

18 August 2022

Mel Meggs, Director of Children's Services, Kirklees Metropolitan Borough  
Carol McKenna, Clinical Commissioning Group<sup>1</sup>  
Alison Lowe, Deputy Mayor for Police and Crime  
John Robins QPM Chief Constable, West Yorkshire Police  
Julie Sykes, Independent Scrutineer

Dear Kirklees Safeguarding Children Partnership

### **Joint targeted area inspection of Kirklees**

This letter summarises the findings of the joint targeted area inspection (JTAI) of the multi-agency response to the criminal exploitation of children in Kirklees.

This inspection took place from 27 June 2022 to 1 July 2022. It was carried out by inspectors from Ofsted, the Care Quality Commission (CQC) and Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).

### **Headline findings**

Partners at a strategic level enable a well-embedded practice approach that supports professionals to work well together. Children in Kirklees who are at risk of, or experiencing, criminal exploitation have their needs identified quickly and receive multi-agency support to manage and reduce risk to them effectively.

### **What needs to improve?**

- The recording of the work and decision-making of the Kirklees Safeguarding Children Partnership (KSCP).
- The training offer from the KSCP to ensure that it provides relevant, localised multi-agency training focusing on child criminal exploitation.
- The exercise of professional curiosity from some health practitioners, including GPs and emergency department staff.
- Contingency planning for children in care who are not able to return to their birth families.

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<sup>1</sup> as of 1 July 2022, the Clinical Commissioning Groups (CCG) changed to the West Yorkshire Integrated Care Board (ICB)

## **Kirklees Safeguarding Children Partnership (KSCP)**

The Kirklees safeguarding children partners have significant knowledge of the local area and demand, practice within their agencies, and the experiences of children. Partners have strong aspiration, willingness and motivation to reduce risks of criminal exploitation for children in Kirklees. Mature relationships within the KSCP enable partners to challenge each other effectively. This demonstrates the well-established respect for, and equity of, partners' views.

The KSCP has strong links with the Kirklees Health and Wellbeing Board, adult safeguarding board and the community safety partnership. Executive partners have agreed the provision of two exploitation subgroups that focus on strategic and operational matters relating to the exploitation of children. The KSCP receives relevant information from these forums and is able to share information specific to safeguarding children at risk of criminal exploitation. This supports a holistic approach to addressing criminal exploitation in Kirklees.

The impact of COVID-19 has stalled the progress of some of the priorities of the KSCP and the exploitation subgroups. However, several initiatives have been implemented, for example the 'safe zones' scheme in Huddersfield, 'be phenomenal' in schools and the 'focused deterrent car'. These are positive examples of how partners have acted on children's views and their understanding of need in Kirklees.

The range of multi-agency work that focuses on children who are at risk of, or experiencing, criminal exploitation is not always fully recorded at the KSCP level. This means that it is not always clear for other professionals and children to see the work that the partnership has effectively planned and coordinated to evaluate the work of the partners.

The KSCP uses local, regional and national research to develop services based on its local knowledge of need and demand. This has created a strong multi-agency service for children who are at risk of, or are experiencing, exploitation. This has included the development and implementation of the Youth Engagement Service (YES) and the amalgamation of the YES with the Youth Justice Service into a wider contextual safeguarding service.

The KSCP does not currently receive sufficient collective data to have a comprehensive overview of practice and outcomes for children who are at risk of criminal exploitation. However, inspectors did see several strands of work across the partnership that are contributing to the improvement of the current reporting of performance data.

Individual agencies singularly provide effective exploitation training, advice and support to their workforce. The KSCP recognises that there is a need to ensure that the multi-agency child criminal exploitation training is refreshed and is based on national and local research and need. This is a missed opportunity to enable the wider workforce to learn together and understand the complexities of working with children at risk of exploitation in Kirklees.

## **Main findings**

### **Leadership and management**

Leaders and managers have an effective oversight of practice at the 'front door'. Daily and weekly multi-agency meetings, such as the daily risk exploitation and missing meeting (DREAMM), exploitation screening panel, exploitation screening review meeting and the referral review panel, enable managers to have ongoing oversight of the demand for services, the quality of work and the allocation of resources. Practice or multi-agency difficulties are identified and swiftly acted on. All partners have invested in these forums in terms of staff availability and time.

Professionals are clear on their role and contribution to these multi-agency forums and decision-making. Joint decision-making is encouraged to facilitate a shared understanding to reduce the risk of exploitation for children. However, the possible contribution of community and voluntary sector agencies to these meetings has not been fully explored.

Most agencies use the information-sharing forums to 'flag' effectively children who are at risk of, or experiencing, criminal exploitation. However, health IT systems do not consistently identify children at risk of exploitation through the use of 'flags'. This means health practitioners are not always able to see at first glance if a child is at risk of criminal exploitation.

Senior leaders in the Clinical Commissioning Group (CCG) show strong commitment to improving outcomes for vulnerable children exposed to child exploitation. Effective governance within the CCG and health providers offers oversight of safeguarding arrangements and the performance of services. The Health Assurance Information Group is a strength and provides an effective forum for the collective sharing of knowledge and prioritisation of work across the complex health economy.

Staff in all partner agencies receive appropriate levels of training to support them in their role when working with children who are at risk of exploitation. Social workers are supported through access to specialist knowledge from the YES. Child criminal exploitation training is accessible to health practitioners, and they report that this is increasing their knowledge and skills.

The police force's children vulnerable to exploitation team (CVET), is a skilled team consisting of experienced and accredited child abuse investigators. The team has provided effective training to frontline police officers and staff across the Kirklees area to raise awareness of its role in the protection of children and risk indicators for exploitation. Frontline police officers in Kirklees receive regular bulletins about children who are at risk of exploitation, and those who pose a risk to them. During this inspection, the police force agreed to improve their electronic briefing system to make sure that information can be updated in real time.

The YES works intensively with children to reduce risks of exploitation. Caseloads are low to enable that to happen. Staff demonstrate a tenacious commitment to supporting young people and are motivated to reducing risks of exploitation. The team has strong links with other agencies and is also involved in the training of other services.

The CVET undertakes successful disruption activity using appropriate tactics to reduce the risk of exploitation for children. However, recording of the activity, particularly in complex cases when a crime has not been committed, is not consistent. This makes it difficult to monitor progress.

The 'partners intelligence portal' enables information to be shared quickly with the police. Partners in Kirklees use this resource effectively.

### **Practice study: highly effective practice**

The Youth Engagement Service (YES) in Kirklees is a successful resource that works well with other agencies to identify and meet the needs of children who are at risk of, or are experiencing, exploitation. This service initially focused on child sexual exploitation and gang activity in Kirklees. However, it has developed over the last few years in accordance with leaders' understanding about the level of demand and need in their local area, particularly in relation to child criminal exploitation.

The YES is made up of social workers, youth engagement officers (from a wide and varied range of backgrounds), a PACE worker and a large number of youth outreach workers. YES staff work closely with other providers to meet children's needs, for example BASE (substance misuse), KISH (Kirklees Integrated Sexual Health), Youth Justice Service, police, statutory social work teams, and the community and voluntary sector. The service has seen a recent increase in the number of criminal exploitation concerns raised and it is working closely to provide specialist training, advice and support to the wider workforce.

Joint supervision for YES staff and case-holding social workers is very reflective and supports the direction of the intervention for the child.

The YES works intensively with children to reduce risks of exploitation. It agrees priorities and action plans to work alongside social workers and early help practitioners and staff attend all multi-agency meetings for children.

The YES has engaged in Practice Learning Days with statutory social work teams to review the quality of practice and outcomes for exploited children in Kirklees. The positive impact and learning of this model is now planned to be rolled out as multi-agency practice learning events.

In all the strategic and operational work seen by inspectors, the involvement and positive impact of the YES was clearly evident in improving children's lived experiences.

### **Multi-agency practice with children who are at risk of, or experiencing, criminal exploitation**

Children in Kirklees benefit from the strong relationships between partners in the front door. Professionals working with children make the clear distinction between criminal and sexual exploitation to inform the response from the front door. Prompt and effective information-sharing informs decision-making for next steps to safeguard children. Timely management oversight of contacts received at the front door means that decisions are made swiftly and appropriately to ensure that work

progresses, and families do not wait for the allocation of appropriate services. Children and families are routinely engaged at this early stage, and their views are clearly recorded.

Partner agencies raise appropriate challenge when there is a dispute about decision-making.

Agencies across the partnership have a strong child-centred approach. Practitioners are persistent in their efforts to engage children and families who present as resistant to professional involvement. Professionals carefully consider who is the most appropriate individual to work with a child. This reduces the need for children to repeat their stories.

Assessments of children's needs are detailed and concise. Most consider relevant history and factors including culture, religion and ethnicity as well as the exploitation risk. Decisions made for next steps are proportionate to the level of risk and need identified. When child protection concerns are highlighted for children, strategy discussions are arranged quickly, and these are well attended by the relevant professionals who know the children best.

Children and young people's voices are captured well in most agency's child records. This offers additional insight into their lived experiences.

Multi-agency meetings ensure that progress against the child's plan is regularly monitored, reviewed and amended in response to changing circumstances. These meetings evidence the strong multi-agency relationships which exist to support some of the most vulnerable children at risk of exploitation.

A wide range of statutory and non-statutory agencies work well together to identify and address risks of criminal exploitation for children in Kirklees. Substance misuse and sexual health workers jointly visit children and provide an effective, regular drop-in clinic for children in care who live in residential children's homes.

Practitioners are aware of the changing levels of risk and the fluctuating ability of children to engage, and they are tenacious in finding creative ways of working with children to reduce risk.

Police prevention interviews are held regularly when children go missing. This provides an early understanding of push and pull factors and supports the child on their return. Independent return home interviews are offered routinely and completed when engagement is possible. When successful engagement with children

has not been achieved, the interview considers push and pull factors and includes discussion with family and the wider professional network.

Professionals avoid unnecessary criminalisation of children who are at risk of criminal exploitation. They understand the contextual factors underpinning children's behaviours and the impact on their emotional well-being. The inspectors saw examples of the National Referral Mechanism being used appropriately, ensuring that children are recognised as victims of exploitation.

Children at risk of, or experiencing, exploitation are encouraged and supported to attend some form of education provision. Education staff carry out appropriate welfare and safety checks when children are absent. However, education practitioners are not always fully informed of children's histories and this affects the practitioner's ability to recognise risk and concern sufficiently. Furthermore, not all personal education plans fully reflect the work that education professionals complete with children and their families.

Children at risk of exploitation have their health needs met by specialist health professionals from a range of services.

Health and education professionals are not always informed, engaged or invited to multi-agency risk management meetings in longer-term cases. The outcomes and actions from some multi-agency risk assessment meetings are, for a small number of children, unclear and they are not always shared with all agencies. For example, GPs are often unaware of the risks relating to child exploitation, which limits their ability to offer support to children and families.

Professionals in the emergency department do not always demonstrate professional curiosity when seeing children. The medical model used often focuses on the presenting complaint and practitioners do not always explore children's behaviours, such as self-harm, going missing and not attending school. Additionally, professional curiosity was not always evident in GP health records, for example in regard to a child's vulnerability, and their request for contraception. These are missed opportunities to explore with the child the possible reasons for their presenting behaviours and consider what other help, or outside medical care, might be needed.

Not all children's statutory care plans include contingencies in the event of children in care not being able to return to the care of their families. This affects the timeliness of securing permanence for children and increases the risk of multiple changes to where they live.

Inspectors engaged with children, young people and their families who commented on their experiences in Kirklees. For example a parent told inspectors that the intervention from the partnership 'had been amazing' and led to a reduction in the number of times their child went missing. Young people told inspectors: 'They

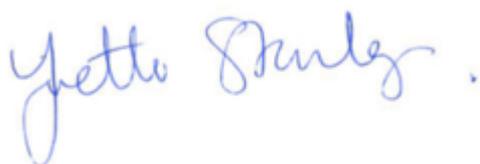
listened a lot, telling me what to do and helping me; 'The social worker was amazing and was always there for me;' and 'I am feeling positive about the future.'

### Next steps

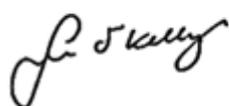
We have determined that Kirklees Council is the principal authority and should prepare a written statement of proposed action responding to the findings outlined in this letter. This should be a multi-agency response involving the individuals and agencies that this report is addressed to. The response should set out the actions for the partnership and, when appropriate, individual agencies. The local safeguarding partners should oversee implementation of the action plan through their local multi-agency safeguarding arrangements.

Kirklees Safeguarding Children Partnership should send the written statement of action to [ProtectionOfChildren@ofsted.gov.uk](mailto:ProtectionOfChildren@ofsted.gov.uk) by 25 November 2022. This statement will inform the lines of enquiry at any future joint or single-agency activity by the inspectorates.

Yours sincerely



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