



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

Keeping Us Safe

Report of the Safeguarding
Vulnerable Children Review



KEEPING US SAFE

**REPORT OF THE SAFEGUARDING VULNERABLE
CHILDREN REVIEW**

Gwenda Thomas AM
Chair of Safeguarding Vulnerable Children Review Group

Our Ref: GT/AA/SVCR

Rhodri Morgan AM, First Minister
Jane Hutt AM, Minister for Children

8 February 2006

I am now able to make available to you the report of the Review of Services to Vulnerable Children that you asked me to Chair.

The members of the review team have taken two years to thoroughly investigate the availability, suitability and quality of services for vulnerable children and young people in Wales. I would like to record my thanks to every member for their commitment and hard work.

I would also like to thank Christine Walby OBE for her support and for the high standard of her work.

My thanks also go to the team of officials who have supported the work of the review. My own personal assistant Anne Addison has also made a valuable contribution. A big thank you must be recorded also to all who have participated in the work of the review by making available written evidence or by attending evidence sessions.

My very special thank you goes to the team of young people who have worked in parallel with the review and their report I am sure will be enthusiastically received. NSPCC Cymru deserves our recognition for the way that the young people's group has been assisted.

The review team's report will be challenging for the Welsh Assembly Government but I hope that it will also be a source of inspiration particularly in the field of future policy development.

Finally I would like to record my thanks for having been given the opportunity to chair the review. If our report can be instrumental in improving the standard of life and welfare of our most vulnerable children then our effort will have been worthwhile.

Yours sincerely

A handwritten signature in black ink that reads "Gwenda". The signature is written in a cursive style with a large initial 'G'.

GWENDA THOMAS AM

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EXECUTIVE SUMMARY

1. When, in December 2003 Jane Hutt, the Minister for Health and Social Services and Minister for Children, announced the decision to establish the Safeguarding Vulnerable Children Review, she said that *"safeguarding children has consistently been at the top of our agenda, and over the past four years a number of guidelines and measures have been introduced to secure the protection of children, and the promotion of their welfare."* She explained that the Review would *"...assess progress on the delivery of services on the ground...to see the extent to which services on the front line match up to the policies and guidance we have set out and the investments we have made"*.

2. Members of the Review were individually appointed and acted in an independent capacity. They were drawn from the health, local authority, education, social care, police and voluntary sectors and the legal and academic fields. The chair was an Assembly Member with a special interest in and wide experience of services for children. Officers of the Welsh Assembly Government (WAG), the Social Services Inspectorate for Wales (SSIW) and an independent adviser to the Chair were available to assist and advise. The Review tried to take a child perspective throughout the process and was helped in this by a member of the Review Team from an organisation for children and young people and an observer from the Office of the Children's Commissioner for Wales. The Review also commissioned a project designed to involve children and young people across Wales and encourage them to contribute to our work.

3. As the Review was not set up in response to something specific which had gone wrong it was able to take a broad and proactive approach to looking at the real impact upon children of the many positive initiatives taken by WAG over recent years. We did not have the power to require participation but our general invitation for submissions of evidence prompted a wide and well informed response. In addition, specific invitations were issued to individuals and groups to provide evidence and information some of which came through oral sessions or presentations. The Review also examined relevant research and reports from Wales and elsewhere. The focus of the work has consistently been upon what is really happening not upon what policy documents and plans aimed to achieve.

4. It is unfortunately impossible for this report to do full and detailed justice to all the information received. However, the conclusions reached have taken account of all this evidence. We have also taken account of the work in progress following the Waterhouse Report¹, the Carlile Report², the Victoria Climbié inquiry³ and the

¹ Waterhouse R, 'Lost in Care: Report of the Tribunal of Inquiry Into the Abuse Of Children In Care In the Former County Council Areas Of Gwynedd And Clwyd Since 1974' (2000)

² Lord Carlile of Berriew, 'Too Serious a thing: the review of safeguards for children and young people treated and cared for by the NHS in Wales: (2002)

³ Lord Laming, 'The Victoria Climbié Inquiry' January 2003. Cm 5730 London HMSO

Bichard Report⁴ and have tried to avoid covering issues which are currently in hand.

5. The most significant contribution to the Review was that of children. This contribution was mainly focused through the project, facilitated by the NSPCC, which is referred to in paragraph 2 above. As a result of this project the Review received a detailed report⁵ and a presentation from the young people who formed the project steering group. These young people also advised on the title of the Report. In addition to the project the Review also considered other sources of children's views such as surveys of the views of children and other consultation reports.

6. All the sources of the evidence are listed in Appendix 2 and in the Bibliography and a summary of the main messages emerging from that evidence can be found in Part 2 of the Report. The Review Team is very grateful to all who have contributed to the Review and hope we have accurately reflected what you have told us. There was great consistency in the themes and messages emerging from the evidence. In drawing conclusions the Review has given most weight to those who really know what is actually happening 'on the ground'; that is, the children and young people, the people who work directly with them and the inspectors who inspect and monitor service outcomes. Information from these sources tells us clearly that while much has improved and many good things are happening the stated objectives of government and of local services are not always matched by what is available. The short message from the Review therefore might best be summed up by the Welsh proverb "*Nid da lle gellir gwell*" or "*not good when capable of better*".

Many Positives

7. Many of the positive features identified by the Review are described in Chapter 2 'Building on Good Foundations'. This Chapter contains a summary of many, not all, of the good initiatives throughout Wales at all levels of policy and practice. There is clear evidence of improvement working through the statutory and voluntary services for children. The voluntary organisations, large and small, are making an invaluable contribution often in some very innovative work. In sport and the activities of faith communities we saw examples of growing awareness and positive action to safeguard children. There is also much evidence of the commitment and determination of individual professional and volunteer workers in all fields of work with children and young people. This tapestry of ideals, commitment, excellent initiatives and sheer hard work at all levels which has been revealed to the Review should be celebrated, supported and built upon.

⁴ Sir Michael Bichard, 'The Bichard Inquiry Report on child protection procedures in Humberside Police and Cambridgeshire Constabulary'. HMSO, June 2004

⁵ "Keeping Us Safe Messages From Children and Young People" Safeguarding Review Consultation With Children And Young People June 2005 Final Report

What needs to be done?

8. There is also however evidence of inconsistency in the application of policy and resources, and of inadequate planning and delivery. There is a concerning lack of coherence across children's services which has a detrimental effect upon children and those who work with them. There are concerns about how much short term and uncertain funding undermines confidence and continuity. The balance of investment in services for children also requires attention. It is particularly concerning that morale is not high among some key professional workers such as social workers, paediatricians and teachers.

9. The Review must emphasise that it cannot be reasonably expected that government, professionals or parents can comprehensively protect all children all of the time. There will always be people so powerfully driven by their own need for gratification or so insensitive to the vulnerability of others, particularly children, that they will harm others weaker than themselves. There will continue to be pure accidents or unforeseen consequences which will lead to children being harmed. What can be done however is to improve our capacity to use the best information and expertise available to best effect, and the Review concludes and we trust will demonstrate that this could be done more effectively. We could, the Review believes, better safeguard all children, and more effectively prevent serious harm to the most vulnerable children. Some of the main areas to be addressed are briefly identified in the following paragraphs

10. There is a need to slow down the rapid rate of change. The key to better safeguards is not necessarily new ideas but a clearer and more sustained focus upon what works, and making sure there is more consistent delivery across Wales. This requires better planning including accurate costing, realistic funding, and improvement in the logistics of implementation. Such a focus is probably best sustained through stable organisations and personnel. Too often in Wales the opposite appears to have been the case. At WAG level the Review believes these issues would best be addressed through a strengthened role for the Minister for Children with a mandate and resources to influence and monitor all services and policies affecting children. This role should be supported by the work of a Children's Scrutiny Committee with powers to examine any issues affecting children. These measures should help to ensure better co-ordinated priorities and targets for children's services and stronger challenge and action when outcomes for children are not good enough. They should also help to ensure that good policies and strategies do not fail or fall short because they are not driven through at every level and in every area with real understanding and effective planning and monitoring. Many problems identified by the Review flow from these basic issues.

11. Many gaps and inconsistencies within and between systems and services affecting children need to be addressed. Initiatives designed to address similar objectives should be better co-ordinated and based upon similar principles and

safeguards. For example projects involving listening to children, helping them to participate in decision making, and those providing advice and representation to individual children and helping them to complain should have a common framework and approach which are child centred rather than service centred. The onus should not be upon the child to know whether their concern, complaint or representation should be addressed to their GP, the Local Health Board or the Community Council or indeed the Local Authority. Similarly, an important concern raised in a School Council but which does not specifically concern the School should be able to be dealt with in a co-ordinated and child centred manner.

12. Better national and local coordination is required so that different service targets and priorities for children are in harmony and that consistency in the level and quality of services for children across Wales is achieved. The inconsistency in funding and service levels should be addressed and particular attention should be given to the significant shortfall in the availability of targeted preventive services and support. Mental health services for children who need them, including children who have been abused, also should be enhanced and more available.

13. The problems briefly mentioned in paragraphs 11 and 12 in particular result in many vulnerable children receiving too little too late and many people who work directly with them feeling frustrated and unsupported. Those particularly vulnerable children who are physically and emotionally abused, including those targeted by organised crime, could be identified and responded to at an earlier stage and could receive much better treatment if the proposals made in this Report are addressed.

14. Other problems arise because the responsibilities for safeguarding children go beyond government and the child protection agencies. There are some basic assumptions which the Review believes are fundamental to safeguarding but which may not be fully accepted within the wider community. These are:

- all adults have a responsibility to be aware of the vulnerability of children and the need to safeguard them
- the role of government is to maintain a framework of good law, policies and strategies, to set priorities and standards, to provide adequate resources, and to hold others to account
- public bodies, public services, professions, independent bodies, voluntary bodies, businesses and the media all have a duty of care towards vulnerable children whatever their other interests
- children are best safeguarded by committed individuals who have the time, training and skills, and the proper support of their employers and their community

- adults should take collective as well as individual responsibility for children and provide love, care, respect and support and appropriate opportunities, experiences and boundaries necessary for learning and development

These assumptions have led the Review to identify action points which recognise that public opinion and attitudes and the role of media can be potent factors which affect safeguarding children.

15. The improvement agenda identified by the Review includes some matters of considerable complexity such as the need to achieve the optimum balance of investment in children. A balance which takes account of:

- the need to have good services for all children;
- the need for the right levels of targeted measures which aim to intervene at an early stage with children seen to be at risk; and
- the need for the right level of residential, secure and remedial measures for children with very serious problems.

Successive UK governments have not addressed this issue effectively. It is very difficult and requires a long term perspective and commitment. One which goes beyond the lifetime average lifetime of any government. The present pattern of service provision is a product, since the earliest social legislation, of responses to perceived problems at different times. The resulting pattern of responsibilities and funding streams for children's services make it almost impossible, as this Report shows, clearly to identify all expenditure on vulnerable children. What is needed therefore is a child focused analysis of what services are right for our children and a coordinated approach to public investment in children which aims to achieve best value measured in terms of cost and outcomes for children. The Review suggests possible ways forward.

16. Therefore elected representatives at all levels of government need to try to reach a more substantive and committed long term political consensus for children's services. Such a consensus could give children's services much needed structural stability and financial sustainability and make them less vulnerable to destabilising rapid change. History has shown that uncertainty and lack of continuity in services can be very dangerous for vulnerable children. The Review suggests therefore that the needs and interests of vulnerable children demand and deserve longer term goals and slower change programmes than sometimes is the case.

The Challenge

17. The overall analysis of the evidence has identified important issues, both large and small, where the Review recommends that action should be taken. These are summarised at the end of this Executive Summary and discussed in detail in Part 1 Chapter 2 of this Report, 'The Challenge and the Agenda for

Action'. Arising from the premise that safeguarding our children is 'everybody's business' the actions recommended by the Review cover statutory and voluntary services for children and other activity which is seen to have an important influence upon safeguarding.

These challenges are:

Challenge 1: THE CHILDREN - to build upon initiatives to place them at the centre of policy and service development which affect them and to improve, expand and rationalise arrangements for listening to them and advocating on their behalf

Challenge 2: THE PUBLIC - to address the apparently confused and conflicting attitudes to children in our society

Challenge 3: THE WORKFORCE - to improve the levels, stability, confidence, competency, support and job satisfaction of people who work with children

Challenge 4: THE FORMAL SYSTEMS - to make them more child friendly, better and more consistently resourced and fit for purpose

Challenge 5: THE VISION AND STRATEGY - to develop and implement a secure long term integrated vision and strategy for consistent services for vulnerable children

Challenge 6: THE FINANCE - to review, evaluate and rationalise the balance of investment in services for children and to consolidate and stabilise funding streams

Challenge 7: THE NEW RISKS - to develop a more effective capacity for identifying and responding to emerging risks to vulnerable children

These challenges are based upon the Review's analysis of the issues which we believe lie at the heart of the problems we have identified.

Current Developments

18. During the lifetime of the Review there have been developments upon which we cannot comment because our focus has been upon outcomes rather than intent. Of the work currently in progress however the most significant for the safeguarding of children is the introduction of Local Safeguarding Children Boards (LSCBs) by October 2006 and the final implementation of the measures recommended by the Bichard Report including the establishment of lists of those barred from working with children and vulnerable adults. With regard to the latter it should be recognised that despite recent highly publicised problems in the

Education Service the formal systems and checks designed to protect children are safer now than they have ever been throughout our history.

19. The efficacy of future safeguarding practice will hinge very much upon the success of LSCBs. Their new statutory status and broader remit should help them to exert a greater influence than Area Child Protection Committees (ACPCs) could achieve with their limited resources and status. There are however important issues to be resolved if LSCBs are to succeed. These include the need for clarity about local strategic relationships; the need for an agreed definition of the activities and responsibilities included in safeguarding; and the need to ensure that LSCBs have the membership and resources necessary for carrying out their responsibilities. History has shown that few, if any, ACPCs enjoyed appropriate commitment and resources from member agencies. Crucially LSCBs must be able to monitor the performance and hold to account all agencies with responsibilities for safeguarding children and must receive full co-operation in this task. At the time of writing there are some expressed doubts and concerns about these issues and the Review would urge WAG to maintain a close watch to ensure that LSCBs are equipped and enabled to achieve their intended performance levels.

20. Finally, the Review recognises the enormity of the task encompassed in our Terms of Reference and pays tribute to WAG for starting a process which could have long term implications. The time and resource available has not been sufficient to enable us to undertake a highly detailed level of analysis on all the issues which require attention. What we have endeavoured to do however, within the framework of the Challenges, is to identify key areas and a comprehensive framework for action which can be developed further. The Review members would be pleased to assist in the process of addressing the Challenges and would also be prepared, if considered appropriate, to be reconvened after a period of time to assist in reviewing progress on the issues raised by this Report.

THE CHALLENGES

These action points are discussed and elucidated more fully in Chapter 3

CHALLENGE 1: The Children - to build upon initiatives to place children at the centre of policy and service development and to improve, expand and rationalise arrangements for listening to and advocating for all children the following is required:-

1. WAG to have a programme for raising the universal services (health and education) for all children to the standards and quality of the best and to eradicate disparities in services across Wales:

- the basic training of professionals in the universal services should include training in the early recognition of vulnerable children and how to make appropriate referral to specialist agencies
- the voluntary youth sector and faith, culture and arts organizations for children and young people should have procedures for checking all adult helpers to ensure that they are not a danger to children and are trained to recognise vulnerable children and make appropriate referral to specialist agencies

2. WAG to develop a common framework for all arrangements for children's participation in policy and service development and other major decisions which affect them. It should include:

- all activities which facilitate consultation and expression of children's views (such as school councils, consultation forums, questionnaires, children's champions, participation work)
- consideration of developing school councils as a channel for both school and community issues and encouragement of school governors to have regular discussion with school councils
- a co-ordinated approach to establishing principles and standards, methods of monitoring effectiveness and promoting best practice

3. WAG to develop a common framework for all statutory arrangements for providing independent advice to and representation of the interests of individual children (ie Advocates, Independent Reviewing Officers (IROs),

Complaints Officers, and Personal Advisers). Its component parts should be:

- a system of children's complaints and advocacy across all public services including GP and other independent contractor services
- independent 'one stop shops' in all areas for dealing with children's individual complaints and concerns across all public services
- a common set of principles and standards for independent advocacy
- a set of principles and standards for independent advocacy which will ensure a) prevention of conflict between service provider interests and children's interests in the event of a complaint or challenge, and b) consistent procedures for the resolution of issues raised with service providers on behalf of a child
- independent monitoring of the quality of advice and representation services and appropriate regulation of individuals working in this field

4. WAG to establish a central unit to lead, co-ordinate, support and monitor the activities described in (2) and (3) above. It should:

- be resourced with the strategic, operational, professional and managerial skills necessary to do the job
- account to and support the Minister for Children as this role is consistent with an unequivocal focus upon advocating for children's rights and representation rather than upon a particular service
- advise upon, develop and monitor the systems and structures needed to ensure a skilled, safe and independent advice and representation service for children throughout the public services in Wales
- establish and monitor the standards of such a service and advise upon and approve the independence and quality of commissioning arrangements for these services

5. WAG to consider restoring the formal link between WAG and the Children's Commissioner through the Minister for Children for the reasons given in 4c above.

6. Local Authorities to develop regional commissioning arrangements for advocacy services to include:

- a regional steering group, including providers of services, with a remit to advise on problems and improvement, identification of emerging issues raised by children, and training and regulation of staff and volunteers

7. WAG to ensure that common standards are introduced for independent advocacy:

- to include standards for the selection, training and monitoring of volunteers (the model developed for CAB voluntary advisers may be a useful example)
- non social workers with other professional qualifications should be able to demonstrate an identifiable core of required skills and knowledge for advocacy
- the Care Council for Wales and similar bodies to review their position to ensure that consideration is given to the issue of registration and professional discipline for all individuals undertaking the role of advocate, supporter, adviser to or representative of vulnerable children

CHALLENGE 2: THE PUBLIC - to address the confused and conflicting attitudes to children in our society the following is required:-

1. WAG to develop a public information strategy designed to promote a better informed public image of children with the objectives of:

- raising greater awareness of the needs of children, promoting more sympathetic understanding of how issues affect children and greater acceptance of adult responsibilities towards all children including the shared responsibility to develop safe communities
- promoting more understanding that children who are "sinned against" or "sinning" are at different points on the same continuum
- promoting support for further improvement in the quality, sustainability and equality of standards of universal services for children across Wales
- promoting among all public services, independent providers and the business community a better understanding and acceptance of their wider responsibilities for safeguarding children
- ensuring that all local authority community strategies include strategies for safeguarding children and involving them positively in their communities

2. WAG to promote a strategy for engaging the media in reflecting upon the impact upon children in general and vulnerable children in particular of ways in which issues involving children are handled:

- to consider a joint initiative between government and the Children's Commissioner to engage the media in the public information strategy outlined above
- to promote the strengthening of training programmes for journalists in the understanding of the best interests of children and child protection
- to encourage the media to take account of the child's best interests when covering news stories

CHALLENGE 3: THE WORKFORCE - to improve the levels, stability, confidence, competency, support and job satisfaction of people who work with children the following is required:-

1. WAG and employers to action the recommendations in the report "Social Work in Wales: A Profession to Value"⁶ as a matter of urgency.

2. WAG to give urgent consideration to the introduction of legal protection for professional staff who make child protection referrals or give expert opinion in good faith (with particular reference to consultant paediatricians).

3. The Police, Crown Prosecution Service and public service managers to effect further improvement in developing a more integrated approach to the conduct of investigations of allegations against staff with a view to:

- a quicker and less stressful process for children and staff
- prevention of repetition of evidence gathering, and
- more rapid release of relevant evidence to be made available for the disciplinary process

4. WAG to implement recommendation 21.7 of the Report of the Children's Commissioner for Wales that guidance should be issued on how

⁶ Social Work in Wales: A Profession to Value. The report of the ADSS led multi agency group on the recruitment and retention of Social Workers in Wales August 2005

allegations of child abuse made against teaching and non teaching staff should be investigated.

5. Unions and employers to review their policies and practices with regard to the support given to “whistleblowers”. Specifically:

- where it is not the policy of a Union to provide dedicated support to a member who is a whistleblower the employer should designate a senior member of staff not involved in the investigation to carry out this role

6. Relevant Unions and sections of the media to reconsider the content and tone of some public statements made when prosecutions of staff fail or decisions are taken not to proceed with criminal prosecution:

- to appreciate that these circumstances cannot be construed as proof that a false allegation was made

7. Where staff are alleged to have assaulted a child employers to have in place procedures to ensure immediate decision and action, including the release of relevant papers, about the need for disciplinary proceedings should there be no prosecution or a failed prosecution:

- this should involve taking advice from officers with the necessary expertise in child protection

8. Higher Education providers to ensure that the training of staff working in universal services such as education and health has a compulsory component about safeguarding children including the ways in which child abusers operate and when to make appropriate referrals.

9. Employers to ensure that the role of giving advice and support in investigations and disciplinary proceedings involving child abuse should be restricted to specialist Human Resources with access to expert advice and a programme of training in safeguarding children and child protection.

CHALLENGE 4: THE FORMAL SYSTEMS - to make them more child friendly, better and more consistently resourced and fit for purpose the following is required:-

1. WAG to consider stronger measures to promote collaborative and partnership working in the event that present measures do not deliver what is required in timescales relevant to the present generation of children.

2. WAG to evaluate the concept and application of ‘emotional intelligence’

and assess its' potential contribution to policy and practice affecting children in Wales.

3. SSIW, Estyn, HIW and HM Inspector of Constabularies to develop existing collaboration further and to move towards integrated systems for Inspections of joined up services:

- to prioritise the development of integrated Inspection protocols for scrutiny of LSCBs and their capacity to carry out the required functions

4. WAG to ensure that anti bullying strategies are part of the Single Education Plan and the Children's Services Plan. WAG should also consider making a legal requirement of employers of young people to have similar anti bullying measures in place and to exercise a duty of care.

5. WAG to ensure that information and data protection systems in agencies are enhanced to facilitate improved information sharing between agencies and checking of staff. This should include:

- requesting the Information Commissioner to issue clearer guidance and be more proactive in relation to vulnerable children
- ensuring that CRB checks are conducted on all school governors and that formal checks are routinely made on the non criminal exclusions for consideration as a Governor (eg bankruptcy and detention under the Mental Health legislation)
- clarifying standards for making recruitment checks and instituting a new standard that CRB checks should be carried out every 3 years in all statutory agencies, pending final proposals from the Bichard working groups

6. WAG to provide guidance to Children and Young People's Framework Partnerships on the development of a comprehensive programme of preventive and supportive measures for vulnerable children and their parents. This should include:

- developing parenting classes in schools and tier 1 support under the Child and Adolescent Mental Health Strategy for vulnerable children and parents and specialist nurture group support in school settings for young children with serious emotional and behavioural difficulties
- developing local family assessment facilities for Welsh families who need, or may be required by a Court to undergo such assessment. Currently families are sent to facilities in England, usually far from their home community

7. The Education service to provide targeted funding for a strategy to include support tutors, catch up classes and mentors for 'looked after children' in the mainstream school system.

8. The Education Service to support the development of emotionally intelligent schools:

- as part of a national agenda on child and adolescent mental health and to include in the curriculum the development of emotional resilience and emotional intelligence in children

9. Higher Education providers to include compulsory modules within initial teacher training on child protection and:

- to make specific funding available for raising awareness and skills among serving teachers and for initial teacher training
- LEAs to review and revise governor training and responsibilities with regard to safeguarding

10. The NHS in Wales to give more prominence to children in management targets and:

- introduce independent advocacy and complaints procedures for children in the health service
- produce legal guidance on the Venereal Diseases regulations in respect of sharing information on vulnerable children and;
- take further steps to review and strengthen children's mental health services

11. The Police Service in Wales to develop a more consistent approach to child safeguarding issues in the context of dealing with domestic violence and anti social behaviour.

12. The Sports Council for Wales to review its present policy regarding child protection and make grant funding to sports organisations conditional upon child protection procedures and routine CRB checks being in place.

13. Members of LSCBs to ensure nomination of the appropriate level of representation and the allocation of sufficient resources to enable the Local Safeguarding Children Boards to carry out their required functions.

14.WAG to scrutinise the effectiveness of LSCBs and hold participating departments to account.

CHALLENGE 5: THE VISION and STRATEGY - to develop and implement a secure long term vision and strategy for vulnerable children the following is required:-

1. WAG to establish a long term national strategic plan for children's services which should as far as possible have political consensus and commitment. It should:

- be founded upon research and other evidence, based upon an agreed philosophy, and framed by a conceptual model which can be used nationally and locally
- determine the desired balance of public investment in services for children between universal services, targeted preventive services for children at risk and remedial services for children with serious problems

2. WAG to set up a cross cutting children's Scrutiny Committee with a remit and powers to scrutinise all children's services from a child centred perspective.

3. WAG to review arrangements for the co-ordination of Ministerial and Civil Servant responsibilities for children with a view to achieving greater co-ordination and harmonisation of planning and operations.

4. WAG to support the initiative to establish a cross party group on children with a view to informing the thinking of all political parties.

(Note: the Westminster model which has existed for several years is a cross party group on children with external servicing arrangements. It holds discussions and receives briefings on a range of issues affecting children).

5. WAG to consider a funded national strategy to address the commercial exploitation of children.

6. WAG to employ a limited use of short-term funding to time limited projects and properly evaluated experiments.

CHALLENGE 6: THE FINANCE - to review the balance of investment in children's services and to consolidate funding streams the following is required:-

1. WAG to commission a comprehensive analysis and evaluation of the expenditure and cost benefits of investment in children's services including health, education, social care, police, courts and legal services, and young offender services.

2. WAG to commission an exercise to gather all available information regarding unit costings of different interventions and use to inform financial assessment of policy decisions in services for children.

3. WAG to review whether core funding of services is based upon realistic assessment and placed upon a sustainable basis.

4. WAG to develop a strategic financial plan for all services for children in Wales to underpin the plans developed under Challenge 5 above:

- to facilitate working towards planned objectives to change the balance of funding between universal services, skilled intensive early interventions with children at risk and remedial interventions for children with serious problems

5. Local Authorities and the WLGA to work towards the early development of a strong expert commissioning capacity for children's services which can manage the market and obtain better value for money and quality of service from the independent sector, taking account of:

- the need to attract and retain appropriate expertise within the local authorities
- the need to have regard to the importance of continuity and quality in safeguarding children
- the need to retain expert small specialist providers within the competitive arena
- the need to invest in research to inform the quality of commissioning
- the need to take account of the development and infrastructure costs of independent providers of the specialist services needed by children with complex needs
- the need to develop a whole child approach to commissioning services

and to commission jointly with partner agencies

CHALLENGE 7: THE NEW RISKS – to develop a more effective capacity for identifying and responding to emerging risks to vulnerable children the following is required:-

1. WAG to establish a multi disciplinary ‘new risks new opportunities’ standing group of individuals with special expertise and commitment:

- to identify new trends and problems which present new threats to the safeguarding of children and to recommend action
- to monitor worldwide developments in safeguarding children and identify those which would have a valuable application to Wales
- to report regularly to the Minister for Children

2. WAG to establish a Task and Finish group to examine the extent of criminal exploitation of children and the responses by different police authorities and local authorities.

3. WAG to take urgent action to respond more comprehensively to the existing threat posed by the Internet and new technology and specifically to:

- issue new regulations (perhaps under Section 175 Education Act 2002) to ensure a safe and secure infrastructure which includes all computers in all schools (including those used by teachers only), youth clubs and libraries
- require all schools to use only assured provider
- require LEAs to develop E-safety policies covering the range of risks identified in this Report and individual Governing Bodies to have E-safety policies
- require Local Authorities to ensure that similar policies are in place to protect looked after children, whether they live in families or residential care, or are in receipt of services commissioned from another body
- work in conjunction with the Qualifications, Curriculum and Assessment Authority for Wales (ACCAC) to ensure that Internet literacy programmes, critical thinking skills, management of online and mobile phone risks and personal safety online are embedded in the Wales National Curriculum

- ensure that E-safety is included in local child protection procedures and is promoted and monitored by LSCBs, Community Safety and Public Safety policies

4. WAG to make more use of available initiatives and:

- adopt Home Office initiatives on Internet Safety and issue them in Wales as soon as possible
- adopt the DfES resource packs dealing with online grooming, online bullying and bullying via mobile phones (cost £4) and issuing in Wales as a matter of urgency
- ensure that Wales has a direct and active involvement with the new National Internet Safety Centre

5. WAG to seek assurance that procedures for gathering, using and storing video evidence for court purposes will be reviewed to ensure that the material is not used inappropriately or abusively and that consistent standards of practice are applied

PART 1 – THE REPORT

CHAPTER 1: INTRODUCTION

1. Throughout history measures have been taken to safeguard vulnerable children. In the nineteenth century particularly there was an explosion of protective legislation. This ensured that births were registered, children in employment were more protected, education and school meals introduced, and illegitimate children and poor children better protected. The later part of that period also saw the development of the probation service, approved schools, reformatories, and the first Prevention of Cruelty to Children Act. At the same time the national children's voluntary organisations such as Barnardos, NSPCC and NCH were developing. Shortly afterwards came the first Children Act in 1908 and the first Adoption Act in 1926. The second great wave of social legislation after the second world war included the landmark Children Act 1948 which brought together the existing services for vulnerable children provided by Health, Education and under the Poor Law under one new local authority department with new responsibilities and powers.
2. Much has been done since to build upon that foundation and there have been many improvements. In parallel with legal and organisational developments psychology and psychiatry has developed knowledge and insights which have contributed to good practice in children's services. At the same time, services for children have experienced turbulence and loss of continuity as a result of major changes in organisational structures and policy direction over the years.
3. There is a wealth of knowledge about how best to safeguard vulnerable children but that knowledge needs to be better and more consistently used if Wales is to become the safest possible environment for a healthy and happy childhood. This was recognised by the First Minister and the Minister for Children when, in late December 2003, they announced their intention to commission an independent review on Safeguarding Vulnerable Children.

Terms of Reference

4. The terms of reference of the Review are as follows:

“to undertake a review of current policies and practices for safeguarding children in Wales, including in particular:

- to consider whether they are sufficiently clear and robust to deliver safe and effective services in authorities and agencies;

- To identify strengths and areas for improvement;
- To consider the effectiveness of organisational and cross boundary arrangements in safeguarding children, including the effectiveness of existing arrangements for the recording and sharing of information, taking into account the findings of inquiries into the Soham case;
- To consider the risks and opportunities posed by the Internet and new technology in safeguarding children; and
- To recommend to the Welsh Assembly Government the actions needed to strengthen policies and practices for safeguarding children."

Our approach

5. All children are vulnerable by virtue of their age and inexperience but some are more vulnerable than others. Safeguarding children is the responsibility of all adults. It also has to be recognised that however effective the adult population becomes at safeguarding children, sadly, some children will still be hurt. Safeguarding goes much wider than the responsibilities of parents and the professional activities of teachers, social workers, health professionals and the police. It involves a wide spectrum of activity in all walks of life. Children are directly and often most profoundly, affected by how adults handle aspects of daily life; the quality of the environment and public safety; the quality of formal and informal activities such as sport, play; membership of organisations and faith groups and the quality of all the services provided by the welfare state such as health care, income support, family support, and education.
6. Children need the freedom to play and move about in their local communities secure in the knowledge that they will be safe from harm and can look to adults for help. They are entitled to expect that if they suffer neglect, abuse or are exposed to serious risk they will be protected by appropriate adults and that their physical and emotional hurt will be properly helped to heal.
7. In line with this broad view of safeguarding, the Review looked at the experience of all children, as well as that of the most vulnerable children because the more the needs of all children generally inform and influence daily life, the better we can safeguard the most vulnerable.
8. This is a huge agenda and the Review Team made **three key decisions** at an early stage. These were:

The Review would place the perspective of children and young people at the heart of the review process

The Review would not 'reinvent the wheel' but seek to identify what works and what does not work and how to build upon and sustain success

The Review would not make numerous recommendations which repeat what has been said before

The *first key decision* is fundamental to our approach. How the Review Team went about involving children and what they told us is described in detail in Part 2.

The *second key decision* sets the style and approach of the Review which we trust will build upon the positives and help to develop a robust and consistent framework for proper safeguarding of children right across Wales. Most importantly, the Review would promote the establishment of a framework which is not susceptible to being overtaken by the latest 'big idea' before the last one has bedded in.

If the Review does have a 'big idea' it is the belief that good parents and professionals who work with children know what needs to be done to make a better, safer environment for our children. This belief was reinforced time and again by the recurring themes in written and verbal evidence. Where society appears to fail children is that there does not appear to be a collective will and commitment to invest uniformly and in a sustained way in what works. It is not because of a lack of knowledge of what needs to be done. Too often, the next initiative is being launched before the skills, focus and resources to ensure effective implementation of existing initiatives have been deployed.

9. In summary, the Review will suggest that it is time to:
- recognise the lessons of experience and research which are supported by evidence to this Review;
 - accept that some of what needs to be done will take time to implement properly and will not show quick returns; and
 - invest more time, expertise and monitoring into the mundane but crucial process of logistical planning and implementation, identifying and resolving problem issues in advance
10. The Review has pursued these themes with some trepidation because they carry implied challenges and criticisms. They beg uncomfortable questions about political, professional and organisational priorities and autonomy and also about commercial interests. It is a fact that across Wales there is a very

uneven picture of how effectively children are safeguarded in different areas. There are major geographical differences about how, or even whether, vulnerable children including children who have suffered abusive harm will be helped. The reasons for this may vary but the outcome for children cannot be right. The Review Team therefore has highlighted issues and made recommendations which we feel 'stand up' when tested against the gold standard of what is objectively in the best interests of children.

11. The *third key decision* led the Review to decide that it would be helpful to review the outcomes of recommendations made by a number of recent Inquiries and Reviews which have dealt with safeguarding children⁷. This exercise proved difficult and ultimately incomplete as the responsibilities for implementation of recommendations lay in many different places and were not subject to co-ordinated monitoring. The attempt was however valuable in that it provided early evidence, confirmed later, of a continuing, rather fragmented approach to vulnerable children.

Unblocking the blockages!

12. The decision was taken to focus the work of the Review upon the "blockages" or impediments to safeguarding children uncovered by the evidence. What prevents politicians, managers, practitioners and others from doing what needs to be done, **and to keep doing it**. It will surprise no one to read that these blockages occur at every level; political, managerial, organisational, community and individual. Some are a result of individual and departmental conflicts and of different priorities. Others stem from lack of resources, overstretched staff or even ignorance. Some blockages are large and may need major action to remove. Many are small and irritating but profound in their effect; like the claim sometimes heard that the concept of professional confidentiality or the Data Protection Act prevents information sharing which would be in the interests of vulnerable children, or the often incorrect assertion that certain activities cannot be undertaken or information divulged because of the strictures of an Insurance Policy. Some blockages arise from the attitudes and cultures of different professions and groups. Many appear to stem from inadequate logistical planning which fails to make proper assessment of necessary resources. Others from lack of staff training and

⁷ Commission For Social Care Inspection (2005);

The Chief Nursing Officer's Review of the Nursing Midwifery and Health Visiting contribution to vulnerable children and young people. London: Department of Health (2004);

Lord Nolan - Review on child protection in the Catholic Church in England and Wales. First report. London: The Catholic Church (2001);

Too Serious A Thing: The Review of Safeguards for Children and Young People Treated and Cared for by the NHS in Wales: the Carlile review. (2002)

Keeping children Safe: a young person's guide to the safeguarding children review Newcastle: CSCI (2005).

preparation and failure to test whether what is planned can actually work and failure to check what is actually happening.

13. Whatever the causes of blockage they must be identified and resolved before a truly integrated and effective approach with children at its centre can be achieved. This focus risks making the Review sound like a drain clearing exercise. However, if the Review can identify and suggest ways of dealing with some of these apparently intractable causes of difficulty it will have done something very useful. In trying to establish this focus the Review Team has set out Challenges in Chapter 3 which we believe are key to unblocking the blockages.

Which children need to be safeguarded?

14. The simple answer to that question is “*all children*”. It is also important to define clearly that in this Report the word *children* means children and young people. This is the interpretation used in the Children Acts⁸. The Review therefore considers the question of safeguarding vulnerable children from birth to maturity. The Review also recognises that “maturity” is a concept and not an arbitrary age limit. Children who have suffered a traumatic childhood are much more likely to be vulnerable adolescents and young adults. They need the support that others of their age group might continue to have within their family. Recent legislation has recognised this interpretation in the responsibilities it has placed upon local authorities.
15. Clearly, all children experience the vulnerabilities which are inevitable given their stage of intellectual and physical development and experience. Good parents, schools and other caring adults know this and try to safeguard them in ways appropriate to their age and stage. Less obviously, all children are also vulnerable to failures by adults to have proper concern for them when making decisions on many local, national and international issues. These failures can arise from lack of child awareness or simply a lack of understanding of the implications for children in matters like control of traffic movement, pollution, food production and promotion, climate change, environmental hazards, marketing, entertainment and the exercise of regulation. Children may also suffer the unintended consequences of systems and processes driven by over-riding considerations of profit.
16. Whatever the reasons, most children are exposed to a high level of risk from road traffic and exposure to pollution of various kinds. They also experience a bombardment of advertising, ‘pop culture’, and new technology which is very

⁸ Sec 105 of the Children Act 1989 defines a child as ‘a person under the age of 18 for all purposes except para 16 of Schedule 1 of that Act; Sec 144 Adoption and Children Act 2002 defines a child as ‘a person who has not attained the age of 18 years’; the Children Act 2004 sections 25 & 26 extend local authority responsibilities to all 18 and 19 year olds and all people over 19 who were looked after by the local authority after the age of 16 or who have a learning disability

influential in their lives and can, in some circumstances, create conditions that add to their vulnerability. Few children appear to grow up with easy and regular access to suitable informal and formal play space or to the skills and pleasures of sport. As the First Minister suggested, in his introduction to a recent conference of senior NHS executives, the unhealthy lifestyles experienced by many children could make this the first generation to fail to exceed the life expectancy of their parents and grandparents generations.⁹

17. It is a sad fact that a significant number of children suffer experiences which no child should have to endure. They are harmed directly by adults, often those close to them, who may seriously neglect them, or assault them physically, sexually or emotionally. A hidden group of children, usually those already most vulnerable because of what has happened to them in childhood, are deliberately targeted by the criminals who occupy the murky world of drugs and prostitution. These children, and the people who work with them, experience serious danger.
18. A fact which also must not be forgotten, is that some children can be particularly vulnerable to the bullying, cruel taunts, isolation and pressures perpetrated by other children. However, even harm inflicted by children upon children should be considered to be the responsibility of adults who fail to notice and to take appropriate action.
19. Finally, it is important to recognise that even those systems intended to protect and safeguard children can sometimes jeopardise their wellbeing. They may not respond sufficiently quickly or appropriately or perhaps because the right response is not available at the right time. Sometimes the inevitable timescales involved in criminal investigation, court proceedings and disciplinary action may prolong stress and anxiety.
20. Age, inexperience and their susceptibility to the conscious and unconscious acts of adults all place children in an unique position. This is recognised daily by good parents, teachers and others who are in regular contact with them. Local and national politicians too have increasingly demonstrated greater awareness of and willingness to address the vulnerability of children and the importance of safeguarding them.

Cotton wool is not the answer!

21. A dilemma for all adults is the importance of striking a balance between a sensible awareness of the vulnerability of children and the need for them to experience appropriate freedom and risk. Probably the best and most effective safeguarding is exercised by children themselves when they have been helped to gain the confidence and maturity to recognise and deal with risk. Of course, it could never be argued that if a child is abused it is ever their

⁹The Welsh NHS Confederation Conference “Towards 2015: Getting the Balance Right” November 2005

fault. In the family children can be helped to develop sensible awareness of risk through being given reasonable and age appropriate freedoms and boundaries. They need to experience relationships with adults who can be trusted, and they need to be helped to develop a sense of self worth and being loved. They also need experience of age appropriate choice. This process can continue in school where children can also develop a sense of concern for each other and confidence that there are adults outside the family they can trust. In both settings, as well as through their own informal play and other activities such as organised sport and youth groups, children can grow up with a sense of knowing what is appropriate and acceptable and what are the boundaries of acceptable behaviour; their own and that of adults. Many of these qualities are described as 'emotional intelligence', a concept the report discusses in a little more detail in Chapter 3. Equally importantly children can learn that risk taking with reasonable safeguards is exhilarating, fun and can give a great sense of achievement. It was very welcome and refreshing for the Review to hear evidence from Insurers supporting this view.

22. This Review focuses mainly upon what the Review Team feels should be done further to safeguard children. That will at times imply criticism. However, it would be wrong and misleading not to set the analysis of problems in a balanced context. Much progress has been made in the UK generally and in Wales in particular to improve policy, introduce initiatives and develop the skills and sensitivity of professionals in many disciplines and services. Also to raise the general awareness of the public to the needs of children. Many of our public services are developing a more "child friendly" approach. There has been increased investment in parts of children's services in Wales and there have been new services and initiatives designed to support families with children. There is also evidence that many sports, faith and youth organisations recognise their responsibility to 'look out' for children. It is right therefore that this Report should acknowledge these positive developments and some of them are summarised in Chapter 2 'Building on Good Foundations'.

Who are the Review Team and how did they work

23. The members of the Review Team were drawn from the health, local authority, education, social care, police, voluntary sector, legal and academic fields. Members are listed in Appendix 1. Officers of the Welsh Assembly Government, the Social Services Inspectorate for Wales and an independent adviser to the Chair were in attendance to assist and advise. The Review was helped to maintain a child perspective by the presence, as an observer, of an Assistant Commissioner from the office of the Children's Commissioner for Wales, and a member of the Review Team from an organisation for children and young people. Whilst the Review Team represented a wide spectrum of expertise and interests it is important to be clear that, in keeping with the independence of the Review, they made their contributions as

individuals and not as representatives and as such take responsibility for the Report.

24. From the outset the Review Team identified that the terms of reference of the review signaled some very important messages, such as:

- safeguarding children is much more than the formal child protection systems, in fact it is *everybody's business*;
- the Review was to be *independent and proactive*; and
- the Review should recognise that safeguarding vulnerable children is much wider than formal systems and should think imaginatively

25. The Review Team therefore invited contributions from a much wider range of people and interests than the child protection professionals. It has directly involved children and young people in the process and has tried throughout to look at safeguarding from the perspective of children and young people.

26. The first meeting of the Review Team was held on the 29th of March 2004 and it has held meetings at approximately 2 monthly intervals until the work concluded in December 2005. It has also held two residential workshops. The widely circulated call for evidence prompted 58 written submissions, some representing groups, from a very wide range of sources throughout Wales. Those who provided written evidence are listed in Appendix 2. The Review Team found these submissions very illuminating, interesting and helpful and want to record their appreciation to all who made such thoughtful and constructive contributions. Following the analysis of the submissions the Review Team identified important gaps in the evidence and these were explored through oral evidence sessions and research. In all, the Review Team conducted some 25 sessions where oral evidence or presentations were heard followed by questions and discussion; some of the oral evidence sessions included groups of organisations with similar interests. These are also listed in Appendix 2.

27. Most importantly, the Review gave the highest priority to the perspective of children, both the very vulnerable and those with a wide spectrum of life experiences, including the wider more 'normal' experience of childhood. In line with this determination a piece of work was commissioned which was designed to engage children and young people in the work of the Review.

28. In the following chapters the Report will;

- summarise what we found that was good

- summarise the themes of evidence and identify the main messages received by the Review;
- discuss the Review's analysis of the main themes of the evidence;
- draw conclusions about the key issues which need to be addressed if vulnerable children are to be properly safeguarded; and
- identify the key challenges which the Review concludes lie at the heart of the issues which need to be addressed

29. This Review, unlike Inquiries set up to look at specific problems, was not intended to provide an in depth analysis of any particular issue. Essentially the broad nature of the remit determined that the Review should look widely at the experiences of vulnerable children in Wales and consider whether the law, policies, practices and services available to them are adequate or falling short of what needs to be done. Some of what is reported is impressionistic or not possible to verify with quantifiable evidence. It is nonetheless valid and care has been taken only to report matters which have been repeatedly supported by respondents.

30. The important characteristics of this Review and the approach to the task have been determined by the fact that the Review is both *independent* and *proactive*. It is a genuine exercise in making a searching and reflective examination of how we safeguard, or do not safeguard, our children. Those giving evidence were not defensive or under pressure, they have responded to what has been perceived to be a positive exercise and have been generous, open and honest in their contributions. The Review Team for its part has tried to use the opportunity honestly, imaginatively and constructively.

31. Finally, the Review Team would like to acknowledge that the First Minister and the Minister for Children took a bold and open-minded approach to setting up this proactive initiative. It is to be hoped that what the Review has found and recommended will make a positive contribution to the changes necessary in taking forward a continuous process of improvement in safeguarding vulnerable children.

CHAPTER 2: BUILDING ON GOOD FOUNDATIONS

32. The evidence considered by the Review is summarised in detail in Part 2 of the Report. It not only provides the basis of what the Review Team think should be done but also underlines the view that there are services and initiatives for children of which Wales should be proud.
33. The general approach to safeguarding vulnerable children in Wales, the commitment of many local and national politicians and the dedication and skill of the professionals and volunteers who work with children should be appreciated and celebrated.
34. It may seem contradictory therefore, when in the next section of this Report the Review highlights problem issues, particularly as some of these are in the same areas that also provide examples of positive features. The reason is that the Review has found that while the intent of many of the systems in place are sound, they are often implemented in an uneven and unsustainable way. Similarly, while the people who work with and for children are, in the main, committed and hard working and deserve the confidence of the public and of children, there are not enough of them and many do not have adequate professional developmental opportunities and sound support systems. While there are many excellent initiatives they are not always in harmony with existing priorities and preoccupations. In addition to these factors the rapidly changing social environment requires constant vigilance and speed of action to identify and respond to new risks.
35. However, these facts should not detract from generous recognition of that which is good. It should also be recognised that while a child, or parent of a child, who has been harmed will feel, understandably, aggrieved and that someone was at fault, the reality is that sometimes no individual or system is actually to blame, except for the person who directly inflicted that harm.
36. The role of Government is to set strong legal and political frameworks and to provide adequate funding for the necessary facilities and staff. There is also a wider community responsibility for safeguarding children that goes further than making demands of political parties for the right policies and resources. There is a responsibility upon the public and the media to be well informed about the implications of the price our society is willing to pay to safeguard vulnerable children. This price can be calculated in both human terms, the price of not doing something, and financial terms, the price of doing something. The urge to attribute individual blame to social workers, doctors and others (often unfairly) when something is perceived to have 'gone wrong' can deflect attention from what might be the real problem, such as poor resources or back up systems. This preoccupation over attributing blame can obscure and prevent the necessary action. It could be argued that a better informed public and media, with better understanding of the issues would

make for a more informed and productive response when tragedies occur, as they inevitably will. Individual workers must be and are subjected to professional discipline if they are at fault. However, in the interests of vulnerable children, a collective will is also needed to give more support to the professionals and volunteers who work with children, often in very overstretched and difficult circumstances. Perhaps all responsible adults should consider the question 'how committed am I to creating a safe and healthy environment for our children?' A question which challenges business, commercial and political priorities as well as individual willingness to contribute to the wellbeing of children through taxation and personal lifestyles.

What is good about safeguarding children in Wales?

37. This is not an exhaustive summary but a series of examples of a number of positive aspects of safeguarding vulnerable children which indicate that there is much to be proud of in Wales and upon which further improvement can be developed. They include specific projects, major strategies, high-profile initiatives and the mainly unseen day-to-day work of many dedicated professionals and volunteers who are working with children throughout Wales today.

The Commissioner for Children

38. The setting up, for the first time in the UK, of the office of Children's Commissioner in 2001¹⁰ was a highly significant milestone and the Office is now well established and recognised. The Commissioner and his team are making a real impact for the better upon many facets of the lives of children. Children have responded positively to the Commissioner and he has exerted positive influence upon a wide range of issues. The fact that the Commissioner produces an Annual Report which is received and debated in the National Assembly for Wales is in itself influential in making sure that safeguarding children is firmly part of the political agenda. Many children, and indeed adults concerned about children clearly feel that they have someone to whom they can turn.

Listening to children - participation and consultation

39. WAG has shown strong leadership in promoting consultation with children in issues which concern them. Some of the more high profile initiatives have been the setting up of Funky Dragon (the Children and Young People's Assembly for Wales in 2002)¹¹. This carries out consultations with children on a range of issues and has published good practice guidelines for

¹⁰ Care Standards Act 2000 as amended by the Children's Commissioner for Wales Act 2001

¹¹ Funky Dragon, Children & Young People's Assembly for Wales, Set up by WAG in 2002

consultation.¹² In 2003 WAG promoted a highly successful international gathering for children and young people with disabilities which took place in Swansea in which consultation and participation was a high priority. The Cardiff Youth Event which was hosted by WAG on behalf of the UK Government and the European Union in October 2005 is another example of the commitment to looking wider than Wales and bringing together young people from all over Europe and giving them the opportunity to contribute to policymaking which affects them.

40. The WAG Participation Project through the Participation Unit supports Government Divisions and other organisations in increasing public participation in the development of systems and processes. This tends to engage children through Funky Dragon and local Youth Forums. There are currently plans to increase the capacity of the project and to develop the involvement of children working through the Youth and Pupil Participation team and existing groups and organisations in four regions (North Wales, Mid and West Wales, Gwent and Eastern Valleys, and Glamorgan and Western Valleys)

41. These innovations demonstrate the growing commitment in Wales to involving and consulting children and young people as much as possible in matters which concern them and in ways appropriate to their ages and abilities. This commitment can be seen in many other ways and at different levels.

Further examples are:

- the requirement for schools to establish School Councils to which children, of all ages, are elected by their classmates to represent their views
- the direct consultations by Ministers with children on a range of matters
- the involvement of children in the appointment of the Children's Commissioner and, increasingly with appointments to other posts which directly affect them
- the consultations with children in different parts of Wales and different environments (city, rural, valleys and coastal) about the reality of their experiences of poverty¹³.
- the majority of Welsh local authorities have tried to canvass the views of children in various ways on matters which concern them; for example consultation on the National Service Framework with Wrexham Youth Forum

¹² Breathing Fire into Participation: the Funky Dragon Guide. Good practice guidelines on supporting groups of children and young people to participation (2002); Rights into Action – the 1st International Congress of Young Disabled People held in Swansea in July 2003

¹³ Listen up! Children and Young People talk about Poverty': by Anne Crowley & Celia Vulliamy. Save the Children (2002)

- the development of ‘children’s champions’ in some local authorities such as Neath Port Talbot where the role is fulfilled by a local authority councillor, and more recently in Cardiff which has introduced a different model¹⁴
- Local Authority forums for children and young people ‘looked after’
- the development of Family Group Conferencing to discuss important decisions about the care or safeguarding of a child
- improvements in the direct participation of ‘looked after’ children in their Reviews¹⁵

Many of these initiatives have not yet been evaluated. However the evidence on Family Group Conferences (FGCs) is becoming available. Much of the research is small scale and qualitative and there are a large number of such studies from many European, North American and Australasian countries. These are almost universally positive finding that the meetings are very well received by children, parents and professionals. One study conducted in 2000-2002 in South Wales looked at 17 conferences for 25 children at risk of becoming looked after or already looked after. Six months later only 2 remained in care and other positive outcomes, such as improved family relationships and better self esteem, were identified. Research is continuing but already shows that this approach is at least as robust as other heavily funded services which do not show very positive outcomes. A review of the research on FGC is summarised in a recent article.¹⁶

Inter agency working and the focus upon children in joint planning

In many areas there is evidence of a greater willingness to try and address children's issues and services in a more integrated and imaginative way. Local Authorities, Health Boards and Health Trusts are involved in joint initiatives which often also include other statutory and voluntary services.

42. Policy and Planning

There is a policy development and planning framework at political, organisational and community levels to support the development of a clearer focus upon children in general and upon safeguarding in particular. The WAG policy document ‘Children and Young People : Rights to Action’ which underpins WAG children’s services includes in the foreword from ministers – “..We have set out

¹⁴ Advertised in November 2005 this post will be independent of all service departments and able to make representations directly to politicians, senior managers and others on behalf of children.

¹⁵ eg See leaflet “The key to your Review Meeting – a good review meeting isn’t just a meeting, it’s and opportunity” prepared in consultation with the young people of Rhondda Cynon Taf under the Children First Initiative

¹⁶ Holland, S. and O'Neill, S (Cardiff University). “We had to be there to make sure it was what we wanted: enabling children's participation in family decision-making through the Family Group Conference” *Childhood* 2006 Sage Publications

our ambition for all children in Wales ... We know that safeguarding children must run through everything that we do for them”.

Other key elements include:

- a Cabinet Sub Committee on children chaired by the Minister for Children
- the Children and Young People's Framework Partnerships
- Children First¹⁷
- the All Wales Child Protection Procedures and Procedures Group
- the Parenting Action Plan – which makes reference to positive parenting and restates the WAG view on physical punishment
- the Child Poverty Action Plan

43. The Children Act 2004 contains specific clauses for Wales that put the Children’s Framework Partnerships on a statutory basis equivalent to the Young People’s Partnerships. This and the requirement for specified agencies to work together plus the creation of Local Safeguarding Boards under the same Act should further strengthen the focus upon the safeguarding of children and young people and upon joint working.

44. The diagram below is the latest available version of the comprehensive planning framework which is still evolving. This in turn provides the overall framework for the more detailed plans, systems and mechanisms which have been introduced, some of which have been mentioned above.



¹⁷ Children First Programme aims to improve Local Authority Social Services for Children through Guidance issued under Sec 7A Local Authority Social Services Act 1970

45. All the initiatives described are designed to try and ensure that individual professionals and organisations work together to assess what individual children need and to agree a network of services and action to be provided for them. There are also other important initiatives, some in their infancy which should strengthen and promote integrated services for children, young people and their families. Some examples are summarised in paragraphs 46 - 52

46. National Service Framework

46.1 The National Service Framework (NSF)¹⁸ was launched in September 2005 and demonstrates the shared desire at Ministerial level to achieve an integrated approach to children. The NSF is endorsed by all WAG Ministers in an introductory Cabinet statement, which is set out fully below because it clearly illustrates the will to promote better services for children and the desire to find out and to heed the views of children themselves.

46.2 *“This National Service Framework (NSF) sets out the quality of services that children, young people and their families have a right to expect and receive. There is nothing that is more important to Wales' future than our children, and the value we place on high standards for our children's services reflect that high ambition.*

The potential future prosperity and success of Wales resides with the children and young people of today. These standards are testament to the Assembly Government's commitment to the children of Wales. This NSF embodies our belief that, in Wales, we can deliver on these standards by service planners and providers working in partnership and collaboration across organisations to achieve this vision.

The development of the NSF has been an inclusive process involving professionals from all areas of children's services as well as children, young people and families. A young person's version of the consultation document was also produced to enable young people to help shape the services they would like to receive.

Ensuring that quality services are provided for our children and young people is the best investment we can make for the future of Wales.”

47. Community Focused Schools

Community Focused schools have been promoted by the Education Minister¹⁹ to improve the integration of services for both children and young people

¹⁸ Launched by the First Minister and the Minister for Children at the Children in Wales Policy Conference in September 2005

¹⁹ WAG Guidance on Community Focused Schools, 9/1/04

47.1.A community focused school is one that provides, often beyond the school day, a range of services and activities to help meet the needs of its pupils, their families and the wider community. Sections 27 and 28 of the Education Act 2002 give governing bodies powers to provide services to help meet the needs of their pupils, their families and the wider community.

47.2.Many schools already provide some services to the wider community. The WAG guidance advises on how this may be built on. It is up to schools in consultation with their stakeholders to develop as little or as much provision as they think suitable in their community. There are however some problems regarding secure and adequate funding.

48. Integrated Centres

48.1.WAG has also contributed funding for integrated children's centres in local authorities across Wales to better integrate day care and out of school services for children. The Review welcomes this positive development which has considerable potential. It is, however, too early to comment upon their effectiveness.

49. All Wales Youth Offending Strategy²⁰

49.1.The All Wales Youth Offending Strategy was launched by the Minister for Social Justice and Regeneration Minister, Edwina Hart, on 13 July 2004. The Strategy has been developed by the Welsh Assembly Government and the Youth Justice Board for England and Wales working together with local agencies. The strategy supports the view that prevention is more important than reaction and that if children and young people have offended they should be treated as children first and offenders second.

50. All Wales Play Strategy

50.1. WAG produced its Play Policy in October 2002. The policy is a broad statement of principles which recognises the importance of play to the development of children's physical, social, mental, emotional and creative skills. A Play Policy Implementation Group was set up to develop a more detailed strategy.

51. There are also initiatives at professional practitioner level which promote a joined up approach and a focus upon vulnerable children. Examples of this are:

²⁰ All Wales Youth Offending Strategy Launched, 13/7/04

- the Common Assessment Framework (not yet fully implemented)
- the use of flexibilities and shared budgets under the Health Act 1999
- the Integrated Children's System (ICS) which is being piloted
- the Information Sharing Index (IS Index)

50. The ICS should be fully operational by 31st December 2006²¹ and will provide integrated information about a vulnerable child who is known to a social services department, what services they are receiving and from whom. They will help to monitor outcomes for individual children and highlight where performance in respect of individual children is falling short. They will also help to monitor known dangerous adults and their association with different children.

The IS index will hold limited information on all children which will be available to all agencies with a legitimate interest and should enhance communication of information between agencies which should again enhance the safety network for vulnerable children. Linked with these developments is the recent establishment by the WLGA of the Children's Commissioning Support Resource (CCSR). This will provide a detailed data base of children's placements and a small commissioning support team to assist local authorities with up to date information and to develop more effective commissioning.

51. The Review strongly endorses the principles and the motivation behind these initiatives to promote a more 'joined up' and better informed approach to children at political, organisational and practitioner levels. It is well understood that, for example, a child's physical health or educational progress are inextricably linked with all other aspects of his or her life. Attempts to deal with such issues in isolation from one another would be unrealistic and doomed to failure. Yet organisational and professional boundaries and in particular, budgetary boundaries, have for too long inhibited effective joint working. While the benefits of a joined up approach are obvious, success requires that other key elements are in place. Those who work within joined up services must be clear about their own role and must respect and understand the roles of others; they must ensure that the specific expertise and focus of their own profession is not diluted and obscured and, to be successful they must work within a structure which is sound and properly resourced.

Monitoring and Inspection

²¹ Integrated Children's System: A Statement of Business Requirements, Welsh Assembly Government Circular 21/2005

52. The formal monitoring and inspection systems play an important role in safeguarding children and there are established inspection systems in Wales which are continually evolving and seeking to develop their own expertise and performance. At national level the independent monitoring of the safeguarding of children within services is the responsibility of the Social Services Inspectorate Wales (SSIW), the Care Standards Inspectorate Wales (CSIW) and the Health Inspectorate for Wales (HIW), the Office of Her Majesty's Inspectorate for Education and Training in Wales (Estyn) and Her Majesty's Inspectorate of Constabularies. The reports of these bodies are publicly available and the summary of evidence considered by the Review makes reference to their findings.²² It is reassuring to know that these bodies exist and that they aim to monitor the quality of provision of services to children and, where appropriate, require service providers to do better. Where there have been occasional and obvious failures to safeguard and protect children adequately²³ they engage in follow up action to sustain any necessary changes. In Wales we have the additional safeguard that the Children's Commissioner for Wales has the powers to investigate and if necessary set up Inquiries into matters of concern and to require people to give evidence.²⁴

The Review also notes the positive development of a Concordat between bodies inspecting, regulating, auditing and advising on health and social care in Wales.²⁵ As a more joined up approach develops within services it is incumbent upon the Inspectorates to consider the implications of this for their work and to make appropriate changes to mirror the developing patterns of service

The formal Child Protection Systems

53. In every local authority area inter agency procedures for the protection of children have existed in some form or another since the mid-1960s²⁶. Research and practical experience has ensured that they have been refined and strengthened over the years. Currently, Area Child Protection Committees (ACPCs) with representatives from all the relevant agencies are

²² The Annual Report Of Her Majesty's Chief Inspector Of Education And Training In Wales, 2003-2004
CSIW Annual Report for 2004-05

²³ Op cit

²⁴ Clywch: Examination of the Children's Commissioner for Wales into allegations of child sexual abuse in a school setting, July 2004.

²⁵ Concordat Between Bodies Inspecting, Regulating and Auditing Health and Social Care in Wales 2005; a voluntary agreement signatories being Academy of Royal Colleges Wales, Care Standards Inspectorate Wales, Healthcare Inspectorate Wales, Social Services Inspectorate Wales, Wales Audit Office, Healthcare Commission, Health and Safety Executive, Mental Health Act Commission, Postgraduate Medical Education and Training Board & Welsh Risk Pool. Associate signatories are NHS Confederation Wales, Community Health Councils, Welsh Health Estates, Welsh Local Government Association & School of Postgraduate Medical and Dental Education

²⁶ Welsh Office Circular 123/74 "Non Accidental Injury to Children" (1974); Welsh Office Circular 80/76 "Non Accidental Injury to Children: Area Review Committees: (1976) Welsh Office Circular 31/89 "Area Child Protection Committees: Implementation" (1989);

responsible for child protection within their areas. In Wales the ACPCs have collaborated to develop the All Wales Child Protection Procedures²⁷ which are so important in ensuring better working together across local authority boundaries. Despite occasional highly publicised cases these systems and the people who work within them have successfully protected very large numbers of children who might otherwise have been very seriously physically and emotionally hurt. When a child dies, and abuse or neglect are known or suspected to be a factor, an ACPC should always undertake a serious case review.²⁸ An ACPC should also always consider whether to undertake a case review where a child has sustained a potentially life threatening injury through abuse or neglect, serious sexual abuse, or sustained serious and permanent impairment of health or development through abuse or neglect, and the case gives rise to concerns about the way in which local professionals and services work together to safeguard children. These are often conducted by independent people and their intention is to establish whether lessons can be learned and systems improved. These cases are reported to WAG who, in the past have published findings and lessons learned. Very serious cases are usually the subject of formal inquiries such as those which followed the brutal deaths of Victoria Climbié in London²⁹ and Holly Wells and Jessica Chapman in Soham³⁰ both of which have led to further strengthening and improvement.

54. Over the years these formal systems have demonstrated the willingness and flexibility to learn and to improve. The most recent strengthening of the formal systems is the establishment of Local Safeguarding Children Boards (LSCBs) which will be introduced in October 2006. The intention is that these Boards will spearhead the development of even more robust child protection systems and this will be achieved through the provisions of the Children Act 2004 which place duties upon statutory partners to co-operate in the establishment and operation of each LSCB and by prescribing in regulations the role and functions of Boards.

The Early Intervention Prevention and Support Initiatives

55. Research findings and the experience of children and their families agree on two points:

- whole area programmes, particularly those geared to the early years, which are designed to support the emotional, physical and intellectual development of all very young children can make a valuable contribution

²⁷ All Wales Child Protection Procedures, 2002

²⁸ Chapter 8 of "Working Together to Safeguard Children", National Assembly for Wales, 2000

²⁹ op cit

³⁰ A Public Inquiry Report on child protection procedures in Humberside Police and Cambridgeshire Constabulary. HMSO, June 2004

to a child's all round development and their ability to make best use of educational and other life opportunities, and

- more targeted early intervention and support to specific children and families is necessary when a problem is identified. Skilled intervention of the right kind at an early stage is frequently more valuable, and less expensive, than interventions when a problem has become much more developed.

56. These are different approaches but sometimes confused. The first is a universal approach targeting all children living in a particular area. The second however is about specific interventions when early indications of a problem are identified. It may involve very young children but is essentially about early intervention with children of any age. This issue will be discussed later in the Report. What we want to record here however is that there are good examples of positive initiatives in Wales in both categories.

57. In the "*general*" category it is important to clarify that the services and interventions referred to are those which aim to provide a safe child care environment designed to be appropriate to the age and developmental needs of the child and not simply one in which the focus is enabling parents to work. Good examples are found within the context of the Sure Start initiative, although, the evidence so far available on these programmes shows that they have made no real impact upon the need for more targeted interventions. More recently the new Flying Start programme³¹ for 0-3 year olds in Wales will be targeted at children and families in some of the most deprived areas and will involve an intensive range of services including child care, health visitor support and programmes to improve parenting skills. The initiative will target the language, cognitive, social and emotional development of the children involved and will also focus on their physical health. While such programmes are welcome they must be underpinned by long term research and evaluation. It must always be borne in mind that many children and families in desperate need of such services do not live in areas which will be targeted in this way.

58. As the Minister for Education and Lifelong Learning commented recently about Flying Start and the Foundation Phase, (which is a new curriculum for 3-7 year olds), they are designed to "provide a unique, made in Wales, offer to our youngest children and their families". She went on to say "in time, I am confident that the impact of these programmes will transform the landscape of learning in Wales". There are also several examples of parenting skills programmes and networks and parent and child playing and learning groups in various parts of Wales which are delivered by a range of different organisations.

³¹ WAG Consultation from 28/11/02 to 20/2/06

59. In the “*targeted*” category there are good examples in Wales of imaginative and effective projects and programmes which are designed to work with individual children. That is, children who have been identified either by themselves and their families or by professional staff, or both, as having a particular problem which requires skilled help. There are too many to mention but some examples are a group in Newport with a particular focus on children with disabilities, projects such as ‘Incredible Years Wales’ which was developed in North Wales and based on the Carolyn Webster-Stratton parenting programme started in Seattle in the United States, the Canolfan Ymbarel in Blaenau Ffestiniog and other projects in Carmarthenshire and Conwy and Denbighshire providing help for parents and therapy for children who are presenting challenging behaviour and/or have suffered trauma. Support and therapy is also provided for parents who have severe difficulty in their parenting role.
60. The Family Links programmes in Newport and Torfaen provide an example of the benefits of a targeted programme being translated into the “general” category. The Bangor project which is aimed at families where children are potentially at risk of harm, and the bilingual telephone support service in Conwy, manned by qualified social workers aims to relieve family stress and breakdown. In this category of targeted prevention should also be included those schemes which have active key worker/care coordinators for individual children with disabilities, specific liaison teachers for groups or individuals who are marginalised and Catch Up programmes to ensure that vulnerable children do not fall behind.
61. It has to be said however that such initiatives are patchy, generally not subjected to a co-ordinated monitoring programme and seem particularly susceptible to the limitations of short term funding initiatives. Key issues which must be more influential in determining future patterns of funding are; a) recognition that an uncertain financial future is both demoralising and demotivating for staff; b) that targeted support services can only be fully successful in a context of adequate and consistent provision of the universal services for children (this is frequently not the case); and c) recognition that successful programmes like Head Start in the United States require a long term investment and commitment before improvement can be measured.

The wider community

62. The Review received evidence from several sports bodies and faith communities, organisations such as the army and a range of community voluntary organisations. All illustrated awareness of and commitment to the need to safeguard children. Many organisations now have child protection procedures and safeguarding systems in place. They are identifying members and others with expertise, and are undertaking CRB checks where appropriate and providing training. They are also aware of the work of their

local Area Child Protection Committees. Cost and time implications for small organisations and voluntary groups do however present some problems.

63. Statutory bodies providing general services in the community such as the Fire and Ambulance services also provided evidence of procedures and training programmes raising awareness of safeguarding children among their staff. Some police forces too in the context of their wider activities are developing systems which pay greater attention to children caught up in domestic disputes or as victims of crime.

The people at the 'sharp end'

64. The single most important element in this summary of what is good, is the people who work with children, the vast majority of whom are committed, hard working and skilled. They are the individuals who carry out the routine and unglamorous work of safeguarding children and enhancing their wellbeing in Wales every day, seven days a week and 24 hours a day. This work is not always well understood or appreciated and is rarely celebrated. Throughout Wales paid professionals and volunteers work to support parents and ensure the well-being of children in many different ways. They offer challenge and opportunity, teach skills and knowledge, give advice and support, monitor development and provide treatment, therapy, care and safety. They include teachers, social workers, doctors, nurses, health visitors, police officers, medical practitioners, youth workers, sports organisers and coaches and many others. This work involves a routine and rigorous commitment and sometimes a personal risk that many of us would not be prepared to take.
65. Work with children is always demanding. When a child or young person is exposed to a potential or actual harm it can become complex and very stressful. For even the most well trained and experienced professional worker, the first hand exposure to the physical and emotional damage inflicted upon children can be intensely painful. Compounding this stress is the fine judgements which have to be made, almost daily, between acceptable and unacceptable risk. There are uncertainties inherent in medical and social assessments in the very difficult area of child abuse and, quite properly, high standards of criminal proof which are often difficult to meet when the alleged victim is a young child. These fine judgements have to be made daily by social workers, doctors and police officers on behalf of the community. We all, but most importantly children, rely upon their commitment and skills. The general public does not always recognise what they get right and criticises them, often unfairly, for what they are perceived to have got wrong. Their commitment and skill should be better recognised and supported. It has often been suggested that the lack of public understanding of and support for this work and the levels of stress and vilification which sometimes accompany child protection work have had a marked affect upon the willingness of professionals to work in this field. This is most apparent in paediatrics and

social work where there are well documented staffing crises. As one Director of Social Services put it “child protection is not seen to be a good career move”, and a recent survey of young paediatricians³² has shown a marked reduction in those willing to carry out this work. Paradoxically this is an area of work which requires our more experienced and skilled practitioners.

66. Work with children whether on a paid or voluntary basis can be very rewarding. It should however, in the opinion of the Review, receive more respect and support. Whether it be the sports coach clearing up the pitch after careless dog owners before the start of a session; the youth worker struggling to raise funds as well as to run activities; the teacher working with underachieving children or organising opportunities through school trips; the social worker or health visitor doing those extra visits because they are concerned; the doctor prepared to go to court and give an opinion he knows will be unpopular or the police officer getting involved with projects for young offenders, all deserve to be appreciated and supported more than they appear to be.

67. The work of individuals at all levels in the informal and formal sectors is more critical to the well being and safeguarding of children than any other factor. We need to value them and listen to them much more because they know better than anyone what works and what doesn't. Their expertise is crucial to the achievement of a framework for safeguarding vulnerable children in Wales, which is sound, workable and, most importantly, can be sustained consistently in the future.

Open mindedness and willingness to learn from elsewhere and to challenge the established order

68. Much of the evidence also demonstrated a refreshing lack of complacency and a willingness to challenge poor practice and learn from elsewhere. This approach was particularly strong amongst those closest to the ‘frontline’ of safeguarding vulnerable children. It was also found in those independent bodies charged with inspecting services and who actually look at practical outcomes for children. Professional Associations too, such as the British Association of Social Workers and the Royal College of Paediatrics and Child Health, while showing proper concern for the interests of their members were strong advocates for the interests of children.

69. Children in Wales, the national independent umbrella body for statutory and voluntary agencies and individuals who are involved with services for children runs a range of well attended multi disciplinary regional and special interest forums in Wales in which professionals share experience, expertise and mutual learning and from research. The organisation is also linked with sister organisations in the other UK countries and overseas and operates a website

³² Royal College of Paediatrics (2006)

which is heavily used and which keeps members abreast of important developments throughout the UK and elsewhere.³³

More than solid foundation – a springboard:

70. So there is much to celebrate, for as this brief summary has shown the Review has identified considerable positive evidence about good and even excellent features of the approach to safeguarding vulnerable children in Wales. Not only is a sound infrastructure in place but there is evidence of a process of improvement and progress in the direction of a more child centred and integrated service. Most importantly there are many, though not enough, skilled and dedicated professionals and experienced and committed volunteers.

71. What the remainder of Part 1 of this Report seeks to do is;

- to identify the important gaps and deficiencies highlighted by the evidence
- to consider where and how the encouraging elements described here may be built upon, and
- to identify key action points which should be the basis of an effective response to the gaps and deficiencies

The frame of reference for the following Chapter (that is Chapter 3 of Part 1) can be found in the summary of main messages from the evidence which are set out in detail in Chapter 4, Part 2. This is a factual summary of the written and oral evidence and of the other written material considered.

³³ The Children in Wales website can be found at: www.childreninwales.org.uk

CHAPTER 3: THE CHALLENGE

72. In considering the large volume of evidence which is summarised in Part 2, the Review concludes that despite the substantial progress in many areas and the many positive features which can be built upon there are significant problems to be overcome.

73. It bears repeating here that neither government, professionals or parents can comprehensively protect all children all of the time. However, the Review believes that more could be done by WAG and the public services in Wales to safeguard children, and particularly vulnerable children. In the style of the proactive nature of the Review the necessary actions the Review has identified have been grouped under the umbrella of 7 challenges. These challenges are set out in this chapter together with the actions which the Review recommends need to be taken to address them. As stated in the previous chapter, those who wish to refer to the detail of the evidence behind these challenges and recommended actions should refer to Part 2 of the Report. The key issues which inform the recommended action points are discussed in more detail under each Challenge.

74. First, a reminder of the assumptions which were listed in the Executive Summary and which have underpinned the work of the Review. These are:

- all adults have a responsibility to be aware of the vulnerability of children and the need to safeguard them;
- the role of government is to establish a framework of good law, policies and strategies, set priorities and standards, provide adequate resources, and hold others to account when standards fall below what is required
- public bodies, public services, professions, independent sector bodies, voluntary bodies, businesses and the media all have a duty of care towards vulnerable children whatever their other interests
- children are best safeguarded by committed individuals who have appropriate time, training and skills, the support and respect of their employers and their community and the freedom to exercise professional judgement
- children should be treated with respect and in accordance with their age and maturity and adults should take responsibility for setting sensible expectations and boundaries and providing opportunities for them to learn and develop

75. The powerful evidence from children, and from the people who work most closely with them in many different settings, tells us that our affluent society

falls seriously short in converting these, albeit simple, principles into reality for all children.

76. The Review recognises that government cannot safeguard all children. There will always be criminal, abusive, incompetent or thoughtless adults who will place children at risk. There will also always be adults who care little about the well being of children. However, in many important respects the Review agrees with the analysis of the children and the front line workers, which is that government and the adult community generally could and should do better.

77. If children in Wales are to be comprehensively and appropriately safeguarded, the Review concludes that there are 7 key challenges which should be addressed. These challenges embrace all children because, to a degree, all children are vulnerable. Also because the more that our society gets things right for all children, the better we will protect the most vulnerable. There are however specific elements of each challenge which focus on issues which particularly affect the most vulnerable children

78. These challenges are:

Challenge 1: THE CHILDREN - to build upon initiatives to place children at the centre of policy and service developments which affect them and to improve, expand and rationalise arrangements for listening to them and advocating on their behalf

Challenge 2: PUBLIC ATTITUDES - to address the apparently confused and conflicting attitudes to children in our society

Challenge 3: THE WORKFORCE - to improve the levels, stability, confidence, competency, support and job satisfaction of people who work with children

Challenge 4: THE FORMAL SYSTEMS - to make them more child friendly, better and more consistently resourced and fit for purpose

Challenge 5: THE VISION AND STRATEGY - to develop and implement a secure long term vision and a strategy for vulnerable children

Challenge 6: THE FINANCE - to review and rationalise the balance of investment in services for children and to consolidate and stabilise funding streams

Challenge 7: NEW RISKS - to develop a more effective capacity for identifying and responding to emerging risks to vulnerable children

The challenges are not in a hierarchy of importance and they are inter-related. They are challenges for all who work in children's services and/or have an influence or an interest in how we safeguard our children. That includes the adult population in general but politicians and community leaders in particular.

Challenge 1:

THE CHILDREN - to build upon initiatives to place children at the centre of policy and service development and to improve, expand and rationalise arrangements for listening to and advocating for all children.

- I. Fundamental to Challenge 1 is the need to listen to what children think, to be aware of what frightens them and to help them to feel safe. We need to improve and develop formal and informal arrangements for listening to them and giving them a voice. The political intent to ensure that in public services there should be a "joined up" approach to the "whole child" is right. So is the determination to secure the active participation of children and young people in shaping and evaluating services and in helping to drive forward the efforts to keep them safe. Examples of efforts to promote a 'joined up' and 'whole child' approach have been given in Chapter 2 of the Report. Paradoxically however many good initiatives designed to ensure that children do have a voice are not joined up.
- II. A crucial part of the network of services for children is the quality and sensitivity of those services which are intended for all children. In particular those are the statutory services of health and education which are often described as the universal services. The voluntary sector too under the general umbrellas of sport, culture and faith as well as the national and local youth organisations provide valuable experiences and services to large numbers of children. The evidence however suggests that in both statutory and voluntary sectors the accessibility and quality of what is available to all children varies very significantly across Wales. It is the case too that despite many good examples of awareness of the vulnerability of children and of the need to safeguard them practice is inconsistent and there is room for improvement.
- III. There are also influential forces in our society such as major business interests which may not have the interests of children at the forefront of their activity. Even government policies on issues such as transport, crime and the economy may not be sensitive to the things that most concern children. We know from listening to children that the risk of road traffic accidents, unhealthy lifestyles and environments and, what adults may regard as low level crime make many children very fearful for their own safety. In these general areas it seems likely that informed public opinion and choices, whether they be life style, consumer or electoral choices will be the most

influential factor. It is important therefore to influence public perception and opinion to have regard to the implications for children and to ensure that the well being of children is a prominent factor when public policy is determined or when businesses decide priorities. This illustrates the thinking behind Challenge 2 Public Attitudes.

- IV. Challenge 1 lies at the heart of this Review and obviously has implications for all seven Challenges. The main focus in this section however will be upon the effectiveness of current arrangements for listening to and advocating for children. These arrangements include consulting with groups of children such as School Councils, local authority Youth Forums, Funky Dragon, specific consultations by WAG and local authorities, and the arrangements made by voluntary organisations to involve the views of children in their activities. They also include the arrangements made by statutory agencies in accordance with statutory requirements such as complaints procedures, independent advocacy schemes, independent reviewing officers (IRO), and personal advisers, and non statutory measures introduced in some areas to facilitate consultation with children such as family group conferencing schemes and children's champions.
- V. It is important at the outset to be clear that listening to and consulting with children is not about abrogating adult responsibility as it is sometimes caricatured. It is about adults having respect for children and for their views, but at the same time taking responsibility for setting standards and boundaries and ultimately taking decisions. It is also about taking the trouble to explain and discuss with children the reasons for decisions and actions and being prepared to acknowledge and change what is inappropriate and unreasonable.
- VI. Where formal arrangements for consulting with children exist, they are only effective if taken seriously and conducted with skill and commitment. School Council representatives must be truly representing and communicating with their 'constituency' and the adults involved should be able to facilitate that and play an active part in listening and communicating. School governing bodies for example do not in general appear to have regular contact with school councils or to discuss agenda items referred by them. These mechanisms therefore need to be monitored to ensure that they achieve their objective.
- VII. The concept of placing children's interests at the heart of the planning and operation of services that affect them should ideally be part of any organisation. A child impact analysis should routinely be included in every policy document to try and ensure that proper consideration is given to the implications for children. Senior managers should be proactive in thinking about the implications for children through the ways in which they decide policy and priorities and deliver services. This sort of practice can be found

in some organisations and individuals but to become more general it would require the expectation and support of political and public opinion.

- VIII. It has been a very positive step to make independent advocacy for children a statutory requirement in certain service areas and good progress has been made by local authority social services in developing these services. The positive approach taken by WAG in commissioning the recent independent study of advocacy services³⁴ and the setting up a Task and Finish Group on advocacy has also been a positive step. These reports have been considered by the Review together with other evidence on advocacy and associated activities. Our conclusion is that measures so far taken however are too narrowly based and there are wider problems which still need to be addressed. These are:

the limitations of current advocacy services to very specific groups within local authority social services and the lack of provision within other local authority services or the wider community;

the lack of an advocacy service for children in the health service;

mistrust of what is seen as a flawed system of commissioning and funding of advocacy; it creates uncertainty for staff, insecurity and lack of continuity for children, conflicts of interest for commissioners of services; and varying models of service and of service quality;

different skills and accountabilities of advocates;

the lack of independent inspection of advocacy and similar activities; and

the different systems for resolving dispute and conflict

- IX. Therefore the Review, whilst not disagreeing with the recommendations of the recent Task and Finish Group on Advocacy, suggests that more fundamental and comprehensive changes are needed than those suggested. While the systems of advocacy and independent review and advice to children clearly represent positive progress their piecemeal development has created major gaps and a lack of coherence.

- X. We suggest that two structural models are needed:-

Model A: to include activities such as consultation and facilitating the expression of children's views about the services and policies which affect them. This would include school councils, consultation forums, questionnaires, children's champions, participation work and the work of

³⁴ A Study of Advocacy Services for Children & Young People in Wales, by Cardiff University School of Social Sciences, Social Inclusion Research Unit, NEWI, Dept of Child Health Wales, UWCM, (July 2005);

Funky Dragon. Schools are a natural focal point for consultation with children in the community yet, there is not generally a close relationship between school councils and the wider issues affecting them. It would not be realistic to suggest that teachers have the time or the skills to lead the development of the full 'joined up' potential offered by these councils. However, with more flexible local joint planning and arrangements which focus upon children rather than upon services and with appropriate cooperation from partner agencies, school councils could potentially be a focus for more effective local machinery for channeling children's views about a wide range of issues.

Model B: to include the arrangements for the most vulnerable children such as formal complaints procedures and complaints officers, independent reviewing officers (IROs)³⁵, independent visitors,³⁶ personal advisers³⁷ and advocates. These arrangements seek in different situations to facilitate, represent and mediate on behalf of the views and interests of an individual child. They should be independent of the management responsible for the service the child is receiving, but this is not always the case.

XI. Individuals who act as advocates for children currently function in widely differing contexts; some but not all are regulated by professional regulating bodies; their engagement may be as an employee of an organisation, under individual contract or as a volunteer; they may have a range of different professional qualifications - or none; they will have variable access to in service and other training opportunities and they may have regular supervision or none. There are potential strengths in such diversity and children need choices. However, there are obvious risks which should be addressed. These roles give privileged access to vulnerable children, often when they are at their most vulnerable. High levels of integrity, courage, confidentiality and knowledge are required. It is essential therefore that advocates should be well supported and that their work should be monitored and regulated properly. It would be ironic if the services designed to ensure a level of independent advice, challenge and protection of the interests of children were themselves making children more vulnerable.

Action needed to address Challenge 1

³⁵ Sec 118 of the Adoption and Children Act 2002 amends Sec 26 of the Children Act 1989 requiring local authorities to appoint IROs 'to participate in the review of children's cases, monitor the authority's function in respect of the referral and refer a child's case to CAFCASS regarding failures to implement plans which might breach the child's human rights

1. WAG to have a programme for raising the universal services (health and education) for all children to the standards and quality of the best and to eradicate disparities in services across Wales. It should include:

a) the basic training of professionals in the universal services should include training in the early recognition of vulnerable children and how to make appropriate referral to specialist agencies

b) the voluntary youth sector and faith, culture and arts organisations for children and young people should have procedures for checking all adult helpers and ensuring that they are not a danger to children and are trained to recognise vulnerable children and make appropriate referral to specialist agencies

2. WAG to develop a common framework for all arrangements for children's participation in policy and service development and other major decisions which affect them. It should include:

a) all activities which facilitate consultation and expression of children's views (such as school councils, consultation forums, questionnaires, children's champions, participation work)

b) consideration of developing school councils as a channel for both school and community issues and encouragement of school governors to have regular discussion with school councils

c) a co-ordinated approach to establishing principles and standards, methods of monitoring effectiveness and promoting best practice

3. WAG to develop a common framework for all statutory arrangements for providing independent advice to and representation of the interests of individual children (ie Advocates, Independent Reviewing Officers (IROs), Complaints Officers, and Personal Advisers). Its component parts should be:

a) a system of children's complaints and advocacy across all public services including GP and other independent contractor services

b) independent 'one stop shops' in all areas for dealing with children's individual complaints and concerns across all public services

c) a set of principles and standards for independent advocacy which will ensure prevention of conflict between service provider interests and children's interests in the event of a complaint or challenge, and consistent procedures for the resolution of issues raised with service providers on behalf of a child

d) independent monitoring of the quality of advice and representation services and appropriate regulation of individuals working in this field

4. WAG to establish a central unit to lead, co-ordinate, support and monitor the activities described in (2) and (3) above. It should

a) be resourced with the strategic, operational, professional and managerial skills necessary to do the job

b) account to and support the Minister for Children as this role is consistent with an unequivocal focus upon advocating for children's rights and representation rather than upon a particular service

c) advise upon, develop and monitor the systems and structures needed to ensure a skilled, safe and independent advice and representation service for children throughout the public services in Wales

d) establish and monitor the standards of such a service and advise upon and approve the independence and quality of commissioning arrangements for these services

5. WAG to consider restoring the formal link between WAG and the Children's Commissioner through the Minister for Children for the reasons given above

6. Local Authorities to develop regional commissioning arrangements for advocacy services to include

a regional steering group, including providers of services, with a remit to advise on problems and improvement, identification of emerging issues raised by children, and training and regulation of staff and volunteers

7. WAG to ensure that common standards are introduced for independent advocacy to include

a) standards for the selection, training and monitoring of volunteers (the model developed for CAB voluntary advisers may be a useful example)

b) non social workers with other professional qualifications should be able to demonstrate an identifiable core of required skills and knowledge for advocacy

c) the Care Council for Wales and similar bodies should review their position to ensure that consideration is given to the issue of registration and professional discipline for all individuals undertaking the role of advocate, supporter, adviser to or representative of vulnerable children

What is clear from the Review's work in the area of advocacy and participation is that a quantum leap forward has been taken in recent years. However, there are gaps and irregularities and the time is opportune for a fresh and co-ordinating impetus in these areas of activity. WAG should take a strong lead in specifying the principles and key elements of acceptable models of advocacy and promoting best practice and rigorous monitoring.

Challenge 2:

PUBLIC ATTITUDES - to address the apparently confused and conflicting attitudes to children in our society

- I. The different perceptions of children in our society appear to arise from conflicting public images. The media is not always helpful in promoting a balanced view of children and childhood. Both idealised images and equally unrealistic vilification of teenagers who behave badly often as a result of abuse and acute deprivation can sometimes appear in the same newspaper or news programme. Even politicians and community leaders can at times be guilty of promoting the contradiction and people who argue passionately for the removal of inequalities and deprivation do not always make the connections between these factors and the need to support a positive response to the effects of these conditions upon individual children.
- II. Those who call for 'heads to roll' when a child is abused often do not see the connection between what goes wrong and our collective responsibility for the conditions in which front line workers operate. The crisis in the availability of social workers willing to work and stay in main stream children's services has developed for at least a decade and is connected in some measure with the sometimes unbalanced and ill informed media coverage and its' effect upon public opinion. The more recent crisis in the willingness of paediatricians to work in the field of child protection has similar roots.
- III. These confused and conflicting public perspectives could be claimed to have affected and undermined the consistency of progress in services for vulnerable children for decades. In the family children need love, understanding, consistency, stability, support, protection, challenge, expectations and clear boundaries. To develop as healthy well adjusted citizens they need to experience similar qualities in the adult community as a whole and in the services provided by the state.
- IV. The reality however, despite the 'good foundations' reported in Chapter 2, is that children are often commercially exploited in ways in which many parents feel unable to counter, many do not have easy access to safe

informal play areas and are also fearful of traffic and other environmental hazards. The reality for the more vulnerable children; that is those who have been seriously deprived, abused or criminally exploited by adults or who suffer mental illness is that not all will receive the protection, care and treatment that they need. Some will receive punishment as a response to their problems particularly those who have become delinquent, often as a direct result of having been brutalised and abused³⁸. For example, the UK now incarcerates 2,204 15-17 year olds (twice the numbers of 10 years ago) and 234 12-15 year olds in expensive prison institutions.³⁹

- V. There are therefore paradoxes at the heart of children's social policy which appear to arise from the political expression of conflicting public opinion. What has been consistent however, is that for many years, the state has committed substantial funding to expensive remedial and punitive measures but failed to make substantial and sustained investment in the intensive support and therapies needed when children show early signs of difficulties. This despite the fact that Parliament was convinced of the need to invest in early intensive prevention when passing the 1963 and 1969 Children and Young Persons Acts and the Children Act 1989.
- VI. It is difficult to convey to the general public the relative merits of different kinds of interventions; particularly those which may not have an obvious immediate impact. However, as the conflicting pressures of public opinion are likely to influence public policy the Review would urge WAG to embrace the view that informing and influencing public opinion is important to safeguarding the wellbeing of children. It seems unlikely that the stability and continuity needed in services for vulnerable children can be achieved without greater political and public consensus about the right measures. This consensus needs to be based upon the understanding that the child who is profoundly unhappy and withdrawn, the child who is being anti social or criminal, the child who is self harming and the child who is not achieving his potential in school may all be experiencing similar problems and may need similar understanding and help. What they will all need is early, skilled and sustainable help.
- VII. The longer term view must be based on research evidence and experience, not political or managerial whim. It also requires the strength and commitment to carry through plans and objectives and the security of logistical planning and funding which will not easily be blown off course. This in turn requires public understanding and support.
- VIII. A public information strategy to promote better understanding through good information about the causes of disturbed behaviour, including criminal behaviour in the young could help to change the climate of

³⁸ Carlile Inquiry into the treatment of children in penal custody. Howard League for Penal Reform 2006.

³⁹ Home Office 'Population in Custody' 2005

opinion. It should promote the costs and benefits of what works such as good universal services; good early intervention and support for children and families with difficulties; proactive community provision with accessible sport and leisure facilities; and more equality of opportunity. It should aim to explain the case for proper investment in training and support for those working with children with problems.

Action needed to address Challenge 2:

1. WAG to develop a public information strategy designed to promote a better informed public image of children. It should include:

- a) raising greater awareness of the needs of children, promoting more sympathetic understanding of how issues affect children and greater acceptance of adult responsibilities towards all children including the shared responsibility to develop safe communities
- b) promoting more understanding that children who are "sinned against" or "sinning" are at different points on the same continuum
- c) promoting support for further improvement in the quality, sustainability and equality of standards of universal services for children across Wales
- d) promoting among all public services, independent providers and the business community a better understanding and acceptance of their wider responsibilities for safeguarding children
- e) ensuring that all local authority community strategies include strategies for safeguarding children and involving them positively in their communities

2. WAG to promote a strategy for engaging the media in reflecting upon the impact upon children in general and vulnerable children in particular of ways in which issues involving children are handled in the media. It should:

- a) consider a joint initiative between government and the Children's Commissioner to engage the media in the public information strategy outlined above
- b) promote the strengthening of training programmes for journalists in the understanding of the best interests of children and child protection

c) encourage the media to take account of the child's best interests when covering news stories

Challenge 3:

THE WORKFORCE - to improve the levels, stability, confidence, competency, support and job satisfaction of people who work with children

- I. As has been said previously all of these identified challenges interlink. Perhaps none more so than the implications of all the other challenges for the maintenance of a skilled and effective workforce. Systems procedures and strategies are important but essentially it is people that safeguard children. Committed well trained people who know what they are doing and have the time to do it properly. As one Chief Officer commented to the Review in evidence "...good plans do not necessarily protect, but staff do..." The availability and quality of the right people in all sectors is the lynch pin of effective safeguarding of children.
- II. These people need a clear framework of law and policy within which to operate but that should not become so prescriptive and complex that they are unable to exercise professional judgment based upon proper multi disciplinary assessment of all relevant information. It is more important for government and employers to ensure that the right number of people with the appropriate skills are in the right place at the right time. In the interests of vulnerable children these people also need sufficient time to consult with each other and to share information.
- III. The reality is that there are many dedicated, skilled and hard working professionals in all branches of services for vulnerable children, including the education, health and social care professions. However it also appears to be the case that many of these professionals, particularly social workers, do not have adequate access to continuing training and good professional support, and they are overworked, stressed and demoralised. The nature of their work is by definition stressful. For social workers and specialist paediatricians it is also risky and defined by uncertainty and they often work in a context of staff shortages. The implications of this both for staff and for the vulnerable children who rely on them are concerning.
- IV. There is a high level of awareness of the crisis in the availability of skilled and experienced social workers to work with children. However, this problem has been developing across the UK for at least 10 years. The sector has been de-stabilised and demoralised by lack of continuity and constant change. When work is tough and stressful and subjected to

intense public gaze the professional workforce deserves consistent management and professional leadership which can command professional respect and confidence. For many social workers this has not always been the case because of rapid organisational change and early promotion of inexperienced staff. More investment is needed in the social work sector both in initial training which is being addressed, and in professional development where the social work sector, unlike medical nursing and teaching staff do not have dedicated time with appropriate staff cover for training.

- V. Paediatricians too, particularly those working in the area of child abuse, feel demoralised and unsupported. The Review was appalled to hear the evidence of personal attack and abuse, media campaigns of vilification, and in some cases physical assault, which also threatens families, which has been experienced by some paediatricians who act as expert witnesses in child protection court cases. It is apparent that it is becoming increasingly difficult to identify Consultant Paediatricians who are prepared to be expert witnesses in child protection cases and the implications of this trend for the protection of vulnerable children are enormous. The Review suggests that serious and urgent consideration should be given to the introduction, as exists in the United States of America, of better legal protection for professional staff, and particularly for paediatricians, who take action to protect children in good faith.
- VI. The Review heard that medical and nursing staff working with children feel strongly that children's services do not receive appropriate funding or attention from health service planners and managers. This perception is supported by factors such as for example the lack (until very recently with the introduction of the NSF) of health service targets specific to children, the omission of child protection from GP contracts and the lack of child specialist health planners and policy development staff in the health and social care directorate of the National Assembly.
- VII. The demands of the curriculum upon teachers have been well documented elsewhere. In this context the Review wishes to highlight that where such demands become excessive they could have significant implications for a teacher's ability to identify a vulnerable child at an early stage and to take appropriate action. Schools are obviously ideally placed to be in the forefront of early identification of vulnerable children needing special help. This requires teachers with the time and the skills to identify vulnerable children and to make appropriate referrals. It also requires availability of other appropriate skills and services at the right time.
- VIII. The Review heard that the School Psychological Service may not be adequately resourced in some areas. The proposal within the WAG Review of Educational Psychology, that Educational Psychologists should

spend less time on formal assessments and statementing and more in providing learning support, advice and guidance to teachers and children, would be a welcome development. With the move towards a 3 year post-graduate training arrangement it is timely to reaffirm the potential contribution of Education Psychology to the safeguarding agenda. Teachers do not have ready access to specialist social workers, therapists or clinical psychologists, all of whom could give help and advice at an early stage of children presenting behavioural or other problems. Some larger schools call upon people such as school nurses who may have received some counselling training, but this measure may have dangers if the 'counsellor' is not appropriately trained or supervised. There are therefore important workforce issues to be addressed in order to achieve a safer and more integrated network of appropriate professionals linked with a school or group of schools.

- IX. The Review heard from a number of trades unions and professional associations representing teachers, doctors, nurses, social workers and other social care and education staff. Their interests, understandably, were mainly focused upon the interests of their members. However they properly considered that supportive working conditions and good training opportunities were essential to the interests of safeguarding children. They also highlighted the important safeguarding role of staff such as canteen assistants, home helps and care assistants who are sometimes the people that children know and trust.
- X. Two issues of particular concern regarding the workforce were discussed with trades unions and professional associations. These are "whistleblowing" and the procedures for dealing with members of staff accused of assault.
- XI. "*Whistleblowing*" (which is a member of staff formally raising concerns about the practice of another member of staff), is now required by many statutory agencies which provide services for children. The formal procedures for reporting matters of concern regarding the practice or behaviour of a colleague in relation to children have been a very positive recent development. However the experiences of whistleblowers, who knowingly place themselves in a difficult position with their colleagues, appear to vary significantly. The representatives of doctors, nurses and some social workers⁴⁰ accept that they have a responsibility to advise and support their member whether they be the "whistleblower" or the subject of an allegation. If both the "whistleblower" and "the accused" are members of the same Union or Professional Association then different representatives are assigned to advise them and a confidential barrier is maintained within the Union or Association.

⁴⁰ ie British Association of Social Workers

- XII. The representatives of teachers and other public sector workers however do not follow that practice and do not provide a service to support and advise members who are “whistleblowers” unless they themselves become subject of a formal complaint at a later stage.
- XIII. The Review recognises that “whistleblowing” is a difficult, courageous and potentially very isolating action to take under any circumstances. Unions who do not support “whistleblowers” throughout the process are strongly urged to reconsider their position both in the interests of their members and of vulnerable children. The Review would also urge managers in organisations with “whistleblowing” policies and procedures to review their practice and to satisfy themselves that appropriate management advice and support is available to any “whistleblower” whose Union refuses to assist them.
- XIV. The second issue regarding members of staff subject of an allegation of misconduct concerning a child or children raises two main concerns;
- a. the lengthy periods which sometimes elapse between the initial suspension pending investigation and the eventual resolution. This can occur because the criminal investigation, which is often very lengthy, usually takes precedence. The disciplinary process then follows. The outcome is that the member of staff and the child are in limbo and the general atmosphere, particularly in a small school or residential unit, is blighted. The process can be highly stressful for the child or any other accuser, and for the accused. Sometimes after prolonged criminal investigation that does not end in prosecution, employers do not pursue a disciplinary investigation. This is not a wise course of action as the standards of proof are different and children may actually be at risk. For a number of reasons therefore it is in the interests of the suspended member of staff and of the child, and other children who may be at risk, that acceptable ways should be found of ensuring that preparations should take place for disciplinary action should the criminal process fail.
- b. a view is promulgated by some Unions that there are numerous malicious allegations against teachers and other staff who work with children. This assertion, is not borne out by fact and is sometimes repeated by the media. It is clearly potentially damaging to the interests of vulnerable children. It appears to be based upon a misinterpretation of the legal position when the Crown Prosecution Service decides not to proceed with a prosecution, or when a court case ends in acquittal. In neither case can it be assumed that the child is lying or being malicious; what it actually means is that the evidence available does not meet the standard of proof required in criminal proceedings.

- XV. Such an assumption can be dangerous because the standard of proof required in criminal proceedings is 'beyond reasonable doubt'. This can be very difficult to establish where a child, or children, are the only witnesses. The criminal courts also have rigorous rules of evidence and procedures which, although improved with regard to 'child friendliness', are not always conducive to facilitating the swift resolution of proceedings which involve children. Where criminal proceedings are not proceeded with or result in an acquittal, then civil proceedings such as the disciplinary process may still be necessary to safeguard children. This is because in civil proceedings there are different rules of evidence and the standard of proof is the balance of probabilities. Thus, in the case of a teacher accused of sexual misconduct against a pupil, disciplinary proceedings may still be necessary even though the Crown Prosecution Service may have elected not to proceed with the case to trial or the teacher was acquitted. Indeed, the failure to conduct disciplinary proceedings may be regarded as a breach of the requirements in relation to the Lists established under the Police and Criminal Evidence Act and guidance issued by WAG in 2004
- XVI. Such a disciplinary hearing should look at the available evidence and determine the matter on the balance of probabilities. The process should also include a formal assessment of what risk, if any, the individual poses to children.
- XVII. Criminal investigation normally takes precedence over disciplinary proceedings and while disciplinary proceedings should not automatically await the outcome of criminal proceedings in most cases they will. However, arrangements should be in place for disciplinary proceedings to commence immediately criminal proceedings end. This should include identifying the membership of a disciplinary committee to consider the case and a nominated governor (probably the lead child protection governor) assigned to liaise with the statutory authorities. Anecdotal evidence suggests that if there is no prosecution or a prosecution fails disciplinary procedures rarely follow. This is not appropriate and neither is it appropriate to assume malicious behaviour on the part of the child. Such an assumption could render disciplinary proceedings almost impossible and potentially expose children to further risk. Experience suggests that in reality children are extremely reluctant to come forward with an allegation and that when they do, the process is unpleasant and very stressful for them. Given the lack of evidence to support a contention that it is common for children to make malicious allegations any suggestions to the contrary are ill advised and may deter vulnerable children from raising concerns, thus making them more vulnerable.

Action needed to address Challenge 3:

1. WAG and employers to action the recommendations in the report “Social Work in Wales: A Profession to Value”⁴¹ as a matter of urgency

2. WAG to give urgent consideration to the introduction of legal protection for professional staff who make child protection referrals or give expert opinion in good faith, with particular reference to consultant paediatricians

3. The Police, Crown Prosecution Service and public service managers to effect further improvement in developing a more integrated approach to the conduct of investigations of allegations against staff which achieves

a) a quicker and less stressful process for children and staff

b) prevention of repetition of evidence gathering, and

c) more rapid release of relevant evidence to be made available for the disciplinary process

4. WAG to implement recommendation 21.7 of the Report of the Children’s Commissioner for Wales that guidance should be issued on how allegations of child abuse made against teaching and non teaching staff should be investigated

5. Unions and employers to review their policies and practice with regard to the support given to “whistleblowers”. Specifically:

where it is not the policy of a Union to provide dedicated support to a member who is a whistleblower the employer should designate a senior member of staff not involved in the investigation to carry out this role

6. Relevant Unions and sections of the media to reconsider the content and tone of their responses when prosecutions of staff fail, or when decisions are taken not to proceed with a criminal prosecution. Specifically

to appreciate that these circumstances cannot in any way be construed as proof that a false allegation was made

7. Where staff are alleged to have assaulted a child Employers to have in place procedures to ensure immediate decision and action, including the release of relevant papers, about the need for disciplinary proceedings in the event of no prosecution or a failed prosecution

⁴¹ Social Work in Wales: A Profession to Value. The report of the ADSS led multi agency group on the recruitment and retention of Social Workers in Wales August 2005

8. Higher Education providers to ensure that the training of staff working in universal services such as education and health has a compulsory component about safeguarding children, the ways in which child abusers operate and when to make appropriate referrals

9. Employers to ensure that the role of giving advice and support in investigations and disciplinary proceedings where child abuse is alleged should be restricted to Human Resources staff who must take expert advice and themselves have a continuous programme of refresher training in safeguarding children and child protection

Challenge 4:

THE FORMAL SYSTEMS - to make them more child friendly, better and more consistently resourced and fit for purpose

I. Formal systems for providing services to vulnerable children and safeguarding them are well established in the statutory and voluntary sectors. The Review was pleased to receive evidence from several voluntary organisations and faith communities and to hear of their formal child protection procedures and systems.

II. Sports

Several, but not all, sports bodies in Wales appear to be well aware of child protection and to have appropriate systems in place. The NSPCC Child Protection Support Unit has offered help to all of the sports (approximately 48) which receive support from the Sports Council for Wales. Only one sport in Wales, which is primarily for adults, has refused to engage with the Unit. However, the level of commitment to child protection issues varies considerably between sports and most individuals who take on the child protection role are volunteers with many other responsibilities.

The Review heard that the Sports Council for Wales prefers to take an encouraging rather than coercive approach to this issue. The Review is concerned however that whilst the Sports Council supports the concept of standards for child protection it does not make these mandatory. This contrasts with the approach in England where funding is contingent upon appropriate child protection standards being in place. One implication of the Sports Council for Wales approach is that funding will be allocated to sports bodies which may not have formal child protection procedures or carry out checks with the Criminal Records Bureau.

III. Faith Groups

With the assistance of Cytun and the Evangelical Alliance the Review engaged with a number of Faith groups and heard good examples of child protection procedures and of work in progress. The evidence demonstrated that many groups have a good awareness of the need to take measures to safeguard children and to have formal procedures in place. Unfortunately, despite invitations, the Review did not receive direct information from the main non Christian Faiths in Wales.

IV. The Statutory Sector

The evidence received from representatives of the statutory sector emphasised many points covered elsewhere in this Report. Several key issues recurred constantly within this evidence and all have a profound effect upon children.

Increased and more targeted and sustained investment is needed for children in need. Good universal services benefit all children but cannot be seen as an alternative to additional targeted and sustained funding for the most vulnerable children. As the CSIW Chief Inspector has pointed out, the lack of sufficient focus upon these children has undoubtedly contributed to the escalation in numbers of children looked after. Inconsistency of availability and quality of focused preventive and remedial services is endemic throughout Wales and despite improvements in recent years the Child and Adolescent Mental Health Service was identified by many respondents to the Review as a problem area citing delays in accessing services and limitations on availability.

In Health Care generally, while there have been improvements, a recent review of Children First Management Action Plans (MAPS) reveals a picture of varying quality in the health care offered to very vulnerable children in some areas.

The Children First programme in Wales: Guidance for 2004 – 2005 commented that “...progress reports and review meetings provide evidence of progress on a broad front in most local authorities, *but wide variation is evident*. There is steady improvement in the education and health indicators for Looked After Children (LAC) and the quality of information available, *but the quality of information and extent of focus on services for children in need varies considerably, with little progress in some areas* (our italics).

“There is *particularly wide variation* in the availability of placements locally for LAC *and in placement stability*” (our italics).

The most recent analysis of MAPs⁴² concluded that while there have been service improvements associated with Children First funding several problem areas have been identified. In particular the general failure to capture quantitative and qualitative data on outcomes for children. The analysis also noted problems of recruitment and skill levels across all agencies. A further comment which resonates with the findings of this Review is that “There was little evidence of meaningful use of data to set realistic targets and report on actual progress; to evaluate problem areas; or to plan to address service weaknesses. There was little evidence of integration of Children First into mainstream Planning Frameworks”.

The Review was told that the different funding arrangements for specialist teams has produced confusion and inequity in provision. For example, the CAMHS services of one NHS Trust provides attachment disorder therapies for children from one local authority but not for children from the adjoining authority. Looked after children placed out of the area by one local authority are seen by a specialist nurse if they are aged 11 or over, but under local arrangements in the receiving authority if they are under 11. All children from two local authorities are seen by specialist nurses regardless of where they are placed while another local authority relies upon local arrangements in the placement area. These differences do not necessarily compromise quality of care. They do however contribute to confusion, delay and oversight when children cross administrative boundaries.

With regard to educational achievements the Review has received evidence suggesting that:

- children in need are less likely than other children to attain their expected grades at GCSE but some local authority areas show better results which may be associated with using education specialists. Children First money has produced improvement in educational achievement;
- data on school exclusion is complicated by a lack of uniformity in data collection. Some anecdotal evidence, which the Review cannot verify, suggests that exclusion may be more common than statistics indicate;

there is a potential conflict of interest in that LEAs have an incentive to raise the educational achievements of Children in Need while schools have an incentive to limit numbers of children in need and particularly children looked after because their difficulties may undermine performance of the school in GCSE and exclusion figures;

⁴² Payne P, Smail P, Crowley A, Butler I, Sibert J “An Analysis of Children First Management Action Plans and Progress Reports for Wales 1999/00-2002/03

Within the systems that provide care for looked after children the Review has received of positive examples of WAG supported initiatives, for example;

- the national co-ordination of the All Wales Network for Looked After Children's' Education which has led to valuable information sharing and coordination;
- the All Wales Leaving Care Forum where sharing good practice has supported improvement in the numbers of young people leaving care who remain in touch with services such as health, education, training and employment. For example, all but one local authority can now report that at least 85% of care leavers are registered with a GP and only 2 local authorities reported less than 80% of care leavers in suitable accommodation;
- the newly created WAG funded 'Looked After Health Exchange', co-ordinated by Children in Wales which aims to improve the focus on the health of children looked after and to share good practice
- the improvements in local authorities' performance with regard to corporate parenting and listening to children which have been supported by the WLGA and WAG publication "If this were my child" in March 2005. Some local authorities have produced helpful packs for elected members explaining their role as representatives of the corporate parent.

There is also however a strong consensus of view about a number of problem issues such as:

- there are too many looked after children 'exported' to care settings and young offender institutions settings far from their home areas. When a child is placed far from home the difficulties of family contact, continuity of education and medical care, proper monitoring of well being by the social worker and eventual rehabilitation are made far more difficult;
- some rural areas of Wales are host to children from, often far distant, areas of England, which in some cases can equal or outnumber the local 'looked after' children and have a distorting effect upon local services;
- failure of placements because of perceived inadequacy of resources to treat children for the effects of insecure and disorganised attachment. The capacity of CAMHS services is seen to result in a system of prioritization whereby only children with the most severe clinical disorders receive treatment;

- there are discrepancies in the ways in which local services share information about children and young people and the efficiency and quality of notifications of movements and changes in placements are variable as are the arrangements for looking after a child's possessions

V. The Child Protection Systems

As mentioned in an earlier chapter these have developed and improved over many years. The All Wales Child Protection Procedures are a good practice model for working across geographical boundaries. However, there are still difficulties within the frameworks of these procedures which should be noted, for example;

- there is a lack of clarity and consistency regarding the naming of adult sex offenders against children and there is also inadequate provision for the monitoring and treatment of offenders
- there is a lack of suitable assessment and treatment in Wales available for children who have been sexually abused and/or are themselves exhibiting sexually harmful behaviour
- the safeguarding network does not yet respond adequately to the need to protect very vulnerable children with low visibility. For example, those who are sexually exploited and/or drug dependent, intimidated by criminals and afraid to trust the 'authorities'
- the Information Commissioner is not felt to be sufficiently pro-active in providing helpful guidance on data protection and the exchange of information where the protection of vulnerable children is a concern. It is not felt to be an adequate response to refer those seeking guidance to local child protection systems which themselves feel the need of guidance from the Commissioner
- there are geographical variations in police and social services responses to child protection referrals
- education services are perceived in some areas to work in isolation from multi disciplinary child protection systems and have a tendency to formulate internal policies in isolation
- welcome progress has been made on the implementation of recommendations in the Bichard Report⁴³. However, potentially dangerous procedure has persisted such as recently publicised events surrounding List 99 in England. At the time of writing however required changes in

⁴³ op cit

these procedures are imminent and further comment by the Review would be inappropriate

- there is not yet, across all professional disciplines, a shared understanding of and approach to child abuse and protection. This inhibits closer integration of services for children and better protection
- there appears to be a lack of consistency in the approach of LEAs and schools to the statutory prohibitions affecting the appointment of school governors. These include bankruptcy and formal mental health detention orders, but it appears that few, if any, governors are checked or asked to sign a declaration on these issues
- the Review has received reports of an inconsistent approach to carrying out CRB checks for governors based upon the view that governors do not have open and unsupervised access to children. However, governors do have access to groups of children in their various roles and are therefore likely to be perceived by them as adults who can be trusted; as such they should be subject to appropriate checks
- although there are now designated child protection governors in many areas and LEAs provide child protection training sessions for governors there appears to be limited support available for this specialist role and child protection does not feature routinely on governing body agendas
- ACPCs, which for many years have been the focal point of the local formal child protection system are not generally seen as being properly resourced. In many areas they do not have appropriate senior management commitment from certain key agencies. The fact that they have achieved success is largely due to highly committed individual officers. However, their limited resources have restricted their ability to respond to new areas of concern such as the risks posed by the internet and by organised crime. It is crucial that the new LSCBs have sufficiently senior representation and realistic resources to carry out their task;

VII. Bullying

Bullying is endemic within most environments where there are children. Where this is allowed to develop children are made miserable and unhappy and are sometimes physically harmed. They can also become increasingly isolated and more vulnerable as a consequence. Statutory agencies generally and schools in particular should have in place clear and workable anti-bullying strategies and systems with the required resources. They should also be subject to appropriate evaluation of their effectiveness, including evaluation by children. It should also be noted, as a Coroners Court recently concluded, that excessive bullying of young people can take

place in the workplace and contribute to the suicide of a young person. There is therefore a duty of care incumbent upon employers as well as parents, teachers and community leaders.

VIII. Insurance

The role of Insurers and Insurance Brokers in safeguarding children was explored and needs to be clarified within organisations. Staff sometimes attribute restriction of activity and information to a belief that certain actions, like sharing information, might invalidate cover, or that certain activities should not be carried out because “....we would not be covered by our Insurance....” It appears to the Review that some of the fears about the limitations of Insurance cover as it affects activities with children arise from hearsay and it was apparent that operational managers and practitioners rarely have direct contact with Insurers. The interpretations they hear are often conveyed via Insurance Brokers or managers who are themselves not familiar with working with children. The Insurance companies described an approach and general practices which suggest that any age appropriate activity carried out within a sensible context of good preparation and good supervision would generally be well supported by the Insurance company. It was apparent that they accept that experience and reasonable risk taking are an important part of children’s growing up experiences. They are keen to advise customers in how to improve safe practice. More detail of what they said can be found in Appendix 4.

IX. Emotional Intelligence

The concept of emotional intelligence (EI) came into prominence with the publication of Daniel Goleman’s book⁴⁴ 1996. This was mainly concerned with parenting and the development of emotional intelligence in children. Prior to his writing research had been carried out in different countries which illustrated that established tests of intelligence provided a very limited idea of how successful or satisfied a person might be in their life or their occupation. One 40 year study of 450 boys with a range of IQs including 1/3 below 90 in Massachusetts USA showed that IQ bore little relation to their subsequent personal and occupational success in life. The most important factors affecting success were their ability to cope with frustration, and to handle their emotions and get on with other people. In more recent years researchers and practitioners have taken the concepts of EI into many fields of management and practice, including those involving children and have devised methods for measuring the Emotional Quotient (EQ) as well as the Intelligence Quotient (IQ) of an individual.⁴⁵

⁴⁴Goleman, D. (1996) *Emotional Intelligence: Why it can matter more than the IQ*. London: Bloomsbury

⁴⁵ Goleman, D.(1998). *Working with Emotional Intelligence*”. London: Bloomsbury

Fulton, D. (2003) *The Emotional Literacy Handbook: Promoting Whole School Strategies*. London

This work helps to explain scientifically, what the best social workers, teachers, nurses and trainers and managers know intuitively. That is, that the attempts to describe technical sets of professional competences do not encompass or value those professional skills which really make the difference between the barely competent and the excellent. Similarly what we measure in our school children does not consider their progress as a person or predict their likely success in life, both personally and professionally. There is some knowledge of and interest in this concept in Wales. However, WAG might usefully explore and evaluate the extent to which emotional intelligence could contribute to services affecting children in Wales and whether it should be formally incorporated into policy and practice.

Action Needed to address Challenge 4:

1. WAG to consider more coercive measures to promote collaborative and partnership working in the event that present measures do not deliver what is required sufficiently quickly

2. WAG to evaluate the potential contribution of the concept of 'emotional intelligence' to policy and practice affecting children in Wales

3. SSIW, Estyn, HIW and HM Inspector of Constabularies to further develop existing collaboration and move towards integrated inspection systems for Inspections of joined up services;

to prioritise the development of integrated Inspection protocols for scrutiny of LSCBs and their capacity to carry out the required functions

4. WAG to ensure that anti bullying strategies should be part of the Single Education Plan and the Children's Services Plan. WAG should also consider making a legal requirement of employers of young people to have similar strategies in place and to exercise a duty of care

5. WAG to ensure that information and data protection systems in agencies are enhanced to facilitate improved information sharing between agencies and checking of staff. This should include:

a) requesting the Information Commissioner to issue clearer guidance and be more proactive in relation to vulnerable children

Bar-On, R (1997) The Emotional Quotient Inventory (EQ-i): A Test of Emotional Intelligence. Toronto, Canada,. Multi Health systems

Morrison ,T. (2006) Emotional Intelligence Emotion and Social Work: Context Characteristics Complications and Contribution": British Journal of Social Work

b) ensuring that CRB checks are conducted on all school governors and that formal checks are routinely made on the non criminal exclusions for consideration as a Governor (eg bankruptcy and detention under the Mental Health legislation)

c) clarifying standards for making recruitment checks and instituting a new standard that CRB checks should be carried out every 3 years in all statutory agencies, pending final proposals from the Bichard working groups

6. WAG to provide guidance to Children and Young People's Framework Partnerships on the development of a comprehensive programme of preventive and supportive measures for vulnerable children and their parents. This should include:

a) developing parenting classes in schools and tier 1 support under the Child and Adolescent Mental Health Strategy for vulnerable children and parents and specialist nurture group support in school settings for young children with serious emotional and behavioural difficulties

b) developing local family assessment facilities for Welsh families who need, or may be required by a Court to undergo such assessment. Currently families are sent to facilities in England, usually far from their home community

7. The Education service to provide targeted funding for a strategy to include support tutors, catch up classes and mentors for 'looked after children' in the mainstream school system

8. The Education service to support the development of emotionally intelligent schools

as part of a national agenda on child and adolescent mental health and to include in the curriculum the development of emotional resilience and emotional intelligence in children

9. Higher Education providers to include compulsory modules within initial teacher training on child protection

a) specific funding should be made available for raising teacher awareness and skills among serving teachers and for initial teacher training

b) LEAs should review and revise governor training and responsibilities with regard to safeguarding

10. The NHS in Wales to give more prominence to children in management targets and;

- a) introduce independent advocacy and complaints procedures for children in the health service
- b) produce legal guidance on the Venereal Diseases regulations in respect of sharing information on vulnerable children and
- c) take further steps to further review and strengthen children's mental health services

11. The Police service in Wales to develop a more consistent approach to child safeguarding issues in the context of dealing with domestic violence and anti social behaviour.

12. The Sports Council for Wales to review its present policy regarding child protection and make grant funding to sports organizations conditional upon child protection procedures and routine CRB checks being in place

13. Local agencies to ensure nomination of the appropriate level of representation and allocation of sufficient resources to enable the Local Safeguarding Children Boards to carry out their required functions;

WAG should scrutinise their effectiveness and hold member departments to account and in the case of the Police Service raise any necessary issues with the Home Office

Challenge 5:

THE LONG TERM VISION AND THE STRATEGY - to develop and implement a secure long term vision and strategy for vulnerable children at national and local levels.

- I. Reference was made earlier to the inconsistencies in public policy affecting children and the Review acknowledges the considerable difficulties in addressing these given the inter-relationship of national government structures and the role of Westminster government in non devolved powers and services.
- II. However, the Review findings suggest that much more could be done within the remit of the National Assembly. Initiatives such as the post of Minister for Children and the Cabinet Sub Committee on Children and Young People and the Policy Team established to support it suggest that

the Cabinet is aware of the need to co-ordinate and integrate policy and services for children. However, the Policy Team appears not to have developed in the form proposed to Ministers in 2001. The Review suggests that current arrangements could be greatly enhanced by the establishment of a Scrutiny Committee for children in WAG.

- III. The Review heard in evidence that many managers and staff in children's services experience problems and frustrations which they believe arise from divisions of responsibilities at ministerial and civil servant levels. Different policy and operational priorities are perceived to undermine a strategic 'whole child' approach. At a practical level the Review itself experienced problems when it proved impossible to obtain a composite summary of recommendations of recent relevant Inquiries and Reviews into children's matters together with up to date information about action taken by the relevant government departments. History shows that vulnerable children are most vulnerable at the boundaries between services and also that while good quality universal services are crucial to the wellbeing of all children a clear and expert focus upon plans and provision for the most vulnerable must be maintained.
- IV. Any lack of coordination of approach such as having different targets and priorities for children's services can undermine the confidence of staff and reduce their effectiveness. Some services such as health have very limited targets specific to children. Short-term schemes with uncertain funding coupled with inadequate core funding can also create uncertainty and general lack of cohesion.
- V. The perceived erosion of a critical mass of expertise in the children's services management and supervision capacity of small local authorities was a theme of the evidence. This coupled with the large numbers of elected members coming into the new unitary authorities who were inexperienced in the statutory children's services has important implications for the quality of strategic thinking, planning and commissioning of services. As the trend towards outsourcing of key children's services develops, there are obvious inherent dangers in any lack of ability to develop a sound strategic plan and a strong strategic commissioning capacity capable of bringing relevant expertise to the process of specifying, commissioning and monitoring the quality of children's social services. Local authorities could become increasingly reactive to what is available in the independent sector rather than proactively managing and controlling the market.
- VI. The outcome of a trend to more outsourcing, if not carefully managed and balanced with services provided in house could be a reducing ability to control the quality and appropriateness of the services purchased. It can also if not well managed, as has been seen in advocacy, lead to

disruption, loss of continuity as providers change and variable standards. Too much reliance upon one provider leaving the statutory agency exposed to problems in the viability of that provider is another obvious danger. Also, the lowest cost option which some suggest has largely controlled the commissioning of adult residential care can drive down quality and eliminate much needed small specialist providers from the market.

- VII. The drive to reduce costs and the distancing of relevant professional expertise from some commissioning and contracting processes could fundamentally affect the development and implementation of a sound strategic local plan for safeguarding vulnerable children. This is particularly concerning regarding the vulnerable children who are 'looked after' by the local authority. The Report of the Chief Executive of CSIW quoted in Chapter 3 identifies the extent to which Welsh children are now cared for within the independent sector, frequently at long distances from their home areas and at considerable cost. The growth in private fostering agencies and small children's homes is particularly marked and is not really a product of strategic planning and managing of the market. These agencies are independently inspected to try and ensure minimum standards but are inevitably variable in quality. The profit incentive of much of the independent sector is not necessarily a negative factor. Clearly however it has dubious elements as the extracts below from a prospectus sent to potential investors from an Investment Group on behalf of an independent sector care company testify:

" X feeds off the inexorable growth in government spending on health and social services".... " it will ".....provide care homes for children aged seven to 17 with behavioural and emotional difficulties"..... "Due to the high level of supervision these children require, the weekly fees are substantial, ranging from £3000 to £6,500 per child. A typical house will cost around £150,000 with average fit outs at cost of approximately £15000 pounds"..... "these houses need very little work to attain the standards and facilities required to care for children". "The returns are extremely attractive.... the business would appear to be highly profitable".

The prospectus claims that local authorities are "blue chip customers" and that the average pretax profit per house for a year was around £100,000". This information appeared in a newspaper article in January 2005⁴⁶. Further inquiries by the reporter revealed that staff salaries were too low to attract experienced and professionally trained staff. Further, that a home taking three of the "worst" children would charge £6,500 per week and produce £1 million per year compared with costs of £120,000 per year.

⁴⁶ "Pity the little gold mines" by Polly Toynbee, The Guardian, 28/1/05

- VIII. It would be unwise to generalise from this example although the range of costs quoted are fairly common. It would be reasonable to expect that such prices should command high quality accommodation, trained and experienced staff and the availability of specialist therapeutic help and personal tutors. However, that is the rarely the case.
- IX. The current evidence suggests that local authorities are not managing the market but are dependent upon the nature and the location of what the independent sector provides. At the same time the children placed are those with the most complex health, educational and social needs which can be compounded by the break in continuity in their education, health care and the distance placed between them and people who are important to them in their home area.
- X. The problems outlined above, together with some others identified by this Review are being recognised by the Welsh Local Government Association (WLGA) which in October 2005 set out five key priorities which included the establishment of a Social Services Improvement Agency and the promotion of collaboration on commissioning high quality services with a commissioning support unit. Unfortunately, at the current projected speed of development it will be some time before this unit will be equipped to support a move towards greater sophistication in managing the market. Furthermore, many vulnerable children have complex needs which require a joint response which is wider than local authority social services and should include appropriate education and health provision for vulnerable children with complex needs.
- XI. All of the issues outlined above highlight the need for an overarching vision and strategy for the vulnerable children of Wales. There are conceptual models which could facilitate an integrated approach to the whole spectrum of services for children from accessible universal service provision at one end to intervention, "treatment" and recovery at the other. Such a model can provide a simple framework for rationalising the pattern of national and local development in children's services. One well known model is that developed by Hardiker, Exton and Barker in the 1990s⁴⁷ (See Appendix 7). Such an approach to planning could provide a useful framework for mapping and costing the existing, and the desired, range and balance of services for children at national and local levels. It has the advantage of looking at provisions for children with a child focus rather than a service perspective and can facilitate flexible thinking, and cross service development and funding.

⁴⁷ Pauline Hardiker, Mary Barker and Ken Exton The prevention of child abuse: a framework for analysing services. 2nd ed. London: National Commission of Inquiry into the Prevention of Child Abuse. 64pp. (Discussion paper 1).

Action Needed to address Challenge 5:

1. WAG to establish a long term national strategy for children's services which should as far as possible have political consensus and commitment and which:

- a) is founded upon research and other evidence and based upon an agreed philosophy and within a conceptual model which can be used nationally and locally
- b) determines the desired balance of public investment in services for children between universal services, targeted preventative services for children at risk and remedial services for children with serious problems
- c) employs proven interventions and responses based upon sustained and realistic unit costing (see Challenge 6)
- d) executed with good logistical planning and implementation strategies

2. WAG to set up a cross cutting children's Scrutiny Committee with a remit and powers to scrutinise all children's services from a child centred perspective

3. WAG to review arrangements for the co-ordination of Ministerial and Civil Servant responsibilities with regard to children with a view to achieving greater co-ordination and harmonisation of planning and operations

4. WAG to support the initiative to establish a cross party group on children with a view to helping to inform the thinking of all political parties

the Westminster model which has existed for several years is a cross party group on children with external servicing arrangements which holds discussions and receives briefings on a range of issues affecting children

5. WAG to consider a funded national strategy to address the commercial exploitation of children

6. WAG to limit use of short-term finance to time limited projects and evaluated experiments

Challenge 6:

FINANCE - to review and rationalise the balance of overall investment in services for children and to consolidate and stabilise funding streams

From the section on finance in Part 2 we know two important facts:

- a great deal of money from the public purse is spent on children, but precisely how much, where and how it is spent is unclear
 - there is research evidence to support the view that funding directed towards well constructed, high quality and properly sustained programmes of early intervention and prevention are more cost effective than expensive remedial or punitive programmes
- I. The Review is indebted to WAG officers who have attempted to produce a combined table of expenditure on children in Wales across all services. This however has proved to be impossible. What information it has been possible to collate and a note of what is missing can be found in Appendix 4. We know from other work that this is not a problem confined to Wales⁴⁸ and that it results from separate systems and funding streams for different activities. The planned Wales Audit Office study on children's services may help to elucidate the issue but the scope and detail of this has not yet been determined.
 - II. It is obvious that integrated financial information and monitoring systems are fundamental to integrated services and to informed political decisions about strategies for children's services and the desired balance of investment. This is complicated by the fact that some of the resources involved are controlled by Parliament rather than WAG. However with a better information base, positive movement could be achieved within the balance of investment in services for children in Wales.

Action needed to address Challenge 6:

1. WAG to commission a comprehensive analysis and evaluation of the expenditure and cost benefits of investment in children's services to include health, education, social care, police, courts and legal services, young offender services

⁴⁸ "Don't Neglect the Cost" an updated assessment of the cost consequences of the abuse of children. Institute of Public Finance Ltd (1999)

2. WAG to commission an exercise to gather all available information on unit costings of different interventions and use the information to inform political decisions regarding investment in children

3. WAG to review whether core funding of services is based upon realistic assessment and placed upon a sustainable basis

4. WAG to develop a strategic financial plan for all services for children in Wales to underpin the plans developed under Challenge 5 above and which

facilitates working towards planned objectives to change the balance of funding between universal services, skilled early interventions with children at risk and remedial interventions for children with serious disorders

5. Local Authorities and the WLGA to work towards the early development of a strong expert commissioning capacity for children's services which can manage the market and obtain better value for money and quality of service from the independent sector, taking account of:

- a) the need to attract and retain appropriate expertise within local authorities
- b) the need to have regard to continuity as well as quality to ensure that children are properly safeguarded
- c) the need to retain expert small specialist providers within the competitive arena
- d) the need to invest in research to inform the quality of commissioning
- e) the need to take account of the development and infrastructure costs of independent providers of the specialist services needed by children with complex needs
- f) the need to develop a whole child approach to commissioning services and to commission jointly with partner agencies

Challenge 7:

NEW RISKS - to develop a more effective capacity for identifying and responding to emerging risks to vulnerable children

- I. Several issues have been discussed in this Report which suggest that the organisations and systems in Wales are sometimes slow to respond to newly identified risks to children. This does not appear to stem from a lack of awareness but more from the lack of collective capacity at a national or local level to develop a prompt and appropriate response to a newly identified threat. The Review suggests that this may be a product of problems identified earlier in the Report such as boundaries between Ministerial responsibilities, the lack of capacity in ACPCs and different approaches and priorities in different areas. Sometimes perhaps the sheer magnitude or the dangers associated with such issues may inhibit progress.
- II. Two recent emerging issues in Wales and elsewhere are Information Communication Technology (mobile telephones and the Internet) and the exploitation of children by organised crime, both of which were discussed in Chapter 3. In these areas government in Wales appears to have been slow to react in a co-ordinated way and local authorities have not responded consistently. Other issues of a similar kind are the impact upon vulnerable children of increasing alcohol and drug consumption within some families and communities and domestic violence.
- III. New threats can be the most dangerous and the Review urges that early action should be taken both to address the threats identified above and to develop a capacity which is highly sensitive to developing issues and able to stimulate an appropriately integrated response.

Action Needed to address Challenge 7:

1. WAG to establish a multi disciplinary 'new risks new opportunities' standing group of individuals with special expertise and the ability to:

- a) identify developing trends and problems which present new threats to the safeguarding of children and to recommend action;
- b) monitor worldwide developments in safeguarding children and identify those which would have a valuable application to Wales and;
- c) report regularly to the Minister for Children

2. WAG to establish a Task and Finish group to examine the extent of criminal exploitation of children and the responses by different police authorities and local authorities across Wales

3. WAG to take urgent action to respond more comprehensively to the existing threat posed by the Internet and new technologies and specifically to:

- a) issue new regulations (perhaps under Section 175 Education Act) to ensure a safe and secure infrastructure which includes all computers in all schools (including those used by teachers only), youth clubs and libraries
- b) require all schools to use only an assured provider
- c) require LEAs to develop E-safety policies covering the range of risks identified in this Report, and individual governing bodies to have E-safety policies
- d) require local authorities to ensure that similar policies are in place to protect looked after children, whether they live in families or residential care or are in receipt of services commissioned from another body
- e) work with the Qualifications, Curriculum and Assessment Authority for Wales (ACCAC) to ensure that Internet literacy programmes, critical thinking skills, management of online and mobile phone risks and personal safety online are embedded in the Wales National Curriculum
- f) ensure that E-safety is included in child protection procedures and are promoted by LSCBs Community Safety and Public Safety policies

4. WAG to make more use of available initiatives and:

- a) adopt Home Office initiatives on Internet Safety and issue them in Wales as soon as possible
- b) adopt the DfES resource packs dealing with online grooming, online bullying and bullying via mobile phones (cost £4) and issue them in Wales as a matter of urgency
- c) ensure that Wales has a direct and active involvement with the new National Internet Safety Centre

5. WAG to seek assurance that procedures for gathering, viewing and storing video evidence for court purposes will be reviewed to ensure that it is not used inappropriately or abusively and that consistent standards are applied

Conclusion

79. As the Introduction highlighted, the approach of the Review has been to identify and address the key blockages which impede progress on achieving a more effective approach to safeguarding vulnerable children in Wales. The blockages identified cluster in the areas of the 7 challenges set out and the Review has recommended necessary actions to address these blockages to progress.
80. The challenges are fundamentally difficult. If they were not they would have been resolved a long time ago. The dense and complex network of things that stand in the way include the achievement of political consensus and will. The challenges also cut across the tendency to protect or retreat behind departmental and geographical boundaries and professional cultures. They question too the ways in which impatience and short time scales can blight the progress which is needed and how much fluctuating and sometimes ill informed public opinion may influence policy for children. The children have told us unequivocally that this is not good enough and all responsible adults must agree.
81. While the challenges are difficult they are not insurmountable. They do however require a will that is strong enough to tackle some previously intractable issues. They also need a long term and phased approach which takes account of priorities and enjoys sufficient political consensus to ensure that the change and improvement programme is sustained. The support and understanding of the public would be an important factor in long term success. The Review Team is convinced that a re energised and proactive government initiative to create a more integrated model of sustainable children's services within a committed culture and framework for safeguarding children throughout Wales is needed. The rewards measured in positive outcomes for children as a result would be well worth the effort.

PART 2 – THE EVIDENCE

CHAPTER 4: THE EVIDENCE

This Chapter provides a summary of the evidence; how it was gathered and the key messages identified by the Review

How the evidence was gathered

82. The purpose of Part 2 is to provide for the reader the sources of the conclusions reached by the Review which are the basis of the recommendations for action set out in Chapter 3. Because the evidence was so extensive it is impossible for the Review to reflect fully everything we heard. However, the intention behind the 7 Challenges proposed is that they should provide a focus upon key issues which the Review suggests are fundamental to the resolution of many of the problems identified.

83. 58 written submissions were received in response to the initial invitation. Many of these were from organisations and groups such as professional associations, local authorities, local health boards and health trusts, umbrella bodies, forums, networks and area child protection committees. They also came from large, small and medium sized charities working in Wales, and from services such as the police, fire and rescue, ambulance, armed services, court and prison services, education, health, social services, a range of community and hospital-based health services and insurance services. They therefore represented a wide body of opinion. Other evidence was gathered from oral sessions and presentations, many of which also involved representative groups representing professions and special interests, and some individuals with special knowledge and expertise. The Review also considered relevant books, research and other reports. Summaries of the sources of material used can be found in Appendices 2, 3 and 4.

84. The evidence covered interests and concerns including play, sport, mental and physical health, faith and crime and specific interests such as autism, the Internet and mobile phones, parental support and the formal child protection systems. Responses covered a breadth of issues including those affecting all children (health, education, leisure facilities, organised sport, commercial pressures, information technology and general safety) to issues affecting specific groups of children (abuse, physical and mental illness and disability, bereavement, drug abuse, poverty, poor parenting and separation of children from their families).

85. A crucial part of the evidence was the project commissioned by the Review at an early stage to consult with and canvass the views of children. The outcome of this project is summarised in detail later in this section (paragraphs 91 to 110) and was highly influential to the thinking of the Review.

86. The oral evidence and presentation sessions explored written evidence further and also sought to ensure that the Review heard from important groups which had not submitted evidence. Oral evidence was taken from the Minister for Children, the head of the Civil Service in Wales, representatives of Chief Officers of statutory services, of Christian and non-Christian faith communities, trades unions and professions, insurance companies, sports organisations, special interest groups and campaigns. The Review heard presentations and held discussions with organisations with a national remit such as the Wales Inspectorates for Health, Social Services and Care Services and the National Crime Squad. All the evidence was recorded verbatim and read by all members of the Review Team.

87. Relevant research and reports were studied, and additional information was commissioned including a summary of all recommendations made by Inquiries and Reviews during recent years⁴⁹ together with information about progress made. Comparisons were made with developments in other parts of the UK. All of this informed the thinking of the Review and are referenced in the text.

88. Members took individual responsibilities for looking at evidence from particular perspectives and the evidence was further discussed and analysed by the Review Team in meetings and two residential workshops. During the lifetime of the Review efforts were made to ensure that the Review was as up to date as possible but inevitably some developments have taken place since our Report has been completed and gone to print; an indication of the continuing pace of change.

90. The Review was impressed, but in some ways concerned, by the changes that have come about in Wales which affect vulnerable children; a process which continues. These changes have many merits. However, a situation of fluidity and at times even turbulence has dangers too. Tribute should be paid to the commitment of government to the improvement agenda, and the skills of the managers, staff and volunteers who have embraced change and it would be ungenerous to suggest that the change agenda is not broadly positive. It does however have a less positive side for it is well known that risks to vulnerable children increase in situations of uncertainty. One lesson from this, to borrow a soccer cliché, is to recognise the need for someone to put a 'foot on the ball' and to reflect upon what is working and what is not, to make sure that all team members understand and are following the game plan, and to ensure that key elements are firmly embedded.

⁴⁹ *ibid.*

What the Review learned from the evidence

What follows here is a summary of points made to the Review Team in evidence. It is not necessarily what the Review has concluded which is set out in Chapter 3.

Messages from the children

91. In keeping with the Review's key decision to take a child perspective, specifically with regard to evidence gathering, the Review a) commissioned a project which was conducted by NSPCC on behalf of the Review to consult with a large number of children across Wales, and b) looked at the findings of a Local Authority Risk and Protection Audit with over 5000 pupils.

NSPCC Project:

92. A steering group of young people who helped to design and carry out this project made a presentation of the findings to the Review Team, and subsequently met with a small representative group of the Review Team to discuss their views further. The project steering group comprised 16 to 19 year olds and the work aimed to find out the views of children and young people between the ages of five years and early 20s. It wanted to find out how safe children and young people felt, what sort of things worry them and what they thought adults could and should do to keep them safe. This was focused in four main areas:

- Out and about within the community
- Home or where you live
- School or clubs
- The Internet and mobile phones

93. The work covered urban and rural areas in North, West and South Wales. Questionnaires were distributed through schools and organisations and of these 615 were returned (232 in English and 383 in Welsh). The majority were sent in by children in the 10 to 14 age group, with the second largest response group being 15 to 18 years. Smaller numbers were returned from the five to nine year olds and the 18 to 24 years age group. Some responses came from young carers, young offenders and young gay and lesbian people.

94. There were also 22 consultation events in different parts of Wales, two of which were conducted in Welsh. The length of the events varied and some 160 children and young people participated. The groups consulted included the following:

a pupil referral unit
a youth inclusion project
a group of children unable to attend school because of school phobia
a young mothers group
traveller children
children and young people with learning difficulties
children from black and minority ethnic communities
young men in custody in youth offender institutions
children from asylum seeking families
a youth forum
a young homelessness project
young children from a family centre on a housing estate
young people from a Career Gateway course
children in secondary and primary schools

95. In all the consultation events it was explained to the children and young people that all governments have a responsibility to keep children safe from harm.⁵⁰ It was also explained that WAG took this responsibility very seriously and wanted to find out what children in Wales thought about their safety. Views and opinions were then gathered from the children and young people through a variety of different methods and approaches, which was suitable to the age groups involved.

The general themes of evidence from the project were as follows:

96. To the questions such as “how safe do you feel, and if you did not feel safe who would you turn to for help?” answers varied according to age. For example, in answer to the question, “how safe do you feel when you are out and about?” only 25% of five to nine-year-olds felt completely safe, compared with 37.5% of 15 to 18-year-olds. Interestingly, in answer to the same question, 100% of 18 to 24-year-olds answered “quite safe” but none appeared to feel completely safe. It is concerning that among the 10 to 14-year-olds the feeling of being completely safe was only marginally greater than that of the five to nine-year-olds and that 10.3% clearly recorded that they felt “not safe.”

97. The five to nine-year-olds, recorded a 50/50 split between feeling completely safe or quite safe in school, while 100% felt completely safe in their clubs and 75% felt completely safe at home. Only 25% of this age group felt “quite safe” in their home environment which was very concerning. This age group also recorded that 25% felt “not safe” and only 25% felt “safe” in using the Internet or a mobile phone. Of course, some of their insecurity might be related to a lack of confidence at an early stage in using information technology.

⁵⁰ Children Act 2004; Sexual Offences Act 2003; Safe from harm: a code of practice for safeguarding the welfare of children in voluntary organisations in England and Wales. London: Home Office (1993)

98. The feeling of being "completely safe" in school reduces in the 10 to 14 age group to 46%. A similar percentage feels only "quite safe" while almost 3% recorded that they feel "not safe". Similarly, this age group feels less safe than the younger age group in clubs where only 38.5% feel "completely safe" and a further 7.7% feel "not safe". The proportion of this group who feel safe at home increases but again there is a distinct group, which feels "not safe". This group has recorded a higher level of feeling safe in the use of mobile phones and the Internet, which may be a result of greater confidence in using the medium.

99. The 15 to 18 age group again, shows some interesting variations. They record, a 50-50 split between "completely safe" and "quite safe" in their feeling of safety in school or college. However, just over 37% feel "completely safe" when out and about and just over 6% feel "not safe." In their clubs, only 25% feel "completely safe" while almost 19% feel "not safe" while at home, 81% feel "completely safe" but surprisingly perhaps, just under 19% only feel "quite safe".

100. Another interesting variation in this age group is that only 31% feel "completely safe" in using the Internet or a mobile phone almost 19% feel "not safe." One explanation for this might be this age group has developed a greater awareness of the potential dangers of these technologies.

101. The project found that the concerns of children and young people were remarkably similar across age groups, gender, geography, and social groups. These concerns are not exclusive to the more obviously "vulnerable" groups. Their identification of the things that make them feel frightened and unsafe is crystal clear, and they suggested practical solutions

On specific issues the points made were as follows:

Out and about

- Strangers and abduction; cars driving slowly past, being asked to get into cars etc
- dark lanes and dangerous rubbish; concern and disgust about rubbish lying around, and fear of dangerous rubbish such as condoms, broken glass and dog poo
- gangs and bullying; including racism, and peer pressure to do things you don't want to, such as smoke, take drugs, or have sex
- Paedophiles and rapists; this tended to reflect a general concern about "paedos" and "wierdos" etc rather than actual experience. Solutions included longer sentences perhaps "for ever" and even incarceration on a "paedophile island"

- Violence drugs and drunkenness; mentioned more frequently than paedophiles. This involved fear of adults behaving violently under the influence of drugs and alcohol and also of drug dealers
- Motor vehicles; a significant source of fear for all age groups. Many concerns about speed, need for lower speed limits, and more pavements
- Police and other adults; while recognised as a source of help, also a source of fear

In the home environment

- Parents; arguing and swearing is frightening, being hit and shouted at, being beaten and sexually abused, being left alone, parents drinking or taking drugs
- Accidents; concern is mostly from younger children or children with learning difficulties. This included fear of sharp knives, falling downstairs, fire and chemicals
- Burglars, strange callers, strange phone calls and nasty neighbours

At school or college

- Bullying; a strong and consistent fear expressed by children of all ages.
- Teachers and school rules; mocking, shouting, swearing, hitting or being too demanding; getting excluded or expelled
- Security; the need for adequate walls and fences, security lights, identity badges, security codes; fear of weapons in school and violent children
- General; feelings of vulnerability within the school as an institution and the need for time and space to express concerns to staff
- Traveller children; significant concerns expressed by them regarding their feeling of being discriminated against and unprotected in the school environment

In clubs

- General; seen as safe, secure and ordered. Stressed that relaxed environments need to be secure and protected from people described as “hanging around outside”

Internet and mobile phones

- Chat rooms and getting duped; people who lie about their age and identity
- Paedophiles and unsuitable web sites; pornography and "rude " pop-ups
- Mobile phones; threatening messages, bullying by phone, "happy slapping", pop-ups and rude messages, getting stolen, health risks

102 This project also identified some special messages for the Review from specific groups of children and young people. These included traveller children, young male offenders in custody, young mothers, and asylum seeking children.

- traveller children have an acute sense of persecution and danger, both in school and in the general environment. They feel this is based upon prejudice and what they regard as racism
- young people in custody were seen in groups from two different young offender institutions and a marked difference in the responses from the two groups was noted. The issues identified by Group 1 (who were in a local authority secure unit) were that they felt safe and supported but very anxious about the risks they would face when they got out (such as homelessness, going back into the same environment, exposure to drugs and peer pressures, no family support, and having a 'record'). Group 2, (who were in a unit run by the prison service) did not feel safe and were preoccupied with their dismal environment (such as the lack of decent food, hot water to make tea, and the fact that officers smoked in front of them).
- young mothers felt vulnerable because they felt unable to talk to their own parents and were afraid; of accidents, of fire and of cot death. They felt that professionals did not take their concerns about their baby's health seriously and perceived them as being unable to cope because of youth and inexperience. They were sensitive to what they felt were implied threats that their child might be removed. They felt they needed special help in hospital and antenatal clinics, and to have access to parenting classes which addressed their lack of confidence. They felt that learning about parenthood in school was not effective because pupils don't take it seriously.
- asylum seeking children who were consulted came from a number of different countries and were given special help in school to help them learn English as a second language. The lack of language was frightening to them because of their inability to read or understand what is going on around them and because it is difficult to make friends. They were concerned that their teacher might not listen or understand if they spoke about their fears or worries. An example was given of a child who had come to Wales from Iraq. His preoccupation with danger, violence

and death was a poignant reminder of how children of asylum seekers will often be severely traumatised and how little skilled help is available to them.

103. The project was unable to make contact with children on the child protection register, children who are looked after by local authorities and care leavers. These vulnerable groups could not be consulted directly for reasons outlined below. However, there were young people leading this consultation and reporting back to the Review who had experience of these systems and the Review has also looked at research and information with regard to children in these categories.

104. Children currently in the formal child protection system are difficult to access because of the sensitivities and uncertainties surrounding their situation, coupled with the fact that many are involved in lengthy court processes. The findings from retrospective and other research studies however, tell us that for many the process, which includes forensic medical examinations and sometimes criminal court procedures can be in themselves traumatic although there have been many improvements in recent years. The long time scales which sometimes elapse between the offence and the final resolution of court proceedings can also be extremely stressful for children. A final message from this group, and which is noted elsewhere in this report is that the specialist therapeutic help needed to enable these children to overcome their experiences is rarely available. Even where such help may be available it can be delayed until certain other procedures have been completed and may be restricted in content because of possible contamination of evidence. It is a common finding that children subjected to abuse can feel guilty, or in some way responsible for what has happened to them. This feeling can be heightened by court cross examinations and children need very skilled help in dealing this.

105. Children in the care system: The young people on the steering group, of the consultation project all had experience of the care system. They confirmed that although children in care obviously experience the same fears and anxieties as other children there is a danger that that busy social workers and even foster carers may not pick up these fears when the focus may be on their other problems. Other studies have shown us that children in the care system, even those receiving good-quality substitute care, can feel isolated and bereaved, particularly if they are unable to have meaningful contact with other members of the family. Their education and health care can be disrupted and their self-confidence and feeling of self worth can be very damaged. They too may have mental health problems associated with the sequence of events which led to their being in the care system. Again the specialist help that they need is rarely available to them in a sustained way.⁵¹

⁵¹ The adolescents in substitute care (ASC) study: changing lives or just changing locations? By Milner, S., and Sneddon, H. Queen's University, Institute of Child Care Research. (2004)

Who will children turn to?

106. In the general analysis of who children might turn to if they felt unsafe, the vast majority indicated that they would talk to their parents or to friends in time of need. It was also encouraging to note that some 68% said that they could talk to a teacher. At the same time, the consultation highlighted some issues regarding the attitudes and behaviours of teachers and the report suggests that perhaps teachers should receive more training in communication with children with particular emphasis upon communication with those who are more vulnerable or have special needs.

107. An encouraging finding was that around 54% recognised police as adults who are there to help and protect. Many felt that they would like to see more policemen, and specifically more policewomen, out and about in their communities. Only about 20% recognised Social Services staff as someone to turn to which is not surprising given that only the most vulnerable children would normally come into contact with Social Services. More surprisingly, only approximately 18% of the consultation sample recognised the Commissioner for Children as someone to turn to. We are well aware that the Commissioner has made strenuous efforts to make direct contact with large numbers of children in a variety of ways, including visits to schools. However, this finding might indicate that the Commissioner may need to find further ways of communicating his availability and his role as a champion for children in Wales.

A Local Authority Risk and Protection Audit

108. The Review also consulted a recent risk and protection audit conducted with over 5000 pupils in a Welsh local authority. This raised many similar issues to those identified in the work described above. It also highlighted and confirmed the high correlation between various risk factors such as poor parental supervision and discipline and family conflict with a range of outcomes such as pupils feeling alienated, using drugs, being rebellious, having a low commitment to school and identifying with other pupils with problems. Conversely those who felt nurtured and protected at home and in school were those who were more involved in family life and school life and felt that their efforts were positively recognised.

Overview and survey of effectiveness of interventions to promote stability and continuity of care for looked after children. Final report. Cardiff: Cardiff University School of Social Sciences by Perez-Del-Aguila, R. & others (2004);

Forgotten children: addressing the health needs of looked after children and young people, Residential Health Care Project. Astron (2004);

Your shout! A survey of the views of 706 children and young people in public care by Timms, J.E., and Thoburn, J. NSPCC (2003)

109. This survey was based upon the Communities that Care initiative pioneered by the Joseph Rowntree Foundation and based upon the evidence of longitudinal studies in the United States which have demonstrated that risk factors cluster around the four areas of;

- a) the family
- b) the community
- c) the individual and
- d) the school

and that those most likely to develop problem behaviour are those who have multiple risk factors across all four areas.

Messages from the adults

110. Many issues and concerns raised by the adults who work with children were very similar to those raised by the children. This appears to confirm the view that the greater weight should be given to the views of the people who work directly with children when policy and practice is being determined. There were also, of course, more complex messages from adults arising from adult understanding of the legal and organisational issues involved.

111. The following is a brief summary of the main themes of the messages received from the people and organisations who gave written and oral evidence:

- the child and the family perspectives, often seem to be lost in the context of systems and procedures
- WAG makes too many and sometimes confusing and conflicting demands upon local services and departments. Targets and priorities are not harmonised
- similarly, large service departments make too many and often confusing demands upon practitioners who work with children and families;
- children are not a priority in the health service
- 22 relatively small local authorities cannot reasonably be expected to provide the necessary range and expertise needed in services for children
- there is too much reliance upon the goodwill and motivation of departments and services to work together and not enough requirement
- resource problems are endemic throughout the safeguarding systems

- there is a serious deficit in the supply of skilled practitioners and “front-line” managers in several key disciplines. This is particularly critical in social work
- professional practitioners in a number of important disciplines feel seriously undervalued and do not have proper access to appropriate developmental opportunities
- there is confusion about the status of and progress in implementing recommendations made by major Inquiries, which have reported in recent years
- there is a perception that, with some notable exceptions, the concept of an integrated approach to children at a policy, managerial and practitioner level is still a far distant aspiration;
- at ministerial and senior civil servant level there are not strong enough mechanisms to ensure that priorities and targets for statutory services to children are harmonised and consistent
- the intent to facilitate and support "whistle blowing" is not backed up realistically, in practice. "Whistleblowers" are deterred because they feel isolated and exposed and may not receive support from their trade union or even their line manager
- ministerial organisation of responsibilities for children's services and the consequent organisation of the civil service are seen as creating unnecessary complexity and confusion and to have diluted expertise. The stated reasons for this view were. This was seen as a result of:

too many Ministers with responsibilities for children

insufficient support and executive authority for the Minister for Children

the lack of an integrated scrutiny and monitoring process within WAG for children's services

the loss of the Children and Families Division and of a senior policy post in the Health and Social Care department of WAG and the subsequent loss of confidence that a clear and informed focus on vulnerable children can be maintained

the post of Chief Inspector of Social Services being potentially compromised and constrained by the lack of a senior policy department counterpart

the fear that services for the most vulnerable children will be less visible and suffer within the context of the competing priorities of mainstream education and health universal services

- there are major concerns about the level and the sustainability of investment in preventive and supportive services for "children in need" because:

services which existed as a result of the Children and Young Persons Act 1969 have been eroded

services to 'children in need' work to different thresholds and different levels of provision across Wales to the extent that the lack of consistency in the quality and quantity of services for vulnerable children is felt to be unacceptable

the inability to respond in an appropriate and timely way to 'children in need' is seen as detrimental to children and more costly to the public purse in the longer term

residential assessment for Court proceedings for Welsh children and families with severe problems is either unavailable or at very considerable distance from their home area

- Widespread and strong concern was expressed about the scarcity of CAHMS, the School Psychological services and other intensive facilities which could provide appropriate therapeutic help for children who are:

identified early as being very vulnerable or exhibiting seriously problematic behaviour

have been abused

exhibiting sexually harmful behaviours

Children who have suffered actual abuse rarely have access to intensive therapeutic help and in most cases are only seen by CAHMS when a court report is required. Residential assessment for Welsh children and families with severe problems is only available some distance away and outside Wales. Individual case histories show that many children receiving expensive remedial action were exhibiting serious problems at an early stage when they might have responded positively to less costly action had appropriate help been available at the right time.

- Many concerns were expressed about risks posed by the Internet and mobile telephones. There was an informed awareness of the various protective systems and strategies which are available but a view that Wales has been slow to respond to these in a uniform way
- Formal systems and procedures are seen as being generally sound but frequently not properly resourced and implemented. There is a view that their existence allows managers to demonstrate that procedures are in place but expose staff who are unable to implement them because of staffing or other resource issues
- Sports bodies in Wales do not have the same resources to implement safeguarding procedures as they have in England

Messages from other important sources

Inspectors and Regulators

112. The Review team received presentations from the Social Services Inspectorate Wales (SSIW), Care Standards Inspectorate for Wales (CSIW) and the Care Council for Wales (CCW). In addition their annual reports and those of the Office of Her Majesty's Chief Inspectorate of Education and Training in Wales (Estyn), the work of the Healthcare Inspectorate Wales (HIW) and reports of Her Majesty's Inspector of Constabularies were considered in detail.

113. To a significant degree messages from the inspection and regulatory bodies reinforced evidence discussed elsewhere in this Report. In general, they confirm the view that important foundations for improvement are in place, including the framework of planning, objectives and regulatory systems. However, they also highlight problems which block effective implementation of plans and aspirations and the delivery of the desired quality outcomes for children. In short they repeat a theme of other evidence to the Review; that the consistency and quality of services in too many respects fail to measure up to the policies and objectives of government.

HIW

114. The HIW is relatively new having been established in 2005. It is in the process of conducting audits in the health service, following the Climbié and the CHI⁵² reports, on the safeguarding of children in the Health Service but has not yet undertaken major inspection programmes on children's health services. It has developed questions about safeguarding children within Inspection protocols. It has been suggested, there is currently limited experience and expertise within

⁵² Safeguarding Children The Second Joint Chief Inspectors' Report on Arrangements to Safeguard Children July 2005 - Commission for Social Care Inspection, Healthcare Commission

HIW regarding matters of child protection and safeguarding of children. The Review is not in a position to make informed comment but would suggest that HIW might wish to consider greater involvement of relevant outside expertise in developing protocols and carrying out in depth sampling and evaluation of practice. As other evidence to the Review has emphasised the view that there is not a high priority focus on children within the health service the development of HIW is welcomed by the Review and the Review would urge that inspections of health service provision for children be given priority. In developing these inspections the Review suggests that HIW should work closely with SSIW, CSIW and Estyn; a suggestion which is dealt with in the Challenges section of the Report.

Estyn

115. The most recent annual report of the Chief Inspector of Estyn highlights several important issues relating to safeguarding vulnerable children. One of the most concerning is the education of children who have broken the law or are in danger of doing so. The report is unequivocal in stating that these children "do not receive enough help to change their behaviour, attitudes and lifestyle or to deal with the underlying reasons why they take part in crime". The education of Welsh children placed in secure settings in England and Wales and those who have been referred to Youth Offending Teams is described unequivocally as "unsatisfactory". The Report makes clear that such children do not get sufficient help with basic skills, with personal and social education, learning Welsh or with career advice. Few gain qualifications, even at the lowest levels and few are helped to address their behaviour and their participation in crime. There is insufficient good teaching within the system and those who have dropped out of school find it hard to go back. They also find it hard to obtain work because they have not received help in avoiding further offending. These comments echo some of the views of young people in a prison establishment which were recorded earlier.

116. The youth justice system is complex and involves youth offending teams, young offenders institutions and local authority secure children's homes, one of which operates in Wales. The Inspection of the system is also complex involving Estyn, the Social Services Inspectorate for Wales, Ofsted, the Adult Learning Inspectorate, H.M. Inspectorate of Probation, H.M. Inspectorate of Prisons, H. M. Inspectorate of Constabulary and the Healthcare Commission. While there may be some advantages in having a range of expertise involved they seem likely to be outweighed by the disadvantages of harmonising the different perspectives and cultures from which these Inspectorates derive and the fact that some do not have a particular focus or expertise in safeguarding vulnerable children. Many studies and Inquiries have highlighted the dangers to which children are exposed

in prison and the high costs and low success of dealing with young offenders in this way.⁵³

117. The Estyn report also highlights positive developments relevant to vulnerable children including the standards achieved by children under five which have improved each year. In the year of the report children achieved very good standards in nearly one third of classes and there were very few classes where standards were unsatisfactory. Standards achieved by pupils with special educational needs are much higher than they were five years ago and pupils in special schools "are making better and better progress". Within the special schools almost all pupils with social, emotional and behavioural difficulties "improve both personally and socially" and some pupils who show more marked behavioural improvements are able to return successfully to mainstream schools.

118. In a number of areas of concern highlighted by Estyn the Chief Inspector makes strong links between low educational performance and the inequality which lies at the root of many of the long-standing problems children experience. She stresses the need to make dealing with these inequalities "a priority for society at large, as well as for education and training providers and policymakers". This view is strongly supported by other evidence to the Review.

HM Inspector of Constabularies

119. The Police Inspectorate has carried out a number of general and thematic inspections covering child protection and safeguarding children. In a joint inspection in 2002 carried out by Police and other Inspectorates which included local authority services, health services and the police service in England the summary of findings highlighted several important points. These should be treated with some caution as the inspection did not include Wales and some information may now be outdated. However, as the points resonate clearly with much of the evidence to this Review, they are well worth repeating.

- there was formal acceptance by all agencies of their responsibility to ensure that children are safeguarded but safeguarding responsibilities were interpreted in different ways and with different emphases. The theoretical priority given to safeguarding was not reflected in service planning, agency business plans or resource allocation at national or local levels.

⁵³ Juveniles in custody: a unique insight into the perceptions of young people held in prison service custody in England and Wales by Challen, M. and Walton, T., Youth Justice Board. HM Inspectorate of Prisons (2004); Perceptions of safety: views of young people and staff living and working in the juvenile estate by Holmes, C. and Gibbs, K. (2004) HM Prison Service; Safer Custody Group; Children in custody: Promoting the Legal and Human Rights of Children, Howard League. (2005); Suicide and self-harm prevention: court cells and prison vans. Howard League. (2002)

- where local arrangements were satisfactory individual managers were personally committed to protecting children and ensured this commitment through their organisations. They ensured that staff were child focused and safeguarding of children was high on their agendas
- safeguarding was most robust in areas where there was an open culture between local agencies and direct lines of communication between managers who had the trust and confidence in each other to accept and address the concerns brought to their attention
- difficulties experienced by many agencies in recruiting and retaining skilled and experienced staff had a major detrimental impact upon safeguarding arrangements
- staff in all agencies were confused about responsibilities and duties to share information about child welfare with other agencies and lacked confidence about what the information was being shared with them. (Successive Inquiries have consistently highlighted such weaknesses in information sharing but there were very few formal agreements between agencies about how and when information should be shared)
- there was concern about the high thresholds being applied by social services and the lack of adequate guidance, advice and support from social services when other agencies raised concerns about the welfare of children
- there was reluctance among some agencies to refer child welfare concerns to other agencies and a lack of confidence in the powers of Area Child Protection Committees to address and resolve the concerns
- specific services were not well integrated into local safeguarding arrangements; these included GPs, child and adolescent mental health services, adult mental health services, some independent schools and NHS Direct. (more recent reports suggest that NHS Direct in Wales is now well integrated into the local safeguarding systems)
- safeguarding of children living away from home was very inconsistent whether in family placements, children's homes or residential schools. Participation of children and parents in reviews, frequency of social work visiting and access to independent visitors and advocates was found to be inconsistent and of variable quality
- few ACPCs were effective in exercising their responsibilities to promote and safeguard children and in only two areas was there sufficient commitment to establish effective joint funding arrangements to support

the ACPC. Agencies did not generally accept accountability to the ACPC for safeguarding arrangements and few had effective business plans

- despite the concerns of HMI prisons inspectors about risks to the welfare of young people in Young Offender Institutions their safeguarding had not been addressed in most areas

120. In a recent thematic inspection of child protection arrangements within different police forces very variable practice was noted ranging from some excellent examples of good Child Protection Units (CPUs). The report notes however that CPUs had a different remit and status within different forces. At one end of the spectrum were well staffed, highly regarded and well trained units which used their expertise more widely with child victims of crime and children involved in domestic disputes. At the other end were much lower status units where “ill informed officers” described the role as an “easy ride” and “a job for the girls”. Even some senior officers did not regard CPU staff as having specialist skills including the ability to interview suspects and regarded the work as simply an evidence accumulation exercise.

121. Such views may also be found in Welsh police forces although at the same time the Review is aware of some positive albeit piecemeal developments in Welsh Police Forces in recent years. This highlights the need for the potential re-organisation of the police service in Wales to place a high priority upon achieving a consistent approach to safeguarding vulnerable children when determining future organisational structures. Given the well documented dangers of increased risk to vulnerable children at times of organisational change the process of change is also an important consideration.

Social Services Inspectorate Wales

122. A fact already in the public domain is that, in the first round of Joint Reviews of social services provision, no local authority in Wales was found to be serving most people well. More concerning was the judgement that only eight of the 22 local authorities were found to have promising prospects. Three local authorities have been subject to the protocol for responding to serious concern about their services for children which is administered by the Chief Inspector of Social Services. The problems identified included:

- the handling of large numbers of referrals
- the practices surrounding assessment and care management
- the thresholds for intervention (a recurring issue in this Review)
- the ability to commission high quality services

During 2004/05 the Inspectorate required each authority to undertake a self assessment of their services for children in need, and is doing so again in 2006 for children in need and looked after children. This will provide information about the pace of improvement and some recent Inspections of children's services have been more encouraging.

123. In his Annual Report of 2003-2004⁵⁴ the Chief Inspector noted improvement and many examples of good practice and the obvious dedication and commitment of many staff but also said "...services overall....are not currently of a standard with which we can be satisfied. They must improve and do so at a pace greater than that seen over recent years". He focused particularly upon improvement in the "standard and consistency of practice.....as it is a necessary pre-requisite to achieving improved and sustained performance".

124. In his 2004-2005 Annual report⁵⁵ the Chief Inspector again stressed the need for a faster rate of improvement although also noting the complexity of safeguarding and promoting the welfare of vulnerable children and the fact there is much very good and innovative work. A particular issue noted is the wide variation in the standard and consistency of local authority children's services in Wales. The 6 key indicators used in this comparison show differences between the best and the worst performing local authorities of a maximum of 80% in the case of one indicator down to a minimum of approximately 16% on another.

125. The work of SSIW has posed the following questions:

- are social services for children and young people a high enough priority for WAG and for local authorities?
- are modernised local government organisational arrangements able to deliver the require service improvements and can local authorities be helped to learn from each other and improve more quickly?
- is there sufficient recognition of the Director of Social Services' accountabilities for children's services and for providing professional leadership and strategic direction?

126. Fundamental to the resolution of the concerning position with regard to children's social services is the re-establishment of a social work force of the required quantity and quality to provide good services and the need for greater and more consistent investment in provision for children in need and their families. The second point in particular has significant implications for the investment made in these children by education and health services.

⁵⁴ Social Services in Wales 2003-4: The Report of the Chief Inspector. SSIW (2004)

⁵⁵ Social Services in Wales 2004-2005: The Report of the Chief Inspector (2005)

127. Details of public expenditure on a range of provision for vulnerable children is extremely difficult to identify as this Report explores elsewhere. Within local authority children's social services expenditure is identifiable but, as the Chief Inspector reported, levels of expenditure on personal social services per head of the local population can vary significantly⁵⁶

Care Standards Inspectorate for Wales

128. This Inspectorate was established in 2002 and regulates social care, early years provision and private and voluntary health care services. As far as children's services are concerned this includes the regulation of children's homes, fostering services, adoption services and children's day care services which include child minding, full and sessional day care, out of school care, creches and open access play. The most recent annual report⁵⁷ records that there were 124 registered children's homes within the regulatory framework in Wales, providing 542 places and there is a continuing growth in the sector. The Chief Executive of CSIW notes the volatility in the sector with homes closing and new ones opening, and also the trend towards small homes with few places in rural areas. Any larger homes tend to be in urban areas. Most homes are operated by the independent sector and children are placed by local authorities in both Wales and England. Some concerning findings are recorded regarding the quality of planning for children, arrangements for protection of children, the management of behaviour and the general running of homes. It was also recorded that the reporting of child protection concerns was not evenly spread throughout Wales suggesting different levels of awareness in practice.

129. Local authority and independent sector fostering services were brought under the regulation of CSIW relatively recently. In March 2005 there were 36 fostering services across Wales. The inspection of quality of provision for children within foster homes and the safeguarding of children within foster homes is increasingly important. Family placement is the placement of choice for a large majority of looked after children, at the same time however children can be extremely vulnerable in a family setting because it is much more difficult to monitor. The new regulatory framework for day care services for children which came into force in 2002 has, in the opinion of CSIW, led to an improvement in quality of day care for children.

130. In all the settings regulated by CSIW a number of child protection concerns were reported. In children's homes for example 17% of these were substantiated and 34% were inconclusive, 14% were ongoing and 35% were felt to be

⁵⁶ Social Services in Wales 2003-4: The Report of the Chief Inspector. SSIW (2004)
Local Government Data Unit Wales - Social Services Statistics Wales 2003-4, National Assembly for Wales (2005); HM Treasury - Opportunity for all: the strength to take the long-term decisions for Britain. Pre-budget report. TSO.(Cm 6408) (2004).

⁵⁷ Care Standards Inspectorate for Wales Annual Report 2003-4, National Assembly for Wales 2004.

unsubstantiated. In this context it is also concerning that many of these children are placed at considerable distances from their home areas which presents difficulties for frequent contact with their social workers.

Research and other reports

131. The Review was proactive in gathering further factual and statistical information and expert opinion from individuals, organisations and research reports on a number of crucial areas. These sources covered:

- organised crime against children
- threats to children's safety posed by communication technologies including the internet and mobile telephones
- sexual exploitation of children
- independent advocacy for children and other arrangements for the independent representation of children's views
- children and poverty
- children and the courts
- insurance arrangements as they affect children's services and leisure activity
- children and organised sport
- children and organised religion
- children in relation to Trades Unions and Professional Associations and regulatory bodies.

132. Available financial information regarding the financial investment in children was also considered and the Review also explored issues from a National Assembly perspective with the Minister for Children, Jane Hutt and the Permanent Secretary, Sir Jon Shortridge.

133. The issues and information highlighted, or reinforced for the Review through this process have informed all aspects of the Report. There are however four important areas which will be discussed in more detail here. They are:

- the opportunities and threats represented by the Internet and other communication technology;

- children who are sexually exploited
- children and physical punishment
- independent advocacy and other independent representation of children
- the financial investment in children.

The Internet and communication technology

134. A specific requirement of the terms of reference of the Review was "to consider the risks and opportunities posed by the Internet and new technology in safeguarding children". It was clear to the Review Team from the outset that this vast and complex area was already subject to very comprehensive and expert attention at a national and international level. The Review therefore concentrated upon identifying the existing and developing initiatives and considering their implications for Wales.

135. Many initiatives have been taken at the UK and international level and, in the main, have developed as a result of the work of the Home Office Internet Safety Task Force which was established in 2001. The aim of the Task Force is to review Internet content and develop a scheme for assuring the safety of chat rooms, to develop knowledge and awareness, to enhance cooperation between police and Internet service providers, and to determine whether legislation afforded sufficient protection to children from online abuse. The Task Force has produced advice for parents and children on the safe use of the Internet and has also launched a web site⁵⁸ which includes resources like "Keep your child safe on the Internet", in Welsh and English and, "Using software to stay safe on the Internet". The Home Office has also produced in conjunction with the internet industry and children's charities the document "Models of good practice and Guidance for the Industry: Guidance on chat rooms, instant messaging and web-based services". This encourages clear safety messages and advice, and user-friendly ways of reporting abuse.

136. Other initiatives prompted by the Home Office Internet Safety Task Force are:

- NHTCU (the National High-Tech Crime Unit). This was established in 2001 to tackle computer-based crime including hacking, industrial espionage, computer viruses, organised paedophilia, money laundering and violent crime including kidnap
- Get Safe Online is an initiative of the NHTCU, UK government departments and private sector companies to launch an Internet security awareness campaign.

⁵⁸ www.thinkuknow.co.uk/parents

- National Internet Safety Centre - this was announced in April 2005 as part of "Connecting the UK: the Digital Strategy" outlined by the Prime Minister. This will aim to support police and child protection agencies. It will target paedophiles using the Internet to distribute illegal images and "groom" children. This centre will be attached to the Serious Organised Crime Agency and should be operational by April 2006. The Agency will be staffed by specialist police officers as well as child protection and Internet industry experts and is intended as a focal point for child protection work in this field. It will provide a 24-hour service for agencies concerned with protecting children, advice to victims and parents, work with international colleagues to share intelligence and target offenders, develop preventive and crime reduction strategies, and initiate proactive investigations to identify high priority targets and manage the national database of child abuse images
- The Virtual Global Task Force - was established in 2003 as a result of lessons learned from criminal investigations into online child abuse around the world. This alliance of international law enforcement agencies collaborate to try and make the Internet a safer place. It includes the Australian High-Tech Crime Centre National Crime Squad for England and Wales, the Royal Canadian Mounted Police, the US Department of Homeland Security and Interpol.
- BECTA (the British Educational and Communications Technology Agency). This addresses Internet safety education in schools; in 2003 it launched a scheme to develop safe and discriminating behaviours for pupils to adopt when using the Internet and other technologies, and provide teachers with support materials to help such development. Safety packs are available from BECTA and DfES Internet Safety Strategy Group. These provide Internet literacy programmes for young people and encourage an understanding of the Internet and associated technologies and helps young people to use them positively

137. There have been a number of very important research studies into young people and the Internet; in particular those conducted by Professor Sonia Livingstone at the London School of Economics⁵⁹, Dr. Rachel O'Connell of the Cyberspace Research Unit of the University of Central Lancashire⁶⁰, and specifically in Wales a study by Wise Kids which was funded by WAG and was carried out with young people between the ages of 14 and 19, and with teachers

⁵⁹ Livingstone, S. (2002) *Young People and New Media: Childhood and the Changing Media Environment*. London: Sage; Livingstone, S., and Bovill, M. (Eds.) (2001) *Children and their Changing Media Environment: A European Comparative Study*. Hillsdale, N.J: Lawrence Erlbaum Associates.

⁶⁰ *Cyber Stalking, Abusive Cyber Sex And Online Grooming: A Programme Of Education For Teenagers*. Cyberspace Research Unit (2004) (<http://www.uclan.ac.uk/host/cru/publications.htm>)

youth workers and librarians who work with young people and manage their Internet access in schools, libraries and youth clubs.⁶¹

138. There are some very well informed people in Wales who have expertise in these areas. In general however, familiarity and involvement appears to be very patchy and Wales generally appears to have been slow in taking up and introducing the initiatives and information which exists. The Report deals with this issue in some detail in Chapter 3 The Challenge under the heading of New Risks.

Children who are sexually exploited

139. There is a growing body of evidence that many young teenagers are exploited and abused through prostitution, pornography and trafficking for sexual purposes. In Wales in a recent survey in 20 of the Welsh local authorities⁶² 184 such cases were identified and this, we are told, is likely to be an underestimate. This area of child protection not only presents problems and dangers for the youngsters involved but can also be a dangerous area of work for police, social workers, youth workers and others because of the involvement of organised crime.

140. Sexual exploitation of this kind compromises the child's health because of risks of HIV and other sexually transmitted infections, miscarriages and unwanted pregnancies. The children involved are also more likely to have poor nutrition, be involved in substance misuse and be exposed to increased mental and physical health risks throughout their lives. Their educational opportunities and achievements and employment prospects are compromised and even permanently blighted. Their ability to develop emotional attachments and "normal" relationships is often irreparably damaged.

141. Research has shown that there is an identifiable pattern in which an older man befriends and sexually exploits children and coerces them into sexual activity with his acquaintances. A pattern develops of being picked up off the streets in cars, the offering of money, cigarettes, drugs, gifts or accommodation in return for sexual acts and sometimes being linked with net works involving certain taxi companies and restaurants. The predatory males who draw children into this net cleverly target their activities towards children who are unhappy, possibly homeless or living in residential homes. Once embroiled they are frightened and frequently feel that they cannot trust the police or the "authorities".

142. Adults are also increasingly abusing children via the Internet and mobile phones. Adult pornography is now accessible to children on the Internet and this is likely to adversely affect the developing attitude of a child to personal intimacy.

⁶¹ Ethnographic Research Findings for the Peer Mentoring Project, WISE KIDS 2004. (www.wisekids.org.uk)

⁶² Out of Sight, Out of Mind - Child Sexual Exploitation, Barnardo's (2005)

Much of this pornography is frightening, degrading and violent. Pornography is known to be used by some adults as part of a process to desensitise and groom children for possible future sexual abuse. Chat rooms have also been used to groom children and introduce them to pornography. In addition to this children are sold online, sometimes by their own family members or friends, via photographs for sexual abuse off-line. Other Barnardos work⁶³ has drawn attention to the national and international implications and the interconnections between abuse through prostitution, trafficking and the Internet. Mobile telephones are also increasingly used for contact between abusers and children.

143. The study by Barnardo's in Wales identified a widespread lack of awareness of sexual exploitation among local authorities in Wales and also that Area Child Protection Committees were not sufficiently active in promoting protocols for responding to these children. It highlighted the need for training and specialist advice and support for practitioners and for a specialist service in Wales which operates on a 24-hour basis. It found that a much more coordinated approach is needed which should include improving responses to reports of missing children and better sexual health care provision. The study has identified two major obstacles to providing services for such children. These are:

- no multi agency ownership of the problem and of the solution
- lack of multi agency commitment and willingness to invest resources

This is an issue which affects the most vulnerable of vulnerable children such as traumatised asylum-seekers and children who have already been abused or seriously neglected. They and the people who work with them deserve greater attention.

Children and physical punishment:

144. The Review endorses the pro-active stance taken by WAG in relation to assaults against children claimed to have been committed as an act of discipline. However, under the umbrella of "reasonable chastisement" children are still without the same legal protections against hitting as other members of society. Evidence was taken from "Children Are Unbeatable" which is the broadest campaign coalition ever assembled on a children's issue. It has the wide support of over 60 groups and agencies in Wales and over 300 individuals including AMs, MPs, MEPs, Welsh Peers, the Children's Commissioner and the Archbishop of Wales. A survey among social work professionals with an average of 13 years experience had the following results:

- 70% agreed the law was sending a message to parents that persistent and harsh punishment is acceptable

⁶³ Just one Click, Tink Palmer and Lisa Stacey, Barnardo's (2004)

- 86% felt that abusive parents occasionally or more often excused their abuse as 'reasonable chastisement'
- 46% believed that a significant number of child abuse cases started with light smacks and became harder and harder hits
- 68% agreed that law reform would "strengthen the ability of social workers to intervene earlier in order to protect a child at risk of abuse"

145. The key message which the alliance wished to convey is that the law should reinforce a message that hitting children is as unacceptable as hitting anyone else. It currently does not do this because of arguments that such a move would criminalise parents. However, the reality would be that in the event of a complaint the Police and the Crown Prosecution Service would take a view about whether a prosecution was warranted and the important aspect of a change in the law would be public education and changing attitudes towards acceptable methods of disciplining children.

146. Sweden abolished all kinds of corporal punishment of children by all carers in 1979 and has experienced no adverse and many positive outcomes as a result.⁶⁴ This ban followed a process of corporal punishment in institutions and eventually in the home environment. Children in Sweden now enjoy the same protection against assault under the law as adults do. The study by Save the Children in 1999⁶⁵ on the goals of the ban which were:

- to reduce public support for corporal punishment
 - to encourage earlier identification of children at risk of physical abuse, and
 - to facilitate earlier, more supportive intervention
- were broadly being met.

Independent advocacy, representation and participation:

147. Independent advocacy has been introduced within local authority social services to a limited extent and is being piloted in a limited way within the Health Service. This is a limited but positive development arising from the Waterhouse⁶⁶ and Carlile⁶⁷ Inquiries and the Children's Commissioner's report 'Telling Concerns'. WAG has also taken a proactive approach recently by commissioning both a Task and Finish Group and research on advocacy and research.⁶⁸

⁶⁴ "A Generation Without Smacking: The impact of Sweden's ban on physical punishment" Joan E Durrant Save the Children 1999 reprinted 2000

⁶⁵ Ibid

⁶⁶ op cit

⁶⁷ op cit

⁶⁸ A Study of Advocacy Services for Children & Young People in Wales, by Cardiff University School of Social Sciences, Social Inclusion Research Unit, NEWI, Dept of Child Health Wales, UWCM, (July 2005); Providing Effective Advocacy Services for Children and Young People Making a Representation or Complaint under the Children Act 1989, (2004)

148. There is however a wider group of posts carrying out similar functions. These are Independent Reviewing Officers, Independent Visitors, Personal Advisers and Children's Complaints Officers which are all roles established by law. Also within this spectrum of activity designed to focus upon and facilitate the representation of children's interests is Family Group Conferencing and the recent development in some local authorities of independent 'Children's Champions' in some areas. These initiatives all have similar objectives which are to facilitate the effective representation of the child's views and feelings and, where appropriate to support effective action on behalf of the child.

149. They are all welcome developments but because they have arisen at different times and for different reasons these initiatives are not part of a coherent concept of children's rights and representation and many of the individuals operating in these roles are isolated and minimally supported within unclear structures. It is also felt that some of these services and roles should have a broader, child rather than service, remit. Above all such posts and services are required to take a child rather than service perspective therefore the public sector services in particular should look flexibly at the potential they offer for strengthening the expression of a child perspective across service boundaries in a particular geographical area.

150. The Review received many comments and concerns about advocacy and the associated roles mentioned above. Some of these have been identified by the Advocacy Task Group in its report in October 2005 and are discussed in more detail in the "Study of Advocacy Services for Children and Young People in Wales" published by WAG in July 2005. The Task Group made five recommendations to WAG which are currently under discussion. These are:-

- I. To develop a new integrated regional advocacy service for complaints in health, social care and education
- II. That the regional partnerships proposed under recommendation 1 should develop specialist advocacy to meet the needs of vulnerable groups
- III. A program should be developed to capacity build advocacy as part of the wider participation agenda building on existing networks
- IV. There should be a new performance framework to measure children's rights, advocacy and participation
- V. A central advocacy unit should be established to develop the new structure and oversee implementation

151. The Review evidence supports much of what is in the Task Group report. However other related and significant issues, such as those noted above, were outside the Task Group remit.

152. The main concerns expressed in evidence were as follows;

the limitations of the existing services - that is, to very specific groups within social services and no service for children in the health service or other local authority services

the lack of true independence in the commissioning and funding of advocacy and consequential constraints upon advocacy providers

commissioning arrangements which create instability, insecurity, breaks in child advocate relationships and in continuity of service

fears among providers that a challenge to the local authority on behalf of a child could blight the contractual relationship and even lead to termination of contract

very variable service quality

very different models of advocacy

different levels of accountability of advocates

too short contract periods producing uncertainty and breaks in continuity of service

lack of established standards and of inspection and monitoring

isolation of many staff and volunteers who are broadly involved in advocating for children in different but related roles

different support, monitoring and resolution systems surrounding the roles listed above

153. The Children's Commissioner for Wales has carried out two reviews of existing services and arrangements for children's complaints, children's advocacy, and whistleblowing, in the 22 local authority social services and LEAs in Wales. Telling Concerns was published in 2003, and Children don't complain... in 2005. Among his recommendations he underlined the need for a 'one stop shop approach' to dealing with children's complaints; a clear linkage between whistle-blowing procedures and the formal child protection systems; and the establishment of a WAG co-ordinating unit for advocacy.

154. The Health Service was not within the remit of "Telling Concerns" however, a survey of Community Health Councils (CHCs) and the Board of Community Health Councils, was conducted by the Commissioner's office and completed in October 2005. This established that only two CHCs had child advocates and that

CHCs did not promote themselves in any way as providing an advocacy service for children. Only one CHC had a specific reference to children on its website and this CHC was planning to set up a junior CHC but then only to consider children aged 13 to 18 because of a partnership with Welsh Baccalaureate Schools. Other responses suggested the following: some CHCs are aware of local advocacy projects and refer to them occasionally; one CHC is aware of a hospital based pilot advocacy project and refers occasional cases to that; one CHC has developed a junior CHC with more general application; most confirmed that any contact with children was via their parents and there was some lack of clarity about the need for parental consent. There appeared to be a general lack of awareness of independent advocacy for children. This survey confirmed other evidence to the Review that systems of independent advocacy and complaint are largely undeveloped in the health service.

155. The evidence to the Review was therefore strong and consistent in pointing the need for a more coherent vision, set of principles and framework for advocacy which should also embrace the related roles of Independent Reviewing Officers, Independent Visitors, Personal Advisers, Children's Complaints Officers, Children's Champions, and Participation Workers. Also other related initiatives, such as Family Group Conferencing, which is not widely developed in Wales at present, should be evaluated and if found to be effective should be incorporated into the framework. A framework of this kind would better facilitate the independent support and advice needed by people who work in this field, some of whom are very isolated, and the development of these services across departmental boundaries. It should also help to clarify and rationalise more independent processes for resolution of the individual and general issues raised with and identified by these services. Very importantly it should facilitate the development of systems for monitoring the quality and accountability of these services which are not satisfactorily addressed at present.

156. Proposals for addressing these issues are developed in Chapter 4.

Financial investment in children

157. Because finance is a vital factor in any analysis of how a society safeguards its children the Review intended to examine the public financial investment in children, and how that investment was allocated. However, the different methods used by public bodies to set out their budgets and expenditure made it impossible, in the time available, to identify elements of budgets in many sectors which were actually allocated to children's services. For example in areas of the health service the proportions of expenditure on services to children is not identified. There have in the past been indications in particular services, for example, a survey by the Royal College of Psychiatrists (Child Psychiatry section) in the early 1990s, found that while children comprised 20% of the population and suffered mental illness at a similar

level to that of adults the children's mental health services received only 5% of the mental health budget. The current concerns about availability of child and adolescent mental health services suggests that while these proportions may have improved the financial information is not sufficiently transparent and it is difficult to make comparisons.

158. The Review was not able to commission a major financial analysis of the funding of services for children in Wales because of the difficulties described and the time available. Some general information produced for the Review by WAG officers is sent out in Appendix 6. The Review is also aware that the Wales Audit Office intends to conduct a study of children's services but details of that are not yet available. In addition to the information in Appendix 6 the Review considered two reports, one conducted by the Institute of Public Finance for the National Commission into the Prevention of Child Abuse in 1999⁶⁹ which was a UK wide study, and the other commissioned by Save the Children (Wales) and published in 2003.⁷⁰

159. Both studies experienced similar difficulty in determining the amount spent on public services for children. Tom Sefton author of "A Child's Portion" concluded that "it is difficult to make any definitive judgment about the amount spent on public services for children in Wales, because of problems in attributing public expenditure to individuals and limitations with the data". He also concluded that "social services spending on children has been significantly below levels in England" although "the gap has narrowed substantially in recent years". He also drew attention to "some evidence..... that Wales has not matched recent increases in spending on schools in England" and that although "spending on health care has risen fast.... children may not be benefiting as much as of the older age groups". This study did not examine other areas of public spending on children such as the police and courts and young offender services.

160. The Institute of Public Finance (IPF) also experienced difficulty in identifying public expenditure on children by various public bodies. The objective of their study was to assess the cost to public services, including the voluntary sector, of schemes designed to prevent family breakdown, abuse of children and children getting into trouble with the law. Then to compare these costs with public expenditure on dealing with the consequences of cruelty, neglect and other abuse of children. Studies were carried out in 1996 and 1999 and the figures showed that despite a real terms increase in overall expenditure over the period the expenditure on prevention and early intervention as an overall proportion had diminished and was on a diminishing trend.

⁶⁹ Don't Neglect the Cost, Institute of Public Finance Ltd. (1999)

⁷⁰ A Child's Portion: Public Spending on Children in Wales by Tom Sefton, Save the Children (2003).

161. In compiling figures the study noted similar difficulties in accessing useful information and identified these as:

- the number of organisations involved;
- the lack of consistent definitions;
- the differences in the classification of expenditure on services for children;
- the problems in relating non financial to financial data.

162. The evidence to the Review suggests that little progress has been made in resolving these problems although it is known that there have been working groups and pilot projects in some English local authorities.

163. The importance of developing a sound and comprehensive financial information base for children's services is crucial to the objective of safeguarding vulnerable children. The Chief Social Services Inspector and others have pointed out in recent years the perceptible reduction in services to provide targeted and skilful interventions at an early stage in the development of a problem, and the increase in heavier, more costly, and frequently less effective interventions after things have gone badly wrong for a child. In addition to this, despite legislation and government strategies which aim to develop effective early intervention services there has never been sufficient financial investment in them.

164. The importance of knowing precisely what is spent by all services for children, including police and court and justice systems, is highlighted by the Dartington Social Research Unit research review for the Department for Education and Skills in England in 2004. This looked at research conducted throughout the UK and in the United States and Australia. In their publication "Refocusing Children's Services Towards Prevention: Lessons from the Literature"⁷¹ they concluded unequivocally from the "extensive and robust evaluations of numerous prevention programmes" that there were very good reasons for shifting the investment in children's services. They concluded that there should be a much greater emphasis and a clearer focus upon "front-end" services by which they mean targeted prevention and early intervention. The weight of research evidence supports the view that there should be a change in the balance of funding away from what the researchers call the "heavy end" provision. By this they mean "treatment and social prevention intended to remedy serious difficulties and reduce the negative impact that those with difficulties have on others". This of course includes the high investment in

⁷¹ Refocusing Children's Services Towards Prevention: Lessons from the Literature, Dartington Research Unit Research report 510, DfES Publications (2004)

punishment and locking children up which all evidence suggests is generally counter productive.⁷²

165. The research review argues that there are very good scientific as well as pragmatic reasons for refocusing services in this way. The benefits which are identified include measurable improved outcomes for children in terms of their health and development. However, the researchers also identify five further benefits:

- Improved inter agency working
- Improved efficiency
- Improving the experience of service users
- Improved practice and outputs
- Increased user involvement

166. Refocusing is not without risks if not done properly and it certainly does not mean the entire removal of "heavy end" services. It needs to be very carefully planned within a sophisticated and balanced design for the range of services and provision in an area. The planning also needs to incorporate the understanding that "early" does not necessarily mean early in a child's life but early in the 'life' of an identified problem. It also needs to understand that:

- the wrong preventative interventions can be intrusive and potentially harmful;
- good prevention is often intensive and rigorous and not cheap;
- staff and service users must be fully involved in development;
- if responses are not based on causes they will be ineffective and possibly even harmful; and
- services should build on families' own strengths.

167. Essentially, refocusing is not a cheap option. However, the right changes in the balance of service provision and funding would, the evidence suggests, lead to better quality services, better outcomes for children and the community and much better value for money.

168. Research evidence suggests therefore that there should at least be serious consideration of a shift in the overall balance of investment to ensure more effective safeguarding of vulnerable children. To achieve this some basic changes would be required such as the establishment of a comprehensive database of all public expenditure on children together

⁷² Hough, M., Jacobson, J. and Millie, A. The decision to imprison: sentencing and the prison population. London: Prison Reform Trust. (2003);

A failure of justice: reducing child imprisonment. London: NACRO (2003) Some facts about young people who offend (2001)

with an analysis of unit costs of all children's services, including those services, particularly within the NHS, which are located within adult services. This approach would also accord with the views of the United Nations Committee on the Rights of the Child when they called for an analysis of budgets available for children across government "...to show the proportion spent on children..."⁷³ There would also need to be firm political and managerial commitment at national and local levels to the concept of an integrated strategic approach to services for children underpinned by a joined up approach to finance.

169. Serious consideration of this evidence could lead to a refocusing of services and funding which would be good for children and for the community in that early and appropriate interventions are more likely than later and more punitive interventions to contribute to the development of adults able to play a fulfilling and constructive part within their communities.

⁷³ Concluding observations of the Committee on the Rights of the Child: United Kingdom of Great Britain and Northern Ireland. 9/10/02.CRC/C/15/Add.188 (Concluding Observations)

APPENDIX 1

MEMBERS OF THE REVIEW

Gwenda Thomas AM	Chair
Raymond Ciborowski	Director, Barnardo's Cymru
Mike De Val	Strategic Director - Children and Young People, Torfaen County Borough Council
Andy Edwards	Assistant Chief Constable, Dyfed Powys Police
Dr Carys Graham OBE	Consultant Paediatrician, Designated Doctor Child Protection, North Wales (NPHS)
Ruth Henke	Barrister (practising in family law and the law affecting children)
Dr Sally Holland	Senior Lecturer, Cardiff University School of Social Sciences
Joe Howsam	Director of Social Services, Caerphilly County Borough Council
Meirion Hughes	Chair of Denbighshire Local Health Board and Chair of the Welsh NHS Confederation
Deborah Jones	Chief Executive, Voices From Care
Ken Sawyers	Chief Executive, Neath Port Talbot County Borough Council

Observer

Rhian Davies	Assistant Commissioner (Policy and Service Evaluation), Children's Commissioner for Wales
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APPENDIX 2 EVIDENCE TO THE REVIEW

The Review thanks the following for their written and oral contributions

Written evidence

Army Welfare Service
Autism Cymru
Barnardo's
British Association of Social Workers (BASW) Cymru
Blaenau Gwent County Borough Council
Bridgend Local Health Board
Bro Morgannwg NHS Trust
Caerphilly County Borough Council
Caerphilly Local Health Board
CAFCASS (Cymru)
Care Council for Wales
Chartered Society of Physiotherapists
Children's Commissioner for Wales
Child Protection Service/National Public Health Service for Wales
Children in Wales
City and County of Swansea
Conwy and Denbighshire NHS Trust
Crown Prosecution Service
CSV Volunteering Partners Cymru/Wales
Directors of Education
Director of Social Care and Housing, Pembrokeshire
Dr Mair Edwards, clinical psychologist
Flintshire County Council
Gwent Healthcare NHS Trust
Gwynedd County Council
Her Majesty's Prison and Young Offenders Institution, Parc
Medical Defence Union
Merthyr Tydfil Area Child Protection Committee
Mid and West Wales Fire and Rescue Service
NCH (Cymru)
Neath Port Talbot Area Child Protection Committee
Neath Port Talbot Local Health Board
North West Wales NHS Trust
Newport Local Health Board
North Wales Directors of Nursing
North Wales Magistrates' Courts
North Wales NHS Trust
NSPCC
Nurse Directors – Bridgend, Powys, Carmarthen Local Health Boards

Nurse Directors – Rhondda Cynon Taff, Merthyr Tydfil Local Health Boards
Pembrokeshire Local Health Board
Police Service
Powys Local Health Board
Rhondda Cynon Taff Area Child Protection Committee
Royal College of Midwives
Royal College of Paediatrics and Child Health
Save the Children
South Wales Child Protection Forum
Swansea NHS Trust
The Hon. Mr Justice Hedley: Family Division Liaison Judge for the Wales and
Chester Circuit
Tros Gynnal
Voices From Care (Cymru)
Welsh Ambulance Service NHS Trust
Welsh Association of ME/CFS Support (WAMES)
Welsh Local Government Association
Wise Kids
Wrexham Area Child Protection Committee
Youth Offending Team Managers Cymru

Oral evidence

Advocacy providers (Roger Bishop - Tros Gynnal; Sian Jones – Spurgeons;
Darren Northall - NSPCC; Adrian Pugh - NYAS)

Association of Directors of Education in Wales (ADEW) (Phil Cooke –Corporate
Director, Lifelong Learning and Leisure, Monmouthshire County Council)

Association of Directors of Social Services (ADSS) (Sally Ellis – Corporate
Director of Personal Services and Acting Chief Executive, Denbighshire)

Barnardos Cymru (Yvonne Rodgers; Jan Coles)

British Association of Social Workers (BASW) Cymru (Carys Davies; Penny
Lloyd)

Children Are Unbeatable (Jill Taylor)

Dr Mair Edwards (clinical psychologist)

Faith organisations (Vivian Bartlett – Baha’i Faith; Sarah Griffiths – Evangelical
Alliance; Jane Harries – CYTUN)

Family Group Conferencing organisations (Keith Buckler – co-ordinator, Vale of
Glamorgan; Mike Clark, Mr and Mrs Stephen Camilleri – Cardiff Family Group

Conference Project; Susie Hamill – NCH, Carmarthenshire; Sandra Foxhall, Charlotte Sayle – Cwlwm project, North Wales)

General Medical Council (GMC) (Natalie Drury; Cathy Irving; Fiona Peel; Dr Roger Worthington)

Medical Protection Society (MPS) (Dr Mark Dudley)

Minister for Children – Jane Hutt AM

National Public Health Service in Wales (Anne Eccles; Dr Aideen Naughton)

National Association of Schoolmasters and Union of Women Teachers (NASUWT) (Rex Phillips)

National Union of Teachers (NUT) (Dr Heledd Hayes; Anton Lewis; Gethin Lewis)

North Wales Child Protection Forum (Dr Sarah Horrocks, consultant paediatrician in community child health; Sue Maskell – Head of Children’s Services, Conwy CBC)

North Wales Directors of Nursing (Sue Owen)

Permanent Secretary National Assembly for Wales, Sir Jon Shortridge

Professor Andy Pithouse (School of Sciences, Cardiff University)

Public sector insurers (Harry Bate - Zurich Municipal; Phil Bell - Royal Sun Alliance; Craig Templeton - Norwich Union)

Royal College of Nursing (RCN) Welsh Board (Jim Richardson; Fay Valentine; Helen Wiley)

Royal College of Paediatrics and Child Health (RCPCH) (Dr Paul Davis; Dr Alison Maddox; Dr Alison Mott; Professor Jo Sibert)

Society of Local Authority Chief Executives (SOLACE) (Colin Berg – Chief Executive, Monmouthshire County Council; Gareth Newell – Executive Officer, SOLACE)

Sporting organisations (Steve Bocock – NSPCC; Paul Evans – Football Association Wales; Sarah Thomas – NSPCC; Mike Wardle – Welsh Amateur Boxing)

UNISON (Paul Elliott)

Welsh Local Government Association (Steve Thomas, Beverlea Frowen)

Presentations

Care Council for Wales (Gerry Evans; Rhian Huws Williams)

Care Standards Inspectorate for Wales (Rob Pickford)

Jim Gamble, Deputy Director General, National Crime Squad (Internet issues)

NSPCC (young people's project)

Social Care Institute for Excellence (Lisa Bostock) (risk assessment)

Social Services Inspectorate for Wales (Graham Williams)

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'The Learning Country: Foundation Phase 3-7' (2003)

'The National Service Framework for Children, Young People and Maternity Services in Wales' (2005)

'Parenting Action Plan' (Jan 2006)

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'Review of Children's Cases (Amendment) (Wales) Regulation' (2004)

'Response to Lost in Care'(June 2000)

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'Staff Disciplinary Procedures in Schools' (2004)

'Working Together to Safeguard Children – a guide to inter-agency working to safeguard and promote the welfare of children' (2000)

Welsh Local Government Association & Welsh Assembly Government - *'If this were my Child...A Councillor's Guide to Being a Good Corporate Parent'*, (March 2005)

Welsh Office - Circular 123/74 *'Non Accidental Injury to Children'* (1974);

Welsh Office - Circular 31/89 *'Area Child Protection Committees Implementation'* (1989)

Welsh Office - Circular 80/76 *'Non Accidental Injury to Children: Area Review Committees'* (1976)

WISE KIDS – *'Ethnographic Research Findings for the Peer Mentoring Project'* (2004)
(www.wisekids.org.uk)

APPENDIX 4 EVIDENCE FROM INSURERS

Note: Some evidence received by the Review suggested that fear and uncertainty in regard to litigation and insurance may inhibit the taking of appropriate risk in activities for groups of children or making arrangements for individual children. There appears to be a belief among some professional staff and volunteers that the Insurance Industry does not encourage activities with children which might carry an element of risk; that it is resistant to information sharing which might be in a child's best interests; and that it is not cooperative in making appropriate compensation to a child who has suffered abuse.

The Review therefore invited the Insurance Industry to give evidence and is grateful for their co-operation. This evidence suggests that some of the beliefs about the approach of Insurers are not accurate. It also highlights the possibility that some of the concerns arise because the 'messages' heard by practitioners may have been to some extent distorted in the process of being conveyed via Brokers, finance managers and operational managers. The overall message is that the Association of Insurers broadly encourages the taking of appropriate risk provided proper assessments and safeguarding arrangements have been made and is keen to offer help and advice.

It is hoped that this fairly detailed Appendix will help to clarify a problematic issue

The following is a statement prepared by the Association of British Insurers:

"The Association of British Insurers welcomes the opportunity to contribute towards your review of child protection issues. In addition to our own family interests, good risk management is a subject that is very close to our heart and we are always supportive of any initiative that raises awareness and standards.

I would like to start by saying that Insurers believe that it is absolutely right that victims of abuse should receive financial compensation for their suffering.

As a matter of principle, Insurers of welfare providers reasonably expect to be told of matters that may give rise to claims against the provider, and of steps the provider is taking to investigate them. This enables the Insurer to properly advise the provider of the insurance and legal implications of any proposed action. This notification is nearly always a condition of the insurance policy.

Where there are allegations of abuse, detailed investigations will be required to establish the circumstances of a particular case or claim, which may include inquiries and criminal investigations.

The insurance policy is to protect the provider against the financial consequences of claims and it usually requires the providers a not to make any admission of liability or promise of payment without the consent of the insurance company. This is to protect the providers a from inadvertently jeopardising the position.

In general terms, insurers do not wish to be involved in the setting up of inquiries or the publication of reports. However, we may well wish to participate in an inquiry and our role is very much to cooperate, protect our policyholder's interest and give them advice. Because of their nature, these investigations can be complex and time-consuming. Insurers will make admissions of liability on the behalf of policyholders and promptly meet claims for fair and just compensation if clear evidence of liability emerges from the investigations. There is no benefit to insurers in withholding admissions of liability or in delaying the payment of genuine claims.

As for information sharing, we encourage the sharing of information, including at time of employment. In relation to responding to allegations, we would expect each organisation to have a Designated Person, properly trained to deal with the issues, to whom all complaints are reported. We would expect there to be written procedures which include the prompt notification of such allegations to the Social Services or the Police.

I mentioned at the beginning that good risk management is very close to our heart. This means that we give advice to policyholders on, for example, how to improve health and safety in the workplace, fire and crime prevention and also make "helplines" available to policyholders on a variety of subjects. Some Insurers also provide risk management advice in the area of protecting children and vulnerable adults, especially where we are dealing with activities such as care homes, boarding and day schools and religious organisations.

It would be wrong to assume that our role is limited to when there is a claim or an allegation, we have a role to play in raising standards and preventing opportunities for abusers to be active. We can help the welfare provider to identify and implement "best practice" and also help them undertake risk assessments and address any shortcomings. In doing this, we recognise the importance of reasonable freedom and good learning experiences for children, we have no desire to interfere with this. We wish to make sure that the practices and procedures are appropriate for the activities, not to restrict the activities. It is a myth that insurers prevent certain activities, I have certainly never seen it in many years involvement with this class of insurance.

Within my own company, a number of our staff involved in this area have received specialist training from the NSPCC. We also employ experts in these offices with experience in child protection and in view of the complexities and sensitive nature of these claims they are handled by a trained, specialist team. Each Insurer will have his own system for training staff. There are also specialist law firms that we will all use.

As for the approach being adopted in the USA, this is a matter of policy; we do

not support it or reject it. There are many fundamental differences to the legal system within the USA and ours. We have no problem with policies that encourage 'whistleblowing' but giving immunity to persons making allegations in good faith will have little impact on insurance.

We are happy to answer any questions you may have on what I have said and any more general questions or issues that you wish to raise."

Statement made by Phil Bell (Technical Manager, Liability) Royal and Sun Alliance on behalf of the ABI

Further oral evidence was given by representatives of the Royal and Sun Alliance, the Norwich Union and the Zurich Municipal on behalf of the ABI. This emphasised some key points on behalf of the Insurance Industry:

- organisations should have proper written procedures for safe practice including prompt notification to either the social services or to the police where assault is alleged
- we are keen to offer advice in developing procedures and practices
- we recognise that it is important that children have reasonable freedom for good learning experiences
- it is a 'myth' that the industry stops organisations from undertaking certain activities
- many companies have involved NSCPCC and others in training staff and have specialist staff to deal with matters involving abuse of children
- we accept that when children are harmed and claims follow, their role is to try to co-operate with authorities and deal with any claim in a speedy but fair way
- we accept that risk cannot be eliminated from life and that children have to learn how to deal with risk
- we feel that the 'compensation culture' is beginning to be better controlled and that part of the Compensation Bill seeks to regulate the claims management industry

- we, through the ABI, put information out into the public domain. eg the recent guidance on insurance issues for charities and the voluntary sector”⁷⁴
- we work with umbrella organisations such as sports governing bodies as well as clients to help improve appropriate safety measures
- we feel that our overall attitude and approach may not be conveyed to those who work with children because it is communicated through finance and other local managers and insurance brokers who may have limited understanding of work with children
- we often prompt organisations who have no proper safety or child protection procedures to address the safety issues
- we encourage whistle-blowing because it is better to express concerns and investigate them rather than allow them to be concealed. It could be argued that under the Health and Safety at Work Act, where there is a duty upon employees to take care for themselves and for others, there is an implied duty to whistleblow
- there is nothing to be gained in trying to suppress information and probably more to lose.
- there is a place for making apologies to children who have suffered abuse we have helped providers to prepare for this
- we would be prepared to discuss with the caring agencies or victim support organisations how methods of communication with victims of abuse might be improved

Finally, the representatives of the Insurers quoted from a presentation given by a Police Officer conference on safeguarding children:

‘In God we trust!’ ‘And we check everybody else!’

As they said, “it is not about distrust or disbelieving people; it is about making sure that children are safe”

⁷⁴ Living With Risk – Risk Management and Insurance Advice for the Voluntary and Community Sector (Association of British Insurers July 2005)

APPENDIX 5
EXPENDITURE ON CHILDREN IN WALES

Table 1 - Expenditure on children's services in Wales		£m 2003-04	Source
1	Children's Education		
1.1	Schools, including education welfare (a)	1,716.3	(1)
1.2	Youth service	43.4	(1)
2	Children's Health		
2.1	As a proportion of general health expenditure (b):		
2.1.1	Hospitals and community health services	375.5	(2)
2.1.2	General medical services	54.0	(3)
2.1.3	Drug prescribing	31.4	(4)
2.2	Specifically targeted services (included in 2.1.1 above):		
2.2.1	Paediatrics (including paediatric surgery)	74.7	(5)
2.2.2	Health visiting	16.6	(6)
2.2.3	Obstetrics	83.5	(5)
2.2.4	Community midwifery	20.3	(5)
2.2.5	School nursing	6.3	(5)
2.2.6	Child and adolescent mental health (including hospital, day care and community)	15.6	(5)
3	Children's Social Services of which:	229.8	(1)
3.1	Commissioning and social work	67.3	
3.2	Looked after children (ie in residential homes, foster homes)	106.7	
3.3	Family support services	31.8	
3.4	Youth justice	14.9	
3.5	Other children's and families' services	23.9	
4	Youth offending teams, as reported by the Youth Justice Board	14.1	(7)
5	Children's sport and leisure, specific targeted projects:		(8)
5.1	Dragon Sport (providing opportunities for extra curricular sport and physical activities in primary schools in Wales)	1.0	

5.2	The Sports Council for Wales is currently investing £16,000 in a joint NSPCC post with the Child Protection in Sport Unit.	<0.1	
6	Children's Commissioner for Wales, administration costs	1.3	(9)

- (a) Education welfare includes costs of educational psychology services in SEN provision and behavioural support. LEAs report 134 full-time and 48 part-time (101.5 whole-time equivalent) educational psychologists, and 8 unfilled full-time posts.
- (b) Excludes other primary healthcare such as pharmacy, optical, dental services, for which no data sources were identified

In addition to the expenditure identified above, there is expenditure that cannot be easily extracted from overall expenditure on services that benefit both children and adults. This includes children's use of general sports facilities and informal play facilities and police expenditure relating to children not included in YOTs support, eg formal child protection systems, attendance at court, attendance at domestic disputes involving children, dealing with youth crime and anti social behaviour.

There is in addition expenditure by CAF/CASS in Wales, which is not easily available at the current time because of the transfer of CAF/CASS Cymru to the Welsh Assembly Government. CAF/CASS expenditure for previous years is difficult to extract because some support services were provided on an England and Wales basis.

Sources for expenditure data in Table 1

- (1) 2003-04 local authority outturn data from the Welsh Assembly Government StatWales website, <http://www.statswales.wales.gov.uk>
- (2) Health Statistics Wales 2005, Table 15.4, gives £2,682.5m as the expenditure, excluding primary healthcare, in 2003-04 by Local Health Boards, the Dental Practice Board and Health Commission Wales. 14% of this figure was taken as the estimate of spending on the 0 to 15 age group plus births, based on an estimate by the Department of Health for England in 2002-03 (Departmental Report 2005, Figure 6.2).
- (3) Health Statistics Wales 2005, Table 15.6, gives £270.1m as the expenditure on general medical services in 2003-04 by Local Health Boards, the Dental Practice Board and Health Commission Wales. 20% of this figure was taken as the estimate of spending on the 0 to 15 age group, based on the average percentage of consultations with patients under 16, General Household Survey 1993-1998.
- (4) Statistical Bulletin SB 53/2005 gives a total Net Ingredient Cost of prescriptions in 2003-04. 5.7% of this figure was taken as the estimate of the cost of

prescriptions for the under 25 age group, based on the percentage of net ingredient cost represented by prescriptions exempt because the patient was aged under 25.

- (5) NHS Trusts Financial Return TFR2 summary for 2003-04.
- (6) NHS Trusts Financial Return TFR2 summary for 2003-04 gives £30.2m as the total of health visiting costs. 55% of this figure was taken as the estimate of costs for the under 15 age group, based on the percentage of first contacts with this age group (Health Statistics Wales 2005, Table 12.3).
- (7) Youth Justice Board Annual Statistics 2003-04
- (8) Welsh Assembly Government Sports Policy Unit
- (9) Children's Commissioner for Wales Annual Report 2003-04

Table 2 - Sources of funding for Youth Offending Teams	Expenditure 2003-04 £
Youth Justice Board	2,648,729
Police	1,220,338
Probation	1,102,826
Social Services	7,329,164
Education	467,985
Health	644,363
Local Authority Chief Executive	680,135

Source: Youth Justice Board Annual Statistics 2003-04

Table 3 - Nursing, midwifery and health visitor staff by area of work	30-Sep-04		
	Number	Whole-time equivalent	% of total WTE
All areas	41,675	27,407	100.0%
Acute elderly & general	25,721	16,069	58.6%
Paediatric nursing	1,362	1,038	3.8%
Maternity services (including SCBU)	2,791	1,874	6.8%
Community psychiatry	1,058	920	3.4%
Other psychiatry	4,546	3,329	12.1%
Community learning disabilities	543	400	1.5%
Other learning disabilities	594	497	1.8%

Community services	4,746	3,025	11.0%
Education staff	40	36	0.1%
School nursing	118	73	0.3%
All learners	156	146	0.5%
Sub-total:			
Paediatric, maternity and school nursing	4,271	2,986	10.9%

Table 4 - Details of expenditure reported by local authorities for children's social services	Net expenditure 2003-04 £m
Commissioning and social work	67.3
Looked after children	106.7
Family support services:	
Family centres	5.9
Services for under 8s	7.5
Direct payments	0.046
Home care	2.5
Equipment and adaptations	0.6
Other family support services	15.3
Youth justice:	
Secure accommodation (justice)	0.3
YOTs and other youth justice services	14.6
Other:	
Adoption services	4.6
Leaving care services	8.7
Other children's and families' services	10.6
All children's and families' services	244.6

Source for Tables 3 and 4 : StatsWales internet site,
<http://www.statswales.wales.gov.uk>

APPENDIX 6

A FRAMEWORK FOR PLANNING AND ANALYSING SERVICES

The origins of the model developed by Pauline Hardiker and Mary Barker of the University of Leicester and Ken Exton of North Yorkshire Social Services Department were in a feasibility conducted for the then Department of Health in 1989. Since then it has been used and refined further in conjunction with many local authorities, voluntary organizations and Area Child Protection Committees.

It is a tool which takes a child focus and cuts across service and policy boundaries and may be used for planning analysing and evaluating the wide range of services which contribute to meeting the needs of children. In 1995 the National Commission of Inquiry Into the Prevention of Child Abuse published an updated version of the tool⁷⁵ in the belief that it would contribute to the wider debate (which continues) about the balance between child protection, family support and preventive services.

The Initial Formulation of the Framework:



University of Leicester
School of Social Work

Models of welfare	Residual	Institutional	Developmental	Radical
Level of prevention 1. <i>Primary</i> i) action to prevent problems from arising ii) action to reduce the need for the formal services of the SSD			1. <i>Primary/developmental</i>	
2. <i>Secondary</i> i) early identification of and action to resolve problems ii) intervention aimed at early restoration of non client status		2. <i>Secondary/Institutional</i>		
3. <i>Tertiary</i> i) action to prevent the worst effects of chronic well established problems ii) action to prevent clients from being drawn into increasingly intrusive and damaging interventions	3. <i>Tertiary/residual</i>			
4. <i>Quaternary</i> i) action to prevent damage arising from long term substitute care ii) permanency planning				

MODELS OF PREVENTION IN CHILD CARE

⁷⁵ Pauline Hardiker, Ken Exton & Mary Barker A Framework for Analysing Services – Discussion Paper 1 National Commission of Inquiry Into The Prevention of Child Abuse. Also printed in National Commission Report *Childhood Matters* Vol 2: Background Papers

Examples of Practical Applications of the Framework:

Leicestershire ACPC

MULTI-SERVICE CHILD CARE POLICIES & PRACTICES

WELFARE MODEL				
L E V E L S O F I N T E R V E N T I O N		Minimum Necessary Intervention (Last Resort)	Family Support (Recognition of Needs)	Multiple Interventions (Addressing Social Disadvantages)
	First Level (Universal)	Policeman on beat Police checks NSPCC Advertising Public awareness Social Services Regulatory Function Child Minders/Playgroups	Health Visitor Service Primary Care Provision by G.P.'s etc. Social Work Access Teams Sign Posting Training for Child Minders/Playgroups on recognition PPA Movement	Policeman in School Kidscape in School Curriculums Child Protection addressed in Teacher Training Doctors/SW Qualifications
	Second Level (Early Risks)	Health Visitor/GP/Schools SW's monitoring concern Domestic Violence Officers in Police	Health Visitors Visits Day Nurseries/Family Centres or sponsored places in Playgroups Child Minders Education Special Needs Provision Day Fostering Social Work Intervention (including Family) Homestart etc.	Homestart/Family Aid Packages Medical Social Workers Education Welfare Officers Involved in modifying Behaviour, or Disability. FSU, Pun for Families Child/Family Guidance
	Third Level (Remedial Intervention)	Child Protection Registrations/Plans Court Interventions Social Work Intervention (Use of DBIT's Family Aids) Focused Assessments using Family Centres etc. FSU (work with Probation) Perpetrators	NSPCC Therapeutic Interventions Child and Family Guidance	Respite Care for Disabled Children Boarding Education for Special Needs Children
	Fourth Level (Rehabilitation or Damage Limitation)	Court Sanctioned Residential Care Foster Care with Psychiatric Involvement and Care Plans for rehabilitation or substitute parenting	Child 'accommodated' by authority whilst package of assistance to Family	

1. Services for black children at all levels.
2. Clarity required about Social Services definition of Children in Need.
3. There is urgent need to record need for services for child protection not being met.
4. Need for therapeutic Services by Child and Family Guidance, NSPCC, FSU seen to be short supply.
5. School Exclusions for behaviour seen to be biggest new problem to be tackled.
6. Use of the Map could help:
 1. Clarity of where child is in Risk Analysis by different agencies.
 2. In specifying what needs to be available to move child down levels of Intervention safely.
 3. In prioritising what needs to be down to allow more families to be in lower bands safely.
7. Areas for Strategic Consultation:
 - a) Inputs to Training of New Start/School Curriculums.
 - b) Resolution of whether Family Centres/Day Care can be used for early risks.
 - c) Recording unmet need for therapeutic activities.

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Northamptonshire County Council
Measuring Effectiveness

TABLE ONE: MEASUREMENT OF EFFECTIVENESS – A SUGGESTED FRAMEWORK

LEVELS AND TARGETS OF INTERVENTION	AIMS OF INTERVENTION	MEASURES OF EFFECTIVENESS INPUTS (EXPENDITURE/ SERVICES)
<p>1. PRIMARY PREVENTION OR "DIVERSION"</p> <ul style="list-style-type: none"> * vulnerable groups and/or communities * individual/families approaching the Department for help 	<ul style="list-style-type: none"> * prevent formal dependency on the Department * to prevent entry into client status 	<ul style="list-style-type: none"> * duty/intake services * signposting/info services * "outreach" services (GP attachments, Resource Team at Northwood) * day care services for pre-school children
<p>2. SECONDARY OF "EARLY" PREVENTION</p> <ul style="list-style-type: none"> * families in temporary crisis * families whose difficulties are not yet such that there is a high risk of breakdown and admission of a child to care * families whose difficulties were previously of a higher order but are now being satisfactorily resolved 	<ul style="list-style-type: none"> * to effect changes in personal and/or social functioning and/or social circumstances such that the Department's intervention is no longer required and the case can be closed or supported at the primary level 	<ul style="list-style-type: none"> * child care teams * Children's Centre * day care services * JLB's * Section 11 payments * groupwork budget * financial support to voluntary agencies
<p>3 TERTIARY OR "HEAVY END" PREVENTION</p> <ul style="list-style-type: none"> * families with chronic well-established problems where there is a high risk of a breakdown and admission of a child to care * children in need of protection and/or control * families whose children were previously in care and for whom a rehabilitative plan has recently been effected 	<ul style="list-style-type: none"> * to effect changes in individual and/or family functioning such as a diminish the needs for a child's admission to care to maintain chronic situations where change is unlikely * to reduce agency input and/or statutory controls as soon as it is appropriate to do so 	<ul style="list-style-type: none"> * as above, plus * juvenile justice teams * child care panel/DAM (gatekeeping) * day fostering * phased relief care
<p>4 QUARTERNARY PREVENTION EARLY RESTORATION</p> <ul style="list-style-type: none"> * children who have entered the care system and for whom a return home has been planned 	<ul style="list-style-type: none"> * to reduce to a minimum the length of a child's stay in care consistent with his/her best interests 	<ul style="list-style-type: none"> * "inclusive" fostering * flexible residential care * transport budget (to facilitate parental access)

The Nature, Targets and Effectiveness of Preventive Social Work Services

MEASURES OF EFFECTIVENESS OUTPUTS (SERVICE LEVEL)	OUTPUTS (CLIENT LEVEL)	AIDS TO MEASUREMENT OF OUTPUTS
<ul style="list-style-type: none"> * number of applicants * % referred to other services * % assisted within duty system * number of day care places available per 1000 target population 	<ul style="list-style-type: none"> * % of all referrals of cases allocated for further help * re-referral rates in respect of n.f.a. cases * consumer satisfaction 	<ul style="list-style-type: none"> * assessments of risk/need to identify appropriate cases for further departmental services * standardised definition of referral and standardised for recording and monitoring referral data * statement of service priorities * statement of criteria for receipt of particular services
<ul style="list-style-type: none"> * caseloads statistics * duration of client contact (case open) * numbers of cases opened/closed as % total caseload * casework by objectives * numbers and types of stat. orders discharged as % total of all such orders 	<ul style="list-style-type: none"> * re-referral rates in respect of closed cases * indicators of improved functioning and/or social circumstances * consumer satisfaction 	<ul style="list-style-type: none"> * assessments of risk/need in ongoing work * casework by objectives (task-centred, contractual case planning, etc) * caseload statistics: age, gender, ethnic origin, family comp, source of income, legal status, date case opened/closed, major changes in circumstances, objectives, etc * monthly caseload returns from each service unit * comprehensive client index system * follow-up studies
<ul style="list-style-type: none"> * care/custody rates * numbers and types of stat. orders being made as % of all such orders * number of new CPR's as % of all registrations * admission per 1000 of child population 	<ul style="list-style-type: none"> * improved functioning and/or reduced dependency * reduced levels of risk * consumer satisfaction 	<ul style="list-style-type: none"> * as above, plus: * admission to care criteria – code of practice * monitoring of panel/DAM outcome in relation to above * info. on stocks and flows with in child care system * monitoring panel/DAM info on resource shortfalls * monitor legal statuses: type of order, duration, etc
<ul style="list-style-type: none"> * discharges within 12 months of admission per 1000 of child * duration of care episode 	<ul style="list-style-type: none"> * % of those discharged who are re-admitted (except relief care) * care plan achieved within agreed time 	<ul style="list-style-type: none"> * system to monitor progress of each child through care system and to pick up rapidly on those care plan achieved within objectives (care plans)

Northamptonshire County Council Social Services Department (1985)