



Learning from Audit: Safeguarding Disabled Children

February 2017

This newsletter is aimed at all frontline practitioners, managers and agencies who work with children and young people. This edition shares findings from an audit about safeguarding disabled children, informed by national and local data and practice. This was done on behalf of Gloucestershire Safeguarding Children Board. It is hoped it will provide a helpful contribution to understanding and strengthening practice with disabled children.



LSCBs in England have an inconsistent approach to safeguarding disabled children

Local Safeguarding Children's Boards (LSCBs) have an inconsistent approach to safeguarding disabled children and have not made sufficient progress against recommendations for improvement, the National Working Group on Safeguarding Disabled Children has concluded.



Their survey of LSCBs is reported in **Safeguarding Disabled Children in England 2016**. The survey found examples of creative, innovative, child-centred practice. However, the report found overall LSCBs had not made enough progress against recommendations set out in **Ofsted Protecting Disabled Children: Thematic Inspection 2012**.



The report calls on partnerships and organisations working with children to recognise disabled children as a key risk group and to have arrangements in place to provide equal protection for them.

Contact Details:
GSCB Business Unit
Shire Hall
Westgate Street
Gloucester
GL1 2 TP
Tel: 01452 583643
mail@gscb.org.uk
www.gscb.org.uk

This newsletter does not set out to encapsulate everything happening in Gloucestershire to support, empower and safeguard disabled children, but to highlight **key learning and practice guidance** as a result of a recent GSCB audit about safeguarding disabled children.

The GSCB welcomes feedback on the contents of this newsletter.

1. Agencies join forces to check on local practice



Ten professionals, who come from a range of agencies that work with children, audited the case files of 20 disabled children.

Their purpose was to analyse the quality and impact of referrals, assessment, planning and actions taken, on behalf of Gloucestershire Safeguarding Children Board (GSCB).

The children were a range of ages and came from across all six Districts in Gloucestershire. The help these children were getting ranged from Early Help through to Children in Need, Child Protection and Children in Care. Cathy Griffiths, Head of Quality (Children & Young People, Gloucestershire County Council) said *"we set out to explore professionals' knowledge and understanding about safeguarding disabled children, to learn about the quality of practice and the impact for children."*

2. Learning from Data: we cannot be complacent



National research tells us that disabled children are three to four times more likely to be abused and neglected than non-disabled children.¹

¹ Jones, L., Bellis, M.A., Wood, S., Hughes, K., et al. (2012) *Prevalence and risk of violence against children with disabilities: a systematic review and meta-analysis of observational studies*. Sullivan P.M., and Knutson J.F.

Locally, 14 disabled children were subject of a Child Protection plan between April 2016 to November 2016, compared to 12 the year before.

At the time of writing there are 18 disabled children who are subject of a Child Protection Plan, which is just under 4% of the total number of Child Protection Plans. Compared to population estimates², this is not proportionate to the number of children in Gloucestershire estimated to have a disability.

It is difficult to compare Gloucestershire to other Local Authorities, as not all areas collect separate information for disabled children. Gloucestershire is now starting to share information with other Local Authorities, which will allow the GSCB to get a better understanding of how we are doing compared to other areas.



As well as the audit, a **Focus Group** of 8 front line practitioners (drawn from the cases audited) met with some of the auditors, for a discussion co-chaired by one of our Ambassadors for Vulnerable Children and People.

The Ambassador, Gareth Picken, is a young person with first hand experience of services to disabled children.

The Focus Group explained what strengths and challenges they currently come across in the safeguarding 'system'. They discussed the data, training, the tools they use, attitudes, their work environment, attitudes towards disabled children and their families. The discussion explored the data, experiences of multi agency working, strengths and challenges and what needs to happen next.

(2000) *Maltreatment and disabilities: a population based epidemiological study*. *Child Abuse and Neglect*
² Office of National Statistics (ONS)

Focus Group members' views on why there was a low percentage of disabled children subject of a Child Protection Plan varied. Some felt it was due to there generally being more support services for disabled children, leading to better prevention before the Child Protection process was needed. Others pointed to difficulties determining whether poor outcomes for a child with complex disabilities were about the child's disability, or was an indicator of abuse. They pointed to the 'hidden' nature of children's vulnerability, where they are dependent on lots of carers.

In line with national research, the Focus Group highlighted the risk of practitioners applying higher thresholds to disabled children as a result of over identifying with the child's parents or carers, being reluctant to accept that abuse is taking place or seeing it as being attributable to the difficulties of caring for a disabled child.

Learning from Research

Disabled children have additional needs and face specific barriers to their protection including:

- Attitudes and assumptions such as a reluctance to believe disabled children are abused, and attributing indicators of abuse to a child's impairment without an exploration of possible causes
- Barriers to provision of support services that lead to the disabled child and their family being isolated
- Dependency on a number of carers for personal assistance, communication impairments or the child's difficulty understanding what is happening
- A skills gap such as an inability to communicate with the disabled child and respond to their individual needs in a child protection context, inappropriate application of thresholds.³



³ Safeguarding Children in England (2016), National Working Group on Safeguarding Disabled Children

3. Early Help to Safeguard Disabled Children

All disabled children receive Universal Services, and some need extra support in order to be healthy, safe and to achieve their potential. The intent is for all children including those with Special Educational Needs and Disabilities (SEND), to achieve the best possible outcomes and receive the support they need when they need it most. In Gloucestershire there is a Graduated Pathway of Early Help, within which practitioners work with children and their families ensuring they receive the right support.

The principle underpinning Early Help is that families are best supported by those who are already working with them, with additional support from local partners arranged as needed. When children and families need additional support, a coordinated multi-disciplinary approach led by a Lead Practitioner is recognised as the best practice.

There are six Early Help Partnerships across Gloucestershire, supported by Families First Plus teams in each District.

The Focus Group gave an impressive range of examples about preventative and protective actions or services for disabled children, when talking about 'strengths' in the safeguarding system. This included short breaks, direct work, Advocacy, the Care Aims project, the Building Better Lives initiative, mainstream and Voluntary Sector activities with children that can bring the child out of themselves and help obtain the child's voice.

Information, advice and support for parents, carers, children and practitioners is available from

- [Family Information Service \(FIS\)](#)
- [Glofamilies Directory](#)
- [SEN and disability Local Offer](#)
- [Children and Young People Service \(CYPS\)](#)

4. Thresholds for Disabled Children

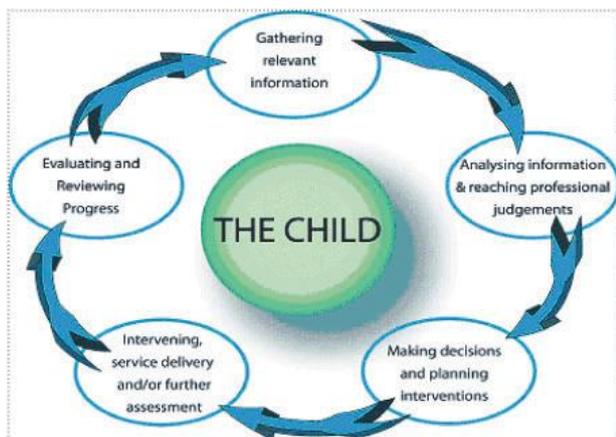
The Focus Group reported a clear understanding of safeguarding thresholds for disabled children. But talking about the wider system, they were concerned that sometimes a disability diagnosis

can cloud child protection concerns; that professionals might be 'skirting around' the safeguarding issues, or 'leaping in too soon'.

When drilling down to why this might be, they cited a) lack of confidence to challenge parents who are 'expert' in their child's disability or b) over-empathising with parents. They gave examples of chronic demand on families caring for a disabled child including financial, emotional and psychological drain. It was felt this can lead to a focus on 'disability support' (in Restorative Practice language, doing 'for' families) masking child protection concerns, or a leap into the more comfortable setting of a Multi Agency child Protection Conference (doing 'to' families).

A number of Focus Group members said they were not assured that there is enough objective focus on parenting capacity to make the changes needed so that professionals are not worried about the child for safeguarding issues. *"It can be easy to put in lots of services and breaks for parents which help support meeting the needs of the child, but that means there's not always as much focus on what the parent themselves needs to change or a focus on future impact"*.

What did we learn from audit?



5. Referrals and Response

The audit group considered the quality of referrals into Children's Social Care from a range of agencies and the implications, in terms of the child's journey.

Features of Good

11 case referrals were good, for example because the referral was appropriate, it included

sufficient detail to be able to make an initial assessment of the child's needs, and the response to the referral was timely. The best practice was seen where the referral itself clearly evidenced knowledge of the child and family history. Another made good reference to 'toxic trio' research (domestic abuse, substance misuse and mental health) and why that had led to concerns for this particular child. In another case, the assessment was being completed at the same time as referral leading straight to a Strategy Discussion, which meant that the child's wellbeing was promptly safeguarded.

Improvement Needed

9 cases were not yet good, because delays in response to a confirmed referral, in completing the assessment or securing a robust risk analysis in relation to the child's disability, meant that the impact in terms of timely and positive benefit to the child was as yet unclear.

6. Assessment of Need

Features of Good

10 of the cases audited were found to have good assessments. This was because there was good multi agency co-ordination of information, clear diagnosis of disability *in context* (the child's experience); some clear thinking about the support the family had or needed, a good understanding of safeguarding concerns and evidence of risk evaluation. The best examples were where assessment of need was detailed, drew from a range of professional and family sources, used previous history and identified risks to inform recommendations. The casework that stood out was where the child's voice shone through, and where the disabled child's needs were differentiated from those of their siblings.

Improvement Needed

10 assessments were not yet good. The common theme was that although there was evidence of active involvement by agencies, and multi agency assessment of need, there were factors that auditors felt could not be linked to having a good impact for the child. For example, where professionals did not agree on thresholds and this was not taken through to a clear resolution; where the child's need due to disability was astutely recognised but the same focus was not given to safeguarding issues raised in referral, or

where it was hard to see the child's voice or lived experience throughout the assessment.

The significance of these is in the ensuing impact that a good or an incomplete assessment has on the plan that follows, and therefore, the effectiveness of actions for the child.

7. Planning to Meet Need

Features of Good

The planning in 6 cases was found to be good. This was because the planning was done by a multi agency group, clearly setting out the outcomes sought for the child, with timescales and accountabilities. Progress against the plan was reviewed, discussing what was happening for the child and re-setting objectives where required. Good practice shone through, where the family and the child were involved in drawing up a plan for risk reduction or prevention.

Improvement Needed

14 cases were not good, because they required improvement in order to clearly show how the planning and review process were linked and leading to meeting the child's needs. The biggest thing that auditors thought would improve plans was to make sure the focus on the child's disability, or the parents' daily struggles, was clearly not masking safeguarding issues or missing the child's perspective.

The Focus Group was concerned about their experience of 'gaps' in the safeguarding system. They recognised this might not be a shared experience in some settings, but agreed amongst themselves that recurring concerns were

- whether there is a lack of focus on evaluating parental capacity to change (*"it's a difficult conversation to be had, unless you are very sure of your ground"*)
- the hard evidence required by the court system (disability and abuse)
- the general strain on professionals' capacity caused by workloads
- housing needs and house -adaptation waiting times for families. *"The right housing makes it easier on the family, behaviours are more easily managed,*

stress reduced, and consequently less risk to the child".

The Focus Group had questions about the role of Housing Officers and disabled children subject of a Child Protection Plan - is there scope for District Housing Officers to prioritise those children on housing waiting lists, where there are safeguarding issues related to or masked by housing conditions?

8. The Child's Experience

A critical balancer to the risk of focussing too much on the parent's need was recognised by the audit group as ensuring a focus on the child's experience and voice through assessment, planning and review.

The Focus Group described a vast array of practical and innovative ways they focus on the child's experience, or see it happening with other professionals. This included using the Advocacy service delivered by Barnardos, using the 'Total Communication' tool, observations of behaviour, consultation tools such as "My Plan".

The audit group found good practice examples of focussing on the child's voice and experience in cases, not as many as were described by the focus group; there is a concern that at times consultation and engagement is getting 'lost' in the way we record things, or is not done enough.

The main barriers experienced by the Focus Group were a) difficulties building relationships with disabled children where you need to gain trust with a child who is highly dependent on their parents and b) challenges balancing the requirements of direct work and recording practice. The Focus Group conveyed a real determination to resolve this in daily practice.

The Ambassador who met with the Focus Group and Auditors agreed how critical this is, stressing the importance of talking to the child or young person without making assumptions, explaining

"No one knows the disability like the child. You can see things from the outside, but you can't learn what it feels like or what the child needs without asking where possible. It's important not to make assumptions about that. It's important to understand you might need to take longer to do that assessment, or form that relationship".

Schools were cited as a good source of information about the child's communication needs and lived experience, and their ability to notice the smallest change in the child's communication, verbal or behavioural. The group also cited the benefit of empowering children with disabilities to access mainstream leisure and social activities, to widen their protective network.

The **Communication Trust** has published *Other Ways of Speaking* to support practitioners working with children whose speech is difficult to understand or who use non-verbal means of communication.

9. The Impact Of Practice

The audit examined the effectiveness of safeguarding practice, looking for interventions that were supporting, empowering and protecting the disabled child or young person.

Audit questions reflected *Life Outcomes* (for example is the child safe) and *Process Outcomes* (for example is the child/family valued, listened to, respected, are we working in partnership *with* them not '*doing to*' or '*for*' them).

In 18 cases, there was good partnership with the family towards risk reduction, leading to better outcomes for the child in 16 of those cases and reduced risk of harm in 10 of those cases.

In 15 cases the information being shared between professionals was generally raising awareness about the child's vulnerabilities in a way that made sure their needs were being supported, monitored and reviewed.

In two cases, the parents did not seem to engage in the safeguarding plan, or were reluctant to do so. They felt the concerns were about the child's disability and did not agree with professionals about safeguarding concerns. In these cases, there was ongoing work taking place to support the young person and family but it was too early to say what impact this work has had.

The audit group did not have capacity to consult disabled children as part of the audit this time. So findings about impact are informed by a recent **survey** carried out within Gloucestershire schools, to determine children's thoughts and feelings about home and school in relation to

their safety. Out of 20,484 surveys of girls (36%) and boys (64%) in Years 6, 8, 10 and 12, **1,512 confirmed they had special educational needs.**

Out of children who chose to answer the question

- 16% of children with SEN said **they or their family are receiving help from a social worker.** This compares to 6% without SEN.
- 69% of children with SEN felt **very safe at home** compared to 72% without SEN.
- The same question was asked but about how safe children felt at school. Interestingly there were a higher percentage of children with SEN (43%) who felt **very safe at school** compared with 39% without SEN.
- 748 children with SEN chose to answer a question about whether they had ever seen, heard or been a victim of **domestic abuse or violence.** 13% of these children answered the question as 'Most days' and 'Quite Often' with 76 of these children confirming that the abuse is still happening.
- Positively out of the children with SEN who answered questions about bullying 62% feel their **schools handle bullying** quite well or extremely well. But of the children with SEN 32% of them have suffered from **serious bullying** in the last year compared with 19% without SEN in the last year.
- For the children with SEN who answered questions about bullying, the main cause was not due to their disability but due to **rumours, personality or size.** Nevertheless, 16% had been **bullied due to their disability.**

From this, we can see that Domestic Abuse and Bullying are a real concern to many children with SEN, and how much they rely on their school to feel safe from bullying. We can also see that percentages of children who feel they are being exposed to Domestic Abuse (defined in the survey for them) are not proportionate to the numbers of children with disabilities subject of Child Protection plans.

10. Practitioners are learning from each other more than written guidance

It was striking that not many of the Focus Group turn to written guidance in relation to safeguarding disabled children. This is especially so, when reviewing what guidance there is, including:

The **South West Child Protection Procedures** guidance endorsed by the GSCB about safeguarding disabled Children.

"Safeguarding Disabled Children Practice Guidance 2009, which sets out advice on recognition, identification and interventions with disabled children who may have been abused or harmed.

Statutory Guidance on how to safeguard and promote the welfare of disabled children using short breaks" (2010), a primary document for the safeguarding of disabled children when they are staying away from their family

They explained they tend to seek advice mostly from within their own teams, or from a supervisor, Safeguarding Leads in their own organisation, from Health Visitors with safeguarding experience, from Community Support Nurses, from the Children's Social Care Helpdesk. All cited examples of learning from GSCB training or GSCB Roadshows.

They explained that although there is lots of national best practice guidance, and a good local Thresholds Document (GSCB Levels of Intervention Guidance), sometimes the 'theory' feels disconnected from reality. They explained that sometimes it feels more helpful, in a pressurised work environment, to turn to experienced colleagues to discuss what is needed to safeguard a specific disabled child.

This tendency was felt to be prevalent across the safeguarding system, and the Focus Group emphasised the importance of GSCB support to Designated Safeguarding Leads and Named Professionals so that they are knowledgeable sources of accurate advice, to help hard pressed professionals absorb and discuss written guidance within their working day.

It also led to Focus Group reflections about how important it is for GSCB to communicate guidance in a range of ways as well as in written form. They cited the Roadshows, and access to GSCB training, which was regarded as good.

A check on the GSCB Training data confirms the multi agency course about Safeguarding Disabled Children is popular and in demand; courses have been fully booked from March 2016 to March 2017. From March to April 2017 there is one course running which will mean 25 more people will be trained.

The GSCB "Safeguarding Children and Young People with Disabilities" is a 2 day training course for staff who regularly works with children, young people and their families; and with children with disabilities.

The aim is to raise awareness of safeguarding issues for disabled children and young people and develop the skills to recognise and respond to early child protection concerns. On completion of the programme, participants will be able to:

- Understand child protection procedures in relation to disabled children
- Demonstrate an understanding of the legislation relating to disabled children
- Understand the increased potential for abuse amongst disabled children
- Demonstrate a knowledge of the difficulties in identifying abuse in disabled children
- Identify ways of working that protect disabled children.

The course is run by the GSCB Safeguarding Children Trainer and an experienced practitioner from Gloucestershire 2gether NHS Foundation Trust.

To book a place on this course please go to the training pages on the GSCB website.

The Focus Group saw the LSCB as having a really important role in communicating and *expecting* professionals to make sure disabled children at risk of abuse have equal access to the co-ordinated safeguards they need, and a strong voice. *"Professionals need constant support to learn from each other about all the innovative*

ways out there to listen to what the child can tell you, verbally or through behaviour. The LSCB also needs to call people to account for never making assumptions - ask the parents, ask the child, ask each other."

The Focus Group were keen to see technological innovation to empower disabled children and their parents to give their views, own the plan, and keep their records. A particular suggestion from health colleagues was a Health App for the parent and child in place of the current Red Book.

11. Working Conditions

A shared barrier experienced by the Focus Group was the pressure on workloads. *"Some of the repetitive admin we do, the time needed for good communication, our own caseloads and the volume of services and changes in staff makes it hard to build relationships. What really helps is having a very clear plan, and regular chances to review who is doing what and why - and is it working for the child."*

The group spoke about the importance of support carving time to build professional networks and relationships, where a lot of agencies are working with a disabled child and their family.

The Focus Group reported that in their experience, partnership work was in general good - *"especially if you know the professional or team you are in contact with, then communication is good"*.

This led to conversations about regular information sharing; *"it does feel like because of the volume of services going in, everyone has a part of the puzzle. If you don't keep in touch, it can mean nobody keeps that holistic view needed in order to safeguard the child"*.

LEARNING FROM AUDIT

12. Messages for practitioners:

- ❖ Make it every day practice for disabled children to make their views and experiences known - learn from the tools available, and from each other.
- ❖ Be mindful of the early psychological help that may be needed for new parents of

disabled children, to support their resilience (and the wellbeing of the child).

- ❖ Treat disabled children with the same degree of professional concern accorded to non-disabled children. Be prepared to challenge carers and ensure that abusive practices do not go unrecognised.
- ❖ The child's impairment should not detract from early multi-agency assessments of need that consider possible underlying causes for concern.
- ❖ Make sure professional advice to parents whose disabled child is subject of a Child Protection Plan provides consistency - what outcomes are being sought, what changes are needed to address risk.
- ❖ Never make assumptions. Always ask when assessing a disabled child: "Would I consider that option if the child were not disabled?"
- ❖ Challenge yourself, and each other, to make sure more children are enabled to take control of their plan.

13. Messages for Managers:

- ❖ Additional resources and time may need to be allocated if an investigation of potential or alleged abuse of a disabled child is to be meaningful.
- ❖ Basic training and awareness raising of the susceptibility of disabled children to abuse is essential for those working with disabled children.
- ❖ Promote a culture of consulting with, listening to and encouraging the participation of disabled children. Make sure your staff know about Advocacy Services for disabled children.
- ❖ Ensure there is clarity of responsibility for safeguarding disabled children between different teams and across professions.
- ❖ Give staff up-to-date information about specialist advice and resources, interpreters and court intermediaries.
- ❖ Communicate with Commissioners (within your own or other organisations) about service gaps in relation to

safeguarding disabled children, as well as "what works".

14. Learning from you

MULTI-AGENCY REFLECTIVE LEARNING CIRCLES

Are you in a Core Group working with a child who is subject of a Child Protection Plan for a second or subsequent time? If so, the Circle would like to hear from you. We would particularly welcome hearing from Core Groups for disabled children.

The Circle aims to look at what works well and the barriers you face to secure sustained change.

The Circle asks Restorative Practice questions, not to replace case management decisions but to explore what would work better for children.

To put a case forward please contact Emma Lane, GSCB on 01452 583643

15. Changing Landscapes - but the need remains the same

Concluding reflections include the positive steps taken by the GSCB partnership, to keep a focus on disabled children:

- ❖ It has a Disabled Children Champion; it has a Consultant Ambassador with experience of disability; and GSCB members were instrumental in evaluating practice against the Ofsted report and devising the Safeguarding Disabled Children Action Plan;
- ❖ The GSCB run a regular training course about safeguarding disabled children; GSCB audits consider needs and outcomes for disabled children whatever the theme; a focussed audit was undertaken this year and will further inform GSCB training;
- ❖ Findings from the audit will also inform a scheduled update to the Safeguarding Disabled Children Action Plan;
- ❖ the 2016 GSCB Roadshow included a workshop on disabled children;

- ❖ the Anti-Bullying information on the GSCB website pages for young people includes reference to disability. GSCB does not have a specific anti-bullying policy, but advises schools to create their own and really think about the schools specific needs. The Section 175 audit tool circulated to schools sets out what a good anti-bullying policy should include;
- ❖ the planned GSCB Ambassador Reference Group will include 5 young people with disabilities;
- ❖ As a result of the Ofsted thematic report on safeguarding disabled children, Gloucestershire's LADO aggregates information about allegations against professionals and volunteers working with disabled children, and has reported that in the last 12 months there have been 12 allegations management cases involving children with disabilities.

However, following the Government's response to the Wood report (2016) on the review of the role and functions of LSCBs, and changes set out in the Children and Social Work Bill 2016, we are heading for a period of transition towards changes in the framework and accountability for co-ordinating multi-agency arrangements for protecting children in local areas.

The pivotal role that LSCBs and key local partners have in ensuring that local arrangements to safeguard and promote the welfare of disabled children are in place, tied to the critical comments of Ofsted relating to these local arrangements in 2012, mean it is vital that the effectiveness in meeting their responsibilities is supported and monitored nationally. The proposed new statutory framework and supporting statutory guidance following the Wood review provides an important opportunity to set the direction of the required change.⁴

Whatever systems are in place, the need to ensure the safeguarding of disabled children remains. Moving forward within new structures and during the transition to them, it is vital that local authorities, the police and health service along with other relevant

⁴ Safeguarding Children in England (2016), National Working Group on Safeguarding Disabled Children

16. Recommendations to Gloucestershire Safeguarding Children Board

1. To note and share the findings from this newsletter.
2. To ensure the current review of GSCB performance reporting includes checking opportunities for better data on children with disabilities to assist its oversight; to understand significance of the % of disabled children subject of Child Protection Plans in relation to population and evidence from research.
3. To consider whether the GSCB is assured that the Threshold (Levels of Intervention) document is adequate when specifically considering safeguarding disabled children.
4. To ensure information from GSCB via all Sub Groups is made available in a wide range of formats, including and beyond the traditional written form, about good practice in identifying and responding to safeguarding concerns/risk management specific to disabled children.
5. To submit the findings set out in this newsletter to the GSCB Ambassador Reference Group, inviting Ambassador feedback about their/other young people's views and recommended steps.
6. To consider whether GSCB representatives from the Districts are able to report on waiting lists for housing and adaptations in relation to families with a child with disabilities subject of a Child Protection Plan and children with disabilities supported through a Child in Need Plan.
7. To consider what opportunity there may be across agencies, to make use of technological advances to support innovative engagement with disabled children and their parents (for example, Health App in place of current Red Book)