



**Hounslow Safeguarding Children Partnership Meeting**  
**Monday 20<sup>th</sup> April 2020**  
**3.00pm – 4.10pm**  
**Virtually, via MS Teams**

<b>Attendees</b>		
<b>Name</b>	<b>Agency</b>	<b>Designation</b>
Hannah Miller	Hounslow Safeguarding Children Board	Independent Chair
Steven Forbes	London Borough of Hounslow	Executive Director for Children’s and Adults
Jennifer Hopper	London Borough of Hounslow	Head of Safeguarding & Quality Assurance
Jo Leader	Hounslow Safeguarding Children’s Partnership	Business Manager
Annita Cornish	London Borough of Hounslow	Interim Assistant Director Special Educational Needs and Disability
Vicki Taylor	London Borough of Hounslow	Interim Assistant Director Education & Skills
Dr Nirmala Sellathurai	CCG	Designated Doctor Safeguarding Children
Sarah Green	Chelsea & Westminster Hospital	Consultant Midwife for Public Health and Safeguarding
Tony Bowen	HRCH	Named Nurse Safeguarding Children
Kerry Jacks	Feltham YO1	Head of Safeguards
Helen Flanagan	West Area BCU Met Police	Detective Superintendent
Parminder Sahota	West London NHS Trust	Director of Safeguarding Children and Adults
<b>Apologies</b>		
<b>Name</b>	<b>Agency</b>	<b>Designation</b>
Martin Forshaw	London Borough of Hounslow	Interim Assistant Director – Children’s Safeguarding & Specialist Services
Emelia Bulley	CCG	Designated Nurse Safeguarding Children

**1) Introductions & Apologies**

Partnership members introduced themselves to the meeting. Apologies of members unable to attend were noted.

Due to Covid – 19, the partnership board meeting was held virtually with a reduced membership. The discussion was focused on seeking assurance about the delivery of statutory safeguarding responsibilities and ensuring that contingency planning from key partnership agencies continued to prioritise safeguarding during the pandemic, despite redeployment and reduction in capacity.

## **2) Minutes of the last meeting & matters arising**

The minutes of the last meeting were agreed and no matters arising were discussed. The action log was updated.

## **3) Communication from London Councils and Practice Review Panel**

Jo Leader summarised the reports which were circulated to members prior to the meeting and welcomed comments and questions.

### **Summary of London Safeguarding Partnership Executive position**

In light of the coronavirus, the London Safeguarding Children Partnership Executive had a teleconference on the 31<sup>st</sup> March 2020 to discuss the work to safeguard children and how the 3 statutory partners, health, police and local authorities, were responding to the crisis.

The London Safeguarding Children Partnership Executive agreed that the three statutory partners would continue their safeguarding function although at reduced capacity and with significant changes to the way services are delivered.

The Partnership raised concerns that child abuse and neglect would increase during lockdown and it would be harder to detect. Local Authorities across London have noted an initial decrease in referrals to the Front Door Service which could likely be the result of the closure of schools and the changes in the delivery services including staff reduction which would have an impact on the identification and reporting of concerns.

There would be a need for ongoing and close monitoring and action taken if it was felt that children at risk are not being identified and referred.

It was noted that children were likely to face increased risk as the lockdown continued because of a range of issues, including the following:

- Greater opportunities for abusive parents to harm their children and very limited opportunities for children to alert others to what was happening.
- Increase in domestic abuse.
- Parents and carers experiencing deteriorating mental health.
- Neglect exacerbated by increasing financial and emotional pressures on parents and carers.
- Children experiencing deteriorating mental health.
- Increased time online would make children more vulnerable to online abuse.
- Missing children are likely to be at increased risk.
- Any harmful practice, such as FGM, which the lockdown may enable parents/carers to hide more easily.

The Partnership acknowledged that Local Authorities may have similar concerns and asked that they are contacted regarding any presenting issues.

## **Practice Review Panel timescales and expectations**

The Local Authorities duty to notify child safeguarding incidents remains the same. It is the expectation that the Child Safeguarding Practice Review Panel is notified of any known child abuse or neglect within five working days of the local authority becoming aware of the incident.

It is acknowledged that the 15-day timescale for Rapid Reviews could be a challenge for partnerships to achieve, therefore timescales have been relaxed, however it is recommended that partners to complete information gathering as quickly as possible to ensure lessons can be learnt and action taken.

The commissioning of Child Safeguarding Practice reviews identified following a serious incident are likely to be delayed as capacity and resources are re-prioritised to address immediate safeguarding response. It is recommended that any form of review that is recommended is commissioned at the earliest practical point.

The Practice Review Panel must still be informed seven days in advance of any Serious Case Reviews and Child Safeguarding Practice Reviews which are due to be published.

### **4) Assurance of core statutory safeguarding service delivery during Covid-19:**

The Chair stated that due to the unprecedented time with Covid-19, the HSCP will regularly seek assurance that partner agencies are delivering statutory safeguarding responsibilities to vulnerable and at risks children in Hounslow and that contingency plans which prioritise safeguarding are in place within their service.

### **Children's Social Care**

Jennifer Hopper, Head of Safeguarding and Quality Assurance summarised the report for Children's Social Care and welcome comments and questions.

For context, it was articulated the school population in Hounslow is approximately 44, 000 children and young people and many of them are out of education and the structure and supportive environment school offers. Although schools are open for key workers and children who are vulnerable and known to Social Care, many of those children are not attending school and therefore so not have the protective factor that it provides.

The Front Door has continued to operate as usual and is receiving contacts and progressing referrals with no drastic reduction in the referral rate, figures are similar to those seen during school holidays. The Safeguarding teams are largely operating and fulfilling their statutory duties by delivering 'business as usual'. Cases are being prioritised based on risk and most vulnerable and would the list is being regularly reviewed by senior management

Presently, social workers continue to undertake face-to-face visits and calls are screened prior to all visits. Where visits are refused by families, staff are working with parents / carers to undertake virtual visits using video calling. Children Social Care have issued staff with a pre-visit screening process which needs to be undertaken before each visit and there is underpinning guidance about how to undertake a home visit. There is a good supply of Personal Protective Equipment (PPE) which is available to all staff who need it.

Child Protection (CP) Conferences and Looked After Child (LAC) Reviews are being undertaken virtually, utilising a range of technology to encourage contribution from partners, parents/carers and young people/children. Partners, including Health and Education have supported Children Social Care by providing contact numbers when arranging the virtual meetings or needing to obtain and share urgent information which social workers have found useful. Where families are unable to participate in the meeting, the Independent Reviewing Officer (IRO) is speaking to the family before and after the meeting to obtain their views.

The feedback was that partner agencies were engaging well during this difficult time.

There is a challenge for cases in court and virtual hearings. The Case Monitoring Board has continued to provide oversight and scrutiny on a fortnightly basis.

Senior Leadership Team meetings are undertaken daily to review current situations, address any matters impacting on service delivery and ensuring regular communication with operational teams.

Regular GOLD meetings with strategic leadership are taking place to ensure corporate oversight on service delivery across the Council.

### **Police**

Helen Flanagan, Detective Superintendent provided a verbal update and welcome comments and questions. *(A subsequent report was submitted documenting the feedback at the meeting)*

The frontline response to safeguarding young people remains consistent. Staff have continued to provide a normal service to partners agencies including virtual participation in CP Conferences, strategy meeting. Joint visits will continue to take place as required and work with MASH, CAIT referrals and PCLO teams is continuing, as normal primarily through remote working and virtual participation. The measures have ensured that a good response from the teams has remained.

Regular meetings are being held with key partners across all areas of safeguarding to ensure that any emerging issues are identified, and there is collaborative working to support those most at risk.

Conference calls are undertaken twice daily with policing supervisors from mental health, missing persons unit, child sexual exploitation team, MASH, PCLO's, CAIT referrals and investigation teams, Sapphire team, Community Safety Unit and online child abuse & exploitation team (OCSAE) to ensure risk is prioritised and core business is maintained. There is a business continuity plan in place to prioritise immediate or medium/high risk cases, should staff and resources become a concern. The plan has been broken down into four levels, ranging from green to black and policing response is outlined at each level. Currently policing is operating at green which means normal response from Police across all areas of responsibility and black level would require all Police staff from all levels to be undertaking operational duties and safeguarding would not be prioritised. Helen Flanagan assured that it is highly unlikely that staff level would ever reach black, but if there are any changes to the current level, she would inform the partnership.

### **FYOI**

Kerry Jacks, Head of Safeguards summarised the report and welcome comments and questions.

Safeguarding processes remain in place for young people in the establishment and safeguarding arrangements continue to operate as normal, both with internal and external partners, such as the

LADO. Feltham YOI would continue to monitor safeguarding information and data and would continue to report events which meet the threshold for IRS reporting. Weekly phone calls are undertaken with the LADO, Barnardos and Local Authority. The Safeguarding and Behaviour Management meetings are continuing as normal.

There is a new Regime Management Plan in place throughout the lockdown period.

Since the lockdown, Feltham YOI have not seen an increase in self harm, violence and staff assaults which is positive however there is a concern of the potential increase with these because of the limited regime for young people at the moment.

Members questioned if there were any confirmed Covid-19 cases within the establishment with staff or young people. Kerry Jacks informed that one young person on A-Side and two young people on B-Side were confirmed to have the coronavirus with one young person currently showing symptoms. Approximately six members of staff on Feltham B have been confirmed. There was a high level of staff off sick and isolating and it is difficult for staff to maintain appropriate social distancing within the establishment. PPE is being ordered for staff.

Jo Leader, Business Manager for the HSCP, questioned if staffing at the establishment were to significantly reduce who would take control of the establishment. Kerry Jacks informed that there is a contingency plan in place if the Head of Safeguards and CP manager were to be off work at the same time, overall operational responsibility sits with the Governing Governor who will make decisions based on what is safe. The Youth Custody Service has the strategic oversight and responsibility for the establishment who are receiving updates from the Governing Governor twice a week.

Feltham YOI are not receiving any transfers into the establishment unless it's been approved by GOLD Command.

The Prison Service is currently in National Command Mode therefore all changes and decisions will go through GOLD command or Regional Silver Commander.

### **Education and Special Needs**

Annita Cornish and Vicki Taylor summarised the report and welcome comments and questions.

Approximately 86% of Primary Schools and 60% of secondary schools are open for vulnerable children and young people as it is the expectation from the DFE that vulnerable children should continue to attend educational provision, where it is appropriate for them to do so. There were 360 pupils attending school setting before the Easter break, attendance has reduced since returning from the holidays and primarily it is children whose parents are key workers and not those who are vulnerable.

Schools are contacting vulnerable children/families daily or weekly dependent on the vulnerability. The daily attendance tracker was shared with safeguarding teams to ensure vulnerable children who have multi agency involvement and are not attending school are identified and contacted. Multi-agency conference calls are undertaken with Special Schools in the borough including Woodbridge Park Education Service (WPES) and Cedars Primary School to confirm arrangements for students where school was considered a protective factor. The Elective Home Education (EHE) team are making welfare calls to key children identified.

All schools have their own arrangements for children on Education, Health and Care (EHC) Plan and there was a low attendance rate for children on EHC Plan.

It is challenging where the DFE have recommended that children are safer at home, but vulnerable children are safer at school.

### **HRCH**

Tony Bowen, Named Nurse for Safeguarding, summarised the report and welcome comments and questions.

All staff are working remotely and have access to IT systems to support virtual / remote working. All children subject to CP or CIN plans or who are Looked After are flagged on Systmone for ease of identification, monitoring and tracking. Staff continued to virtually participate in CP Case Conferences and Core Group meetings.

All referrals into HRCH Children Services are triaged and where risk and vulnerabilities are assessed as high are prioritised for contact within existing service response times. Staff are encouraged to consider conducting reviews by telephone or video where possible before a face-to-face contact is offered. Staff have access to PPE to wear if face to face contact at home or in a clinic setting is deemed necessary.

Three members of the safeguarding team have been redeployed due to Covid-19, therefore caseloads have increased for remaining staff. Staff workload and the level of support required by staff is being monitored daily by the Named Nurse. If there are any concerns regarding the management of safeguarding across the organisation, it will be escalated to the Director of Nursing. Staffing levels will be closely monitored, and it is the expectation that if required redeployed staff would return to the safeguarding children team in order to prioritise safeguarding responsibilities. The Named Nurse is available to frontline staff and Named Leads are invited to attend team meetings as required

Safeguarding and clinical supervision continued to be offered to staff on a 3 monthly and ad hoc basis. Telephone advice and support is also available.

A MASH Business Support Officer has been recruited and is being inducted into the role. The MASH Health Practitioner has not been redeployed as it was felt that it was a vital role to remain in situ.

The Named Nurse and Service Managers are monitoring and reviewing staffing and safeguarding response continuously across the organisation and would escalate any concerns and risks to the Director of Nursing. There is a contingency plan in place if the Named Nurse goes off sick.

### **West London Health Trust**

Parminder Sahota, Director of Safeguarding Children and Adults gave verbal update and referenced letter from Trusts Chief Executive and welcome comments and questions.

West London NHS Trust remain committed to safeguarding all children and adults. Top tips have been developed for staff to ensure that safeguarding is considered in clinical practice during this challenging time.

Some staff have been redeployed to front line work, including the Named Nurse for Safeguarding and remaining staff are supported virtually and the safeguarding team are offering ad hoc supervision, support and advice to staff via telephone or virtual contact. The Trust have provided staff with a range of information including priorities within the safeguarding functions. An information sheet is being developed to assist staff when talking to family's safety about neglect and Domestic Abuse.

Staff are encouraged to refer any significant safeguarding concerns, which could potentially put a child or adult at risk to Children Social Care as soon as possible and involve police if needed.

Staff will continue to participate in virtual safeguarding meetings including CP Conferences when needed.

Daily manager briefing and weekly update briefings for staff are taking place to inform on changes to processes and procedures and updates have been made to the website which include links to Hounslow Children Services.

To support staff to come to work the Trust have opened a free emergency childcare facility which has had good take up and helped keep staffing levels good.

### **North West London CCG**

Dr Nirmala Sellathurai, Designated Doctor Safeguarding Children summarised a letter from the Director and Chief Nurse, position of key safeguarding functions and provided a verbal update and welcome comments and questions.

Many of the Designated professionals, across North West London including Emelia Bulley, Designated Nurse have been redeployed to clinical and front-line roles to support clinical practice due to the current demand on health services. A Safeguarding Hub, which is managed by two Designated Nurses, 7 days a week, has been set up to respond to key safeguarding issues, offer advice and attending multi-agency meetings where possible. Whilst currently no concerns have been raised about the response from the Hub, North West London is the only CCG which have taken the position of redeploying Designated Nurses in particular and there are ongoing conversations and challenges about this being escalated internally by the designated professionals group, as this is a statutory role.

Child Protection Medicals are continuing to be undertaken and consultant led and Looked After Children health assessment will continue under a risk stratification of the Covid-19 approach. The Child Protection medical rota is in place and one CP medical was received from Feltham YO1 with appropriate process followed by all professionals.

They will prioritise responding to urgent requests from partner agencies to ensure the protection of children/young people at risk of being abuse including responding promptly to CP medicals.

The Community Paediatricians have continued to participate to safeguarding meetings and have contributed to strategy meetings.

Health professionals raised concerns that safeguarding could become a second pandemic. The Chair stated that if partners are concerned about the impact of safeguarding children due to the redeployment of Designated and Named Nurses they should escalate this to her via the Business

Manager so she can raise appropriate challenges quickly to ensure resolutions are found, including concerns about the Hub

### **Chelwest**

Sarah Green, Consultant Midwife for Public Health and Safeguarding provided a verbal update and welcome comments and questions.

Chelwest have requested that all safeguarding professionals remain in post and are not redeployed. Monthly safeguarding meetings are being set up for all staff to ensure oversight. A small number of antenatal appointments will be conducted virtually including some clinics, and a number of 16-week appointments undertaken virtually via telephone consultation, and there will be an increase of video calls to women who have been identified as vulnerable. Chelwest were in the process of introducing social prescribing in maternity but further work is needed to explore this in practice due to current operational pressures and challenges in community mobilisation.

Sarah Green highlighted concerns about increase in domestic abuse during and after the pandemic. Members asked about that the reduction in numbers of children taken to Accident and Emergency (A&E) and Urgent Care Centre (UCC) and that this will need to be monitored closely and could further contribute to an increase in both short and long term neglect and also in the immediate term, identification of child protection concerns. It was recognised that not all parents and carers will intentionally intend to neglectfully impact their children and are refraining from attending hospital or seeking medical attention because they are worried.

### **5) Domestic abuse rates and responses during Covid-19**

Helen Flanagan, Detective Superintendent summarised the data reports which were circulated to members prior to the meeting and welcomed comments and questions.

The West Area BCU, and Hounslow specifically saw a rise in domestic abuse (DA) incidents and not offences when looking at comparator data for last year. This poses a risk to children being exposed to DA. If notified, information will continue to be shared via Op Encompass to schools to ensure oversight of these incidents.

The true scale, impact and accurate levels of child abuse and DA have not been fully understood primarily due to the lack of opportunity for victims to report assaults and professionals identify and concerns. Police have been working with partners to increase and encourage safe methods of reporting.

Police are expecting a significant increase in reporting of child abuse once children return to school and they are in a safe place to make disclosures. The IDVA service have reported an increase in the reports coming into the service which is impacting capacity to meet demand

Helen Flanagan noted that it is predicted that a range of incident and offences including DA, youth violence and offending could increase within the next couple of weeks as the lockdown and restrictions continue, and families are under increasing and sustained pressures.

### **6) HSCP programme of work continuation**

Jo Leader took members through the continuation of the HSCPs programme of work during lockdown.



The HSCP continues to function as normal with all meetings taking place virtually where possible with key professionals. There are some programmes of work or events that would be unachievable and would need to be rescheduled to later in the year such as the Domestic Abuse Systemic Review and Development Day. Members were asked if they agreed to delay some aspects of the HSCP's programme of work that could not safely or meaningfully undertaken due to size or capacity of professionals.

Members agreed that the HSCP should continue to undertake as much of its work programme as possible but any workstreams that where not practical to complete should be rescheduled.

The Executive Board of the Partnership will meet for the first time under the new safeguarding arrangements on 30<sup>th</sup> April 2020. The meeting will focus on the progress of the business plan 2019/21 over the last year and discuss and agree the priorities for the coming year. There is an intention to propose to the Executive Board that the current priorities are reduced to focus on safeguarding adolescents, neglect and child sexual abuse and no longer focus on the interface between children's and adults and adolescents mental and emotional health due to capacity. Members were asked to agree in principle the reduction in priorities for the coming year. Members agreed that it was sensible for the HSCP to reduce its priorities to focus primarily on its assurance function and achieve impact in its priority areas.

#### **7) Part B Agenda Items**

There were no Part B agenda items discussed at the meeting.

#### **8) Standing Agenda Items**

There were no standing agenda items discussed at the meeting.

#### **9) Any Other Business**

The Chair proposed that the next virtual Partnership meeting should take place at the end of May 2020 to continue to seek assurance about safeguarding delivery through the pandemic and focus on the impact and response to domestic abuse to children/young people in Hounslow.

All members in agreement.