Transcript of Multi Agency Safeguarding Tracker (MAST) Walsall and West Midlands platform presentation and demo video

Text on screen: The Multi Agency Safeguarding Tracker (MAST) is a data-driven solution that allows all partners with mandatory responsibility for safeguarding to securely share headline data underpinned by a documented information governance structure

Text on screen: MAST was co-designed and piloted by Walsall Council, West Midlands Police West Midlands Fire & Rescue and Walsall Community Healthcare NHS Trust

Paul Withers, Data Protection Manager, Walsall Council: After several conversations with our Director of Public Health, and social care leads, and police partners, it was clear that there was a need to be able to share information more speedily and make it more available.

However, coming from a data protection background, of course I can understand the boundaries involved there. Stephen Gunter, our Director of Public Health said: 'Can you come up with an idea, Paul, of how we can resolve these issues?'.

Basically I went back to something I was looking at over 12 years ago, believe it or not, when I was involved in Birmingham's implementation of MASH and child protection and child health information sharing initiatives.

Basically I said: 'Well, are we looking at too much? What can we do with just the minimum? So if we have first name, surname, date of birth, address, and gender, known as 'the demographic information dataset' can we actually do a lot more?'

It turns out that the minute you put an indicator on there, as to whether or not somebody's been involved with another safeguarding partner, you can actually do a lot more. That's how the initial idea came about. The application for the co-funding initiative was approved, and then the funding was approved, and hey presto, in a year and a half or two years later, here we are.

For me, the main key here is that, as a region we should be able to understand how often and at what time periods and intervals, somebody is interacting with one of our safeguarding partners and use that information to help us build on informed decision-making so that we can absolutely see and understand, well we now have a picture here that this family circumstances or this individual circumstances potentially reaching critical or they are falling below whatever threshold we set for intervention.

Also I think if this was national, we would also have an excellent tool for being able to trace and track individuals who go missing or, of a question where there's sexual exploitation or victimisation going on and we can work with our partners, such as the Police, to say 'Well yeah, this service over here had activity with this person, and this person showed up over there, in that city, a month later.'

So we can see individuals moving around which also helps us to understand their personal circumstances and engage with them a little better.

Why are we not already doing something like this? I think it was those initial barriers to the amount of data that people were requesting that we've managed to move to the side and say 'Let's work on the minimum first and see where we can go with this level of information'.

For me this became very real when I saw outcomes such as three or four fires in a very short space of time at a location where children were known to be looked after children, but social care weren't involved or weren't even aware that there'd been so many fires at the location.

Or where, for example, I'm sure my colleagues from the Police will jump on board here, where you know you want to go out and do an arrest, or you want to visit a location where domestic violence has been reported, how useful is it for the police to understand that there might be one or two or three children there, that are also involved in safeguarding concerns?

Because then they can potentially take measures to handle that situation differently and reduce the potential for those children to end up being in a situation where there might be trauma or something.

Abi Everett, Policy in Practice: Now I'll be able to show you a demo of the system.

MAST from the outset asks individuals to sign in. It highlights that they're using the service in accordance with organisations' safeguarding duties, that using the system is a fully auditable process, and you have to declare that you're performing the search with regard to a certain safeguarding

I'm set up as a manager on MAST so I'm acting as if I were manager for the for the system inside an organisation. So I have this feature up here which we call the audit feature which is only accessible for managers and will enable me to look at anyone in my team who has used MAST, and for what reason, and who they've looked at and when. So if I look, for example, at myself it can show anytime that I have looked up any record and for what purpose.

This case is based on a real case that was found. This is all dummy data but based on a real case that was found when we did the deep dive into the data with Walsall Council. Also worth noting here, as was said before, this shows a different address but they can both be easily matched to each other.

So in this case, when we searched by person, identifies two matches, that this person has an open adult social care package that was opened in January, but that since then there's not been a significant amount of contact with services that we can identify it linked to this individual person. So only one NHS record, in the Spring.

However if we go back to the search and then we search by address, it brings up a lot more matches that people weren't previously aware of, and also again, identifies two people at this address and in the real life version of this case, the council were only aware of one. It can also be seen that there's been a significant escalation in events in April and that there's been significant contact across Fire, Police and Health.

In this case this this individual was known to adult social care but had been refusing any extra support. The council did know that there was significant drug and alcohol misuse, but the person was deemed to have capacity, and since they were refusing help they didn't escalate the case any further.

However, looking into the case a bit further they found that there was another person at this address, her adult son, who was also living at this address and that there had been multiple contacts at this address with these two individuals living there. Eventually this individual was referred to the self-neglect panel and given the support they needed.

DI John Leigh, Western MASH and CRU: In terms of where the value lies, Paul talked about speedy and available data and we have a large and complex machine set up around the MASH, around our information sharing services, but that leaves a huge bulk of cases where we're not referring children into the MASH, or we don't know that we should be, or we're not referring adults into the safeguarding hub but we don't know we should be. Actually there's information out there at exactly that demographic level that's incredibly valuable for investigators and also for safeguarders.

Abi Everett, Policy in Practice: When we look at the details page we can identify, if we hover over one of the interactions, where there might be a person who then can be contacted to find out more about that that individual interaction. And that's the case when you look at Police as well, you can identify the person who can get in contact [with] to find more case level information, which isn't displayed in MAST.

DI John Leigh, Western MASH and CRU: So that's the kind of first chunk of the usefulness that we see. The second piece is around informed decision-making. Paul mentioned this before, but at the moment we do a lot of thinking about whether a case meets threshold or not. I'm sure all of you will be familiar with trying to work through how much do we know about this child? Are we concerned at this point that this vulnerable adult has met the threshold for intervention? or for a strategy discussion? And sometimes that can feel like you're trying to make those decisions on the basis of the single written referral information that you've been given. You haven't got the depth of information that you'd normally get in a MASH strategy discussion because you haven't engaged the partners yet, and you haven't engaged them because you don't know if they have anything to share.

So the ability for us and for our partners to look in and see exactly those sorts of level interactions, so, 'Am I concerned about this child? Well I don't know - I've got one report.' But then if I look in and see children services have attended the address four times in the last three months, fire [there] have been three small fires at the address, like Paul said, and there are children there, then suddenly it's much easier and you make much better threshold decisions.

What I need it for is that key window into the other services that are part of it and that's why we want to be involved. Just it's useful for us to be able to share that with partners as well because it saves them time, which saves us time.

Abi Everett, Policy in Practice: [Here's] some of the data matching that we've already done based on the data that we've received from West Midlands partners so far. This table on the right identifies how often these unique cases have been linked to a match from Police. There are 5529 unique children's cases. 2811 of these match with a record in the police data set and so that's over 50% of the records that have been mapped. So when we match that with Fire and Health as well, it's going to be an even higher level.

I think this table on the top right is really, really interesting because it identifies where there's been multiple matched police incidents at the child's address. You can see that the majority of childrens' unique addresses have between one and five matched instance and I think that's to be expected, but it's also interesting to see that there's a lot of these high contact addresses where there is known to be children present

Sharon Connon, Head of Strategic Safeguarding, Midlands Partnership NHS Foundation Trust: One of the main benefits that I can see from a health perspective is that we would eliminate that need for doing that checking. Yes, we know them. No, we don't know them. Because actually the practitioner themselves could go in and see if, you know, when they've been seen, when they've not been seen.

Just from my organisation's perspective, when I costed up the cost saving you know it's in the region of about £50,000 for just my organisation. It isn't just the resource that's used in the checking, but actually, how do we find out if a social worker for younger child or an adult is open or known to social worker.

We've got practitioners phoning up, we've got them sitting on calls waiting, we've got call handlers taking that information in order to share information….this easy access: 'Yes, I can see they are open, and here's the contact details of who I need to contact.'

Abi Everett: Paul mentioned before that what previously stood in the way of similar projects being successful was aiming to share too much data and not focusing specifically on what information is necessary to achieve the aims of improving the information that's available for safeguarding professionals to make decisions about individual cases.

So we now have three key data governance documents that are seen on screen: DPIA, a memorandum of understanding, and a joint controller information sharing protocol. We have templates of these for both England and Wales, with the specific legal gateways and legislation that enable and encourage the use of multi-agency data sharing and from the really early stages, all this is in place before any data is shared.

Paul Withers: I don't think it's a question of can we afford to do this or not. I think it's more a statement of can we afford NOT to be doing this. Every child case review, every serious care review that comes out has always expressed that a root cause of these situations is the

lack of information sharing. So I can't advocate enough how much using this minimum amount of information to get the maximum amount of benefit, is valued