



Beneath the Threshold:

Voluntary sector perspectives
on child safeguarding in London

**ENGAGE
LONDON** Supporting the Children
and Young People's Voluntary
and Community Sector

**Children
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Charities working for
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Beneath the Threshold

Introduction

This review was facilitated under the Engage London programme which finished in March 2017. Engage London is a partnership between Children England, Partnership for Young London and the Race Equality Foundation, funded by London Councils. The aim of the programme was to support the children, young people and families voluntary and community sector (CYP & F VCS) across the region, through the provision of training, resources, networks and briefings.

The gathering of data for *Beneath the Threshold* took place over a five month period between May and December 2016. This consisted of an online survey, targeted interviews and a cross-sector focus group across London.

This work will now be followed up with a number of regional events and roundtables with a range of key stakeholders to assess how the issues raised can be addressed and how the CYP & F VCS can be supported moving forward. It is important to note that this survey represents the views and opinions of a sample group of organisations in an extremely fast-moving environment.



Beneath the Threshold

Meaning and Context

2.1 What do we mean by 'Beneath the Threshold'?

The children, young people and families services sector is enormously diverse in the types, sizes and sectors of organisations and in the range of specialisms there are, whether by reference to the age-group they focus on, or the particular types of needs and interests they address. There is no single national 'blueprint' or national standard for how each local area's services for children, young people and families should be configured, but they can often most usefully be understood as being differentiated by their 'tier' or level of service.

Universal services refers to the kind of services that will be present in *all* communities, and to which all children and families are entitled, and expect to be engaged with. Universal services include primary health care (GPs and community nurses), childcare, primary and secondary schools and health visitors. Universal services generally have to be provided as a matter of statutory legal duties (on council and health authorities) and while local delivery arrangements may vary, the majority of universal services are still commonly provided by public sector organisations and employees.

Specialist / crisis interventions are at the 'top of the pyramid' or the highest 'tier' of services. Relatively few people in any local population will ever need or expect to be engaged with specialist or crisis intervention agencies, but for those who do need them, the need is likely to be urgent and potentially very harmful or dangerous if left unaddressed. For children, young people and families, this service level would include acute and emergency medical treatment, acute mental health care (including in-patient care), and the array of services, actions and support that may be needed

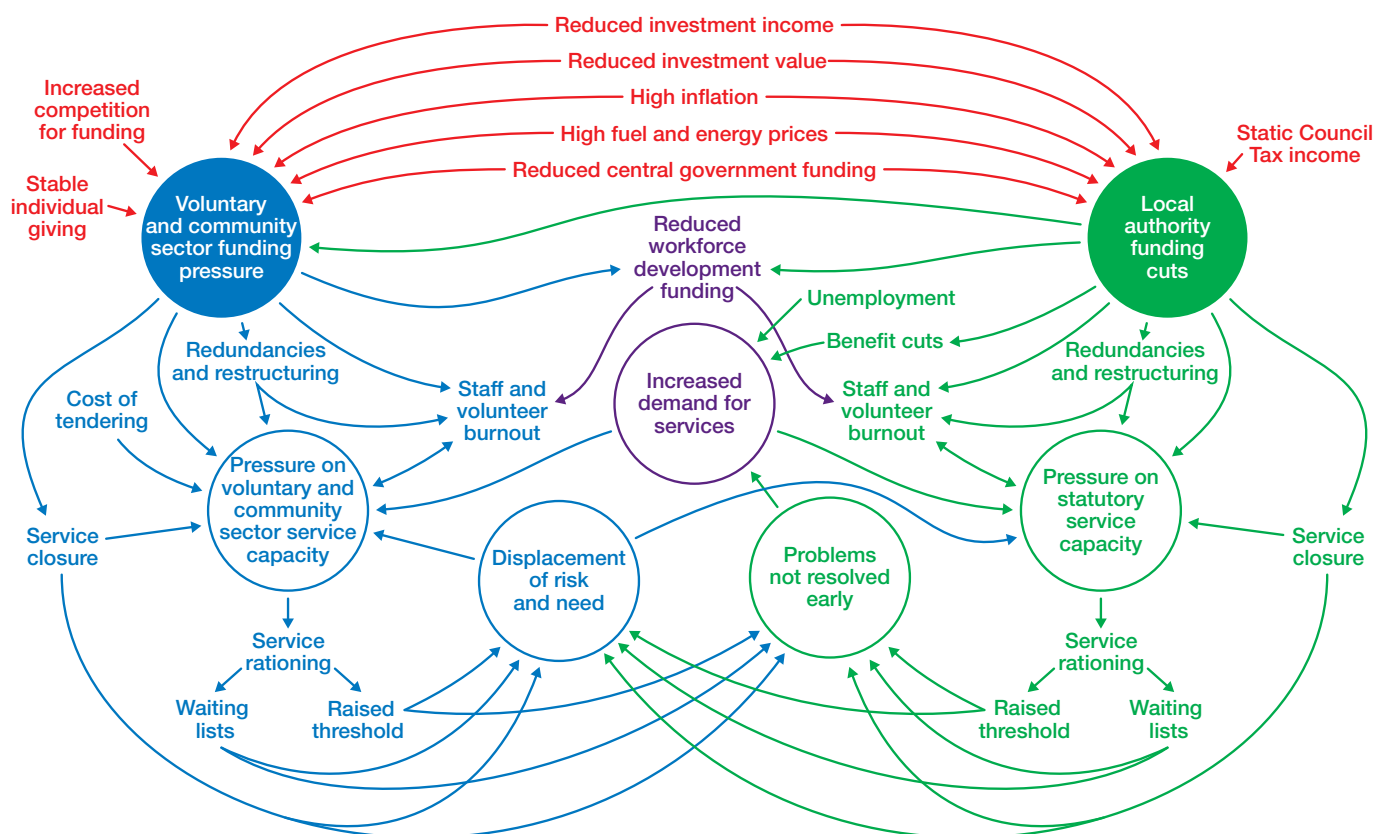
where a child is in need or at risk (children's services and child protection). All crisis and specialist services are underpinned by statutory duties to intervene, statutory budgets and, where necessary, strong powers for the state to take action to protect the most vulnerable and at risk. As with universal services, at the specialist and crisis intervention level most service delivery will be publicly staffed and managed – although increasingly some will be commissioned out, for delivery by non-state organisations. Some children's charities operate commissioned services at this level, working with children and families already assessed as falling under statutory duties because of their levels of need: for example, charitable providers of short break care for disabled children; foster care or residential care for children who have been placed on care orders; or family support to households where a child has a child protection plan. In this study we consider this level of services to be **'above the threshold'** for statutory intervention – meaning that they work with children and families who have already been referred and 'accepted' as being entitled to specialist services because of the seriousness of their need and the potential risks they face without intervention.

Sandwiched between universal services and specialist/ crisis intervention are the plethora of 'optional' and locally varied services, interventions and initiatives that perform functions and offer services that by no means every child will need or want, but which for some will be essential. The range is enormous, spanning community halls, playgrounds and children's centres; organised volunteering; faith community activities; community sports; arts, culture and creativity projects; helplines, advice and information; counselling and youth work; a



wide range of ‘targeted’ support services for specific groups (e.g. young carers or teenage parents); advocacy, debt advice and housing support; economic and environmental regeneration and community development projects. These are the types and range of local services in which the voluntary and community sector is most dominant. We call this broad range of

services **‘beneath the threshold’** in this report, because while they play a very important role in the ecosystem of services for children, young people and families, they are neither ‘universally’ offered in all authorities, nor are they required by statutory law as part of meeting the state’s protection and care duties.



2.2 What’s been happening to local services for children, young people and families?

The funding, commissioning and delivery of social care services for children and young people is predominantly a local authority responsibility and voluntary and community groups supporting children and families are in turn more likely than other VCS organisations to rely on local authority grants or contracts. In 2012 Children England examined the financial pressures and interplay between statutory and voluntary sector organisations during the first few years of ‘austerity’ budget cuts for councils (cuts to grant funding that have been continued each year since *Perfect Storms* too).

The picture in *Perfect Storms* in 2012 is one that continues to be reported from VCS groups and councils today. While full scale service closures have been rarer than many first feared, all services and teams have faced

the ‘Perfect Storm’ of rising demand for help from children, young people and families, at the same time as increasing struggles to maintain income levels, almost all agencies reporting that wherever they get their funding from they have been doing ‘more for less’ for so long that it is now ‘less for less’.

In all local areas, the ecosystem of services for children, young people and families has been profoundly impacted by the ways in which agencies have had to adapt to cuts, closures and reduced capacity – and London is no exception to that national picture. While each area and council may have quite different service arrangements and local community organisations, all will be seeing some of the pressures and dynamics portrayed in the *Perfect Storms* ‘Locality Storm’ diagram (above).

2.3 Safeguarding children and young people 'beneath the threshold'

Behind the financial picture of a steady whittling away of resources across children and young people's services, many charities and statutory teams have had to wrestle internally with the management dilemmas of how to adapt: whether to increase the numbers of caseloads held by practitioners (and therefore reduce time and quality of intervention); to introduce waiting lists or triage systems for prioritising levels of service demand they can't meet; or to re-define and target their service altogether on a narrower group of needs or specialist focus.

It is in this context of trying to understand what financial austerity pressures actually mean for day-to-day practice in VCS organisations that we decided to undertake this study and gather views from the sector. Effective safeguarding arrangements rely on local agencies working together: to

be alert and aware in identifying children's needs and possible risk of harm; to refer concerns and needs on to other services that can help whenever needed (eg Child and Adolescent Mental Health Services or child protection); and to have an up-to-date level of skills, training and awareness among their own staff and volunteers. We wanted to understand how inter-agency safeguarding practices were faring in the face of so much change to organisations and councils. We also wanted to understand the extent to which child protection referral 'thresholds' had been raised in practice in order to manage increased demand on children's services, and what kind of role VCS organisations were being expected, or left, to serve for children and families who do not reach that threshold.



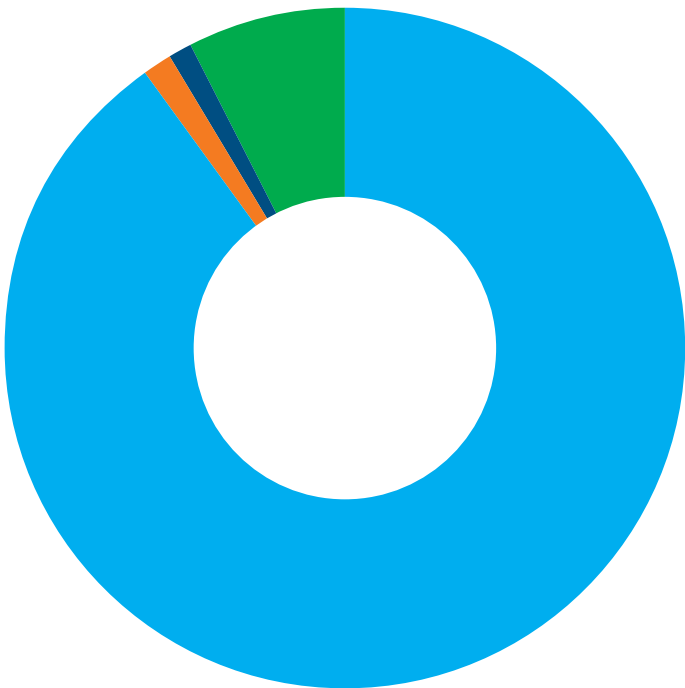
Beneath the Threshold

Feedback

There were 85 respondents for the online survey and this was supplemented by interviews with 12 organisations from across local, regional and national groups. The feedback represented a mixed picture on how things have improved or worsened, as we would expect across a huge and complex region like London. The data was collected over a five month period from May – October 2016.

3.1 Survey responses

Summary of responding organisations



What is your organisation?

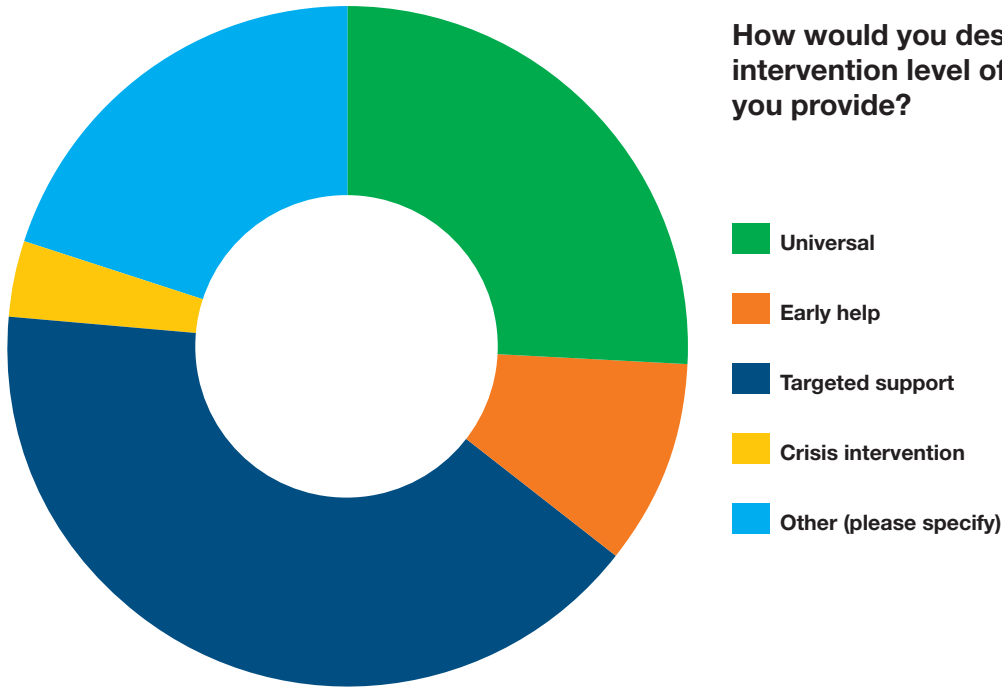
- Charity
- Community interest company
- Social enterprise
- Community group
- Other (please specify)

N=82

The majority of those who responded to our survey were in charities (90%), though a few respondents came from social enterprises and one from a community interest company. Of those who specified 'other', two were grant making organisations, one was a private company and two were housing associations.



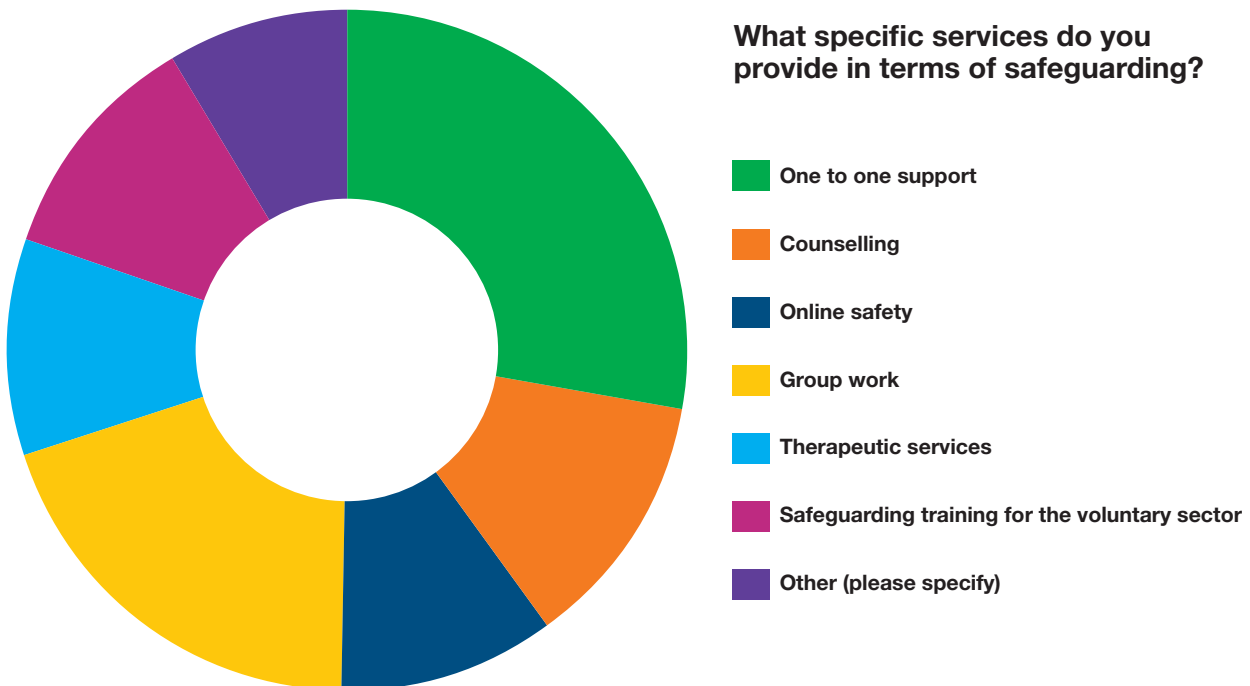
How would you describe the intervention level of the services you provide?



N=81

The organisations who participated in the survey did come from a range of intervention levels, though the majority came from targeted support (40.70%). Interestingly, early help (9.9%) and crisis intervention (3.7%) together totalled less than half of universal alone (25.9%). The majority of those who responded 'other' wrote that their organisation worked on 'all of the above' or that they have 'a variety of services which address all intervention levels'.

What specific services do you provide in terms of safeguarding?

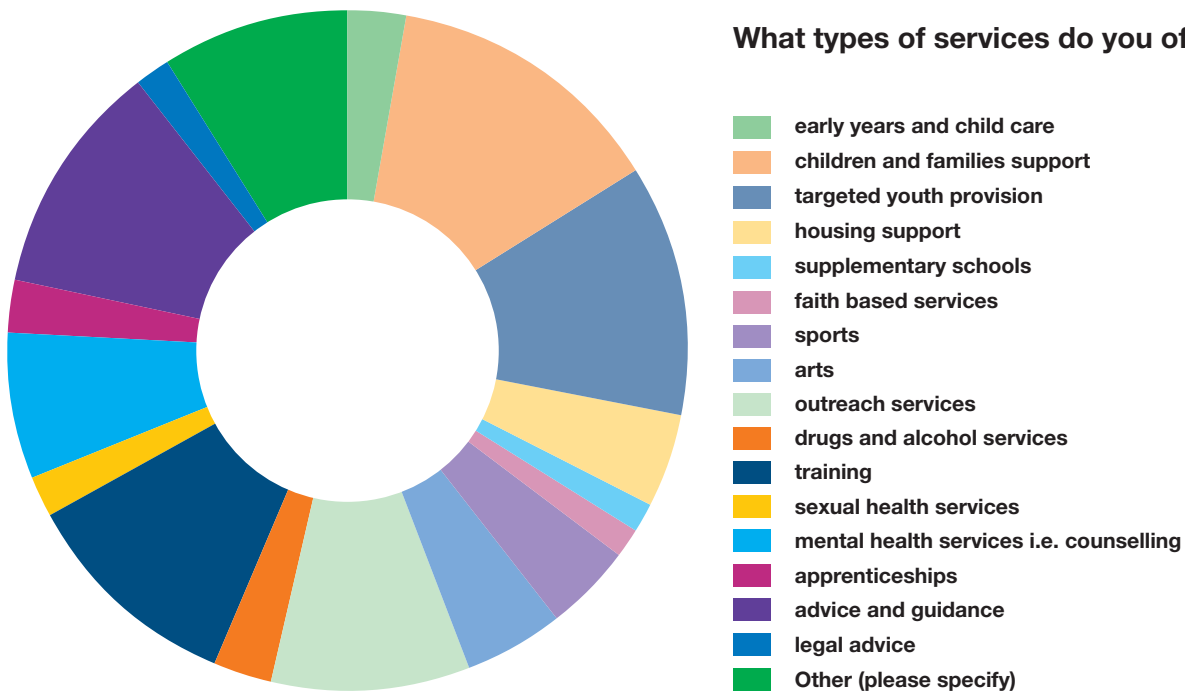


N=43

All respondents provided more than one safeguarding service. The most common cited were one to one support (28%) and group work (19.6%). Other services were cited roughly equally. Of those who chose 'other', the majority of responses fit in some way to the categories given except 'Capacity-building through grant-making/conditions'.



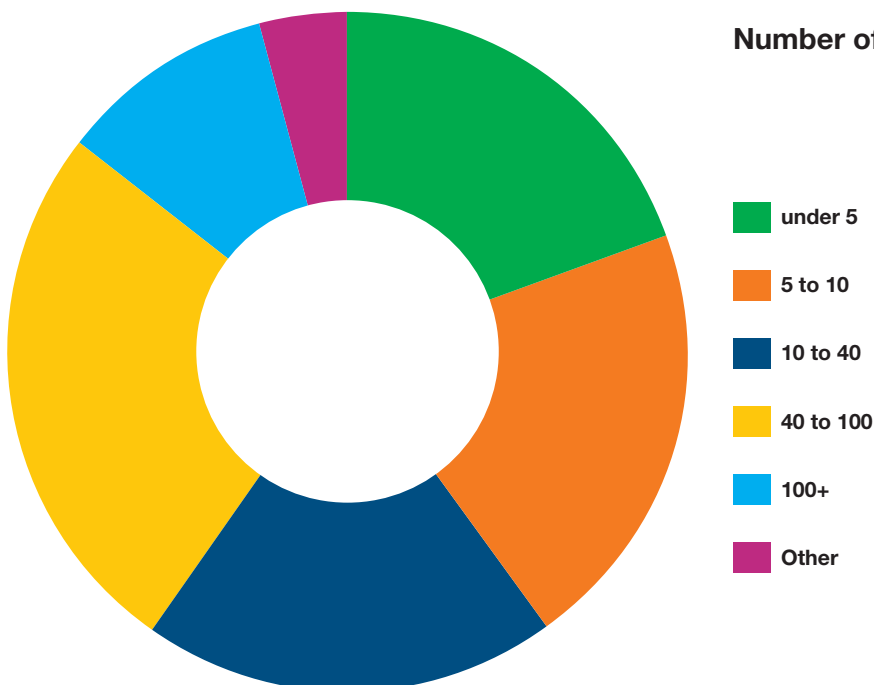
What types of services do you offer?



N= 82

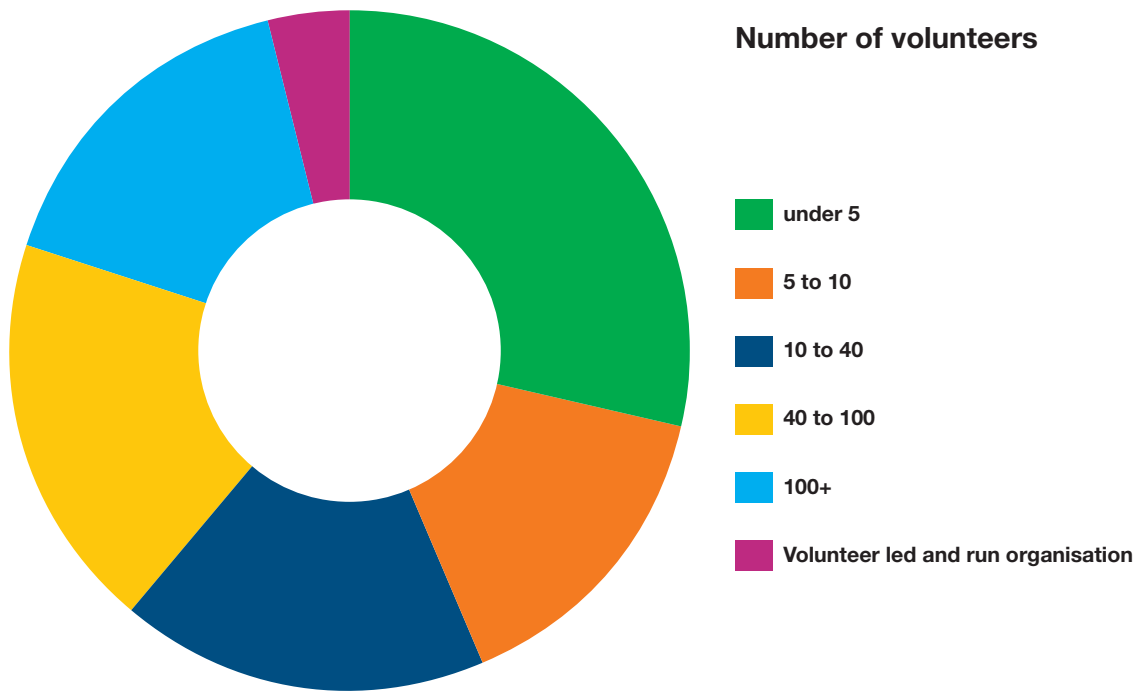
All the respondents provided more than one service. The most common services offered by organisations were: children and families support (13.22%); targeted youth provision (11.8%); and advice and guidance (11.01%). More than 45 different types of services were provided, ranging from grant making; to elderly support; to advocacy; and after school clubs. Organisations who responded were also a good range of sizes in both staff numbers and number of volunteers. Respondents were more likely to come from more established organisations, with more staff and fewer volunteers.

Number of staff



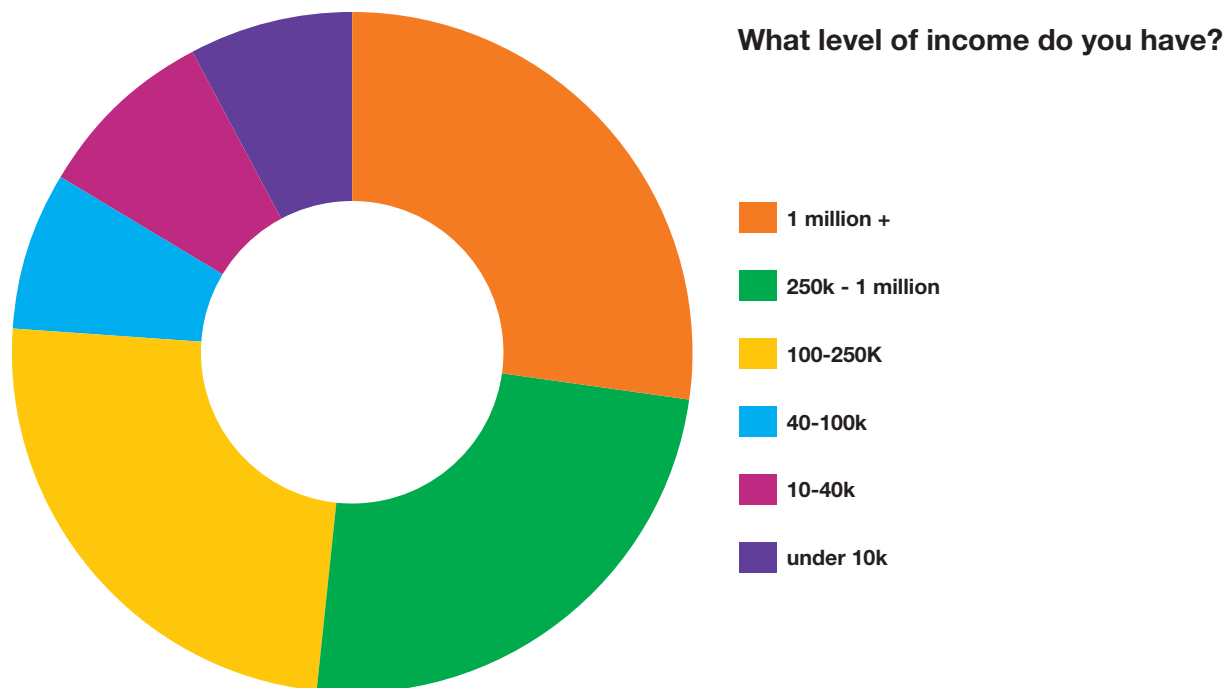
N= 82

Organisations also had an even distribution in staff numbers, with a fifth (20%) of respondents having fewer than five members of staff, a fifth having 5 – 10, and a fifth having 10 – 40. The most common number of staff in an organisation was 40 – 100, with one fourth (26%) falling into this category and one-tenth (10%) having over 100 members of staff.



N=80

The majority of respondents came from organisations with fewer than 40 volunteers (61.3%, and only a few (3.8%) came from volunteer-led organisations.

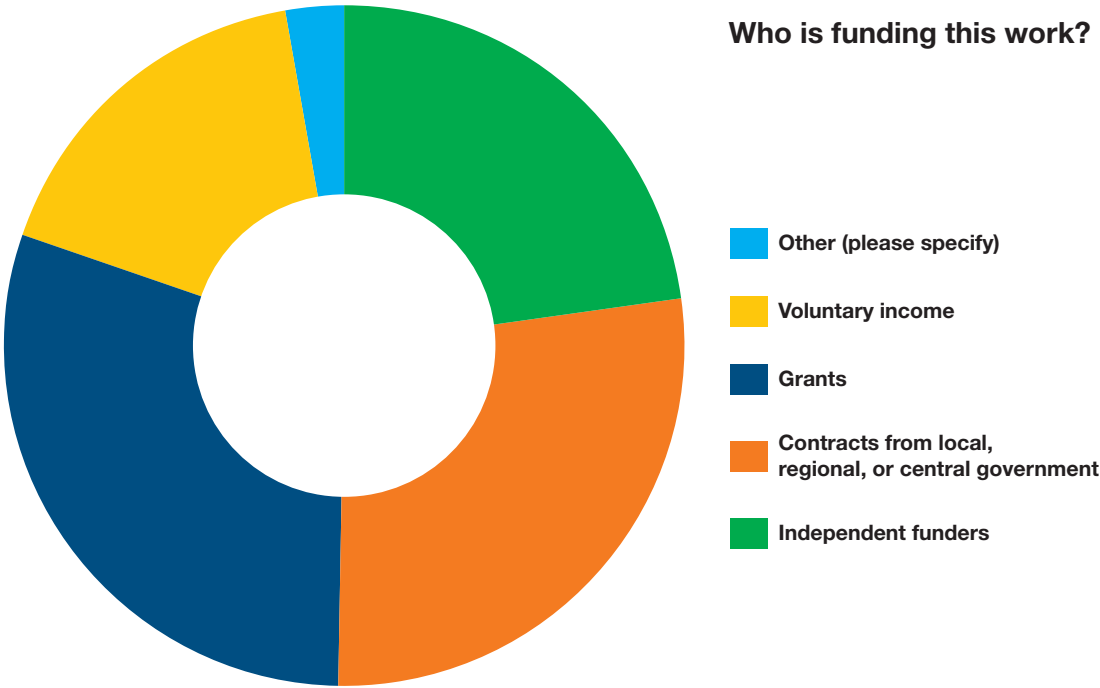


N=81

The majority of organisations (77%) who responded had an annual income level of over £100k, with a quarter having £100k to £250k, a quarter having £250k to £1 million and just over a quarter having £1 million plus.



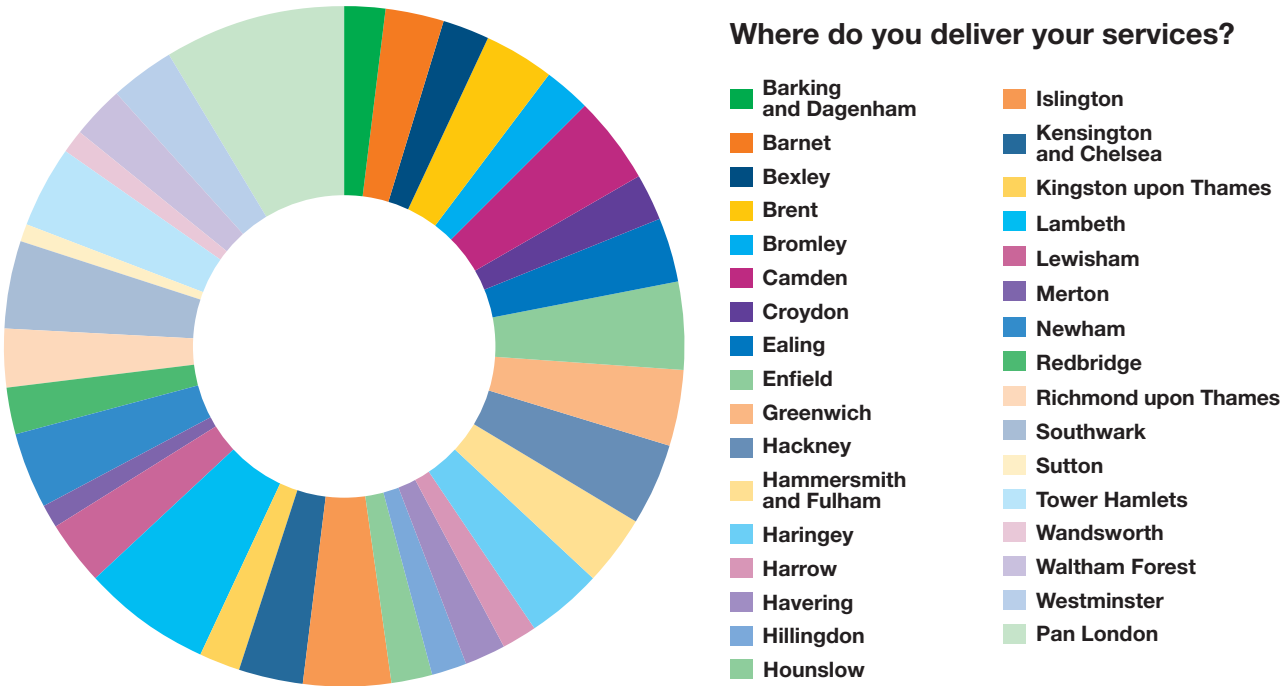
Who is funding this work?



N=45

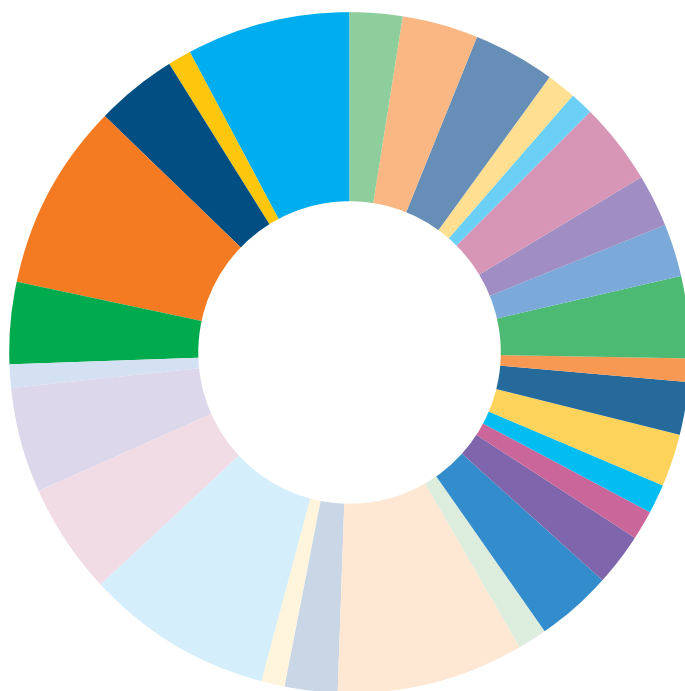
While only half the respondents answered this question, all of those had on average almost three different sources of funding. The most common source of funding for respondents who were mostly charities was from grants (30%), government contracts (27.34%) and independent funders (23%). Interestingly, only a small number (16%) of those who responded are funded by voluntary income and none via subscriptions (0%).

Where do you deliver your services?



N=81

Organisations were found to deliver across London, with each borough being represented and the average respondent selecting an average of 3.9 geographical options. The most common answer was pan-London (8.54%), while the most common boroughs were Lambeth (6.32%); Islington (4.43%); and Camden, Enfield, Hackney and Southwark (4.11%).



Where is your organisation based?

- | | |
|------------------------|------------------------|
| Barking and Dagenham | Hillingdon |
| Barnet | Hounslow |
| Bexley | Islington |
| Brent | Kensington and Chelsea |
| Bromley | Kingston upon Thames |
| Camden | Lambeth |
| Croydon | Lewisham |
| Ealing | Newham |
| Enfield | Redbridge |
| Greenwich | Richmond upon Thames |
| Hackney | Southwark |
| Hammersmith and Fulham | Tower Hamlets |
| Haringey | Wandsworth |
| Harrow | Westminster |
| Havering | |

N=79

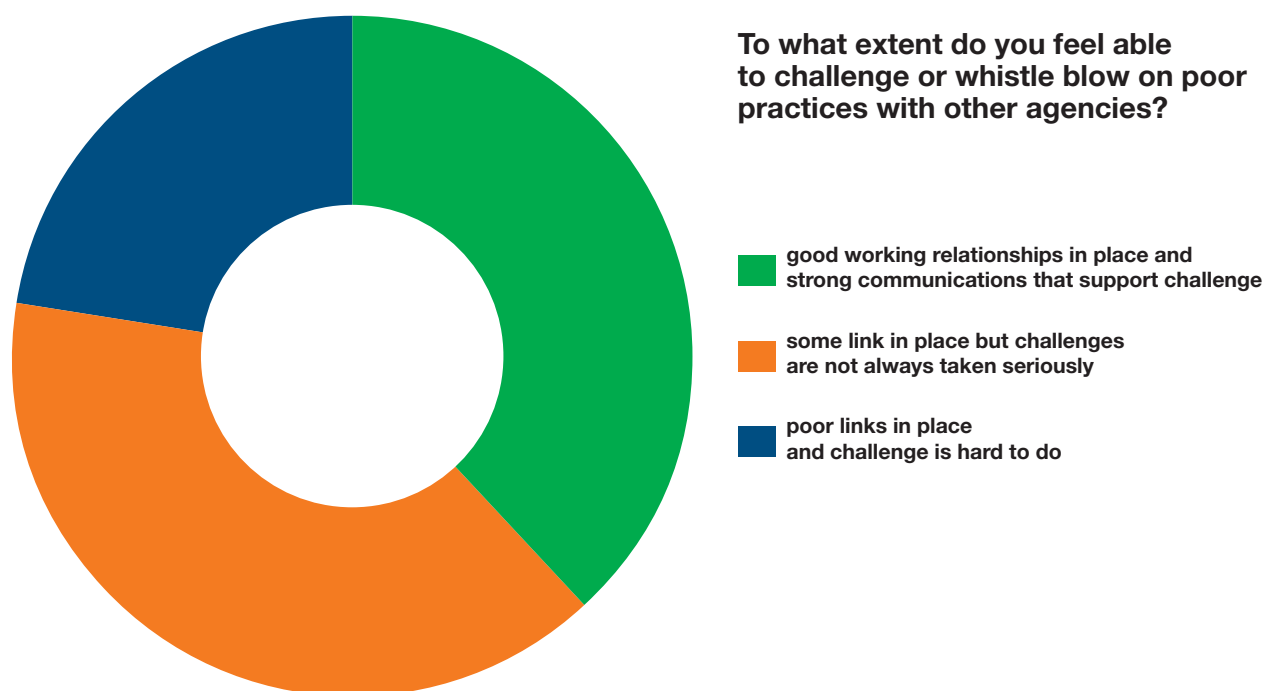
In relation to the organisational base it was similarly spread across all boroughs in London except Sutton, Merton, and Waltham Forest.



What they said

Multi-agency working

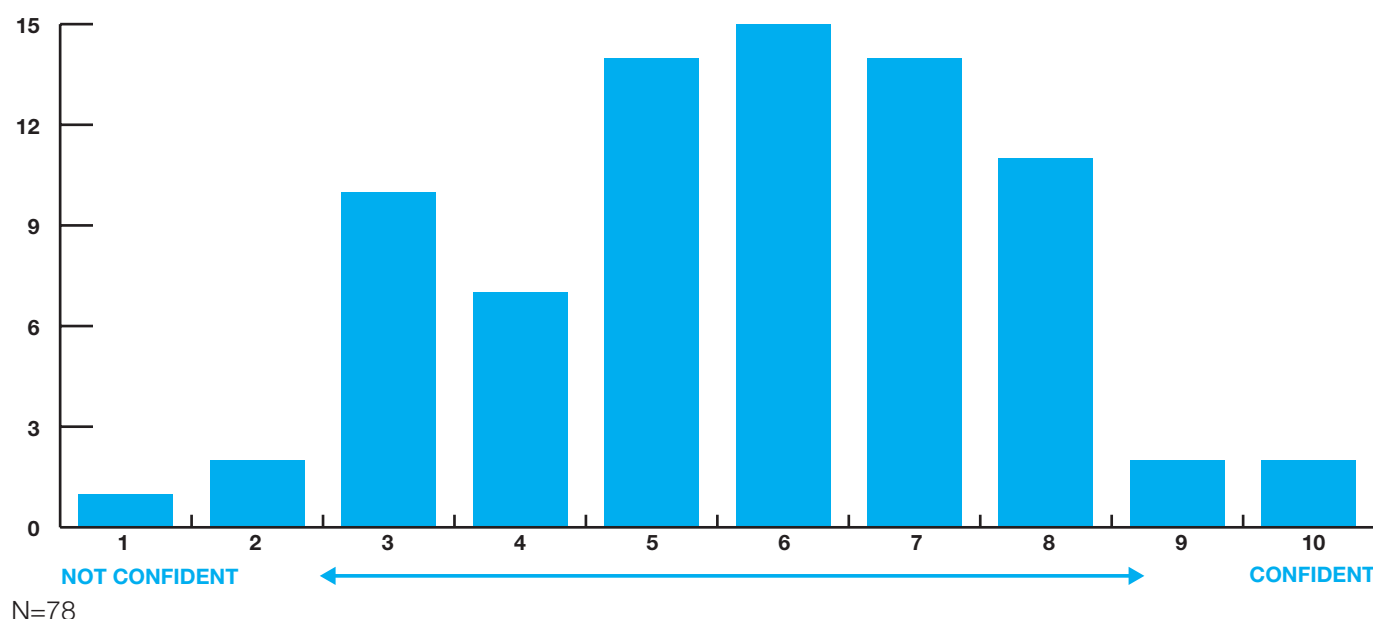
Overall 61% of respondents found issues with whistle blowing on poor practices with other agencies.



76 respondents (out of 82) answered this question, 38% of whom did feel that they had strong working relationships and were able to challenge or whistle blow on poor practice; the majority did not. Around 39% felt there were some links, but that challenges were not always taken seriously, while 22% thought links were poor and that challenges were difficult to make.

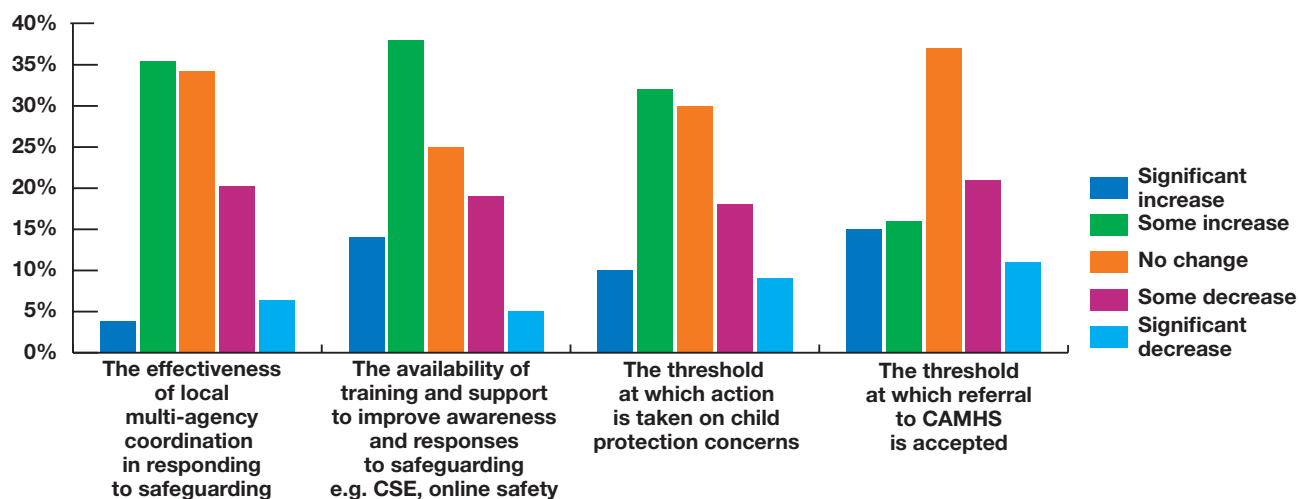
On the whole, confidence in local multi-agency safeguarding capacity was mixed.

On a scale of 1-10 how confident are you in the local multi-agency safeguarding capacity and arrangements?



We asked participants to rate on a scale of one to ten their confidence in the local multi-agency safeguarding capacity and arrangements, with ten being very confident. The results were mixed across the board, with an average score of 5.79, and the most common score a 6.

The effectiveness of multi-agency working was rated as follows:



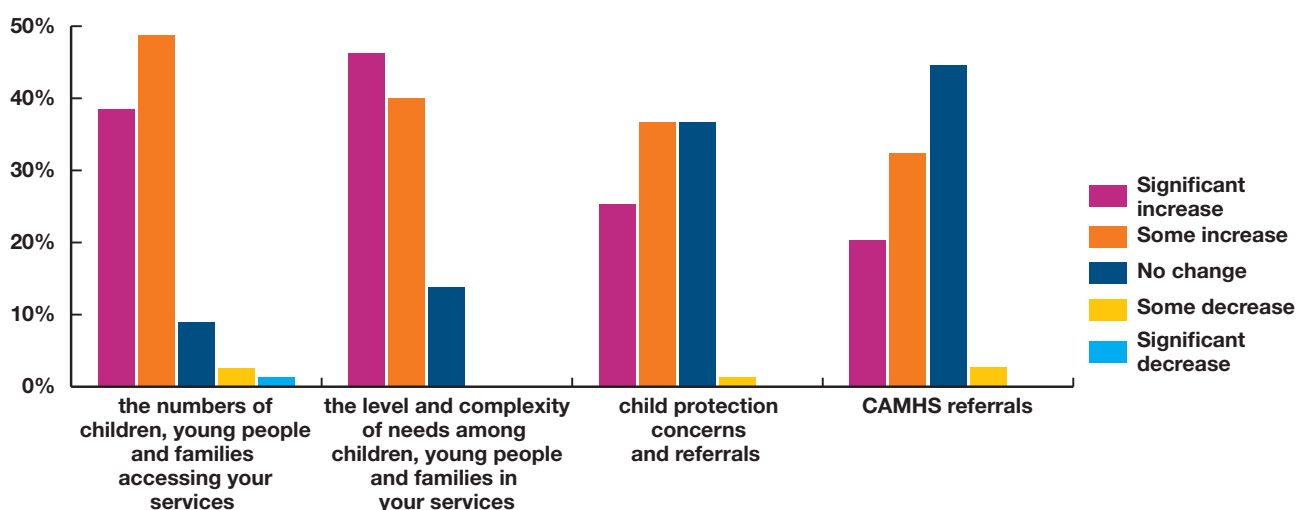
N=77

More respondents had experienced an increase in the effectiveness of local multi-agency coordination (39%), than had found it had decreased (26%) or not changed (34%), though statistically the difference is not significant.

The availability of training and support is generally seen to have increased, with 52% of respondents citing an increase and 23% citing a decrease.

The threshold at which action is taken on child protection concerns has risen according to many respondents, with 42% citing an increase, compared to 27% citing a decrease and 30% citing no change. This is greater than the threshold of CAMHS referrals, in which 32% cited a decrease, compared to 31% citing an increase and 37% observing no change.

We asked them what was happening in their services:

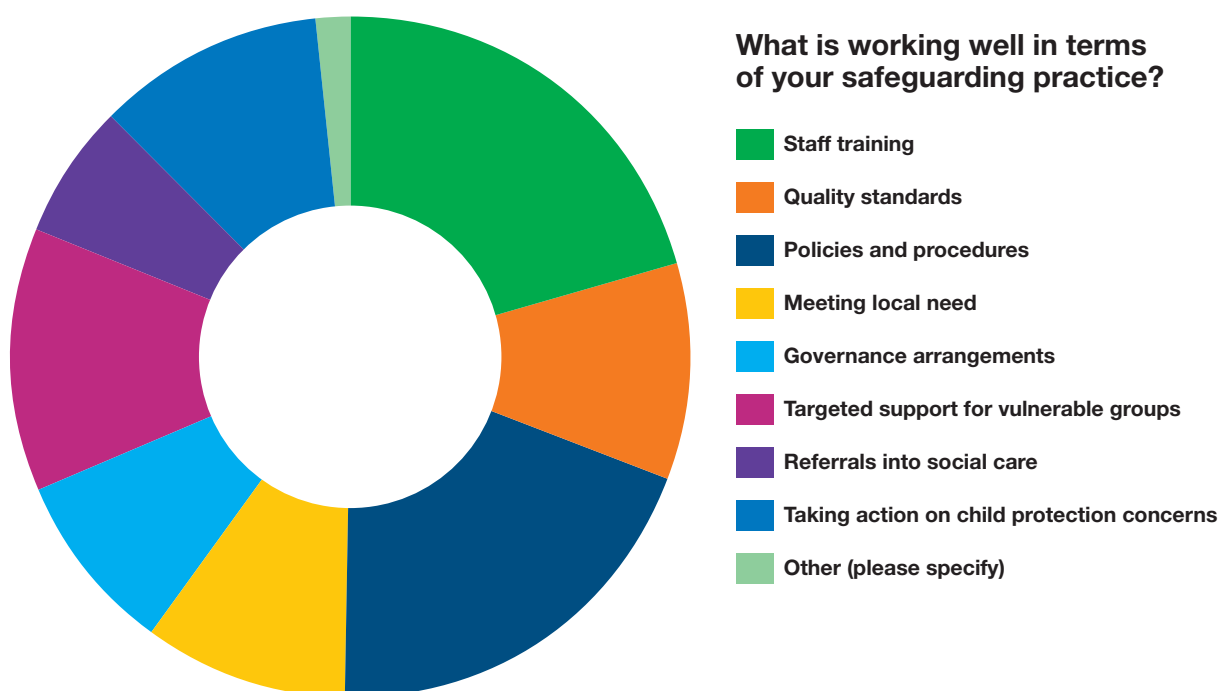


N=77

The number of children accessing services had greatly increased, with 38% of respondents citing a significant increase, 48% an increase, and 9% no change. Only 4% of respondents said numbers had decreased. The reported level and complexity of need also conclusively increased, with 46% of respondents finding significant increases, 40% finding increases and only 13.7% finding no change. No respondents believed there had been a decrease in level and complexity of need.

Child protection concerns were also seen to have increased, with 61% of respondents citing some form of increase, compared to 37% seeing no change and 1% citing a decrease. CAMHS referrals were also found by the majority to have increased, with 53% seeing an increase, compared to 45% no change and 3% perceiving a decrease.

When asked what is working well in safeguarding the following feedback was given, with most respondents giving multiple responses in terms of their safeguarding practice.



N=45

The most common answers were: staff training (21% of all answers); policies and procedure (20%); targeted support (13%); and quality standards (10%). The least cited answers were: referrals into social care (6%); governance arrangements (9%); and meeting local need (10%).



Current safeguarding arrangements



What current safeguarding arrangements do you have in place?

- Designated safeguarding lead
- Safeguarding policies and procedures
- Safe network standards
- Section 11 audit
- Designated trustee for safeguarding

N=46

Respondents gave an average of 2.8 answers to this question, with the most common safeguarding arrangements recorded as: safeguarding policies (35% of all answers); and designated safeguarding lead (32%).

The following chapter analyses the key themes arising from the survey and the interview data.



Themes Arising

General

The online summary and the interviews both presented evidence that considerable effort is being put in by the VCS: organisations are concerned and responding to safeguarding concerns.

- 90% of respondents had designated safeguarding officers in place, showing how the voluntary sector is responding to requirements
- Having the appropriate policies and procedures in place rated highly in organisations' responses
- The voluntary sector on the whole is confident in its local partnerships, with 80% stating they were positive about this - although many flagged up their concerns about what these might look like in the future with potentially more churn in the system; and also predicted changes in the Local Safeguarding Children's Boards following on from the Wood review

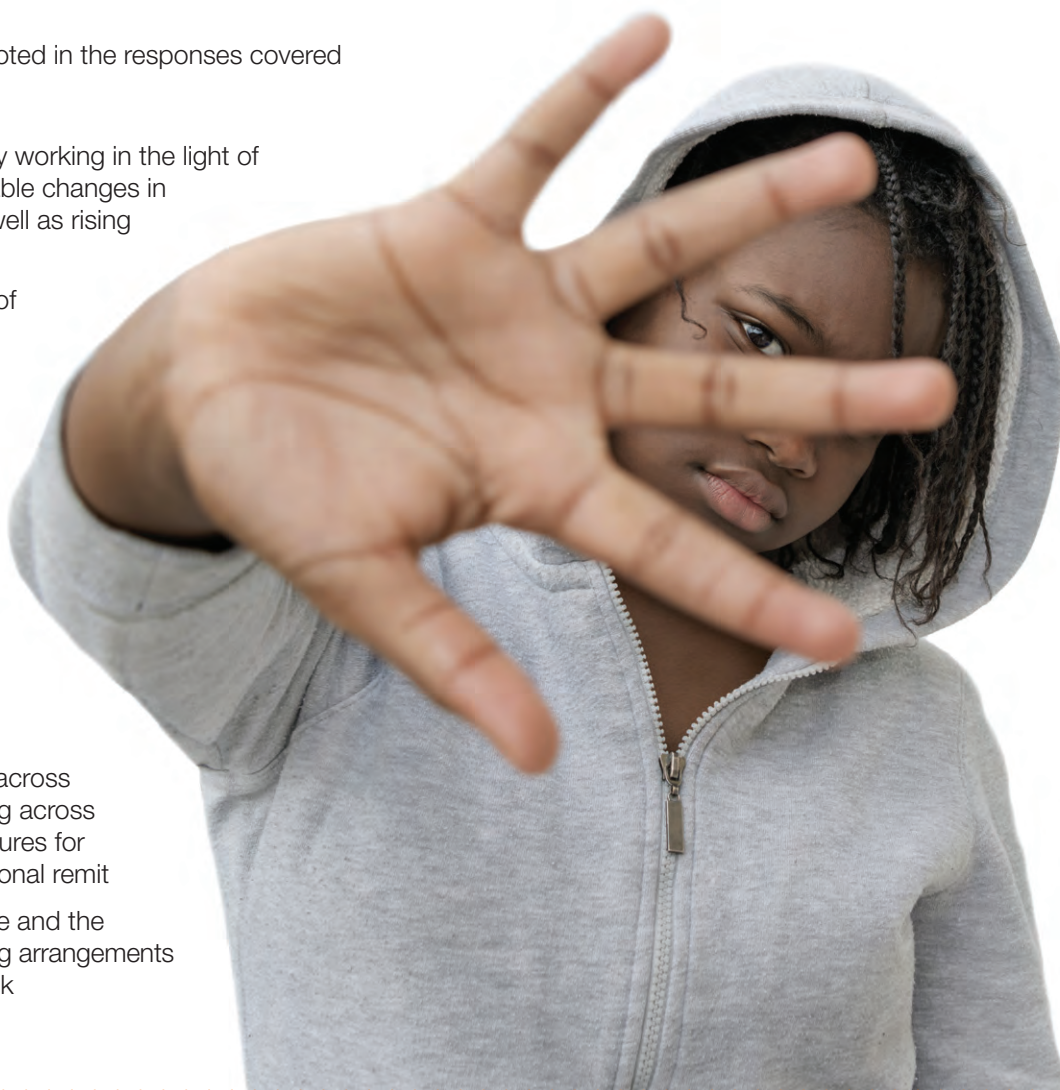
Some of the challenges noted in the responses covered the following:

- Sustaining multi-agency working in the light of austerity and considerable changes in staffing structures, as well as rising thresholds for referrals
- Levels and complexity of cases coming through both via referrals and also from self-referral by existing groups accessing services
- Poverty and austerity, with policy and funding reductions dramatically impacting on communities and the voluntary and community sector
- Challenges of working across the region and engaging across multiple borough structures for groups that have a regional remit
- Commissioning practice and the challenges in contracting arrangements and displacement of risk

In the in-depth interviews overall, many groups felt that thresholds had risen but few could provide quantifiable data on the increase. One respondent stated that previously 60% of their referrals were accepted and this now had dropped to 40%, with them noting that the types of referrals were the same.

Across the interviews and the online survey there was a clear emphasis on the implications and considerable challenges of mental health needs and CAMHS access.

Additionally, safeguarding adolescents was flagged up as a distinct and separate challenge, both in terms of the thresholds for these older groups and also for young men, who tended to end up in the criminal justice system rather than be seen through the lens of safeguarding.



Key themes emerging from the interviews:

1. Multi agency working

Multi-agency relationships were a key element within the feedback, highlighting both the positives when relationships were functioning well but also the challenges of sustaining strong, robust partnerships in the current context.

Relationships were seen as critical to driving up cross-sector best practice, with a number of challenges in communications across partners and the ability of the voluntary sector to challenge the decision making of statutory partners raised as ongoing issues. Partnership and collaboration were being further challenged by the resource deficit.

There were concerns reported on getting feedback from referrals, with staff stating that when they don't get any feedback or referrals aren't picked up, they become disillusioned, which in turn impacts on the quality of the relationship. The increase in referrals was also highlighted, with one organisation taking on high needs cases noting that in September 2015 they had 19 referrals and in the same month in 2016 this had risen to 25 referrals, with no increase in staffing or resourcing.

CASE STUDY 1

Targeted support around child sexual exploitation – a national organisation delivering across London

Good practice is emerging with the MASH teams, where co-located teams are working well. Understanding and managing thresholds for the 16-17 year olds is a key issue, with young men particularly ending up in the criminal justice system and not being seen as victims. Where teams have been co-located there is evidence of more positive outcomes: different services are working in partnership more effectively. The levels of complexity of cases are increasing, with professionals better able to recognise issues and systemic challenges such as poverty and its impact on families. Ways forward need to be focused on improving partnership working, training and up-skilling staff across wider emerging areas and working in collaboration with specialist services. Additionally it's important to review what happens to young men in a safeguarding context and ensure this goes to the MASH not directly to the police

CASE STUDY 2

Targeted family support service – a local organisation working across a couple of London boroughs with large volunteer base

There is good partnership working in place through collaboration on a single point of access across services. Families are assessed by social care and then triaged into the service, supported by strong partnerships with children's centres. Increasingly they are seeing a greater focus on domestic abuse as a key issue, with referrals and new contracting arrangements delineating at what level referrals will be triaged across, i.e. levels 1 and 2. There are ongoing challenges with accessing mental health services for families. Volunteers are a key part of the service; they are highly skilled and have access to free training from the local authority. As a result they seem prepared for the increase in the level of safeguarding risk they are presented with and are fully supported by management and supervision. Being able to challenge decisions, in terms of referrals, was raised as an ongoing challenge, as well as maintaining the thresholds for the service and ensuring the ethos of the organisation is adhered to.

2. Poverty and Austerity

The impact of increasing levels of poverty, as austerity measures are impacting across all services, was discussed at length in the interviews. Groups unsurprisingly noted the systemic challenges this presented to them both in terms of the communities they support and also the wider network of agencies that provide support.

Across the interviews, needs were noted as more complex and behaviours more challenging, further exacerbated by the impact of reduced funding in universal and early help services. The systemic challenges around poverty and austerity were flagged up, particularly in relation to the benefit cap and housing, as well as the transition to adult services.

CASE STUDY 3

Targeted services for families, NEET young people and young people coming out of custody – a regional charity working across a number of London boroughs

Feedback noted the increase in referrals made which are now resulting in no further action; previously 60% would get picked up by social care whereas now it is about 40%. The knock-on effects indicated how cases get moved into other areas i.e. a case becomes a housing issue where families are homeless due to benefit changes. In order to manage the rise in referrals, they have taken on increasing numbers of volunteers. Communication is still an issue across partners and there needs to be more acknowledgement of the impact of the changes and austerity. It can feel like the safety net of children's social care is going. To address some of the challenges, increased collaboration and multi-agency panels are required, so that the voluntary sector can be 'added value not risk managers'.

CASE STUDY 4

Targeted services to unaccompanied asylum seekers and refugees – a local charity working in several London boroughs

One of the main issues arising is the gaps in service provision at transition points for clients who are extremely vulnerable. This is further exacerbated when young people are dispersed, due to the challenges in finding housing and this being located in areas with limited support. Implications of policy changes and resourcing challenges on other services are also having a significant impact, e.g. delays in immigration decisions and schools being unable to fund specialist support any longer, or have the capacity to develop partnerships. There is also a need to think through how the specialist knowledge and practice of the voluntary sector can be cascaded out to partners more widely to build skills and expertise and improve the quality of responses.



3. Churn and Uncertainty

A key factor across all of the feedback was the level of change taking place across children's services, both in terms of policy and staffing. Organisations were also extremely concerned that this pattern was set to continue into the future and reflected on their capacity to engage with this.

The lack of clarity about what will happen in the future with policy change and the impact of proposed changes with the LSCB were high on people's agendas. This links back to the interdependence across agencies as described earlier in the Perfect Storm diagram and the knock-on effect across services.

The issue of staffing churn across all agencies was raised and the capacity of the voluntary and community sector to engage with this. Groups noted the loss of narrative around key issues; the disrupted relationships across agencies and challenges around communications flow further fuelling uncertainty.

CASE STUDY 5

Targeted support with quality and safeguarding for small specialist community groups – national organisations providing specialist infrastructure support across multiple London boroughs

This profiled the concerns about the lack of support in place for small community groups around safe practice. With the reduction of capacity in local authorities and local infrastructure, it currently felt more difficult to know where to access support and also to recognise the challenges that some of the communities faced in terms of making referrals to the police or social care. Additionally, with the constraints that other organisations are facing in terms of income, gaining access to community spaces was also a challenge and groups at times were using unfit premises to deliver their services. Highlighting where community based groups are delivering effective services and providing targeted specialist support was viewed as critical moving forward.



4. Commissioning

The impact of commissioning practice on safeguarding was highlighted across respondents, including both good and poor commissioning practice. At the extreme end of this, some groups noted that they would not re-tender for some work if their 'concerns were not listened to' and others who were commissioned raised their reluctance to challenge the statutory sector about 'poor practice'.

Target-driven contracting with increased requirements and reduced funding was highlighted. In some cases it had a positive impact, e.g. better relationships as improved communications linked to contracts. But some more challenging aspects of commissioning were raised including the extent to which the voluntary and community sector were supplementing and subsidising contracts and picking up the fallout from the reduction of other services.

CASE STUDY 6

Targeted support for children and families around domestic abuse – a regional organisation providing targeted support

This highlighted commissioning practice and target setting that was unfeasible in terms of resourcing, expectations and the client's needs.

The commissioned service is a specified number of sessions with clients who present with very high levels of need. The impact for the organisation is on their capacity and ability to match fund services to make up the deficit, with all existing workers being set fundraising targets. This is exacerbated in any re-tendering, as it often results in budgets being reduced and expectations being raised. Moving forward it was recognised that commissioners needed a greater level of dialogue about needs and resources and that it was coming from a partnership perspective.

CASE STUDY 7

Counselling services and mediation for children, young people and families – a national organisation delivering across six London boroughs

This profiled how good commissioning practice has developed improved communications through the contracting process. As part of the new contracting process, a referral pathway has been developed, trying to mitigate against clients being referred inappropriately and the organisation getting cases which should be referred to CAMHS. This contract has also ensured that all staff are accessing centralised training on CSE and mental health, supporting them to develop the skills they need and build cross-sector partnerships. The next area of focus will be on recruiting more diverse and also younger staff to build relationships with the target client group.

The variable practice in how London works came up across the interviews: working across London brings numerous benefits and also challenges including the pace of change; the challenges of engagement regionally and locally; knowing and understanding the changes; and also variable structures in each borough. Additionally, a cross-cutting theme in responses was the effective management of risk for adolescents.

Moving forward

Contrary to many public assumptions, awareness, preparedness and practice across many of the CYP and F VCS who responded remains strong. This suggests that people are both recognising and referring cases. However, there are concerns about the ability of other agencies to respond. In fact the voluntary and community sector plays a vital role in local safeguarding, with contact with young people and families often invisible to statutory agencies. In the midst of many areas that report crisis, there are still areas that are working well and sustained good practice.

Many organisations are, however, facing dilemmas around retaining support for high risk and complex families where previously statutory support might have been more readily available. Some of the most serious risks are seen in rapidly changing community needs (including homelessness and evictions, new arrivals, refugee families) and the churn and uncertainty in the leadership required to manage them.

The importance of not disrupting the system more via radical transformation was a consistent theme in the review and the prospect of reforms to LSCB structures and jurisdictions under the Children's and Social Work Act should be assessed and managed carefully, with an understanding that many local organisations find them a useful source for stability and co-ordination on safeguarding.

Additionally, there are an array of concerns related to the London housing crisis, interwoven with the family crisis and risk to children and young people being reported such as the challenges of securing services for young people aged 16-18 in their transition to adulthood, as well as support for families in temporary accommodation. All of which represent a very distinctive challenge for London.

Finally, whole system commissioning and charitable funding was profiled across the review, offering a way to both integrate and invest in charities' capacity to safeguard well and work collaboratively.

This report outlines several significant issues for professionals working to keep children and young people safe, and we hope readers find its insights useful. Children England and Partnership for Young London will continue to work with the voluntary and community sector to support safeguarding policy and practice, and we welcome contact from anyone with comments to make on these findings. As noted at the start, we will be running a number of regional events and roundtables to assess how the issues raised can be addressed and how the CYP & F VCS can be supported moving forward.

5. Further reading

Children England: ***Perfect Storms***

<https://www.childrenengland.org.uk/perfect-storms>

National Audit Office Report: ***Children in need of help or protection***

<https://www.nao.org.uk/wp-content/uploads/2016/10/Children-in-need-of-help-protection.pdf>

Children England: ***Declaration of Interdependence***

<https://www.childrenengland.org.uk/the-declaration-of-interdependence>

NSPCC: ***Safeguarding Resources for the Voluntary and Community Sector***

<https://safeguardingtool.nspcc.org.uk>





Children England

www.childrenengland.org.uk email: info@childrenengland.org.uk

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