

CABINET

21 April 2020

Title: Future Location of Multi Agency Safeguarding Hub (MASH)	
Report of the Cabinet Member for Social Care and Health Integration	
Open Report	For Information
Wards Affected: All	Key Decision: No
Report Author: Heather Storey, Head of Commissioning, Children's Care and Support	Contact Details: Heather.Storey@LBBD.gov.uk
Accountable Director: Chris Bush, Director of Commissioning, Care and Support and Mark Fowler, Director of Community Solutions	
Accountable Strategic Leadership Director: Elaine Allegretti, Director of People and Resilience	
Summary <p>A number of reports on the performance of the MASH have been presented for scrutiny in the last 18 months, and the MASH has been subject a focused visit from Ofsted in 2018 and formed part of the full ILACS Ofsted inspection in 2019. These reports have confirmed the safe practice, procedures and running of the MASH.</p> <p>Over the last year Children's Social Care has undergone significant change and improvement in line with the improvement programme initiated after the Ofsted inspection and in order to establish its new Target Operating Model. This has included significant joint working with the MASH to embed a new social work practice model and to improve partnership working to further develop the MASH to be good and ultimately outstanding.</p> <p>It is now felt that, in order to be fully aligned with this improvement journey, the MASH would best sit in Children's Social Care, where it can be fully integrated with the (also dramatically improved) Assessment Service and Safeguarding teams. Therefore, the decision has been taken by senior leaders in consultation with the Cabinet Member for Social Care and Integration to move the MASH from its current location in Community Solutions, where it is aligned with other front door and triage services, to Children's Social Care, where it will be more closely aligned with safeguarding, the new target operating model and social work practice model.</p>	
Recommendation(s) <p>The Cabinet is recommended to note the decision to relocate the MASH under new oversight in Children's Social Care, whilst maintaining strong links with other front door services in Community Solutions, and to recommend that Overview and Scrutiny Committee receives a report on the progress of the MASH in its new home in April 2021.</p>	

Reason(s)

This recommendation is in line with the Council's priority to Empower People and the MASH enables us to protect and empower some of the most vulnerable children in our borough.

1. Introduction and Background

- 1.1 The Multi-Agency Safeguarding Hub (MASH) was developed by the police, Local Authorities and other agencies to co-locate safeguarding agencies and their data into a secure, research and decision-making unit. This was in response to the inability of agencies, on occasions to effectively share information which has been the comment of numerous Serious Case Reviews and public enquiries.
- 1.2 The MASH in Barking and Dagenham is the single point of entry for all referrals regarding safeguarding concerns for a child or young person (unborn-18 years). Referrals will cover all thresholds of need from child protection to early help. Core agencies include the police, children's social care, health and education. MASH is a screening, information and co-ordinating process only. It is not a case holding team but the hub of the front door for children where there are potential safeguarding concerns.
- 1.3 LBBD launched its MASH in 2010. This built on existing positive working relationships with the Met Police and their Public Protection Desk. Additional core partners from across the borough were either co-located or linked into the MASH that sat within Children's Services as the Front Door to Children's Social Care. At the time, not all cases being referred into Triage as the Front Door of Children's Social Care required a MASH investigation but this was an additional process. Initially, 'to MASH' or 'not to MASH' depended on the quality of information being referred in and the Social Workers' ability to make an informed decision about risk as well as suitable pathways to reducing or addressing the risk.
- 1.4 The options available to social workers included:
 - No Further Action – no recognised need to be addressed.
 - Refer to another Agency (potentially as an out of borough case)
 - Step Across for Early Help
 - MASH Investigation
 - Progress to Referral and S47 investigation
 - Transfer to existing team (case already known and allocated within Social Care)
- 1.5 In all instances, the primary focus on the decision making was the impact on the children or young people within the households. For those cases not progressing into the statutory arena and stepping across for early help, the services picking up these cases would typically be those able to work with children and families around health, parenting, behaviour or substance misuse.
- 1.6 Implementing the MASH model required Local Authorities to co-locate professionals from core agencies to support the research, interpretation and determination of proportionate risk assessments for those cases being investigated through the MASH. Those agencies included Social Workers, Police, Health, Probation, Education (liaison), Youth Offending (virtual/duty) and Substance Misuse

representation. It also required cases going through MASH to be assessed in particular timeframes dependent on the level of risk and associated RAG rating of Red, Amber or Green.

- 1.7 As part of the wider Council transformation programme and Community Solutions design, the decision was taken to move all staff and services providing early support to residents into Community Solutions. MASH and the wider Triage front door function for children and young people where we have a safeguarding concern, was moved from children's social care to Community Solutions in Autumn 2017. At the same time, the team that supported those with No Recourse to Public Funds Team also moved in the same direction. This brought those together with the front door and triage teams for both adults and those seeking housing advice, to create a single, integrated front door.
- 1.8 The management of cases being reviewed in MASH and the wider triaging of cases being referred into the Front Door for Children's Social Care has not fundamentally changed since it's move to Community Solutions as the restructure was largely a 'lift and shift' operation. The benefit of moving MASH into Community Solutions has been to bring those services who previously sat across different parts of the Council, closer in both physical proximity under a shared set of objectives, including to foster resilience, intervene early, and reduce demand. Where cases may previously have been closed at the initial point, a greater number are now signposted and 30% of the cases receive targeted assistance from the intervention or support lifecycles in Community Solutions.
- 1.9 There have been a series of recent evaluations of our MASH system, with the most significant of these being the ILACS OFSTED inspection conducted in February 2019. These exercises have clearly laid out the challenges faced and improvements that are required to be 'good'.
- 1.10 In response to the full range of required improvement across Children's Care and Support, the Children's Improvement Programme has been developed and implemented. An essential component of this concerns the improvements required to improve the MASH as well, which are well under way.
- 1.11 A full Ofsted Improvement Plan was developed after the Inspection, reflecting work being undertaken to meet Ofsted's recommendations and work against this action plan has been progressing at pace.
- 1.12 In addition, a much broader improvement plan for Children's Care and Support has been developed, which better reflects the full depth and breadth of our ambitions for improving the range of services impacting on children and young people. This has included the development of the new Target Operating Model for Children's Social Care, a revised quality assurance and audit framework and the development of the partnership neglect strategy.
- 1.13 We have an established MASH with good partnership representation. This year, we have also successfully recruited permanent social workers and managers in the MASH with 95% of all staff now being permanent employees.
- 1.14 The number of contacts has reduced and referrals at the end of December have remained broadly the same with 2,583 18/19 and 2,594 for 19/20 . Despite this, decisions continue to be made in a timely way and has improved consistently since

2017/18. Our repeat referral rate is stable. However, too many contacts made using the Multi-Agency Referral Form (MARF) are variable in quality and around 23% of social care contacts into the front door result in no further action. Addressing this is a key priority of the Safeguarding Partnership.

- 1.15 The relationship between the MASH and the Assessment Service has improved, and real time consultations are undertaken. Monthly interface meetings are chaired by the Head of Service and improvement actions jointly owned and tracked through monthly dip sampling activities. We have also strengthened ongoing scrutiny and consistent application of thresholds, consultation pathways between the MASH and specialist teams such as Exploitation, Life Planning and No Recourse to Public Funds to ensure that the right families are supported at the right time and by the right service.
- 1.16 Routine audit and quality assurance activity is continuing to find the MASH to be safe, although work continues on ensuring the continued application of thresholds. A recent dip sample audit of neglect referrals into the 'front door' found that threshold decisions were largely appropriate and MASH assessments were detailed and analytical with clear rationale for decision making. Evidence of management oversight and supervision was found on most cases although quality remains variable. The Improvement Board has recently looked at multiple contacts into MASH and conversations in the partnership board will continue around Police Merlins.
- 1.17 However, routine scrutiny during the summer of 2019 raised some concerns for the DCS as to the correct application of thresholds in the MASH particularly relating to adolescents and often hidden issues such as exploitation, neglect and domestic abuse. An audit on MASH referrals related to adolescents was undertaken to ensure that any risk of exploitation was being appropriately identified. Whilst findings were positive in many cases, the audit revealed practice the MASH to lack professional curiosity with too many risk assessments completed with only police and children's social care information. It identified a need for stronger engagement with partner agencies and knowledge of the Early Help offer, as well as engagement and consultation with young people themselves. Further work under the MASE is being undertaken to ensure join-up and learning across adolescents, missing, criminal exploitation and interface with the YOS.
- 1.18 Although assurance has now been provided on these events there remains improvement work to be undertaken across our system around the efficacy of direct work with children and families on these emerging and increasingly prevalent issues in our communities.
- 1.19 In order to provide further assurance to the DCS and the system more broadly, we are now working on plans to return the MASH to Children's Social Care, improving alignment with improvements in safeguarding and other support services and increasing oversight through the ultimately responsible Director, the DCS.

2. Proposal and Issues

- 2.1 The MASH and the Pre-Birth Teams will be managed by the Service Manager in Assessment & Intervention (which was kept vacant during 2019/20). The Service Manager post will report into the HoS for Assessment & Intervention, which reports to the Operational Director of Children's Social Care. Early Help services will remain

in Community Solutions and are undergoing their own transformation process in line with a new Target Operating Model and the revised Neglect Strategy.

- 2.2 Two teams will be created within the MASH, each with a MASH Team Manager, helping to strengthen management oversight in accordance with the rest of the Children's Target Operating Model (TOM) and responding to recommendations from Ofsted.
- 2.4 Each MASH Team Manager would have 7 direct reports (made up of 4 Social Workers and 3 Referral Officers). Again, this is in line with the Children's TOM workforce strategy of 1 manager to 7 direct reports.
- 2.5 The establishment will consist of 8 Social Workers and 6 Referral Officers (as it does now), however the 8 Social Worker posts will now be a mixture of newly qualified, social worker and senior social worker levels (currently all 8 Social Worker posts are at the Senior Social Worker level). This new arrangement of mixed levels of experience is in line with the Children's TOM workforce strategy of career progression and growing our own to enable greater workforce security.
- 2.6 We are minded that MASH is a specialist area of social work that will not provide a Newly Qualified Social Worker (NQSW) with all the learning opportunities that they require in order to pass their first year in employment successfully. Therefore, the NQSW worker will spend time in both the Assessment Service and the MASH, holding a variety of cases as well as getting experience of the front door to social care. This approach will go some way to help us achieve our ambition of developing well rounded social workers who understand all parts of the system.
- 2.7 The MASH will follow the same practice standards and social work practice model as the rest of Children's Social Care, focused on relational work and developing a strong understanding of the whole family.
- 2.8 The MASH will be audited and quality assured by the Safeguarding and Quality Assurance Team in Commissioning and will be subject to the same performance monitoring as the rest of Children's Social Care.
- 2.9 The MASH Team and its manager will receive supervision from qualified social workers who are also their managers, as is recommended and in line with the rest of Children's Social Care.

3. Options Appraisal

- 3.1 Option 1: Retain the MASH in Community Solutions.
Whilst this option would be easier and maintain alignment with other front-door and triage services such as the Adult Intake Team, we have plans to retain these links with its placement in Children's Social Care and deem the links with safeguarding to be more crucial at this stage.
- 3.2 Option 2: Move the MASH to Children's Social Care (recommended).
Moving the MASH to Children's Social Care will help to embed and accelerate the improvements associated with the post-Ofsted Children's Improvement Programme, ahead of the next Ofsted Inspection.

4. Consultation

- 4.1 Consultation on this issue has been ongoing between the Chief Executive, the Director of Community Solutions and the Director of People and Resilience, in consultation with the Cabinet Member for Social Care and Health Integration.
- 4.2 Any changes to the structure of the MASH as it moves into Children's Social Care will be subject to staff consultation.

5. Financial Implications

Implications completed by: Katherine Heffernan, Group Manager – Service Finance

- 5.1 This report seeks Council's approval for MASH to be relocated within Children's Care and Support (Operations). The service was previously part of CC&S before the transfer in October 2017.
- 5.2 The budget transferred to Community Solutions in November 2017 was £763,710 to fund 15.9FTE. This will be transferred back to Childrens plus a 1% uplift (part of the 2020/21 MTFS.) The redesigned MASH team of 16FTE will require a budget of £807,600 creating an initial pressure of around £36,000. This gap is in line with the general level of funding gap in all Council pay budgets of around 5%. The proposal is to restructure the MASH team in order to integrate into the new Children's Target operating model. The gap may be reduced by reviewing the staff structure. Childrens Services will need to manage any residual pressure within the overall budget including the growth funding in the MTFS.

6. Legal Implications

Implications completed by: Lindsey Marks Deputy Head of Law

- 6.1 There are no legal implications directly arising from this report.

7. Other Implications

- 7.1 **Staffing Issues** – We plan to make some changes in order to secure and develop the social care workforce, many of which are ongoing and proving successful. These would apply to the MASH as well. Any changes to the structure of the MASH as it moves into Children's Social Care will be subject to staff consultation.
- 7.2 **Safeguarding Adults and Children** – The MASH is fundamental to children's safeguarding and by aligning it with the rest of the children's safeguarding system we plan to shore than up further.

Public Background Papers Used in the Preparation of the Report: None

List of appendices: None