

#### Appendix B: Luton Safeguarding Children Partnership Yearly Report 2024-25 - Partners Safeguarding Snapshot

## Bedfordshire Fire & Rescue Services - achievements and impact

The following data has been collected from the period April 2024- March 2025 inclusive relating to our safeguarding referrals for Luton:

Local Authority		Child (0-17)	Female child	Male child	Gender not known
Luton Borough	Council	21	3	5	13
(LBC)					

For LBC, 13 child referrals were made in 2023-24, compared to 21 this year (62% increase).

As a Service, 93% of BFRS safeguarding referrals this financial year were made for adults and 7% for children, this reflects our demographic where we are more likely to attend incidents and visit individuals as adults than as children and so explains our low number of child referrals compared to adult overall.

For the child referrals made with this financial year, across all three local authorities including Luton, neglect/acts of omission was the main concern raised when making a safeguarding referral.

Through this financial year, a number of the safeguarding team have received Designated Safeguarding Officer training from the NSPCC and there have been developments made to the level 1 children's safeguarding training offer, which will be rolled out in the 2025-26 financial year. A new level 1 children's safeguarding online training package has been developed and is to be launched May 2025, a revised level 1 adult safeguarding online training package will be launched at the same time, both training packages will be annually recertificated by all staff. An in-person level 1 training package incorporating adult and child safeguarding has also been developed for new recruits and will continue to be worked on during the 2025-26 financial year ready for the next recruits' course. The level 2 training package has also been refreshed ready for those staff members who require retraining after 3 years and staff members who have moved into respective roles that require this training. This refreshment has incorporated learning from Safeguarding Team members own CPD (continued professional development) courses that have been attended within this financial year to ensure ongoing development with any up-to-date changes. A new training schedule for the next financial year has also been developed to support the roll-out and will allow training to be a strong focus for 2025-26.

#### **Bedfordshire Fire & Rescue Services - achievements and impact**

In terms of the outcomes for children, young people, their families, and safeguarding practice, improvements to staff awareness and training has directly impacted referral numbers for us and has also ensured that all staff are aware of the importance of sharing information in a timely manner with sufficient detail. This hopefully improves outcomes for children within our local communities including Luton, as it ensures that we work as efficiently as possible within our safeguarding partnerships.

#### Bedfordshire Hospitals Foundation Trust – achievements and impact

#### The following achievements took place in 2024/25:

Implementation of the following took place and supported the board priorities alongside learning identified in SARs/ CSPRs/DARDR's/LeDer etc.

- Implementation of Oliver McGowan Training for Learning Disability and Autism
- Developed a 16 Days of Action programme in support of the Violence Against Women agenda which included support from external partners and training sessions for acute staff
- Commenced Specialist Safeguarding training for nursing/ midwifery students at the University of Bedfordshire to support increased awareness of safeguarding practices and processes during acute hospital placements
- Implemented a new High Intensity Users Panel to support the identification of vulnerable adults, with modern day slavery, domestic abuse, drug and alcohol addiction etc. at the forefront of identification
- Implementation of a new referral system/ data collection for Paediatric Safeguarding
- Implemented a new pathway to improve the data collection and monitoring of Mental Health Detentions in hospital. Quarterly reports are now available to ensure board oversight.

Successful implementation and/ or continued funding for the following services also took place during 2024-25;

- New Emergency Department Navigators Service

  To support individuals whereby there are concerns of exploitation aged 10-25
- New onsite Specialist Drug and Alcohol Team who support patients during their inpatient hospital stay and ongoing care in community
- The Trust has employed a transitions/ Send Nurse to support with transition from children's services into adult services within the acute Trust. This nurse alongside the clinical teams support the gradual process of preparing young people for adult healthcare, and when required also support with decisions on appropriate services and locations of care.

#### **Bedfordshire Hospitals Foundation Trust – achievements and impact**

Development of the following cross site guidance/policies etc. were also completed:

- New Standard Operating Procedure (SOP) on the management of allegations against staff
- New Restraint and Restrictive Practices Policy alongside newly developed care plans and risk assessments.
- New Cross site Domestic Abuse Policy
- New Learning Disability Policy
- New Learning Disability Strategy

The team have also presented at regional and national forums regarding hospital safeguarding procedures deemed as good practice. These included the following:

- Bedfordshire domestic abuse and violence against women and girls conference
- EoE Crossing pathways: integrating best practice within health and DA
- EoE Foundation in Paediatric Surgical Nursing Safeguarding Adults & Children Presentation

#### Recognitions received in 2024/25:

- Received the Innovation of Care Award in December. This was related to work undertaken within the Trust for their contribution to Domestic Abuse Practices within the hospital
- Commendations in recent Domestic Abuse Related Death Reviews (DARDR's) in recognition of Domestic Abuse Practices within the Acute Trust.

It is evident in the last year that our continued collaboration between the Adult Safeguarding team, Safeguarding Children and Safeguarding Midwifery teams is supportive of our 'Think Family' ethos. As a result, the link between adults presenting with adult safeguarding concerns is regularly identified, whereby as a child there may have been previous safeguarding involvement in childhood. This structure supports and improves the level of communicated handovers of care into the various services

The Safeguarding Team have continued to deliver training to staff, as appropriate to their roles in a variety of forms including E-Learning packages, Face to Face training, through virtual platforms alongside role modelling in clinics/departments and hospital inpatient wards. This has remained a priority for the Trust.

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#### Bedfordshire Hospitals Foundation Trust – achievements and impact

The team have responsibility for delivering Level 1, 2 and 3 safeguarding training to staff dependent on roles and responsibilities. They also oversee prevent, MCA, Gillick competency and Fraser guideline training.

In addition to this, the team have also developed and held a specialist safeguarding conference on Neglect and Self Neglect attended by over 100 participants and supported by external partners. This concentrated on the learning from recent Safeguarding Adult Reviews (SARs), Child Safeguarding Practice Reviews (CSPRs) alongside transitional needs within safeguarding.

The Trust will continue to support the Key Priorities set out for the LSCP, however internally the following Key Priorities have also been identified for the Trust in 2025/26:

- Development of Mental Health Act Policy to ensure robust pathways and processes are in place for patients detained under the Mental Health Act in the acute setting.
- Continue with the delivery of Safeguarding Training to increase training compliance, skills and knowledge base across both hospital sites.
- Review the model (including capacity) of both hospital sites Safeguarding teams to ensure appropriate resource levels to meet the increasing complexity of safeguarding activity within the hospital setting.
- The Trust focus areas for 2025/26 will be exploitation and homelessness. This will commence with a focus review and gap analysis, followed by any actions and recommendations that are identified within these workstreams.

The number of notifications received, remained high and similar in number to that of 2023/24.

Various categories of abuse where identified within the referrals received. Mental Health and wellbeing concerns (Parental, Perinatal and child focused) was identified as the highest category, with Domestic Abuse and Neglect following closely behind.

Quarterly reports are completed by the safeguarding team. These reports are not only reviewed by executives internally but were also shared with the safeguarding partners and LSCP within the local area. Each report details the activity and outcomes of safeguarding cases identified within the trust alongside reports on CSPRs, SARs, Domestic Abuse Related Death Reviews (DARDR's), training and audits.

Regular Case studies and their outcomes are also featured at Board level.

Alongside the quarterly reports, the team completed highlight reports for the internal executive boards, which have also been shared externally at various safeguarding meetings.

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#### Bedfordshire Hospitals Foundation Trust – achievements and impact

In the past year, highlight reports have been completed and focused on the trusts response to perinatal mental health, domestic abuse and restraint and restrictive practices.

Internal audits were also completed and reported on both internally and externally.

Each quarter report for 2024/25 has been embedded below for more clarity/ detail and specifies information that has been broken down per LA.



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#### **Bedfordshire Luton Milton Keynes - achievements and impact**

BLMK-ICB continues to work well as a statutory partner, working together with the local authority and police to ensure that their functions are exercised for the purpose of safeguarding and promoting the welfare of children in Bedford Borough. This includes the key areas of focus; Neglect, Child Sexual Abuse (CSA), Exploitation, Mental Health & Emotional Wellbeing and understanding where gaps in service provision at local level exist.

The ICB continue to engage with board sub-groups for neglect, CSA and exploitation and to input into policy, pathways and multi-agency initiatives. We have engaged with the development of a neglect dataset, training, awareness raising, promoting GCP2 and voice of the child conference. We have contributed to multi-agency audits and work around multi-agency chronologies.

The ICB have introduced a GP safeguarding audit tool, which is used in support visits to GP practices to highlight what safeguarding practice looks like and where support may be helpful. During the last 12 months the safeguarding team carried out supportive safeguarding visits to 33 GP practices. These visits were led by the Named GP for safeguarding, and the Designated Nurses for Adults and Children.

We have provided safeguarding training for GP and practice colleagues. We have delivered 10 level 3 adult and children safeguarding training sessions with attendance of 168.

The team have delivered 9 safeguarding bitesize themed training sessions with attendance of 126.

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# **Bedfordshire Luton Milton Keynes - achievements and impact**

12 MCA bitesize training sessions have been delivered to 228 attendees.

The ICB continue to develop the Primary Care Forum and have held 3 forums which count towards GP's safeguarding training hours, which were attended by 307 GPs.

We have strengthened links with the quality and primary care team to ensure early identification of potential risk and a multi team response.

The statutory requirements for the ICB are set out in the Safeguarding Accountability and Assurance Framework developed by NHS England. The ICB contributes to the national safeguarding tracker, this is to enable greater scrutiny and better understanding of the themes and learning from statutory reviews. It is populated with information regarding Child Safeguarding Practice Reviews, Rapid Reviews, Safeguarding Adult Reviews and Domestic Homicide Reviews.

The ICB is assured that commissioned services have appropriate safeguarding arrangements. Contracts contain a safeguarding statement and commissioned health partners have regular contract meetings and provide regular returns and exception reporting.

The ICB ensures that internal safeguarding arrangements are sufficient, and that safeguarding is embedded in practice. The ICB has developed a training matrix to ensure all ICB staff are trained in safeguarding to the appropriate level for their roles and responsibilities as set out in the Intercollegiate Guidance document.

We offer a safeguarding supervision offer to any patient-facing colleagues in the ICB and in health provider organisations.

Designated professionals provide support to the system around escalations and resolving blockages.

The ICB have promoted and helped to develop the Child Protection Information Sharing Service (CPIS). This system enables health and social care to share information securely to proactively protect Children and Young People. All Children who are on a Child Protection Plan and Children in Care are now flagged in 7 health care settings including: A/E departments, walk in centres, maternity services, ambulance trusts and out of hours services. Work is underway for CPIS to be expanded to cover all health care settings.

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#### Bedfordshire Luton Milton Keynes - achievements and impact

Following learning from case reviews of both Children and Adults the ICB have set up a transition workstream. Transition planning and preparedness for transition are now seen as fundamental and should follow best practice to commence preparation for adulthood as indicated by the young person and their needs. The Deputy Chief Nurse chairs the regional East of England Transition Network meeting. Local health partners transition leads are linked into this meeting to ensure transition remains a priority.

Future developments include an internal review of the safeguarding team structure and redevelopment of roles.

A safeguarding community of practice will be established to engage all safeguarding leads across health, share learning and best practice and promote a health economy approach.

#### **Bedfordshire Police - achievements and impact**

- MVAWG is embedded in strategic governance (Gold/Silver/FTTCG) and remains a key priority for the force.
- <u>Power BI dashboards</u> and performance frameworks in place. Enhanced performance management with Detective Inspectors sign off and new robust process for some crime types for example Neglect, Rape and SSOs and GBH offences.
- <u>Scrutiny panels</u> (DA, RASSO, stalking) review victim care and outcomes. These are chaired by an independent chair, allowing for feedback, learning and reflective practise.
- New Victims and Witnesses Board monitors compliance with the Victims' Code.
- <u>New Commissioned services</u> for KIDVAs and CHISVAs have commenced in April 25, providing therapeutic support for our child victim recovery. This has streamlined our approach with services now providing support for both adults and children.
- New Silver groups for CSE and DA chaired by Detective Superintendents across the Public Protection Unit with analysts providing daily scanning around these thematic crime areas and highlighting persons of concern, repeat victims and perpetrators and high-profile cases alike. These new monthly meetings provide an extra layer of scrutiny, holding officers and supervisors to account and provide an opportunity for learning and reflective practise.
- <u>Multiagency Child Protection Team –</u> Bedfordshire Police have a qualified Detective Constable suitable for working within the new MACPT at Luton Townhall. The officer will be seconded and become embedded into the team in August 25 to represent Police. The advert to recruit a civilian member of staff suitably qualified will continue to be published to find a longer-term approach to the team.

#### **Bedfordshire Police - achievements and impact**

- <u>Safeguarding/Child Abuse Training</u> Pan Beds training across the 3 Local Authorities including Working Together and Neglect training and a new Child Sexual Abuse 2-day course being run originating from the NSPCC. Further to this, Bedfordshire Police have contributed towards a series of Multi agency training days, being funded through the Luton Pathfinder project, on back-to-basics Section 47 investigations for practitioners. Internal training on Child Protection, Safeguarding and Voice of the child has been rolled out over the past 2 months to all front-line Patrol teams.
- Op Encompass During this review period Bedfordshire police have invested in the use of technology to improve the response to Operation Encompass, the statutory requirement to notify education providers when a child has been involved in a domestic abuse incident. The prompt response to such incidents ensures that the child's education provider is aware of the incident and can best respond to and support the child in the aftermath of the incident. The use of Bedfordshire polices' 'Nectar Al' system in response to Op encompass has enabled a more timely and comprehensive approach. The system can identify relevant cases, so improving the accuracy of responses and is also able to undertake the 'administrative' functions so speeding up the time taken to process an Op Encompass notifications. A case example of the evidence of the improvement seen, is in a case whereby there was a significant DA incident, involving parties open to MARAC, due to the children in the household not having been entered on the Athena systems 'POLE' data this case would historically not been picked up, however Nectar was able to identify the children from the system and prompt an Op Encompass response, so ensuring our ability to safeguard and support children within DA is enhanced.
- <u>Police Quality Assurance</u> manager has been working with partners to drive improvements in relation to the nature and quality of police referrals. Regular multi-agency referral audit meetings have been implemented that allow a detailed exploration of content, timeliness and effectiveness of work being referred to MASH. The findings from these reviews are then used to inform practice improvements for police.
- <u>Philomena Protocol</u> Police have been working with the sider partnership to implement the Philomena Protocol. This is the process whereby looked after children who are identified as being at risk of have going missing have a focused response document completed, giving the care giver an opportunity to better understand any underlying issues or context to missing episodes, therefore being able to consider intervention work. It then provides a detailed personal document that can be used should the child go missing to assess risk and provide lines of enquiry to locate them. The use of the protocol promotes the safety of those at risk children and ensures a swifter, better informed response.

#### **Education and Diversion**

• Education and Diversion Team statistics – During the academic year 2024/25 the Bedfordshire Police Education and Diversion team have to date engaged with 58,252 children and young people with 762 early interventions being undertaken. The team have also delivered 574 educational inputs and have supported 300 partner events.

## **Bedfordshire Police - achievements and impact**

- <u>Pol Ed</u> In April 2024 Bedfordshire Police provided high quality lesson plans and assemblies on a range of policing priorities to all educational establishments in the county through the Pol-Ed programme <u>A positive force in education | Pol-Ed A positive force in education</u>. To date 99% of all schools and other educational establishments across the county are signed up to use the resources (with 100% sign up across Bedford Borough and Central Bedfordshire). So far this academic year 69,690 children and young people have received a Pol-Ed input which includes 2,700 receiving an input around MVAWG, 1,740 receiving an input around harassment, 3,260 receiving an input around digital safeguarding and 2,460 receiving an input around sexual related offences.
- <u>School based meetings</u> The Education and Diversion Team continue to hold regular Education and Police partnership forums allowing attendees to discuss current safeguarding themes and looking at ways to work together to tackle concerns. In addition, representatives from the Education and Diversion team sit on the three local authority regular DSL forums.
- Youth cabinets The education and Diversion team have worked with both the Bedford Borough and Central Bedfordshire Youth Cabinets around key safeguarding areas with workshops taking place with both sets of young people to empower the elected members to work in partnership to tackling specific topics. The Bedford Borough Youth Cabinet picked up MVAWG as part of their work around community safety and the team are working with them to deliver a campaign in two areas of Bedford based around the "Ask for Angela" scheme but aimed at young people
- <u>VR headsets</u> Through home office funding 35 VR headsets have been purchased by the force with part of their use to engage and educate students around key policing priorities by immersing them in realistic situations including several safeguarding themes. A new campaign called "Lost boys" has recently been launched which includes a VR film based around CCE.
- <u>Amber</u> In January 2025 the Amber unit was relaunched for Luton seeing two E&D police officers and two youth workers from the Luton Youth Partnership Service working together to provide a first response service for specific incidents in order to prevent exclusions and assist DSL's with initial safeguarding incidents.
- <u>Theatre in Education</u> Theatre in Education continues to be an important opportunity to provide education to children and young people across Bedfordshire. This academic year has seen 15,192 attend a performance and follow up workshop around MVAWG

#### Neglect

#### Worked well:

CCS invested in the provision of external think whole family approach training from Professor David Shemmings on a number of topics to support their practice around abuse and neglect:

- Neglect
- Human Development
- Trauma Informed Practice
- Supervision
- Analysis

In addition to this, CCS developed and delivered level 3 training which is mapped to Intercollegiate Documents for Adults, Children and Children in Care on neglect & self-neglect and domestic abuse this year.

The neglect tab (on the safeguarding template accessed via CCS clinical recording system) has been redesigned and relaunched. This means practitioners can now record when there is a neglect concern. Then it leads into questions about what assessments have been / could be used to support assessment of neglect including links to the clutter scale, neglect screening tool, obesity safeguarding tool and direction to complete GCP2. The use of this tab is not fully embedded in practice but there will be a piece work of to improve this in the next year. This work will form part of a wider piece of work about the safeguarding template to make it easier for practitioners to record safeguarding information. A new guidance document will be produced to enable this and information sessions completed in order to communicate the guidance and changes.

CCS has adapted their safeguarding supervision model. As a result the 0-19 team has the opportunity to bring cases more frequently. In order to focus on the neglect priority practitioners have been directed to bring cases to supervision where there are concerns about neglect specifically for large sibling groups (which has been identified as a theme internally). Support is offered within supervision to review care planning, consider the lived experience of the child and tools which can be used to promote this assessment of need.

Use of Graded Care Profile 2 continues to be emphasised within training and supervision when there are any identified issues of neglect. Staff have all been offered training for GCP2 within children's services and there is an emphasis on using this tool to support ongoing assessment of need, referrals as part of multi-agency working.

Use of assessment tools e.g. 'A Day in the Life of....' Are available for staff on the intranet and are equally advocated within training and supervision to support maintenance of focus on the lived experience of a child. This year has seen the introduction of a Day in the Life tool for children with disabilities.

APPLE (Appearance, Presentation, Patter, Likes and Dislikes, Environment) is used by the 0-19 team as a way to document observations and the lived experience of children. Record keeping forms part of essential to role training for the 0-19 team which includes information about APPLE and day in the life tools.

In the next year there will be a CCS neglect pathway launched. This has been developed following an internal review of a Bedford family. A task and finish group will be meeting in the next year to ensure this can be embedded into practice. The pathway will focus on joint visits to reduce risk of acclimatisation to neglect concerns and an internal review of the effectiveness of neglect risk reduction to avoid drift for children. The pathway also aims to promote the use of safeguarding supervision and professional escalation as necessary.

Antenatal assessments are universal with a triage system to target those assessed as vulnerable and there is continued focus on how to improve the quality of these assessments, ensure continuity of care and use analysis of assessments to ensure the correct pathway of care is identified.

Domestic Abuse, Stalking and Harassment (DASH) assessments are completed as part of visits when there is an identified risk of domestic abuse disclosed or suspected. These are used to support referral to Multi-Agency Risk Assessment Conferences (MARACs) and for safeguarding referrals to the local authority social care, early help and to support ongoing universal support for children and families. In the last year CCS has been able to attend MARAC meetings to support multi agency risk assessments.

The ICON Cope (Babies cry, you can cope) is led across the Pan Bedfordshire system by CCS. It is an evidence-based programme consisting of a series of brief 'touchpoint' interventions that reinforce the message making up the ICON acronym. These are:

- Infant crying is normal and it will stop.
- Comfort methods can sometimes soothe the baby and the crying will stop.
- It's OK to walk away if you have checked the baby is safe and the crying is getting to you.
- Never, ever shake or hurt a baby.

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#### **Cambridgeshire Community Services**

Incident reporting of possible non-accidental injuries to children under the age of 2 years has been improved during the year, with an increase noted in the number of incidents reported. The data is reported and scrutinised monthly and this is now being reviewed across the services in operational, clinical and safeguarding teams to ensure pathways are being followed according to the multi-agency agreed process, escalations are timely undertaken as needed and themes of learning are quickly responded to and addressed. CCS is working on a piece of work regarding preventable accidents and sharing this information with families.

Local and national reviews identified the increased risk to children and the complexities associated with working with children and families with large sibling groups. The need to support a robust approach to safeguarding supervision and clinical work has progressed over the year. An aide memoire was added to the policy to support caseload review and signposting cases to safeguarding supervision. Data reporting has been progressed to try and establish a more robust mechanism for services to identify families with large sibling groups in their care. An audit of this is now planned for Quarter 3 of 2025-2026 to review the impact of this work.

A CCS dietician took part in the public launch of the Pan Bedfordshire Stop, Think Neglect campaign demonstrating CCS commitment to the neglect priority.

#### Impact:

The ICON programme is now embedded into the system working and into clinical practice. Staff are able to support consistent messaging and approaches to reduce the incidence of abuse head trauma.

Staff in CCS support the oversight of the pathway for bruising and injuries to non-mobile babies and children under the age of 2 years. They utilise the Datix incident reporting system which then enables oversight of safeguarding processes which is timely and responsive. The data is also reviewed monthly by the named professionals and operational leads to ensure that they are sighted on any learning at the earliest opportunity and are able to follow up on safeguarding actions timely.

CCS requested changes to the Pan Bedfordshire young carers policy following a review of a case where there were concerns about neglect. These changes are now in place.

CCS has participated in policy and procedures group to share comments and views on neglect guidance which has been developed e.g. affluent neglect. These are available on the Pan Bedfordshire procedures page and have been highlighted to practitioners.

CCS participate in the Pan Bedfordshire neglect meetings and provide data which can be analysed in the group.

## **Barriers/challenges:**

On CCS clinical system the neglect tab is not as utilised as it could be on the safeguarding template- there will be a piece of work to encourage its usage to promote good record keeping and prompt the use of tools available.

#### **Child Sexual Abuse**

Staff in CCS have had access to training packages at level 3 specifically considering the impact of sexual abuse on children and adults. The training is co-developed and co-delivered by the safeguarding teams through a think whole family lens.

CCS has participated in the Child Sexual Abuse snapshot meetings and is participating in the Child Sexual Abuse Pan Bedfordshire strategy meetings.

CCS contributed and participated in the learning session 'Risk assessment and thresholds' webinar. This learning will be shared within CCS to support practitioners understanding of risk assessments, probations risk assessments and considerations needed when supporting children at risk of sexual abuse. In the next few months this information will be shared.

The 5-19 service provide basic sexual health advice including general discussions about safe sex and consent. Practitioners if appropriate would signpost young people to the Integrated Contraception and Sexual Health Service (iCaSH). Any safeguarding concerns would be referred to children's social care. Again, the iCaSH service would provide the advice and make onward referrals as appropriate. Both teams have access to the CCS safeguarding team duty line to seek immediate advice and guidance.

CCS Chat health offer enables young people to text in requesting sexual health advice. As part of this offer, they can request to have contact with a school nurse. Padlet links can also be sent out to the young person with sexual health advice. The padlet has also been sent out to schools who can share as appropriate with students

On the clinical recording system there are quick links available to the exploitation tool and the multi-agency submission form.

#### Impact:

The reflective practice sessions with iCaSH have resulted in a Bedford case supporting the development and awareness in practice of the need to robustly share information. With staff in iCaSH and safeguarding children team developing guidance to support staff decision making in complex cases where sexual abuse and assault are evident.

#### **Barriers / challenges:**

Consideration about the use of the exploitation tool by iCaSH and the 5-19 team including ways to promote its use. CCS has agreed in the Child Exploitation and Missing meeting to form part of a task and finish group to review this.

#### **Exploitation**

#### Worked well:

Policies for Safeguarding People: think whole family and contextual approach, Domestic Abuse and Female Genital Mutilation have been reviewed again during the year. A standard operating procedure has also been created to support staff with domestic abuse allegations, disclosures and actions to safeguard.

Input and participation into all Child Exploitation and Missing, Missing and Gang Panels.

The safeguarding teams for adults and children have worked closely with the Integrated Contraception and Sexual Health team (iCaSH) to develop reflective practice sessions which consider safeguarding issues arising from their contacts with young people. Specific guidance has been shared with the teams in relation to contacting the safeguarding duty line when there are concerns indicated regarding potential child sexual exploitation or abuse. CCS practitioners attend strategy meetings and complex strategy meetings as appropriate.

#### Impact:

The reflective practice sessions with iCaSH have resulted in a number of cases where exploitation was an identified feature and the need to professionally challenge was evident. These professional challenges have had a positive impact on the outcome of the case for the young person allowing greater ability to safeguard them and enhanced the knowledge and skills of the practitioners involved.

#### **Barriers / Challenges:**

CCS has asked questions of the local authority and there response to young people at risk of exploitation outside of the family home and the need for child protection plans to invoke the CP-IS marker. This remains an ongoing discussion which has not been clarified in the latest modifications to Working Together to Safeguard Children. CCS practitioners have been given guidance to ascertain the level of risk to a child and what type of plan they are on so this can be escalated if needed on an individual basis.

Consideration about the use of the exploitation tool by iCaSH and the 5-19 team including ways to promote its use. CCS has agreed in the Child Exploitation and Missing meeting to form part of a task and finish group to review this.

#### Mental Health, Emotional Wellbeing

#### Worked well:

CCS 0-19 service continue to offer confidential texting services: ChatHealth for children in school years 7-13, and Parentline for parents with children of any age.

Specialist health visitors are in post to support the Perinatal Mental Health pathway and to support other frontline staff which is continuing to be developed. As part of this offer there is an expectation in the 0-5 team that emotional wellbeing is discussed with parents/carers. These assessments include Whooley questionnaire, Generalised Anxiety Disorder (GAD) 2 and 7 and the Patient Health Questionnaire (PHQ) 9. Safety netting advice would be given regardless of the outcomes including advice to contact their GP or NHS 111. If a need is identified referrals can be made for support but a targeted health visiting provision can also be offered. This targeted offer would include emotional wellbeing sessions.

Padlet's are shared with parents and carers by the 0-5 team. This includes a section on mental health and a section on strategies to promote mental wellbeing. The DadPad is also shared with fathers/ significant carers.

Practitioners have access to the Shared Care system via our clinical system. This means practitioner have been able to review this information and include in their assessments and care planning. This information would also be shared with partners when appropriate.

Signposting and referrals to 3<sup>rd</sup> sector organisations including CHUMs, community mental health team and Mental Health School Teams.

#### **Impact**

Currently a yearly audit is in place to audit the use of the PHQ9, GAD 2&7 and Whooley questionnaire usage.

#### **Barriers**

If there are challenges these will be identified as part of the audit process and acted on as appropriate.

#### **Golden threads**

CCS safeguarding team share information via the bi- monthly safeguarding newsletter which has been refreshed recently. This newsletter has a think family ethos and is co-written with the adult safeguarding team.

Learning from reviews is shared via the safeguarding newsletter, 0-19 locality meetings and safeguarding link meetings which capture the speciality teams and is co-delivered with the adult safeguarding team to share learning from adult reviews too. This in the past year has included sharing information about the shared care record, safeguarding information node, the registering parents and significant carers and themes such as neglect.

In order to ensure the safeguarding links function well in the chain of information dissemination there has been work completed with operational teams to ensure there is a link for each service.

Duty safeguarding phone line was started in September 2024 and this firmed up the communication process with the safeguarding team and ring-fenced dedicated time to the provision of advice and guidance. Feedback has been positive from practitioners.

The foundation children's safeguarding package has been updated to take a Think Whole Family approach. It has also been updated based on internal learning regarding the bruise/mark pathway for immobile children.

CCS safeguarding team has a new process in place with Bedford hospital whereby calls can come directly into the safeguarding team as opposed to the hub. This has promoted a quicker response positively impacting on information sharing and reflective conversations about concerns for children. We will be reviewing this to consider practicing in the same way with Luton and Dunstable hospital.

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#### **Cambridgeshire Community Services**

CCS has participated in audits with separate local authorities and Pan Bedfordshire audits. Following these audits action plans are developed both internally and externally. Both of which are monitored and learning is shared with practitioners.

CCS practitioners have worked with children social care partners to attend child protection conferences in person to promote working relationships with families and partner agencies.

# **ELFT** - achievements and impact

ELFT maintains a robust safeguarding governance framework, ensuring effective leadership, accountability, and multi-agency collaboration across all services and boroughs. Safeguarding is a core responsibility embedded at all organisational levels, reflecting the Trust's values.

The Trust contributes strategically and operationally through participation in various safeguarding partnership boards, subgroups, and local assurance meetings. This includes engagement in local audits, multi-agency training, and strategic reviews such as Safeguarding Adult Reviews (SARs), Child Safeguarding Practice Reviews (CSPRs), Domestic Abuse Related Death Reviews (DARDR), Channel Panels, and PREVENT/CONTEST Boards.

The Trust Safeguarding Committee meets quarterly to provide challenge and assurance regarding safeguarding arrangements and monitors compliance. Quarterly reports are submitted, providing assurance against responsibilities outlined in CQC Regulation 13, Contractual Safeguarding requirements, the Children Act (1989/2004), and the Care Act 2014.

#### **ELFT** - achievements and impact \* Safeguarding Achievements – Key Highlights What We Delivered Impact √ Launched QI Project on Routine Enquiry into Strengthened our ability to identify and support victims— Domestic Abuse creating a safer, more responsive culture. @ Represented ELFT at all safeguarding partnerships Ensured a strong voice for ELFT in system-wide safeguarding Frontline staff feel more supported, confident, and capable in Provided integrated supervision and safeguarding managing complex safeguarding needs. Achieved high training compliance across all levels Boosted staff confidence and consistency in safeguarding Improved safeguarding supervision compliance Supervision is now embedded in daily practice, reinforcing accountability and learning. Worked through challenges with resilience Despite secondments and vacancies, our team maintained timely responses and excellent service. Hosted hybrid Prevent Safeguarding conference Over 200 participants attended, enhancing collective understanding and coordination across agencies.

ELFT data indicates a 17% reduction in referrals to Children's Social Care (CSC) in 2024-25 (348 referrals) compared to the previous financial year (420 referrals in 2023-24). This decline is partly attributed to challenges in accurately recording and capturing referral data within ELFT's electronic systems, particularly when submissions are made directly via Local Authority portals and not consistently recorded on RiO. The use of multiple electronic patient record systems further complicates data collection.

To address these issues and enhance accountability, the Trust has implemented an improved reporting process for CSC referrals. From 1 April 2025, all staff are mandated to complete an In Phase incident report form concurrently with any child protection referral to CSC. This measure will enable timely and accurate data capture, effective oversight by the safeguarding team and prompt, effective intervention.

In 2024-25, the safeguarding team conducted several multi-agency and Trust-wide audits. Findings, learnings, and recommendations were reported to individual staff members, managers, and the Trust Safeguarding Committee. These audits were initiated in response to learning from local and/or national case reviews or internal reviews. Audit outcomes are presented to the Safeguarding Committee for assurance and to ensure relevant learning is disseminated across directorates to improve or change practice.

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# \* Safeguarding Achievements – Key Highlights

☑ What We Delivered	<b>P</b> Impact		
✓ Launched QI Project on Routine Enquiry into Domestic Abuse	Strengthened our ability to identify and support victims—creating a safer, more responsive culture.		
Represented ELFT at all safeguarding partnerships	Ensured a strong voice for ELFT in system-wide safeguarding strategy.		
Provided integrated supervision and safeguarding advice	Frontline staff feel more supported, confident, and capable in managing complex safeguarding needs.		
Achieved high training compliance across all levels	Boosted staff confidence and consistency in safeguarding practice.		
Improved safeguarding supervision compliance	Supervision is now embedded in daily practice, reinforcing accountability and learning.		
→ Worked through challenges with resilience	Despite secondments and vacancies, our team maintained timely responses and excellent service.		
	Over 200 participants attended, enhancing collective understanding and coordination across agencies.		

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#### The audit topics were:

- Think Family Approach
- Voice of the Child in Adult Services
- Domestic Abuse and Practice and Reporting
- Child Neglect

# **Key Themes Identified Across Audits**

- Training & Supervision: Targeted efforts across all directorates to increase safeguarding competence and compliance.
- Data Quality: Enhanced InPhase reporting and audit tools introduced to improve accuracy and clarity.
- Child-Centred Practice: Renewed emphasis on capturing the voice and lived experience of children.
- Policy Alignment: Updated safeguarding policies to reflect Think Family and Domestic Abuse guidance.
- Continuous Learning: Use of repeat audits, supervision, and newsletters to drive quality improvement.

#### **Safeguarding Training Compliance**

The Trust operates under a Safeguarding Training Strategy and Training Needs Analysis, based on the Intercollegiate Document, Safeguarding Children and Young People: Roles and Competencies for Health Care Staff. Fourth edition (2019) and Adult Safeguarding: Roles and Competencies for Health care Staff. Second edition: July 2024.



#### **Safeguarding Training Compliance and Delivery**

- The Trust has demonstrated strong improvement in safeguarding training compliance across both children and adult safeguarding in 2024/25:
- Level 3 Safeguarding Children training compliance rose to 89%, up from 83% in 2023/24 a 6.7% increase year-on-year.
- Level 3 Adult Safeguarding training compliance saw a substantial rise from 62.3% to 89%, reflecting a 26.7% improvement over the reporting period.

#### Appendix B: Luton Safeguarding Children Partnership Yearly Report 2024-25 – Partners Safeguarding Snapshot

# **ELFT** - achievements and impact

The Safeguarding Team delivered 45 Level 3 training sessions for both adult and children's safeguarding, training 2,763 staff members in 2024/25. While this is a 21% decrease in attendance compared to 3,485 staff in 2023/24, overall compliance improved due to more targeted training delivery aligned to strategic priorities.

Combined safeguarding training compliance for adults and children exceeded 88%, evidencing a well-coordinated and effective training approach that supports the Trust's statutory obligations and quality standards

#### **Training Feedback**

• 96% of staff rated their confidence and knowledge as 4 or 5 out of 5 after attending Level 3 training.



BAP Level 1 compliance remained consistently above the 90% target throughout 2024/25.

BAP Level 3 experienced a temporary decline due to a national change requiring refresher training every three years. This adjustment led to a drop in compliance from 94% to 54% between Q4 2023/24 and Q1 2024/25. Recovery efforts have been effective, with compliance now at 83% and on track to reach the 90% target in Q1 2025/26.

#### **Safeguarding Supervision**

Safeguarding supervision for both adults and children continues to be delivered in line with Trust policies, reinforcing our commitment to high-quality safeguarding practice. Supervision remains a key mechanism for assurance, reflective practice, and professional development. It provides a structured forum for learning, supports practitioners in managing emotional demands, and enables critical analysis of complex safeguarding concerns.

In 2024–25, there was a marked increase in both planned and ad hoc supervision activity across the Trust

The safeguarding supervision platform has evolved into a multi-functional tool for:

- Delivering bespoke training by Named Professionals
- Disseminating learning from local and national reviews
- Sharing findings from audit activity and thematic analysis

Supervision remains central to embedding a "Think Family" approach. Integrated safeguarding conversations ensure staff consider the broader familial impact of presenting issues, especially where parental needs affect child or adult safety.

The most common themes discussed during safeguarding supervision are as follows:

- Parenting Capacity with mental health issues
- Domestic Abuse
- Neglect
- Non-recent abuse
- Children mental health, sexual abuse risk
- LADO (Local Authority Designated Officer) issues

#### **Domestic Abuse**

The corporate safeguarding team has developed and rolled out a number of Domestic Abuse training sessions throughout the year for the staff to raise awareness and to ensure early identification of domestic abuse among patients and staff members.

The Corporate Safeguarding team is doing a Routine Enquiry QI project. This project seeks to strengthen the trust's approach to routine enquiry for domestic abuse by embedding a robust, proactive, and patient-centred framework. The objectives are to improve identification of domestic abuse experienced by our patients and optimise response to provide a more compassionate, effective and trauma-informed approach for patients experiencing domestic abuse. The project is in its early stages and is receiving positive feedback where staff have introduced routine enquiry process.

The safeguarding team organised 16 days of action to raise awareness of Domestic Abuse and also shared learnings from published DHRs and CSPRs.

#### InPhase reported incidents (2024-25)

All patient safety incidents reported via InPhase are reviewed by the Corporate Safeguarding team to identify indicators of abuse, neglect, or poor care. This process supports frontline decision-making and strengthens safeguarding vigilance across the Trust.

In 2024–25, the Trust saw a substantial rise in reported safeguarding incidents, underlining improved awareness and reporting but also highlighting key thematic challenges.

- 369 safeguarding children's incidents were recorded in 2024–25, compared to 420 the previous year.
- Specialist Children's Services reported the most incidents (147)
- Neglect remains the leading category, followed by emotional and physical abuse.

#### **Safeguarding Challenges**

• Rising Complexity of Need across Age Groups. There has been a notable increase in cases involving individuals, both children and adults presenting with intersecting risks. In children, this includes a convergence of mental health concerns, school exclusion, exploitation, and neglect. For adults, self-neglect, hoarding, with co-existing mental health conditions have been increasingly reported. These complex

presentations often require prolonged safeguarding input, multi –agency coordination, and multiple interventional responses from the safeguarding team that go beyond initial intervention.

- Mental Health Pressures and Perplexing Presentations- Children and young people are experiencing a sustained rise in emotional distress, self-harm, and suicidal ideation, particularly impacting schools and CAMHS services. Similarly, adults are presenting with complex and often undiagnosed mental health conditions that underpin safeguarding risks such as self-neglect and resistance to care. The Trust continues to prioritise early identification and trauma-informed responses, supported by safeguarding supervision and on-going support from the safeguarding team.
- Domestic Abuse and Coercive Control- Domestic abuse remains a persistent safeguarding concern across all demographics, including older adults, carers, and neuro-divergent populations. Despite progress, the routine enquiry QI is not yet embedded across all services, and remains a key area for improvement in 2025–26. The Trust's ongoing QI project aims to normalise and strengthen routine enquiry into domestic abuse, ensuring staff are confident in identification of, and response to Domestic Abuse
- Exploitation and Online Harm- Nationally Child sexual and criminal exploitation, including county lines activity and intra-familial abuse, continues to affect all age groups, often compounded by online grooming and digital risk. For adults, increasing cases of modern slavery, trafficking, and exploitation are linked with homelessness, poverty, and substance misuse. Intelligence sharing across agencies remains a challenge, necessitating improvements in joint working and timely information exchange.
- Impact of the Cost-of-Living Crisis-The continued impact of economic hardship is evident in safeguarding referrals across all age groups. Families and individuals are facing heightened stress, hidden neglect, food insecurity, and housing instability. Higher thresholds for statutory intervention are reported across local systems, placing additional demand on safeguarding teams to offer sustained and holistic support.
- Systemic Pressures and Workforce Resilience-The safeguarding team experienced significant staffing shortages for much of the financial year. Despite this, the team demonstrated resilience and professionalism by absorbing additional responsibilities to maintain service delivery. Named Professionals fulfil highly specialist and demanding roles that require advanced expertise, emotional resilience, and regular opportunities for reflection and development. In recognition of this, the Trust provides monthly restorative supervision to support their wellbeing, enhance practice, and promote staff retention.
- Supervision continues to play a pivotal role in embedding a "Think Family" approach across practice. Integrated safeguarding discussions within supervision ensure that practitioners consistently consider the wider familial context, particularly where parental needs or vulnerabilities may impact the safety and wellbeing of children or other adults in the household. Supervision and training sessions also

serve as key platforms for promoting transparent and collaborative working relationships. Practitioners are supported to reflect on and recognise the individual's capacity to participate in care planning and decision-making, thereby empowering service users and promoting shared responsibility in safeguarding interventions.

The table below shows the audits undertaken in 2024-25 by the safeguarding team.

# Audit Type Think Family Approach

#### **Audit Findings**

- Good examples of familyinclusive practice identified.
- Gaps remain in recording the child's lived experience, particularly where domestic abuse is a concern.
- Inconsistent recording of family members, especially non-resident or 'invisible' males.

# Voice of the Child in Adult Services

- Limited evidence of the child's voice or safeguarding concerns being recorded in adult inpatient records.
- Discharge planning did not always reflect safeguarding action or parental responsibility arrangements.

#### **Actions Taken**

- Safeguarding supervision now includes prompts to review family demographics and ensure accurate referral data.
- Practitioners reminded to use the Safeguarding Alert system and tools such as "Day in the Life", Domestic Abuse Stalking, Harassment and Honour Based Violence Assessment (DASH), and the Pan-Beds Neglect Toolkit.
- The safeguarding children policy has been updated.
- A follow-up audit is scheduled for 2025–26 to include a larger sample across both adult and child records.
- Audit tool updated to include child-focused prompts.
- Inpatient teams engaged via away days and supervision to promote correct safeguarding referrals.
- Operational leads reminded to update family demographics.
- Signposting to neglect tools, threshold documents, and escalation policy reinforced.

ELFT - achievements and in	mpact	
Domestic Abuse (DA) Practice and Reporting	<ul> <li>DA concerns not consistently logged on InPhase.</li> <li>Discrepancies between DA data recorded in incidents and formal safeguarding reporting.</li> </ul>	<ul> <li>InPhase entries reviewed and reclassified to improve DA categorisation.</li> <li>Targeted training sessions underway to address recording inconsistencies.</li> <li>Domestic Abuse newsletter and safeguarding intranet launched to improve staff awareness.</li> <li>Structured risk assessments promoted to support earlier identification of concerns.</li> </ul>
Child Neglect	<ul> <li>Neglect concerns were under- recorded or misclassified.</li> <li>Application of the Think Family approach inconsistent across services.</li> </ul>	<ul> <li>Safeguarding reporting forms updated to reduce misclassification.</li> <li>Neglect screening tools standardised and shared via supervision.</li> <li>Annual audits planned with findings disseminated to teams.</li> <li>Staff encouraged to document lived experience and inter-agency activity.</li> </ul>

# NSPCC - achievements and impact

Our NSPCC Local Campaigns team supported the development and launch of a Pan-Bedfordshire Neglect Campaign which aims to raise awareness of Neglect and build confidence amongst professionals and the public of how to recognise and take appropriate action when they see signs of Neglect.

Our Assistant Director for the East Region continues to Chair the Pan-Bedfordshire Neglect Sub group.

#### Appendix B: Luton Safeguarding Children Partnership Yearly Report 2024-25 – Partners Safeguarding Snapshot

#### **NSPCC** - achievements and impact

The regional NSPCC team have continued to deliver our Speak Out Stay Safe prevention work in Primary Schools in the area as well as rolling out a Secondary School offer promoting Health y Relationships.

We have worked to support the system with a CSA Snapshot and development of CSA working groups to improve the prevention, identification and response to Child Sexual Abuse within Luton and Bedfordshire.

Our wide team also promote and ensure advice, guidance and access to the NSPCC Helpline and Childline is available for all people working with children and young people.

We are working in partnership with the Police and Crime Commissioners Office and local agencies to develop a local Post Sexual Abuse recovery offer for children, young people and families. We hope this will launch in 2025.

#### Luton Borough Council Children, Families and Education - achievements and impact

Families First Pathfinder Project: Implementation of a neighbourhood-based approach with multi-agency Families First pods, offering holistic, whole-family support. This has improved early intervention, reduced child protection cases, and enhanced service delivery consistency. The transformation to Family Help went live across all of Luton's neighbourhoods on the 1st of May. Multi agency team development continues, we have a Housing Officer, Adult MH nurse, DWP job coach, School Attendance team, CME, IDVA, Substance misuse worker, the DA perpetrator support worker and the Targeted Youth Worker are awaiting start dates and recruitment Systemic Family Therapist is due to start shortly.

Family network meetings are embedded across all family help teams and are offered at the earliest appropriate time, however we note that a large proportion of families are declining these – we are undertaking a further review through our evaluation officer to establish why.

MASA arrangements have been in place since Dec 2024.

- MACPT LCPP embedded within the neighbourhoods, Health Lead joined on the 1st of April, Police Lead joining mid-August, A virtual school colleague is undertaking education Lead role and will be developing it with our Head of Safeguarding in Education.
- MASH (Multi-Agency Safeguarding Hub): Streamlined decision-making processes, timely triage, and robust multi-agency collaboration. Improved oversight has reduced repeat referrals to 20%, aligning with national averages.

#### Luton Borough Council Children, Families and Education - achievements and impact

- **Domestic Abuse Initiatives**: Operation Encompass ensures schools and MASH are notified of domestic abuse incidents. Training sessions and a dedicated Victim Worker address domestic abuse, including child-on-parent abuse and elder abuse.
- Missing and Exploitation Work: A decrease in missing children cases (126 in April 2025, down from 182 in January 2024). Return Home Interviews are offered to 92.9% of children, with 66.7% acceptance. The Tree Project and MACE panel address exploitation risks.
- Youth Justice Success: Luton recorded its best year for First Time Entrants (30 in 2024/25) and diverted 157 children from the criminal justice system. Initiatives like the Knife Angel project raised awareness of knife crime and supported community engagement.
- **Child Protection Improvements**: Introduction of Lead Child Protection Practitioners has improved the management of child protection cases. Timeliness of child protection conferences is high (91%), and participation of young people in these conferences has increased.
- **Support for Separated Migrant Children**: Comprehensive planning for separated migrant children, including safeguarding measures, age assessments, and partnerships with community organizations like the Separated Child Foundation.
- Allegations Against Professionals: Robust arrangements for managing allegations, with a tri-borough audit approach to strengthen oversight and consistency.
- **Preventative Work**: Early help services and Family Hubs funded with £3 million have enhanced support for families, focusing on early intervention and reducing risks.
- **Training and Tools**: Use of tools like the Graded Care Profile 2 Toolkit for neglect assessments and training on cultural competence, safeguarding thresholds, and reflective supervision.

#### ResoLUTiONs – CGL: achievements and impact

#### **Working Well:**

Multi-agency working through various safeguarding focused panels & meetings providing specialist substance misuse input (SPOC MACE, child exploitation and missing meeting, CEM, County lines & OCG meeting, Channel Panel). On-going active attendance at safeguarding meetings for individual CYP open to the service (e.g. Strats, core group meetings, CIN meetings, CP conferences and reviews).

We have a seconded staff member who sits within the Luton Youth Partnership Service (YJS) offering specialist substance misuse support and interventions to CYP open to YJS and identified as at risk or currently using drugs & alcohol. They also deliver professional training to YJS staff including

## ResoLUTiONs - CGL: achievements and impact

referral pathways and upskilling their team on substance misuse issues relating to C&YP. They form part of the health team and sit on various YPS panel meetings (Risk Panel, OOCD, MAGPAN, Health Panel).

CGL CYP Team offer a non-specialist provision (NSP) to include targeted group interventions which forms part of our prevention and early intervention work around drug & alcohol awareness sessions, this also includes issues relating to contextual safeguarding with a substance misuse lens. Our NSP delivery also includes professional training to stakeholders across Luton (Includes- themes and trends/Impact of parental substance misuse/Substance Misuse screening & how to talk to CYP about drugs & alcohol).

CGL also deliver the Substance Impact Champion program offering training and ongoing support to local schools and education settings, enabling even the smallest of provisions to be equipped to support the most marginalised of pupils. CGL also have regular satellite drop-in's at alternative education provisions in Luton. CGL resilience workers are linked to educations provisions across Luton so there is a dedicated SPOC and clear referral pathway via our online referral forms on our website.

CGL CYP service works with young people through transitional ages as they remain with the young person's team up to the age of 25.

#### Impact:

CGL has contributed to multiagency working and proactively collaborated with partner agencies to protect and safeguard children (as above MDT meetings and individual safeguarding networks).

Regionally CGL CYP services have reviewed and been focusing on implementing a more robust tracking and reviewing of safeguarding needs for young people accessing the service.

#### **Barriers/Challenges:**

Receiving notifications of safeguarding meetings with limited notice.

Low direct referrals for Children & Families Hidden Harm interventions (impact of parental substance misuse). Team Leader has arranged training around the impact of parental substance misuse with LBC children social care teams in Luton and CGL adult services. The Team is committed to continuous promotion of the service.

#### Appendix B: Luton Safeguarding Children Partnership Yearly Report 2024-25 – Partners Safeguarding Snapshot

#### Youth Partnership Service - achievements and impact

In 2024/ 2025 Luton outperformed its key comparators and improved its position in recording a lower rate of first-time entrants compared to national, statistical neighbours and Eastern region. This performance threshold has been sustained over the past 5 years.

- First Time entrants Throughput for 2024/25 stands at 30 young people receiving a first statutory disposal.
- Luton's Turnaround Scheme Luton achieved the Ministry of Justice local target delivering interventions to 78 children referred to the Service at risk of entry to the youth justice system.
- The Service has record 84% programme completion up 25% on previous year.
- Good Reoffending outcomes versus Diversions (20%) and further improvements Youth Conditional Cautions cohorts (13%)

In relation to reoffending, Luton has outperformed National, Regional and Statistical family in the main measure for reoffending for the first annual period in 3 years. A 2-year cohort analysis for 2025 indicates strong results versus children requiring YPS interventions. Overall 80% cases desisted further offending (includes early intervention cases)

Disproportionality is most evident amongst children entering custody and amongst Re-offending populations; in Luton the Black (11%) and Dual Heritage populations are most likely to be consistently over- represented compared to smaller shares of youth population.

To sustain these improvements for children, the Service needs to continue to develop and innovate based on the needs driven analysis of the children entering the Service. In relation to first time offending, we need to examine the relationship between First Time Entrant status and ASB notices across partnership agencies.

We need to start mapping FTE and early Intervention cohorts by Ward area. monitoring Arrest/Triage, Early intervention and FTE populations. We will need to introduce RJ & victim Awareness intervention to FTE & Out of Court Disposals as a priority of MY Journey intervention planning.

In relation to reducing reoffending, we need to be identifying cases of frequent referrals and understanding what drives those vulnerabilities. (Trauma/ACE's/SEND/CCE) Also monitoring patterns of disengagement and re-referrals particularly amongst 14-15 olds will help to identify what could have been done differently.