Team).
- 3.5 At its meeting on Tuesday 15 March 2022, the Executive, during their discussions relating to supporting children and their families to thrive post pandemic, recommended that the Children's Services Overview & Scrutiny Committee undertake a scrutiny review into Child Poverty across the District.

3.6 Also, at the meeting on Wednesday 1 February 2023, members of the Children's Services Overview and Scrutiny Committee as part of their discussions relating to the Raising Attainment Strategy, agreed to undertake a scrutiny review into persistence absence across schools in the Bradford District.

4. FINANCIAL & RESOURCE APPRAISAL

4.1 None.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 None.

6. LEGAL APPRAISAL

6.1 None.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

None.

7.2 GREENHOUSE GAS EMISSIONS IMPACTS

None.

7.3 COMMUNITY SAFETY IMPLICATIONS

None.

7.4 HUMAN RIGHTS ACT

None.

7.5 TRADE UNION

None.

7.6 WARD IMPLICATIONS

Work of this Overview and Scrutiny Committee has ward implications, but this depends on that nature of the topic.

7.7 IMPLICATIONS FOR CORPORATE PARENTING

This will be a key area of work for the Committee.

7.8 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

None.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

- 9.1 The Committee may choose to add to or amend the topics included in the 2022-23 work programme for the committee.
- 9.2 Members may wish to consider any detailed scrutiny reviews that it may wish to conduct.

10. RECOMMENDATIONS

- 10.1 That members consider and comment on the areas of work included in the work programme.
- 10.2 That members consider any detailed scrutiny reviews that they may wish to conduct.

11. APPENDICES

Appendix One – 2022-23 Work Programme for the Children's Services Overview and Scrutiny Committee.

Appendix Two – Unscheduled Topics.

12. BACKGROUND DOCUMENTS

Council Constitution.

2021-22 Children's Services Overview and Scrutiny Committee Work Programme.

Democratic Services - Overview and Scrutiny

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 29th June 2022 at City Hall, Bradford Chair's briefing 09/06/22. Report deadline 16/06/22.			
1) Serious Case Review Findings.	Representatives from Bradford Council, the Police and Health to be in attendance.	Darren Minton.	Request from Children's Services Overview & Scrutiny Committee members.
2) Draft 2022-23 Work Programme.	The proposed areas of work to be considered in this municipal year.	Mustansir Butt.	Includes recommendations that the Committee made in the last municpal year.
Wednesday, 13th July 2022 at City Hall, Bradford. Chair's briefing 24/06/22. Report deadline 30/06/22. 1) Transition to the Bradford Children's Company.		Joanne Hyde/Chris Chapman/Marium Haque.	Member request.
2) Work Programme.	There is a need to regularly review the work programme, in order to prioritise and manage the work.	Mustansir Butt.	
Wednesday, 28th September 2022 at City Hall, Bra	adford.		
Chair's briefing 07/09/22. Report deadline 15/09/22. 1) Co-opted member - Shifa Simab.		Mustansir Butt.	

2nd February 2023 Page 1 of 6

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574
Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 28th September 2022 at City Hall, Bra	adford.		
Chair's briefing 07/09/22. Report deadline 15/09/22. 2) Establishing the Children's Trust. Children's Services Overview & Scrutiny	(1)	Members of the Committee	were Joanne Hyde/Chris
Crimaren's dervices overview & Scrutiny	disappointed in relation to the representatives of PWC not in attendance at the meeting.	Chapman/Marium Haque/Eleanor Brazil/Steve Walker.	Committee recommednation from Wednesday 13 July 2022.
	(2) This Committee requests that a further progress report be presented to the Committee in September 2022.		
	(3) That the Contract between the Council and Children's Trust be presented to this Committee, prior to it being finalised.		
	(4) The Committee requests that the most appropriate representatives from Bradford Council and PWC attend the meeting in September 2022, along with the Children's Services Commissioner and Associate Commissioner.		
 Draft Terms of Reference - Scutiny review of Child Poverty. 		Mustansir Butt.	Council resolution from its meeting on Tuesday 15 March 2022, during their discssions relating to spporting children and families to thrive post pandemic.
4) Work Planning.	There is a need to regularly review the work programme, in order to prioritise and manage the work.	Mustansir Butt.	
Wednesday, 12th October 2022 at City Hall, Bradfo	ord.		
Chair's briefing 21/09/22. Report deadline 29/09/22. 1) Monitoring of the Children's Services Improvement Plan.	Focusing specifically on Priority 2 of the plan - Caseloads across all	Marium Haque/Picklu Roychoudhary.	Children's Servoces Overview & Scrutiny Committee recommendation
23 March 2022.			Social Work Teams. from Wednesday

2nd February 2023 Page 2 of 6

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574
Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 12th October 2022 at City Hall, Bradf	ord.		
Chair's briefing 21/09/22. Report deadline 29/09/22.		NEAR DATE (ALC LA CLASSIA)	Maralas Barrastas I Ola Harata
2) OFSTED Inspection of SEND.		Niall Devlin/Ali Jan Haider.	Member Request and Chuldren's Services Overview & Scrutiny Committee recommendfation from Wednesday 29 June 2022.
3) Work Planning.	There is a need to regularly review the work programme, in order to prioritise and manage the work.	Mustansir Butt.	
Wednesday, 2nd November 2022 at Remote Virtual 1) Elective Home Education Scrutiny Review.	al Meeting. Informal remote information gatehring session with parents, whose children are being educated at home.	Mustansir Butt	
Wednesday, 16th November 2022 at Remote Virtu	ıal Meeting.		
Child Poverty Scrutiny Review.	Informal remote information gathering session - setting the scene.	Mustansir Butt.	
Wednesday, 14th December 2022 at City Hall, Bra	dford.		
Chair's briefing 23/11/22. Report deadline 01/12/22.		looppo Hudo/Morium	Children's Consisse Oversions & Constinu
 Establishing the Bradford Children and Families Trust. 		Joanne Hyde/Marium Haque/Steve Walker/Eleanor Brazil/Chris	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 28 September 2022.
		Chapman/Sarah Phipps.	
2) Annual Looked after Children.		Michelle Turner/Cath Murray/James Drury.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 15 December 2021.
3) Work Planning.	There is a need to regularly review the work programme, in order to prioritise and manage the work.	Mustansir Butt.	

2nd February 2023 Page 3 of 6

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

	Work i Togramme		
Agenda Items	Description	Report Author	Comments
Wednesday, 18th January 2023 at City Hall, Bradf	ord.		
Chair's briefing 21/12/22. Report deadline 05/01/23.			
Audit findings relating to the quality of Social Work Practice.	To focus on areas that require actions being taken to address the areas of practice that currently, most often are shown to require improvement or are inadequate.	Amandip Johal/David Johnstone.	Children's Services Overview & Scrutiy Committee recommendation from Wednesday 9th February 2022.
2) SEND Services.	That the progress against the Written Statements of Action, (WSOA), Improvement Plan, be presented to this Committee at its meeting on Wednesday 18 January 2023.	Marium Haque/Niall Devlin.	Children's Services Overview & Scrutiny Committee recommnedation from Wednesday 12 October 2022.
Wednesday, 1st February 2023 at City Hall, Bradforchair's briefing 11/01/23. Report deadline 19/01/23.	ord.		
Raising Attainment Strategy.	Demonstrates key outcomes, with Emphasis on key outomes, with particular emphasis on	Marium Haque/Sue Lowndes.	Children's Services Overview & Scrutiy Committee recommendation from the delivery of Wednesday 9th February
2022.	'		
	the Raising Attainment Strategy.		
 Educational Standards - Early Years to Key Stage 4. 	To focus on:	Marium Haque/Sue	Children's Services Overview & Scrutiny Lowndes. Committee recommendation
from			Mara un ta data data. Mada aaday Oth
March 2022.			- More up-to-date data; Wednesday 9th
Wal 511 2022.	 Approaches being used to improve educational attainment across the District. 		
3) Work Planning.	There is a need to regularly review the work programme, in order to prioritise and manage the work.	Mustansir Butt.	
Wednesday, 15th February 2023 at City Hall, Brad Chair's briefing 25/01/23. Report deadline 02/02/23.	lford.		
Mental Health Issues relating to Children's Social Care.	Report to include the targetting of improved timelines of autism assessments and diagnosis.	Ali Jan Haider/David Sims/Christina Hollaway/Kristain Farnell.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 17 November 2021.

2nd February 2023 Page 4 of 6

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 15th February 2023 at City Hall, Brack	dford.		
Chair's briefing 25/01/23. Report deadline 02/02/23. 2) Exploitation Annual Report.	To also include, the review into the existing CSE and development of the Multi-Agency Exploitation Hub - Children's Services Overview & Scrutiny Committee recommendation frm Wednesday 15 December 2021	Darren Minton.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 15 December 2021.
3) Work Planning.	There is a need to regularly review the work programme, in order to prioritise and manage the work.	Mustansir Butt.	
 Wednesday, 1st March 2023 at City Hall, Bradford Chair's briefing 08/03/23. Report deadline 16/03/23. 1) Findings from OFSTED inspection. 2) Monitoring the Children's Services Improvement Plan. 	(1) This Committee requests that the new and detailed improvement plan be presented to the Committee in November 2022. (2) The Committee requests that the outcomes delivered for the Children's Services Improvement Plan, from September 2021 to March 2022,	Marium Haque Marium Haque/Picklu Roychoudhary.	Member request. Children's Services Overview & Scrutiny Committee recommendation from Wednesday 12 October 2022.
 Wednesday, 15th March 2023 at City Hall, Bradfo Chair's briefing 22/02/23. Report deadline 02/03/23. 1) Serious Case Review Findings - National Action Plan. 2) Establishing the Bradford Children's and Families Trust. 	Progress against the review recommendations, togeter with examples of some positive outcomes. Further progress report, prior to the Trust going live.	Darren Minton/Michelle Turner/David Johnston/Richard Padwell. Joanne Hyde/Marium Haque/Stev Walker/Eleanor Brazil/Sarah Phipps.	Chidlren's Services Overview & Scrutiny Committee recommendation from Wednesday 30 June 2022. Children's Servoces Overview & Scrutiny Committee recommendation from Wednesday 14 December 2022.

2nd February 2023 Page 5 of 6

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574
Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 15th March 2023 at City Hall, Bradfor Chair's briefing 22/02/23. Report deadline 02/03/23.	d.		
 Workforce Development - Children's Services. Services Overview & Scrutiny 	To focus specifically focus on:		Marium Haque/Anne Children's
·		-The	Lloyd. Committee recommendation
from	effectiveness of the new recruitment campaign; - Retention of staff; - Progress on training and growing our own staff; - The exact breakdown of workforce establishment for social workers and the level of vacancies at each grade		Wednesday 9th February 2022.
4) Young Carers.	To aso include measures of performance and details of outcomes and improvements delivered.	Cath Dew.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 23rd March 2022
 Sufficincy Strategy, to also include In-house Fostering Service and Adoptions. 		Piklu Roychoudhary.	Chidlren's Services Overview & Scrutiny Committee recommendation from Wednesday 9 March 2022.
 Bradford District Children and Young People Plan. 		Kate Welsh/Niall Devlin/Helen Johnston/Jenny Cryer.	
7) Work Planning.	There is a need to regularly review the work programme, in order to prioritise and manage the work.	Mustansir Butt.	

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Democratic Services - Overview and Scrutiny Scrutiny Committees Forward Plan

Unscheduled Items

Childrens Services O&S Committee

Item description		Author	Comments
That a programme of Scrutiny Reviews be undertaken across key area Services which include: (a) Alternative School Provision, (including Home Schooled Children). (b) Looked after Children. Children's Homes. (d)Fostering. (e)Children's Mental Health. (f)Recruitment and retention of Social Workers. (g)SEND, (Special Educational Needs and Disabilities). (h)YOT, (Youth Offending Team). Electronic briefing to members.	s within Children's	Mustansir Butt.	Children's Services Overview and Scrutiny recommendation from Wednesday 9 October 2019.
more sustainable approaches, to ensure the sustainable approaches to the continuation of the continuity of the progr	ramme, if it were	Lisa Brett.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 17 November 2021.
			Request from members.
Focusing on the Next Steps, which include: - Improving participation with young people and families to understand their experiences of the services they have received; - Starting to address themes that arise from the audit feedback. brieifng to members.	Electronic	Sarah Griffen/Lisa Brett.	Children's Services Overview & Scrutiny Committee recommendation frm Wednesday 15 December 2021.
Electronc briefing to members.		Kathryn Loftus	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 9th March 2022.
		Michelle Holgate/Dawn Lee.	Deferred from Children's Services Overview and Scrutiny Committee meeting on Wednesday 15 February 2023.
	That a programme of Scrutiny Reviews be undertaken across key area Services which include: (a) Alternative School Provision, (including Home Schooled Children). (b) Looked after Children. Children's Homes. (d)Fostering. (e)Children's Mental Health. (f)Recruitment and retention of Social Workers. (g)SEND, (Special Educational Needs and Disabilities). (h)YOT, (Youth Offending Team). Electronic briefing to members. Focusing on key outcomes delivered by the programme and exploring r more sustainable approaches, to ensure the sustainable approaches to the continuation of the continuity of the prognot to be funded beyond the current programme. Electronic briefin Focusing on the Next Steps, which include: - Improving participation with young people and families to understand their experiences of the services they have received; - Starting to address themes that arise from the audit feedback. brieifng to members.	That a programme of Scrutiny Reviews be undertaken across key areas within Children's Services which include: (a) Alternative School Provision, (including Home Schooled Children). (b) Looked after Children. Children's Homes. (d)Fostering. (e)Children's Mental Health. (f)Recruitment and retention of Social Workers. (g)SEND, (Special Educational Needs and Disabilities). (h)YOT, (Youth Offending Team). Electronic briefing to members. Focusing on key outcomes delivered by the programme and exploring more options for more sustainable approaches, to ensure the sustainable approaches to the continuation of the continuity of the programme, if it were not to be funded beyond the current programme. Electronic briefing to members. Focusing on the Next Steps, which include: - Improving participation with young people and families to understand their experiences of the services they have received; - Starting to address themes that arise from the audit feedback. Electronic briefing to members.	That a programme of Scrutiny Reviews be undertaken across key areas within Children's Services which include: (a) Alternative School Provision, (including Home Schooled Children). (b) Looked after Children. Children's Homes. (d)Fostering. (e)Children's Mental Health. (f)Recruitment and retention of Social Workers. (g)SEND, (Special Educational Needs and Disabilities). (h)YOT, (Youth Offending Team). Electronic briefing to members. Focusing on key outcomes delivered by the programme and exploring more options for more sustainable approaches, to ensure the sustainable approaches to the continuation of the continuity of the programme, if it were not to be funded beyond the current programme. Electronic briefing to members. Focusing on the Next Steps, which include: - Improving participation with young people and families to understand their experiences of the services they have received; - Starting to address themes that arise from the audit feedback. Electronic briefing to members. Electronic briefing to members. Kathryn Loftus

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