

16 March 2023

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Scott Watson, Director of Place, (Sunderland), NHS & North Cumbria Integrated Care Board

Kim McGuinness, Northumbria Police and Crime Commissioner

Winton Keenen, Chief Constable, Northumbria Police

Marianne Huison, Independent Scrutineer

Dear Sunderland Local Safeguarding Partnership

Joint targeted area inspection of Sunderland

This letter summarises the findings of the joint targeted area inspection (JTAI) of the multi-agency response to children and families who need help.

This inspection took place from 23 to 27 January 2023. It was carried out by inspectors from Ofsted, the Care Quality Commission (CQC) and His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).

Headline findings

Sunderland Safeguarding Children Partnership (LSP) arrangements are well established and effective. Leaders have an accurate understanding of the needs of vulnerable children in their local area. They are fully cognisant of the importance of addressing children's needs early. LSP strategic arrangements are closely aligned with local universal and voluntary organisations, ensuring a clear understanding and shared approach to prioritising and meeting children's needs. Partners work persistently and creatively together in an environment of significant and extensive local deprivation to coordinate and deliver an array of multi-agency early help services that are successfully reducing harm and preventing risks to most children receiving services from escalating.

Enthusiastic, experienced early help frontline practitioners provide sensitive and innovative child-centred interventions. Parents receive respectful and thoughtful services, which help them to think differently about how they parent their children. Consequently, many are enabled to provide safer and more confident daily care. Thresholds of risk, need and harm to children are understood, leading to most children swiftly receiving a proportionate level of help that is child-centred.

Leaders accept that more work is needed to ensure that all partner agencies are routinely informed and included in decisions and meetings about the next steps required to help children and families. Staffing capacity is limiting the consistent

inclusion and impact of school nurses, health visitors and mental health professionals working across early help teams. The ethnic identity, cultural heritage and religious needs of children are too often absent from, or not considered enough in, referrals to the integrated contact and referral (ICRT) team and in assessments and plans. The LSP acknowledges that multi-agency audits of early help work need further development as there are delays in progressing multi-agency early help assessments and plans for a small number of children.

What needs to improve?

- Communication with and involvement of all partners in meetings and in decisions about next steps to help children.
- Increased staffing capacity to allow the consistent involvement of health practitioners across the spectrum of early help services.
- Consideration and analysis of children's ethnic identity, cultural heritage and diverse needs in referrals, assessments and plans.
- Timeliness of early help assessments and plans.
- The quality and effectiveness of the LSP's multi-agency audits.

Early help strengths

- The LSP's highly evolved and mature strategic relationships with its key partners and local organisations have led to creative, innovative early help services, ensuring that children swiftly get the right level of help.
- Robust governance arrangements are enhanced by a culture of professional curiosity, accountability and respectful challenge. Leaders know their services well.
- Multi-agency partners' effective and authoritative practice, informed by feedback from parents and children and staff, adds value and leads to reduced harm for children.
- Cogent, well-balanced safeguarding decisions are child-centred.
- Despite high demand, staff who spoke to inspectors felt extremely positive about working for organisations in which they can readily access relevant training, supervision and support, and where their views and needs are important and highly valued.

Main findings

Most children benefit from exceptional early help services, which are carefully targeted, innovative and continually evolving, helping families with a wide range of needs, including very complex difficulties. Together for Children (TfC), who are delegated to deliver early help and statutory children's services on behalf of

Sunderland Council, work collaboratively and assiduously with partners across the entire service spectrum, providing exemplary services to their vulnerable children and families.

A well-articulated, shared multi-agency vision is strengthened by flexible operational service planning and is augmented by the oversight provided by the LSP's independent scrutineer. This enables services to quickly adapt and respond to emerging needs, research and good practice models. A new multi-agency early help family hub model is in development as part of a Department for Education trailblazer pilot. Leaders are building on earlier success to integrate services further. Staff told inspectors that leaders listen to them and act quickly to address gaps in service provision and nurture their talent and expertise. A recognition of the impact of domestic abuse and the need for trauma-informed direct work with children led to the appointment of play therapists working across early help teams.

Examples of pioneering work and good practice initiatives by all agencies are making a discernible difference to the life chances of vulnerable children. Services are provided jointly by numerous partner agencies, demonstrating well-planned, cohesive and seamless partnership arrangements. For instance, multidisciplinary practitioners work together in the Wear Here 4 You bus promoting direct engagement with children, young people and parents on issues that matter to them, delivered across localities after school and during the evening. This has improved relationships and community confidence in accessing services. Early indications are that the impact of these innovative approaches means that fewer children become the subject of more serious statutory social work and police interventions.

Children are appropriately safeguarded from harm when necessary. Thresholds of risk, need and harm to children are mostly understood and applied by experienced and knowledgeable co-located health, education, police, children's social workers and early help professionals in the ICRT. Daily screening of referrals by experienced police officers and social workers ensures that harm thresholds are promptly evaluated. Rigorous management oversight of this work ensures that children's experiences are constantly central to timely decisions about the steps needed to help and protect them from harm. More work is needed to ensure that all partners are routinely informed and included when social work managers take decisions to close referrals about children, and that they are consulted when decisions are made to step children down from statutory services to early help.

Obtaining parental consent for early help services is well understood, sought and recorded. Parents are consulted to gain further understanding of their personal situation and to determine the most appropriate intervention for the family. All decisions are informed by the child's experiences, and any past harm. This enables families to be directed to the right agency and support at an early stage, and so that they are not subject to unnecessary statutory interventions. Families and children

told inspectors that they are listened to by early help professionals who advocate on their behalf to ensure that they receive the right support.

Children requiring targeted early help services are allocated promptly to locality-based early help practitioners. Exceptionally skilled early help practitioners, together with partner agencies, listen to and act on children's views, and provide sensitive, caring and imaginative work that is making a real difference for the majority of children. Interventions with children are evidence-based. Compassionate practitioners are attuned to children's needs, family circumstances and emotional state. They understand the impact that poverty, fuel debt and unstable housing have on families and work alongside charities to support families with these needs. Children are supported to talk about their lives and experiences through age-appropriate and effective direct work using a range of tools. Purposeful intervention means that work is at a pace that affords parents appropriate time to make necessary changes. Subsequently, re-referral rates are low, as interventions result in sustained improvements in children's lives.

Assessments using Sunderland's strengths-based model identify the impact of parental mental illness, domestic abuse, substance misuse and neglect on children. Children receive thoughtful and sensitive multi-agency work during the assessment, which means support for them is timely. A more consistent use of assessment practice tools, however, such as the LSP-approved neglect tool, would strengthen the analysis of impact on children's lived experiences more quickly.

The quality and timeliness of early help assessments and plans can vary. In a small number, the practice is too focused on the needs of the adult; the voice of the child and their individual diverse needs are not identified or assessed by partners. However, for most children the impact and outcomes of sensitive and empathetic individual and group work, using a wide variety of evidence-based therapeutic interventions, are positive. This enables many children to live safer, happier and fulfilled childhoods.

In cases where parents are resistant to engage and withhold consent, multi-agency meetings are not being routinely convened, limiting opportunities to share information. While individual practitioners may be working with these families, insufficient communication between agencies is causing delay in progressing assessment and planning for a small number of children.

In addition, there is a lack of understanding within the early help teams of health roles and responsibilities. Consequently, relevant health practitioners are not consistently invited to early help meetings or to contribute to assessments for a family.

Some education providers do not routinely use the appropriate channels to raise or escalate concerns. This can result in work being either repeated by different agencies

or being missed, leading to a detrimental outcome for a few children with unmet special educational needs. Leaders accept that individual professionals or agencies need to take responsibility for raising concerns and constructively challenge each other if they are concerned about the quality of early help being provided.

Children and young people with emotional well-being and mental health difficulties benefit from a range of services to meet their needs, but there are delays in accessing services. The arrangements are complex, with a variety of providers positively offering different levels of support. Collaboration between multi-agency partners has resulted in innovative and responsive initiatives in the community and in schools. For example, many schools employ early help practitioners who work proactively to ameliorate emotional harm. This increases the opportunity for children to have their needs met by the most appropriate service.

An app is used effectively as an added option by children and young people across early help services and teams to send statements to professionals, or to ask for help. For instance, it is used successfully in return home interviews when children go missing from home. Staff have their own accounts and respond promptly. They also use this tool well when working alongside younger children to include them in planning and to record their views, for example in family group conferences.

Positive relationships between community child and adolescent mental health services (CAMHS) and specialist CAMHS lead to a seamless transition between services if required. Multi-agency professionals requesting emotional and mental health support for children are often unclear whether community or specialist CAMHS is the correct service to meet children's needs. Collaborative working between the leads from each service through weekly meetings to discuss individual children's cases prevents unnecessary additional delay. However, waiting lists for CAMHS are lengthy and at the time of inspection were 39 weeks.

Services across the Sunderland health economy are facing significant challenges with staff vacancies and difficulties with recruitment and retention of frontline practitioners. The partnership is aware of these challenges and leaders have worked creatively together to reduce gaps in provision. There is still more to be done as this has a significant impact on the level of contribution that health practitioners can make to multi-agency work in early help. Consequently, joint working between health services and multi-agency partners is inconsistent and requires strengthening.

Committed professionals work well together to understand the experiences of individual children in the family. Persistent efforts by the multi-agency partnership help to build trusting relationships with children. A 'teachable moments' project provides 'Divert' workers, who engage children when they attend the police station to be questioned about a criminal offence. Skilled neighbourhood police officers have been trained to conduct 'DO IT' profiling with children. This helps to identify children

who may be neurodivergent, and, although this is not a diagnosis, it helps the police to better understand the causes of behaviours, which helps to inform the best response when talking to children. The co-location of police officers within the early help TfC teams supports the identification of children at risk of exploitation. Effective communication between the police and specialist teams, including youth services, is reducing the risk of criminal and sexual exploitation of children.

Headteachers and designated safeguarding leads in schools are key partners in identifying children and families who need help. Well-established systems both within school and across the partnership are supported by the highly valued education safeguarding lead. Children benefit from school staff working diligently together with other agencies to ensure that they receive support swiftly. A headteacher reference group provides an important forum for effective two-way communication between the partners and assists education providers to continually evaluate the effectiveness of the multi-agency working and identify where it needs to improve.

TfC works closely with the 'Link' alternative provision school to enable children to remain in education when they have either been permanently excluded from their school or are at risk of this happening. Effective early help work by skilled Link teachers enables trusting relationships with the children and their families. This is key to the success of the placement and to the assessment of need, supporting children to reintegrate into their mainstream school more quickly.

Bespoke training ensures that all staff across the partnerships understand the thresholds for levels of need, risk and harm. Regular briefings to schools help to signpost education providers to the range of resources available to children and their families who need early help. TfC has worked closely and effectively with voluntary and community projects to provide training and forums for the exchange of advice and information and to strengthen practice. The extensive range of early help services available and which are easily accessible means that practitioners and police officers identify quickly what the appropriate next steps should be to meet the needs of vulnerable children. For example, all neighbourhood police officers have an SOS app detailing where parents and children can access requisite support.

Skilled multi-agency early help staff are fittingly proud to work in Sunderland. They have access to support provided by highly skilled visible managers who listen to staff and take action to develop services. All staff benefit from supervision and extensive accredited training. They know their children and families very well, and enthusiastically and movingly describe the highly impactful work with children that they routinely undertake. In addition, health and police staff value the support and training they receive from flexible and adaptable safeguarding teams and direct line managers. This strengthens practitioners' ability to identify and respond to emerging and changing needs effectively. For instance, professional curiosity in the emergency

department is strong, leading to early identification of families who would benefit from early help support.

The maternity service is working in collaboration with Sunderland University, the local authority and charities to provide an antenatal service for newly recruited overseas students from West Africa on campus. All partners are committed to this new initiative, which will ensure early support and improve outcomes for these women and their babies. Staff work well together to ensure that children in families who have no recourse to public funds are provided with support and recognise the increasing number of such families.

The LSP demonstrates a strong commitment to continuous improvement. A dedicated performance sub-group scrutinizes, and analyses, shared multi-agency data, enabling the partners to respond quickly to meet the changing needs of children and the demand for services. Practitioner forums function as an important conduit for sharing and improving practice. They use the partnership practice model to evaluate practice and develop action plans that inform the LSP's priorities and business plan. Progress is monitored by the independent scrutineer and by the LSP executive. Leaders accept that more work is required to develop the quality and effectiveness of early help multi-agency audits to ensure that auditors consistently provide evidence that the help provided is making a positive and sustained difference to children.

Practice study: area for improvement

In most children's cases sampled, the importance and impact of individual children's ethnicity and cultural heritage are not consistently considered by all professionals in contacts and referrals and case analysis and case planning. This limits the opportunity for professionals to fully understand a child's background and identity, including opportunities in direct work to address strengths of cultural heritage and the impact of racism they may have experienced. Senior LSP leaders recognise that this is a significant gap and have plans in place to improve managers' and practitioners' understanding of, and consistent reporting on, the impact of children's unique and diverse needs.

Practice study: highly effective practice

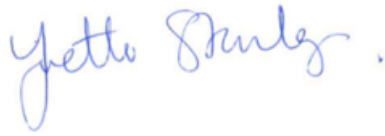
A strong targeted partnership approach to early help at a community level is delivered via three multi-agency community hubs in Sunderland's areas of highest need. Each hub works to tackle community-based issues as early as possible, so includes a focus on supporting adults as well as children, providing a unified response to individual families. Effective governance is provided through individual multi-agency strategic groups, with overall accountability through the community safety partnership. Bespoke priorities are aligned to specific needs and LSP's priorities. Joint successful collaboration between the local authority, TfC early help services, community wardens, the police and social housing providers coordinates and shares information effectively through a daily meeting, providing a wraparound support for vulnerable children and parents. Partners work closely to prevent duplication, conflicting activity or silo working in these communities. Evaluation of impact of this work is being carried out by an external service commissioned through lottery funding.

Next steps

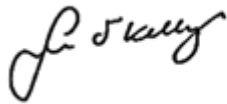
We have determined that Jill Colbert is the principal authority and should prepare a written statement of proposed action responding to the findings outlined in this letter. This should be a multi-agency response involving the individuals and agencies that this report is addressed to. The response should 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.

The LSP should send the written statement of action to ProtectionOfChildren@ofsted.gov.uk by 23 June 2023. 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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**Chief Inspector of Hospitals and Interim Chief Inspector of Primary
Medical Services, CQC**



Wendy Williams, CBE
His Majesty's Inspector of Constabulary and Fire & Rescue Services