

Torbay

Safeguard

Children Partnership

Torbay Safeguarding Children Partnership (TSCP)	Joint Targeted Area Inspection of Torbay- November 2023 Written statement of proposed action
Version 19 – 19/04/24	Authors: NHS Devon as principal authority Michele Thornberry - Head of Safeguarding
	John Trevains – Director of Nursing & Quality
Plan lifespan: 6 months – October 2024	Senior Responsible Owner: Penny Smith – Chief Nursing Officer

TSCP Quality Assurance Updates Date	Update Authors
October 2024	Rachel Setter Divisional Director Learning and Partnerships Torbay Children's Services Michele Thornberry Head of Safeguarding NHS Devon Phillipa Hiles Named Nurse Safeguarding Children Torbay and South Devon NHS Trust Cheryl Vidall Associate Clinical Director Child & Family Health Devon Natalie Herring Deputy Chief Nurse Torbay and South Devon NHS Trust Becky Thompson Divisional Director of Safeguarding Torbay Children's Services Louisa Jones Head of Quality Assurance Torbay Children's Services Neil Cotton TSCP Business Manager

Statement of Intent:

As statutory partners for Safeguarding, Torbay Council, NHS Devon and Devon and Cornwall Police, alongside Torbay and South Devon NHS Foundation Trust (TSDFT) as the main agency of focus will prioritise the actions in this plan and ensure delivery so that children and young people are kept safe and can thrive. The partnership is committed to providing a workforce that are trained in the recognition and appropriate response to safeguarding risks, putting the child at the centre of care, developing action plans, and jointly making decisions regarding their wellbeing.

Plan purpose and background:

The purpose of this plan is to describe the work of statutory partners of Torbay Safeguarding Children Partnership (TSCP) and their stakeholder organisations to respond to the findings of the Joint Targeted Area Inspection (JTAI) of Torbay that took place In November 2023. The full letter detailing the findings of this inspection is attached to this plan in **Appendix 1**. NHS Devon as the agency identified by JTAI to respond has led on formulating this plan.

This inspection took place from 13 November 2023 to 17 November 2023. It was carried out by inspectors from Ofsted, the Care Quality Commission (CQC) and His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS). The purpose of these inspections is to assess the quality of arrangements and services for children in need of help and protection in local authority areas in England. Inspection can focus on a specific area of a system or seek to evaluate services across the whole location.

Though the inspection identified several strengths and good practice across services. It also identified several areas of concern, predominantly within health services (Torbay and South Devon NHS Foundation Trust (TSDFT) that require urgent attention. This plan presents a high-level action plan on how work is being conducted to address issues identified in the inspection, report progress to partner agencies and provide assurance that improvements have been achieved and embedded into practice. **Progress on this plan will be reported at TSCP Board level**, with parallel reporting to individual agencies Boards where indicated i.e. NHS Devon/TSDFT to deliver and evidence high quality oversight and assurance from senior leadership.

Strategic context of plan and interdependences:

This plan should be read in conjunction with Torbay Children's Continuous Improvement Plan and TSCP initiatives to improve and protect the quality of children's lives in Torbay. This plan is supported by detailed dynamic action plans at organisation level (available on request) that support the objectives of this plan.

These arrangements are subject to regular review, support and senior leader oversight from NHS Devon as the Principle Authority working in partnership with the relevant organisations. Working together 2023 states that 'Nothing is more important than children's welfare. Every child deserves to grow up in a safe, stable, and loving home. Children who need help and protection deserve high quality and effective support. This requires individuals, agencies, and organisations to be clear about their own and each other's roles and responsibilities, and how they work together'.

Reporting and assurance:

Progress delivering this plan will be reported through existing governance routes with accountability to Torbay Safeguarding Children Partnership, in line with the letter from Inspectors. Torbay Children's Continuous Improvement Board and NHS Devon Quality and Patient Experience Committee, and Torbay and South Devon NHS Foundation Trust Safeguarding Committee, will also receive assurance reports and escalation regarding single agency and partnership actions. This approach will ensure that risk of single agency delay is mitigated and that each of the statutory partners have oversight through organisational governance. As lead safeguarding partners, Torbay Council, NHS Devon and Devon and Cornwall Police will prioritise the actions in this plan and ensure delivery so that children and young people are kept safe and thrive. Regular updates will be provided for assurance to JTAI inspectors via Ofsted. A diagram of the governance structure is provided in this document.

Actions undertaken since the inspection:

Within the plan there are updates on the work undertaken so far to address the priority actions. This includes but is not exclusively the work undertaken by Torbay and South Devon NHS Trust. Future update reports will include additional evidence of progress. Since the inspection in November 2023 and on receipt of the formal letter in January 2024 priority actions to address the JTAI identified issues have been taken as follows:

- Torbay Safeguarding Children Partnership Leading system oversight and holding agencies to account to deliver improvement.
- NHS Devon facilitating and coordinating the development of the action plan and will actively coordinate delivery activity.
- Torbay and South Devon NHS Trust initiating and completing early formative work to address critical issues identified include an audit of all children attending the emergency department to gain assurance that concerns are being identified and responded to; a review and update of the supervision strategy, and delivery of a workshop on professional curiosity at the TSCP multiagency conference.

	What needs to improve	Lead Agency	Desired outcomes for children	Action required	Completion date of action.	Update on action taken		
	The failure of senior leaders to have sufficient oversight and assurance of professional curiosity across practice to safeguard children was identified as a specific priority action for TSDFT however the first section of this plan relates to how the partnership will strengthen its approach to ensure that All Leaders maintain this oversight and partnership responsibilities to deliver 'Working Together 2023'.							
	Senior Leaders have sufficient oversight and assurance of professional curiosity being effectively deployed across all partners and agencies.	TSCP	The delivery of this plan will achieve consistent identification and good quality practice for safeguarding children.	Board level oversight and commitment to delivery across the Partnership and constituent agencies.	Ongoing - through life of action plan Progress reports with supporting metrics to TSCP Board to commence 1/06/24	Consultation across Partnership for sign off and support to progress ahead of submission. Agreement and support for the proposed governance of this plan for monitoring and delivery.		
	-	•		NHS Foundation Trust (TSDFT) to ass tions of risk and harm. Priority action		f the quality and effectiveness of their own to address the following areas:		
1	The failure of senior leaders to have sufficient oversight and assurance of professional curiosity across practice to safeguard children.	TSDFT NHS Devon	Children attending the hospital will be effectively safeguarded through timely recognition of, and response to signs of abuse and neglect.	1.1 TSDFT and NHS Devon are committed to ensuring that professional curiosity is embedded into practice and to achieve this will establish a training programme within TSDFT, followed by an audit process to gain assurance of changes to practice. The outcome of this will be reported regularly at Board level to deliver high quality oversight and assurance.	1.1 31/05/24	1.1 Working Group set up to develop a strategy to improve practice regarding professional curiosity across the Trust. 'Turbo' training sessions delivered i ED. Range of training resources being developed including screen savers, simulation training, posters. Training compliance to be captured on electronic staf record. Review of policies to be undertaken to ensure it's a thread throughout. Impact captured through escalation practice. Audit development to follow with Board reporting dates.		
			of sustained senior leader oversight and assurance will be achieved.	1.2. To support strategic safeguarding functions, a demand and capacity review of TSDFT Named Nurse role will be undertaken.	1.2 Complete	1.2 Review commenced. NHS Devon to support MAS business case development to address operational resource requirements.		

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2	improve The variable quality of scrutiny and supervision by health staff leading to safeguarding risks in children not being consistently identified and responded to appropriately. A particular area of concern is the management of unexplained injuries to children.	TSDFT NHS Devon		 TSDFT and NHS Devon are committed to ensuring that all staff receive high quality safeguarding supervision, recognising the specific needs of emergency care and other speciality areas identified in the inspection. 2.1TSDFT will review and develop supervision processes to ensure that advice and actions taken are captured within the child's records. 2.2 TSDFT will develop a dashboard reporting mechanism regarding supervision activity for Board and system assurance. 2.3 TSDFT will ensure that those undertaking safeguarding supervision have up to date skills. 2.4 Senior leaders will receive assurance that all children attending the emergency department with injuries are appropriately risk assessed and 	date of	 NHS Devon assurance visit of TSDFT undertaken 12/04/24. 2.1 Formal supervision increased to monthly for all TSDFT Safeguarding Nurse Practitioners. Guidance on completion of referrals to Paediatric Liaison Service updated and communicated to relevant TSDFT staff. Review of Safeguarding Supervision Policy completed. 2.2 Performance metrics to be shared at next update. 2.3 All TSDFT Safeguarding Team members have attended external training procured by One Devon ICB and service development updates have been completed. 2.4 16/11/23 – 29/12/23 daily audit of all ED presentations for children completed. 0.16% missed MASH referrals. Decision made to audit 50 cases monthly. Missed opportunities followed up with the practitioner and line manager. Appropriate action taken by Named Nurse for all missed cases. Audit
				referred as necessary.	2.5 30/06/24	outcomes & recommendations submitted to Safeguarding Children Operational Group (SCOG) & Urgent and Emergency Care Quality Group (UECQG) for consideration. Monthly case dip sampling of 50 cases to continue and collation of themes identified through the audit to inform training and supervision needs and reported through SCOG and UECQG.

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				2.5 TSDFT will develop an audit cycle to gain assurance of the impact and quality of supervision arrangements.		2.5 IT system change in progress - external provider required to make changes - practice updates in place for documentation of informal supervision
	Area for Improvem	ent				
3	The consistency with which professional curiosity and challenge are applied, particularly in situations in which children living with chronic domestic abuse or neglect are not	Torbay Safeguarding Children Partnership (TSCP)	Children will be effectively supported and protected by a workforce who have the requisite knowledge, skills, and competences to recognise and respond to signs of abuse and neglect.	3.1 TSCP Business Group will be assured that learning resources and training opportunities are developed and up take will enable all staff to apply professional curiosity and challenge when working with children and families, as well as each other to ensure that children experiencing abuse and neglect are identified and safeguarded.	3.1 31/09/24	 3.1 TSDFT will develop and deliver a training package to improve professional curiosity – as reported in Action 1 3.1 Session delivered at TSCP conference 15/03/24. Webinar of event to be created and shared. 3.1 Health specific progress reports will be sought via working group. TSCP QA chair meeting with health to update on progress and consider how the training can be rolled out more widely.
	making progress and situations in which children have unexplained injuries			3.2 All staff attending MARAC (multiagency risk assessment conferences) will be fully cognisant of the contemporary and historical circumstances of the child so that the meeting can properly understand the risks to which he/she is exposed. TSCP Quality Assurance Group to undertake quality assurance work during 2024/25 to ensure embed into practice.	3.2 29/03/25	 3.2 Marac Steering Group Chair is preparing a report for DASVEG in January on the completion of the actions from the MARAC review, and making recommendations for future actions. Chair of TSCP QA group to meet with MARAC Chair and the MSG Chair to discuss QA groups role in assuring actions completed.
				3.3 TSCP Business Group to be assured that multiagency practice within the MASH environment demonstrate sufficient challenge and curiosity to safeguard children.	3.3 Complete	3.3 Torbay Children's Service undertake multi agency dip sampling in the MASH weekly. Reports are provided to Children's Service operational board quarterly. The quarterly reports are presented to the QA TSCP subgroup and the learning disseminated by

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				3.4 Training in the use of GCP2 (graded care profile 2) has been rolled out. Work to monitor use and impact of this tool will be delivered, audited, and reported via the TSCP Business Group.	3.4 31/12/24	 partners and to the business group via the subgroup update report. The reports are presented at MASH strategic board by request. 3.4 Training has been delivered to approximately 130 members of staff across the partnership, assessments are starting to be completed but as the rates are quite low, the QA sub-group has not yet been able to evaluate impact. The low numbers of assessments have been escalated via the TSCP business group.
4	Performance information across the partnership to inform needs analysis and measure the impact of strategic approaches to areas of concern	TSCP TSDFT D&C Police	Children are helped, protected and their welfare promoted through effective systems and approaches to areas of concern.	4.1 TSCP Executive to continue to develop the data set and use it to support Partnership activity and priorities. TSCP Quality Assurance Group to oversee the progression of the data set at each meeting.	4.1 31/10/24	 4.1 Data set added as standing agenda item of Quality Assurance subgroup. The TSCP Dashboard is complete except the following visuals: Children who have had 6 or more teeth extracted due to decay – pending. Neil Cotton is leading. SWASFT callouts relating to exploitation – pending with Louise Arrow (NHS) and Neil Cotton. Learning and Development – All information received, however further data has been requested.
					4.2 30/11/24	Police - No data from the police yet, Neil Cotton is leading on gathering the data. Now, SafeLives DV data in its place. 4.2 TSCP Data Working Group set up.

	What needs to improve	Lead Agency	Desired outcomes for children	Action required 4.2 TSDFT will develop a Torbay data set that will enable oversight of safeguarding activity and impact.	Completion date of action.	Update on action taken
				4.3 Police will develop a Torbay data set that will enable oversight of safeguarding activity and impact	4.3 30/11/24	 4.3 (020724) TSCP data now being supplied with back dated data to Sep 2022 also being provided to prevent gaps in information. Forward look - Consultation with the 4 LA Business Managers from the partnership ongoing and new data set being requested by the partnership and this will be monthly. This will be BAU and P&A are engaged.
5	The partnership's strategic approach to children with poor emotional and mental health.	NHS Devon Torbay Council CFHD	Through a partnership approach, the emotional wellbeing and mental health needs of children will be identified at the earliest point, with timely access to evidence informed, outcome focused support and/or	There will be a single Torbay Emotional Health and Wellbeing (EHWB) Steering Group that will hold oversight and drive change which will be governed by both the SEND Executive Board and the TCSP which will; 5.1 Develop a profile of the EHWB needs of children, young people and families that will be overlaid with current provision to inform the redesign of and commissioning of services.	5.1 Complete	Update 16/10/24 5.1 MHST services have expended across Devon to provide early intervention for CYP in schools (or electively home educated/NEET) to address needs before they escalate to the mental health specialist service thresholds.
			intervention which will enable them to either recover, manage and/or be kept safe should their risk to self or	5.2 Ensure children who are in contact with Youth Justice Services or who are not in school have their EHWB needs identified and are able to access support or intervention as needed.	5.2 Complete	5.2 CWP service provides community support to CYP who cannot be seen through the MHST service.

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			others be such that this is required.	5.3 Develop a plan to embed THRIVE and its underlying principles throughout the Torbay system.	5.3 Complete	5.3 CFHD triage for new referrals adopts the THRIVE model. The clinicians reviewing the referrals will prioritise needs and signpost the CYP/family to support and advice whilst waiting.
				5.4 Redesign and align procurement activity to the THRIVE framework to meet the needs of children and young people.	5.4 Complete	5.4 Executives aligned to SEND and the TCSP have agreed that a MH summit will be held in January 2025 that will draw the information aligned to all these actions to inform commissioning intentions aligned to THRIVE needs-based groupings for 2025/26.
6	time children have to wait for support from child and adolescent	NHS Devon Children and Families Health Devon (CFHD)	The needs of children will be effectively met whilst waiting for mental health interventions.	6.1. CFHD and NHS Devon to review processes to ensure that all children are waiting well and safely, including access to a range of quality assured resources and support.	6.1 31/05/24	Update 14/10/24 6.1 CFHD is introducing a pilot model to respond to children and young people (CYP) on the waiting list.
	mental health services (CAMHS) when categorised by the service as low risk			6.2 CFHD will continue to work with NHS Devon to ensure that pathways and resources are optimally utilised to reduce the length of time children and young people are waiting.	6.2 Ongoing	6.2 All senior staff resources are being diverted into the waiting list management to ensure children ae allocated to the correct practitioner/specialist to meet the needs of the CYP in a timely manner. If referral rates remain the same, waiting lists should be cleared to under 18weeks by Summer 2025.
						Local resources list available and distributed to stakeholders
						Joined up working across Torbay and Devon partners continues.
						New CFHD website launched in 2024 directing families and professionals to available resources to wait safely.
				6.3 Torbay local system to develop and implement consistent processes and principles for any	6.3 Complete	

	What needs to improve	Lead Agency	Desired outcomes for children	Action required	Completion date of action.	Update on action taken
				services targeted at supporting their emotional health and wellbeing to ensure that children wait well and safely.		Local resources list available and distributed to stakeholders. Joined up working across Torbay and Devon partners continues. New CFHD website launched in 2024 directing families and professionals to available resources to wait safely.
				 6.4 A procurement to meet the needs of children and young people aligned to the THRIVE framework of getting advice and getting help will be undertaken during 2024/25 so that service offers can 'go live' from April 2025. 6.5 NHS Devon is working with the 	6.4 01/04/25	6.4. The procurement is underway for a EHWB offer aligned to Getting Advice and Getting Help. It is anticipated that the preferred provider will have a period of mobilisation so that the 'go live' date of the service offer will be from 1st July 2025. Compliance with pre-election guidance resulted in some time delay to the process from the originally planned 'go live' date of 1st April 2025.
				NHSE national Getting it Right First Time (GIRFT) programme to understand the outcomes of NHS Devon's children's mental health services. The outputs and recommendations from this programme will inform next steps.	6.5 31/05/24	6.5. NHS Devon completed the data review and GIRFT visit in relation to CYP Community Mental Health Services. A summary of the recommendations was shared with system partners at the CYP EHWB Group in September. Several of the recommendations had been incorporated into data quality plans with CFHD and otherwise completed. It was agreed that the CYP EHWB Group would review progress in December and seek to align the ongoing recommendations with the Devon System MenSat review.
7	Communication between partner agencies when new information is gathered about families where there are existing safeguarding concerns.	Torbay Council	Children with existing safeguarding concerns will be effectively safeguarded through timely and robust information sharing between	7.1 Children's social care have revised their care planning pathways to include a meeting at the point of re-referral, to ensure reflection on previous intervention to mitigate against repeated signposting to services which have had limited impact.	7.1 Complete	7.1 Care planning pathways were updated in December 2023 and endorsed in April 2024 Children's Operational Board.

	What needs to improve	Lead Agency	Desired outcomes for children	Action required	Completion date of action.	Update on action taken
			agencies when new information comes to light.	7.2 MASH partnership and social care dip sampling to continually focus on use of chronologies and managerial analysis of children's holistic lived experienced to inform decision-making.	7.2 Complete	7.2 Dip sampling is ongoing as part of established audit cycle and reported to TSCP Business Group. (020724) The CST have instigated a process with weekly reporting of any child that has had 3 PPNs in 3 months. This report is supplied to relevant DDM for that area and reviewed. In consultation with partners the risk grading can be reviewed, and appropriate response instigated.
						Dip sampling in the MASH Operational group also continues as BAU and feeds into MASH strategic Board.
8	The rigour of the partnership's quality assurance function.	TSCP Quality Assurance Group	Children will benefit from a systematic effectiveness, impact, and compliance check	8.1 Independent Scrutineer to become a permanent member of the TSCP Quality Assurance Group to bring rigour and support to quality assurance processes.	8.1 Complete	8.1 Membership to Quality Assurance Group extended to Independent Scrutineer.
			on the effectiveness of multiagency working to safeguard them	8.2 TSCP to develop a robust quality assurance framework that aligns to Working Together 2023 arrangements.	8.2 30/11/24	Scoping of other areas frameworks undertaken. NC and RS developing framework to go to the business group for sign off. TSCP QA function have completed a QA forward plan.
9	The meaningful involvement of children, families and the wider Torbay	TSCP Torbay Council	Children in Torbay and their families/carers will be given every opportunity	9.1 Torbay Council Participation Team will contribute to the Business Group and feed in the voice of children and families.	9.1 Complete	9.1 Membership to Business Group extended to Participation Team.
	community in the development and delivery of strategic priorities and services.		to influence and contribute to the development and delivery of strategic priorities	9.2. TSCP Quality Assurance Group will use the knowledge of the Participation Team to inform its functions.	9.2 30/11/24	9.2 Participation service are attending TSCP Sub-Group 07/11 to discuss what information will be most useful for the group to inform future QA activity.
			and services.	9.3 The TSCP Business Group to consider the input of children,	9.3 31/10/24	Membership to Business Group now includes participation service, extended to sport, faith and

What needs to improve	Lead Agency	Desired outcomes for children	Action required	Completion date of action.	Update on action taken
			families and communities when developing services, priorities, and policy.		voluntary, VCSE representatives. Business group to monitor and review impact on the development or priorities, services and policy.
			9.4 TSCP Business group membership will be expanded to include sport, faith and voluntary, community and social enterprise (VCSE) representatives who can represent a wider community and child voice.	9.4 Complete	9.4 Membership to Business Group extended to sport, faith and voluntary, VCSE representatives.

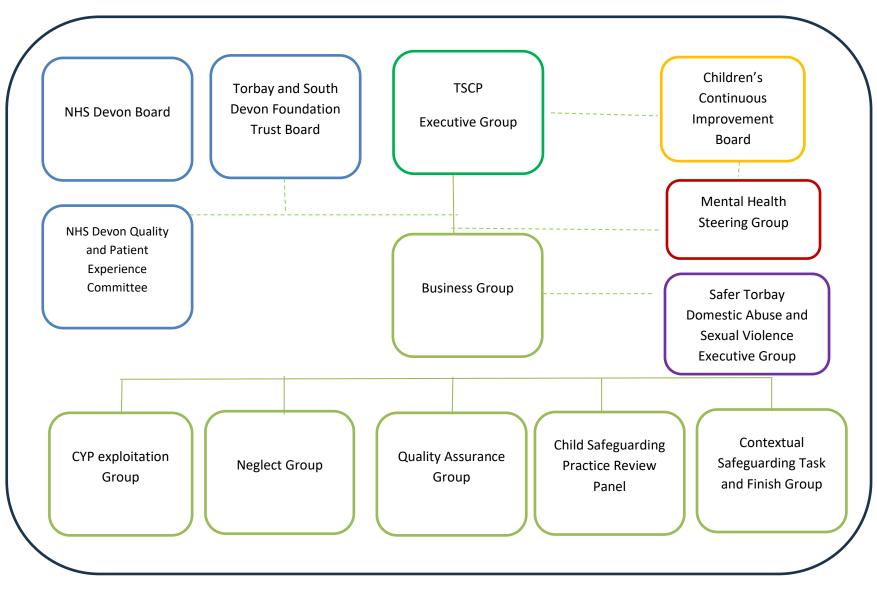
Action plan risks and mitigation matrix:

The purpose of the following risk and mitigations matrix is to ensure that the action plan is sustainable, and its required outcomes are achieved. Key risks are identified below with identified actions to reduce risk. Please note list is not exhaustive and subject to change. Also note that related programme risks are logged in the NHS Devon risk register.

		Risks and mitigation matr	ix	
No.	Identified risk.	Potential outcome on work plan	Status/update- April 24 RAG rating	
1.	Organisational capacity to develop and enact action plan.	Competing organisational pressures & disruption regarding capacity of workforce to progress actions within this plan	Working group in place to deliver plan facilitated by NHS Devon safeguarding lead	This is a high priority action plan for NHS Devon, meetings, and capacity to support is in place.
2.	Financial resources and restrictions - query additional local/ national funding	Additional resources will be required to deliver elements of this plans	Being scoped as part of working group	Achievement of plan appears to be with current arrangements at time of writing, but further assurance is required.
3.	Ability to achieve measurable change.	Failure to achieve required outcomes of plan. Performance metrics not available	Measurement metrics being developed as part of audit approach described in this plan	Improved metrics are in the process of being sourced as part of the work described in plan.

Appendix 1: Torbay Local Area Joint Targeted Area (JTAI) Inspection Report Letter – see separate document

Appendix 2 JTAI Governance Structures for reporting progress and multiagency oversight of delivery of this action plan



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