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Safeguarding Board Wales

"They have a strategy meeting, but I am not involved in that, we don't get invited. There is a copy of the review for our file. I would like to go."

Shaping the future of multi-agency safeguarding arrangements in Wales: What does 'good' look like?

Data Work-stream 2: Safeguarding Service User Experiences

November 2022

This is report 3 of 5. There are a series of reports in relation to the evaluation of 'Shaping the future of multi-agency safeguarding arrangements in Wales'.

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Shaping the future of multi-agency safeguarding arrangements in Wales: What does ‘good’ look like?

Data Work-stream 2: Safeguarding Service User Experiences

Authors: Ellie McCoy[2], Rebecca Harrison[2], Michelle McManus[1], Emma Ball[1], Jessica McElwee[1] & Jacob Astley[1]

[1] School of Justice Studies, Liverpool John Moores University (LJMU)

[2] Public Health Institute (PHI), Liverpool John Moores University (LJMU)

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For further information contact Prof. Michelle McManus: m.a.mcmanus@ljmu.ac.uk / Michelle.McManus@northumbria.ac.uk (after 1st December 2022).

Summary

Service User Voice: Meaningful Inclusion embedded into Multi-agency Service Delivery

Findings showed that Peer-led Service User feedback forums were often regarded as a useful mechanism for service users and families to have their voices heard, listened to and acted upon. They also provide opportunities for peer led support. Multi-agency safeguarding relies on partnership working between practitioners, agencies and service users as such, all voices are integral to the multi-agency process. Partnership working is dependent upon understanding all perspectives and requires honesty, transparency and inclusion within decision making, as well as ongoing dialogue. User-friendly documents and communication with service users and families are essential and service delivery must be accessible, appropriate and fit for purpose. This can be supported by meaningful input from service users incorporated into the planning of the services which are designed to support them. Consultation, collaboration and co-production between agencies and service users and families must be addressed and resourced at both strategic and operational level to ensure it is embedded sustainably within service delivery.

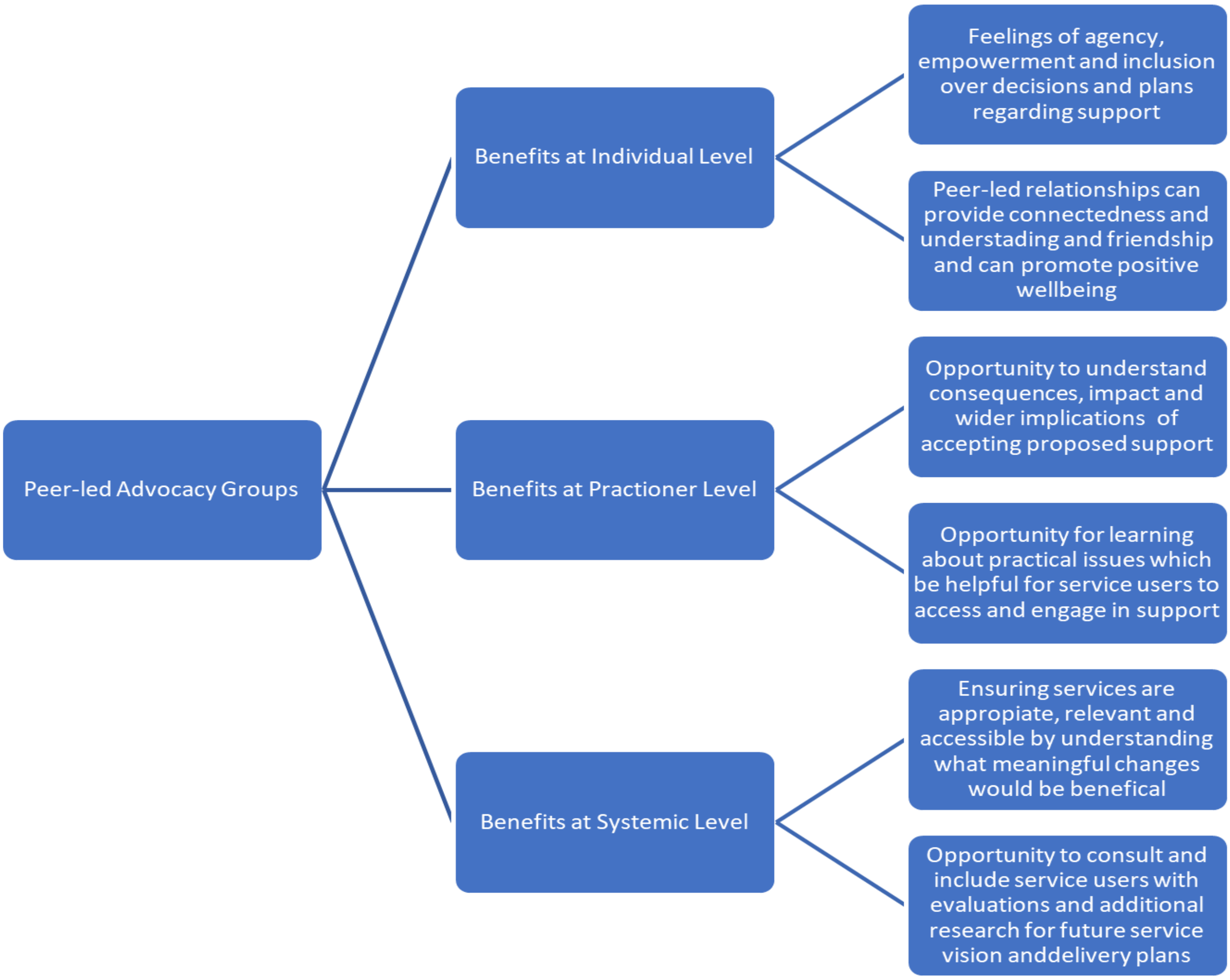
Strategically- Service users feedback panels/ groups/ forums must be acknowledged as a priority for developing service delivery and therefore have leadership should have designated accountability for the process, budget within resource to implement and monitoring of feedback for integration into service delivery plans.

Operationally- Service users feedback panels/ groups/ forums must be acknowledged as a mandatory way of working in partnership with service users and families. Must be coordinated by designated person or team with all practitioners feeding into the process. Must be actively promoted to service users. Must be facilitated in a meaningful and accessible format on a regular basis. Service users must benefit from involvement and the results of their input should be communicated.

There must also be regular communication between strategy and operations to understand what can be learned and potentially implement and authorise changes to service delivery.

Due to the nature of safeguarding and subsequent issues around power dynamics which can be at play between agencies, service users and families, there must be systems and processes which build on the individual relationships between practitioners and service users to facilitate partnership working. In order to align service delivery with service user’s needs, there must be a recognition of the importance of providing a mechanism which promotes, facilitates and incorporates the voices, views and perspectives of service users and ensure that this is embedded into service delivery plans.

Benefits of Peer-led Advocacy in developing relationships and partnership working



Peer-led Advocacy Groups

Benefits at Individual Level

Feelings of agency, empowerment and inclusion over decisions and plans regarding support

Peer-led relationships can provide connectedness and understading and friendship and can promote positive wellbeing

Benefits at Practioner Level

Opportunity to understand consequences, impact and wider implications of accepting proposed support

Opportunity for learning about practical issues which be helpful for service users to access and engage in support

Benefits at Systemic Level

Ensuring services are appropiate, relevant and accessible by understanding what meaningful changes would be benefical

Opportunity to consult and include service users with evaluations and additional research for future service vision anddelivery plans

Contents

1. Introduction

Safeguarding involves both the protection of Children and Adults at risk from abuse, neglect or other kinds of harm and preventing them from becoming at risk of abuse, neglect or other kinds of harm. The National Independent Safeguarding Board (NISB) was set up under the Social Services and Well-being (Wales) Act 2014. Specifically, the National Board has three primary duties:

1. To provide support and advice to Safeguarding Boards with a view to ensuring that they are effective
2. To report on the adequacy and effectiveness of arrangements to safeguard children and adults in Wales
3. To make recommendations to the Welsh Ministers as to how those arrangements could be improved

A number of key reports, legislation and guidance have been critical in the development of multi-agency working within safeguarding. In Wales, a number of key initiatives have been developed to ensure equal statutory footing for Children and Adults and within the Wales Safeguarding procedures (known as Multi-Agency Operational Safeguarding Arrangements [MAOSA]). There are six regional safeguarding boards in place across Wales (North Wales, Mid and West Wales, Gwent, West Glamorgan, Cardiff and Vale, and Cwm Taf Morgannwg) to ensure that children, young people and adults are protected and prevented from becoming at risk of abuse, neglect or other kinds of harm.

Each safeguarding board is a multi-agency forum which brings together representatives of each of the main agencies and professionals who are responsible for helping to protect children and adults for abuse and neglect. The boards are responsible for agreeing on how the different services and professional groups should co-operate to safeguard children and adults, for making sure that arrangements work effectively in bringing about better outcomes for children and adults in Wales. The boards will engage with, listen to and hear the views of children, young people and adults.

Safeguarding arrangements are complex and work is required to understand how efficiently the system works. LJMU were commissioned to carry out research to identify 'what good looks like' across the whole safeguarding system and provide actionable recommendations to improve 'safeguarding' at every level in Wales. This research project follows findings from a previous study exploring the multiagency safeguarding response in Wales (McManus & Boulton, 2020[1]).

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[1] https://safeguardingboard.wales/2021/01/06/national-evaluation-of-multi-agency-operational-safeguarding-arrangements-in-wales-phase-1/

This research provides evidence to inform ‘Shaping the Future of Safeguarding in Wales’ in evaluating three key areas that underpin safeguarding responses:

1. Safeguarding practitioner experience to identify key features of effective collaborative multi-agency safeguarding arrangements in relation to reports of safeguarding concerns.
2. Systems and data review to support the development of a national performance framework that enables safeguarding leaders and practitioners to measure and analyse the national statutory safeguarding risk profile and effectiveness of operational practice in mitigating risk.
3. User experiences of safeguarding processes to capture key common ‘messages’ about the personal impact and experience of individuals, including perceptions of the effectiveness of safeguarding processes in Wales.

This report focuses on capturing service user voice for adults, young people and children who have received safeguarding support through the Wales Multi-Agency Operational Safeguarding Arrangements. This research aimed to capture the user voice, as mandated within the Social Services and Well-Being (Wales) Act (2014), which focuses on promoting people’s independence to give them a stronger ‘voice and control’ (Safeguarding Board Wales, 2020). This is an essential feature in achieving the overarching aim of an effective whole system approach to safeguarding people of Wales at every level.

2. Rapid Review of Literature

The experiences of both vulnerable adults and children in relation to safeguarding, are some of the most vital pieces of information to obtain. Indeed, with the introduction of the Social Services and Well-Being (Wales) Act (2014), came an increased focus on the promotion of people's independence to give them a stronger 'voice and control' (Safeguarding Board Wales, 2020). Whether on a local level for local authorities to a national level for Welsh Government, understanding the strengths and acknowledging and proactively improving on any weaknesses of the functionalities of social services provided by different local authorities is of paramount importance. Fundamentally, this can be can achieved by capturing key common 'messages' about the personal impact and experience of individuals, including perceptions of the effectiveness of safeguarding processes in Wales.

2.1. Adults' Experiences of Safeguarding

In delving into the experiences of adult service users in relation to safeguarding, a number of qualitative studies have been conducted. In particular, in the interest of gaining a wide-ranging understanding, the chosen studies consider an array of some of the various types of safeguarding concerns. In a pilot study exploring the feasibility of introducing an adult safeguarding measure for inclusion in the Adult Social Care Outcomes Framework (ASCOF), Norrie et al. (2016) conducted a face-to-face interview based survey consisting of seven questions. This was originally developed in Norrie et al. (2015) (Annex A) - with 224 adults at risk who had been the subject of a safeguarding investigation within 40 Local authorities in England. From this pilot study, there a few notable statistics that highlight a number of positives (full quantitative mapping of the responses can be found in Annex B). Of particular importance to note, 72% of participants (both adults at risk, and if reporting by proxy) felt that the help received during the safeguarding investigation resulted in them feeling 'quite a bit' or 'a lot safer', with only 12% feeling safer. However, they were not happy with the outcome of the safeguarding investigation, and 35% reported that they did not feel safer after the safeguarding investigation (Norrie et al., 2016). Indeed, given the large propionate number of participants from this pilot study, what can be deduced are a number of potentially valuable additions to the evidence on the activity of adult safeguarding.

In addition, a further pilot study conducted by Montgomery, Hanlon and Armstrong (2017) sought to build on the findings from Norrie et al. (2016) by gathering service user feedback from individuals who have been subject to adult safeguarding procedures in Northern Ireland. Indeed, the study itself is based around the 10,000 Voices initiative, which was commissioned and funded in 2013 by the Health and Social Care Board (HSCB) and Public Health Agency (PHA) and sought to integrate and shape a more patient-focused approach to how social services are delivered in Northern Ireland (ibid.). From the study, 36 individuals completed a six-question survey (see Norrie et al., 2015; Annex A), with optimistic results pointing to potential adaptation to facilitate the collation of complex experiences and enabling valuable insights into the inner workings of adult safeguarding. In particular, there are a number of notable statistics: 56% felt listened to during meetings and conversations; 42% felt supported by staff as the safeguarding investigation was carried out; 11% felt that they did not know what was happening during the safeguarding process. A further 33% felt the information was clear; 74% felt that Social Workers and Police Officers enabled them to understand the investigation process, and 67% felt “quite a bit” or “completely” safe at the end of the process (Montgomery et al., 2016).

In looking at mental health service user experiences of targeted violence and abuse in the context of adult safeguarding in England, Carr et al. (2019) co-produced a qualitative study consisting of 23 interviews with mental health service users, with the findings informing a number of focus groups consisting of 46 adult safeguarding and mental health stakeholders and practitioners. From this qualitative study, service users were vocal about the shortcomings of mental health and adult safeguarding practitioners to not only listen to them, but believe service users. Indeed, many of the service users pointed to a lack of accountability and responsibility on the practitioner’s side to appropriately and effectively help service users to pursue justice. For stakeholders and practitioners, a number of responses point to a level of uncertainty regarding their roles and responsibilities, with “passing the buck” often resulting in long response delays and lack of support. This is compounded by a number of responses from service users who reported experiences of feeling “lost in the process” and of “fragmented”, absent or inadequate service responses from social workers who were “inflexible, focused on eligibility and uninformed about adult safeguarding” (Carr et al., 2019). This demonstrates the crucial needs for services to be able to work collaboratively with a shared safeguarding responsibility.

In exploring mental health further, an additional area of intrigue is that of perinatal mental health. In particular, a study by Lever Taylor, Mosse and Stanley (2019) consisted of a qualitative study of semi-structured interviews with 18 women in England with perinatal mental health needs and experiences of social work intervention. Crucially, from the study there are a number of pertinent findings that point to similar concerns as found within the study by Carr et al. (2019). Indeed, a number of the mother’s interviewed by Lever Taylor et al. (2019) felt that social workers were perhaps unwilling to accept the possibility that they could be good mothers in spite of their difficulties, with many feeling as if they had been set up to fail. Moreover, social workers’ over-reliance on negative accounts from the mothers’ past was also voiced, with many social workers being focused exclusively on the risks to the baby, with little to no acknowledgement of the mother’s own needs, or even a generic understanding of perinatal mental health. In turn, this often led to the mothers feeling unable to communicate any need for help without giving the impression of being at risk (Lever Taylor et al., 2019).

Thus, what materialises from two selected studies on mental health and perinatal health, is a need for a greater understanding of the roles and responsibilities of social workers. Keying into this, Carr et al. (2019) attest to staff desensitisation to targeted violence and abuse - particularly towards female service users with a history of trauma - as a potential factor in individual blaming, not believing people, refusal of services or lack of referral adult safeguarding. In turn, attempts to alleviate these concerns ought to consider increased training or awareness of key issues, in order to promote a more person-centred approach wherein service users feel listened to and supported, with user feedback more readily incorporated into local and regional service model improvement plans. Additionally, series of recommendations have been put forward by service users from the study by Carr et al. (2019). In particular, these consist of having independent advocates who can provide consistent, person-centred support for navigating complex mental health, adult safeguarding and criminal justice processes from referral to the resolution stage.

2.2. Children's Experiences with Safeguarding

Turning attention to children's experiences with safeguarding, a number of studies - both quantitative and qualitative - have been selected to be considered in this literature review. In looking at Children's Social Care Services in England, a qualitative study by Jobe and Gorin (2013) interviewed 24 young people (11-17 years) who were receiving help from Children's social services in England. In particular, the findings point to young people valuing a consistent and trusting relationship with a professional, with many speaking positively about their social worker when they had regular meetings and when social workers had adequate time (ibid.). Notably, this carries similarities to a number of previous studies that have consistently shown that when young people feel that their views have been taken into account. They remained informed within the process, relationships with professionals are better valued by children and young people (see Butler and Williamson, 1994; Hill, 1999; Osbourne, 2001; Gorin, 2004; Freake, Barley and Kent, 2007; McLeod, 2007; 2010; Willow, 2009; Buckley et al., 2010).

Moreover, a number of the participants felt unhappy at the inconsistent relationship with social workers during the referral process, which in some cases was compounded by a lack of stability wherein participants had been passed between services within a local authority and assigned a new social worker (Jobe and Gorin, 2013). The theme of inconsistent or temporary relationships between children and young people and social workers, and the negative impacts and implications upon the experiences of young service users continues to be noted (see Grey and Woodfine, 2019; Gorin et al., 2020). This, in turn, not only leads to difficulties for participants in speaking about their experiences to new social workers, however, leaves many young people feeling that they had not been listened to, or that their views had not been taken into account (ibid.).

In addition, young people also expressed confusion at the involvement of social work when they were first referred, leaving them unclear about what had happened during the safeguarding process, and often unsure about who and what the roles were of professionals (ibid.). This was further exacerbated by assertions of a lack of signposting to support, with interventions often only for a short period and ceasing after no immediate danger of maltreatment had been determined. One of the perhaps more concerning issues raised by the young people in Jobe and Gorin (2013) was that of confidentiality. With many feeling unable to confide their experiences to their social worker in fear of family finding out what they had said, and by having priority given to the version of events as put forward by parents in lieu of believing the version as detailed by the young person. The salience of the problematic impacts and implications of frequent changes of social worker, lack of confidentiality and of a confidante. As well as the bypassing of the child's experiences in favour of the parent or family member, have all been expressed in a number of previous studies over the last two decades (see Munro, 2001; Bell, 2002; McLeod, 2007; 2010; Allnock and Miller, 2013; Grey and Woodfine, 2019; Gorin et al., 2020). This perhaps raises rather an important question, as to why these obstacles that inhibit the building of positive relationships between young people and social workers have not been more readily mitigated.

Additional issues have also been noted by Allnock and Miller (2013) following their mixed method approach of a questionnaire and in-depth interviews with 60 young adults (18-24 years) regarding disclosures of retrospective childhood abuse. Many of the experiences reported by the young people pointed to trust and safety being the catalyst to making disclosures possible, with anxiety, distrust of social services and feeling unable to speak freely and safely, the main reasons as to why none of them had decided to turn to social services to disclose their abuse in the past (ibid.). All in all, Allnock and Miller (2013) posit that on average, it took 7.8 years to disclose child abuse and neglect, with 80% of the participants having attempted to disclose the abuse multiple times before the age of 18 years, 66% while the abuse was happening; and, of the 203 disclosures made, only 117 disclosures were acted upon (58%).

Keying into this, is the theme of unhappiness with the manner in which professionals communicated with young people. Many of the participants from Allnock and Miller (2013) describe being treated as if they were children, and believed that if social workers had properly assessed both context and whole environment. Rather than the present issue by for which they are involved - the social worker may have better understood the nature of their problems and the abuse might have been identified. More specifically, experiences of feeling infantilised and of social workers treating children and young people as incapable is something that appears to persist in social services functions (see McLeod, 2010; Moore et al., 2017; Ellis, 2018). Fundamentally, a reoccurring theme has emerged in a number of studies, wherein social workers do not readily take the time to “ask the right questions” by either not directly asking about abuse, asking the same questions or even entirely misunderstanding what the child meant (see Allnock and Miller; Gorin et al., 2020). Ultimately, in attempting to fully appreciate the problematic implications of this in practice, the study by Gorin et al. (2020) which interviewed 111 children (6-18 years) across 10 different local authorities in England, call for the need for bi-directional relationships to help address the power differential sensed by some young people.

3. Methods

Interviews and focus groups were carried out with a number of individuals who have accessed support across Wales (which form part of the wider safeguarding response). Adults, young people and children may come into contact with safeguarding support in a number of different ways and can be engaged across all parts of the safeguarding system. This includes adult and children’s social services and early help support and a number of organisations (statutory and non-statutory) across Wales, delivering services, programmes, projects and interventions to safeguard adults and children and provide wellbeing support.

Individuals receiving safeguarding support may not know they are part of the wider safeguarding system and may not refer to the support as safeguarding support. They may be engaged with as specific type of support, for example engaged with a social worker, key worker or mentor and will be engaged in a programme of activity (that support their safeguarding needs). Therefore interview questions focused on specific support, rather than referring to safeguarding procedures.

It was important that the research team worked closely alongside key organisations in Wales to identify types of support, specific programmes and support pathways. Earlier stages of the wider research project were essential in linking in with the appropriate organisations and stakeholders. The research team utilised gatekeepers from key organisations to support recruitment for the research. Ethical approval was sought and granted from the Liverpool John Moores University Research Ethics Committee and age appropriate information sheets were developed, alongside rigorous consent procedures for gatekeepers, adults, and children and young people.

The research team liaised with seven LA areas in Wales. These contacts were derived from Work-stream One and Two of this research and through established contacts in Wales. A number of contacts could not support at this current time, others invited service users to participate in the research.

Ten service users have participated in the research from three areas in Wales. This includes four one-to-one interviews and one focus group (n=4) with adults and one interview with a young person and feedback provided via a youth worker for another young person. The participants were adults involved in adult social services and adults (parents) engaged with children's services, seven were now engaged in service user voice groups and another continued to access a family support project. The young people were engaged in children's services and a community project.

Discussions with key stakeholders when scoping out the feasibility of this research are also utilised and presented here, alongside relevant information, documents and case studies (see appendices) provided by organisations to showcase examples of capturing service user voice (this included information from three areas across Wales).

4. Key emerging findings[2]

4.1. Types of support

The adults participating in this research had experienced safeguarding support via children's services and adults' social services. They were now engaged in service user led advocacy groups, through a parents' group and a group for adults with learning disabilities. Individuals reported finding out about these groups through engaging with other support services in Wales. The parents participating in the research had all experienced having their children removed from their care, either temporarily or permanently. All of the adults engaged in support for learning disabilities, all resided in supported living accommodation. The young people participating in the research had involvement with children's services and were engaging in youth work and community projects. All individuals reflected on both positive and negative experiences of support. Those who had had previous negative experiences were apprehensive about re-engaging with support, and highlighted key differences which created barriers and facilitators for them accessing support.

> *"This time round has been a very positive experience. The support that I received at this point it's very, very different to the first time I was involved in social services" (P2)*

> *"We've been involved in social services. We were on child protection. Me, my partner and the kids, we got we just wanted from the family centre. We just needed some help. I just wanted some help" (P8)*

> *"We've been involved in social services. We were on child protection. Me, my partner and the kids, we got just what we wanted from the family centre. We just needed some help. I just wanted some help" (P8)*

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[2] For quotes P=adult participant YP=young person participant

4.1.1. Access to support

Individuals explained how they had been engaged in support before and during the Covid-19 pandemic, meaning access to support had changed during this time and continued to run differently. The parents engaged with the advocacy group online at first, and were now able to meet in person. One parent explained how they had never used an online platform before and described feeling nervous at first using a different technology, and found it intimidating and daunting to begin with, especially when using it for training and speaking with professionals online. They acknowledged how it took courage for parents to engage, recognising that parents had taken positive steps to access all they could despite their apprehension. For parents struggling with nerves, other parents who were already established within the group arranged online meetings to introduce themselves and help new members feel more comfortable to engage with online and then in person group sessions. Another parent explained that they were now familiar with online engagement and would regularly join meetings or training via the Zoom or Microsoft Teams app, which enabled them to join and engage with additional activities that they may not usually be able to attend. One of the service users also highlighted how a family centre had provided support through activity packs and garden visits for them and their children during the pandemic.

> *"So there are professionals here that realise this needs to be changed, but people are nervous because it's professionals. Some of these people have had traumatic experiences with social services. To walk in a room with a social worker really takes a lot of courage for me. I was lucky to be doing all the online meets up until we were able to" (P1)*

> *"I went through the (children's) services with my family and my children. I asked if parents can get involved, and found out about the parents advocacy and I wanted to get involved. It was still mind boggling at first, I had never done anything like it, you know with meetings online etc. I try to do everything that gets offered such as trainings and parent meetings" (P3)*

The service users with from the group led by individuals with learning disabilities, further described the impacts of the pandemic, including how activities were limited because professionals could not visit their supported living accommodation as they had done in the past. They also discussed how services had reduced and been cut, meaning that there were less activities on offer, however, they did explain that there was a current review of activities which was incorporating service users feedback.

> *"At day centres before covid, they used to let people in and after covid they don't let many people in, it's a very big change" (P6)*

This group also described how access to support had changed in recent years in the area where they lived. In the past they had a designated social worker and services were all co-located together, making it easier to reach their social worker and engage with other elements of support. They explained that now, services were separate and spread out more geographically, making it less accessible to seek out support for additional needs and meet with other professionals. They also did not have an assigned social worker and instead needed to contact the duty support worker. These changes were considered an accessibility barrier for travelling to locations, and also in terms of not having direct access to the services that they needed. They also reported that care managers had heavy caseloads, meaning that staff were not always easy to make contact with and they did not see them as often as they would have liked, but did note that when appointments were made, that these were extremely helpful.

> *"If I want to speak to my care manager, they are pretty good but they have lots of people to see, but they are good when I can see them, we have good services" (P6)*
>
> *"I haven't got a social worker I have to phone the duty team" (P4)*
>
> *"Years ago we had our own social worker that went to MASH, it was easier then, before they moved them" (P6)*
>
> *"The team used to all be based at the same place so it was easier to get access to what we needed, but now it's spread out and we don't have a named social worker so it's not as easy" (P6)*

This group explained that they are invited to attend meetings in their capacity as a service user voice group. Whilst this was recognised as progress, they did comment that the meetings are not always accessible to them in terms of travel and accessibility to the venue, accessing technology for online meetings, the materials and resources that used at meetings and how they are verbally communicated. The group recognised that sometimes the invitations to meetings can feel like a 'tick box exercise' and are not always inclusive, and that more thought and planning was needed to fully include them in these meetings.

> *"Sometimes we are listened to, sometimes it's not accessible, we get invited but meetings aren't always accessible or inclusive" (P4)*

The parents engaging in the research acknowledged that it can be difficult to navigate the social services system and how this was inaccessible for them to begin with (and sometimes throughout), recognising that key support is needed from professionals to help them understand the process and navigate the system. They explained that even with support from professionals and from other parents at the peer support group, that they can still come up against roadblocks, highlighting the ongoing barriers. This parent questioned *"if I can come up against road blocks, with support, what about the people who haven't got that support" (P3).* Parents highlighted how previously they had felt alone and had to seek out support themselves.

> *"I was in a in a domestic violent relationship. But I literally I had to deal with it on my own. I presented black and blue from being beaten, and I begged her for help. They never sought to put me and my children in a safe environment away from it. I had to seek support from women's aid and find the support myself because they were never offered to me. I did not know about women's*

> *aid until I lost my children. I didn't realise that me and my children could go in a refuge, that social worker, I never give me that opportunity" (P2)*
>
> *"I basically had to find the support and go out and find it myself. But in my current placement now, the involvement that I've had with social services, they have been absolutely amazing" (P2)*

The parents also explained how childcare can be a barrier when engaging with support and attending meetings and appointments. The advocacy group had a crèche available, meaning parents with younger children could still attend and family events were planned across the summer while children were not in school so families could attend together, and parents did not need to take a break from the group during this time. One parent raised crèche facilities as an important factor for reducing barriers and enabling them to engage with support, they also noted that while attending the family support, and having access to that childcare, meant that they had some time for themselves. One of the parents who did not have their children living in their care explained that they thought family events would be upsetting and challenging, but how they had found it comforting to spend time with families engaging in fun activities.

> *"I like the crèche with the kids, it was lovely. It is really hard, with kids and just getting a minute like, to just be you" (P8)*
>
> *"In the beginning, I did distance myself away from friends with children because it was hard for me. I did distance myself and they totally understood that. But I love being around our groups families" (P1)*

4.2. Communication

4.2.1. Clear communication and information

The individuals with learning disabilities described how often information from services can be hard to understand. Resources and documents were often technical, long and used language that was not accessible, meaning they could not follow the information. These individuals explained how through the advocacy group they had been able to feed this information back to some organisations who had made changes and adaptations by simplifying some of their resources and outputs using less technical language and incorporating pictures. They explained that these changes would not have happened without their group challenging the format of documents and how written information was shared with service users with learning disabilities and additional learning needs.

> *"We ask that they make information easier to read and they have, make it easier and use pictures. It wouldn't happened without the group, they use big words and long reports and big documents. That would help with the safeguarding board" (P6)*
>
> *"Pictures are important, some people don't understand without pictures" (P5)*

All individuals participating in the research described how this also related to verbal communication of information too, explaining how the social services system was difficult to navigate with a lot of information and processes that they did not understand. Examples were also given for not feeling understood, and one service explained how their learning disability group were often invited to represent their group at meetings but felt that they were not listened to because others did not understand them. Another individual described not being understood at GP appointments, which increased the barriers for them seeking support. They explained that the group had provided training to healthcare and social care professionals to try to break down these barriers.

> *"A lot of them don't understand what we say anyway. They should listen to us but they don't" (P7)*
>
> *"When you go the doctors, you don't understand what they are saying, we are getting there with the training, but not everyone gets it" (P7)*

The two young people participating in the research described the materials that were given to them as easy to understand, they stressed the importance of this and how their engagement with services had been more supportive and relaxed than they had anticipated. One young person reflected on the supportive nature of the community led work. They explained that the work had focused on their future and moving forward, and learning from past behaviour rather than focusing on their past and specific incidents, which may have led them to becoming engaged with the service. Both young people felt comfortable asking questions or for clarification on anything that they did not understand. Neither thought that more could be done to make things easier for them to understand, but one young person did believe that more support available on online and through websites would help young people ask for help and engage with support.

> *"I thought it would be all formal and stuff, but it's more chilled, it doesn't feel weird, yes I feel more comfortable talking" (YP1)*
>
> *"Yes really clearly and even if I don't understand something they will actually make it so much clearer and go into more detail about it so I actually know about it" (YP1)*
>
> *"More support on websites and online would make it easier for young people to get help" (YP2)*

4.2.2. Inclusion in decision making and being kept informed

Service users with experience of adults and children's' social services gave examples of not being included in the decisions that were made about their and their families care. Parents gave examples of important meetings between professionals within children's services that were held about the care of their children, which went ahead without them being present. One parent explained that 'big' decisions were made about them and their family without explaining the process and without asking for their input. This parent also talked about not being kept informed of updates about their children residing in foster care.

> *"My personal experience is horrendous. That's the only word I could use, horrendous and painful. Meetings that they'd had behind my back, things that I was not involved in, I was never informed of anything that was happening with my children. I was never offered any support, and never offered any support to deal with the loss of my children" (P2)*
>
> *"[Social worker] was having meetings and found foster parents for my children without me even knowing about it. Then literally just came to me with forms and told me to sign them and if I didn't they would take them anyway. The trauma that's been left behind for my children, it's sickening. We were never given a chance. My current social worker keeps me informed of everything, they will update me when things happen" (P2)*
>
> *"The social worker still to this day does not really update me on significant things that happen in my children's lives. You know, for instance, my child in foster care was in a car crash, and I didn't know about that until two months later" (P2)*

The service users also gave examples of not feeling listened to, when they did try to ask a question or voice an option. One parent also thought her children had also not been heard in this situation too. Another parent gave an example of not being able to have a voice in court or during the court process. Another parent explained that they would like an advocate or a peer to attend Public Law Outline (PLO) meetings with them; these meetings are held within Local Authorities when they are considering the court process for a care or supervision order. They explained that they had left the meeting not really understanding the situation and feeling very distressed. However, they did note that if a peer and fellow parent from a service user led group was to attend, this would need to be someone who had not recently been through the experience themselves as this could be triggering, highlighting that they would need the relevant training and supervision type support.

> *"If a person wants to get their voice out there, they can't because they are stuck" (P5)*
>
> *"Family court is that's closed to the public. The social worker can go in there and say I believe this, and I believe that. The judge can make a judgment on that without any actual evidence from parents. So it's really hard" (P1)*

Individuals with learning disabilities also gave examples of MASH meetings, strategy meetings and meetings about their supported living accommodation that they were not invited to. They reported that they would like to be present at meetings were important decisions about their lives are discussed, and also raised that their parents and/or carers should also be invited to advocate for them. The group also noted that sometimes they receive feedback from meetings, but it depended on which professionals were attending and how some were better at feeding information back than others.

> *"If you are moving to a new house, you should be there and be part of that meeting. You should know what they do at that house and what's going on in that building and you should be involved. Care workers should get us involved in those meetings so we know what's happening" (P7)*

> *“We would like to be there but they don’t invite us to the meetings. We should be involved in every meeting. That’s the feedback we give. We speak to professionals and we challenge them” (P5)*

> *“They have a strategy meeting, but I am not involved in that, we don’t get invited. There is a copy of the review for our file. I would like to go” (P6)*

> *“Sometimes we get information fed back from strategy meetings but it depends who is on shift really. The people from the supported living feed that back” (P5)*

They also gave examples of when they had provided feedback at local, regional and national meetings on behalf of their service user voice group, explaining that their feedback was not always taken on board and they were unsure if they were heard. One member of the group gave an example of how different areas in Wales are more open to listening to their suggestions, compared to others.

The two young people participating in this research agreed that their youth workers kept them well informed about their support, engaging them in conversations about decision making, and that they felt comfortable asking questions and giving feedback.

> *“I feel comfortable giving feedback. Yes I do feel listened to” (YP2)*

4.4.3. Trusted relationships

All of the individuals participating in this research thought that developing a trusted relationship with professionals was key to effective support. One parent provided an example where their relationship with their social worker was described as poor, which created barriers for engaging in support and had resulted in them not feeling believed or supported.

> *“I think it’s down to the social worker, because my first experience was that they was not really all in it for me, to work with me in a way where they should have been in their role. The social worker that I have now, knows the history, they’ve gone through the paperwork. So my personal opinion is down to the social worker, it depends on who you get. I've been very lucky this time, and I'm very grateful” (P2)*

> *“Just being honest and straightforward. Trust needs to be earned by being truthful. It just simplifies things” (P3)*

This parent then went on to compare this to a positive relationship with another social worker and the factors that made this different to the first experience. Another parent explained that a positive second experience working with social care had helped them understand some of the reasons they had found difficult to understand first time round, acknowledging that this had ‘totally’ changed their opinion of children’s services.

> *“I was really worried about working with them (children services). It’s all down to the people. The difference is mind blowing. With my current social worker, it’s very open and we have a good*

> *professional relationship. I don't try to be their best friend and they don't try to be my best friend but we both have the same interest and that's my child. The previous one wasn't interested in keeping us together, they were more interested in taking them away" (P2)*

> *"I just thought it was going to be something like social services, you know, and not that there's anything wrong with social services. My views are completely changed towards them as well. I didn't expect to get the amount of help that I have got, definitely" (P8)*

> *"I had like a bad view of social services. My kids went into care so I was very against 'like Oh my God, you know, they just take your kids'. When I actually sat down and had counselling and I've spoke about my past and that, you know, my kids didn't get taken for nothing, they got taken for the reason and I get that now. I'd say this to people now with like I never thought I would, but social services, they're not there to just take your kids you know it's the last thing that they want to do" (P8)*

Effective support included having a trusted, open and honest relationship with clear lines of communication, being kept informed and where possible, included within decisions that were made. This resulted in the parent feeling safe, comfortable, believed and that someone 'had their back', was 'on their side' and had faith in them. One parent stressed the importance of having someone there to talk to who understood them. Service users agreed that a safe space with non-judgmental professionals was needed, ensuring they felt safe and comfortable to ask questions or disclose safeguarding concerns. Continuity of care was also raised as important in supporting individuals to feel secure. The parents had been through the social care system explained that it is important that they feel like they are being given a second chance, that they are believed and taken seriously, and how they need to have a fully supportive relationship with services in order to do this.

> *"But it's down to the parents just as much as it is social workers as well. You know, you've got to be able to be open and honest with social workers just as much as they are with you" (P2)*

> *"So for me, it's been the emotional support has just been amazing" (P8)*

> *"I could just come in and just talk to someone" (P8)*

> *"She knows the kids and she's obviously seen us blossom, from hitting rock bottom to us blossoming as a family. It's amazing" (P8)*

One parent described how the social worker had carried out background research and understood their case, their history and the barriers that had previously faced with children's services. The parent described how this had reduced the barriers and apprehension they faced at re-engaging with social services support. They also described the support as consistent, acknowledging this was not always the case, highlighting the negative impact of inconsistent support or mixed messages. Service users also agreed that there needs to be good communication between services that are providing a multi-agency response, to ensure they have a consistent approach and professionals have awareness of individuals situations, so additional needs can be supported efficiently and effectively.

> *"They understood how I felt about how I how, how I wanted to be treated this time around, and that I was more consciously aware of what to expect from the social worker, whereas before I was literally in the dark, and never been involved with them before. Whereas this time, I have a lot of knowledge as into what to expect, how things work and how to work with them in a in a respectful and open and honest way. And that's exactly what I have now" (P2)*

> *"I work with some amazing people at the moment, the support is consistent. I have a great understanding of everything that's going on. Whereas, you know, in my past experience, there was not an open and honest relationship with me and the social worker, there was no consistency" (P2)*

All of the adults participating in the research believed that training for professionals was essential and could be improved. The service user group for adults with learning disabilities provided training for student social workers and nurses and other healthcare workers. It was agreed that professionals need more awareness around accessibility, both in terms of attending services and in how information is communicated in both written and verbal format. One of the parents also commented on the responsibility for social workers when they are involved in decisions about the future of families and if children can remain in the care of their parents, and suggested that more support and supervision should be provided in these situations.

> *"I provide training to student nurses and doctors and student social workers" (P6)*

> *"I think training for the social workers and to have groups in all areas" (P2)*

One young person described how they had built a relationship with their youth worker. They explained that they found it helpful speaking with their youth worker because the workers spoke to them in a relaxed way and explained everything clearly to them. The young person felt that they could have an open and honest conversation how they communicated with one another had made a difference in how they had engaged with the service. The community project also provided structure for the young person, with them explaining that they knew that they had that designated time with the worker at the same time each week. This also provided reassurance that they could talk through any worries they had experienced during the week.

> *"I feel like I can actually talk about how I feel, don't need to go into detail about everything, I can just say how I feel, as it is, and I actually learn about the things that are going on around me, I've found about stuff that I didn't know was going on around me" (YP1)*

> *"I feel like I can actually talk about how I feel, don't need to go into detail about everything, I can just say how I feel, as it is, and I actually learn about the things that are going on around me, I've found about stuff that I didn't know was going on around me" (YP1)*

> *"I think also because I know that they are always going to be here on a Thursday at the same time, that helps as well. I like the routine, it gives me something to do and also I know that if I am worried about something that day or even another day beforehand, that I can talk to them about it to them then" (YP1)*

The clear communication in a safe and non-judgmental space and trusted relationship between the worker and young person meant that the young person felt comfortable to speak up and felt heard during the sessions. They explained that they were asked for their opinion, and how the workers listened and that they now felt that their opinion and feedback was taken on board. They stressed the importance of having services available for young people where they are made to feel comfortable and can express how they feel and know that the will be listened to.

> *"No (nothing could be done different), I just feel like I am always being heard like all the time, and every session I always end up with a new frame of mind and I am always able to see or thinking about what I have learned that day" (YP1)*
>
> *"Important because if I didn't have somewhere to speak about how I felt I'd probably just be keeping everything to myself and it wouldn't be good" (YP1)*

4.3. Service user voice groups

As discussed, the individuals participating in this research to date, were all engaged in service user led groups which focused on providing service users with a voice at a local, regional and national level within Wales. Whilst the groups were service user led, professionals did also attend and support the groups. For the parent advocacy group, this included social workers, support workers, midwives and health visitors. This group was established and mainly attended by professionals to begin with, until parents started to take over the leadership. The service users reported that professionals with key expertise gave up their free time to attend and provide input at the parent meetings. This included being there to hear the service users' voice and feeding this back to their colleagues to try to inform change, and to also offer their services, advice and support. This provided a safe space for parents to get to know professionals in another setting, to help them understand the process in a more supportive and holistic environment. Some professionals provided transport for some service users to travel to the venues for the parents' café.

> *"We are a good unit, a good team. There are professionals giving their own free time. It's expanded and it's important to get the parents to come, it's a work in progress with good results" (P3)*
>
> *"There's a lot of professionals that come to the group to help and speak with us. They listen and they take it all in. The safeguarding team came to speak to the parents. We need to take it by both hands and run with it to make a change and make a difference. I won't be able to change anything that have been, but there are people out there now that are starting to listen" (P2)*

4.3.1. Peer support

The peer support element was seen as key part of the service user voice groups. The individuals taking part in this research explained how the advocacy groups had provided them with an opportunity to come together with people in similar situations who understood how they felt. They had described feeling isolated and not knowing anyone in a similar situation before, and how meeting with others had provided them with both reassurance and support.

> *"So people that have been through that thing, they know I understand them. It's all about connection and giving each other a voice and like some of them come in and they are so nervous. You'll always get something out of it. It's about the protective factors and all different factors that we do. Once they start hearing your story, they're more likely to start sharing themselves" (P1)*

The parents' group allowed parents to share their experiences of children's services, both positive and negative. This reassured them that they were not alone, and also provided them with advice and information regarding different situations. They felt this reduced stigma, shame and the fear of being judged, which they had experienced previously. This was seen as invaluable, with parents explaining that the process and system was hard to understand, and how the knowledge from the group had eased this. The support had also provided parents with reassurance around the parenting skills, one of the parents described feeling like they were 'a rubbish parent' and how the support from the group had helped them to identify skills and recognise the positives. The groups were also highlighted as confidential, meaning parents felt they had a safe space to talk about how they were feeling, which was seen as especially important with having professionals in attendance too.

> *"Before (the parent group), I had never met another mother or father that had been through similar experiences, I thought I was the only one. It gives us that chance to point out all the wrongdoings. I can't go back and change anything that happened to me and my children but if I can make a difference now, then that's good enough for me" (P2)*

> *"Some of us have had better experiences. Some of us have had good experience with social services. Some of us haven't. But we've all been through the same kind of thing, the same processes. And then you just realising that you're not alone" (P1)*

> *"At the beginning some parents were nervous. But there's a lovely mood at the group, there's music playing, we do some activities, and you get to speak one to one with different people. You get to have table conversations, you all choose what to talk about and you all share your experiences. You don't have to worry about what's being said, the people there are discreet" (P2)*

The parents found that the group allowed them to support one another, and a WhatsApp group was established for the parents at one of the groups. Parents talked about developing friendships with other parents at the group, exchanging telephone numbers and keeping in touch outside of the group. Both service user groups believed that the groups had a strong sense of community and gave people a sense of belonging.

> *"We don't just offer support within the group, you're more than welcome to exchange numbers and if you connect with that person, then you can take that relationship outside of the group, and you can support each other outside as well. We've all set up a little WhatsApp group and we chat, literally it is just that extended support, you know, I've made a lot of new friends, which is really lovely" (P2)*

> *"As somebody that's been through the system, we have to make sure that we're ready. I could go in there and be a little bit triggered, but then we have support. We support each other so that parents support each other. So if we're feeling a little bit low, we message in the group. We uplift the parents that are coming to our group, because if we can't lift up each other, we're not going be able to lift up anyone else. So as a group, that's what we do with each other" (P1)*

4.3.2. Having an opportunity to have voice heard

The service user groups provided the individuals with a platform to have a voice and to be heard. The groups explained that they are now able to challenge professionals when they may not have had the confidence or platform to do so in the past. It gave them the confidence, space and support to advocate for themselves. One service user described it as 'uplifting'. The parents reflected back on some their negative experiences with services and explained that they did not have a voice beforehand, and how this had changed since engaging with the advocacy group.

> *"It's really nice to see them all come together and show each other support to give to give the mums and dads, you know, a voice really, even though you've had some bad experiences, we're all here to sort of help each other get through those. It's pretty amazing to be honest" (P2)*
>
> *"I really feel as though it's the first time in years that people are actually listening to me. I think it is the greatest opportunity that we have had" (P2)*
>
> *"I go to groups and meetings and tell them what we would like to try, to make sure our voice gets heard and make changes" (P4)*
>
> *"I want to be heard, so I I'm looking forward to be able to have that for others" (P3)*
>
> *"It's really about uplifting parents, it's about uplifting each other and giving us a voice" (P1)*

Being part of the groups enabled them to feel heard and witness some changes that were made because of their feedback. This included being heard locally at meetings, and also at a regional and all Wales national level too. The group for people with learning disabilities had created a change in resources to make them more accessible and had ensured they are invited to share their views at such meetings. They did explain though that there is a way to go and that they don't always feel listened to by professionals. They argued that that these changes would not have been seen, progress would not be made and that their voice would not be heard without active groups such as this, and how these groups needed to be expanded to other areas and for different groups of people with different needs. The service users also saw participating in this research as an important way to feel included and be heard.

> *"If I had had something like this when I was at my lowest. Once you get there and you start getting involved, you want to come back and it's brilliant to see others grow and it's about uplifting each other and giving each other a voice, we'll start to challenge things for you in the beginning, but by the end, you're going to challenge things for yourself. We have a WhatsApp group just for anyone struggling with anything" (P1)*

> *"We have all came together for one purpose, and we're all working together to make sure that that message is spread nationwide to different parts of Wales. Let's expand it and get all parents involved. I am very proud to be part of it" (P2)*

Whilst the two young people participating in the research were engaged in one-to-one support rather than a peer led group, they did acknowledged the importance of feeling heard and seeing their feedback was taken on board. One young person explained that it is important to be asked for feedback so the service know that they are helping, but also for the young person to know they are helping the service to support other young people.

> *"They take my opinion into account, always. There are places where I might have a say but I didn't really feel like I was getting heard but now I am actually getting listened to" (YP1)*
>
> *"It is important to give feedback to know that you are helping" (YP2)*

4.4. Impacts of effective support

The protective factors highlighted through this research were seen to have a significant impact on positive outcomes for service users. These key aspects discussed above included clear verbal and written communication, open and honest relationships, and support with accessibility. Engaging in service user voice groups had provided opportunities to build and strengthen support networks and this had in turn enabled service users to better engage with support. These service users agreed that these changes would not have occurred without access to the safeguarding support they had engaged with.

4.4.1. Improved knowledge and awareness

Limited knowledge and understanding of the safeguarding processes was highlighted earlier as a barrier for individuals trying to engage with support and navigate the safeguarding system. Establishing supportive relationships with staff, having clear lines of communication and support from peer led groups were seen as key factors that had significantly improved their knowledge and understanding. This led to improved relationships described below and meant they could approach meetings and engage with professionals in a more productive way. One parent described meetings with children's services as 'emotionally charged' given that nature of these meetings and explained that in the past they had previously become upset and not been able to communicate how they were feeling in the way that they wanted to and in a way that was understood by the professionals. They explained how this had now changed with increased knowledge and support. That understanding and awareness of the process had increased their confidence and independence, and enabled them to challenge themselves and professionals in an appropriate way. Another parent explained that the increased knowledge and understanding of their situation had helped them make peace and become accepting of the situation. One parent also reported improved feeling listened to at their child's school, after engaging in supporting and communicating more effectively with the school. The training, including trauma awareness training and staff training, provided by and for service users and professionals were seen as key to enabling the safeguarding system to become more trauma informed and holistic.

> *"Yes it would have helped (when first involved with children's services) because a lot of things got crossed and mixed up in the communication with the professionals. Understanding they are not the enemy and they're not trying to take your kids away. I'm automatically on the defensive because I'm trying to keep my family together and things are so emotional and can boil over quite quickly, but I can handle myself pretty well now… I am seeing the benefits now" (P3)*
>
> *"Essentially, we should be grateful, you know, and I am. I'm grateful that they are looking after my children. It can be a bit upsetting that your daughter calls a foster carer, dad, but it is understandable and he facilitates my relationship with her" (P1)*
>
> *"It's definitely allowed me to be a little bit more constructive and professional and calmer. I can take a deep breath and evaluate the situation. I know how the system works" (P3)*
>
> *"It's the family centre who got me the meetings with the school. Do you know where I felt like I was being listened to by the school? That wouldn't have happened without the family centre" (P8)*

Both the young people agreed that they had improved knowledge which has supported them to make better decisions, which the saw as something that would help them in the future too. One of the young people reported in having increased confidence in their decision making skills through the information they had learnt from their support. They felt they had the skills to recognise a negative situation or when a situation was becoming out of control, and then the confidence to remove themselves from the situation. They agreed that the support had stopped them getting into situations that they had previously been involved in which had led to their referral for support.

> *"I am more able to actually connect with people better now, I am able to talk to people better. Also I am actually able to see when something bad is going to happen, it's easier for me to say to someone that I am going home or I don't like this I am going to remove myself from the situation. It's easier for me to recognise risks in situations. (Before) I either wouldn't have been able to see the bad situations or I'd probably see it but wouldn't be able to speak up and end up just walking into it" (YP1)*
>
> *"I feel way more confident now in myself and doing the right thing now" (YP1)*
>
> *"Making better decisions outside of school. Yes, it is important. Because when I am older, I may fall into trouble" (YP2)*

4.4.2. Improved wellbeing

The safeguarding support had led to increased safety and reduced risk for the individuals participating in this research. Improvements in mental wellbeing, including increased confidence and self-esteem were reported. Having a voice and feeling heard was seen as an important factor in increasing confidence and empowering the service users. one parent explained how the support they had engaged with had 'saved' their family.

> *"If I would have had the support from a network of parents that I have now, back then, I would have been in a very different situation and in a very different place with my mental health as well" (P2)*

> *"I always say I came to the centre like at the darkest place in my life. For me and my family it literally saved our lives it did. Honestly, it did. It saved us as a family, completely changed our lives it has... I think it will always hold a very, very special place in my heart" (P8)*

Being involved in the planning of the groups had empowered the members, and this was further increased when witnessing increased confidence for others in the group. One parent reported that another parent had described them as inspiring and how much that head meant to them and how it had spurred them on to keep going with engaging with support and helping others. This had led to increased motivation to engage with wider aspects of support to help them as individuals, their families and other families.

> *"I'm so driven to try and get this up and running. We come across so many nervous parents, they barely say a word and then they leave with more confidence" (P3)*

> *"My confidence has gone up. I have hosted a few meetings and I really enjoy it. I was nervous the first time. I said, right at the very beginning that I will do whatever it takes for my child. And I will do whatever it takes not to have those same bad experiences. I'm just very lucky to be working with people that have the same interests as me" (P2)*

> *"We help even just by listening to their stories. It's a part of my life and of course it helps my confidence knowing I am helping them, they are helping me too. A parent said I inspired them and that was so nice to hear" (P3)*

Three parents who previously struggled with alcohol and drug use, had engaged with support and were now abstinent and in recovery, something they believed had supported their wider recovery from their past experiences. They both agreed that that the peer support from the service user group had supported their ongoing recovery and how this would continue to be a focus for them. In terms of wider support, a number of the service users also acknowledged that they had been able to access wider support they mot otherwise have had access to without engaging in the safeguarding support.

> *"They have given me a drug rehabilitation, I came off drugs myself, but then social services gave me a drugs counsellor. I've been 21 month abstinent, so I'm in stable remission" (P2)*

4.4.3. Improved relationships

Improved relationships were reported across a number of different relationships, including with professionals, with family members and with friends established through engaging with service user voice groups. Through professionals listening to service users and through feedback being taken on board, service users agreed that this had helped to reduce barriers and improve relationships with professionals. This was linked to improvements in knowledge and awareness for both service users and professionals.

> *“There's always something challenging but obviously now I have noticed the difference in the communication" (P3)*

The parents reported feeling reassured and having increased confidence in their parenting skills. One parent had lost full time care of their children previously, this time working with children services and addressing additional needs, their child had remained in their care. Another parent discussed the positive relationships they now had with the foster carers who were supporting their children. One of the parents also discussed how the support they had received, including engaging with a parenting course had improve their knowledge around the needs of their children, which had supported them to put additional boundaries in place and also make more time to talk to and listen to their children.

> *“With the group we focus on deep self-reflection, building connections, building confidence, knowledge” (P3)*

> *“It’s like listening to the kids and like realising that, like they're little humans as well, you know? They have feelings and stuff” (P8)*

All of the service users reiterated the positive impacts of the peer support groups and who this had created and increased their support and social networks. A stakeholder also commented that through young people participating in a research project, the key outcome was the friendships that the young people built with others participating in the research group, highlighting the benefit of service user voice through group work and the supportive relationships that can be built from this.

> *“When I first got involved, they helped me a lot. Just coming to terms with everything. I am not on my own anymore, it feels like one big family. It’s lovely to see mums and dads and families getting involved. Listening to them, people with different experiences and different outlooks and getting different perspectives” (P2)*

For the young person engaged in one-to-one support, they reported that because they had felt comfortable speaking with their youth worker, this had led to improved communication skills, both inside and outside of the support. They reported that the communication had improved with their family and friends and that they now felt more comfortable opening up, speaking about how they were feeling and asking for help when needed. This was seen as an important change for them, explaining that in the past they would have not spoken about their worries or feelings, which resulted in situations escalating out of their control. The increased confidence and improved communication skills meant that the young person had gone onto make new friends and had developed a more positive friendship group.

> *"It has helped me speak to not just them, but the people around me as well. I am able to ask for help easier. Usually I would just do everything on my own and without the advice and help it actually it got to the point where I felt it was out of my control. But now I ask for help the second that I feel like I can't do it on my own" (YP1)*

> *"It has helped me speak to not just them, but the people around me as well. I talk to my friends and my family… I am able to ask for help easier. Usually I would just do everything on my own and without the advice and help it actually it got to the point where I felt it was out of my control. But now I ask for help the second that I feel like I can't do it on my own" (YP1)*

> *"I talk to new people better as well, I am able to communicate, make new friends. Like the other week I made a new friendship group and everything and that's because now I am able to speak more freely about how I feel" (YP1)*

4.4.4. Sustainability of outcomes

The parents taking part in this research were positive about the changes that had occurred in their lives and were positive about maintaining these changes. Those who had challenging and negative times in their lives reflected on this and discussed how they had learnt from this. The service users were glad of the opportunity to share their experiences in a service user forum, explaining that *"if one family can benefit from my experiences, then it has been worth it" (P2)*. The individuals who had witnessed changes within services based on their feedback through the service user group forums were positive about these steps, however, as discussed did recognise that more work is needed and how this can only be done through providing service users with a voice and to listen and take that feedback on board.

> *"If I can help one parent, I will. If I can help one other parent and not go through what I've been through" (P1)*

> *"There should be more groups like this having a say, in every country" (P4)*

The individuals who participated in this research described feeling reassured that they had supportive relationships with their peers and some of the professionals they now work with, meaning that they had a support network in place if and when they needed any ongoing and further support. They discussed the importance of their service user voice groups and how it was important for them to keep the momentum, continue to develop the group and reach other adults and parents who could benefit from joining. Expanding the groups to other parts of Wales and for different needs and populations was seen as key, highlighting the importance of funding for sustainability of groups.

> *“The social services are amazing, given parents and family the support that's needed to stay together. With my child, we've got the support there, and it's ongoing. We are due to go home next month now to our own place, which is absolutely fantastic, but the support is still there still open to us if we need it” (P2)*

> *“We have people from the Welsh Government who are going to be linking in. It's growing. We are gaining momentum so, and it’s so rewarding. The next step is just continuing to get the voice out there about the group and what it does and get funding" (P3)*

> *“I tell people about the family centre, just because obviously it helped me so much and I know that there's help. Sometimes, like if like if there is someone at the school and if they're upset, I'll bring them here. If I was getting paid Commission, I’d be a millionaire!” (P8)*

4.5. Including service user voice in research

Discussions with key stakeholder during earlier work streams for this research and during the scoping exercise to identify areas for recruitment for this aspect of the research, highlighted the importance of capturing service user voice. This was seen as important for internal in-service monitoring and evaluation and external research to ensure service users are asked for feedback and have a voice in shaping the services they use. However, when engaging with organisations across different areas of Wales for recruitment for service users to participate in this research, a number of potential issues were flagged.

One of the organisations explained that they work with extremely vulnerable young people and therefore it is not always appropriate for them to engage in external research. They thought it could be triggering for the young people who were currently in crisis or particularly vulnerable. Whilst ethically, research projects would not engage service users where it is deemed unsafe for them to take part, this does highlight an issue for organisations wanting to ensure that their most vulnerable service users are provided with an opportunity to have a voice in their care, and don’t become harder to reach.

One organisation also explained that they are often inundated with requests for their service users to participate in research studies, highlighting the risk of groups of young people and other service users being over exposed and feeling over researched or ‘used’. The risk of duplication between separate research projects was also flagged, which stakeholders suggesting that this could result in service users feeling that their time was wasted.

Whilst ethical research should not expose participants to harm and research questions should not focus on detailing traumatic experiences, there is still a potential risk of participants reflecting on negative experiences during and following taking part in research interviews. This was highlighted as a significant risk for service users who are asked to partake in numerous different research projects and may be at more risk of being re-traumatised.

It was acknowledged that service users need to benefit in some way from taking part in research, as well as their contribution adding to key findings of evidence based research. This highlighted the importance of service users having an opportunity to have a voice and share their opinions, feeling empowered by taking part, and enjoying the experience. This also included receiving feedback about how their involvement contributed to the research and recommendations developed for services or care improvement. This was also noted as important for co-production and organisations asking service users to participate in service user forums and to collaborate on the development of service provision and resources, and the need for service users to see the results of their engagement.

The stakeholders also acknowledged that when asking service users for feedback, sometimes it is not always clear which aspect of the support they are talking about. For example, for service users involved with multiple professionals and organisations, they may have had a positive or negative experience with one aspect of the support, but may struggle to differentiate between the different services involved. The stakeholders also explained that when a safeguarding decision is made, it might be the right decision to keep that individual or family safe, but it may not be a decision that the individual or family want or is happy with, and how the context is always important when asking for service user feedback.

Stakeholders involved in the scoping conversations for the service user recruitment, also highlighted an important consideration for organisations collecting feedback from their service users to develop case studies. They explained that consent is always gained for this information to be shared at the time of case study development and how this covers use of the case study information in the future. However, this stakeholder raised the issue that the individual may be happy for that information to be included at the time, but may not feel the same way in the future. An example was given of a young person consenting for their information to be used in a case study whilst they were part of a support service. This case study continued to be used and was used at an event some time later that the young person was attending, whilst the case study was anonymised, this young person recognised themselves and found it upsetting. The stakeholder reported that the young person was not aware the case study would be used, and that they were in a positive place had moved forward with their life and found it distressing to be reminded of their past experiences. This example highlighted the importance of asking for consent each time information may be shared within the public domain.

Whilst it was acknowledged that service users should have the opportunity to participate in research, it was noted that research projects need to be planned carefully to ensure that enough time is built in to allow researchers to map out and plan the study recruitment with professionals and sufficient time is considered to build trust with potential participants, especially those who face barriers to engaging with services and individuals who may struggle with communication.

One organisation also thought that research projects also need to incorporate aftercare. It would not be appropriate for an external researcher to provide direct support to participants and this would need to be separate and provided by a specialist support service. Research teams would usually engage the support services where they are recruiting participants from to act as gatekeepers to support the recruitment and facilitation of qualitative data collection, as well as provide safeguarding support should a disclosure be made or the participant need any specialist support or advice during or after participating in research. One stakeholder described how many services are working with reduced funding and at full capacity meaning they can provide the support they offer as a service, but are limited to provide additional support that could be involved in their services participating in research. This was particularly highlighted in terms of a service being asked to make contact with service users that had been closed from their service and the potential of needing to re-open cases and the impact of this on service resources.

While these additional considerations were highlighted, stakeholders did provide numerous examples of how their service users had engaged in research projects and service user led groups. Involving service users in the design and development of training and resources was seen as beneficial, as was involving service users in forums to share their experiences and opinions at a local, regional and national level. The organisations who could more readily link in with service users for research purposes, already had established service user led groups who were used to participating in forums where they had a voice at a local, regional and national level within Wales. The peer support element of these groups were seen as they key aspect for ongoing sustainable progress. Including parents in peer support and asking for their feedback was also sees as essential for services supporting children and young people.

Stakeholders stressed the importance of asking service users for feedback at the end of their support offer and how this enabled service users to come back for support in the future if they needed to. They reported that often service users will get back in touch at a later date, especially young people, to share good news stories or at significant points in their lives, but also if they are in crisis and have that service as the first point of call.

5. Key Findings and Recommendations

5.1. Recommendations for service delivery

- Service users can find the safeguarding system difficult to understand and navigate. It is important that they are provided with clear information and communication to ensure that support is accessible to them, specifically:
    - Materials, resources and written communication need to be appropriate, using clear and easy to understand language and format.
    - Verbal communication needs to open and transparent to ensure service users understand the processes in place.
    - Service users need a safe non-judgmental space to develop trusted relationships with key professionals working closely with them.
    - Where possible, a blended approach should continue to be used to allow service users to engage both, in person or online, depending on need.
    - Where possible, co-location should be considered to increase accessibility to services for additional needs.
    - Where possible, service users should be invited to meetings about their care, alongside a representative who can advocate for them. This may be a professional, family member, carer, friend or peer from a support group/service.
    - When meetings need to take place without service users present, the information should be fed back in a clear and accessible way.
- For organisations working together for a multi-agency response, strong partnership working is needed to ensure efficient and effective safeguarding, smooth transition of care, consistent messages and provision for wider support for additional needs.
- Training for professionals and service users is key to ensure a trauma informed approach is used when safeguarding adults, children and young people across Wales. The current training offer should continue with consideration of further investment to strengthen this training offer and opportunities for the workforce and service users.
- Findings from this research and the current growing evidence base highlights the importance of peer support:
    - Organisations should continue to develop and advocate for peer led networks to engage service users within their own support.
    - Service user voice groups need promotion, support and buy-in from organisations and representative across the partnership and operational and strategic level. Investment is needed to ensure the roll out and sustainability of such groups.

  - Service users groups should incorporate a community assed based approach to support their ongoing sustainability outside of structured support provision.

5.2. Recommendations for capturing service user voice

- It is important for service users to have representation at groups and meetings a local, regional and national level across Wales:
  - For organisations inviting service user voice, they should carefully consider the implications of this, including travel, accessibility to online and in person venues, accessible resources and materials.
  - When inviting service user feedback, organisations should ensure that all feedback is listened to and carefully addressed. Whilst it may not be possible to take all aspects of feedback on board and make changes – service users still need to know they have been heard and the reasons for implementing or not implementing change, is explained carefully to them.
- Service users should have an opportunity to have a voice and understand how their feedback contributes. When collecting service user voice for internal and external purposes (including co-production), there needs to be a benefit for services users to participate. Organisations and researchers should ensure that the results of the data collection are communicated clearly to service users, alongside recommendations and next steps so they can see how their input has contributed.
- Gatekeepers are essential for safeguarding participants during research. When engaging service users in research, gatekeepers should be included in any recruitment, facilitation and safeguarding planning, taking the organisations resources and capacity into account. This liaison with gatekeepers is essential to ensure individuals and groups are note over exposed to participating in research.
- When attempting to engage service users in research, sufficient time should be built in to allow the research team and gatekeepers to build trust with potential participants to ensure that they are comfortable, barriers are reduced and they feel safe to take part.
- Case studies provide an opportunity to capture service user voice and demonstrate distance travelled and impact for individuals and families. Consent for case study development is always gained at the time of writing. Organisations should consider gaining consent each time this information is used in a public domain, and the impact on resources for organisations contacting service users once cases are closed.

- Parents benefit from having a voice in shaping services that their children engage with. When capturing young people’s user voice, organisations should consider also incorporating the voice of the parents, separately to the young people.

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7. Anonymised case studies

Case study 1

There's me and my husband and four children. The last few years have been hell on earth. My step children came to live with us after being removed from their mother's care. We were in a 2 bedroom flat, there were 6 of us, and it was awful.

The support from my Family Worker and the work that she did was amazing, she helped me so much. For the first year of everything going on, it was just like a bomb going off. One of my children really struggled with it and he still is now. There was a lot of problems with my step children because of what they'd seen from their mum with alcohol abuse and drugs and different people coming around to the house, so we had to create a safety net for them. We had meetings left, right and centre with Social Workers, constantly, every day, we had Social Workers coming around checking on them. It was really hard. But my Family Worker helped a lot. She got us support with parenting, then we had workers for the children to have their one-to-one time, to go and have a chat. Our Family Worker used to come around before lockdown, and she's just always been there for me, as my emotional support. It's still a very big upheaval, and there's still a lot of work to be done. But now everything is finished, it's just me and my husband. I can still message my Family Worker if I've got any issues or anything, and she's always there for me.

With the situation with the housing, our Family Worker worked so hard to help us and then got us this house (with someone from Housing as well), which is a temporary house. Because it's still classed as overcrowded, so we have to keep looking. They want us to look at a private rental, but we can't afford private. There's nothing at the moment, so I've no idea what's happening, we're still in limbo. This is our home, we love this house.

One child has got a worker who support education, she did the transition from year 6 to year 7, so she rings and speaks to her every week. It's really complicated at the moment because she's in that stage of her life where she just doesn't want to tell us the truth or wants to cause trouble. She was fine when she first came to move with us. But it's like there's a switch gone off in her head, where it's like "hold on a minute, I've been taken off my mum, I want to go back to my mum, and I'm going to cause trouble". Another child was in trouble with the police because he was messing around on the streets. But now, he's settled really well and he loves being here. He had (a health problem) and his mental health was all over the place because it. I've done the parenting books and everything, and it's worked for some of the children. Some of it was like 'kind hands, kind words', be positive, don't think about the past, think about the future.

With Covid, the kids coped ok with being at home. One child does really struggle with it. They struggle for them was not being able to see their friends, especially because they've moved so far away from them as well. Whereas with their mum, they were allowed to just go out and play, go to their friends' houses. Here, they can't do that, there are rules in place. They struggle with that because they've never had any rules.

With my Family Worker, I'd say that she's become more of a friend than a worker now. Someone that I could just go "I need to rant", and knowing that she's still there, we connected and became so close to each other, and she's always there to support me. It's just a big step for her to say it's finished now. I mean I haven't texted her for weeks now, but knowing that if I've got a problem that I can text her and she will just respond and help me know what to do. I've got a group of friends, mums who go to the school, we've got a WhatsApp group, and if you've got any problems, we can text each other, we talk about the kids, we arrange play dates. It's nice, I've been talking to them more, getting my feelings out and talking about general life. So I have got an amazing support group. My family are only down the road. It's just when it's something to do with the kids, I'll ask my Family Worker what to do, and she'll tell me "you can do this". I've also got the Social Worker's number and I can always get in touch with her if anything happens.

I found the Zoom group really helpful and the parenting group I went to before lockdown was really useful. I enjoyed that because it was just me and no kids, and I got to talk about everything, they were really helpful and supported me. The Social Worker, I mean, everyone has been really helpful and supportive, they've all been there when we've needed them. But my Family Worker seems to have gone beyond.

Case study 2

I have 4 children, and another one on the way. I first moved here to come to a refuge. I was in a very bad domestic violence relationship. It was really bad and the children had gone into foster care, and I had won them back. I was surrounded by really bad people. We went on child protection last year because my partner was a drug user and alcoholic. Life was pretty bad.

It was social services who said about the family support and I came a few times. The courses are great, but it was for me the emotional support. I don't think I would be where I am now without it. I'm the first person at school if someone is upset to say "come on, let's go to the centre". I know that they will help us. There was a time when I was coming every day. I didn't want to be at home. I trusted them. I was just so sad all the time. I came here and they just listen. They just literally just sit and listen to me cry and after that I would go home and I would be alright. I would be ready for the day then.

I kind of distanced myself, and that is when things got really bad. I just thought I would go back for support, and I'm glad I did, really glad I did. I always trusted them. Everything else was going bad and I just broke down to my Family Worker and I said that I needed her help. It's embarrassing, asking for help, especially when I have children, but they got us through.

Because I did the domestic abuse programme and got confidence, I just stood there one day and I was like "I deserve better than this". Me and these children deserve better. He got removed and then he wasn't allowed to see the children unless it was supervised. My partner went to detox. He has been off drink now for a few months. As far as I know he's not using drugs, so things are going really good. There is something about my partner that keeps pulling me back - I know he is a good person and that's what annoys me. He never got the help that he needed. But now he has completely changed his life. It's like a success story, and even social services said that. I think it only started to go successfully when the family support got back involved, honestly. The only time things started getting better was when people were giving us a chance. My partner is working now, and he is allowed unsupervised contact with the children, and he has completely changed. I think for my partner, the Family Centre have helped him as well and they are there to speak to him. He has never had support before where people are actually rooting for him and aren't against him. He has a good relationship with the Family Workers and he is happy to sit there and talk to them. We are doing the parenting courses, both of us together.

The Family Centre has helped us with the food bank, they helped us get furniture for the children's bedrooms and going to appointments and things. I'm on universal credit now. Things like taking me to the doctors, and they took me to the hospital. I probably wouldn't have gone but they rang the hospital for me. They are like my best friends. They are like my parents, like a big sister, and they will tell you straight. I have respect for every single one of them. They said “you can do this”, and it was like “yes, I can, I can do it”. They boost your confidence. I’ve made friends with a few mums from the school.

The children love coming here. My eldest remembers being taken into care, so the trust with professionals is very low. They really open up with the Family Worker. They comes here with me now, and there was a time when they wouldn’t. The Family Workers will just sit there and they will talk to them. They won’t ask them questions, and they don’t nag at them. They sit there and laughs their head off with the Family Worker, it’s lovely.

I’ve had ongoing issues with the house, staying on top of it. We have been told that we could be off Child Protection soon if everything keeps going the way it is. I want to stay on top of it. And I don’t just want it to keep clean or keep the children happy just so we can get off Child Protection. I want it to be our life. I want it to be normal for us, and I do think with the help from the Family Centre I could definitely do that, and for the children. The children are so much happier, even the school have said. I think when mum is down, everyone is down aren’t they? You have to be like the rock of the family.

I suffer from anxiety quite bad and I’m the worst worrier ever. I know if I start getting sad I can just come here and talk to one of the girls and I will be fine. You have people that say they will be there for you but they are not there when you really need them. You have all been here from when I felt like just giving up, and when I thought I was going to lose everything. I couldn’t imagine life without the Family Centre being here.

Case study 3

There is just myself and my young child at home. I have other children. I am a single parent and I just get on with it really. My child is a handful, but they can be really great as well. Before they started nursery, we used to come to the Family Centre to the groups, which was to keep them occupied and interact with other children, and for my own sanity as well. They love nursery and goes there every afternoon now. They are interacting with other children, they have learnt a lot, in the sense of sharing, learning to do certain things. They have come a long way.

They have the cuppa and chat in the Family Centre so we tend to try and get here. When we come here, I love it because I get to talk to the other adults and my child is off doing what they need to do. It's that 10 minutes when I can re-charge my batteries. I have made some friends. I'm a bit of a loner, I don't really talk to a lot of people. I bring my child out to force myself, so they are interacting with all the children as well. When they were a newborn the groups were a lifeline for me, I didn't have a clue what I was doing again, so they were amazing.

I have a family worker doing one-to-one work with me; she is a saint. The amount of stuff that she has put up with, my whinging and whining and she has done so much for both of us. Sometimes if I don't understand stuff my Family Worker will break it down. I couldn't praise her enough. They have been so patient with me and my child. They are helping us with the speech therapy for my child.

I suffer with depression. Only recently it has declined because of the problems my son is displaying. But I speak to the staff here; to me that is massive because it keeps me off that depression road and I know how far that can go. I don't want to be going down that road and I don't want social services involved again. I just either ring them up or turn up and cry and say "I just don't know what to do" and they just let me cry it out, give me a cuppa and make me feel 100 times better just talking to someone, because I'm on my own. They took us to appointments and that was a massive weight off my shoulders. If it wasn't for them I would be still be in a one bed flat with mice. I have managed to get myself a really nice house with a garden so my child can start thriving now. They got me a cooker and I just cried because I have been using a little stove. It's the smallest thing but it was a massive deal for us. They have food parcels for us when I have been on my backside. Knowing the fact that they are there for me is massive. Who I used to be is somewhere I don't want to be. So if I just get it out of my head straight away, I'm alright. The fact that they listen to me and help me. It's hard being a single parent with a child that has extra needs.

It's hugely different this time around. With my other children there was no support, absolutely none. Whereas with my youngest, I have had support from day one, with the social worker, even though I had my own reservations, she was amazing. The old health visitor was amazing. If I have a bad day or night I go to the family centre. They just let me sit down and they let my cry and they make me a cup of tea. They took my child away for me for 10 minutes so I could sort my head out and I felt 100% better. My head was completely different to where it was when I walked in, and that to me was a huge difference, because it could have been a whole different story if I couldn't come up and talk to somebody. It's an amazing team.

Case study 4

We work with children, families and other key stakeholders to gain feedback, evaluate and influence service design for ourselves and others. Together with parents we have developed parents guides around CSE and two research projects/work have led to us developing an experts by experience group that help us to respond to asks from other agencies. They are our young person's partnership board and if able/happy to, will respond to the asks for voice and influence from other agencies across our partnership and more widely (for example, for Welsh Government, Home Office etc.). We are looking at developing this further so we can work out a way of reimbursing their time and expertise in a way that more accurately reflects the value of it, to continue responding to the many asks we and they get. We aim to include children in the design of training packages and where they are able to support them in delivering aspects of training with us. One project has some examples of how we and they achieved that, with young people travelling to other places to deliver training. Another project explored trauma-informed working, and the service user voice work found that children and young people want professionals to:

- Get to know me for me first
- Don't judge me please
- Believe me if I say I don't know why
- Listen to me, don't talk at me
- Trust takes time for me, explain what we will do
- Tell me about you too
- Can we just do nothing sometimes?
- Help me see a better time ahead for me

Annex A

Survey Questions from Norrie et al. (2015)

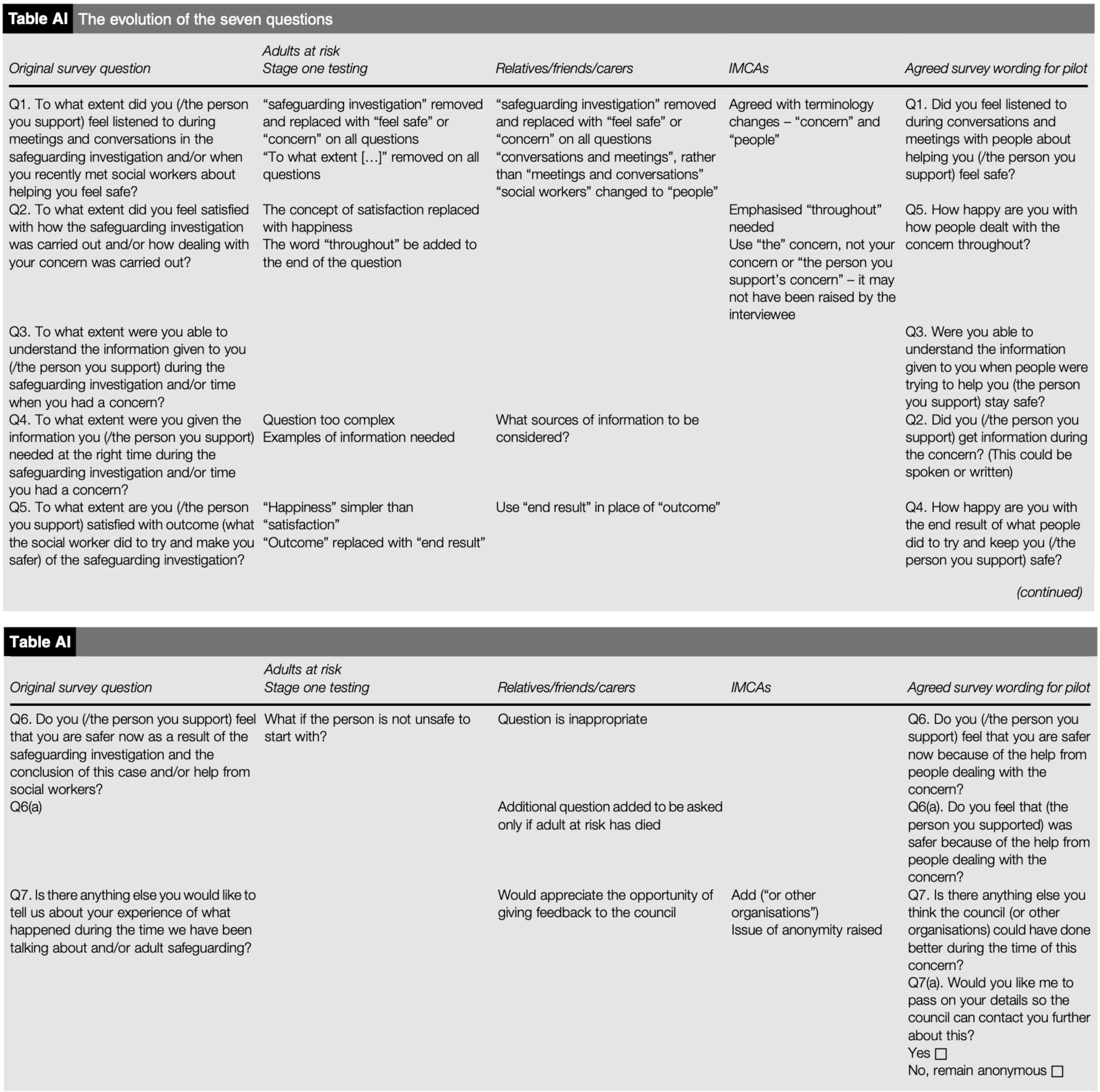
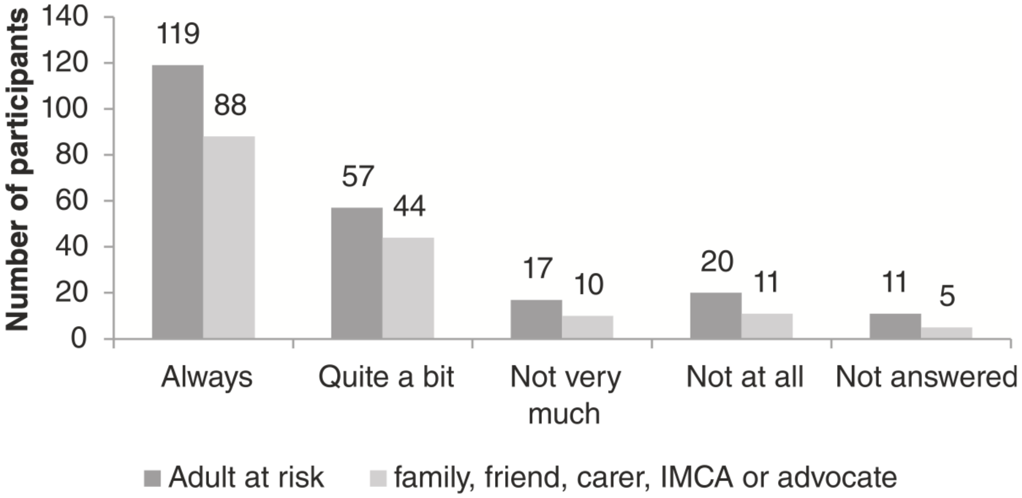


Table AI The evolution of the seven questions

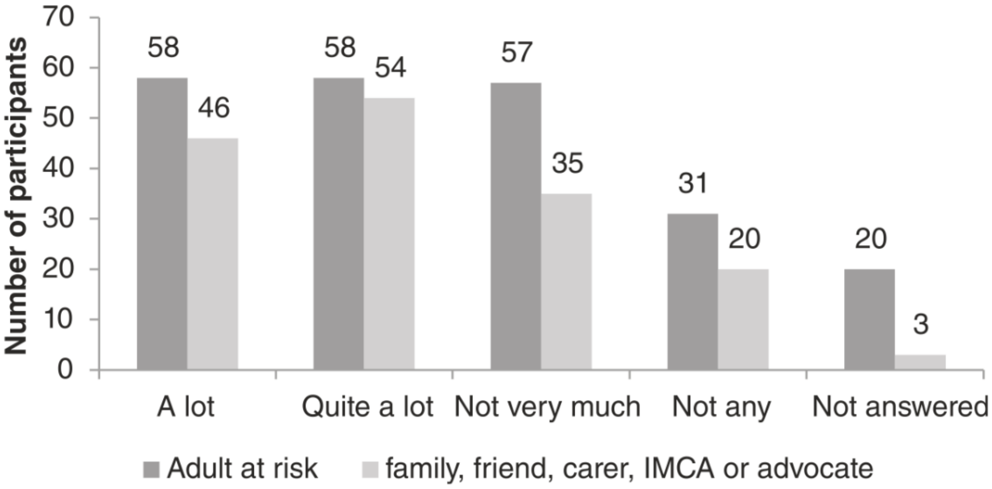
Original survey question	*Adults at risk Stage one testing*	*Relatives/friends/carers*	*IMCAs*	*Agreed survey wording for pilot*
Q1. To what extent did you (/the person you support) feel listened to during meetings and conversations in the safeguarding investigation and/or when you recently met social workers about helping you feel safe?	"safeguarding investigation" removed and replaced with "feel safe" or "concern" on all questions "To what extent […]" removed on all questions	"safeguarding investigation" removed and replaced with "feel safe" or "concern" on all questions "conversations and meetings", rather than "meetings and conversations" "social workers" changed to "people"	Agreed with terminology changes – "concern" and "people"	Q1. Did you feel listened to during conversations and meetings with people about helping you (/the person you support) feel safe?
Q2. To what extent did you feel satisfied with how the safeguarding investigation was carried out and/or how dealing with your concern was carried out?	The concept of satisfaction replaced with happiness The word "throughout" be added to the end of the question		Emphasised "throughout" needed Use "the" concern, not your concern or "the person you support's concern" – it may not have been raised by the interviewee	Q5. How happy are you with how people dealt with the concern throughout?
Q3. To what extent were you able to understand the information given to you (/the person you support) during the safeguarding investigation and/or time when you had a concern?				Q3. Were you able to understand the information given to you when people were trying to help you (the person you support) stay safe?
Q4. To what extent were you given the information you (/the person you support) needed at the right time during the safeguarding investigation and/or time you had a concern?	Question too complex Examples of information needed	What sources of information to be considered?		Q2. Did you (/the person you support) get information during the concern? (This could be spoken or written)
Q5. To what extent are you (/the person you support) satisfied with outcome (what the social worker did to try and make you safer) of the safeguarding investigation?	"Happiness" simpler than "satisfaction" "Outcome" replaced with "end result"	Use "end result" in place of "outcome"		Q4. How happy are you with the end result of what people did to try and keep you (/the person you support) safe?
Q6. Do you (/the person you support) feel that you are safer now as a result of the safeguarding investigation and the conclusion of this case and/or help from social workers?	What if the person is not unsafe to start with?	Question is inappropriate		Q6. Do you (/the person you support) feel that you are safer now because of the help from people dealing with the concern?
Q6(a)		Additional question added to be asked only if adult at risk has died		Q6(a). Do you feel that (the person you supported) was safer because of the help from people dealing with the concern?
Q7. Is there anything else you would like to tell us about your experience of what happened during the time we have been talking about and/or adult safeguarding?		Would appreciate the opportunity of giving feedback to the council	Add ("or other organisations") Issue of anonymity raised	Q7. Is there anything else you think the council (or other organisations) could have done better during the time of this concern? Q7(a). Would you like me to pass on your details so the council can contact you further about this? Yes ☐ No, remain anonymous ☐

Annex B

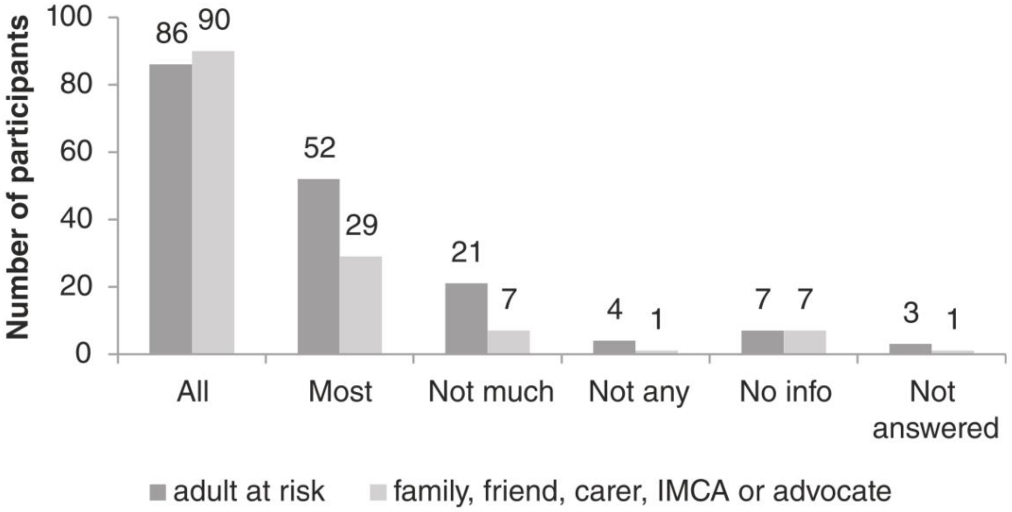
Responses to Questions from Norrie et al. (2016) Survey



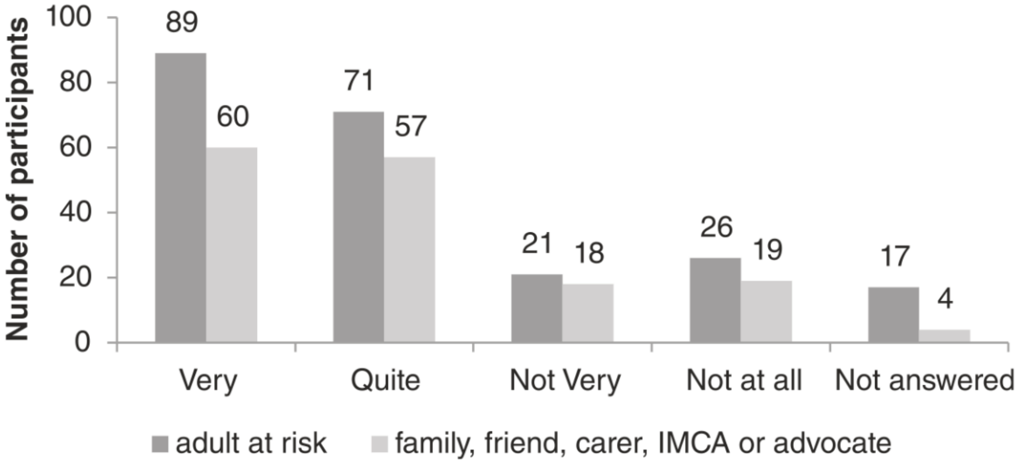
Responses to question 1: *"Did you/the person you support feel listened to during conversations and meetings?"*



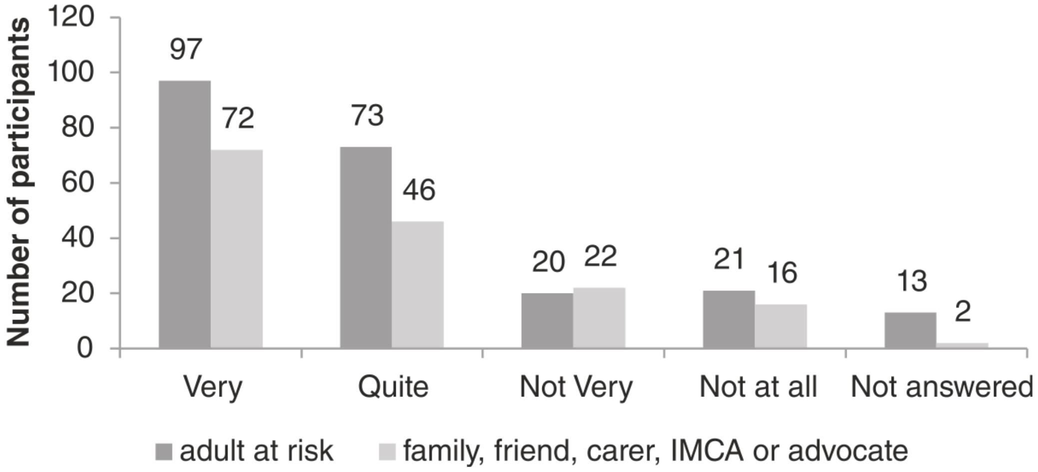
Responses to question 2: *"Did you/the person you support get information during the concern? (This could be spoken or written.)"*



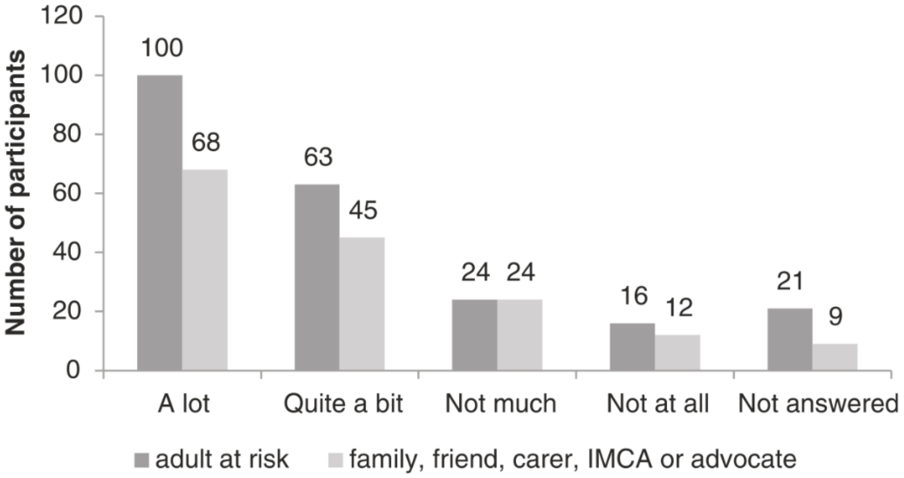
Responses to question 3: *"Were you/the person you support able to understand the information given to you?"*



Responses to question 4: *"How happy are you/is the person you support, with the end result?"*



Responses to question 5: *"How happy are you with the way people dealt with your/the person you support's concern?"*



Responses to question 6: *"Do you feel that you are safer now/do you feel that the person you support is safer now because of the help from people dealing with the concern?"*