



Local Child Safeguarding Practice Review

Executive Summary

Child R

1 Introduction

- 1.1 Islington Safeguarding Children Partnership (ISCP) commissioned this review in response to serious incidents of sexual abuse against an Islington Child Looked After by their foster carer. The child disclosed sexual abuse including rape since the commencement of the placement – a period of approximately six months (March to July 2020). A joint response by agencies led to a successful conviction and Child R's abuser is serving a lengthy prison sentence. This was in no small way due to the courage of Child R who was able to give a full and frank account of the abuse. **NB** the period under review was during the first national lockdown imposed by the UK government to restrict the spread of COVID-19.
- 1.2 In line with current guidance, the incident triggered the multi-agency rapid review process as laid out in Working Together to Safeguard Children 2018. After concluding the rapid review process, and in agreement with the National Panel, a decision was made to initiate a Child Safeguarding Practice Review to consider a number of thematic issues which the circumstances of the abuse highlighted. The review has been led by the Safeguarding Children Partnership in Islington with the full co-operation and collaboration of the Safeguarding Children Partnership in Medway.

2 Context of the review

- 2.1 The circumstances surrounding the abuse suffered by the child are complex. They are summarised here in brief for the purpose of adding context to the review only.
- 2.2 Within the wider context of the child's family, there were historical issues of neglect, domestic abuse, poor parental mental health, and sexual abuse. These resulted in the child becoming Looked After.
- 2.3 As a result of this incident, Islington Safeguarding Children Partnership were concerned to analyse the interaction between the agencies and to try and establish if anything could have been done to prevent the abuse. The Islington Safeguarding Children Partnership were keen to review the system around Looked After Children rather than the unique circumstances of this child. The outcome would then be used to;
 - identify improvements to safeguard and promote the safety and welfare of Children Looked After placed out of borough
 - Understand the systemic issues and whether policies or practices need to change
 - Prevent risk of similar incidents
- 2.4 The questions that this review sought to answer are.
 - The challenges of out of borough placements. This includes how agencies respond when placements break down and decision making after a breakdown.
 - How robust is the matching process for children with complex needs including where there are issues of CSE, grooming and missing episodes?

- Exploration of LADO thresholds and whether interventions are robust, proportionate and made with children’s safety in mind.
- Issues of sex, sexuality, and contraception and how these are managed for CLA when the LA is their corporate parent. How are agencies making decisions/judgements and assessments about Fraser competence¹ for teenagers and the prescribing of contraception when the child is LA and out of borough?
- In line with the above how are decisions/judgements and assessments made about a child’s physical and mental health when the child is CLA and out of borough?
- How was/is the challenge of working with the C-19 restrictions managed for CLA out of borough? How did it influence issues in this case that may be an issue to consider in other similar cases?
- In light of the above challenges how do agencies ensure that the voice of the child is not lost?

3 Methodology

- 3.1 The report on which this executive summary is based is made up of information submitted by agencies as part of the rapid review process. Consultations were also had with key staff and young people - the report is a richer piece of work due to their contributions. The panel and the author were especially grateful to the child who is subject of the review who was brave enough to share their experience.
- 3.2 An experienced multi agency panel made up of senior members of the partnership oversaw the process. Panel discussions helped to refine the findings and hone the recommendations so that the learning could be embedded across the partnership.

4 Findings

Children Looked After who are placed ‘Out of Borough’.

- 4.1 Practitioners and managers in Islington were confident that there is a sound system of Team around the Child (TAC) in place for Children Looked After, and all noted the importance of this for placements that are made that are out of borough. There was regular and ongoing communication between agencies via the IFA’s network meetings which served as the Team around the Child. The advent of the Covid-19 pandemic which began in early 2020 meant that the format of these meetings changed to online, but they were nevertheless effective and continued through the lockdowns and other

¹ **Fraser competence** (aka Gillick competence) is concerned with determining a child's capacity to consent to sexual activity. Fraser Guidelines are used specifically to decide if a child under the age of sixteen can consent to contraceptive or sexual health advice and treatment without the permission or knowledge of their parents.

national restrictions. There are question marks however about how well local health practitioners were connected into the Team around the Child.

Decision making following placement breakdown

- 4.2 Managers in Islington described a very sophisticated matching process for placements which considers the latest assessment of need for the child. When children require a placement e.g., a new placement as part of permanence planning or after a placement disruption, the social worker completes a referral form for the Placements Team² so that they could consider all the options available. Information about the child is shared and studied in detail together with all the agencies that are involved. Potential carers are identified and the merits of each one in relation to being a good match for the child would be discussed.
- 4.3 This is an extremely complex process which is child centred at its root. It is an effective approach to matching which was revered by Ofsted³ in Islington's most recent inspection report. The learning from this review sought to strengthen this process as when placements identified do not have this rigour, there is the potential to miss vital information. Situations where the child is already in situ, placed in an emergency or in need of a respite placement, need to follow this same practice to ensure that the best decision can be made.

Exploration of LADO concerns

- 4.4 The review identified gaps in the information shared during previous LADO investigations which weakened the subsequent risk assessments. LADO issues that occur in foster placements, by their very nature, often arise out of different sets of circumstances. Decisions are made in the best interests of the children in placement at that time, based on their needs and their existing relationships within the households. Thinking about how this process can be improved, it is important in other similar scenarios that these issues are revisited in the light of potential new placements.

Use of 'Safer Care' agreements

- 4.5 Alongside other help provided to foster carers to support successful placements, the IFA implements 'Safer Care' agreements to assist carers and young people establish safe care practices. Features of such an agreement usually provide clarity to carers on issues such as male carers avoiding being alone with female children, that all members of the household knock before entering a bedroom, wearing appropriate clothing, and not engaging in boisterous play. This is designed to help the child understand the norms and nuances of boundaries between family members.
- 4.6 Whilst it is very important to have family/household rules that are shared and discussed

² The Placements Team in Islington are responsible for sourcing, commissioning, and procuring a range of placements for Children Looked After.

³ <https://files.ofsted.gov.uk/v1/file/50150002> (Paragraph 18)

amongst all members about what is, and what is not acceptable behaviour, this review found that the agreement in place carried an unrealistic expectation of carers. It could never be robustly monitored and relied on the absolute co-operation of carers. Risky activities or changes in the agreement should be assessed separately and have oversight of senior managers.

- 4.7 In relation to learning from this review, the IFA has already made relevant changes to their approach to such agreements. The Safer Care policy has been updated to reflect the learning in ensuring that any significant changes to specific agreements are discussed within a multi-agency arena. In addition, the agency has implemented a system to ensure that any disagreements are subject to challenge.

Issues of relationships, sexual health, and contraception

- 4.8 The learning from this review and others is in the importance seeing young people alone to allow them to have space to discuss matters they would not want carers to hear about. Providing a safe space to explore possible trauma and to be cognisant of the possibility that abuse may be taking place is key for GPs. This includes when a young person presents with on-going physical symptoms. It is important that practitioners are supported to be able to make safe decisions so that contraception and sexual health advice becomes an adjunct to other protective measures and is part of an overall care plan, rather than delivered in isolation.
- 4.9 Examples from this review which were explored with professionals to gain a wider context were the importance of practitioners gaining an understanding of the young person's circumstances and the context of them requiring or seeking sexual health advice. There is future learning about the age of young people and their circumstances which are not routinely considered in line with current guidance. The provision of contraception for young people is sometimes a feature of care planning over several years. As such, its routine inclusion in plans can result in it being overlooked in terms of scrutiny or reassessment.

Mental and physical health of CLA who are placed out of borough

- 4.10 Looked-after children are a group of particularly vulnerable young people whose mental health needs are known to be greater than those of their counterparts. Services can also be difficult to provide consistently for those who experience placements moves and whose needs are complex. With many children and young people, it is extremely difficult to disentangle the effects of abuse and family situation from social and environmental factors. In 2020 this already complex situation was added to by individual reactions to the global pandemic and the subsequent change in life that accompanied it.
- 4.11 A question arose in the consultations with staff about how to be certain that the right people know the right information when a child resides outside of their borough, particularly the right health professionals. Information from this review suggests that not all the people who knew this young person well were involved in multi-agency meetings. This should be picked up in the care planning process.

The influence of the COVID-19 pandemic on hearing the voice of the child

- 4.12 From March 2020 the United Kingdom experienced the effects of the global Covid-19 pandemic with the introduction of a national lockdown, preventing most of the population from leaving their home. Offices and schools moved their services online and public transport was limited. Emergency legislation that was introduced meant that staff working in public services had to adapt very quickly to new circumstances as the restrictions prevented them from carrying out their duties in the normal way.
- 4.13 In non Covid-19 related times, many checks and balances would have been in place. Agencies and individuals supporting children would have been in regular face to face contact and would have been in a better position to pick up nuances in behaviour and mood. These were much more difficult to detect in these circumstances and made direct disclosures less likely. Schools were in contact with vulnerable pupils daily but unfortunately the circumstances created a perfect storm of opportunity for abuse to take place.
- 4.14 Establishing and re-negotiating relationships online was a challenge for all practitioners and the loss of the working environment for them without the close support of colleagues and managers was problematic. This review has highlighted the need for judgements that were made during lockdown to be revisited and re-evaluated in view of the evolving changes to restrictions.
- 4.15 As it is widely expected that child protection practice will continue to use the most positive aspects of virtual communication, the future is likely to be a hybrid between virtual and face to face interaction. Islington Children's Social Care have ensured that the views of children and young people are captured on this issue and their voice is represented in the shaping of subsequent service delivery. The legislation imposed at this time severely hampered local authority's children services department's ability to exercise their statutory duties. As these were subject to judicial review and found to be unlawful, it is less likely that future restrictions will be subject to such stringent measures.

5 Recommendations

Recommendations were made to the partnership and Corporate Parenting Board, and they are noted below.

- 5.1 Islington CSC to review and update their procedures in relation to sourcing fostering placements for CLA to ensure that regardless of their status e.g., respite, emergency, bridging etc they should be subject to the same rigour as occurs for all other fostering placements, in line with the current practise in Islington
- 5.2 The IFA to review their policy and application of safer care agreements and review the ones currently in place. This to be overseen by the Senior Leadership Team (SLT).
- 5.3 Requests for CLA to take part in activities that involve risk should be agreed in line with the current care plan and only by heads of service. Where Safer Care agreements are in place, these need to be updated in light of changing information.

- 5.4 Islington and the IFA to ensure that when children are out of borough all the professionals providing the local services are linked into the Team Around the Child
- 5.5 Islington and Medway CCGs to provide reminders and subsequent training to GPs to ensure that they understand their responsibilities in assessing risk when prescribing contraception to young people who are Looked After.

Recommendations for Islington Corporate Parenting Board

- 5.6 Islington Corporate Parenting Board to review care planning decisions about contraception for CLA who are victims of sexual abuse or at risk of CSE. E.g., Clarity about the framework used to assess this, who is informed and who does the decision making involve and when this should trigger a review of the multi-agency risk assessment and safety planning.
- 5.7 Islington Corporate Parenting Board to oversee a multi-agency task and finish group to review how sexual health is incorporated into CLA care and pathway planning for CLA pre and post 16 years of age.

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