

Compass Team Newsletter

Issue 2 Summer 2023

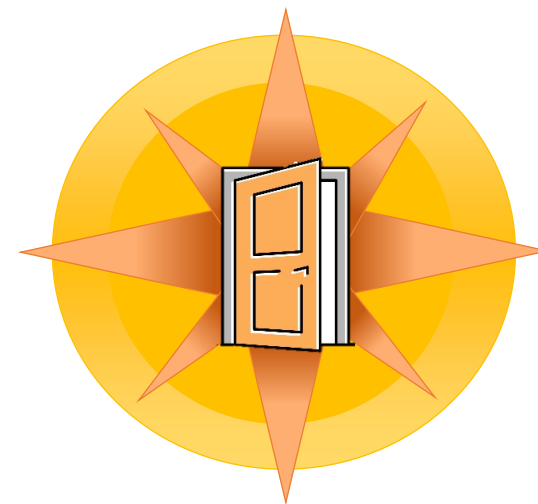
Welcome!

A warm welcome to all our partner agencies to our second edition of the COMPASS newsletter.

We hope that the information contained in this newsletter is both informative and useful and will give you an overview of the work we are completing in COMPASS.

This Newsletter will focus on data obtained from Quarter 2 (July-September 2023)

Gemma Onions & Kate Owen (COMPASS Team Managers)

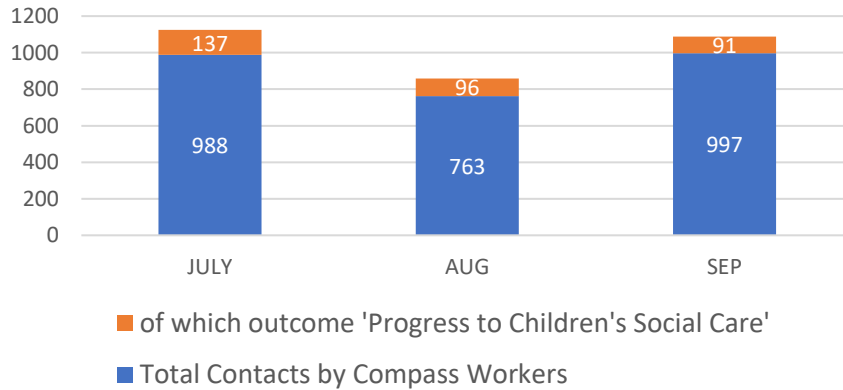


Themes of the Month

Data taken from Q2 2023 – July, August, September

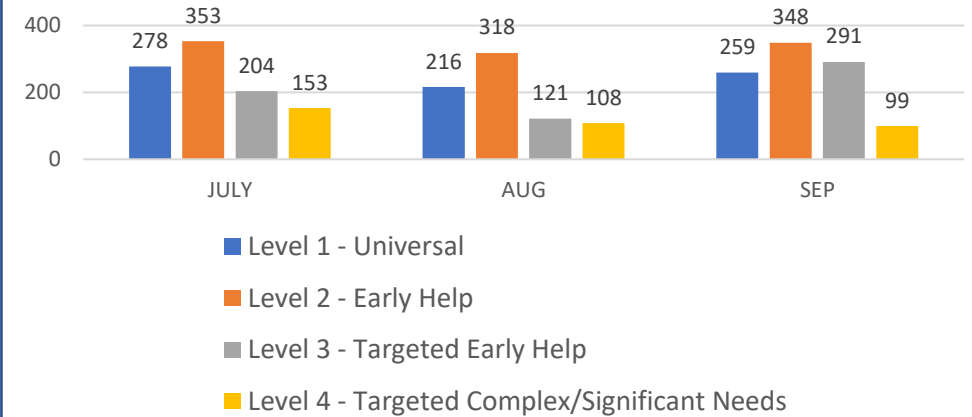


Total Contacts by Compass Workers of which outcome 'Progress to Children's Social Care'



In Q2, Compass raised a total of 2748 EHM contact forms. On average, 12% of these were progressed to Children's Social Care. We have seen a decrease in the total number of contacts in Q2 compared to Q1 (Q2=2748, Q1=3027), likely due to the summer holidays. However, the same percentage were still referred to Social Care in Q2: Q1=12% (371), and Q2=12% (324)

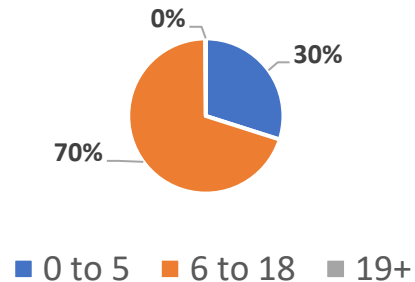
Vulnerability Level Breakdown



Above we can see the outcome breakdown of the contact forms. We continue to see a high number of referrals to Level 2 Services- this is a trend we also saw in Q1.

In September there was a 140% increase in referrals to Level 3 Targeted Early Help compared to August.

Age Band of Contacts



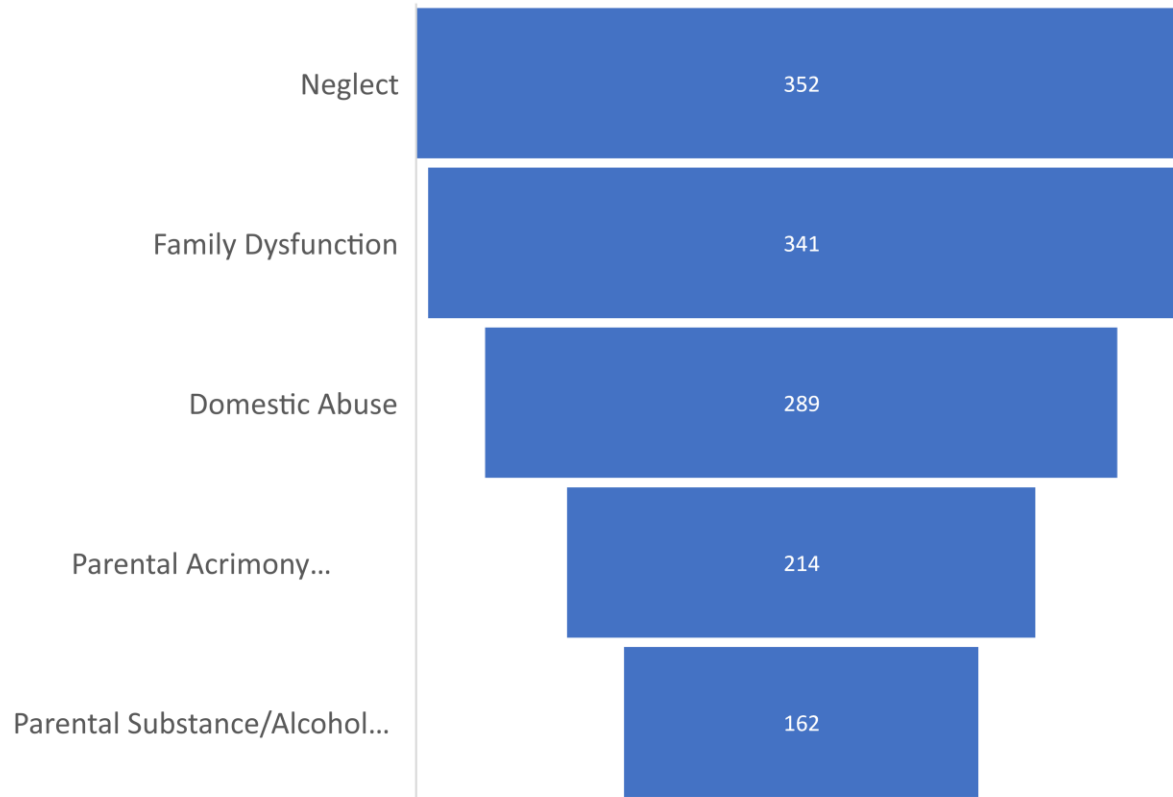
There is a clear majority of ages for the contacts we receive. 30% are between 0-5 years old, and 70% are between 6-18 years old.

Themes of the Month

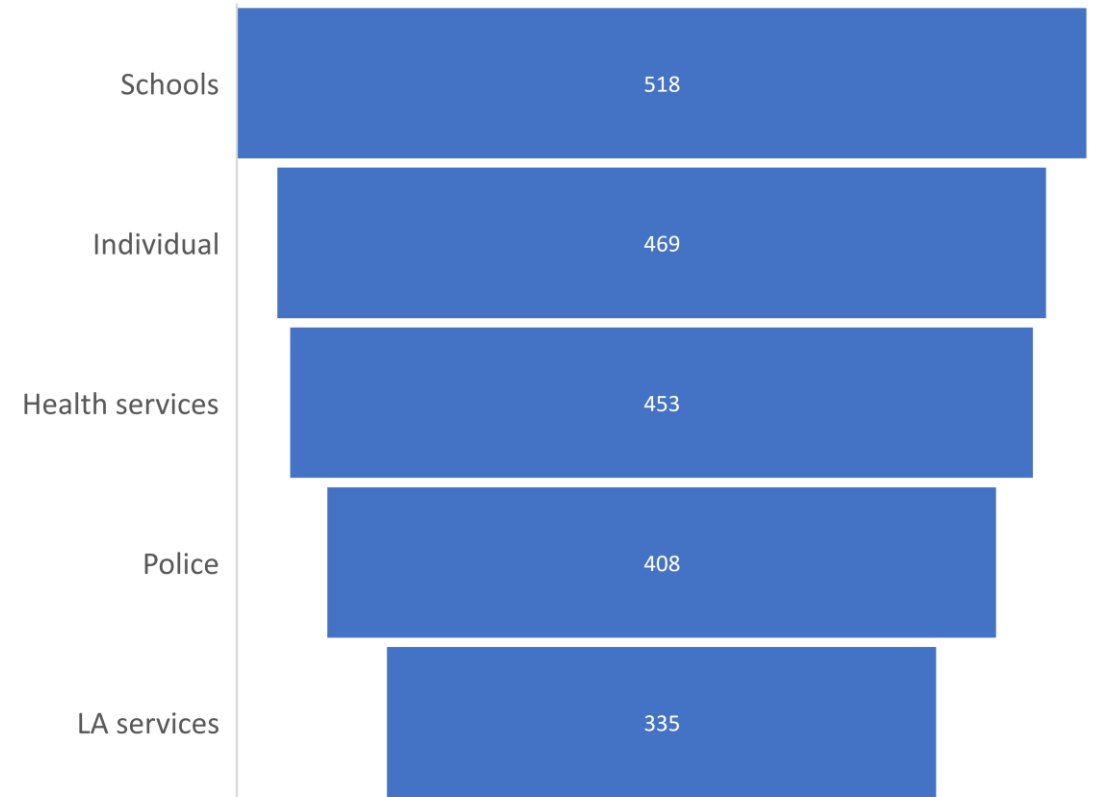
Our data reveals that **Neglect, Family Dysfunction, and Domestic Abuse** were the most common reasons for concerns being raised into COMPASS during this Quarter 2.

The most common referrers were **Schools, Individuals, and Health Services**.

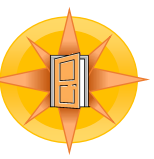
Compass top 5 Contact reasons in Quarter 2



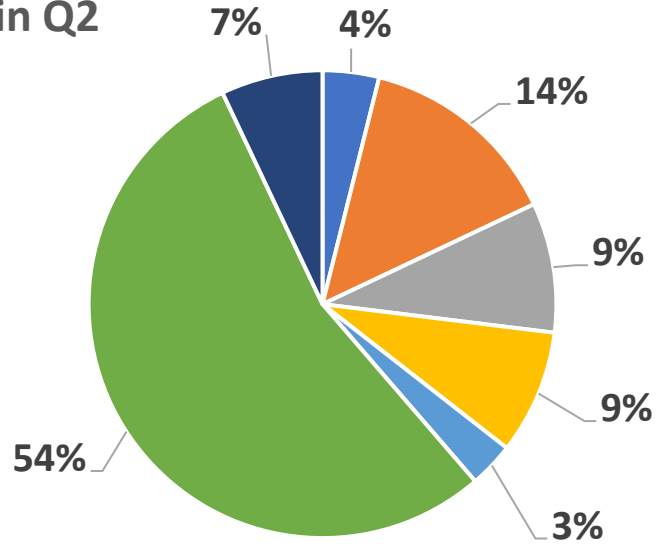
Compass top 5 referrers in Quarter 2



Compass Strategy Meeting Outcomes for Q2



Total Strats in Q2



- Follow-Up Strategy Discussion (FollowStratDisc)
- No Further Action (NFAStrat)
- Police Investigation (Police)
- Progress to Early Help Episode (E-CINS) (LCSECIINS)
- Referral to Other Agency (ReferStrat)
- Section 47 Enquiries (S47)
- Social Work Assessment (ICSCFAssess)

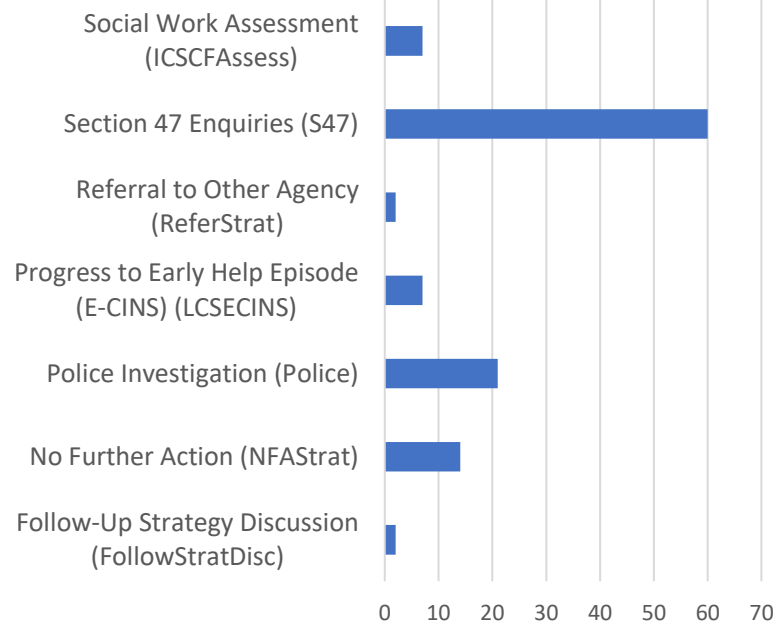
We can see from this data that the majority (54%) of Strategy Meetings in Q2 resulted in Section 47 Enquiries.

Follow-Up Strategy Discussion	10	4%
No Further Action	36	14%
Police Investigation	23	9%
Progress to Early Help Episode	22	9%
Referral to Other Agency	8	3%
Section 47 Enquiries	139	54%
Social Work Assessment	18	7%

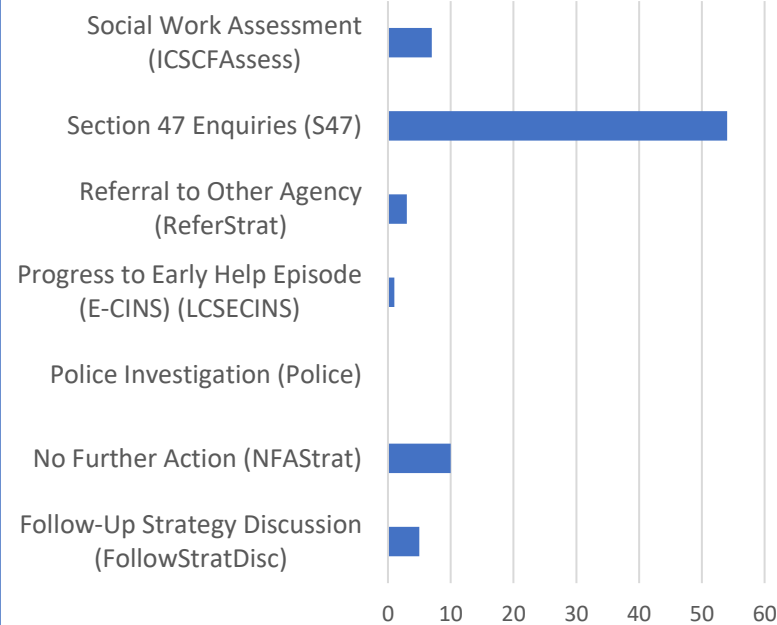
Compass Strategy Meeting Outcomes for Q2



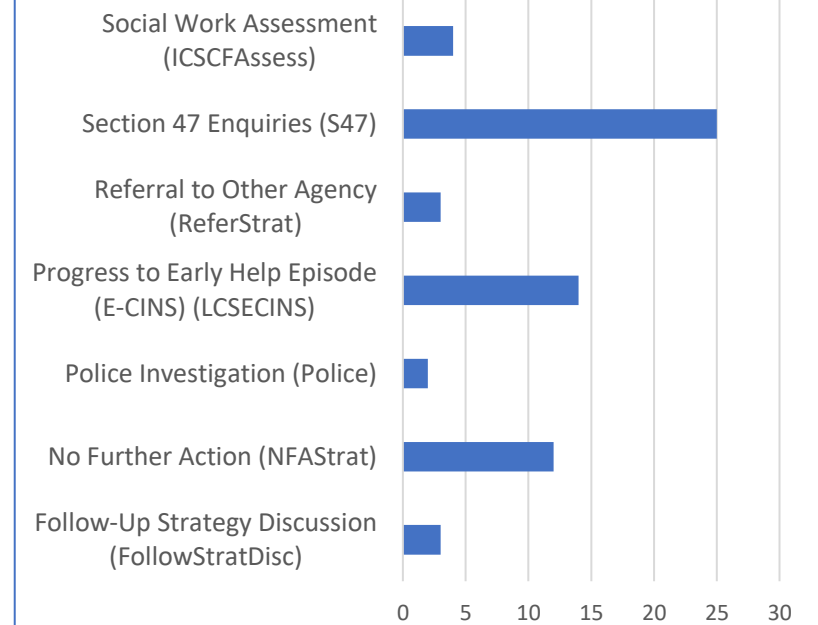
JULY



AUG



SEP



The majority of strategy meetings across Quarter 2 resulted in Section 47(Child Protection Investigations) being undertaken.

A day in the life of a Compass Team Co-ordinator



“A Day in the Life”

A showcase of a Day In The Life of our Compass team members

A little about me:

I am Letitia and I am a COMPASS team co-ordinator within children’s services, I have been in this role since July 2022. As well as working as a co-ordinator I also do voluntary Family Support work within the exploitation team. I have worked for Shropshire Council for 17 years, working within COMPASS since 2016 and at County Training prior to this.

I enjoy the fast paced and high-pressured work environment.

A little about the role:

We are a team of 5 co-ordinators who act as advocates. We support a culture of team working to ensure workflow functions are carried out within statutory deadlines. Every day we perform a myriad of tasks relating to the welfare of children. As co-ordinators we are responsible for responding to immediate concerns raised, these take priority as they are concerns from the public and professionals who are significantly worried about a child’s welfare. We often have duties and schedules designed to support our Senior Social Workers throughout the entire day including agency checks with professionals such as schools, other local authorities, police & health.

A co-ordinator often has several duties that they are required to complete daily. Here are some of the most common duties we complete as part of the role:

Domestic Abuse Triage:

DAT occurs daily, it provides a co-ordinated multi- agency response to domestic abuse incidents, ensuring that families receive support and intervention at the appropriate level. As co-ordinators we prepare the document that records all domestic abuse incidents and share this with all attendees. Every DA case will be discussed, rationale provided and recorded on our system.

Health Triage:

I am the lead co-ordinator for Health Triage, this takes place weekly. Our duties are to record and minute any additional details that are shared within triage as well as record on EHM. We also provide the referrer with the outcome and send support letters to families, where it is deemed necessary to offer support.

Child Incident Triage (CIT):

This is a relatively new multi-agency triage led by the police. This is held twice a week and we, as a team, process any referrals which reach level 4 threshold.

Work tray:

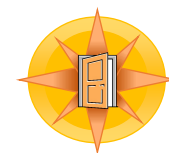
The work tray is a function on our electronic recording system (EHM) where all concerns that are referred via our FPOC team are logged. COMPASS co-ordinators will pick up these contact forms, complete the relevant recording and checks before assigning to a senior social worker for review. At the end of our working day it is vital that all outstanding contacts are cleared or at least checked by our Senior Social Workers who advise whether or not these can wait until the next working day. Any urgent contacts that are received at the end of our working day are referred onto our Emergency Social Work Team (ESWT) for review. All contacts that are received by our ESWT are reviewed by Compass the next working day.

Inbox:

We also receive concerns, MARF’s and notifications from various agencies into our email inbox. For example: LAC (Looked after Children) notifications, schools, midwifery, other local authorities, Exploitation Risk Assessments, CP and CIN transfer in requests from other local authorities, missing child notifications and more!

Contacts: Front door checklist:

A ‘front door’ is completed by co-ordinators for every new contact that is raised into COMPASS. We check the families’ demographics; address, schools, relevant social care history, health information and the family structure, linking relationships/associates and add these to the ‘front door’.



AUDIT activity

We regularly undertake themed audits to review current practices and decision making and make recommendations to improve the service.

Domestic Abuse Triage Audit

A random sample of 10 cases which had been considered at domestic abuse triage were reviewed. The auditors found that DAT continues to be a productive, multi-agency forum to discuss families where domestic abuse is a feature. There are well established systems in place to ensure each agency undertakes the preparation work before the triage and decision making in DAT is appropriate. Of the 10 cases reviewed the auditors agreed with the decision making and application of threshold.

SWA which stepped down to early help audit

In this audit 5 cases were reviewed. The auditors reviewed each concern and felt that all 5 of the cases did require a SWA due to the level of risk in the presenting information. It was noted that none of the cases were in receipt of Level 2 early help support at the point of referral and 60% of the cases had no level 3 support in place, consideration was given as to whether a more timely/ earlier offer of support by partner agencies may have prevented escalation into social care

Disabled Children's team triage audit

A random sample of 10 cases were reviewed, of these 6 had been considered at DCT Triage. 4 had progressed for a Disabled Children's Team assessment and 2 were progressed for early help support. It was noted that there was an improvement in attendance at the meeting by health which is positive.

Child Incident Triage audit

A random sample of 5 cases were reviewed. The auditors agreed with the multi-agency decision made in all 5 cases. The audit identified that CIT is an effective forum for sharing information, however it is the action taken following CIT which is important in providing timely support to the family

Strategy Meetings which led to S47 enquiries audit

This audit focused on strategy meetings leading to joint s.47 enquiries where the outcome was parents becoming arrested and subject to bail conditions, resulting in some situations of alternative care arrangements being needed for the children.

The audit activity was undertaken jointly by CSC and West Mercia Police (each agency selecting two cases each), resulting in 4 families being considered as part of the audit. We considered whether a strategy meeting was necessary/proportionate - i.e., reasonable cause to suspect a child was suffering significant harm and if so, considered the resulting actions of Police/CSC.

This audit, albeit a very small sample, has shown that for majority of the children a strategy meeting was the appropriate course of action. For a small number of the sample, a single agency investigation or further information gathering would have been more proportionate than a joint s.47 investigation. These cases in the sample resulted in parents being arrested and bail conditions applied.

In two of the cases, this resulted in the children being cared for by alternative carers (one in Local Authority Care and one with wider family at a distance)

The other two cases resulted in the parent being bailed away from the family home. This caused an element of stress and pressure within the family home, leaving the one parent to care for the children: One parent had significant support issues due to their own health needs, and another parent was unable to cope with the multiple children within the home without the support of her partner.

3 of the 4 cases children social care had requested an expedition of the police investigation which was duly agreed with resulting in bail conditions ending and the families being reunited.



Charity Spotlight

In each Newsletter we would like to highlight a charity that is close to someone in our team.

Riley's fight with blood cancer



Ctrl+Click the logo to go to the GoFundMe page



A little bit about Riley from Mum Natalie

Riley is a typical 12-year-old boy who loved football, gaming and playing out with his mates. Riley is the best big brother to Joel (9) and Lucas (5) and are practically inseparable. Riley is a genuinely lovely, kind and caring boy and is always the life and soul of every party/occasion where he loves nothing more than to be up singing, making everybody laugh. During a family holiday to Greece this summer, tragedy struck when Riley fell poorly and was quickly diagnosed with Stage 4 Burkitt Lymphoma, an aggressive form of blood cancer. Riley went straight to A&E the day he returned from Greece on August 28th and was transferred to Birmingham Childrens Hospital where he has remained in hospital since, fighting for his life.

From the GoFundMe Page

On Tuesday 29th August Riley's family received the worst possible devastating news. In Natalie's (Riley's mothers) words, "an absolute living nightmare". Riley was diagnosed with Burkitt Lymphoma which is a form of blood cancer. The family are utterly heartbroken. Riley is currently being treated at Birmingham Children's hospital in a critical state in ICU being supported by the incredible doctors and nurses alongside his family.

Burkitt lymphoma is a rare, fast-growing type of cancer that starts in white blood cells in the lymphatic system. The symptoms of Burkitt lymphoma often start suddenly and escalate quickly. A child can become very sick with no warning. Riley and his family have a huge fight ahead full of uncertainty and a continuous rollercoaster of emotions with many highs and lows. It's currently unknown how long Riley will remain in ITU, or when he will be well enough to return home. This will be followed with a minimum of 6 months intensive treatment.

As two of Natalie's closest friends we are hoping to raise money for Riley and his family to provide some relief and much needed financial stability over next six months. This will enable Riley's family to focus on his treatment, the multiple hospital stays and visits, the loss of income due to being unable to work whilst trying to give Riley's brothers Joel and Lucas some sense of normality.

We know times are hard for everyone, however anything you can give big or small would be a huge help to lessen the burden for this beautiful family.

Thank you in advance for any contributions, we're so proud of Riley and the strength him and his family are showing.

This page has been published with permission and consent from Riley's Mum Natalie

National Policy: How it impacts our work

INDEPENDENT REVIEW OF CHILDREN'S SOCIAL CARE: FINAL REPORT (JOSH MACALISTER: MAY 2022)

*Improving child protection is not the same as increasing the amount of child protection activity. Over the last 11 years child protection investigations have increased by 127%, however the number of these investigations that did not result in a child protection plan have increased by 211% over the same period, reaching 134,960 in 2020/21 (Department for Education, 2021a). **Instead we need to focus on the quality and accuracy of child protection work - making the right decisions about where investigation is necessary and where support would be the most effective route to keep children safe.***

In considering this review we have been doing some audit activity on section 47 investigations that have resulted in 'no further action'. One of the outcomes of this audit was for some children, child protection processes and investigations were disproportionate, especially when incidents or concerns were in isolation with limited history and limited evidence of how families have been assisted to overcome challenges and difficulties.

In response to this we have recently held a workshop to look at threshold for strategy meetings and consider the criteria a section 47 investigation for both single and joint investigations. We considered that taking a supportive approach to families, where it is safe to do so, can have a better outcome for that family as opposed instigating child protection investigations which can be viewed as being oppressive.

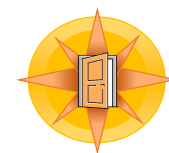
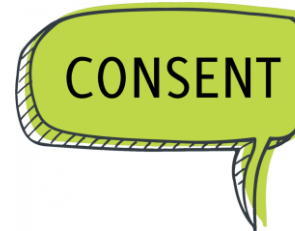


A bit about CONSENT

Working Together to Safeguard Children

A guide to inter-agency working to safeguard and promote the welfare of children

July 2018



Page 21: [Working Together to Safeguard Children 2018 \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

Myth-busting guide to information sharing

Sharing information enables practitioners and agencies to identify and provide appropriate services that safeguard and promote the welfare of children. Below are common myths that may hinder effective information sharing.

Data protection legislation is a barrier to sharing information

No – the Data Protection Act 2018 and GDPR do not prohibit the collection and sharing of personal information, but rather provide a framework to ensure that personal information is shared appropriately. In particular, the Data Protection Act 2018 balances the rights of the information subject (the individual whom the information is about) and the possible need to share information about them.

Consent is needed to share personal information

No – you do not need consent to share personal information. It is one way to comply with the data protection legislation but not the only way. The GDPR provides a number of bases for sharing personal information. It is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required. The legal bases that may be appropriate for sharing data in these circumstances could be ‘legal obligation’, or ‘public task’ which includes the performance of a task in the public interest or the exercise of official authority. Each of the lawful bases under GDPR has different requirements.¹⁵ It continues to be good practice to ensure transparency and to inform parent/carers that you are sharing information for these purposes and seek to work cooperatively with them.

Personal information collected by one organisation/agency cannot be disclosed to another

No – this is not the case, unless the information is to be used for a purpose incompatible with the purpose for which it was originally collected. In the case of children in need, or children at risk of significant harm, it is difficult to foresee circumstances where information law would be a barrier to sharing personal information with other practitioners¹⁶.

The common law duty of confidence and the Human Rights Act 1998 prevent the sharing of personal information

No – this is not the case. In addition to the Data Protection Act 2018 and GDPR, practitioners need to balance the common law duty of confidence and the Human Rights Act 1998 against the effect on individuals or others of not sharing the information.

IT Systems are often a barrier to effective information sharing

No – IT systems, such as the Child Protection Information Sharing project (CP-IS), can be useful for information sharing. IT systems are most valuable when practitioners use the shared data to make more informed decisions about how to support and safeguard a child.

With the exception of child protection matters, referrals to Compass cannot be accepted without parental consent.

Consent is not required for child protection referrals where it is suspected that a child may be suffering or be at risk of suffering significant harm; however, the referring practitioner, would need to inform parents or carers that you are making a referral, unless to do so may:

- Place the child at increased risk of Significant Harm; or
- Place any other person at risk of injury; or
- Obstruct or interfere with any potential Police investigation; or
- Lead to unjustified delay in making enquiries about allegations of significant harm.

The child’s interest must be the overriding consideration in making such decisions, decisions should be clearly recorded.

Working Together Consultation

A Snapshot: Updates to the National Framework



Children's Social Care National Framework

A government response to the consultation on principles for practice, expected outcomes and indicators

September 2023

From the Consultation Response document:

In February 2023, the Government launched a consultation on the Children's Social Care National Framework and the Children's Social Care Dashboard. The consultation on the National Framework and Dashboard took place over 14 weeks, from 2nd February to 11th May 2023.

CTRL + Click the link below to access the document:

[Children's social care national framework and dashboard: consultation response \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

Government response – multi-agency working in the National Framework

You said the National Framework should:

- Include more content on multi-agency working, the role of safeguarding partners and the relationship between the National Framework and the revised, Working Together

In redrafting the National Framework we will:

- Introduce a new chapter on how multi-agency working enables effective practice
- Consider the responses to the Working Together consultation and ensure that the National Framework reflects the revised guidance

"The National Framework is written for local authorities. It includes multi-agency working as one of five key principles that should underpin practice and the guidance asks local authorities to build strong relationships with other agencies, and consider the information, expertise, and resources they can offer. We explain early on that Working Together is the multi-agency statutory guidance that sets out expectations for the system that provides help, support and protection for children and families. It gives practitioners clarity about what is required of them individually and how they need to work in partnership with each other to deliver effective services."

In the revised National Framework, we will strengthen references to multi-agency working by introducing a new chapter on how multi-agency working enables effective practice and improved outcomes for children and families. Working Together will remain the statutory guidance for all safeguarding partners, including local authorities, setting out the expectations for how multi-agency help, support, safeguarding, and protection is delivered locally including detailed information on processes and procedures. The National Framework will not place additional burdens on safeguarding partners and relevant agencies and will instead draw content from Working Together to highlight how the system should work to improve outcomes for children and families. We will ensure the National Framework signposts to and aligns with the revised Working Together guidance."

**Don't Delay
Referring
Child
Protection
Concerns**

Referrers:

A Note about the upcoming holidays

During this next Quarter we have the Christmas holidays coming up, we understand that this can be a time of increased pressure on families who are struggling or in need of some additional support, and professionals may have worries for children over these holiday periods.

We would politely request that there are no delays in referring child protection concerns. We do see a pattern of referrals coming in on the afternoon of the last day of term - this presents a challenge for us as often referrers are breaking up for their own holidays and we cannot contact them for more information. This 'flooding' of referrals in Compass also creates a demand issue and could potentially mean that those children who really do need a child protection response are not screened as quickly as they could be, had we not been flooded with referrals.

Please bear in mind that if the concerns are not of a child protection nature that we have the Early Help and Support Team (EHASt) who can provide support.

Please see the next slide for the pathway of how you can refer a child into EHASt.

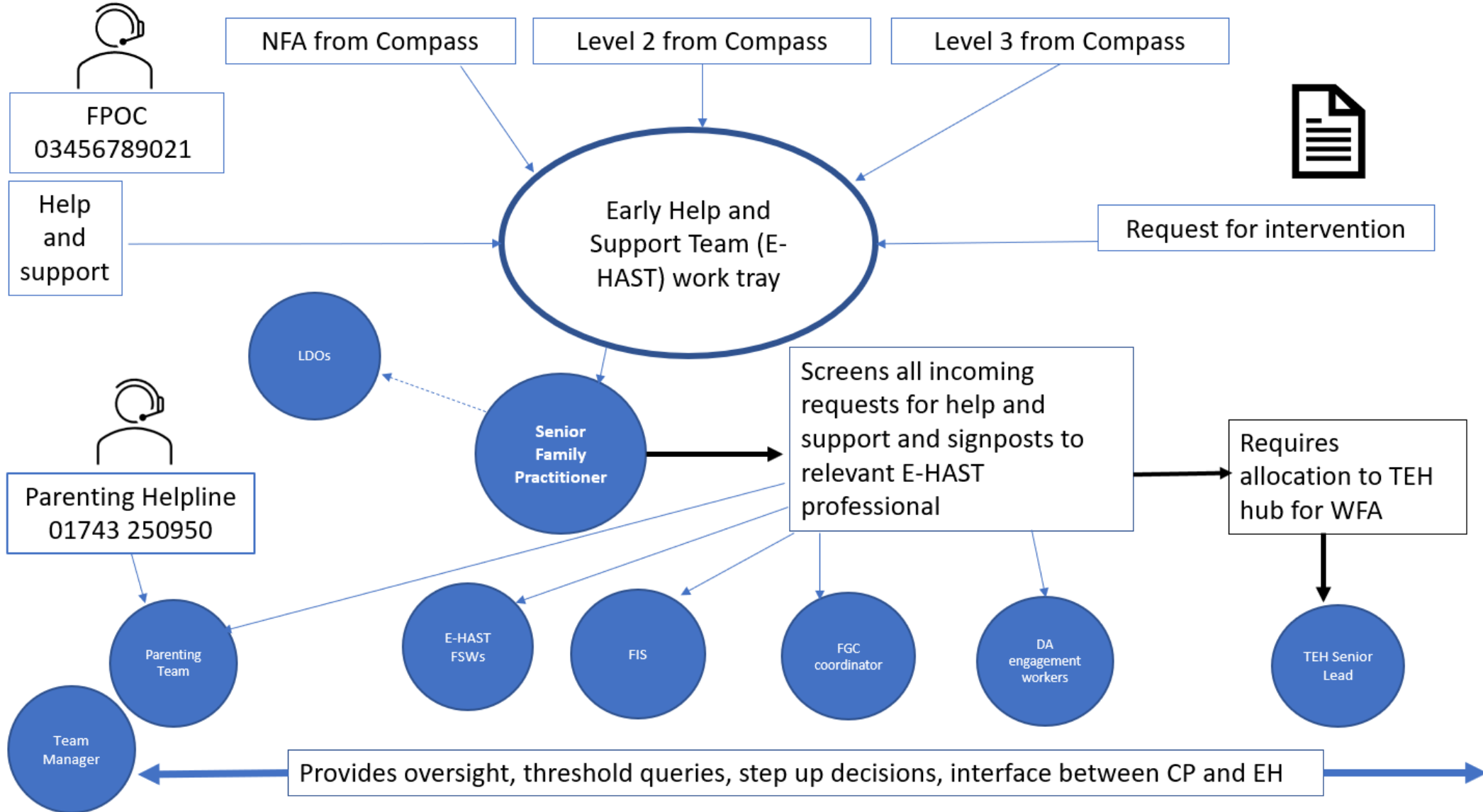
Password Protected Documents

If you are sending in a MARF password protected, please can you follow up straight away with a password in a separate email. We are not in a position to call you to obtain the password.

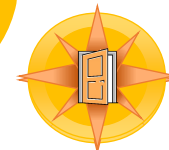
This ensures we can deal with the concerns in a timely manner.



NEW Early Help Front Door Process



Key Contacts & Useful Documents



First Point of Contact (FPOC) (Compass and Initial Contact Team)	0345 678 9021
Emergency Social Work Team	0345 678 9040
West Mercia Police	101
If you think a child is in immediate danger, call the emergency services	999
Shropshire Early Help	Earlyhelp@shropshire.gov.uk
Shropshire Strengthening Families	Shropshirestrengtheningfamilies@shropshire.gov.uk
Compass - For safeguarding concerns for children	Compass.referrals@shropshire.gov.uk
Shropshire Family Information Service	01743 254400 and ShropshireFIS@shropshire.gov.uk
Shropshire Housing Options	0345 678 9005
Citizen's Advice	https://www.citizensadvice.org.uk
Domestic Abuse Helpline 24-hour	0808 2000 247
NSPCC	0808 800 5000
Family Lives – parent helpline	0808 800 2222 http://www.familylives.org.uk
Local Offer website	http://new.shropshire.gov.uk/the-send-local-offer
Shropshire Choices	https://www.shropshirechoices.org.uk/home
All In Registrations	http://new.shropshire.gov.uk/the-send-local-offer/parentcarers/socialcare/short-breaks-activities
Occupational Therapists via First Point of Contact	0345 678 902

Useful links & Documents

Multi-agency guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire

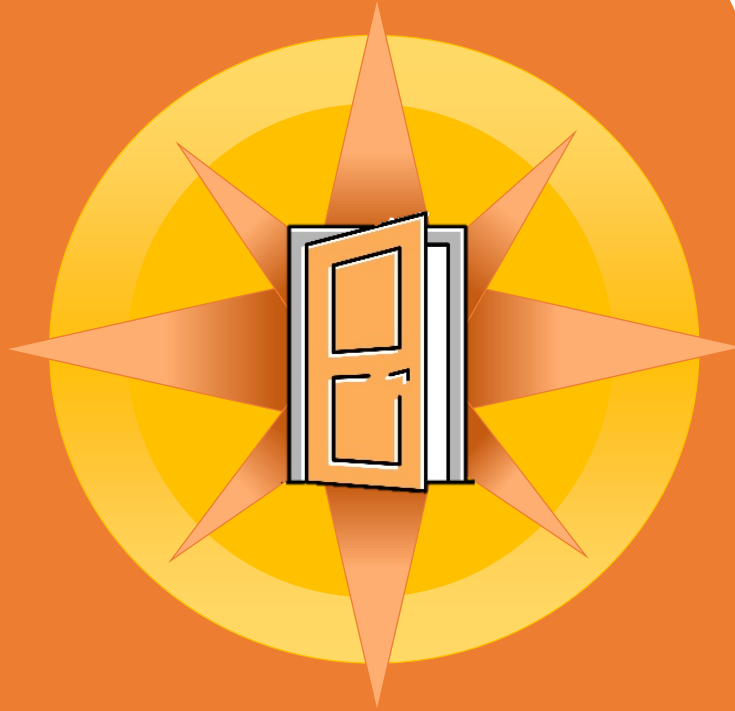
[Childrens Threshold Document](#)

Shropshire Safeguarding Community Partnership

[Shropshire Safeguarding Community Partnership](#)

West Midlands Children's Safeguarding Procedures

[West Midlands Safeguarding Children Group \(procedures.org.uk\)](#)



Thank you!

Thank you for reading this issue of the Compass Newsletter.

We look forward to bringing you the next newsletter for Q3.

Gemma Onions & Kate Owen (COMPASS Team Managers)

Designed by Rebecca Bean (Compass Coordinator)