



The Bradford Safeguarding Partnership – Working together to safeguard children (TBP)

Annual Report 2020-21





Partners Foreword

Welcome to the annual report of Bradford Partnership (TBP) – Working together to safeguarding children. This unique report covers April 2020 through to March 2021, which saw unprecedented challenges for our partners due to the global pandemic – Covid 19. Added into this was the continued improvement journey of our Children's Services being closely monitored by Ofsted.

The report is an honest reflection on that period. You will read about many key achievements, child safeguarding practice reviews, and acknowledging the challenges and emerging risks partners face.

Our Partnership board and agencies worked tirelessly to ensure business continued during the pandemic. In late Spring, meetings moved to virtual meetings for the remainder of 2020/21. The Bradford Partnership held weekly Covid meetings to see how the partnership could support those partnership resources directly dealing with this unprecedented period.

You will also see acknowledgement that the partnership continues to challenge itself, and with partners continue our improvement journey, something collectively we will always strive to do



Partners Foreword

It is clear that some safeguarding threats persist, and as a partnership, we are determined to reduce the impact of these threats in a sustainable way. The pandemic has allowed us to consider how effective engagement with our communities can help us achieve these and other key safeguarding areas.

We must as a partnership continues to improve our engagement with communities, children, young people, and their families if we are to achieve our goals. This is fundamental to our success. Finally, we would like to acknowledge and thank every individual involved in safeguarding across the Bradford District for their commitment, hard work, support, and resilience.

Kersten England

Chief Executive

City Of Bradford

Metropolitan District Council

Dan Greenwood

District Commander

Bradford District

West Yorkshire Police

Helen Hirst

Chief Officer

Bradford District

Clinical Commissioning Group

Independent Chair & Scrutineer Foreword

This report is very different from the 2019- 20 Annual Report in a number of ways. That report (which was the report of the Independent Chair) covered a period of transition from the Bradford Safeguarding Children Board to The Bradford Partnership which replaced it in accordance with Working Together 2018. Current arrangements no longer involve a body which acts independently and the new Partnership is the responsibility of, and in the direct ownership of the three statutory partners – the Local Authority, the CCG and the Police and as a result this is their report, not mine.

I write this response in my capacity of Scrutineer and it is intended to support partners by providing my independent perspective on the work of the partners to safeguard children during 2020-21 and to highlight continuing challenges where appropriate.

The contents of the report have been determined by the lead agencies and they, together with other relevant partners have set out their strategic vision, outcomes and priorities, have provided information about their arrangements, information about partners achievements, new opportunities, challenges and emerging risks and reported on learning from reviews and analysis of performance.

The multi-agency arrangements for managing concerns continued to develop in 2020-21 with significant changes in the operation of the Integrated Front Door (the first point of contact when there is a concern re vulnerable children). The issue of agencies' understanding of the thresholds for service, issues re engaging families via consent, and low referrals for early help, (all also identified in the previous year) remained areas of concern in 2020-21 despite a clear focus and considerable work to promote improvement. However, though still showing insufficient progress in these areas at the year end, future reports will evidence much more progress in 2021-22.

The context within which safeguarding services are provided to support children and families continues to be challenging, and the pandemic added a further layer of challenge during 2020-21. Partners are to be commended on the way they came together to provide the best response they could. They were clearly sighted on vulnerable children, tracked those who did not take up the opportunity to be in school, achieved commendable levels of direct contact with children subject of a child protection plan or looked after by the Local Authority and, ensured food was taken out to those who would have had free school meals (many schools played a very significant part in this via doorstep deliveries).

Independent Chair & Scrutineer Foreword

Throughout the period Local Authority Children's Social Care continued to be monitored by Ofsted and, while some improvements were noted, the speed of recovery was considered to be too slow. Recruitment continued throughout but high levels of agency staff continued to be required. New standards of practice had been introduced and both supervision and quality assurance activities improved but Ofsted continued to report inconsistent quality of practice.

Both the partnership and the Improvement Board have been monitoring performance on a regular basis and, as Scrutineer, I have also been provided with more frequent reports in respect of some key practice areas. Some of the data is set out by partners in this report and shows continuing high rates of reported concerns for children, and high rates of children looked after by the Local Authority and of children subject of a child protection plan. Not all the data which is monitored can be set out in the report but the following are worth noting. At the end of 2020-21:

- Early Help referrals were still low despite investment, the launch of an expanded service, and changes in responses in the IFD;
- Too many contacts re concern for children were subject of no further action due lack of consent or not reaching the necessary threshold;
- Numbers of children being electively educated at home had increased dramatically;
- Timeliness of receipt of a service from the Child and Adolescent Mental Health Service had seen very significant improvement (concerns remaining about waiting times for Autistic Spectrum/ADHD).
- The increased demand arising from high levels of child protection referrals was a challenge for all agencies and exposed some significant deficits in capacity, particularly acute in the 0-19 service which provides school nurses and health visitors.

Independent Chair & Scrutineer Foreword

Although not published in 2020-21, (published in July 2021) a thematic review in respect of child sexual exploitation was underway and partners were responding to emerging learning during its progress. Additionally, understanding of child criminal exploitation was also developing. In response, the effectiveness and configuration of the service was reviewed and partners agreed to make a significant investment in services which will lead to the creation of a multi-agency exploitation hub based on research about effective practice.

Notwithstanding all the challenges, what I have seen is a sincere commitment to working together, and a willingness be creative in addressing the need for change among senior managers. On the front-line I have seen practitioners going above and beyond expectations to protect some of our most vulnerable children and families and to them I send my thanks

Jane Booth

Independent Chair and Scrutineer

The Bradford Partnership – Working Together to Protect Children

Role of the Independent Chair & Scrutineer?

To chair
programmed
meetings of TBP
& extraordinary
meetings as
required

To attend the
Strategic
Leadership Group
meetings and act
as a constructive
critical friend

Meet with the
Director of
Children Services
or representatives
as required.

Ensure the partnership
monitors and develops
a safeguarding
partnership business
plan which maintains a
clear multi agency
focus on outcomes for
vulnerable children .

Be a key driver to
promoting
reflection and
continuous
improvement
across the
partnership

To liaise with the
Lead Member for
Children & Families
Services, Health and
Wellbeing Board and
the Overview and
Scrutiny committee
as required

Ensure that the partnership
works effectively, with good
collaboration between its
members, encouraging and
supporting the
development of partnership
working between partner
agencies, including its Sub
Groups.

Provide assurance
that TBP operates
independently of its
member agencies
and that any conflicts
of interest are
appropriately
managed.

Reviewing audits
and performance
data

Promote an
awareness of
Safeguarding
Children
throughout
Bradford District

Introduction to the Annual Report

This report lays out the strategic vision, outcomes and a reminder of our priorities.

It gives information on internal structures and governance to hold partners to account

There is information on the work our statutory & strategic partners and we have achieved but also recognising some of the opportunities, emerging challenges, and risks

Also included is information on Local Safeguarding Child Practice Reviews (LSCPRs) and some of the performance data we have collected throughout 2020/21



About TBP

The Bradford Partnership has an Independent Chair & Scrutineer and consists of three key partner agencies who have a shared statutory responsibility for safeguarding children.

TBP is a key statutory mechanism for agreeing how the relevant agencies will co-operate to safeguard and promote the welfare of children in that locality, and for ensuring the effectiveness of what they do.

[Working Together to Safeguard Children: July 2018](#)
– Requires Multi-Agency Safeguarding arrangements for the work of each Local Safeguarding Children Partnership.

About The Bradford Partnership (TBP)

By law, the partnership must have three members which are: Bradford Local Authority, West Yorkshire Police & the NHS Bradford District & Craven Clinical Commissioning Group (CCG).

The statutory partners lead working with Relevant Agencies (schools and all other agencies) to safeguard and promote the welfare of children .

Develop and publish a strategic plan setting out how we will meet our objectives and how our member and partner agencies will contribute

The safeguarding arrangements are published along with annual report detailing how effective our work has been.

The arrangements are subject to independent scrutiny .

Commission Local Child Safeguarding Practice Reviews (LCSPRs) for any cases which meet the criteria for these.

Our Shared Vision & Principles

Our Vision

“The Bradford Partnership will work to ensure that children are safe and receive a quality service”

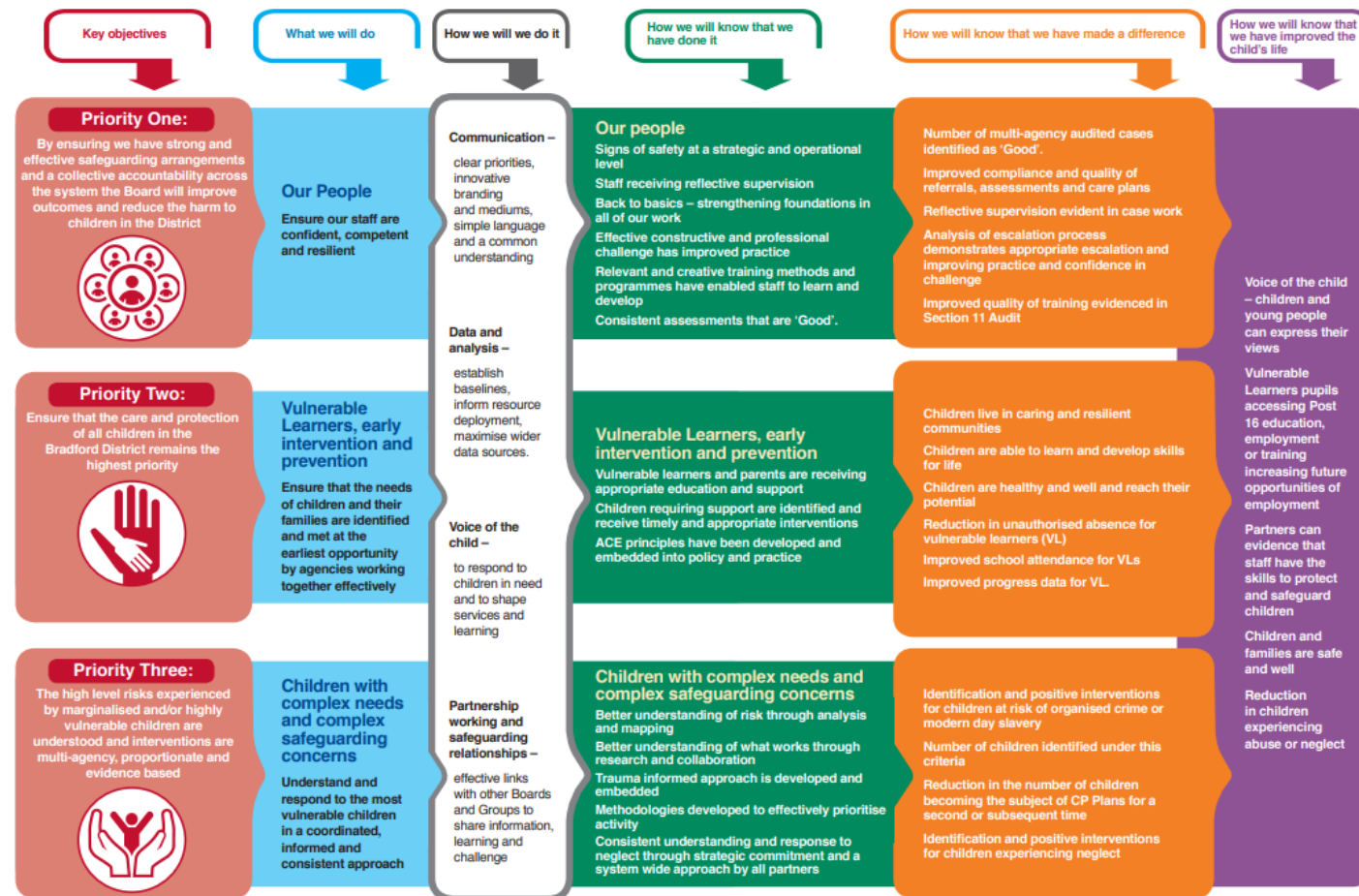
Our Principles

- The child is always at the centre
- There will be clear governance and accountability, clearly defined roles and responsibilities
- There will be transparent, open and honest communication between all
- We will foster continual improvement which includes learning from others
- We will enable early support at the right time to build independence and self reliance

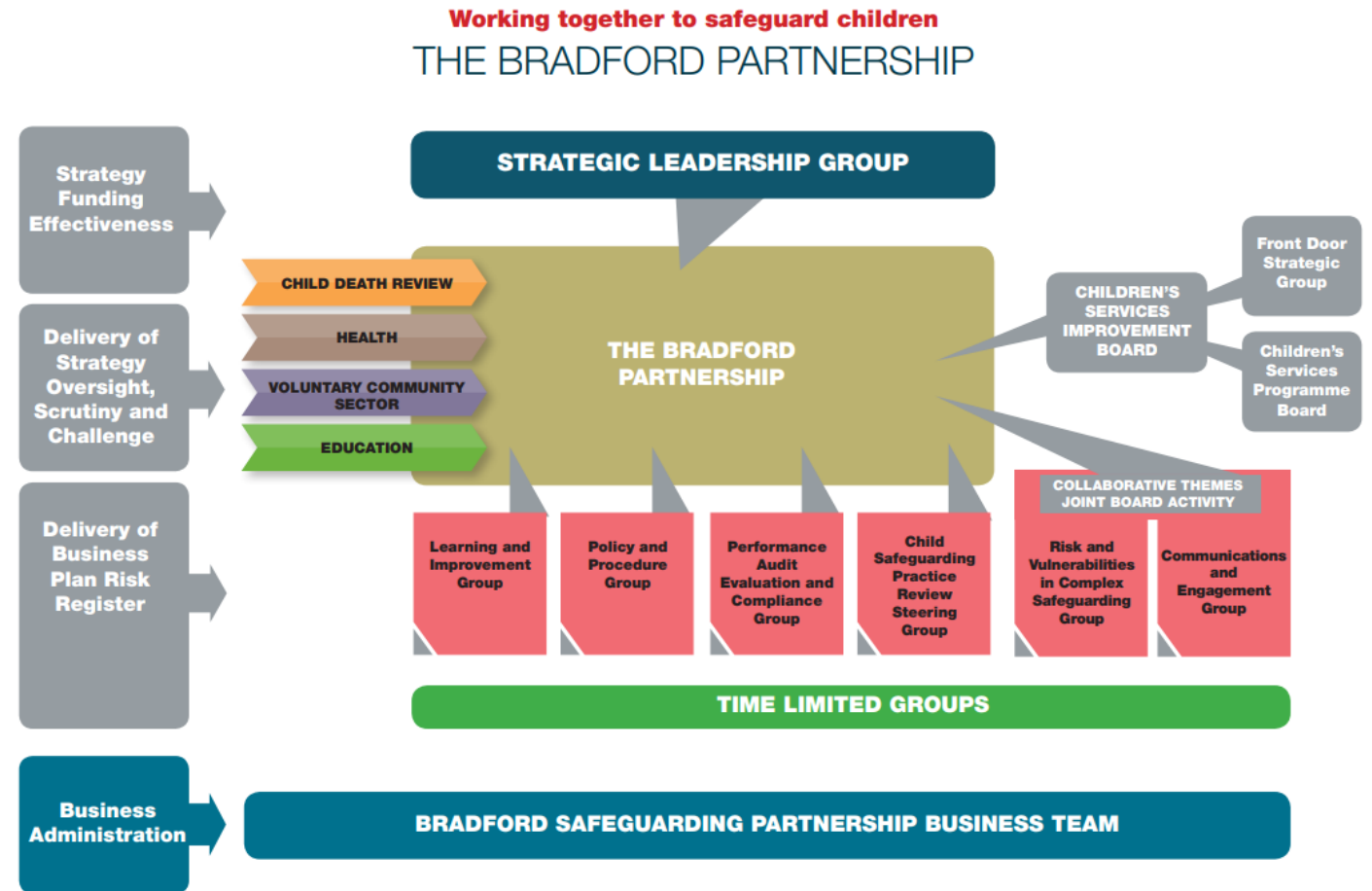


TBP Strategic Plan 2019/2021

Strategic Plan on a page 2019 / 2021



The Bradford Partnership Structure



* The TBP are in process of developing a partnership Executive Group that will sit between the sub groups and the main partnership structure for 2021 / 22

Partnership Membership

- ANHSFT – Airedale NHS Foundation Trust
- BDCFT – Bradford District Care Trust Foundation Trust
- BTHFT – Bradford District Teaching Hospitals
- Cafcass – Children & Family Court Advisory and Support Service
- CCG – Clinical Commissioning Groups
- CSC – Children's Social Care
- NPS – National Probation Service
- NSPCC – National Society for the Prevention of Cruelty to Children
- VCS – Voluntary Community Sector
- WYCRC – West Yorkshire Community Rehabilitation Company
- WYP – West Yorkshire Police
- YOT – Youth Offending Team

2020-21 Partnership Attendance

Agency	24/06/20	30/09/20	16/12/20	24/03/21	%
ANHSFT	Y	N	Y	Y	75
BDCT	Y	Y	Y	Y	100
BTHFT	Y	Y	Y	Y	100
CCG	Y	Y	Y	Y	100
CSC	Y	Y	Y	Y	100
Education	Y	N	N	N	25
NPS	Y	N	Y	N	50
Public Health	N	Y	N	N	25
VCS	Y	Y	Y	Y	100
WYCRC	N	N	N	Y	25
WYP	Y	Y	Y	Y	100
YOT	N	N	Y	Y	50

How does TBP link to other boards

TBP links with other statutory and relevant boards / partnerships

Where appropriate TBP Independent chair and Scrutineer will agree to, attend meetings with other board chairs to ensure continuity, joint working and shared resources

Other TBP links

- Bradford Wellbeing Board
- Bradford Health & Social Care Overview & Scrutiny Committee
- The Bradford Safeguarding Adults Board
- Bradford Community Safety Partnership
- Bradford Domestic & Sexual Violence board
- Children's System Board



Children Social Care

The new integrated front door (IFD) , the service which receives contacts and referrals to children`s social care, went live at the height of the first wave of the pandemic in June 20

The service at that time had been operating with a very high level of demand with a dispersed workforce. The IFD continued to be embedded and had to adapt very quickly to the new demands. Practice improvements were evident in more timely triaging of contacts, clear management oversight, effective use of information & risk analysis.

The new IFD arrangements put Early Help, interventions, and multi agency information sharing on a priority footing and closed several gaps on how services were delivered previously.

Strategy discussions are well attended, and timely. Effective safety plans are developed to ensure children`s immediate safety. Our social workers speak to children as part of the process, to have an understanding what life is like for them. This supports appropriate early decision-making.

Children Social Care

Significant effort has been made to recruit and retain more managers, practice supervisors and experienced social workers . This has continued to be a challenge throughout the past year.

The issue of parental consent raised in the Ofsted inspection is now better understood.

Despite Covid, work continued on the implementation of improvements required by Ofsted. Council teams and partners were able to implement new and flexible ways of working to ensure vulnerable children are kept safe . This included conducting high quality 'virtual' visits as well as doorstep visits. There is an acknowledgement that the pace of improvement has been slow.

A key piece of work completed was the introduction of new practice standards. The standards were developed in conjunction with staff and form the basis on how we approach our work.



Children Social Care

Despite the changes to working practices due to the Pandemic CSC managed to support all our children across residential homes

Provide short breaks across residential respite units

Provide supervised family time across our contact services

Care for all our children in their fostering placements

There were a few challenges around IT – e.g. Ensuring that staff had all the relevant equipment in order to complete various tasks . This issue has been monitored closely through the Improvement board



Children Social Care

The Improvement plan in response to the Ofsted Inspection did see some delays due to recruitment of permanent senior leaders.

The number of children in care remained higher despite efforts to safely reduce the numbers.

External placements were used, with several children being placed outside the area

Disabled children receive a child centred social work support which is making a positive difference for them. Transition planning for older children is promoted early and is appropriately focused on their identified needs.

The complex safeguarding hub provides an authoritative and confident response to children who are at risk of exploitation. The hub's thorough screening of contacts and referrals about children, the specialist advice and consultation provided across the service and regular risk assessment meetings have strengthened practice . Further development of the hub will continue in 2022.

West Yorkshire Police

West Yorkshire Police continues to be committed to active membership of The Bradford Partnership. During the past year, we have been represented at the board level by Temporary Superintendent Steve Greenbank, Chief Inspector Karen Lindsay, and Superintendent Richard Padwell & Chief Inspector Dan Ware. West Yorkshire Police is represented at all the key subgroups to the partnership board, where we continue to engage with all our partners on the board's priorities.

Alongside other agencies, the Bradford District police represent a bridge across from adult safeguarding into other vital areas of public protection, including domestic abuse and child safeguarding.

Our work on the pernicious issue of county lines drug dealing sees both children and vulnerable adults being exploited by the same offenders. We will continue to work across all partnerships to protect victims while targeting offenders.

We also recognise the challenges for both victims and perpetrators in accessing services between the ages of 16-25 as they transition from childhood to adulthood. "Policing has a crucial role to play in the identification, support, and safeguarding of adults who are at risk of harm. Perpetrators sometimes target those with specific vulnerabilities, such as mental health or isolation, believing that there is less chance of being caught.

I joined the senior leadership team at Bradford in January 2021 and am fully committed to working in partnership with the Bradford Partnership to keep Bradford residents, families, and communities safe and feeling safe. I welcome the challenge from partners and communities in holding me to account and will similarly hold partners to account for service delivery. I am proud to chair the All Age Exploitation Sub Group on behalf of the partnership."

Superintendent Richard Padwell – West Yorkshire Police Bradford District



West Yorkshire Police – Key Achievements

Through collaborative work with Bradford District Care Trust and the Local Authority created and developed Mental Health (MH) triage car . Initially introduced as a pilot to address issues of the Section 136 detentions .

The triage car has a MH nurse/Social Worker working alongside a Police Officer and attend incidents where there is a MH element and MH assessment is needed, thereby reducing unnecessary S136 detentions and improving the outcome for the subject.

MH training to over 200 new Police Officers

Supt Richard Padwell is the chair of the tri board sub-group – All Age Exploitation . This sub-group is working towards a partnership assessment of exploitation covering the threat, harm and risk across the Bradford District.

The number of missing adults & children at risk through the pro-active use of the *Herbert Protocol & *Philomena Protocol has reduced significantly.

2000 less incidents of missing children and adults

* Herbert Protocol & Philomena Protocol are early intervention and risk reduction schemes to help find vulnerable people who are at risk of going missing.



West Yorkshire Police – Key Achievements

Share a key role in the IFD

Operation Encompass is an initiative enhances communication between the police and schools where a child is at risk from domestic abuse · The purpose of the information sharing is to ensure schools have more information to support safeguarding of children. By knowing that the child has had this experience, the school is in a better position to understand and be supportive of the child's needs and possible behaviours

Operation Encompass complements existing safeguarding procedures and is now embedded in Bradford District

A senior police officer also co-chairs the MACE meetings with a senior colleague from Children Social Care

The number of recorded serious sexual offences in 2020 reduced by 228 offences. 1769 recorded in 2019 compared to 1541 recorded in 2020

The reduction in serious sexual offences is believed to have been linked with the national lockdown restrictions

There has been a slight improvement in the detection rate for serious sexual offences from 6.56% (116) in 2019 to 8.70% (134) in 2020



West Yorkshire Police – Key Achievements

We are committed to preventing people from becoming victims of crime, especially the young and the vulnerable. We also ensure that where crimes do occur, that victims and witnesses receive the best possible service and the best possible outcome.

Protecting the vulnerable remains our top priority . We have continued our focus on investigations into non recent offences of child exploitation through Operation Dalesway. We have seen a number of preparators brought to justice as a consequence . We still have a number of on-going investigations.

Bradford District Cyber Crime Team and have developed new educational & preventative material to help reducing harm and risk to the vulnerable . The team continue to promote early intervention with primary school children.

During Safer Internet Day in February 2020 the Cyber Crime Team hosted a full week of activities all centred on E-Safeguarding supporting the international event .

Our ambition is that all members of West Yorkshire Police, deliver an outstanding service, so that we can achieve the aspirations set out in the West Yorkshire Policing Strategy 2020-2025 and deliver our overall vision of '**Keeping West Yorkshire Safe and Feeling Safe**'.

Bradford District & Craven Clinical Commissioning Group (CCG)

Overall responsibility and accountability for safeguarding sit with the accountable officer, Helen Hirst.

The CCG children safeguarding team provide advice and support to colleagues. Still, as a commissioning organisation, they also ensure that compliance and quality are closely scrutinised, supported, and, where appropriate, challenged. The team also supports the safeguarding response and recovery plans for those organisations falling short of these essential standards and their statutory partners within children's social care.

CCG provides significant leadership by chairing several subgroups within the governance of the partnership structure.

As statutory partners of The Bradford Partnership, the CCG maintained a presence at partnership meetings, significantly contributing to the delivery of the assurance processes of TBP. The CCG fully met the duty to participate in and oversee the health contributions to Local Child Safeguarding Practice Reviews.

The CCGs' child safeguarding team continues to work cohesively and in collaboration with other partner agencies and has a shared commitment to safeguard those at risk of harm and abuse in Bradford. On 1 April 2020, the 3 NHS Clinical Commissioning Groups (CCGs) for Bradford District merged, forming the Bradford District & Craven Clinical Commissioning Group



Bradford District & Craven Clinical Commissioning Group (CCG)

Active senior leadership provided through The Bradford Partnership, Children's Improvement board and System Quality board

Led the health response in collaboration with partners to support Directorate of Education

Held weekly/bi weekly/ monthly meetings for senior leads providing essential data and assurance that vulnerable children and young people are receiving timely support including missing children, children not in education amongst others

Development of new clinical model for Children Looked after and reduction in waiting lists for health assessments.


Investment and recruit of key safeguarding posts within the CCG and also the funding of a Designated Doctor for children in care recurrently

Bradford District & Craven Clinical Commissioning Group (CCG) – Key Achievements

Have been responsive & worked in partnership across health and social care system to support partners and seek assurance that safeguarding children remained a priority during the pandemic.

In response to the Covid 19 pandemic and remote working safeguarding training was developed, delivered and maintained throughout to CCG staff via virtual training platforms

Developing and circulating safeguarding communications & information guidance to Primary Care staff on virtual examination , domestic abuse , Mental Capacity Act & vaccination aide-memoire to support practice




Bradford District & Craven Clinical Commissioning Group (CCG) – Key Achievements

As a consequence of the pandemic the CCG adapted safeguarding & quality systems to monitor providers & how well they are doing in protecting people from abuse & neglect

Strengthened relationships within the CCG and multi agency partnership to ensure safeguarding children is at the centre of decision making , including service changes as a result of the pandemic

The Personalised Commissioning Team have made timely applications for community deprivation of liberty cases to the Court of Protection to ensure actions and restrictions are proportionate and necessary.



Bradford District Care Foundation Trust (BDCFT)

All safeguarding mandatory training is above the threshold of 80%

Audit work has continued to evaluate learning & improve the quality of safeguarding practice together with updating policy and guidance

Providing valuable contributions to TBP & Subgroups as an active member
Providing valuable contributions to TBP & Subgroups as an active member

Bradford District Care Foundation Trust (BDCFT)

Children's Covid Integrated Visiting Team

A co-located and integrated team was established at Westbourne Green Health Centre (BDCFT), which brought together BDCFT Community Children's staff and Social Care colleagues, meaning we could focus on our most vulnerable children, even when there was suspected or actual Covid within the household. Joint visits and assessments were completed using PPE, 'clean' nurse, transport, decontamination, and de-brief after the visit. Social Workers and Nurses, i.e., Health Visitors, School Nurses, Children in Care Nurses, School Nursing, Special Needs Nurses, Staff Nurses, and Nursery Nurses completed visits.

0-19 Service (Health Visiting & School Nursing)

Both of these services have been significantly challenged in terms of staffing resources and capacity. Both services have recently activated their Business Continuity Plans due to substantially reduced staffing, specifically at the Specialist Community Public Health Nurse level, meaning that core mandated universal contacts have been impacted.

Entering the first lockdown period, services mitigated risk wherever possible by adhering to the NHS England National Community Guidance to stratify and prioritise caseloads while also offering a 'virtual' offer using telephone and video-enabled technology. Both services have worked hard to ensure that where face-to-face visits are needed, these occur using appropriate PPE, secure covid practices, and the Children's Covid Integrated Visiting Team. As the year has progressed, face-to-face contacts have resumed.

A full review of the School Nursing Service has been completed with Public Health Commissioners; service re-design is underway, which will focus on enhancing the core School Nursing offer.

The Health Visiting Service realigned to a tiered model, focusing on safeguarding, early help, and universal caseloads.

Bradford District Care Foundation Trust (BDCFT)

Children in Care Nursing Team

The Children in Care Team has expanded using non-recurrent monies to ensure that all children new into care are allocated a named Children in Care Nurse. The team is now skill mixed with specialist nurses, Staff Nurses, Nursery Nurses, and Admin. The additional nursing resource into the team is assisting with reducing nursing caseload sizes.

Throughout the last year and in response to Covid, the caseload has also been stratified, ensuring that the focus has remained on the most vulnerable children / young people who have needed support. Face-to-face visiting has been vital throughout the pandemic in this service.

The focus remains on completing Initial and Review Health Assessments promptly and working with Social Care to ensure that 'consent' for health assessments is received promptly.

School Nursing Special Needs

This service has worked exceptionally closely with education colleagues and the leaders of the Special Schools during the Covid period and continues to do so. Caseloads were stratified according to need and welfare calls made to families to ensure consistent support throughout lockdown.

Close working in relation to covid secure environments in schools, school bubbles, PPE has been vital in ensuring that as many children as possible can attend school safely.

Vaccination & Immunisation Team

During the period of lockdowns, the school-aged vaccination and immunisation service was redeployed to help support with covid visits and administration of the covid vaccine within the Bradford vaccine hubs. Like all other teams across the country, Covid impacted directly on the immunisation schedule for children, resulting in a backlog of immunisations. The team has worked exceptionally hard to catch up on their various immunisation campaigns meaning that the children of Bradford have received the routine offer of vaccinations.

Bradford Teaching Hospitals Foundation Trust (BTHFT)

Despite the significant impact and challenge on services Covid 19 presented, BTHFT maintained a safeguarding service throughout.

Recruitment of a Mental Health Specialist Practitioner to work across age groups

A pilot project of an enhanced care support worker to work with patients with additional needs such as , learning disabilities , cognitive impairment or mental health diagnosis. This project has allowed for early recognition of concerns and a timelier response.

The Safeguarding team assisted in the development of a multi-agency pathway designed to manage children and young people in crisis who need to the support of CAMHS and Children Social Care

Violence Reduction Unit in the Emergency Department (ED)- Following a successful pilot scheme a new Navigator role has been identified to start in ED in April 2021 to target those YP and adults who are victims of violence to engage in work with Breaking the Cycle.



Bradford Teaching Hospitals Foundation Trust (BTHFT)

The team were honoured to be a Nursing Times Award Finalist for our collaborative work with Children's Acute Mental Health Partnership (ChAMHP) right care, right place, right time.

The Trust continues to champion and support the ongoing work across the district to support those young people at risk of Child Exploitation (CE). The Trust has adopted the new risk terminology and continues to flag all those children assessed as significant risk for Child Sexual Exploitation (CSE) and in the later part of the year has also started to flag those at risk of Child Criminal Exploitation (CCE).

The Trust has also commenced flagging children with learning difficulties following a recommendation from the CSC CLAS inspection in February 2019.

The Safeguarding Children Team have a robust work plan and audit strategy that is regularly reviewed and updated in line with highlighted and emerging risks and themes. This provides assurance to the Trust and enhancing children's care and safety. The work plan includes appropriate areas for development and is informed by Trust and district activity and local and national learning from serious case reviews and inspections.



Bradford Teaching Hospitals Foundation Trust (BTHFT)

'ICON Lite' was launched in the reporting period to help parents care for a "crying" baby and help reduce the risk of injury to a baby when parents cannot cope.

VCS service for children on the wards continued and Youth workers continued to support children on the ward engaging them in activities and providing support. To children, families and staff.

Due to Covid virtual clinics have taken place to ensure that children were still able to access support and care. The Trust has moved with the changing government guidelines and adapted clinical areas to ensure that some face-to-face contacts can be conducted and are working to return to a higher proportion of face-to-face clinics.

Lack of community services has had a huge impact in terms of access to support groups, early help and intervention that would/could have taken place pre Covid. There has been a significant increase in families attending the ED department to access support and healthcare due to difficulties in being able to physically see other health practitioners in the community.



Children & Adolescent Mental Health Services (CAMHS)

The independent review by the Centre for Mental Health was completed in June 2020.

The review aimed to provide a full system overview of children and young people's mental health provision in Bradford and Craven highlighting our strengths and weaknesses, assessing local demand, needs and aspirations, and identifying priority areas for improvement.

The report was shared with the Mental Health Partnership Board and has since been published and disseminated widely with stakeholders across Bradford and Craven.

Pathway development - Consultation with the Local Authority, the Care Trust and Voluntary and Community Sector (VCS) has concluded with the development of a framework and unified referral form and assessment process for all referrals coming into children and young people's mental health services.

Referrals into specialist Children and Adolescent Mental Health services (CAMHS) will reduce as other more suitable support will be made available to those who do not meet specialist CAMHS threshold which will reduce the burden on the specialist CAMHS workforce



Children & Adolescent Mental Health Services (CAMHS)

Waiting List initiative -The CAMHS waiting list initiative is now underway, counsellors who specialise in working with children and young people are supporting the core and therapy waiting lists and Youth in Mind (YIM) workers are supporting the Autism waiting list. Qualitative and quantitative data is being collected as part of this work to support future sustainability by demonstrating impact. This work is also improving understanding between the CAMHS workforce and the wider Youth in Mind partnership who support children and young people's mental health.

The Parental support sessions are being co-designed by the Rollercoaster parenting group and a large piece of work is taking place to ensure clear information and communications about the mental health offer is available to parents, children, services and communities.

The programme have developed a series of easy to use digital and paper cards with key information The digital cards opened up to other digital forms of information held at www.healthyminds.services and at www.kooth.com which sign post people to our doorway to all mental health support services for children, young people and families.

The mental health leadership team have supported the progress made to the Children's Improvement Plan with considerable development on key areas.

Therapeutic support - A grief and loss pathway has also been set up that includes a training element for (statutory & non statutory) staff working with CYP to access which will aid understanding in dealing with grief and loss

MH Champions are still also been trained in schools and this programme is providing up to date information to the CYP MH leadership team on any gaps in support across the district



Youth Justice Service – Key achievements

Bradford & District YJS is made up of representatives from key agencies including the Police , Probation Service, Children`s Social Care, Bradford District Care Trust and Education – (formerly known as the Youth Offending Team)

The Youth Justice Board (YJB) stated “the YJS had made significant improvements since the priority support was put in place in 2019”

Recruitment of additional specialist resources which has enhanced the understanding of our young people, drive continued improvement and quality

A monthly quality audit is now in place

The number of young people in custody reduced during this period , however it is recognised the impact of Covid 19 restrictions and closure of courts will have impacted on this.

We are leading a West Yorkshire Pathfinder funded by the YJB which aims to look at consistent and effective practice for diversion and prevention.

Voluntary Care Sector (VCS) Key Achievements

Covid dominated the work of the VCS in 2021/21 . Voluntary organisations were key to the initial and longer-term responses. As with other partner agencies had to quickly adapt the way of working and operational delivery to meet the challenges of Covid with new and emerging needs , together with the need to work collaboratively

Partnerships – The VCS worked co-operatively with a range of partners in new ways. VCS and faith organisations were active in a wide range of activity including

Food provision supply, Mental health support ,Information sharing & increased partnership working

Active member of the TBP and various sub-groups and contributing intelligence , research and data . Provided communications for organisations , partners and individuals with informed solutions

System navigation – Enabled children, young people and families navigate the system to offer support and continuity . Particularly focussing on smooth transitions between children and adult services

Voluntary Care Sector (VCS) Key Achievements

Neighbourhood activity – Emergence of mutual support groups and increased activity from existing ones .

Proactive – Seeking out unseen children, anticipating needs and planning ahead. We ensured face to face meetings/ doorstep support continued for the most vulnerable . In some cases, being the only source of contact with individuals and families.

Leadership – Lead on key projects such as No Child Cold and ensured frontline VCS were offered vaccines, participation in key command groups

Although Covid still dominates the work of the VCS . The VCS have contributed to other vital activity such as ;-

- Promoting national VCS safeguarding resources
- Managing and facilitating online training & support groups
- Contribution to the development of ACES / trauma informed approaches
- Supporting the introduction of lead practitioner approaches .

Local Safeguarding Children Practice Review (LSPCR)

Learning Improvement

The Bradford Partnership has responsibilities under Working Together to Safeguard Children 2018 to undertake reviews of serious incidents involving children within the district. The guidance identifies the kind of cases that must be reviewed as;

- Serious child safeguarding cases in which:
- abuse or neglect of a child is known or suspected and
- the child has died or been seriously harmed

Serious harm includes (but is not limited to) serious and/or long-term impairment of a child's mental health or intellectual, emotional, social, or behavioural development. It should also cover the impairment of physical health. When making decisions, judgment should be exercised in cases where impairment is likely to be long-term, even if this is not immediately certain. Even if a child recovers, including from a one-off incident, serious harm may still have occurred.

The review is intended to identify single or multi-agency learning in the case and look at ways that this can be put into agency practice.

Under the guidance, the statutory partners have fifteen working days to undertake an initial "Rapid Review" of the circumstances of the case and decide whether there is a need for a more detailed "Local Child Safeguarding Practice Review" to gather the learning of the case.

Local Safeguarding Children Practice Review (LSPCR)

During 2019/20 TBP undertook a total of seven Rapid Reviews of cases. Of these the partnership made the decision that two of these required a more detailed review. Additionally the partnership identified opportunities for practitioner learning in different forms for two more cases. These were run as virtual events during 2021 due to Covid-19 restrictions but were widely praised as of value to those workers who attended. One of these was an appreciative enquiry event which involved workers and managers who had been involved in the case and sought to collectively look at what worked well in the case and what could have worked better. The second involved a series of learning presentations linked to the case that was open to workers from Bradford District as well as those from other local authorities across the region.

Local Safeguarding Children Practice Review (LSPCR)

- During this period two of the new cases moved forward to a Local Child Safeguarding Practice Review. This involves the appointment of an independent reviewer who will examine the information from all agencies and seek to identify areas of learning displayed by both good practice and where practice was less good within agencies and between agencies. They will seek to look at the way agencies both worked together and individually and provide recommendations for improvements. One of the reviews for “Grace” is due for publication in Autumn 2021 while another has identified an author and will commence in September 2021.
- In addition a case that commenced in 2019 and had been delayed by the pandemic restrictions for a case, “Emily”, was published early in 2021 and is available on the Safer Bradford website [Learning Review for “Emily” – click here to view](#). TBP also provided a “7 Minute Briefing” document to allow for briefing of staff across the partnership regarding the learning from the case [7 Minute Briefing – “Emily” – click here to view](#).
- Bradford partners also assisted Camden with a review into one of their cases which had some links to Bradford although no significant learning for agencies locally.
- In 2020/21 work continued into the CSE Thematic Review, which again was delayed due to Covid-19 restrictions. This was published in July 2021 and responses in relation to this will be reported on more thoroughly in next years’ report.

Learning / Training

The Bradford Partnership hosted a virtual conference in February 2021 focusing on tackling the criminal exploitation of children.

The event was brought together by TBP with the West Yorkshire Violence Reduction Unit , Bradford Council, West Yorkshire Police and other key partners.

The event had a range of nationally recognised speakers including those with lived experiences and was attended by over 200 delegates and marked the start of TBP contemporary response to exploitation.

“We all know that Child Criminal Exploitation (CCE) is not something that any one agency can deal with in isolation, it needs to be a collective partnership response”

West Yorkshire Police & Crime Commissioner (PCC) Mark Burns- Williamson OBE

Learning / Training

Whilst the last 12 months has been particularly challenging for a TBP training offer, a number of other forms of training has taken place on a variety of different subjects these included :-

- Virtual training
- Professional practice sessions
- Appreciative inquiry
- How to deliver effective virtual training

Single agency training on all areas of safeguarding continued throughout the period of this report



Other Partnership Achievements

Our work with the West Yorkshire Violence Reduction Unit has helped us refine data & better understand the threat of serious violence & exploitation, this enables partners to intervene earlier

Bradford District have retained a strong locality based youth service.

Youth work practitioners develop strong links to communities and neighbourhoods

Bradford's Breaking the Cycle is an exemplar of good practice. It stands strong in providing an intensive, intelligence led , and where required an invasive intervention service to young people who are risk of serious violence and exploitation (See case studies)

Did we make a difference ? – Case Study 1 – Child A

Child A was referred to services due to concerns regarding criminal & sexual exploitation. Child A was associating with older boys, who offered him rewards for stealing car parts and bikes, even acts of arson

1 to 1 support was provided focusing on the child's interests/hobbies . Sessions were focused on football in the park.

Child A always had a say on what work was been undertaken. Child A`s mother was always kept in the loop

What was the outcome ?

Child A was given sessions on fire safety , shared lived experiences with professional footballers and the consequences of committing crimes.

Child A at the time was in the transitional period from primary to secondary school .

He wrote letters to those he had offended against and has been an active member of a local sports club

Direct feedback – “I can use my new skills in other parts of my life”

Did we make a difference ? – Case Study – Child B

Child B was referred to services due to concerns of sexual abuse and vulnerability to exploitation

Child B had numerous missing episodes, instances of self harm and eating disorders.

1 to 1 support provided during Covid
Twice weekly sessions including contact via social media. Additional support provided by Barnados.

Therapeutic art and structured exploitation session completed
Additional support for Child B's carer

What was the outcome ?

Child B is now in engaging with additional support . Missing episodes have stopped. Child B is now in college

Child B is have on going support and has placement support via Positive Pathways to support her return to mothers care.

Direct feedback – Child B – Felt listened to, heard and protected by the workers.
Child B can now identify trusted adults

TBP Dashboard & Intelligence

TBP, through the Performance Management, Audit, and Evaluation (PMAE) sub-group, collates data and monitoring information regarding the extent to which children and young people who are subject to interventions achieve positive outcomes. Amongst the focused areas, the PMAE sub-group monitors the progress of priority issues as set out in the board business plan.

The following slides are an indication of some of the areas monitored by this sub-group. The sub-group meets quarterly and is chaired by the independent scrutineer Jane Booth.



Children's Social Care Contacts

Why is this important?

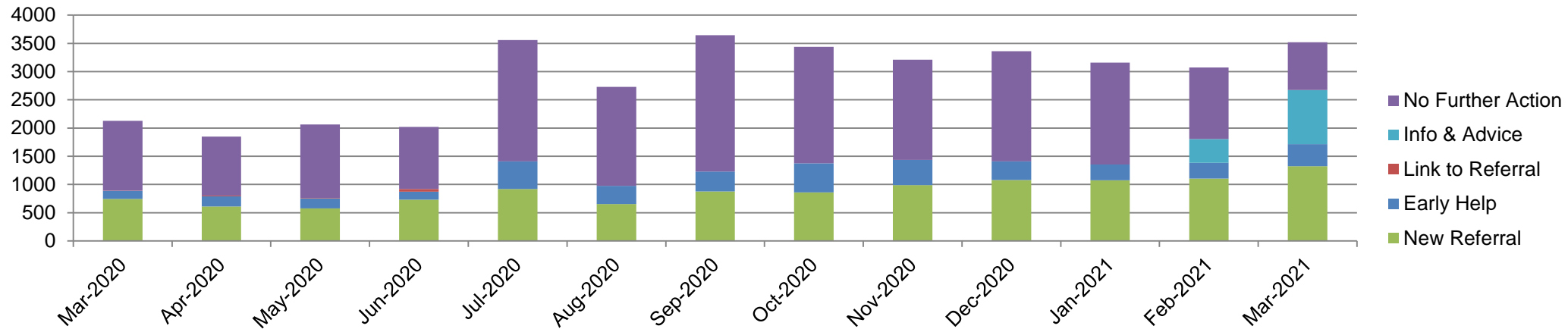
An effective service should be working with partners to limit the number of contacts that do not lead to a referral to ensure that demand is managed and dealt with appropriately.

What is our current trend and what are we doing about it?

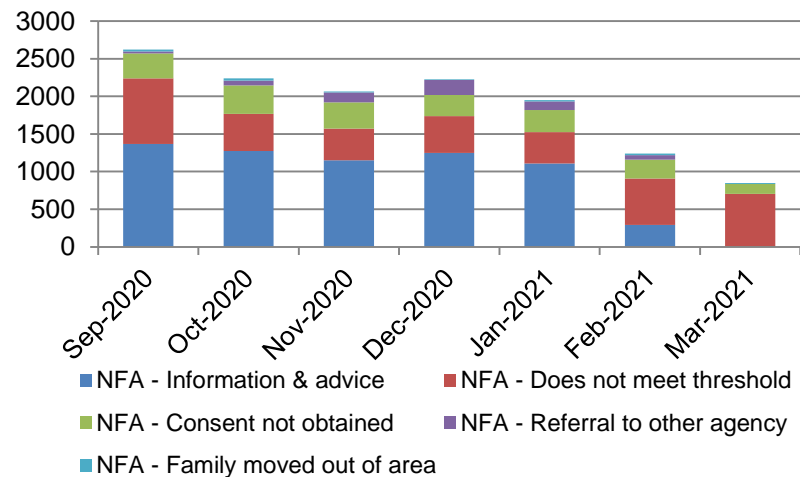
- The number of contacts received into the Integrated Front Door has significantly risen over the course of the year. In March 2021, a total of 3836 contacts were made to Children's Services. This is the highest monthly number of contacts received since September 2020. The rise in contacts is believed to be linked to schools returning during the Covid19 Pandemic. This has in turn resulted in a higher number of cases being progressed for a Social Work Assessment.
- Reassuringly, the number of cases referred to Early Help has increased and there is further work planned in this area to ensure children and families receive early, targeted and timely support. We continue to utilise our Early Help Coordinators in the locality Hubs who offer support to universal professionals identified as 'Lead Practitioners'. This ensures early help assessments are completed in the community to support families who have low or emerging vulnerabilities.
- Overall, the 12 month rolling average data details how the number of children and families accessing early help support has increased whilst the number in need of a statutory service has remained fairly stable. This offers some assurances about consistent threshold application for children in need of protection. Due to a new way of reporting, the number of contacts with an outcome of NFA has significantly reduced since February 2021.

TBP Dashboard & Intelligence

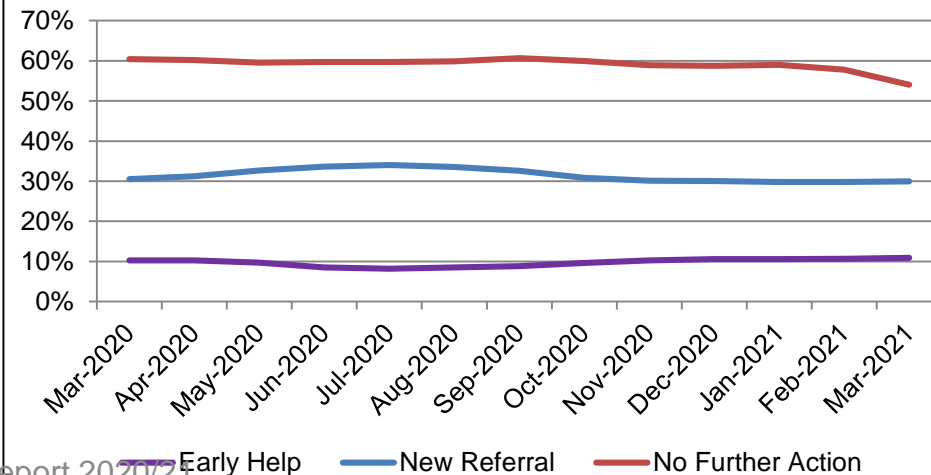
IFD Contact Outcomes



Breakdown of Contacts resulting in No Further Action



Contact Outcomes - Rolling 12 month averages



Early Help

Why is this important?

We aim to increase the number of children receiving early help. Early help prevents the needs to statutory interventions and ensure children and families receive support at the right time

What is our current trend and what are we doing about it?

Last month there was a reduction in the number of children receiving early help.

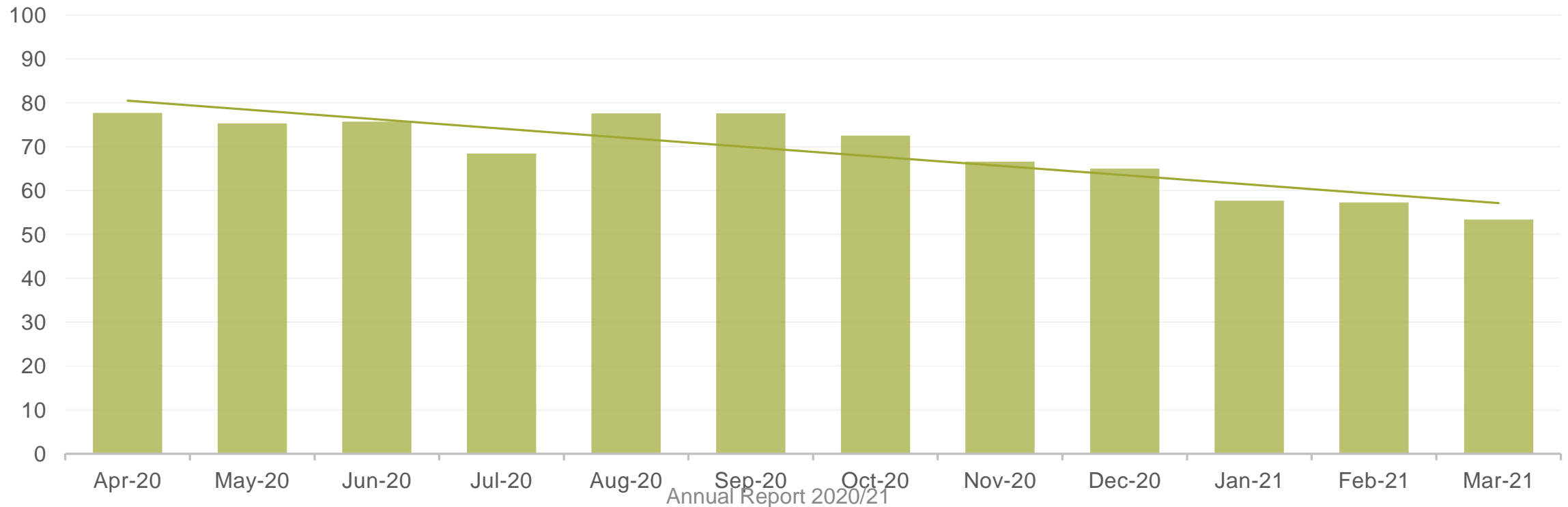
We are currently carrying out a targeted piece of work with the Integrated Front Door to ensure the pathway is robust. We want to ensure that all children are being considered for Early Help during the triage stages whether this be for Parenting, Family Support or with the support of a Lead Practitioner.

We have also reviewed and refined our step-down process. We strongly believe that once this process is embedded that it will be a more efficient and effective process to step down cases. This process is in the last stages of testing, we expect that it will be live within the next month.

We will further develop relationships with teams in localities to ensure pathways are robust and relevant cases are considered for Early Help. Locality allocation meetings are strengthened, with a more joined up working approach, by promoting more case discussions between the managers from locality teams and Early Help managers.

Early Help

Rate of children receiving Early Help support, per 10,000 population
(Multi-agency)



Children's Social Care Referrals

Why is this important?

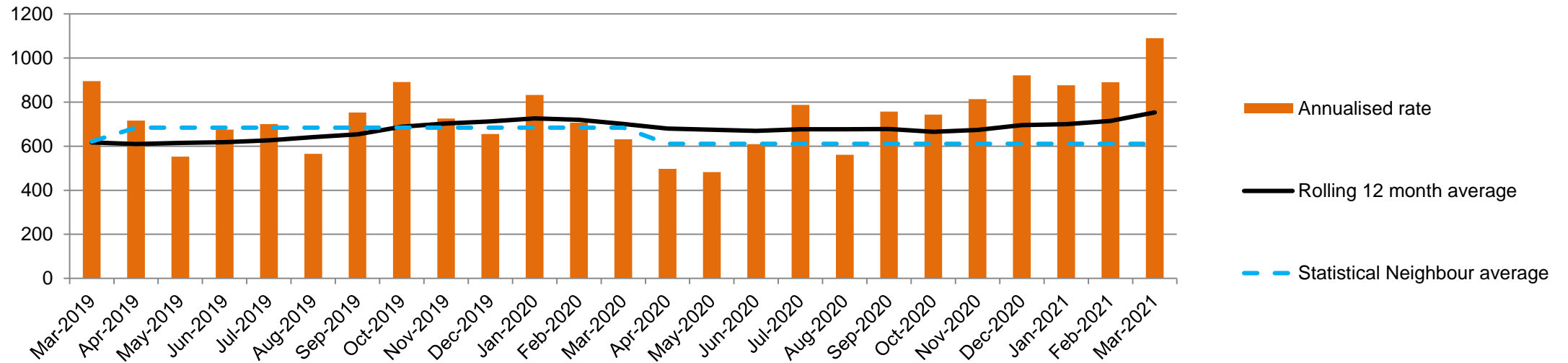
An effective service works across all partners to make sure that the right contacts come through the front door and contact centre that result in a referral.

What is the current trend and what are we doing about this?

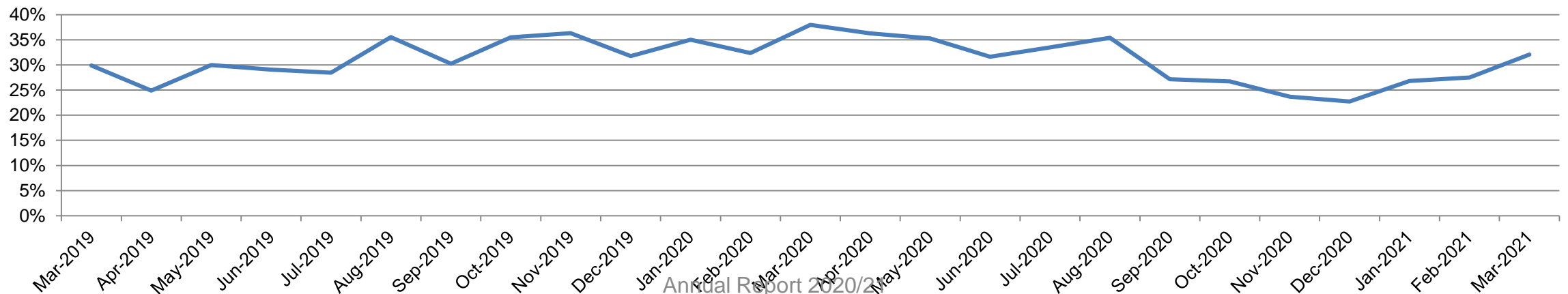
- The data for March shows that the referral rate in Bradford is higher than that of our statistical neighbours. Whilst this may raise some concern, it should be treated with caution, Bradford has received the highest number of contacts in comparison to all its statistical neighbours. In addition to this, some authorities who have a lower referral rate do have a higher *re-referral* rate than Bradford. There are a number of reasons why Bradford may be receiving more contacts than its statistical neighbours, these include geographical size, higher number of 0-16 population and factors such as the levels of deprivation across the district.
- Bradford applies a local measure to look at re-referrals which is 'a referral being received within 12 months of a previous referral being **closed**.' This measure is more helpful to us in assessing the quality of our work. A high % would indicate that our intervention has not been effective leading to a re-referral. However this does mean that there is no direct comparator data. Bradford's local re-referral data shows that re-referrals did reduce but have slowly started to rise since December 2020. The locality Heads of Service are reviewing re-referrals within their management meetings to identify any learning or themes arising.
- Locality Service Managers will identify and track cases that have been re-referred to ensure learning is promoted across teams. Our audit activity across the department also helps us understand if we could have done anything differently to prevent a child from being re-referred into the service.

Children's Social Care Referrals

Referral rates per 10,000 (annualised) against Statistical Neighbour average



Repeat referrals in month
(within 12 months of a previous referral closing)



Rate of Children Subject to a Child Protection Plan

Why is this important?

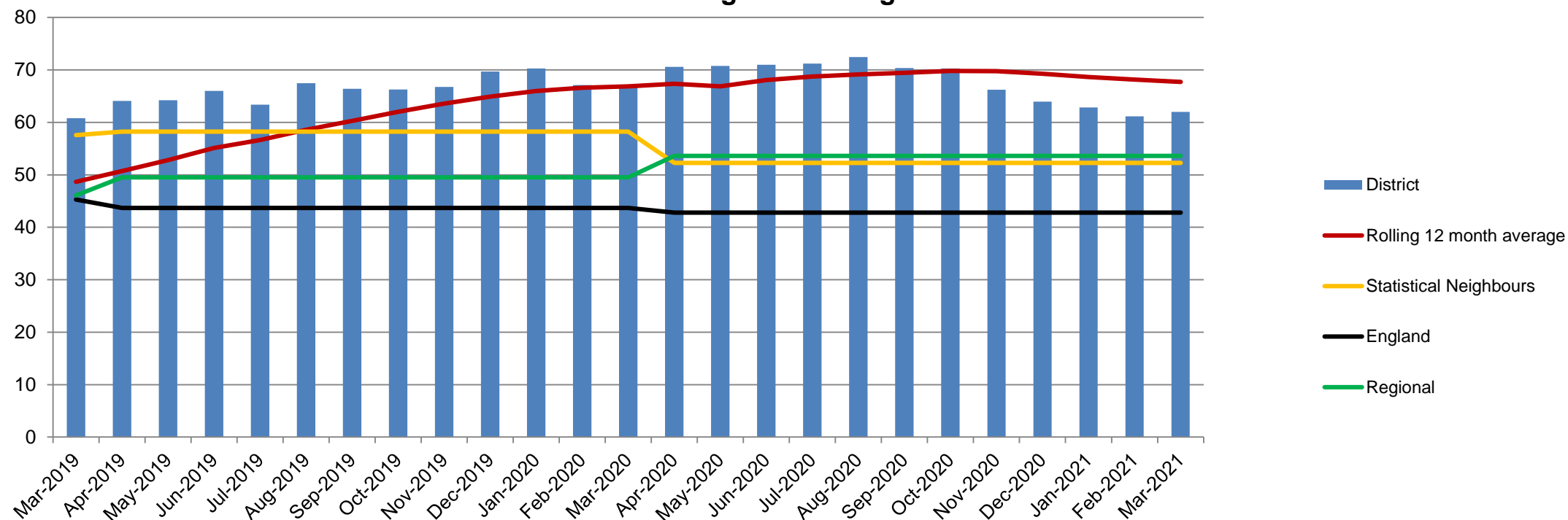
- This is a key measure which can be compared with statistical neighbours.
- The length of time a child is subject to a Child Protection Plan is important because it shows the length of time that the child has been at risk whilst in receipt of a multi-agency intervention.

What is the current trend and what are we doing about this?

- The number of children subject to a child protection plan was 858 at the end of March 2021. Whilst we have experienced an overall reduction there has been a recent increase in the number of children subject to plans with 917 children now subject to a Child Protection Plan as of 20.04.2021. The overall reduction relates to a number of factors including children no longer needing the protection of a CP Plan, children entering the care system and a specific focus on children who have been subject to a plan for a longer period of time.
- Our rate of children subject to plans remains above our statistical neighbours at 62 per 10 000 children compared to 53.6 per 10 000 for the region. Audit activity completed has noted that we continue to apply consistent thresholds.
- At the end of March 2021, we had 189 children subject to a CP plan for 1-2 years; this has remained static. We had 16 children who have been subject to a plan for over two years; this is a slight increase relating to 6 families with one family consisting of 5 children.

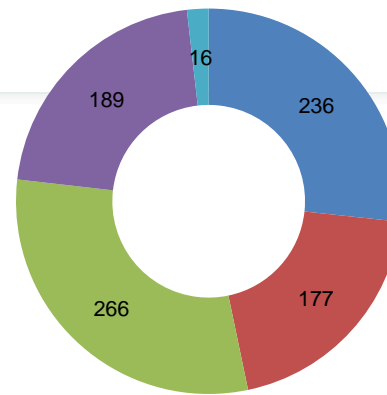
Rate of Children Subject to Child Protection Plan

Rate of children who are subject to a child protection plan, per 10,000 child population, relative to national and regional averages



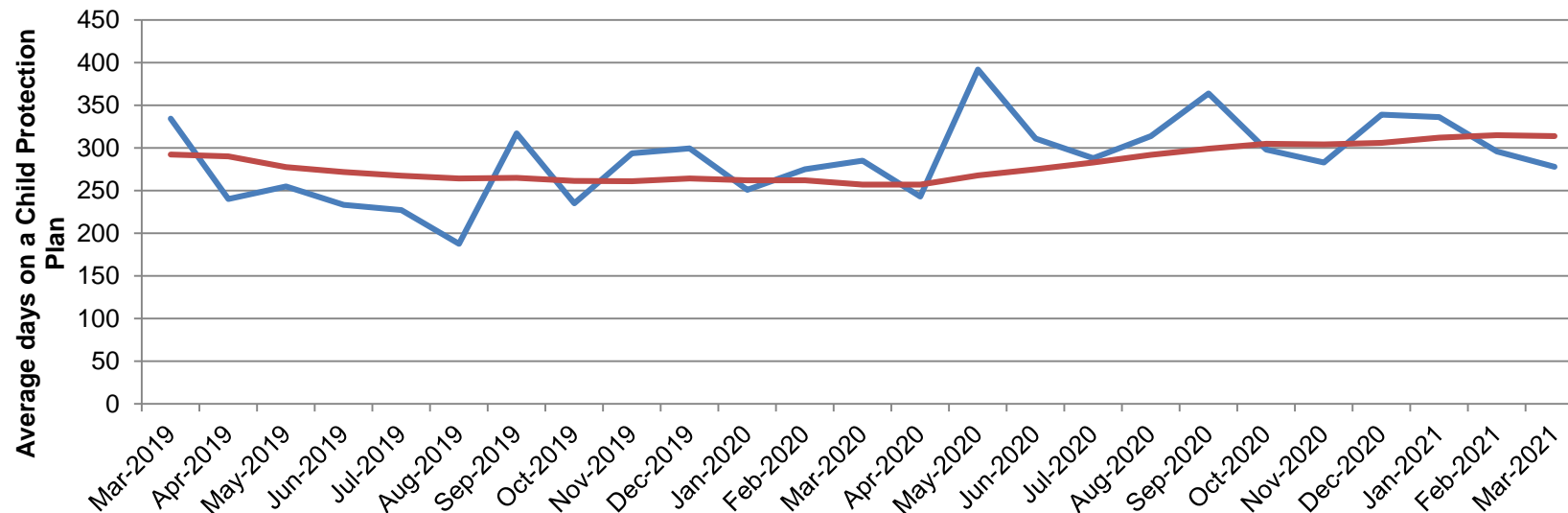
Length of time on Child Protection Plans

Current CPP by length of time on plan



- 1. under 3 months
- 2. 3 to 6 months
- 3. 6 months to 1 year
- 4. 1-2 years
- 5. 2+ years

Average time on CP Plan (based on completed cases)



- Average days on CPP for plans ending in month
- Rolling 12 month average days

The impact of Covid 19

COVID-19 has had a significant impact on the work of TBP from 23rd March 2020. As a consequence of responding to this crisis, services, resources, functions, plans, and programmes have been re-prioritised as our partners have responded to a rapidly changing and fluid situation that has included the regular provision of new guidance and legislation. Staff and volunteers have been doing an incredible job in challenging circumstances, working tirelessly through complex and challenging situations. In doing so, they have created new ways of working and gone above and beyond to ensure vital services keep running and that children and their families receive the help and support they need. It is recognised that this work will continue in this way for some considerable time.





Independent Chair of the Improvement Board

“The Partnership continues to be galvanised by the pandemic, with an increased meeting cycle and monitoring of the impact on demand for family support and child safeguarding arrangements. In addition, the Partnership has overseen challenging and sensitive case reviews providing recommendations and actions that it will track into the future. I am also very pleased and grateful for the joint scrutiny activities and progress monitoring that the Improvement Board and Safeguarding Partnership have undertaken jointly”

Stuart Smith – Independent Chair of the Improvement

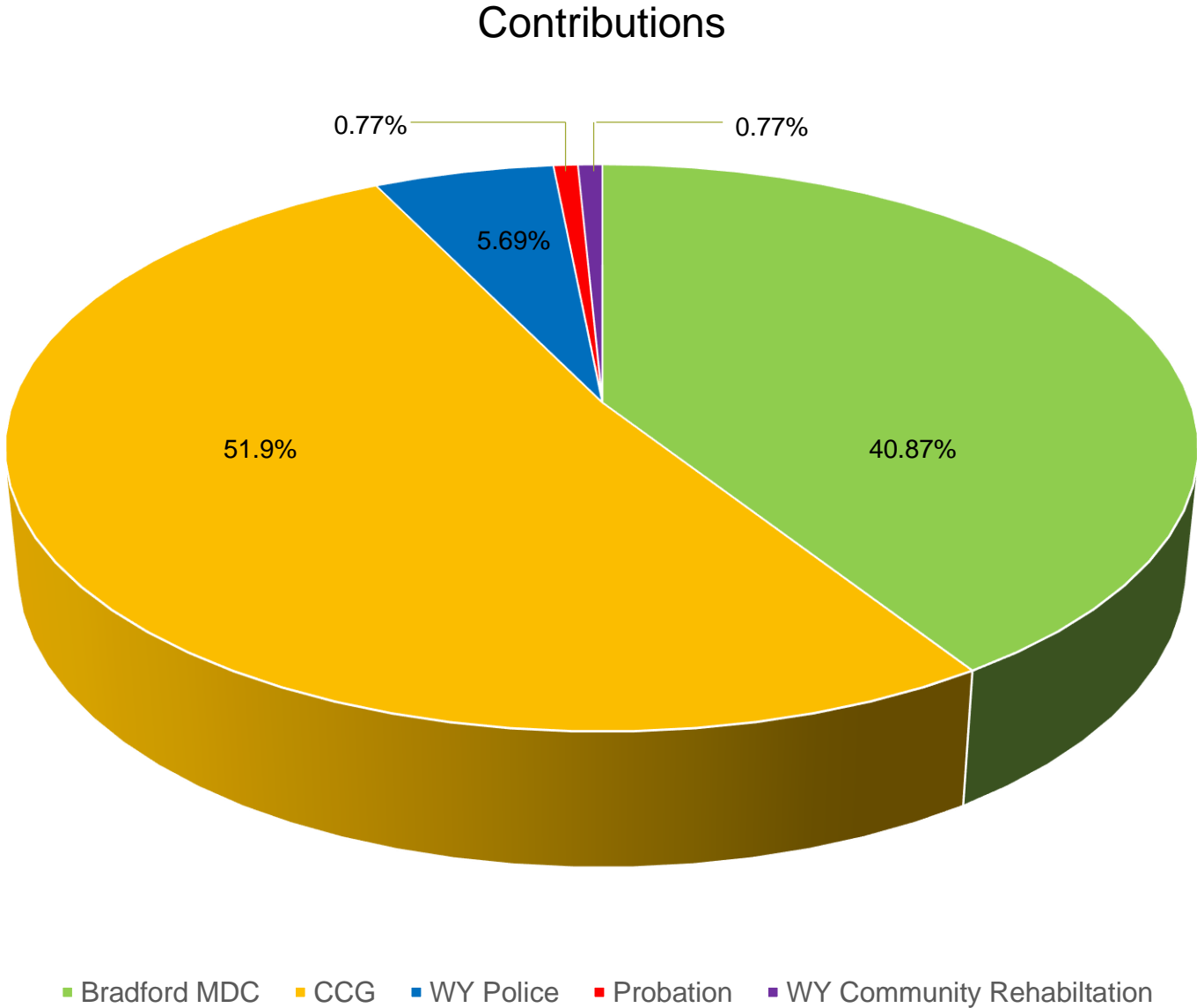
Website

Since January 2021 **The total number of visits to the site**

- 23,264 users
- 33,493 sessions (equivalent to visits)
- 82,869 pageviews (total number of times that pages on the website were viewed)

Funding

Outturn 2020/21
Budget £310,514
Final Costs £305,090
Overspend £5,424



Challenges & Emerging Risks

- Multi agency training offer has been limited during this period – This is an essential is for development, investment, and resource.
- The unknown volume of safeguarding risks & issues due to the impact of Covid 19 together protracted periods of lockdown will have on all partners & subsequent demand on staff while services recover.
- The abolishment of the CCG and move to the new integrated Care System (ICS).
- The management of caseloads for social workers safely – aligned geographically with the appropriate skill level for the allocated caseworker. Social care case is not yet of a consistently high standard.
- The recruitment and retention of experienced & specialist professionals, including social workers and detective constables.
- The growth in the youth and transient population.
- Increase in the number of unaccompanied migrant children as a result of international matters.
- The increase in online/cyber crime and perpetrator modus operandi.



TBP wishes to thank

The Independent Chair and Scrutineer and 'Safeguarding Partners' want to express their gratitude to the whole of the children's` workforce for their contribution and continued commitment to safeguarding children and young people in Bradford

Finding Help

If you or someone you know has experienced abuse, help is available:

- [Childline](#) can be called on 0800 1111
- [Help for Adult Victims of Child Abuse \(HAVOCA\)](#) offers online support
- [Mind](#) can be called on 0300 123 3393 or emailed at info@mind.org.uk
- [National Association for People Abused in Childhood \(NAPAC\)](#) can be called on 0808 801 0331
- [National Society for the Prevention of Cruelty to Children \(NSPCC\)](#) can be called on 0808 800 5000 or emailed at help@nspcc.org.uk
- [Rape Crisis](#) can be called on 0808 802 9999
- [Samaritans](#) can be called on 116 123 or emailed at jo@samaritans.org
- [The Survivors Trust](#) can be called on 08088 010 818
- [Victim Support](#) can be called on 0808 16 89 111
- The National Male Survivor Helpline can be called on 0808 800 5005 or emailed at support@safeline.org.uk

Contact details

The Safer Bradford website offers information and advice .

Please click on the link to access [Safer Bradford](#)

What should I do if I think I am being abused or I have concerns regarding someone else ?

- Ensure the immediate safety and welfare of the person at risk
- Call 999 – If urgent attention is needed
- Call 01274 437600 – Multi agency Integrated Front Door
- Call 01274 431010 – Emergency Duty Team (out of hours)
- Call 101 – If a crime needs to be reported but is not urgent, or
- Call 0800 555 111 call Crimestoppers

Additional click [Report a concern](#)

Preserve any evidence

If you can , accurately record the incident, any actions or decisions. Make sure you sign it and add the date and time