

# **CHILDRENS RESOURCE SERVICE**



# CHANGING HOW WE DO THINGS.

- Launched a Children's Resource Service (CRS) - Expanded what was the MASH to encourage conversations and build relationships with referrers
- Created a Pathways Document (Threshold) – replacing the Continuum of Need
- One referral route for a service – new referral form – “Request for a Service”
- Introduced trajectory model with representatives from Early Help, Young Peoples Services and Special Educational Needs and Disabilities placed within CRS to ensure children are referred to the right professional in the right service at the right time
- Re-configured the Assessment and PAC Teams to form a Brief Intervention Service and Social Work with Families Service
- Aligned the Intervention and Complex Assessment Service alongside Safeguarding Teams
- Created a process so intervention is available at point of allocation, looking at needs and risk holistically including professional network and completing Family Group Conferences routinely

# CHANGING HOW WE DO THINGS. WE HAVE:

- Introduced a Safeguarding Locality Model for East, West and Central areas of the City
- Successfully recruited permanent workers across the whole of the service
- **Strengthened our leadership – now focused** on delivering high quality, effective interventions that improve outcomes for children at the earliest opportunity
- Developed a process for children and families within the legal framework and a tracker to prevent delay
- Introduced a process to assess, track and monitor unborn babies
- Introduced dedicated Advanced Practitioners for court and unborn babies
- Developed a new Legal Panel/Alternative to care Process Chaired by Heads of Service, Tim Nelson and Jacqui Schofield

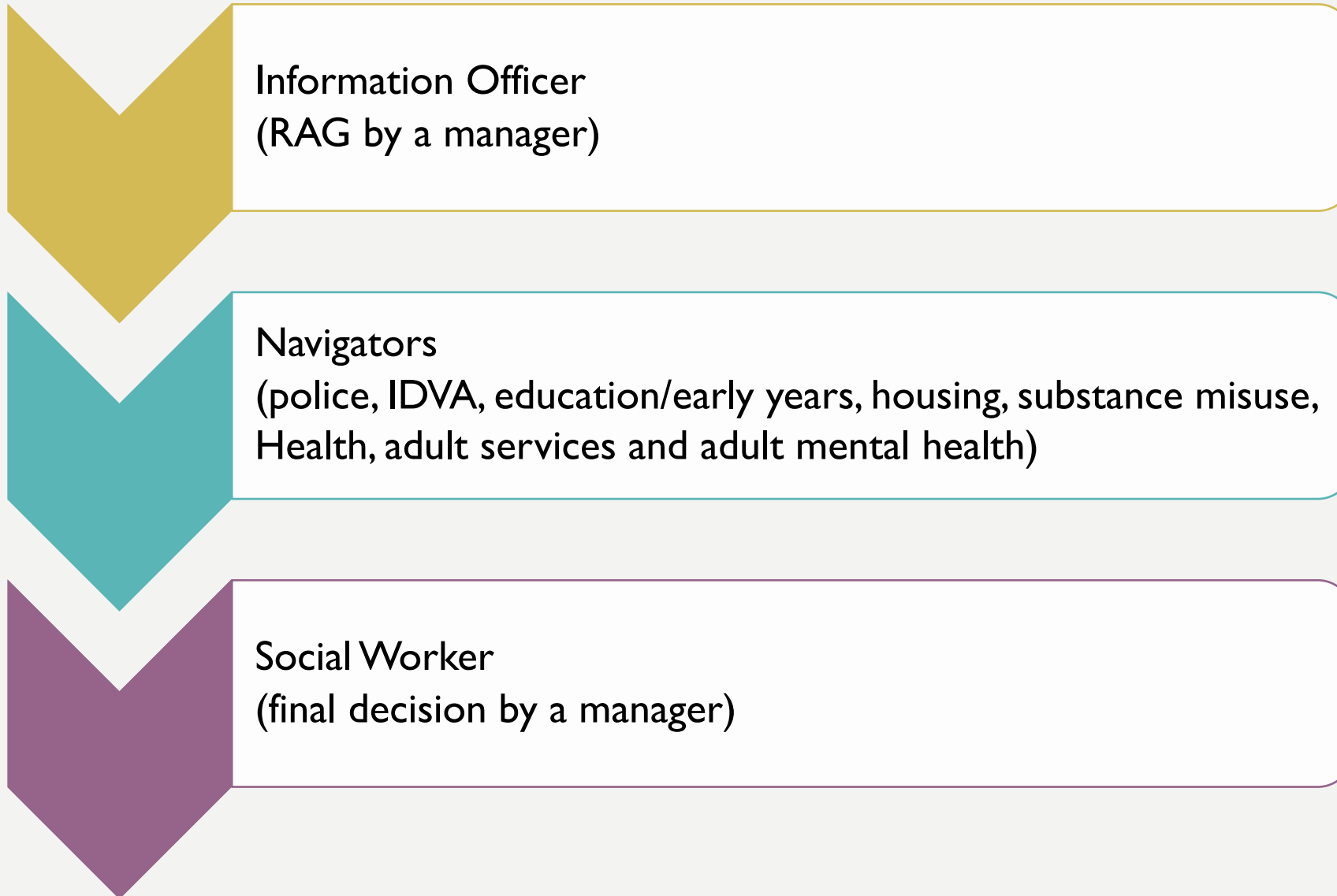
# AIMS

- The aim of the Children's Resource Service is to ensure that children and their families receive the right help at the right time.
- If you are concerned about the immediate safety of a child, please call the police on 999. Once you have done this, please share your concerns with the Children's Resource Service by telephone. If you are a professional, you will need to follow this up by completing the online referral form.
- If you are unsure about whether you wish to make a referral, please refer to the Southampton Pathways Document. If you are a professional, we would also advise you to speak with the designated safeguarding lead within your organisation.
- If you think a child, young person or family may benefit from support from the Early Help service (known in Southampton as Children and Families First) please consider undertaking an Early Help Assessment. This will help you to be clear about the child and family's needs and will support a referral if you decide this is needed.
- To make a referral for Early Help (Children and Families First), or for Children's Social Care support, please complete the **Request for a Service form** via email or using the **online form**.

# OUTCOMES

- In most instances when we are contacted about a child, young person or family we will decide what we need to do next within 24 hours.
- We may:
- Provide advice and guidance
- Ask our Early Help Service (Children and Families First) to get involved
- Gathering more information to help us to decide what to do next to provide the help and protection that children young people and families need. We do this through our MASH (Multi-Agency Safeguarding Hub)
- Passing a referral to Children's Social Care to undertake an assessment. This includes children who need help from the Children with Disabilities team or the Young Person's Service
- To help us make the right decision we may contact you or different professionals for further information.
- If you provide us with a secure e-mail address you will receive an acknowledgement of your contact and a copy of your request.

# A day in the life of a MASH worker ....



# RAG:



- **Flaming Red** = immediate risk response within 2 hours (possible to dispense with consent)
- **Red** = possibly suffering abuse but not at immediate risk; 6 hours (possible to dispense with consent)
- **Amber** = complex issues and significant concerns; 24 hours (consent required, although MASH can dispense with consent if justified)
- **Green** = information shared does not meet the threshold for MASH, consideration will be given to early help (consent required)

# Outcome:

- Strategy discussion held with the police, health and children's services to determine if a S47 enquiry under the Children Act is required to protect the child from harm. This can be single agency to Children's Services or jointly with the police. This will be passed swiftly to the Brief Intervention Team
- A single assessment is recommended and transferred to the Brief Intervention Team
- A referral can be made to the Children and Families First (Early Help) service or if the concerns are unproven, universal services will continue their involvement with the child and their family



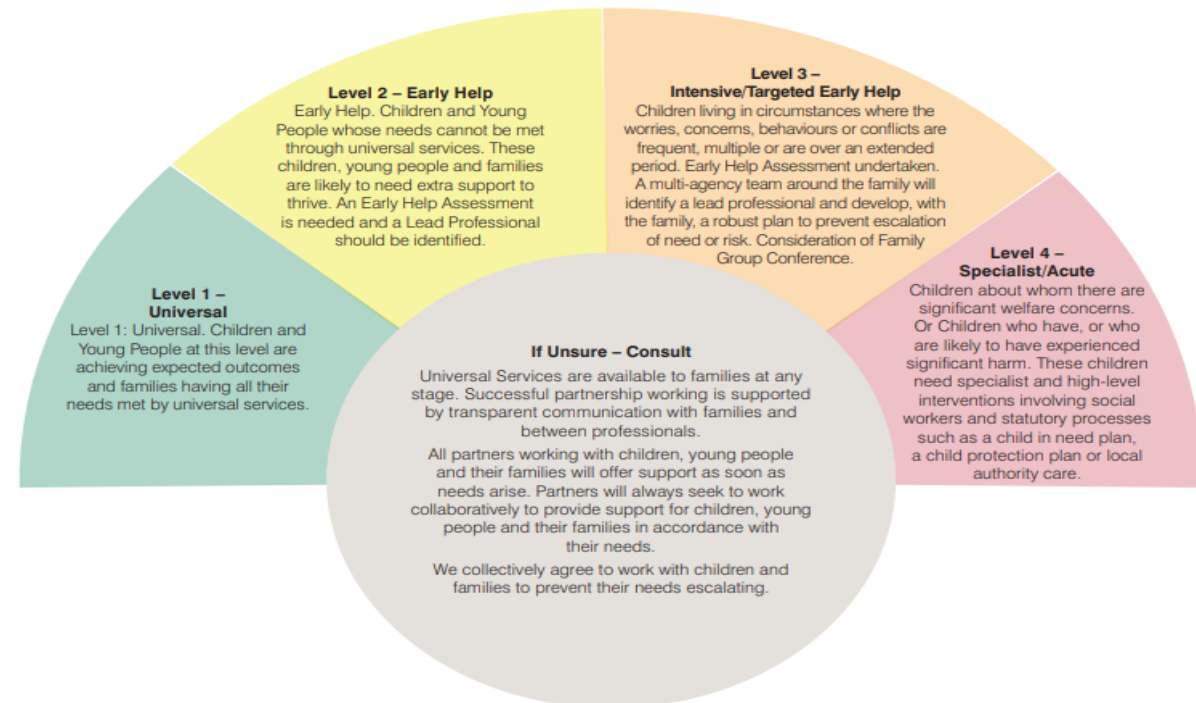
# SECTION 17 OR SECTION 47?

- **Section 17** states that local authorities must “safeguard and promote the welfare of children within their area who are in need”. Definitions of a child in need as stated in the Children Act 1989 are:
  - they are unlikely to achieve or maintain or to have the opportunity to achieve or maintain a reasonable standard of health or development without provision of services from the Local Authority;
  - their health or development is likely to be significantly impaired, or further impaired, without the provision of services from the Local Authority;
  - they have a disability.
- **Section 47** requires a local authority to investigate whether it is necessary for them to take action in respect of a child who "is suffering, or is likely to suffer, significant harm".

# PATHWAYS DOCUMENT

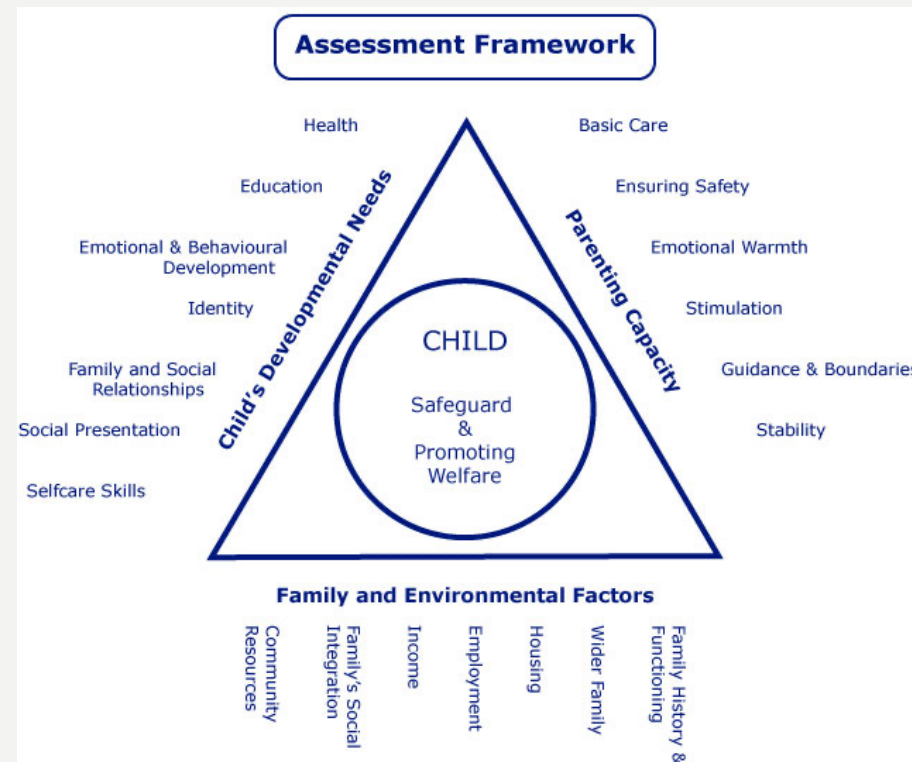
The Children's Resource Service offers information, advice and guidance to the professional network and receives referrals from professionals and members of the public where there is concern a child may be at risk of

significant harm or in need. The service aims to reduce risk and vulnerability and to meet needs at the right level of intervention. Access to early help and prevention services will be facilitated via the Children's Resource Service.



# NEGLECT

- In Working Together to Safeguard Children (2018) neglect is defined as:  
*“The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development.”*



- Southampton Neglect Strategy 2022 - [Neglect Toolkit – Southampton Safeguarding Children Partnership \(southamptonscp.org.uk\)](https://southamptonscp.org.uk)

# GROUP EXERCISE



# SCENARIO 1

- David (13), Summer (7) and Sophie (3)
- Due to concerns around the David's poor attendance in school and lack of communication from parents, you have undertaken a home visit. Upon visiting the property, you noticed a strong smell of cannabis coming from the address.
- The door was answered by mothers' current partner who has previously been known to be a perpetrator of domestic abuse in a family who are known to your setting.
- Furthermore, you had significant concerns about the home conditions - these were poor and included lots of clutter, animal faeces on the floor outside the children's bedroom, food and rubbish on the floor in the hallway, the bathroom was dirty and mouldy and general mess throughout home.
- You are concerned that the home conditions are not being maintained, as you believe support has been previously provided around this matter.
- As a DSL, what action would you take in response to receiving this information?

# SCENARIO 2

- Jakub (16) and Filip (9)
- Filip is normally a well-behaved child. Today in class he wouldn't sit down. When the Teaching Assistant was attempting to engage Filip and encourage him to sit down, he eventually said that his dad hit him with a belt this morning and it hurt. Filip said that he has marks on his bottom from the belt. He said that he hid some sweets and his dad got mad. His dad has “that thing where he gets mad” and Jakub has it too.
- Filip said that his dad was born in Poland and they have different laws there, so it is ok and he is allowed to use the belt.
- Filip lives with dad and older brother. Their parents are separated. Mum is still in Poland.
- Mum has a solicitor in Poland and was going through the British High Court to have the children returned to her in Poland as she said that dad had abducted them.
- As a DSL, what action would you take in response to receiving this information?

# CONSENT

- Unless seeking consent would place a child at risk of harm, a 'Request for a Service' referral must be discussed with the child and their family. Consent for the request should always be sought from those with parental responsibility. If you are unsure about this please get in touch with us to discuss.
- If you are worried about a child and you are unable to contact the parents, this should not stop you from contacting the Children's Resource Service.
- Please have to hand:
  - Details of the children, and their siblings if you know this
  - Details of the parent or carer
  - Any information about child or young person's needs or factors that are causing concern

# CONTACTS

## Children's resource Service

- 023 8083 2300 (option 2) Professionals Line
- Online referral form at <https://www.southampton.gov.uk/health-social-care/children/child-social-care/>
- Switchboard Number 02380 83 3004
- Emergency Duty Team (Out of Hours) 02380 23 3344

Call 999 if it is an emergency and the child is in immediate danger



# QUESTIONS

