Keeping Bristol Safe Partnership
Shadow Safeguarding Board
First Response
Mystery Shopping Report

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Background

The Shadow Board is a group of children and young people aged between 11 and 25 who have lived experiences of safeguarding services within the Bristol area. This includes children in care, care leavers, young carers, children who have accessed CAHMS or have had social care involvement in their lives.

The role of the Shadow Safeguarding Board is to strategically inform on children’s social care and influence safeguarding processes across the partnership, including adults social care and community safety.

In 2021 the Shadow Safeguarding Board undertook a mystery shopping project where two young people called First Response a total of three times to see if the service could manage referrals from children and young people. The Shadow Safeguarding Board members reported the automated options to be daunting and intimidating. They requested that the option of children and young people was prioritised and offered on the list of options. The members also fed back that the language used by First Assessment Advisors was complicated and too professional for them to understand.

The 2021 report was seen by Ofsted and fed back as a good example of directly including the views of children and young people in strategic safeguarding. As a result, the Shadow Safeguarding Board have been asked to undertake a second report, testing the changes that had been made.

This report outlines the findings from the second undertaking of this project.
Overview

In November 2022, the Shadow Safeguarding Board were asked to complete a second round of mystery shopping First Response. Three young people were involved in this project, with two of the young people calling First Response twice, totalling five phone calls. The first three phone calls took place in November 2022, and the second two took place in April 2023. The ages of the young people were 12, 14 and 20 at the time of the first phone calls. The young people were supported during these phone calls by the participation project officer, with a debrief conversation taking place immediately after each call so that their feedback could be obtained.

Faux cases were created by the Shadow Safeguarding Board members in planning sessions prior to the phone calls. This meant the cases were relatable to their own experiences and those of their peers. These case studies were shared with management from the First Response service in advance of the phone calls along with timings and dates. Emails were sent to First Response management immediately after phone calls with details of the cases used to reduce the risk of information being entered onto the internal social care database (LCS) unnecessarily.
Feedback

Automated Options
All young people acknowledged that children and young people being the first option on the automated options was helpful and meant they weren’t waiting on the phone for a long period of time. However, they all fed back that it would be better to have the number One button rather than the Zero as they were all poised ready to press the number One and got a bit flustered when they were told to press the Zero button.

The Shadow Board members felt that the language was accessible and understandable during the first three phone calls. However, their experience differed by the time the last two phone calls took place.

Phone call 1
This first phone call was based on concerns about a peer at risk of exploitation. Concerns raised included the young person having an older boyfriend who is in college and has been forced into partying and drinking. She has been sending explicit photographs, been sneaking out the house, and has become withdrawn from her friends.

During this call the young person felt that the term CSE could have been explained a bit better and were disappointed that they had to ask the advisor what the next point of action would be.

However, they felt that the First Assessment Advisor was not over-bearing and didn’t use long words. They also said that the advisor was calm and didn’t get frustrated when the young person didn’t have the answers or all the information necessary to make a referral. They said that the advisor was very kind, nurturing, and made the young person feel comfortable.

The young person would have liked to have been more reassured that no one will get in trouble and felt that younger children may need clarity as to why certain information would be needed, for example dates of birth and addresses.

The young person felt that the advisor gave good advice, particularly around the suggestion to talk to the young person they were concerned about and to talk to a trusted adult. They really liked that the advisor sent through more information and signposting via text message as they could read this in their own time and share it with their peers.

Phone call 2
This second phone call also raised concerns about exploitation. The peer had been sending private stories on SnapChat and had been talking to people the friend does not recognise. They could also see that the young person had been in the City Centre late at night via the SnapChat map. They had also been coming to school with new trainers, a new bag, and had been bragging in lessons about having £200
cash on them, leaving football practice in a BMW which is different from their parent’s.

Feedback from the second call was that the advisor was helpful. They used some long words, but the young person still understood. The young person felt that if the caller had been younger than themselves, they may not have understood the conversation as well.

It was felt that the advisor asked the right questions and clearly explained what the child might be experiencing for them to behave in a concerning way. The young person felt that the term ‘risky behaviours’ was a good way for the advisor to explain what their ‘friend’ was doing rather than using specific types of abuse.

The young person said it was positive that the advisor explained what would happen next after the call and how they would try to make contact with the ‘friend’ through school. It was felt by the young person that it was worth making the call but also said that it was strange to press Zero for the first option.

**Phone call 3**
The third call was about a young person who was turning up to school with bruising on his arms and wrists, presenting as upset and angry. There was awareness that his mother gets angry with him and sometimes doesn’t give him breakfast or provide lunch for school.

This call was positive, and the advisor offered to open a referral. They also offered to contact school and to arrange a meeting with school staff to discuss any concerns they might have. The NSPCC number was provided and the language the advisor used was clear and understandable, without using abbreviations.

The young person felt that they were asked to repeat themselves a lot which they felt may be hard to do during a real phone call and may cause upset. It also made the call long.

They took comfort in the fact action was going to be taken, although they also commented on the automated option being a Zero as confusing.

This young person highlighted that the advisor did not introduce themselves. They felt that if they had given them a name- even if it was a fake name- that this would have helped them to build a rapport. They commented that they would then have a name to reference if they wanted to call back and discuss any more concerns, providing the option of having the same person to talk to.

There was some delay in completing the second round of phone calls due to members’ availability and Ofsted’s inspection of Bristol Children’s services.
Phone call 4
This phone call was about a young person who lived in South Gloucestershire who was self-harming. As the young person’s home address was out of the local authority area, the young person was initially advised to contact South Gloucestershire’s children’s services.

This young person felt that the conversation with the advisor was not reflective of the fact they had pressed the option for children and young people. After the young person was advised to contact South Gloucestershire children’s services, they were then advised to contact their friend’s GP or CAMHS for a referral. It was felt this advice would be more suited to a phone call from an adult or professional.

The young person felt that they were left to do the work of helping their friend and of holding the risk. They remarked that when they had contacted ChildLine for their personal problems they had been met with engaging and chatty advisors, which was differed from the approach received when calling First Response, as this call was quiet and awkward.

The young person also felt that there was a lot of specific information requested and that it took a while to get to the concerns - they would have preferred a free-flowing open conversation with questions about specific identifiers included.

Phone call 5
Phone call number 5 was about a young person who had been pressured to sell drugs by their peers. The young person was talking in the first person to get an example of what happens when young people contact First Response about their own personal issues.

The young person reported that this was a good phone call with understandable and accessible language used. Although, they were advised by the First Assessment Advisor to steer clear of these peers, which the young person felt was not particularly helpful. The First Assessment Advisor was not confident in the support available for children who were being peer-pressured into selling drugs so googled services whilst on the phone to the young person and then suggested they speak to their manager. The young person was surprised at this as they thought the advisor would know what support was available and that as a young person, they would have used search engines to obtain the scope of services available themselves.

The First Assessment Advisor sent through information via text, which the young person felt was helpful and accessible to them. The young person was disappointed that the Advisor did not suggest contacting the education provision on their behalf to convene a meeting like they had done in previous phone calls, which left the young person feeling like the situation was left unresolved.

Suggestions
The young people who undertook the mystery shopping phone calls made suggestions as to how the service could become more accessible for children and young people:

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• More scenario practice training
• Advisor to introduce themselves
• Links to different support to be accessible straight away
• Different types of information and recommendations for children and young people compared to adults
• Have a designated worker specifically to take the phone calls from children and young people (Option Zero phone calls)

Conclusion
The first three phone calls evidence positive changes have been made to the First Response service since the previous report. However, the last two phone calls were undertaken almost six months later and the issues raised in the first report appear to be ongoing, which continues to create barriers to children and young people accessing the service and raising concerns about themselves and their peers.

Similar to the recommendations in the first report which suggests a phone line with advisors specifically for children and young people to speak to, it highlights the potential benefits for designated workers to be upskilled to take these specific phone calls. Due to the range of contacts that First Response receive, it may be beneficial to have one or two designated workers to respond to phone calls from children and young people and to have specific training in this, for example, scenario-based training and expanding their knowledge of services available for children and young people. Rebranding of First Response could then be considered to encourage the service as a point of contact for children.

The first three phone calls highlighted positive changes, with the young people feeling heard and no longer feeling they were holding the risk as advisors proactively suggested they would contact education providers and arrange meetings with professionals. The last two phone calls raised similar issues that were noted in the previous report around both language and the lack of proactive action, for example, contacting professionals with regards to the concerns raised. Consideration should be given about the consistency of the advice and next steps offered, whether this is a workforce training issue for all staff or those specific workers responsible for taking the phone calls of children and young people within the First Assessment service.