MK Together Safeguarding Partnership Annual Report 2025-26

MK Together
SAFEGUARDING PARTNERSHIP

Contents

Introduction

The MK Together Safeguarding Partnership continues to provide strong multi-agency leadership and oversight of safeguarding across Milton Keynes, driving improvements in how partners work together to protect and support children and vulnerable adults. During 2025–2026 the partnership has embedded and strengthened its safeguarding arrangements in line with *Working Together to Safeguard Children 2026* whilst maintaining compliance with the Care Act 2014. As an all-age partnership, there is continued commitment to ensuring that the needs of children and vulnerable adults are understood holistically and responded to effectively. The partnership's strategic priorities have provided a clear and consistent focus for activity throughout the year and form the basis of this annual report, demonstrating progress, impact and areas for further development.

The arrangements have further strengthened the partnership's ability to assure itself of the effectiveness of safeguarding systems, with an increased focus on early identification of risk, multi-agency accountability and evidencing impact. Partners have worked collaboratively to improve information sharing, develop intelligence-led approaches and embed a culture of learning and continuous improvement. This has supported a more proactive and preventative approach to safeguarding, ensuring that children and vulnerable adults receive timely and coordinated support.

In April 2025, the partnership agreed to formally stand-down Safer MK as the Community Safety Partnership (CSP). This was in recognition that the Safeguarding Partnership arrangements were delivering on the responsibilities of a CSP, therefore avoiding duplication and further streamlining the partnership's responsibilities to ensure Milton Keynes is a safer place for all.

The combined governance of safeguarding and community safety continues to enable the partnership to respond flexibly to cross-cutting priorities, including domestic abuse, serious violence, exploitation, and Prevent. Strong operational and strategic relationships across agencies provide a solid foundation for joint working, allowing the partnership to respond effectively to emerging risks while maintaining a clear focus on improving outcomes and reducing harm. Safeguarding remains central to all partnership activity, underpinned by a shared commitment to ensuring that individuals are seen, heard and protected.

From 1 April 2026, Bedfordshire, Luton and Milton Keynes Integrated Care Board (BLMK ICB) became part of the NHS Central East Integrated Care Board as part of a national restructure. As this report relates to the year up to this change taking effect, reference throughout is made to BLMK ICB.

Independent Scrutineer Reflection

As the Milton Keynes Independent Safeguarding Scrutineer, I am pleased to contribute to the MK Together Annual Safeguarding Report. I am assured that the safeguarding partnership arrangements continue to operate effectively for children, families, vulnerable adults, and practitioners. Throughout the year, all safeguarding partners have demonstrated a consistent willingness to engage in scrutiny across all areas of practice, through single-agency and multi-agency audit activity and through constructive professional dialogue.

The partnership has sustained mature, collaborative relationships underpinned by strong leadership and a culture of transparency and openness.

I recognise the considerable organisational changes that the local Integrated Care Board (ICB) has made over the past year, which has led to several changes in the responsible senior leadership for safeguarding. As the ICB is a statutory safeguarding partner and now have a consistent safeguarding team I expect this to support the necessary full engagement with the MK Together safeguarding partnership, and I look forward to working with them in the coming year.

The partnership has maintained a clear and deliberate focus on the strategic priorities agreed by the Safeguarding Partnership, ensuring that its work remains aligned with statutory responsibilities and responsive to any emerging safeguarding needs.

During this year, the Milton Keynes safeguarding partnership system undertook a review of its governance arrangements, including decision-making processes and the structures that support them. This work has further strengthened and refined partnership arrangements and practice. The partnership recognises that continued improvement is required in relation to data integration, particularly in capturing and using the views and experiences of children and adults to inform safeguarding practice and service development. This will be a key area of focus for the forthcoming year.

The introduction of joint induction training sessions - developed in response to practitioner feedback and delivered by senior safeguarding professionals - has already demonstrated clear value. These sessions promote shared learning and reinforce the benefits of a coordinated partnership approach to safeguarding children, families, and vulnerable adults.

I am assured that robust quality assurance mechanisms are embedded across the safeguarding system, and that learning from local and national safeguarding practice reviews is identified, disseminated, and implemented. Partners are able to evidence the positive impact of this learning on the development and improvement of practice.

I remain confident that the safeguarding partnership will continue to reflect, learn, and adapt in order to strengthen its collective practice and maintain its responsibilities of protecting and promoting the welfare of all children and adults in Milton Keynes.

Jill Wilkinson, Independent Scrutineer for MK Together Safeguarding Partnership

Safeguarding in numbers

Demographics

Population of MK (2024)

305,844

Source: ONS

5-Year Population Growth (2019-2024)

+8.7%

Source: ONS

Aged 15 and Under (2026)

21.6%

Young Population

Aged 65 and Over (2026)

14.2%

Older Population

Adult Safeguarding

Safeguarding Concerns Received

+25%

2,833 → 3,529

Reason for Concern: Neglect & Acts of Omission

+26%

389 → 491

Reason for Concern: Psychological Abuse

+29%

206 → 265

Risk to Adult Reduced or Removed

+2.3%

90.1% → 92.4%

Children's Safeguarding

Overall Contacts Received

+25%

2,030 → 2,534

Safeguarding Referrals Received

+39%

227 → 315

Re-Referrals into Children's Services

-40%

vs previous year

Child Protection Plans in Place

-27%

356 → 260

Domestic Abuse and Missing (TVP)

Domestic Occurrences Reported

+8.1%

8,930 → 9,656

Domestic Occurrences Involving Children

+6.1%

4,003 → 4,249

Missing Adults Reported

+5.3%

433 → 456

Missing Children Reported

-12.7%

675 → 589

Priority One

Take a well-rounded approach when working with families, focusing on what children or vulnerable adults need to manage risks and achieve the best outcomes.

A whole-family, multi-agency approach to safeguarding has become increasingly embedded across the partnership, with a strong focus on improving outcomes for children, vulnerable adults and their families.

The Partnership has continued to develop the Inter-Agency Adult at Risk Management (IARM) process following three rapid reviews, which highlighted the need for earlier use to improve outcomes. Use of IARM meetings has increased, including by partners outside Adult Social Care such as Thames Valley Police and Buckinghamshire Fire and Rescue Service. Work is ongoing to further embed the process across all partner agencies, including registered social landlords.

IARM meetings provide a structured forum for partners to share relevant information and, where appropriate, involve the individual and/or their family or carers, ensuring their views are considered in the development of risk management plans. Adult services led on 1347 IARM meetings between April 2025 and March 2026; this is now being reported to Assurance Group on a quarterly basis.

The Anti-Social Behaviour (ASB) for Adults at Risk pathway has been updated in line with safeguarding practice. This ensures that individuals who are perpetrators of ASB who have additional and complex needs are encouraged to access relevant services, including drug and alcohol support and mental health interventions, through established forums such as the monthly ASB Case Management Meeting for neighbourhood disputes and the Open Space ASB and Homelessness IARM Meeting for public nuisance cases.

This approach helps to reduce the likelihood of thresholds being met for ASB Case Reviews and the need for enforcement action, including eviction. The ASB Case Management process is co-managed by Milton Keynes City Council and Thames Valley Police, maintaining an appropriate balance between enforcement and safeguarding, while ensuring that victims' voices are heard and their needs are met.

There has been a strong partnership-wide emphasis on embedding trauma-informed, strengths-based and culturally competent practice, supported by ongoing workforce development. Across agencies, practitioners are better equipped to recognise vulnerability, respond to complex and historical harm, and engage families in a way that supports sustainable change. This is contributing to more coordinated, person-centred responses, where risk is understood in the round, across family, community, health and contextual factors, rather than in isolation.

Multi-agency practice has been further strengthened through shared governance, quality assurance and risk management arrangements. The annual Section 11 Audit and Adult Benchmarking Exercise participants included colleagues from across adults and children's services to assess how all practitioners work with families across the system. It was established that partners recognise that this approach is not yet consistently embedded

across all services. Children's Services has identified variability in analytical quality and multi-agency coordination in more complex areas, while CNWL has highlighted challenges in system-wide data sharing and visibility of risk. These gaps limit the partnership's ability to consistently evidence impact and ensure that interventions are fully outcome focused.

Looking ahead, partners will continue to embed integrated Family Help arrangements and strengthen a proactive, shared safeguarding culture. Thames Valley Police will further develop analytical capability and early identification of vulnerability, while health partners and Public Health continue to expand early intervention and wellbeing support.

Across the partnership there will be a continued focus on improving data integration with the completion of the safeguarding data set, strengthening outcome measurement, and addressing inequalities and disproportionality. Work will continue to embed IARMs as an early intervention tool for adults at risk of harm, supported by the development of a more accessible one-page guidance document and IARM initiation form to assist practitioners in convening and chairing meetings.

Findings from Section 11 and adult benchmarking audits have also highlighted the ongoing need to reinforce professional curiosity and effective multi-agency working. In response, a biannual Partnership Induction event has been established for new practitioners. This will incorporate learning from a local statutory review, using a case-based approach spanning both children's and adult services to emphasise the importance of professional curiosity and collaborative practice.

Milton Keynes City Council Children's Services has led system-wide improvement in adopting a more holistic, needs-led approach, with audit evidence demonstrating stronger identification of need, improved direct work with families, and more proportionate use of statutory intervention. This is reflected in measurable impact, including reductions in child protection plans, re-referrals and children in care, indicating that support is increasingly provided earlier and more effectively. There was a 27% decrease in children subject to a Child Protection Plan in the reporting period, a 40% reduction in re-referrals following closure of a Child in Need Plan and a 10% reduction in children entering care. This demonstrates better decision making around threshold at the front door and more effective step-down support. Whilst Safeguarding referrals increased by 39%, footfall in children's centres was also higher evidencing a better understanding of risk and appropriate referral pathways across the partnership.

Education settings and Milton Keynes City Council education services also play an important role in the partnership's whole-family approach through early identification of emerging need, timely safeguarding referrals and practical support to children and families. Schools, colleges and designated safeguarding leads are often the first to recognise changes in presentation, attendance, wellbeing or behaviour that may indicate wider safeguarding concerns. This is supported by council services including attendance, children missing education, inclusion and fair access arrangements, which help identify vulnerability early and ensure children remain visible to services.

This contribution is reflected in 1086 contacts and 496 referrals from education settings during the reporting period, April 2025 to April 2026, alongside 963 cases supported through formal attendance, children missing education, or fair access processes. These data help demonstrate the role of education in identifying need early and ensuring vulnerable children remain visible to services.

Milton Keynes City Council have further strengthened early help and prevention through targeted Family Centre outreach, supporting families experiencing inequalities to access a range of services, while also expanding a broader community-based offer. This has been complemented by an increased focus across the partnership on proactive engagement and signposting, ensuring families receive the right support at the earliest opportunity.

Across health partners, Central and North West London (CNWL) NHS Trust, Bedfordshire, Luton and Milton Keynes Integrated Care Board (BLMK ICB), and Milton Keynes University Hospital (MKUH) have embedded a “Think Family” and all-age safeguarding approach, strengthening collaboration, timely information sharing and coordinated planning. CNWL has embedded structured risk frameworks and trauma-informed, culturally competent practice, while BLMK ICB has enhanced early identification through the Dynamic Support Register and system leadership through partnership boards. MKUH has strengthened practice through high compliance with safeguarding training and robust information sharing processes to ensure timely responses to risk.

Thames Valley Police has further strengthened the partnership approach through enhanced intelligence-led safeguarding and data sharing. The development of automated systems and analytical dashboards has improved the identification of children at risk of domestic abuse, exploitation and repeat missing episodes, enabling earlier and more informed multi-agency decision making. Active involvement in forums such as MASH, MARAC and contextual safeguarding arrangements has ensured that policing intelligence is effectively combined with partner information to inform whole-family responses and better understanding children’s lived experiences. Data demonstrates that this has led to earlier identification of children at risk and more timely, informed multi-agency decision making, as highlighted in external ILACS inspection feedback, which recognised the effectiveness of police and children’s social care responses to risk. TVP has committed to further develop Operation Encompass for children who are victims of domestic abuse within the home to improve speed and consistency of school notifications.

The TVP Neighbourhoods teams have experienced a significant uplift, increasing the visibility of local policing and enabling officers to build trust within communities. Officers are better equipped to recognise unmet safeguarding needs in residents and initiate processes such as IARM and ASB Case Management for adults at risk. Work continues to ensure only appropriate safeguarding referrals are made to adult social care.

Milton Keynes City Council Adult Social Care has demonstrated strong impact through its commitment to Making Safeguarding Personal, with risk removed or reduced in 91% of Section 42 enquiries and outcomes achieved in the vast majority of cases. This reflects a clear focus on working alongside adults to achieve outcomes that matter to them. The service has also strengthened its use of data to identify local trends and vulnerabilities,

enabling a more contextual and preventative approach across the partnership. A KPI to maintain 91% now been set for Making Safeguarding Personal in Section 42 enquiries as this progress puts us in line with the England average. ASC has achieved its target of over 80% training compliance for mandatory training including mental capacity act assessment and multiagency safeguarding.

Other partners are contributing to a more rounded, system-wide approach through their specific roles. The Buckinghamshire Fire and Rescue Service (BFRS) has strengthened recognition of safeguarding risks within home environments and improved workforce understanding of vulnerability, supporting earlier identification and signposting. They have worked proactively with partners, including Adult Social Care, on emerging risks such as families with complex needs placed in Milton Keynes by other local authorities, however, recognise that engagement with children's services is an area for development. South Central Ambulance Service (SCAS) has embedded Making Safeguarding Personal and the voice of the child within staff training and referral processes, ensuring that frontline responses reflect individual needs and experiences. Probation services have embedded a "Think Child" approach within risk assessment frameworks, ensuring risks to children and vulnerable adults are considered holistically, including those arising from wider behaviour and lifestyle factors, supported by robust quality assurance processes.

Assurance Group, reporting to Safeguarding Partnership will assess the impact of these developments.

Priority Two

Listen to the opinions of children and vulnerable adults in our decision-making and everyday work, making sure we recognise and understand their unique traits to provide fair services.

There is growing evidence across the partnership that the voices of children and vulnerable adults are increasingly shaping decision-making, service design and frontline practice.

There is strong evidence across the partnership of a shift towards more inclusive and equitable practice, including the consideration of protected characteristics, trauma, neurodiversity and structural inequality in decision-making. This is contributing to more personalised, fair and effective safeguarding responses. The Section 11 and adult benchmarking audits highlighted that incorporating the voices of children and adults who agencies work with is strong in single agencies, however there is no shared framework for this across the system.

Looking ahead, partners will continue to strengthen co-production, improve mechanisms for capturing and responding to feedback, and ensure that learning from lived experience is systematically embedded into service design and delivery. Partners recognise that while there are areas of strong practice, consistency remains a challenge, and further work is required to ensure that the voice of children and vulnerable adults is embedded across all services and consistently informs decision-making where appropriate. Consideration will be given to a partnership participation strategy and equality, diversity and inclusion group that will provide a governance framework for service user engagement, equality of access and measure impact. There will be a continued focus on improving engagement with harder-to-reach groups, addressing inequalities, and ensuring that all individuals are seen, heard and meaningfully involved in decisions that affect their lives.

Milton Keynes City Council Children's Services has demonstrated improved child-centred practice, with audit findings showing that where practice is strongest, children's views and experiences are clearly reflected in assessments and decision-making. This is contributing to more proportionate and effective interventions, with evidence suggesting improved engagement and reduced need for repeat or escalating statutory involvement. Within the Youth Justice Support Service disproportionality remains a priority area and there is increasing confidence in recognising how a child's lived experience, trauma, neurodiversity as well as structural inequality shape behaviour. Practitioners are more consistently acknowledging the experience of black and mixed-heritage children, alongside children with speech, language and communication needs.

The MKCC 2025 audit cycle shows that effective practice is translating into improved outcomes for children. Outcomes for the child were the strongest domain, with 66% graded good, indicating that professionals are often able to identify need, implement support and achieve progress, even where aspects such as analysis or review timeliness are less consistent. This provides a strong foundation, with clear examples of good practice that can be replicated to improve consistency across the service.

Strengths are particularly evident in multi-agency working and contextual safeguarding, with audits identifying consistent progress in understanding risk beyond the family home and coordinating partnership responses to extra-familial harm. Improvements in writing directly to children are also supporting more child-centred practice by better capturing the child's lived experience and ensuring interventions remain grounded in this.

The 16–25 highlight report provides further assurance, assessing the service as good overall. It describes a well-managed service with committed practitioners who build strong, trusting relationships with young people. Strong planning and pathway work demonstrate a clear understanding of needs and active involvement of young people in their plans. Where practice is strongest, records reflect young people's experiences with warmth and authenticity, and outcomes show stability and progress across education, employment, accommodation and independence. This demonstrates the service's ability to deliver effective relational practice that translates into meaningful life outcomes.

Education settings are a key part of how children's voices are heard within the local safeguarding system. Through pastoral support, safeguarding practice, attendance work, SEND (special educational needs and disability) processes and reintegration planning, schools and council education services help ensure that each child's lived experience informs assessment, planning and decision-making. This is particularly important for children whose voices may otherwise be less visible, including those with SEND, children at risk of exclusion, and children experiencing poor attendance or disengagement from education. Attendance for children in Milton Keynes is generally better than the national average. However, non-attendance is slightly higher for children with Educational Health Care Plans (EHCP) (14%) compared to those without (6.11%). Positively, 97.75% of post-16 children with SEN are supported into education, employment or training. Termly Targeted Support Meetings (TSMs) are held with schools whose attendance rate is below the national average to discuss issues and opportunities to improve. The Child Missing in Education rate in Milton Keynes is lower than the national average indicating the effectiveness of work done to try and keep children in school and support partners to address the underlying issues leading to poor attendance. A School Attendance Working Group has been established with children's social care and education colleagues to review challenges and progress in relation to school attendance and plans to complete a deep dive into some of our most entrenched non-attenders to identify any learnings that can be implemented to further improve attendance rate and outcomes for children.

Across health partners, there has been a continued focus on embedding person-centred approaches and advocacy to ensure that individuals' voices are central to care planning. CNWL has strengthened the application of "Voice of the Child" and advocacy across services, supported by supervision, training and quality governance processes. CNWL embedded the findings of the 'It's Silent'; Race, Racism and Safeguarding report into all training and supervision to ensure services are responsive to diverse needs. The ICB has further supported this through co-production activity, including involving children in the design of mental health services and ensuring access to interpreting services to support inclusion.

Milton Keynes University Hospital (MKUH) has demonstrated significant progress in capturing and responding to patient voices, with a substantial increase in feedback through the Friends and Family Test and the use of tailored tools to capture children's views. This feedback is used to inform service improvements and patient experience, with further work underway to strengthen engagement with younger children and vulnerable groups through both workforce engagement and digital solutions.

Public Health has embedded the voice of children and young people through active engagement in service design and commissioning, including involvement in the development and review of the MK Wellbeing Service and shaping local health and wellbeing surveys. This ensures that services reflect the needs and preferences of the population they serve.

Thames Valley Police has strengthened its approach to capturing the voice of the child within safeguarding practice with a recent audit demonstrating 97% compliance in child protection incidents in recording children's perspectives and improved processes to ensure that safeguarding decisions are informed by lived experience. Further measures have been put in place to maintain this activity including missing episodes remaining open after the child has returned until there is evidence that their perspective has been sought and considered. Engagement with children through schools and community settings, alongside relationship-based work through the Harm Reduction Unit, is supporting greater trust and enabling more effective safeguarding responses tailored to individual need. Joint Targeted Area Inspections (JTAI) and Police Effectiveness, Efficiency, and Legitimacy (PEEL) inspections specifically evidence that 'Every Child Seen, Heard and Safe' now resonates widely across frontline policing, demonstrating a sustained shift in practice and culture.

Thames Valley Police is a key partner in the victim-led ASB Case Review process where often safeguarding intervention is required for both the victim/s and perpetrator/s. TVP officers work closely with partners to carry out home visits, engage with the parties and understand all needs to ensure the victims feel heard and any unmet needs of the perpetrator are considered appropriately.

Thames Valley Police continue to embed anti-racist and anti-discriminatory practice, ensuring staff are trained on adultification, trauma and neurodiversity. Proportionality data and body worn camera footage are often reviewed by the Independent Advisory Group (IAG) to ensure police practices are proportionate.

Adult Social Care has enhanced its use of data and co-production to better understand and respond to the experiences of adults at risk, including capturing demographic information and working with people with lived experience to shape service delivery and feedback processes. In order to target resources more effectively Adult Social Care has developed a data driven heat map of the city by demand, overlaying it with location information such as areas of deprivation to recognise themes and trends. This supports a more equitable and responsive approach, particularly in identifying and responding to local patterns of need and potential disproportionality. A Stronger Together Co-Production Board oversees the work to review processes. A recruitment drive will be carried out during 2026 to increase membership of this board and ensure current service users inform and shape local services.

Other partners contribute to this priority through their frontline and operational roles. Buckinghamshire Fire and Rescue Service (BFRS) has strengthened processes to capture the voice of individuals during interactions and safeguarding referrals, supported by training and improved referral systems.

South Central Ambulance Service (SCAS) has embedded patient voice through public engagement forums and requirements for staff to reflect the voice of the child and adult within safeguarding referrals.

Probation services ensure that vulnerable adults are actively involved in sentence planning and that safeguarding considerations for children are captured through multi-agency liaison and risk assessment processes.

Priority Three

Improve the quality of care and support by learning from feedback and focusing on continuous improvements while maintaining high safeguarding standards.

A stronger culture of learning, reflection and continuous improvement is evident across the safeguarding partnership, with increased use of feedback, audit and review processes to inform practice and drive change.

Across the partnership, there is clear evidence of increasing alignment with Working Together 2026 expectations and Care Act 2014, including the use of multi-agency learning, improving the use of data and feedback to drive improvement. Partners recognise that further work is required to strengthen the consistent application of learning across all services, improve the measurement and evidencing of impact, and ensure that learning leads to sustained change in practice.

Rapid Reviews for Safeguarding Adult Review referrals and Domestic Homicide Reviews enable partners to identify and act on immediate learning across the system, mirroring the approach used for significant incident notifications in children's services. This has supported timely improvements in practice ahead of the completion of in-depth statutory reviews.

Examples include ongoing work to further embed the IARM process, alongside the establishment of a task and finish group to develop more collaborative and innovative approaches to engaging individuals who are not currently engaging with services.

The annual S175/157 audit of Milton Keynes educational settings was led by Milton Keynes City Council, and the findings were reported to Assurance Group.

During the reporting period, the partnership contributed to five Designated Safeguarding Lead (DSL) forums, with 144 education representatives attending from across the primary, infant, junior, secondary, special, alternative provision and virtual education remits. S175/157 audit was conducted and the findings reported to the MKTSP Assurance Group.

Education partners contribute to the partnership's learning culture through termly DSL forums, safeguarding updates and the dissemination of learning from local and national reviews. These arrangements help ensure that schools and colleges are not only informed of emerging themes, but are able to reflect on practice, share feedback and contribute to service improvement. This strengthens the consistency of safeguarding standards across the wider system and supports continuous improvement in how risks are recognised and responded to in education settings.

In addition, approximately 100 safeguarding briefings, training sessions, learning updates or review-related communications were shared with schools and colleges, helping to strengthen consistency of practice and dissemination of learning. 58 safeguarding audits were carried out in maintained schools.

Milton Keynes City Council Adult Social Care has embedded co-production within its improvement approach, developing a co-production charter with people with lived experience. The service has also strengthened its quality assurance framework to better

triangulate feedback, audit findings and performance data. This ensures that service development is increasingly shaped by the experiences of those who draw on care and support.

Milton Keynes City Council Children's Services has also continued to strengthen its approach to learning and improvement, with audit and review activity informing practice development. While there is evidence of improving outcomes and stronger practice in some areas, the service has recognised the need to further embed consistency in quality, particularly in analytical practice and multi-agency coordination, to ensure that learning translates into sustained improvement across all cases.

Across health partners, CNWL, MKUH and BLMK ICB have demonstrated a strong commitment to continuous learning through structured governance, training and quality assurance processes. CNWL has embedded learning from safeguarding reviews, including Safeguarding Adult Reviews, Domestic Homicide Reviews and Child Safeguarding Practice Reviews, into frontline practice through supervision, training and learning bulletins. This has led to the planning of a workshop for colleagues focusing on the experience of carers and the duties as healthcare professionals to identify and support the safeguarding needs of carers. The ICB has strengthened learning through its community of practice for safeguarding leads and delivery of multi-agency training, ensuring that national and local learning is disseminated effectively and embedded into practice. MKUH has further strengthened its approach by using feedback from Section 42 enquiries and other data sources to identify themes, improve pathways and enhance patient care, supported by plans to develop live dashboards to monitor safeguarding performance.

Thames Valley Police has contributed to a strong partnership learning culture through active engagement in statutory review processes, including Local Child Safeguarding Practice Reviews, Safeguarding Adult Reviews and Domestic Homicide Reviews, alongside robust internal governance and peer review of safeguarding investigations. Inspection findings have highlighted improved supervision, decision-making and workforce capability, supported by significant investment in specialist safeguarding roles and training. In particular, the Child Abuse Investigation Unit (CAIU) has seen a significant uplift in specialist trained officers and managers, identified as one of the strongest positions nationally during a recent inspection. This has strengthened investigative quality and the consistency of safeguarding responses across the system.

Thames Valley Police continued to explore opportunities to reach seldom heard communities and participate in multiple community events throughout the year to build trusting relationships as well as listen to the concerns raised by groups impacted by local and global events. Alongside partners, Neighbourhood teams have attended sheltered living accommodation to engage with residents and provide reassurance and crime prevention advice to this particularly vulnerable group.

Other partners have supported learning and improvement through their internal governance and workforce development processes. Buckinghamshire Fire and Rescue Service has used peer review, internal feedback and its Safeguarding Working Group to shape service development and ensure compliance with safeguarding standards.

South Central Ambulance Service has strengthened learning through patient experience feedback and regular safety review panels, enabling the organisation to identify areas for improvement and respond to emerging risks.

Probation services have embedded structured quality assurance processes, including regular audit and review activity, with learning used to inform practitioner development and service improvement, as well as responding to national inspection findings.

Milton Keynes City Council Public Health has contributed to system learning through rapid response processes following critical incidents, including suspected suicides of young people, enabling timely, coordinated support and generating learning to inform future policy and practice. This reflects a strong partnership approach to learning from critical events and improving system-wide responses to emerging risks.

Looking ahead, partners will continue to expand opportunities for shared learning, and embed robust quality assurance frameworks that link feedback, audit and outcomes. There will be a continued focus on ensuring that learning from reviews, inspections and lived experience is translated into practice, alongside the development of stronger systems for evidencing impact and demonstrating continuous improvement across the safeguarding partnership.

Priority Four

Act quickly to identify and address all forms of exploitation, abuse, and neglect for children and adults by working together across different organisations to provide early help and prevention.

The partnership has enhanced its ability to identify and respond to exploitation, abuse and neglect at an earlier stage, supported by stronger multi-agency collaboration and improved intelligence-led approaches.

Across the partnership, there is clear evidence of stronger early help and prevention, with increasing use of data, shared tools and multi-agency processes to identify vulnerability and intervene earlier. Partners recognise that further work is required to ensure consistency in early identification across all agencies, strengthened capacity for early intervention, and embed a more systematic approach to prevention, particularly in relation to exploitation and complex contextual risks.

Milton Keynes City Council Children's Services has demonstrated stronger front-door decision-making and increased confidence across the partnership in recognising and responding to risk. This is reflected in rising contacts and referrals being interpreted as improved awareness and earlier identification of harm, alongside reductions in re-referrals, child protection plans and children in care, indicating that risks are increasingly addressed before escalation. Multi-agency working, particularly in relation to contextual safeguarding, has been identified as a key strength, enabling partners to respond more effectively to risks beyond the family home. The ILACS (Inspection of Local Authority Children's Services) inspection report identified children who go missing or are at risk of criminal or sexual exploitation receive a proactive, coordinated response from children's social care and the contextual safeguarding team. Strong multi-agency relationships, particularly with the police, support effective mapping of perpetrators, targeted disruption activity and the identification of hotspots linked to serious youth violence and exploitation, leading to reduced risk of harm.

A multidisciplinary approach ensures children are supported with a range of complex needs, including self-harm, poor mental health, exploitation, school refusal and strained family relationships.

Children's Social Care acted quickly and decisively when a multi-agency audit into child sexual abuse identified clear areas for improvement and in response set up a partnership reflective practice group for live cases and is leading on the production of a multi-agency Child Sexual Abuse policy.

Education settings and council education teams make a significant contribution to early identification of exploitation, neglect and other safeguarding risks. Schools are well placed to notice changes in presentation, attendance, peer relationships and behaviour that may indicate harm beyond the family home, including exploitation, domestic abuse and emerging contextual risk. This is supported by council services relating to attendance, children missing education, exclusions and inclusion, which help maintain oversight of

vulnerable children, reduce the risk of children becoming unseen, and strengthen timely multi-agency responses.

This contribution can be illustrated through 596 children identified through children missing education or formal attendance processes, and 496 safeguarding concerns or referrals raised by education settings relating to exploitation, neglect, domestic abuse or wider vulnerability.

Thames Valley Police has played a significant role in strengthening early identification and disruption of harm through intelligence-led approaches and proactive safeguarding activity. The development of the Harm Reduction Unit and enhanced analytical tools has improved the identification of children at risk of exploitation, serious violence and repeat missing episodes. This includes the proactive management of high-risk cohorts and the identification of group-based child sexual exploitation, demonstrating the impact of coordinated, data-led intervention. The Harm Reduction Unit manages a cohort of between 55 and 60 high risk children each with an allocated officer. Automated dashboards support person-specific interventions by combining missing data, exposure to domestic abuse and exploitation and offending profiles. Police engagement in multi-agency teams and forums such as the Multi-Agency Safeguarding Hub (MASH), Multi-Agency Risk Assessment Conference (MARAC), Multi-Agency Tactical and Co-ordination (MATAC) and contextual safeguarding arrangements has supported faster, more informed decision-making and strengthened partnership responses to emerging risk. Data led interventions through the weekly knife crime meeting and tactical group has resulted in tangible outcomes including reduction in missing episodes. Learning from this will be incorporated into strengthening interventions for children living within domestically abusive households.

Across health partners, CNWL, MKUH and BLMK ICB have strengthened processes to ensure timely identification and response to safeguarding concerns. CNWL has embedded robust internal reporting systems, use of exploitation toolkits and strong links to multi-agency safeguarding arrangements including MARAC and contextual safeguarding panels. MKUH has maintained strong performance in timely information sharing and safeguarding referrals, including MARF submissions, and continues to work collaboratively with mental health services, social care and police to respond effectively to risk, particularly where there are concerns relating to mental health, self-harm or exploitation. The ICB has supported early identification and prevention through training, participation in statutory safeguarding reviews and partnership work to strengthen pathways, including those relating to concealed pregnancy and FGM risk.

Milton Keynes City Council Adult Social Care has strengthened its response to safeguarding demand, managing a significant increase in referrals (44% overall equating to over 700 referrals per quarter) while maintaining a focus on achieving positive outcomes for adults at risk. The service has used data and insight to identify trends and work proactively with key partners to improve referral pathways, streamline communication and focus on preventative approaches. This has supported earlier intervention and reduced the likelihood of harm escalating whilst raising awareness with partners on the difference between a formal safeguarding referral and generic requests for support. In addition, increased use of inter-agency processes such as IARM has strengthened preventative, multi-agency risk

management before statutory thresholds are reached. Despite the operational challenges of the increase in referrals, Adult Social Care achieved desired outcomes for adults in 63% of Section 42 enquiries and partially achieved the outcomes in 34%.

Thames Valley Police coordinated multi-agency activity to safeguard adults identified as being at risk of exploitation, including cuckooing. This involved promoting shared responsibility for managing risk, improving information sharing about perpetrators, and ensuring individuals are safe and supported within their own homes.

Other partners play a critical role in early identification and response through their frontline activity. Buckinghamshire Fire and Rescue Service has established timely safeguarding referral processes, including out-of-hours escalation, and strengthened workforce confidence in recognising indicators of abuse, neglect and exploitation. South Central Ambulance Service ensures that all staff are trained and expected to identify and report safeguarding concerns, providing an important early alert function within the system. Probation services contribute through structured escalation processes, workforce training in areas such as violence against women and girls, and risk management approaches that ensure safeguarding concerns are identified and shared with partners.

Public Health has contributed to preventative approaches through its wider work on early help, wellbeing and system response to emerging risks.

Looking ahead, partners will continue to strengthen intelligence-led safeguarding, improve data sharing and further develop a shared understanding of risk through collaborative working. There will be a continued focus on building professional curiosity and confidence, expanding preventative interventions, and ensuring that partners contribute effectively to identifying and addressing risk at the earliest opportunity. Strengthening consistency, reducing delay and improving the overall impact of multi-agency working will remain key priorities for the partnership.

Priority Five

Make sure that different organisations work together effectively to support individuals as they transition between our services, keeping trauma in mind.

More coordinated and joined-up working across agencies is supporting safer and more effective transitions between services, with an increasing emphasis on trauma-informed and person-centred approaches.

Across the partnership, there is clear evidence that transitions are becoming more coordinated, with improved communication, shared responsibility and a stronger focus on the lived experience of individuals. Partners recognise that further work is needed to ensure that trauma-informed approaches are consistently applied across all services, and that transitions are always centred on individual need rather than organisational boundaries. Variability in practice and gaps in coordination can still result in fragmented experiences for some individuals, particularly those with complex or overlapping needs. The Section 11 and Adult Benchmarking audits identified transition between children and adult services can still be a risky period for children due to differences in thresholds, and that some children still face a cliff edge in support as they reach adulthood.

Milton Keynes City Council Children's Services has demonstrated clear progress in improving transitions across the system, with evidence that step-up and step-down between Early Help, Child in Need, Child Protection and care are becoming more proportionate and better planned around individual need. This has contributed to improved continuity of support, reduced duplication and a decrease in re-referrals, indicating that transitions are increasingly being managed effectively and sustainably.

Education partners play an important role in supporting safe and effective transitions, particularly where children are moving between schools, into alternative provision, into post-16 pathways or between children's and adult services. Council education services, alongside schools and colleges, help to maintain continuity of support through admissions, fair access, inclusion planning and oversight of vulnerable learners. This is especially important for children with SEND, children at risk of exclusion and those whose engagement in education may reduce at key transition points.

This may be evidenced through 265 vulnerable children identified and supported through tracking and tracing of children missing education, 367 children successfully placed or reintegrated into education through fair access, and 97.4% of 16-17 year olds securing an Education, Employment and Training placement in September compared to 94.1% nationally, demonstrating the effectiveness of joint working at key transition points.

Multi-agency collaboration has been strengthened through improved information sharing, joint decision-making and clearer pathways between services. Across health partners, CNWL, Milton Keynes University Hospital (MKUH) and BLMK ICB have continued to improve partnership working to support transitions, including pathways between CAMHS and adult services, health and justice settings, and specialist services such as perinatal support. CNWL has embedded trauma-informed training and strengthened communication across services

to ensure that transitions are better coordinated. MKUH has further strengthened continuity of care through effective information sharing with social care and CNWL 0–19 services, and through collaboration with mental health, substance misuse and domestic abuse services to support individuals moving between services. BLMK ICB has supported system-wide development through initiatives such as the early intervention mental health service and targeted work with children affected by trauma.

Thames Valley Police has contributed to strengthened partnership working through close operational relationships with Children's Social Care and contextual safeguarding teams, including shared risk discussions, joint visits and active participation in multi-agency forums. This has supported improved continuity of safeguarding responses and reduced fragmentation as children move between services and thresholds. Police leadership across partnership boards has also strengthened shared accountability and system-wide coordination.

Milton Keynes City Council Adult Social Care has strengthened its role in multi-agency risk management and transitional support through increased use of Inter-Agency Risk Management (IARM) processes, supporting earlier intervention and coordinated responses for individuals whose needs fall below statutory thresholds or span multiple services. The service has also embedded trauma-informed practice within key teams, including housing and the mental health and complex needs team (which includes the rough sleepers team), to better support individuals with complex needs during transitions. Training has been organised for the Rough Sleepers Outreach workers to support them to work in a trauma informed way with people who rough sleep in the city.

Agencies have supported effective transitions through their operational roles. Probation services maintained strong multi-agency arrangements, including Multi-Agency Public Protection Arrangements (MAPPA) processes and close working with police and safeguarding partners, ensuring that risks are managed effectively as individuals move between custody, community and other services.

Buckinghamshire Fire and Rescue Service has strengthened information sharing and joint working with adult social care and health partners, particularly in relation to complex needs such as hoarding, supported by multi-agency training.

South Central Ambulance Service contributes to transitions by attending multi-agency meetings where they have had involvement, supporting continuity of information and safeguarding oversight.

Milton Keynes City Council Public Health has supported system-wide development of trauma-informed practice, including the delivery of the Five to Thrive model, which has been cascaded across the workforce and strengthened a shared understanding of trauma and its impact on individuals and families. This supports more consistent, trauma-informed responses as individuals move between services. Public Health also facilitated the collaboration of the commissioned providers of the drug and alcohol treatment service with a range of partners to support complex and vulnerable residents. This has led to the

improved access to services and continuity of care for those experiencing harms from substance use, especially in our rough sleeping and criminal justice cohort.

Looking ahead, partners will continue to strengthen multi-agency pathways, improve joint accountability and embed trauma-informed practice across all services. There will be a focus on improving consistency, ensuring that transitions are planned and managed effectively across the system, and strengthening the use of feedback and data to evidence the impact of partnership working on outcomes for children and vulnerable adults. The Preparing for Adulthood Pathway has been in place now for 12 months and therefore an audit will be undertaken to assess impact.

Compliance with Children's and Adults' Safeguarding Legislation

Statutory Safeguarding Reviews

In Milton Keynes, the Case Review Panel carries out Rapid Reviews for all Safeguarding Adults Review referrals, Domestic Homicides and in response to Significant Incident Notifications for children. Designated representatives of the three safeguarding partners are members of the Milton Keynes Case Review Panel.

In 2025-2026, the Case Review Panel completed Rapid Reviews for the following number of incidents:

Safeguarding Adults Reviews	6
Local Child Safeguarding Practice Reviews	1

During the year, following Rapid Reviews, the Milton Keynes Case Review Panel took the decision to commission statutory reviews, as detailed below.

Local Child Safeguarding Practice Review (LCSPR)	1
Safeguarding Adult Reviews (SARs), including two Thematic Reviews	3
Domestic Homicide Review (DHR)	1

During the reporting period the Safeguarding Partnership agreed to commission two thematic SARs, one addressing transition from inpatient mental health care to the community and the second looking at non-engagement. A third SAR was agreed, relating to a young adult with complex needs who died in care.

Two Domestic Homicide Reviews were formally started during the reporting period and two were submitted to the Home Office for pre-publication quality assurance.

Completed statutory review reports are published on the MK Together website for at least one year. In this financial year the Partnership republished the 'Henry' DHR report.

Three other statutory reviews were completed during the reporting period and are scheduled to be published during 2026: 'Cynthia' DHR report, 'Adult J' SAR report and 'Star' LCSPR report.

Work also continued on themes from reviews in the previous reporting period including a thematic review into older people who died due to fires in their premises.

Key Themes identified within SARs and DHRs include:

- The need to better recognise and respond to individuals with caring responsibilities.

- The importance of early, coordinated intervention when individuals disengage from services, to effectively manage emerging risks.
- Strengthening professional curiosity across all agencies, with particular focus on understanding family dynamics and their potential impact on risk, including suicidal ideation.
- Improving early-stage information sharing where unmet safeguarding needs are identified.

In response to these themes, the Safeguarding Partnership has undertaken the following actions:

- Refocused the Partnership Induction programme that was developed following the Section 11 and Adult Benchmarking exercises, to be more practice-oriented, reinforcing the principles of early intervention, professional curiosity, and effective multi-agency collaboration. Partnership Induction events will in future be delivered twice yearly with impact assessed using post-event feedback.
- Promoted the newly commissioned carers service, with targeted awareness activity during National Carers Week.
- Reviewed and updated the Multiagency Safeguarding Adults Policy and the Interagency Adult at Risk Management (IARM) meeting framework. A central record of non-ASC initiated IARM meetings will be held allowing partnership oversight into progress of embedding this process across the partnership. However, records kept by the community safety team demonstrate an increase in IARM meetings being initiated by colleagues in emergency services for adults with complex needs, leading to earlier multi-agency engagement. This includes the involvement of Buckinghamshire Fire and Rescue Service in IARM meetings where there are potential risks due to unsafe smoking practices and hoarding.
- Established a Task and Finish Group to review cases involving service disengagement and risk of harm, with the aim of identifying and implementing improvements to practice and procedures. Recommendations from this Task and Finish group have been fed into the updated IARM framework and a practitioner learning event is planned to further enhance opportunities for embedding the importance of multi-agency solutions to working with people facing multiple disadvantage.

Key themes from the LCSPR concluded this year include:

- The need to strengthen professional understanding of medicinal cannabis and other psychoactive medications, particularly in relation to their potential impact on parenting capacity.
- Ensuring timely progression of legal proceedings and appropriate escalation of concerns.
- Improving information sharing between private health providers and statutory services.

In response to these themes, the partnership has undertaken the following actions:

- The Young People's Drug and Alcohol Service delivered training on medicinal cannabis and psychoactive medication to support informed professional assessments of parenting capacity. Five four-hour sessions were delivered to practitioners from partner agencies focussing on the current legal framework surrounding medically prescribed cannabis and related derivatives and potential impact on parenting. Feedback from these sessions demonstrated reflection on professional assumptions that action can't be taken if a substance is prescribed, increased knowledge on how cannabis, including prescription cannabis can interplay with mental health medications and the legality around prescription psychoactive medication. Attendees reported feeling more confident to challenge parents who use prescription cannabis and be more professionally curious about the possible impact on their ability to safely parent their child/ren. Information has also been added to the GP Assurance Toolkit by the ICB to ensure that impact on parenting of prescription medication is considered regardless of whether a child is on a Child in Need or Child Protection plan.
- Reviewed current practice against recommendations from the 2020 National Child Safeguarding Practice Review Panel report, Out of Routine, into Sudden Unexpected Death in Infancy (SUDI). Child Death Group reviewed agency information provided to parents and were assured that agencies are giving up to date and appropriate advice. Child Death Group will follow this up for a review to ensure consistency of message.
- An MKCC audit of Private Law Proceedings was undertaken to assess and strengthen practice. This has led to more robust tracking of pre-proceedings and increased oversight, with social workers encouraged to escalate risks of delay to practice development leads and managers. As a result, care proceedings have reduced by 38% and the number of children entering care by 10%, reflecting more timely responses to risk and improved engagement with families.
- Ongoing MKCC audit activity, targeted Practice Development Lead support and strengthened tracking arrangements are in place to sustain progress and drive further improvement

Working with Education Settings

Education settings are engaged in the safeguarding partnership through formal representation and established communication routes across the local system. Following consultation with education partners in 2023, the partnership continued to use the quadrant model to support clearer communication, stronger links with settings and more consistent two-way engagement.

Education is represented within the Safeguarding Partnership through the Director of Children's Services and colleagues from Milton Keynes City Council's Education Service, helping to ensure that school and college safeguarding issues are reflected within partnership governance, priorities and improvement activity. This approach reflects feedback from schools and colleges, who have emphasised the importance of having their

safeguarding priorities clearly represented at a strategic level. Partners also regularly attend termly Designated Safeguarding Lead forums to share information, provide updates on local and national safeguarding issues, and gather feedback from education settings on emerging risks, practice issues and areas for development.

These arrangements support the dissemination of learning from statutory reviews, strengthen shared understanding of local safeguarding priorities, and reinforce the role of schools and colleges as active safeguarding partners in identifying vulnerability, contributing to multi-agency responses and helping children to remain seen, safe and supported.

A total of 108 out of 121 schools submitted the Section 175/157 audit in the requested timeframe, representing a response rate of 89%, slightly lower than the previous year when 91% of schools responded. All schools were able to name their key safeguarding roles including Designated Safeguarding Leads (DSLs) and reporting between 98-100% safeguarding training compliance. In the previous year policies around exclusion and non-attendance for health-related issues were raised as an area for development and following work carried out in the Quadrant meetings, this year's audit demonstrated further engagement with these themes and improvement to policy and procedure. It was identified that some schools do not have policies for restrictive physical intervention and therefore this will be a priority for this year.

Rough Sleeping and Homelessness

The Safeguarding Partnership maintains strategic oversight of multi-agency efforts to reduce homelessness and rough sleeping. At its meeting in October, the safeguarding partnership receives an update from Milton Keynes City Council on progress and development in relation to rough sleeping and homelessness.

One MKTSP Rapid Review was undertaken concerning an adult with a history of rough sleeping but was not rough sleeping at the time of their death. Learning from this case has been incorporated into a broader thematic review focusing on disengagement from services. This has informed immediate improvement activity, supported through a dedicated Task and Finish Group.

The MKCC Rough Sleepers Outreach workers make daily visits to individuals who are rough sleeping, ensuring immediate needs are addressed and supporting engagement with relevant services, including Housing Solutions, substance misuse services, and mental health support.

Dedicated temporary accommodation schemes are in place to provide a safe environment in which individuals can engage with support services, with the aim of improving outcomes and supporting transition into sustainable, long-term housing.

In recognition of the overlap in cohorts, the Rough Sleepers Inter-Agency Risk Management (IARM) meeting has been integrated with the Open Space Anti-Social Behaviour (ASB) meeting. This alignment has strengthened information sharing and enabled more effective, coordinated multi-agency responses.

Oakhill Secure Training Centre – Review of Restraint

Working Together to Safeguard Children statutory guidance requires Local Safeguarding Children Partnerships to undertake a review of restraint where a secure training centre operates within their area. The Youth Custody Service (YCS) also conducts Independent Reviews of Restraint.

The 2025 Partnership Review of Restraint was led by Thames Valley Police (TVP) and included representatives from Central and North West London NHS Foundation Trust (CNWL), Milton Keynes City Council (MKCC), Bedfordshire, Luton and Milton Keynes Integrated Care Board (BLMK ICB), and Milton Keynes University Hospital (MKUH). The TVP Community and Diversity Officer supported the panel, providing expertise on proportionality.

The review comprised a voluntary questionnaire for children, analysis of performance data, and a site visit. During the visit, panel members engaged directly with staff and children, followed by a separate meeting with Barnardo's.

At the time of the review, 67 children were resident at Oakhill Secure Training Centre (60 males and 7 females). The cohort was ethnically diverse: 35.9% White, 31.1% Black, 7.8% Asian, and 25% Mixed ethnicity. White children accounted for 47.1% of restraint incidents, indicating a higher proportion of involvement. However, the panel noted that this was significantly influenced by multiple incidents involving a small number of individuals, particularly two females. As a result, disproportionality affecting children from non-White backgrounds could not be conclusively ruled out.

Oakhill identified challenges in supporting neurodivergent children, particularly where diagnoses were made after admission. This also impacted the data; analysis showed that 82% of use-of-force incidents involving neurodivergent children related to White children.

Positively, Oakhill reported a 62.9% reduction in self-harm incidents between December and March. While acknowledging that self-harm data can be influenced by a small number of individuals, the panel was satisfied that appropriate measures had been implemented to address this issue.

Previous reviews have identified staff attrition as a key risk factor, given its impact on the quality of de-escalation and use of force. During the reporting period, Oakhill reported a 77% retention rate among staff employed for 12 months or more, indicating that recruitment and retention strategies are beginning to have a positive effect. There had been a 42% decrease in violent incidents in the three months – December 2024 - March 2025.

Assurance was not provided in the data presentation about levels of use of force incidents as data did not correlate, however volume did seem consistent month on month apart from a three-month peak between October and December 2024. Better reporting has been requested for the next review and assurance was requested and provided from the YCS following their independent review of restraint.

Assurance was not fully achieved in relation to the data presentation on use of force, as inconsistencies within the data limited the panel's ability to draw firm conclusions. However,

overall incident volumes appeared broadly consistent month on month, with the exception of a peak between October and December 2024. Improved data quality and reporting has been requested for the next review. Subsequent assurance was sought from, and provided by, the Youth Custody Service (YCS) following their independent review of restraint.

The panel received assurance that recommendations from the previous year's review had been incorporated into the centre's improvement plan. This included the introduction of on-call healthcare management overnight, improved processes for notifying hospitals in advance when a child requires treatment to support a more trauma-informed response, and the involvement of safeguarding staff in post-restraint debriefs where a referral has been made. However, improvements to the quality and presentation of restraint data remain outstanding.

Recommendations arising from the most recent review include prohibiting the routine deployment of safeguarding officers to frontline operational roles to mitigate potential conflicts of interest, strengthening the child-focused approach within post-restraint debriefs, and consideration of enhanced training on neurodiversity for staff.

Adult Benchmarking Exercise

The Care Act 2014 and accompanying statutory guidance requires Safeguarding Adult Boards to assure themselves of the effectiveness of local safeguarding arrangements. One way this is achieved is through adult safeguarding benchmarking exercises, which enables the partnership to compare performance, identify areas for improvement, and demonstrate accountability across partner agencies. The purpose of the benchmarking exercise is to provide assurance that statutory safeguarding duties are being met, to identify strengths and areas for development, to support accountability by evidencing good practice across the partnership, and to inform future planning, including training, policy development, and strategic priorities.

The 2025 Adult Benchmarking Exercise was led by MKCC Adult Social Care (ASC) and Central and North West London NHS Foundation Trust (CNWL) and included representation from Milton Keynes City Council (MKCC), Milton Keynes University Hospital Foundation Trust (MKUHFT), Community Learning Milton Keynes, South Central Ambulance Service (SCAS), and Thames Valley Police (TVP).

The exercise comprised a questionnaire completed by nominated practitioners and managers across partner agencies, focusing on how organisations capture and respond to the voice of the service user. This was followed by a multi-agency practitioner event and a separate managers' event, where attendees reviewed the findings and explored themes arising from the responses.

The benchmarking process identified strengths in partners' commitment to embedding the principles of Making Safeguarding Personal (MSP), with practitioners reporting efforts to actively engage individuals in decision-making and to tailor safeguarding responses to reflect personal outcomes. Feedback from the practitioner event highlighted positive examples of relationship-based practice and the importance of building trust to support engagement with adults at risk.

The exercise also identified areas for development. These included inconsistencies in how the voice of the adult is recorded within case records and variation in how clearly an individual's wishes and desired outcomes are reflected in safeguarding plans. Practitioners also reported challenges in capturing and evidencing the voice of individuals where there are communication barriers, complex needs, or fluctuating capacity.

From a management perspective, there was recognition that while frameworks and policies supporting person-centred practice are well established, further work is required to ensure consistent implementation across agencies. Opportunities were identified to strengthen supervision, improve oversight, and enhance quality assurance processes to provide greater assurance that the voice of the adult is influencing safeguarding decisions and outcomes.

Overall, the exercise provided assurance that partners are committed to promoting a person-centred approach within safeguarding practice. However, assurance was not fully achieved in relation to the consistency of recording and evidencing the voice of the service user across agencies. Strengthening this area remains a key priority for the partnership.

As a result of the benchmarking exercise, partners agreed a number of actions, including reinforcing Making Safeguarding Personal through targeted training, strengthening audit activity to focus on evidencing the voice of the service user, making the Inter-Agency Adult at Risk Management procedure more accessible to partner agencies, and improving recording practices to better demonstrate how individuals' views and outcomes are reflected in safeguarding interventions.

Section 11 Audit

Section 11 of the Children Act 2004 places a responsibility on statutory agencies to have arrangements in place to safeguard and promote the welfare of children. Section 11 audits provide assurance that statutory agencies are meeting these duties and have effective safeguarding arrangements in place. In Milton Keynes, lines of enquiry are informed by both local and national learning, supporting a reflective approach and enabling partners to learn from one another to promote best practice for children and families.

The 2025 Section 11 audit process was led by Thames Valley Police (TVP) and Children's Services, with participation from key safeguarding partners including Children's Services, Thames Valley Police, Oakhill Secure Training Centre, Milton Keynes University Hospital (MKUH), Central and North West London NHS Foundation Trust (CNWL), Buckinghamshire Fire and Rescue Service and Adult Social Care.

The audit comprised agency self-assessment against Section 11 requirements, supported by a partnership approach to review and challenge. This created an opportunity for partners to reflect on their safeguarding arrangements, share learning, and identify both strengths and areas for further development within a supportive but robust environment.

The audit identified areas of strength across the partnership, including clear organisational commitment to safeguarding, established policies and procedures, and evidence of multi-agency working to support children and families. Agencies demonstrated awareness of their statutory responsibilities, with safeguarding embedded within governance structures and operational practice.

The process also identified areas for development. These included variability in how consistently safeguarding policies are implemented in practice, differences in training uptake and recording, and opportunities to strengthen assurance processes, particularly in evidencing the impact of safeguarding arrangements on outcomes for children. Some agencies also identified the need to further embed learning from local and national reviews into frontline practice.

Overall, the Section 11 audit provided assurance that safeguarding arrangements are in place across partner agencies and that there is a strong commitment to protecting children. Assurance was not fully achieved in relation to the consistency of implementation and evidencing impact across all agencies.

As a result of the audit, partners agreed a number of actions, including strengthening quality assurance frameworks, improving oversight of safeguarding training and compliance, and enhancing mechanisms and early help to evidence how safeguarding activity improves outcomes for children. The partnership will continue to use Section 11 as a key tool for learning, challenge, and continuous improvement.

Closing reflections

The MK Together Safeguarding Partnership has continued to demonstrate strong, effective multi-agency working throughout 2025–2026, with a clear commitment to protecting children and vulnerable adults across Milton Keynes. Significant progress has been made against the partnership's strategic priorities, particularly in embedding a whole-family approach, strengthening early identification and prevention, and improving the consistency of multi-agency responses.

There is some evidence of impact across the system, including reductions in child protection plans, re-referrals and children entering care, alongside improved outcomes for adults through Making Safeguarding Personal. Increased safeguarding referrals indicate greater awareness and earlier recognition of risk across partner agencies.

The partnership has strengthened its governance arrangements and learning culture, and continues to improve use of data, enabling a more proactive and intelligence-led approach to safeguarding. The voices of children and adults are increasingly informing practice and service development, and there is a growing emphasis on trauma-informed, equitable and person-centred approaches.

Partners recognise that challenges remain, including ensuring greater consistency in practice, strengthening data sharing and integration, and evidencing impact across the system. Continued focus is required to embed early intervention approaches, improve transitions between services, and ensure that the voices of children and vulnerable adults consistently shape decision-making across all agencies.

Looking ahead, the partnership will build on its strong foundations by further embedding integrated working, strengthening quality assurance and performance frameworks, and utilising a developing Partnership Safeguarding dataset to better understand risk, measure outcomes and drive continuous improvement. The partnership remains committed to ensuring that all individuals in Milton Keynes are seen, heard and protected.

Appendix A

Agency attendance – MK Together Safeguarding Partnership meetings 2025-2026

Agency	April '25	July '25	Oct '25	Jan '26
Milton Keynes City Council	✓	✓	✓	✓
Thames Valley Police	✓	✓	✓	✓
Bedfordshire, Luton and Milton Keynes Integrated Care Board	✓	✓	✓	✓
Independent Scrutineer	✓	✓	✓	✓
Bucks Fire and Rescue Service	✓	✓	-	-
Central and North West London NHS Foundation Trust	✓	✓	✓	✓
HMP Woodhill	✓	-	-	-
Milton Keynes University Hospital Foundation Trust	✓	✓	✓	✓
National Probation Service	✓	✓	-	✓
Oakhill Secure Training Centre	✓	-	✓	✓
Public Health, Bedford and Milton Keynes	✓	✓	✓	✓
VCSE representative	-	✓	✓	✓

Appendix B

Agency Contributions for 2025-2026

	Children's	Adults	Total
BLMK Integrated Care Board	-51,482	-14,300	-65,782
Thames Valley Police	-18,595		-18,595
National Probation Service		-4539	-4539
MK University Hospital Foundation Trust	-1,974	-3,250	-5,224
G4S Care and Justice Service (UK)	-1,974		-1,974
CNWL MK	-1,974	-3,250	-5,224
Police and Crime Commissioner (via TVP)		-7,800	-7,800
Bucks Fire & Rescue Service		-650	-650
MK City Council incl Public Health	-107,504	-41,500	-149,004

Summary of 2025/2026 End of Year Budget Position

2025/2026 Actuals		
Income	Brought forward from 2024/2025	-210,485.38
	Contributions	-258,792
Expenditure	Employee costs	227,777.32
	Independent Chair/Scrutineer	15,334
	Review activity costs	16,896.50
	Website, policies and procedures	8,837.04
	Miscellaneous	321.24
	Total carried forward to 2026/27	200,111.28

Appendix C

MK Safeguarding Partnership Decisions and Actions:

Date	Decision	Group	Action
2/4/25	Partnership induction to be developed following feedback from Section 11 audit	Delivery	Leads from each agency to develop and deliver a six-monthly partnership induction to ensure all new colleagues are aware of local pathways and interventions.
4/4/25	Safeguarding Partnership to formally discharge the duties of the Community Safety Partnership	MKTSP	SaferMK to be stood down, MK Together handbook to be updated to reflect this change.
24/4/25	Preparing for Adulthood Protocol adopted	Assurance	Minor amendments to be made and then distributed to the partnerships for embedding within agencies. Assurance Group will audit the implementation.
24/4/25	Updated ASB for Adults at Risk which now aligns with Inter-Agency Adults at Risk Polity adopted	Assurance	Circulate to partners and add to website
24/4/25	Immobile Children Pathway adopted	Assurance	Circulate to partners
26/6/25	Implementation of Families First model to continue to report to Assurance for oversight	Assurance	Children's Services to lead on steering group.
26/6/25	Acknowledged increased demand on adult social care due to levels of referrals and agreed to put mitigation in place	Assurance	Adult Social Care to work with emergency service partners to ensure they understand thresholds for appropriate reporting and referrals for adult safeguarding concerns.
26/6/25	Reviewed Adult Safeguarding Policy adopted	Assurance	Partners to embed within their agencies
25/7/25	Baroness Casey national report recommendations to be shared across the partnership – formal response not required	MKTSP	Full report to be sent to MKSP for review within agencies
25/7/25	Combating Drugs Strategy adopted	MKTSP	Public Health to lead on implementation of strategy and report to MKTSP

1/10/25	Agreed more work is needed to understand the local non-domestic Violence Against Women and Girls (VAWG) local picture	Delivery	Task and Finish group to be established to review data – completed and extended for 12 months.
24/10/25	Oakhill STC to provide regular updates to MKSP and Assurance Group about improvements, progress and developments	MKTSP	Identify G4S representation for Assurance Group
5/11/25	Refreshed partnership competency framework adopted	Delivery	Circulate and add to website
3/12/25	Local concealed pregnancy guidance is fit for purpose however practitioners would benefit from a simple one-page flowchart	Delivery	One-page flowchart to be developed to compliment current policy
3/12/25	Homicide timeline training recently attended my children's services colleagues would be beneficial to all partners	Delivery	Funding to be established and training organised for colleagues across the partnership.
18/12/25	Accepted learnings from thematic rapid review into deaths of three individuals with multiple disadvantage and non-engagement with services	Assurance	Task and Finish group to be established to review quick time learnings and recommend changes to local practice in anticipation of learning from commissioned thematic SAR.
16/1/26	Endorse the development of a local guidance for managing drug harm incident clusters	MKTSP	Public Health to produce guidance which will include out of hours arrangements and involvement of local resilience forum.
16/1/26	To explore governance structures around local processes for reducing reoffending to identify any gaps	MKTSP	Task and Finish Group to be established that will report to Delivery, recommendations to come back to MKTSP.
16/1/26	Agency contributions to the partnership will remain at the current level	MKTSP	Agencies to continue with current partnership financial contributions
19/2/26	Update Missing Children Strategy Adopted	Assurance	Strategy to be circulated and embedded within agencies.
19/2/26	Recommendations from non-engagement task and finish group agreed	Assurance	Task and Finish group simplify IARM process for partners and run a reflective practitioner session on three live current cases.