



GREENWICH SAFEGUARDING CHILDREN PARTNERSHIP

BUSINESS PLAN 2023 - 2026



Introduction

All children in Royal Greenwich, regardless of their background and circumstances, should have a happy and fulfilled childhood where they enjoy school and family life, learn, belong, grow and achieve so that they enter adulthood ready, willing and able to achieve their highest potential. Everyone and every agency who comes into contact with children has a role to play in identifying concerns, sharing information and taking prompt action to safeguard them.

In response to the Children and Social Work Act 2017, a new partnership was created between the Royal Borough of Greenwich, the Southeast Basic Command Unit of the Metropolitan Police and NHS Greenwich Clinical Commissioning Group (now the South-East London Integrated Care System). There is a shared and equal duty to make arrangements to work together to safeguard and promote the welfare of all children in Royal Greenwich. These new arrangements became effective on 29 June 2019.

Working Together to Safeguard Children (2018) recognises that safeguarding arrangements are ‘expected to change over time if the local arrangements are to work effectively for children and families. This business plan, sets out our priorities and the delivery structures for the next three years as well as the proposed areas of scrutiny. Alongside this business plan, our [GSCP Safeguarding Arrangements](#) sets out our structures for delivering our statutory responsibilities.

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Business Plan Delivery Framework

This three-year business plan identifies our priorities for the period. Beneath these priorities will sit action plans, with delivery of these overseen by the identified work group, who will report on progress to the GSCP Executive Group.

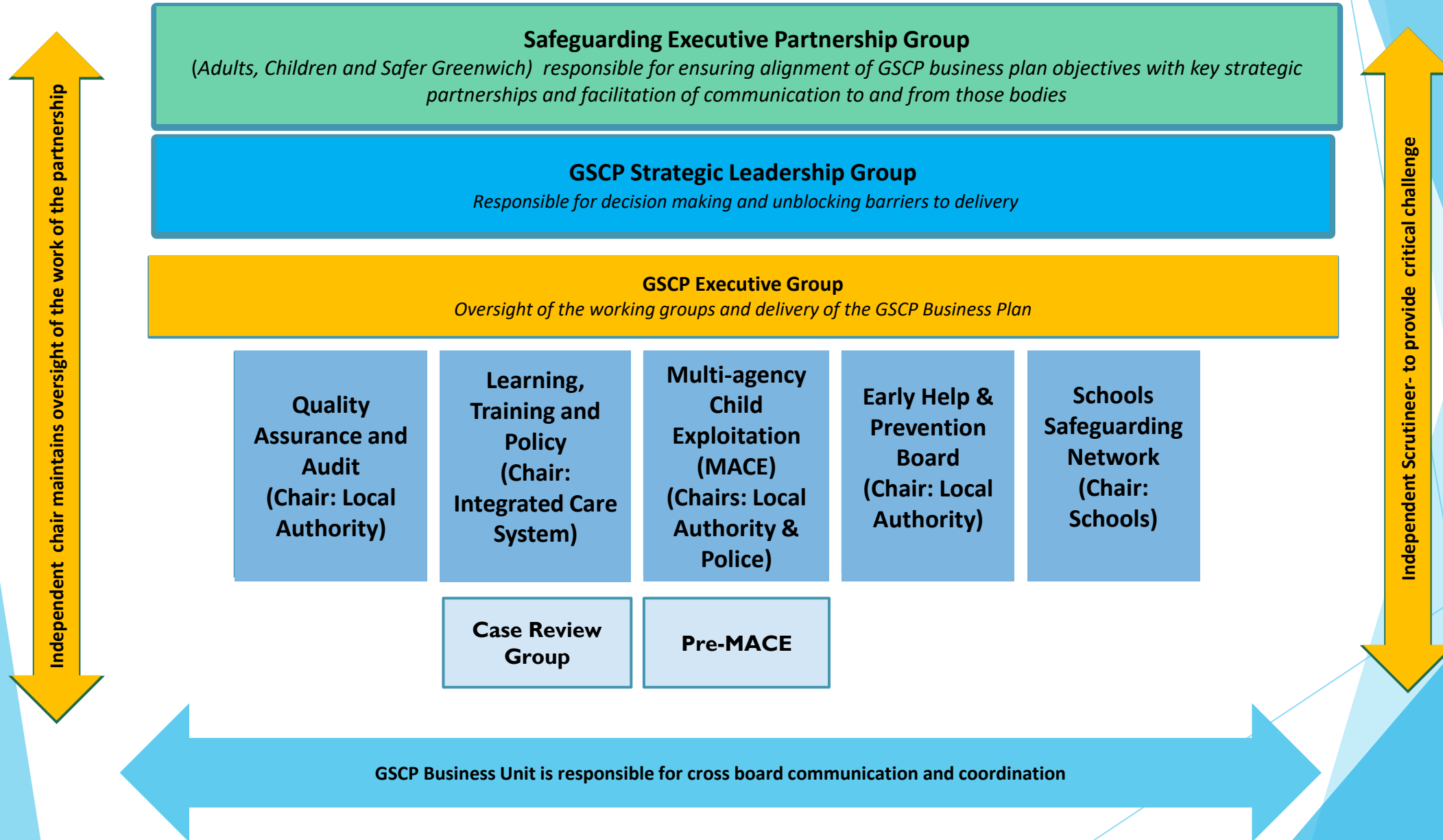
Work groups are chaired by senior officers from Police, Health, Schools and Local Authority, who facilitate cross agency working and support group members in creative problem solving so that any agreed actions are progressed.

Chairs also attend the GSCP Executive Group to:

- report on their work plan delivery progress;
- enable cross working group communication and collaboration;
- facilitate links to other partnership groups such as the Community Safety Partnership, Health and Wellbeing Board and Children and Young People Partnership;
- promote collaboration and joint responsibility,
- provide an outline of data trends and highlights related to their priority

Alongside this, independent scrutiny will take place to provide critical challenge and provide assurance to the effectiveness of our arrangements and the Quality and Assurance Group is responsible for overseeing quality across the GSCP, through the implementation of the Quality Assurance Framework.

GSCP Structure and Delivery Framework



Strategic Priorities 2023-26



Interdependent with Partnership Plans

Health and Wellbeing Strategy 2023-27

Health & Wellbeing Board

- Children and young people (CYP) get the best start in life and can reach their full potential
- Fewer children and young people are affected by poor mental health

Children and Young People’s Plan 2021-24

Children and Young People Partnership

- Supporting children to be and feel safe
- Addressing domestic abuse
- Striving for children to have a healthy start in life

Community Safety Strategy

Community Safety Partnership

- Preventing and reducing harm from youth violence and gangs
- Ending violence against women and girls

*Action plans to support the delivery of these priorities will be developed with Work Group Chairs.

Strengthening our Partnership: Areas of Focus

The areas of focus will be embedded across partnership activity and will be reflected in all aspects of its work including multi-agency audits, independent scrutiny, reviews and projects

The voice of children, young people and families in influencing the work of the partnership

Strengthening communications, information sharing and understanding impact across the partnership

Recruitment, retention and development of all staff working with children and families in order to respond to the increasing complexity of safeguarding needs

Tackling structural racism and strengthening cultural competency

Addressing disproportionality

Understanding the interdependencies and interconnectedness across partnerships and boards

Strengthening our support to families who move across boundaries.

See the Adult, See the Child

Independent Scrutiny

Legislation and statutory guidance require us to ensure the effectiveness of our arrangements through independent scrutiny.

We have appointed a scrutineer to provide critical challenge to:

- Judge the effectiveness of services to safeguard children
- Assist when there is a disagreement between agencies
- Support the GSCP to be a learning organisation

The GSCP Independent Scrutineer has reviewed areas for focused scrutiny to be delivered from April 2023 onwards. Prioritisation of these proposed areas will be agreed with the Strategic Leadership Group, through the period of this business plan.

Although these areas are proposed, the independent scrutineer is also able to select any additional areas for scrutiny as they arise.

A Young Scrutineer will be joining the partnership in 2023, to support this work and to facilitate embedding the voices of children and young people.

Areas of scrutiny April 2023 onwards

Review of MASH
arrangements

Review of MACE
arrangements

Review of system
arrangements for reducing
and responding to the impact
of domestic abuse on
children

Focus on preventative
community based resources
for early intervention to
safeguard children

Focus on early help and
prevention system to
address children's mental
health problems

Priority I: Tackling Risks to Adolescents (Adolescent Safeguarding)

Oversight: Multi-Agency Child Exploitation (MACE)

What we know:

Children and young people (aged 0-19 years) make up 26% of the population compared to 25% regionally and 24% nationally. Children and young people in Greenwich are a diverse group with over 65% from black and minority ethnic groups.

A small number children and young people need more targeted interventions. In 2021 - 22, 104 children and young people went missing from home or care for more than 24 hours. During the 22/23 reporting year 103 individual children and young people were discussed at GRASP. Of those, 74 had one or more concerns relating to child sexual exploitation, child criminal exploitation or serious youth violence as a victim, perpetrator or associate

Policy context:

Adolescent Safeguarding Handbook 2022 - Strategies to safeguard adolescents should include whole families approaches with a focus on contextual safeguarding and transitional safeguarding arrangements. Partners should look at developing collaborative interventions based on robust interagency partnerships. Strategies also need to consider diversity and inclusion, particularly addressing adultification of ethnic minority children and girls and should also focus on ensuring equity of outcomes.

National Child Safeguarding Practice Review Panel Guidance:

Ethnicity and gender have an impact on outcomes; risk assessments not always understood and acted upon, trusted relationships and parental engagement are protective factors, exclusion from school often a risk of serious harm. Effective practice such as using the NRM is not always understood. More focus should be put on disrupting perpetrators activity.



Priority 1: Tackling Risks to Adolescents

Objectives	Outcomes
Enhance collaborative partnership working to support missing children using a child centred approach.	Reduction in number and frequency of missing children
Increase awareness of contextual safeguarding within faith and cultural communities enabling the whole community to be involved in the safeguarding of vulnerable adolescents	Reduction in number of children who move on to offending
Develop protocols (including risk assessments) to support children at affected by CSE with a focus on vulnerable e.g., Children in Care, SEND, risk of exclusion etc	Increase in number of children accessing SARC and sexual assault support services
Embed the newly reviewed MACE governance structures within the wider GSCP and connected partnerships	Increase in number of children referred to support services through GRASP
Enhance the current transitional arrangements to support children moving from children services to adult services to include clear written protocols	Effective and robust transitional arrangements
Implement adolescent safeguarding recommendations from scrutiny, LCSPRs, Section 11, audits and rapid reviews	Improvement in quality of practice as measured by GSCP Quality Assurance Framework
Work with partners to ensure vulnerable adolescents who are in need mental health support are able to access it.	Increased number of vulnerable adolescents (children in care, missing, exploited) access mental health

Priority 2 – Develop a whole-system family centered response to domestic abuse

Oversight: Quality Assurance and Audit

What we know:

All medium to high-risk domestic abuse cases are referred to the multi-agency risk assessment conference (MARAC). The MARAC's effective operation is key to developing a whole systems approach. Of referrals during the last five years, 56% included children. Currently 1-2% of victims and perpetrators of discussed that the MARAC were under 18 at the time of their referral. 1 in 4 of MARAC referrals involved 3 or more children • Of the referrals with children, more than half reside/parents reside in the highest 30% most deprived deciles. 86 of referrals to MARAC for 22/3 were from children's services and the number of referrals to Children's services from police with a factor of Domestic abuse was 117 in 2022/3



Policy context:

Greenwich Violence against Women and Girls Strategy 2023/24 is currently being developed. It will go to consultation after Q1, officers have been working to ensure that the GSCP Business Plan and VAWG strategy objectives and actions are aligned.

National Child Safeguarding Practice Review Panel Guidance:

The national panel recommended that partnerships should be domestic abuse informed (i.e., understanding full complexity of domestic abuse) trauma informed, intersectional and whole family focussed. Safeguarding Partnerships and Community Safety Partnerships should work together to develop a local integrated domestic abuse system.

Priority 2 - Develop a whole-system family centered response to domestic abuse

Objectives	Outcomes
Develop a whole systems approach to domestic abuse services in the borough ensuring a constituent whole approach to child safeguarding across all services, and within that, a whole family approach ensuring we understand effectiveness of the journey	Effective systems journey for children and young people who are victims of domestic abuse
Embed learning across all safeguarding partners so all practitioners can provide a domestic abuse-informed response, and for this to be supported within supervision and reflective practice opportunities	Attendees from all agencies report learning and other development activities have changed their practice with specific examples
Enhancement of links with community safety partnership and health and wellbeing governance structures ensuring priorities and work plans align, including commissioning and budget priorities.	Alignment of domestic abuse related commissioning budgets
Implement children safeguarding related domestic abuse recommendations from scrutiny, LSCPRs, Section 11, audits and rapid reviews	Improvement in quality of practice as measured by GSCP Quality Assurance Framework
Ensure consistent participation of domestic abuse specialist services in children safeguarding related rapid reviews, LCPRs, audits to influence and improve policy and practice.	Stakeholders report feeling that they have influence/impact
Improve awareness of mental health services to ensure that children victims of domestic abuse can access appropriate mental health care in a timely manner	Increased numbers of child victims of domestic abuse accessing and being sustained in mental health support services

Priority 3 - Develop a local strategy for Early Help and Prevention

Oversight: Early Help & Prevention Board

What we know:

Primary school persistent absence rate has increased from 6.8% in 2021/22 to 14.7% in 2021/22. Secondary school persistent absence rate has also increased from 9.8% in 2021 to 22.1% in 2021/22.

First time entrants to the Youth Justice System have improved but remain well above London and England figures.

The Family and Adolescent Support Service (FaASS) has seen an increase in the numbers who access support within 12 months of closure from 4.3 to 7%.

Of referrals received to CAMHS approximately 3 in 5 are accepted (61%)

Number of crisis referrals to CAMHS has increased from 356 in 20/21 to 446 in 21/22.

Policy context:

Several reviews and evaluations for early help services have highlighted the need for a more consistent, effective and well-funded early help system of support for families. These reviews have emphasised the importance of early intervention and prevention to improve outcomes for children and families and to reduce the cost to the public purse.

In Greenwich we have established the Early Help and Prevention Board to oversee a programme of co-ordinated work.



Priority 3 - Develop a local strategy for Early Help and Prevention

Objectives	Outcomes
Review process for diversion from Youth Justice Service and make recommendations to develop evidence-based strategies and interventions addressing the root causes of youth crime and promoting overall well-being	Reduction in FTEs
Strengthen the alignment of the Fair Access Panel, Family and Adolescent Support Service to facilitate seamless coordination and communication ensuring swift identification of educational and holistic support, addressing underlying challenges and promoting overall well-being for children and families.	Fewer school exclusions More children and families accessing timely support
Understand the impact of step downs from the Multi-agency Safeguarding Hub (MASH) and the voluntary community sector (VCS) to identify opportunities for strengthening the VCS's role in providing sustainable and tailored interventions, collaborating with relevant stakeholders, and improving outcomes	Fewer re-referrals to MASH
Improve understanding of prevention pathway to identify the key entry points, referral processes, and barriers. strengthening them so children and families can easily and promptly access the appropriate support they need to prevent and address challenges at the earliest opportunity, leading to better outcomes and well-being for all involved.	More children and families accessing timely support
Understanding the quality of the assessment process for early help services to identify potential gaps or barriers in the process that may hinder timely and appropriate support provision to enhance the accuracy, efficiency, and responsiveness of assessments, so that children and families receive support in a timely manner, leading to improved outcomes and overall well-being.	Fewer re-referrals for support More children and families accessing timely support
Ensure a range of easily accessed services to improve children and young people's mental health and emotional wellbeing to promote early intervention, prevent the exacerbation of mental health issues, and enhance the overall emotional well-being of children and young people.	More children and families access timely support

Priority 4 - Address risk and impact of harm to children and families, from pregnancy to infancy

Oversight: Learning, Training and Policy

What we know:

Local rates of early access to maternity services are good. Rates are above London and England averages (66.8% at end of quarter 3, 2019/20). There are high rates of teenage pregnancy. The demographics of mothers in Greenwich are changing; women are in general older now when they are starting their families than in previous years and are from more diverse backgrounds with a growing proportion of births to non-British born mothers. 94.5% of New Birth Visits (NBVs) completed within 14 days (2018/19) which was better than average, In Q1-Q3 of 2022/3 – around 68%. There are higher than average rates of substance misuse, alcohol, tobacco and obesity which all have an impact on health in pregnancy.

Policy context:

The best start for life: a vision for the 1,001 critical days DoH 2021. The 1,001 critical days take a child through pregnancy to the age of two. This is when the foundations for lifelong emotional and physical health are laid. The guidance focusses on developing seamless wrap around support for families. It also looks to improve the skills and confidence of the local workforce.

National Child Safeguarding Practice Review Panel Guidance:

There are a number national panel guidance documents related to pregnancy and early infancy which include recommendations to make services more accessible to vulnerable parents (including fathers), develop safer sleeping interventions and protect children from injury.

- Bruising in non-mobile infants
- Safeguarding children under 1 year old from non-accidental injury
- Safeguarding children at risk from sudden unexpected infant
- Myth of Invisible Men



Priority 4 - Address risk and impact of harm to children and families, from pregnancy to infancy

OBJECTIVES	OUTCOMES
Work with partners to promote the safety of babies, infants and young children.	Improved understanding of safety practices by people who engaged with the campaign materials
Work with public health to develop a healthy pregnancy strategy for in all groups with a focus on the most vulnerable	Agreed comprehensive multi agency strategy with implementation plan, delivery framework and clear oversight arrangements.
Implementation of pregnancy and early infancy recommendations from scrutiny, LSCPRs, Section 11, audits and rapid reviews	Improvement in quality of practice as measured by GSCP Quality Assurance Framework
Improve engagement of vulnerable groups such as parents with no recourse to public funds, with universal services working with partners and service users to identify gaps and make recommendations on how to meet them	Increased number of vulnerable groups accessing with improved outcomes
Improve access to Perinatal mental health support for parents for all parents who need it, with a focus on the most vulnerable	Increased number of vulnerable groups accessing with improved outcomes

Priority 5 – Address risk to our most vulnerable children including those with SEND, ensuring they are safe in the community and, in placements

Oversight: Schools Safeguarding Network

What we know

The under 18 population has risen 14% (8,300 children) since 2011, which affects school place planning, admissions, and services. There are 5 special schools/PRUs in the borough all of which are good or outstanding. In January 2022 15% of the school population children attending Greenwich schools receive SEN support, the most common need is Speech, Language and Communication needs (SLCN).

Of the Greenwich 0-19 population; 3% have SEND. Autism spectrum disorder (ASD) is the most prevalent need in this cohort at 45%. For children and young people with EHCP placed in residential provisions: There were 5 individuals placed in Greenwich at any time during 22/23. For those placed outside Greenwich the number is 36. In 2021/2 there were 426 requests for new assessments which was an increase of 10% over the previous year's figures.

Policy context: National Review findings

The review has identified 3 key challenges facing the SEND and alternative provision system.

- Navigating the SEND system and alternative provision is not a positive experience for too many children, young people and their families.
- Outcomes for children and young people with SEND or in alternative provision are consistently worse than their peers across every measure.
- Despite the continuing and unprecedented investment, the system is not financially sustainable

National Panel Guidance

Safeguarding children with disabilities in residential settings reports Phase 1&2. Recommendations include children being placed in settings which are the most 'appropriate available' that will promote and safeguarding the children welfare. Preference should be given to placements where the child has a connection and children in placements should have access to visits from social workers



Priority 5: Address risk to our most vulnerable children including those with SEND, ensuring they are safe in the community and, in placements

Oversight: Schools Safeguarding Network

OBJECTIVES	OUTCOMES
Ensure there is sufficient oversight and monitoring from education, health and care services of children with SEND in residential settings	improved oversight and monitoring for children with SEND in residential settings
Reduce the disparity in outcomes between children and young people with SEND, or those in alternative provision and their peers in mainstream services.	Reduction in disparity of educational outcomes
Work with partners to support improved access to suitable education provision for children and young people with SEND with moderate to severe or complex learning disabilities	Children and young people with moderate/severe and/or complex learning disabilities have access to suitable education in a safe and nurturing environment
Work with commissioners and other partners to ensure that residential and community SEND placements operate within agreed quality standards	Increased number of residential and community placements operate within agreed quality standards and have the capacity, the knowledge and the skills to meet the needs of our children with SEND.
Implementation of SEND recommendations from scrutiny, LSCPRs, Section 11, audits and rapid reviews	Improvement in quality of practice as measured by GSCP Quality Assurance Framework
Work with CAMHS and early intervention mental health providers to ensure that they are able to support children with SEND needs and concurring mental health needs	Mental Health services are better able to support children with SEND