

Child Protection Annual Report 2023-24

A summary of child protection conference activity 2023/24

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1. Introduction

“We are aspirational for all children and young people. We lead with excellence and promote best practice in partnership with each child and the important people in their life. The child’s voice is key, and we independently advocate and review children’s plans so they can be kept safe and reach their full potential.”

The Safeguarding Service’s vision, 2024

This report will provide an overview of the activity and effectiveness of Child Protection between 1 April 2023 and 31 March 2024. It will provide analysis and commentary on trends in practice and data over this timeframe and highlight the service’s objectives over the next 12 months.

Over recent years families have navigated parenting through a pandemic and lockdowns which caused disruption to health and education services for their children and subsequently a ‘cost of living crisis’ (learning.nspcc.org.uk/media/2747/statistics-briefing-impact-of-coronavirus.pdf). Many families are still experiencing and living with the impact this has had upon their lives. The financial hardships and emotional trauma many families have faced, has at times made parenting their children safely more of a challenge. Milton Keynes has a robust and comprehensive early help service that has been valuable in supporting families throughout these challenges so that children can be safely cared for within the families wherever possible. When children are referred into statutory services there are often complex risks which require skilled and robust safety planning.

The Milton Keynes approach to Safeguarding uses the theoretical framework of the ‘signs of safety’ approach and this is well embedded within the management of Child in Need and Child Protection Plans. This allows workers to take a strengths-based approach whilst balancing this with effective risk assessment and safety planning. Alongside this approach, over the past year, there has been a renewed focus on keeping the child central in all our work, where their lived experiences, wishes and feelings inform our understanding of how best to keep them safe.

Towards the end of this year, we have seen the ‘child first’ approach launch in Milton Keynes, which promotes valuing children’s lived experiences, making decisions that prioritise them, and ensuring our interventions are making a positive difference in their lives. The way we do this is to ensure the right interventions are offered at the right time, and that children are kept within their families when it is safe to do so. The Independent Chairs have been at the forefront of this launch alongside senior managers, setting and leading the expectations and standards of best practice which incorporates a ‘child first’ Milton Keynes. The ‘HELP’ acronym is used to convey the ethos of the child first model – H; Hear them. E; Empower them. L; Listen to them. P; Protect them.

Within this past year Children Social Care received a focused visit from Ofsted and an important element of their feedback was that Milton Keynes needs to improve the timely and effective escalation of concerns when risks increase. The aim of the child first approach is to achieve this by ensuring we fully understand the child’s lived experiences and the impact these experiences have on their safety, physical and emotional development. We want to be aspirational for children in Milton Keynes to ensure every child reaches their potential and grows up feeling loved and cared for. We believe that by fully understanding children’s lived experiences and the impact they have in

the immediate and long term, we can recognise correctly when risks have escalated and ensure that our subsequent response is timely and protective.

Within this past year the Safeguarding Service has moved to a new premises within the local community which is easily accessible by public transport and is a space to convene conferences away from the main corporate office where Social Workers are based. This has supported the service to maintain its independence and allowed face to face conferences to continue with families and professionals, with the option for professionals to join remotely via Microsoft teams.

Chairs have continued to try and liaise with families in advance of conference to help prepare them for the meeting. This has usually been by telephone and has enabled the safeguarding service to be confident that families know what to expect from a conference. There has been a continued focus on ensuring families have had the completed Child and Family assessment prior to the conference and an opportunity to understand this. The service continues to promote best practice and the expectation is that Children and Families assessments are shared with families 48 hours before the conference. This ensures that there is a shared understanding of the Child Protection concerns before the conference commences so all in attendance can be prepared and the conference is able to produce a plan that is meaningful.

Independent Chairs are also pivotal in the overview of the service in a scrutiny role to ensure the quality, safety and effectiveness of safeguarding practice and policy. Challenge is provided where appropriate and identified themes and trends reported to senior management in several ways, including regular formal reporting to Performance Management Meetings. More recently the Independent Chairs have joined the Permanence Planning Meetings which are chaired by Service Managers and are a forum where the plans for permanence for all children in care are reviewed and scrutinised. The Independent Chairs have played an integral role in the delivery of these meetings, ensuring the right plans for permanence are being identified and actioned for children, many of whom have previously been subject to child protection plans.

2. The safeguarding service and Milton Keynes

Sitting within the wider Safeguarding Service, Child Protection Conferences are chaired by 9 permanent full time and 2 part time Independent Chairs, supported by 5 Business Support colleagues. This is an increase in 2.5 Independent Chairs over the past 12 months.

Milton Keynes is a growing and expanding city with a younger than average population. The ambition set out in the MK City Plan (2024) is for Milton Keynes to be home to 410k people by 2050, growing from 287,060 residents (2021 census). This is a 42.8% growth in population, making Milton Keynes the third fastest growing city in the UK according to the leading think tank 'centre for cities.' This growth equates to 63,000 new homes between 2022-2050. This is significantly higher than the local identified housing needs of 53,256 new homes.

It is notable that 27.4% of Milton Keynes residents are under the age of 19 years in comparison to the rest of England which is 23.7%, meaning in addition to a rapidly growing population, Milton Keynes also has a much larger percentage of their population that is children. The population growth of Milton Keynes was 1.04% last year in comparison to the rest of England which was 0.83%. Milton Keynes and the national 2021 census showed a 15.4% population growth in

comparison to a 6.4% national average. This is the second highest percentage increased in the Southeast of England. The rapidly growing city with a younger population is likely to result in an increased demand in public services, and this demand has begun to be reflected in our increase in Child Protection numbers over this past year.

In terms of the economic profile of Milton Keynes, there are some areas of significant deprivation. Milton Keynes was ranked 211 out of 354 Local Authorities in 2010 (with 1 being the most deprived) and this increased to 181 in 2015. In the 2021 census the Office for National Statistics (ONS) evidenced that 48.7% of households in Milton Keynes were deprived in at least one of the assessed dimensions of deprivation. This statistic masks the true picture of some areas of significant deprivation in Milton Keynes. 18 areas in Milton Keynes are ranked in the 20% most deprived nationally with 8 amongst the most deprived 10%. This is particularly notable within Bletchley East, Woughton and Fishermead wards which were ranked in the 3% most deprived areas in England. There is a high correlation between children on Child Protection Plans within these areas. This is notable as sometimes the family stress of social and economic deprivation can contribute to an increase in neglectful care, mental health challenges and domestic violence. Bywaters et al 2022 summarized research that suggests an incident rate of about 20%.

Children Social Care has experienced a significant impact upon the demand for their services as the population has increased, with 1,613 children being assessed as formally in need for specialist services in July 2016 in comparison to 2,015 children as of August 2023, which is a 24.9% increase in Child in Need cases. This has decreased over the past year to 1,874 in March 2024 which is a 6.9% decrease, however, remains a high number of children identified in need of specialist services. Positively there has been significant investment and reorganisation within the service to accommodate this growing need.

In 2023 there was a restructure of the Family Support Teams to accommodate the demand on services, and in 2024 there have been further restructures and investment within the wider service. The Children with Disabilities Team have gone through an extensive improvement plan and has expanded to 3 team managers from the previous 1 team manager. There is now a separate service for the short breaks for children with disabilities and 2 teams for the statutory Child in Need or Child Protection cases. This has allowed more management oversight of our most vulnerable children, ensuring care plans are carefully put together and reviewed. The Multi-Agency Referral Hub (MASH) has also had a restructure at the end of 2024 and has expanded to 4 team managers and 1 service manager, from the previous 1 team manager and 3 deputy team managers. This has allowed the MASH to be structured with a clear triage 'duty' service, assessment team and emergency social work team.

Currently the Independent Chairs undertake a Dual Role, completing both the Independent Child Protection Chair role and the Independent Reviewing Officer role, holding a mixed case load. This year we have had an increase in 2.5 Independent Chairs to accommodate the increase in demand we have been experiencing. A paper has been completed that considers the dual role and its impact upon the service. This paper evaluated if any changes to this would be beneficial, given the increased demand on the service.

The knowledge, experience, and practice wisdom of the Independent Chairs provides valuable contribution and leadership for the service. It was concluded that with the increased demand on

the Safeguarding service the need to work robustly without compromising the quality and standards of the service was becoming more challenging. The two roles work within two different statutory frameworks with competing demands in relation to statutory responsibilities. The recommendation was therefore to create specialised, focused, and separate roles that will offer the Chairs the opportunity to work in a more focused and robust manner. There is a planned launch of a consultation process which will propose the independent chair roles splits to become 2 roles: the Independent Reviewing Officer and the Independent Child Protection Chair.

3. Children subject to Child Protection Plans

Milton Keynes has averaged 176 children on CP plans over the past 12 months with a peak at 203 and a low of 145. This is a small increase from the previous year which ended on 164 but a significant increase when compared to March 2015 where there were 57 children subject to Child Protection Plans and in July 2016 there were 82 children subject to Child Protection Plans.

This number has continued to steadily rise over the years, although at the year beginning for 2023/24 the numbers were the lowest, they had been for the preceding 12 months at 145, which was 20.5 children per 10k, significantly lower than the southeast rate of 43.2 and the national average of 42.9 (see figures 2 and 3). This number has steadily increased over the course of the past year and has ended on the higher number of 198, which is 28 per 10k. This remains a considerable outlier when compared to the southeast and national figures, however closer than 12 months previous.

Milton Keynes has long held a family support ethos to child protection, where child protection concerns have been managed under Child in Need plans if the assessment has been that the family are working cooperatively with the plan to manage and reduce risk. The vulnerability in this approach is that the children at the most risk of significant harm in the future have not been highlighted within a large CIN population as requiring a more robust and close oversight. Should the risk of harm escalate and increase the limitation is that this may not be identified and actioned in a timely enough manner.

This is reflected in the conclusion drawn in Ofsted's focused visit this year, with the report stating that there is not timely and effective escalation when concerns for children increased. The previous full inspection in 2021 also highlighted that the quality of practice with children in need of help and protection remains too variable. The benefit of these children being subject to Child Protection Plans is that they are managed within a more robust statutory framework of Child Protection with the support and scrutiny of the independent chair who can ensure a more consistent response to these children should risks escalate. For this reason, the focus of the past 12 months has been to ensure the correct children are being identified for escalation to Child Protection Plans.

Figure 2; Child Protection Plans at year end.

Year	2018-19	2019-2020	2020-21	2021-22	2022-23	2023-24
MKC	136	131	185	181	164	198
MKC rate per 10k	19.9	19.2	26.4	27.3	23.8	28
SE rate per 10k	41.4	41.2	40.2	43.1	43.2	
Eng rate per 10k	43.7	42.8	41.4	42.1	42.9	

Figure 3; CPP numbers 2022/23

April	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	March
140	145	158	165	172	178	173	190	192	202	203	198

When analysing the Child Protection numbers what is noticeable is that Milton Keynes numbers have risen per 10k every year since 2018-2024 (19.9 per 10k – 28 per 10k) whereas the southeast and national numbers have largely stayed consistent around 41-43 per 10k. Being an outlier is relevant as it tells us that Milton Keynes is responding to the management of Child Protection differently to the majority. It is important that we understand the impact this has upon the children within Milton Keynes.

It is important to consider that Milton Keynes does have an excellent early help offer, which includes 10 family centres. This will contribute to supporting many families to safely care for their children without statutory intervention. The recent changes to Quality and Assurance with the introduction of a new framework at the beginning of this year has supported us to better understand the impact our work has upon children’s outcomes. This has helped direct practice in this area and clarify if the threshold for the escalation to initial child protection conference is being implemented correctly and consistently. The outcome of the independent learning reviews and audits of practice has told us that there has been too much drift and delay for some children who are subject to CIN plans, some of whom do meet the threshold for Child Protection plans. This has highlighted the need to consistently implement the Child Protection threshold, and to identify the correct children to be made subject to Child Protection plans. The introduction of the pre-birth policy has also empathised the need to use Child Protection as a framework with unborn children where the risk of significant harm is present, as this was one cohort this particularly impacted.

An additional key change during this past year was to make changes to the child protection consultation process. In Milton Keynes the consultation process meant that the Social Worker was required to complete a consultation with the Independent Chairs prior to bringing the case to initial conference. The purpose of this process was to ensure the correct cases were being brought to conference and to offer guidance and support to Social Workers. The challenge of this approach is that decisions were being made without the multi-agency networks contribution. ‘Working

together to safeguarding children 2023' outlines the importance for the decision to convene an initial child protection conference be a multi-agency decision, as no one agency can take sole responsibility to safeguarding children effectively. This change was made in November 2023, and this has meant more cases have been brought to initial child protection conference (see figure 4). Some of these are cases that may previously have been sign posted as part of the consultation process. This has meant decisions about children being made subject to Child Protection Plans are being made as a multi-agency, where the independent chair can robustly analyse and consider all relevant information.

Since consultations have ceased 85% of cases coming to ICPC have resulted with a Child Protection Plan which is slightly lower than the rate the 6 months prior to consults ending which was 95%. Although this number is 10% lower, it is expected that the team managers will need a period where they adapt to identifying correctly this threshold, it is however still a high conversion rate. It has resulted in more children being made subject to Child Protection Plans than ever before in Milton Keynes where the threshold of significant harm has evidenced this is required. We can therefore be confident that the correct children are subject to Child Protection Plans now more than ever.

Figure 4 – number of ICPCs per month, 23/24.

Date	ICPC's Held	% change from previous month
April, 23	6	n/a
May, 23	9	50.0
June, 23	13	44.4
July, 23	12	-7.7
Aug, 23	13	8.3
Sep, 23	11	-15.4
Oct, 23	12	9.1
Nov, 23	22	83.3
Dec, 23	10	-54.5
Jan, 24	18	80
Feb, 24	18	0.0
March, 24	17	-5.6

4. Conferencing

4.1 Timeliness of conferences

There were 250 ICPCs and 285 RCPCs held in the year 2022/23 totalling 535 conferences held over the duration of the year. Over the course of the year 70% of ICPCs were held within the statutory 15-day timescale, which is less than 2022/21 which was at 73% in the same timescale. In addition, this is lower than the statistical neighbours (75%) and the national average (79%), and a statistic

which was previously more consistently higher. The internal target for conferences being held on time is 90-95%

This downward trend is a potential reflection of the impact of the increased workload the service is facing, when compared against the increased overall Child Protection numbers year on year (see figure 5). When looking at a more detailed breakdown of this data (see figure 6) and relate this to the number of children subject to Child Protection Plans you can make the correlation between the months where the demand for ICPCs were higher and timely ICPCs being scheduled. This evidences that that service is challenged in its capacity to meet demand when the number of children on Child Protection Plans peak.

This trend is also seen when looking at the RCPCs within timescales (figure 6). There are 3 months where RCPCs within timescales were impacted, reaching a low of 73.7%. When these months are compared to the case numbers in figure 3, the RCPC timeliness reduces when the total number of CP plans increase significantly above the previous average. This evidences that there is currently little room for flexibility in the service and on the months when there are additional conferences requested the on-time performance is impacted.

The consultation process is scheduled to consider splitting the dual roles as an approach to tackle this challenge and to provide the ability to better manage months where there is an increase in demands upon the service. The theory being that having 2 separate distinct roles will allow the chairs to respond more robustly and efficiently when they are not trying to balance 2 different statutory frameworks with competing demands.

Figure 5; Percentage of ICPCs held within 15 days of the S47 investigation.

Year	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
MKC %	95	87	91	93	75	73	70.4
Statistical neighbours %	79	77	82	81	78	75	78.6
National %	77	87	78	83	79	79	79.2

Figure 6; ICPCs and RCPCs in timescales by month 2022/23

	April	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	March
CP plans	140	145	158	165	172	178	173	190	192	202	203	198
% ICPCs	78.6%	90.0%	82.6%	92.3%	72.2%	82.4%	84.6%	52.9%	75%	66.7%	30%	38.5%
% RCPC	91.3%	96.5%	92.3%	94.0%	89.9%	84.7%	96.4%	94.6%	96.9%	94.7%	95.8%	73.7%

4.2 Risk indicators

The distribution between the 4 categories of abuse has stayed largely consistent with last year’s distribution, however emotional abuse and sexual abuse have both risen. Currently 72.8% of children subject to Child Protection Plans are registered under the category of Neglect in comparison to last year’s 76.8%, which is a small decrease (figure 8). Milton Keynes continues to have a higher percentage of children under Child Protection Plans under the category of neglect in comparison to the national figure which was 49% within the same time period. This fits in with the previous family support ethos when children were more often brought to initial conference when it has not been possible to reduce the child protection concerns first under a Child in Need Plan.

Cases where the family support ethos struggled to impact change through intervention were more often cases where parents had complex and enduring challenges such as their own learning, health or mental health needs which made parenting their children safely a challenge. The harm often seen in these circumstances was the neglect of their child’s more basic physical and emotional care needs.

Figure 8; category of plans

Year	22/23	March 23/24
Emotional	17.3%	21.2%
Neglect	76.8%	72.8%
Physical	4.2%	3.2%
Sexual	1.8%	2.5%

There is a need to consider creating a neglect pathway, where a toolkit is provided to support practitioners to objectively understand the severity and the impact of the neglect children are experiencing, both in the immediate and longer term, to ensure a timely, robust response in these cases. This was identified as a need in the previous year’s annual review, now the restructures within the wider service, and the launch of the new Q&A framework and the ‘child first’ approach have been completed this is an opportune time to re-focus on this priority.

5. Outcome of Child Protection Conferences

Figure 9; The outcome of deregistration from Child Protection Plans

Outcome	22/23	23/24
CPP transferred to another Local Authority	0%	2%
CPP to CIN	76.4%	63.6%

% CPPs starting for a second or subsequent time	13.9%	11.2%	13.6%	12%	12%	2%	0%	15%	11%
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Figure 11; duration of Child Protection Plans

	April	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	March
1 yr. 22/23	16.8%	15.5%	15.0%	11.6%	9.8%	7.1%	11.8%	12.9%	12.1%	13.2%	12.0%	10.4%
1 yr. 23/24	6.4%	6.2%	10.1%	13.9%	16.3%	18.5%	21.4%	18.4%	16.7%	19.3%	20.7%	17.7%
2 yr 22/23	1.1%	1.0%	1.0%	0.0%	0.0%	0.0%	0.5%	2.2%	2.4%	2.1%	1.1%	1.2%
2yr 23/24	1%	1%	1%	0%	0%	0%	0%	1%	1%	0%	1%	1%

It is positive to note that the number of children becoming subject to Child Protection Plans for a second time is low at 7% on average for the year in comparison to the national mean of 23.3%. This evidences the impact Child Protection Plans have in Milton Keynes and we only deregister children from plans when we are confident that children are safe and positive changes will be sustained. This is also supported by the robust early help package available to families in Milton Keynes.

Several children remain subject to a Child Protection Plan for more than a year, however positively a small amount is longer than 2 years and all of these are in pre-proceedings or subject to an interim supervision order (see figure 11). It remains important that these specific cases are scrutinised, so the reasons are fully understood and that any potential drift and delay is challenged.

The Service Manager for Safeguarding Service meets monthly with the Head of Service for Family Support Services, to specifically discuss this cohort. This ensures cases are either progressed back to CIN or to pre-proceedings/PLO if appropriate to prevent drift and delay.

There are instances in which families have responded slowly to intervention or where progress has been slowed by changes of Social Worker or other professionals, there are also a few instances in which proceedings have been instigated and children have been placed on Interim Supervision Orders. To date we have taken the view that the Child Protection Plan will remain in place until the end of proceedings which accounts for some of the plans that are longer in duration, particularly given the rise in Care Proceedings over this past year.

Over the past year a paper has been written that considers how Interim Supervision Orders (ISO) can run alongside Child Protection and consider if there is any merit in developing a specific ISO pathway. This pathway will allow the oversight of an independent chair on a pathway separate to the Child Protection framework in response to the publication of the public law working group supervision order report which was published in April 2023. Now the service has been restructured it is hoped there will be capacity in the next 12 months to pilot this approach.

7. Participation

It is fundamentally important to ensure that families participate fully in Child Protection Conferences in order that the plan is its most effective and collaborative. In the case of children and young people, it is the role of the chair to ensure that their wishes and feelings remain central to the process and that they fully understand the decision-making process and their contribution to it.

This year we have made a focus to promote the use of advocates within conferencing to ensure children's voices are central when considering their lived experiences and developing child protection plans. All children over the age of 6yrs, when coming to an initial child protection conference are referred to our advocacy service who will make contact and offer their support, adopting an 'opt out' rather than a 'opt in' approach, to ensure all children who may want an advocate has access to one. Currently 26% of all children who are subject to a Child Protection Plan who are eligible for an advocate have one. This is something to continue to promote and track over the next 12 months to ensure children are supported to meaningfully contribute to this process. This is vital when working in a 'child first' manner and ensures children's lived experiences, wishes and feelings are central to the development of their child protection plan.

It is positive to note that 57% of children have participated in their conferences this year in comparison to last year's 7%, and this speaks to the 'child first' approach that Milton Keynes leads with. 87% of mothers participated which evidences a good level of engagement from families with the conferencing process and compares to last year's 88%. However, it is important to observe that only 31% of fathers participated in their children's conferences which is a decline from last year's 39% (see figure 11). This needs to be an area of focus over the next 12 months, to ensure that both parents are consulted and engaged in the process whenever possible. For the child protection framework to adequately safeguard children this is imperative.

Consideration should always be given to children and young people attending the conference if it is appropriate for them to do so and if it can be managed effectively and safely. The move to the Holne Chase Conference centre has facilitated children attending their conferences, as we have a family room with toys, that offers a safe quiet space for children, so they are able to take a break or attend for all or part of their conference as appropriate.

There is an expectation that the Social Worker will work effectively with families so that they understand the reasons for conference and ensure that all relevant paperwork is shared with them. They are required to prepare a C&F assessment which should be done alongside the family and shared with them not less than 48 hours before the conference. Regular Core Groups should ensure that families are clear about what is expected of them, how the plan is being progressed and that progression is measured and how they can demonstrate that the risks have reduced within a reasonable timescale. Positively the amount of Core Groups being completed within timescales this year have increased and averaged 80% within timescales over the course of the year. This ensures there is clear oversight and progress of the Child Protection Plan.

Figure 12; participation of family in conferences

	22-23	23-24
Children who participate in their conference	7%	57%
Mother's who participated	88%	87%

Father's who participated	39%	31%
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Summary

What are we worried about?

- **The anticipated city growth.** Milton Keynes is a growing and expanding city at a higher rate than the national average, and this is a challenge projected to continue until 2050. Milton Keynes has a young population with a higher percentage of their population being children than the national average. This is having a significant impact on complexity and demand upon CSC as a whole and the safeguarding service.
- **The increased demand on the service.** Currently the Independent chairs are fulfilling 2 roles, the Independent Child Protection Chair and the IRO role, carrying a mixed case load. This can lead to competing demands of the two roles which can result in chairs not being able to robustly prioritise either. There is a plan to re-organise the service this year to split to the roles to ensure the chairs can specialise and robustly oversee their caseloads.
- **Timeliness of conferences.** There has been a reduction in ICPCs held in timescales. This can be linked to the months where there is a higher demand for ICPCs and staffing shortages due to long term absences.
- **Seeing children in their homes.** An opportunity for development is for the Independent Child Protection Chair to routinely visit children and families in between review conferences which at present does not happen routinely due to capacity.
- **Participation.** Including fathers in the conferences process needs to be improved. It would also benefit the child to include stepparents and any adults who are important to the child in their care planning.
- **Drift and delay;** In some instances, there is evidence that timely actions haven't been taken when the level of risk a child is facing had changed. In some instances, there has been drift and delay in progressing child protection plans. The focus over the next 12 months will be upon embedding the midway review which is designed to identify these cases promptly, allowing robust and timely challenge to address these worries.

What has worked well?

- **Reorganisation of the service;** A paper has been written that outlines the impact and rationale for splitting the independent chair dual role into 2 distinct split roles' the independent reviewing officer (IRO) and the Independent Child Protection Chair. There is a plan to launch a consultation period with the service in July 2024. The aim is to allow the chairs to specialise and become more robust in executing the duties of their role in consideration of the increased demands of the service.
- **Midway reviews;** Midway reviews in between review conferences launched this year, this allows us to track the progress of the CP plan between conference and pick up and tackle any drift and delay for these cases.

- **Child protection consultations:** A review of the CP consultation process was completed and the decision to stop the CP consultation was made. This ensures that decisions about convening ICPCs are made in a multi-agency manner as part of a strategy meeting and does not delay cases where this threshold has been met coming to ICPC. Independent chairs remain available to the operational teams offer advice or guidance in line with best practice. Each chair is linked to a specific team and will attend their team meetings, bringing specific learning or research to aid with the development of the workforce.
- **Advocacy:** Advocacy has moved to an opt out rather than an opt in approach, meaning all children who are coming for an ICPC are offered the opportunity to have an advocate to support their wishes and feelings to be central the assessment of risk and subsequent planning. This is reflected in our participation of children with the conference process that has risen from 7% to 57%.
- **Prebirth policy;** A clear policy about the use of the Child Protection framework for unborn children has been launched and now Child Protection is being used for these children identified to be at risk of significant harm in utero or upon birth. This is allowing for intensive support to be provided at the earliest opportunity and prevents drift and delay in care planning for these children.
- **Writing to the child;** As a 'child first' Milton Keynes we write all our minutes to the child. This practice is embedded and allows practitioners and the important people in the child's life who read the minutes to be thinking about the impact of what is being discussed upon the child. We believe this approach encourages the reader to consider the matters being discussed from their child's perspective and keeps their voice and lived experiences present throughout.
- **Holne Chase conference centre:** Our new conference centre allows hybrid conferences to take place in person with the family, social worker and Independent Chair and the option of Microsoft Teams for other professionals. This has encouraged a high level of engagement from partnership agencies, ensuring less conferences are delayed due to not being quorate. Many professionals choose to continue to attend in person and this has enhanced the level of engagement and communication between families and these key agencies. The family room, which offers a friendly and safe space for children, making it more accessible for children and young people to meaningfully engage in their conferences and development of their plans.
- **Staff retention and capacity;** The team remains stable and has increased by 2.5 new chairs over the past year to accommodate the increase in children subject to Child Protection Plans and those who are looked after.
- **Quality and assurance;** A new Q&A framework has launched in the past year and includes monthly highlight reports of audits, targeted training and independent learning reviews which offer more in depth learning on specific cases. Independent Chairs have been pivotal in the implementation of this new framework in a scrutiny role to ensure the quality, safety and effectiveness of safeguarding practice and policy. All chairs contribute to the monthly audits of cases, providing an understanding of the quality of practice and identifying any themes where there are specific strengths in practice or development is required. Chairs also sit on the

different permanence panels to track children's plans for permanence, ensuring there is no drift or delay.

- **Signs of safety;** 2 of the chairs are SOS champions and are involved in promoting and sharing the application of this approach across the service. Chairs also continue to use Signs of Safety to good effect. This includes 'mappings' in conference.
- **Data;** The number of children Subject to Child Protection Plans over 1 year or 2 years remains low. This evidences that drift and delay is challenged in this space and children's care plans are moved forward, meaning they are cared for safely. The numbers of children subject to CP plans has increased over the past year and sits at 28 per 10,000, which is an increase from a previous 19 per 10,000. This is still notably lower than statistical neighbours and the national average. We believe that we are identifying the correct children to be managed under the Child Protection framework and Milton Keynes robust and effective early help offer means support is offered to families to tackle safeguarding concerns at the earliest opportunity.

Objectives for 2024/2025

- **Splitting the roles;** Given the continued pressure on the service and the anticipated growth of the city, it is likely these pressures will only increase over the coming years. There is a plan to launch the consultation process in order to split the roles. It is hoped this in part, coupled with the additional resource of 2.5 new chairs will allow the service to improve the timeliness of ICPC/RCPCs.
- **Participation;** Now we have managed to increase the participation of children in their conferences, we will continue to focus on further improving this and also better include all family members, fathers, step parents and extended family members as appropriate. It is only of benefit to the child if all the important adults in a child's life are included in their care planning.
- **ROTH pathway.** A risk outside the home (ROTH) pathway is being developed, which will allow us to consider a different way to support children and young people who are experiencing extra familial harm. The aim is to ensure there is a statutory framework around the children identified to be at risk of experiencing significant harm, whilst taking a different approach that repositions the family alongside the professional network, acknowledging the risk of harm is from outside the family. This needs to be carefully balanced to ensure if there are push/pull factors from within the family home these are robustly assessed and managed under the ROTH CP plan.

- **Interim Supervision Orders/Supervision order pathway.** A draft policy has been created in response to the PLO working groups recommendations, which uses a framework similar to the CP framework, meaning children subject to ISO/SO continue to have robust independent oversight of their care planning. Once the service has been restructured there is the opportunity to review if this could be piloted.
 - **Neglect pathway.** An emphasis on how the service tackles the matter of neglect and consideration given to appropriate staff training, the possible introduction of the graded care profile tool and close working with health.
 - **Midways.** Midway reviews are not yet fully embedded, and it is envisioned within the next 12 months they will be robustly tackling any drift and delay and ensuring the CP plan is being robustly implemented between reviews.
 - **Domestic abuse.** Domestic abuse features in a large percentage of cases where children are subject to Child Protection plans. We aim to develop a specific risk assessment that
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