

# THE SOUTHPORT INQUIRY

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## OPENING STATEMENT OF LANCASHIRE COUNTY COUNCIL

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### **Introduction**

1. These submissions are made on behalf of Lancashire County Council (“LCC”)<sup>1</sup>. Within them LCC seeks to assist the Inquiry in respect of the Terms of Reference and keeps clearly in mind the guidance of the Chair in the opening statement. On 29 July 2024 AR committed horrific acts of murder and attempted murder. LCC adopts the recognition of the Chair that ordinary language cannot adequately express the enormity of those crimes. LCC and all those who represent it express their profound sympathy for the families of the three young, vibrant girls whose lives were callously taken and for the children and adults who were injured and traumatised in the attack. We recognise that the impact of these awful crimes radiates widely, changing the lives not only of those who were at the Hart Space, but of their families and friends; also traumatising the wider community. We are conscious that the brevity and focus of these submissions means much will be said about AR and very little about the children, adults and families who are at the centre of this Inquiry. We are sorry that this must be the case. We would like to reassure those affected by AR’s crimes that they are always in the thoughts of LCC and those who represent them. LCC is keen to avoid platitudes. Instead it gives a sincere commitment to assist the Inquiry in its important work.
2. LCC emphasises its belief that this Inquiry is important. In Lord Anderson’s review “Lessons for Prevent”<sup>2</sup> he describes the nature and complexity of the growing threat of “violence fascinated individuals”: those without any clear ideology but who are at risk of committing extreme violence. As LCC explains below, although it was understood that AR presented risk to others, his risk was not seen in this way. Violence fascinated individuals were not recognised in the local authority context nationally during LCC’s involvement with AR. There has been significant development in the national understanding of the risks of violence fascinated individuals more recently. Further, recognition and understanding of the extent and nature of youth violence, and therefore

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<sup>1</sup> LCC is grateful to the Inquiry for granting its request to provide an opening statement that exceeds the 15 page limit, recognising the complexity of its involvement with AR over a period of five years.

<sup>2</sup> Chapter 5, July 2025

the response required from agencies who have statutory obligations to safeguard children, has grown exponentially in recent years, in particular since the pandemic<sup>3</sup>.

3. These points connect to the core of the work of this Inquiry. There are complex questions about how agencies must work together to address these risks. The education and social care systems are under strain as demands upon them have expanded beyond their traditional roles of educating and safeguarding children from abuse and neglect. Young people present with increasingly challenging problems requiring multi-agency response: exploitation, radicalisation and extremism, youth violence and knife crime, online harm, mental health crises, poverty, housing instability and parental substance misuse. Social care - and children's social care in particular - undoubtedly has an important safeguarding role but it works within a statutory framework that is focused primarily on risks *to* a child rather than risks presented by a child. Its thresholds for intervention are rigid and not well suited to addressing risks such as extremism, which might not meet criteria for statutory intervention unless linked to other safeguarding concerns. A robust multi-agency structure is required in which planning and intervention is led by the agencies with appropriate expertise. Education and social care have an important role in safeguarding, dealing with children in need day to day, trying to manage them with the resources they have available, but they are often not the agencies with expertise to lead on these cases and that responsibility should not be placed on them by default.
4. These observations are not made defensively but to assist the Inquiry. LCC in this opening statement identifies candidly points when it considers its response to AR could or should have been managed differently. However, in order for this Inquiry to be an engine for change, it is necessary to acknowledge the complexity of identifying and understanding the nature of the risk posed by AR - in particular its latency – and the multi-agency input required to understand, assess and respond to it.
5. The structure of these submissions is:
  - a. A brief overview of the nature of LCC and its role in this Inquiry;
  - b. A summary of key legislation and guidance;
  - c. A summary of key events with reflections;
  - d. Improvements;
  - e. Conclusions about LCC's role.

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<sup>3</sup> See for example the conclusions of the JTAI report "Multi-agency responses to serious youth violence: working together to support and protect children" dated 20 November 2024 ("the JTAI report")

### **Nature and involvement of LCC**

6. LCC is one of the largest local authorities in the country, providing a wide range of services to those in its area. Between 2019 and 2023 AR and his family had contact with the following departments: Education (including Inclusion and SEND); Children’s Social Care (“CSC”); Child and Youth Justice Services (“CYJS”); Child and Family Wellbeing Service (“CFW”) (also known as Early Help (“EH”)) and Adult Social Care (“ASC”). Evidence has been provided about LCC’s role in the Prevent scheme, albeit LCC had no involvement with AR because his referral was not accepted by the police.
7. LCC has provided corporate statements from each department because this is the best way to provide appropriately informed and insightful evidence for the important work of Phase 1. LCC is however one organisation. Education, CSC and CYJS all report to an Executive Director of Education and Children’s Services. Adult services report to the Executive Director of Adult Services. Those two roles report to the Chief Executive.

### **Overarching legislation and guidance**

8. Whilst some services provided by are LCC are discretionary, the majority with which this Inquiry is concerned are mandatory – stipulated and circumscribed by legislation. One of the themes in the evidence, when considering what was or was not done, is the relevant legislative duties and powers employees were acting within and the framework of national guidance that applied. The confines of this Opening Statement prevent detail, but LCC’s corporate witness statements address this. Different regimes apply to different departments. For the purpose of this Opening Statement and in respect of social services and multiagency safeguarding, LCC highlights the following:

#### *Children Act (“CA”) 1989 and Children Act 2004*

- a. S. 11 CA 2004 places duties on organisations including local authorities, NHS Trusts, the police and other public bodies to ensure their functions are discharged having regard to the need to safeguard and promote the welfare of children.
- b. S. 17 CA 1989 places a general duty on local authorities to safeguard and promote the welfare of children within their area who are in need and, so far as is consistent with that duty, to promote the upbringing of children by their families, by providing a range and level of services appropriate to those children’s needs. A child shall be in need if he is unlikely or achieve or maintain (or have the opportunity to achieve or maintain) a reasonable standard of health or development without the provision

for him of services by a local authority, or his health or development is likely to be significantly impaired without the provision of such services.

- c. S. 47 CA 1989 places on a local authority a duty to investigate where it has reasonable cause to suspect that a child in its area is suffering or is likely to suffer significant harm. The nature of the duty is to make such enquiries as they consider necessary to enable them to decide whether they should take any action to safeguard or promote the child's welfare.
- d. S. 31 CA 1989 enables a court to make a care or supervision order if it is satisfied that a child is suffering or likely to suffer significant harm that is attributable to the care given to him not being what it would be reasonable to expect a parent to give, or the child being beyond parental control.

#### *Working Together to Safeguard Children*

- e. Statutory guidance "Working Together to Safeguard Children" applies to all organisations and agencies who have functions relating to children. Two versions are relevant: the 2018 edition<sup>4</sup> and the 2023<sup>5</sup> guide.
- f. Working Together 2018 required strategic and senior leaders as well as frontline practitioners to take it into account.
- g. It mandated a "child centred approach" as fundamental to safeguarding, promoting the welfare of every child. It reminded all practitioners to follow the principles of the Children Acts 1989 and 2004 stating that the welfare of children is paramount and that they are best looked after within their families, with their parents playing a full part in their lives, unless compulsory intervention is necessary.
- h. It recognised the need for "early help" provision and distinguished between an early help assessment and statutory assessments required under the Children Act 1989<sup>6</sup>.
- i. It set out the services it anticipated would be available at different levels of need and required safeguarding partners (the local authority, a clinical commissioning group for the area and the police<sup>7</sup>) to have in place a published threshold document that set out local criteria for action<sup>8</sup>. The criteria must include provision for early help assessment; referral to social care for assessment and statutory services for children in need<sup>9</sup>; children where there is reason to suspect a child is suffering or

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<sup>4</sup> Working Together to Safeguard Children 2018 "A guide to inter-agency working to safeguard and promote the welfare of children" ("Working Together 2018") applied until 15 December 2023

<sup>5</sup> Working Together to Safeguard Children 2023 "A guide to multi-agency working to help, protect and promote the welfare of children" ("Working Together 2023")

<sup>6</sup> See Chapter 1: "Assessing need and providing help" Working Together 2018

<sup>7</sup> CA 2004 s. 16E

<sup>8</sup> See Chapter 1, para 16 of Working Together 2018

<sup>9</sup> S. 17 Children Act 1989

likely to suffer significant harm<sup>10</sup>; children subject to care and supervision orders<sup>11</sup> and children whom the local authority is required to accommodate<sup>12</sup>. In Lancashire this was known as the “Continuum of Need”.

- j. It stipulated how agencies should share information and work together.
- k. Between the 2018 and 2023 editions there was an expansion in the guidance generally. The sections on contextual safeguarding were lengthier<sup>13</sup>. Although it was recognised that children might be at risk of online abuse and also from the influences of extremism, neither edition recognised the particular risk of a fascination with violence, reflecting LCC’s understanding at the time.
- l. They set out what was expected of social services and other agencies when carrying out either statutory or non-statutory assessments.

#### *Serious Violence Strategy 2018*

- m. This Government strategy was issued in April 2018 and captured the thinking around serious violence at this time. Chapter 6, page 79 - “Taking action against social media encouraging serious violence” - is informative. The risks it considers are centred around glamourising gang culture, CSE, terrorism and extremism.

#### **Key events**

- 9. This is a summary of key events that occurred across almost five years, with LCC’s reflections upon them. The Inquiry will see that LCC acknowledges the following points:
  - a. There are times when LCC’s role in holding and monitoring the multi-agency plan around AR was not as robust as it should have been. In particular in 2020 when it is not clear in the CSC records whether CAMHS was delivering the interventions to AR it had agreed to provide in March 2020 and, if not, why not. This acceptance should be understood in the context of the detail in paragraphs 12 to 18 below.
  - b. In the spring of 2022 (i) AR should have been given continued support from CFW as he transitioned to Presfield School; and (ii) following the incident on the bus in

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<sup>10</sup> S. 41 Children Act 1989

<sup>11</sup> S. 31 Children Act 1989

<sup>12</sup> S. 20 Children Act 1989

<sup>13</sup> Risks to children from harm outside the home; see Chapter 1 §33 to 37 of Working Together 2018 and Chapter 2 §194 to 199 of Working Together 2023. WT 2018 described (a) “[s. 47] enquiries... should be initiated where there are concerns about all forms of abuse, neglect. This includes... extra-familial threats including radicalisation and sexual or criminal exploitation” p20; and (b) “threats can take a variety of different forms, including: sexual, physical and emotional abuse; neglect; exploitation by criminal gangs and organised crime groups; trafficking; online abuse; sexual exploitation and the influences of extremism leading to radicalisation” p22. The focus was on children being abused and radicalised by third parties rather than the risks the child might pose if fixated on violence.

March 2022 AR should have been referred to CSC and a multi-agency assessment should have been undertaken to identify intervention to meet AR's needs.

- c. The ASC SW did not complete a transitions assessment when she should have done, although the assessment was concerned with post-18 provision.

*Expulsion from the Range in October 2019 to 11 December 2019*

10. During this period:
  - a. AR was excluded from Range High School ("RHS") on 7 October 2019. He was 13 years old and a child in Year 8.
  - b. A police referral to MASH<sup>14</sup> led to AR being referred to Child and Family Wellbeing ("CFW"), LCC's early help provision<sup>15</sup>.
  - c. LCC's Education Department became involved via its Pupil Access Team, identifying alternative provision at a Pupil Referral Unit, Acorns, starting from 17 October 2019. This was intended to be short stay provision.
  - d. During his admissions meeting at Acorns AR was questioned about why he had a knife with him at RHS and told the headteacher, Ms Hodson: "to use it"<sup>16</sup>. She was troubled by this and considered he likely presented with undiagnosed ASD.
  - e. A number of important safeguarding incidents occurred at Acorns in November and early December 2019, during which AR was either found to be searching information about violent events online, or seeking to discuss violent images<sup>17</sup>.
  - f. As a result Acorns instigated a multi agency emergency review meeting that was held on 5 December 2019 and, following the agreement of all in attendance, a referral to Prevent<sup>18</sup> ("the First Prevent Referral") was made.
  - g. On 11 December 2019 AR carried out the attack at RHS.
11. LCC's reflections on this period are:
  - a. AR was appropriately placed at Acorns within the required timescale.
  - b. The referral to CFW was in line with the guidance of Working Together 2018 and local thresholds.

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<sup>14</sup> Multi Agency Safeguarding Hub; LC000003

<sup>15</sup> Its staff are known as Family Support Workers ("FSW"). They are not social workers. They deal with children whose needs are greater than those suitable for universal services (e.g. schools and GPs), but not sufficiently great that they require the statutory intervention of social services and the involvement of a social worker. They are often involved in assessing and supporting children in need (CIN) under s. 17 Children Act 1989. LCC considers that this referral was in line with Working Together 2018<sup>15</sup>

<sup>16</sup> See witness statement

<sup>17</sup> LC000017

<sup>18</sup> LC000004

- c. Acorns responded appropriately to the safeguarding incidents and the First Prevent Referral was properly made.

*12 December 2019 to 9 March 2020*

12. LCC was involved in three respects at this time: AR was referred to Children's Social Care ("CSC") by the Multi Agency Safeguarding Hub ("MASH")<sup>19</sup>. AR was being educated at Acorns. CYJS became involved later, when AR was to receive a referral order ("RO").
13. Key events were:
  - a. The first of a two-part multi agency strategy discussion<sup>20</sup> was held on Monday 16 December 2019 that was well attended. A decision was made for CSC, Prevent<sup>21</sup> and CAMHS<sup>22</sup> to carry out their initial assessments and for the police investigation to continue. There would be a further strategy discussion in January.
  - b. The second multi agency strategy discussion was on 6 January 2020<sup>23</sup>. AR had been seen by CSC and CAMHS. No safeguarding risks to him had been identified but he had outstanding support needs. AR was on the cancellation list for an autism assessment. Prevent felt there were no issues for its programme. AR was not attending Acorns because they wanted a risk assessment. A request was to be made for an EHCP<sup>24</sup>. CSC were to complete a Child & Family ("C&F") assessment "and this will comment on the risk he poses and the risks he is subject to. This will need to include information from partner agencies and specifically the appointment with FCAMHS which will comment on the risk he may pose". The case remained subject to an ongoing assessment in accordance with Working Together 2018 and was not escalated to a s. 47 Children Act 1989 assessment at this time.
  - c. The FCAMHS meeting was on 21 January 2020<sup>25</sup>. The advice given by FCAMHS at that meeting was set out in a subsequent letter (see below). It is LCC's understanding that FCAMHS did not see or assess AR directly. Ms Hodson felt that Mr Hicklin of FCAMHS did not take her concerns seriously.
  - d. On 3 February 2020 AR was closed to Prevent.
  - e. On 7 February 2020 the CPS charged AR.

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<sup>19</sup> LC00014

<sup>20</sup> LC000019 See Working Together 2018 p33 onwards

<sup>21</sup> Counter Terrorism Policing

<sup>22</sup> Child and Adolescent Mental Health Services

<sup>23</sup> LC000023

<sup>24</sup> Education Health and Care Plan

<sup>25</sup> LC000020

- f. Mr Hicklin of FCAMHS wrote a letter to CAMHS dated 11 February 2020<sup>26</sup>. He emphasised the importance of an ASD diagnosis to categorise and manage AR's high-risk behaviour and the need for input from the paediatric team to contribute to the risk management plan. Identification of and integration into an appropriate educational provision was said to be the most important factor in managing the risk posed by AR. He noted previous risk management strategies had not worked, such as the parents hiding knives. He recommended AR would benefit from psychologically informed interventions to address his high risk behaviour that took into account his likely ASD. CAMHS was to explore and report on delivering those.
- g. On 14 February 2020 Mr Morgan of CAMHS wrote to the social worker<sup>27</sup> saying "AR's current convictions seem to be in line with [ASD rigid] thinking and lack of empathy". His lack of empathy and understanding in relation to the assault offence was said to be "comorbid with ASC", with a need to attack a person to deal with his emotions. Mr Morgan felt AR was aware of his behaviour and consequences, the possibility of his ASD should be taken into account with regard to conviction and sentencing, he did not present with any mental health concerns, he did not pose safeguarding issues to those in the family home and he felt with time AR would learn to understand his emotions and regulate them within situational contexts.
- h. AR pleaded guilty to charges of assault occasioning ABH and offences relating to possession of the knife on 19 February 2020, receiving a 10 month RO<sup>28</sup>.
- i. Ms Jameson, social worker, completed her C&F Assessment on 19 February 2020<sup>29</sup> and wrote a Child / Young Person's Plan effective from 20 February 2020<sup>30</sup>. Concerns were raised about emotional regulation, social isolation and exposure to violent content online. Traits consistent with ASD had been identified by professionals across agencies. AR presented with limited emotional awareness and regulation skills, limited empathy and literal thinking. He struggled with anxiety, low self esteem and sensory sensitivities. The incident was serious but he had no prior history of violence or criminal behaviour. He was thought to have engaged well with professionals and shown signs of insight and remorse during the assessment period. His parents were supportive and proactive, maintaining what was thought to be a stable and nurturing home environment. The SW concluded AR was not at risk of significant harm, but that he had needs around education, emotional development and neurodevelopment support that were significant and required

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<sup>26</sup> MERP000178

<sup>27</sup> LCC000029

<sup>28</sup> LC000025

<sup>29</sup> LC000237

<sup>30</sup> LC000032

multi-agency intervention. The assessment concluded that the family would benefit from support under Level 3 on LCC's Continuum of Need, indicating a need for a CIN plan. As for risk to others, she incorporated the advice of FCAMHS, setting out Mr Hicklin's recommendations from his letter, noting Mr Morgan was to report on how this need was to be met and attaching the letter to her assessment.

- j. On 4 March 2020 a CIN meeting was held. The SW did not keep a record of this meeting. Acorns made a record on CPOMS<sup>31</sup>. Mr Morgan of CAMHS did not attend but Mr Hicklin was present and reported that he had been updated by Mr Morgan "and that there were no issues apart from possible undiagnosed ASC". At the meeting a decision was made to step down AR from CSC to CFW for early help.
- k. The closure record<sup>32</sup> identified that offending behaviour was being addressed by youth offending, AR had been enrolled at Acorns to meet his educational needs, his ASD needs were to be assessed, CAMHS was supporting him around his emotions.
- l. On 9 March 2020 the parents requested an EHCP from SEND<sup>33</sup>.

14. LCC makes the following observations about this period:

- a. There was an immediate appreciation that the incident at RHS and the concerns reported by Acorns in the period before it were serious and required a multi-agency response in accordance with Working Together 2018.
- b. There was a recognition that there were unusual features to AR's presentation and the attack at RHS that required further investigation and analysis.
- c. There was an understanding of the need to consider the risk posed by AR to others. It was recognised that AR did pose a risk, framed in the context of his attack at RHS: his perception of being bullied, his quest for retribution and his rigidity of thought / lack of empathy / insight, understood to be due to his undiagnosed ASD.
- d. There was a difference of opinion between Acorns and CAMHS / FCAMHS about the level of risk posed by AR.
- e. A plan was put in place in March 2020 as follows:
  - i. Prevent had considered the referrals and been involved in the multi-agency response to the RHS incident. Prevent had decided to take no further action. To LCC this meant that those concerns had been considered by the appropriate agency and that decision was understood to be reassuring.
  - ii. AR was referred to the NHS for an assessment to diagnose and advise on ASD.

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<sup>31</sup> LCC001346

<sup>32</sup> LCC000041

<sup>33</sup> LCC000034

- iii. An EHCP was to be requested so that his SEND and wider education needs could be assessed and understood.
  - iv. CYJS would address the issues in the RO around knife crime and violence.
  - v. CAMHS was to meet AR's psychological needs around the risk he posed to others.
  - vi. CFW was to provide support to address his needs around social isolation and family support.
15. In light of the above LCC offers the following reflections:
- a. The CSC response to the incident at RHS and the plan of March 2020 was in line with the guidance contained in Working Together 2018 and the local threshold arrangements.
  - b. The view taken by CSC and the multiagency team was that AR did not meet the s. 47 threshold. This was a reasonable conclusion based on that framework and what was known at the time.
  - c. CSC's role in decision making must be considered in view of the following factors:
    - i. CSC's assessment and analysis of AR followed the structure set out in Working Together 2018. Working Together 2018 did not contain guidance on assessing the risk children posed to others and how this should be done.
    - ii. LCC assessment documents were in line with national guidelines but did not direct the SW explicitly to consider risks to others or what factors to take into account in that assessment. LCC is not aware of any national tools available for SW for this purpose either at the time or now. More recently LCC has worked to provide SWs with tools to assist them to consider risk but they still rely on CAMHS, Prevent, the police and CYJS for questions of risk requiring their expertise (see below).
    - iii. Assessment of risk and interventions to manage the risk posed by a child such as AR requires specialist advice from agencies with appropriate expertise in neurodevelopmental issues and / or extremism. This advice is shared through the multiagency framework. It is then recorded in the multiagency plan and forms an important part of interventions delivered by the partnership.
    - iv. In practice this meant CAMHS would provide psychological interventions, Prevent would provide the expertise around extremism, the NHS would address the autism assessment, Education would address schooling and EHCP and CSC / CFW would meet the other identified needs of the family.
  - d. It is accepted that there were issues with record keeping; in particular there is no CSC record of the meeting of 4 March 2020. As a result the rationale for stepping

down to CFW is not clearly recorded. The closure summary did set out that appropriate services were in place to meet the needs identified in the assessment.

- e. With hindsight
  - i. A clearer plan could have been put in place to assist Acorns with safety concerns, e.g. parents regularly checking knives and ensuring AR did not leave the house with one; parents and school monitoring AR's internet usage and using parental controls; ensuring the partnership was clear about AR's engagement with therapy; diversional activities to encourage AR to focus elsewhere and the school making reasonable adjustments. Some of these measures were subsequently put in place by Acorns.
  - ii. It is accepted that a more robust multi-agency plan and monitoring should have been devised to address risk. This should have also addressed who would work with AR on his interest in violence, internet safety and to divert AR's attention into something interesting that did not involve his interest in violence. In time Acorns worked with AR on a number of these points.
  - iii. It is not clear to LCC what in fact CAMHS, FCAMHS and paediatrics did following the meeting in March 2020, occurring as it did just days before the first Covid19 lockdown.

*Late spring / summer 2020*

- 16. During this time:
  - a. Lockdown happened in March 2020. It disrupted the delivery of services and attendance at education settings. TAF meetings were initially unable to take place.
  - b. AR was initially not attending Acorns because of concerns about the risk he posed to students and teachers but work was being sent home to him.
  - c. He was subject to a RO under CYJS and open to CFW. The RO set the terms for CYJS involvement: focused on carrying a knife<sup>34</sup>. It did not refer to a general fascination with violence or online behaviour.
  - d. AR engaged poorly during lockdown with Education and CFW. He was open to CFW for 14 weeks and many attempts were made at contact with intermittent success. He engaged better with CYJS but contact was initially by telephone.
  - e. In March 2020 CYJS assessed AR's likely risk of re-offending and serious harm as "medium"<sup>35</sup>. In April CYJS carried out an initial risk assessment using the Youth Justice Board ("YJB") tools<sup>36</sup>. Under "risks and concerns" AR scored "medium" for

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<sup>34</sup> LCC000025

<sup>35</sup> LCC000452

<sup>36</sup> LCC000447

ROSH judgment, 48% on the Youth Offender Group Reconviction Scale (“YOGRS”)<sup>37</sup> and “medium” for likelihood of reoffending.

- f. In May 2020 an EH Plan was prepared and on 19 May 2020<sup>38</sup> a TAF meeting took place<sup>39</sup>. CAMHS did not attend.
- g. At the meeting CYJS shared their assessment of risk as medium, but reduced because of lack of imminence due to lockdown (AR was at home). CFW proposed to close AR to their service because face to face meetings were prohibited, AR was not engaging remotely and the service was consensual.
- h. There was an understanding that there was no role for Prevent because AR was deemed not to be a risk.
- i. After the meeting Acorns emailed the TAF<sup>40</sup> about the concern that bringing AR back to school would reintroduce imminence and increase risk. The email provided comments about the father’s attitude being a barrier to progress with AR.
- j. CFW answered Acorns saying there was supportive parenting. CYJS explained and stood by their risk assessment as consistent with the YJB tool used to assess risk, but said Education must do their own.

17. LCC observations about this period are:

- a. Ms Hodson is critical of other professionals.
- b. The differing opinions expressed by both Acorns and CYJS were probably valid and driven by their different perspective. The email from Acorns showed real insight into AR and his family and rightly raised the question of imminence. The CYJS assessment was in line with national guidelines.
- c. CAMHS did not attend these TAF meetings. They were not part of the conversation about how AR’s needs and risks should be managed.
- d. As it turned out, both CFW and CYJS were right to the extent that AR went on to return to Acorns without incident of the sort Ms Hodson was concerned about, but Ms Hodson was also probably right that AR’s risk was heightened and he lacked a clear risk management plan at this time.
- e. AR was closed to CFW because the need identified for them to work on was social interaction and direct work could not be completed during lockdown. There were no factors to suggest it was unsafe to close to AR temporarily nor sufficient factors suggesting that AR needed to be stepped up to CSC instead.

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<sup>37</sup> An algorithm that estimates risk of re-offending based on certain variables

<sup>38</sup> LCC000289

<sup>39</sup> LCC000054; LCC001018

<sup>40</sup> LCC001479

18. In light of the above, LCC's reflections are:
- a. As above, Acorns could have been better supported by the multi-agency plan in managing the risk posed by AR. This impacted directly on Acorns as its staff considered how AR could be managed safely at school.
  - b. It is not clear to LCC what if any interventions CAMHS were offering to AR during lockdown. If these were not being offered then it may be that the Inquiry considers his risk was heightened.
  - c. LCC had a role in monitoring the updates provided at the TAF and this should include updates from CAMHS.
  - d. As above, schools, social workers and FSW are reliant on assessments by CAMHS, the police and CYJS to assess the risk posed by a child such as AR, tied up as they were with his neurodivergence and issues of criminal behaviour.

*Summer 2020 to January 2021*

19. This was a more settled period.
- a. AR was invited to return to school from June 2020, but his parents declined.
  - b. AR's father asked that EH support be closed to AR until he returned to school. Acorns were concerned about this and wrote to FSW Ms Fontaine<sup>41</sup>. On reflection there was substance to Acorns' concerns but CFW options were limited due to the consensual nature of the service. AR re-opened to CFS on 14 September 2020 as planned when he returned to school.
  - c. CYJS continued to work with AR and his risk assessment was medium during the summer<sup>42</sup>. His CYJS worker changed<sup>43</sup> and the new worker was able to deliver some interventions in person with the easing of lockdown rules. CYJS interventions gradually reduced in line with national guidance.
  - d. AR returned to school in September 2020. As part of the CYJS process Acorns views were sought and in October 2020 Ms Allred reported that AR was doing well and they considered the risk was steadily reducing<sup>44</sup>.
  - e. On 28 October 2020 a CAF Assessment was completed by CFW<sup>45</sup>. AR was struggling with anxiety but had decided not to continue with CAMHS. There had been no violent incidents, no safeguarding concerns and AR was attending school.

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<sup>41</sup> LCC001346/51

<sup>42</sup> LCC000448

<sup>43</sup> LCC000448

<sup>44</sup> LCC001480

<sup>45</sup> LCC000306

- f. A TAF on 4 November 2020 was positive<sup>46</sup>. The plan was to reintegrate AR to the Y10 class. An EH Plan was prepared focusing on managing anxiety.
- g. CYJS AssetPlus risk assessment was updated in December 2020<sup>47</sup>. AR scored “low” for ROSH judgment under “Risks and Concerns”, 36% for YOGRS and “low” for likelihood of reoffending. This was in line with national guidance.
- h. On 5 January 2021 the second national lockdown began.
- i. The Referral Order Final Panel Report was dated 18 January 2021<sup>48</sup>. A Referral Order Contract Exit Plan was created at a final meeting on 19 January 2021<sup>49</sup>.
- j. On 19 January 2021 a TAF meeting took place<sup>50</sup>. AR had declined a referral to CAMHS. All the actions on the CFW plan had been completed; therefore there was a plan to close AR to the service. School reintegration was to continue once Covid19 restrictions eased. An EH Plan was prepared.
- k. On 19 January 2021 during his last supervision with CYJS AR disclosed that his father had hit him<sup>51</sup>. The CYJS worker considered a referral to CSC. He discussed the incident with the father who said that AR had assaulted him. He shared the information with CFW and Acorns. Following investigation the agencies decided that no further action would be taken. AR closed to CYJS on 24 January 2021.

20. LCC’s observations about this period are:

- a. AR’s engagement with CFW, CYJS and Acorns had improved, albeit impacted by the periods of national lockdown.
- b. The views of the various agencies on risk became more aligned and there was a general opinion that the risks posed by AR had reduced.

21. LCC’s reflections are:

- a. The reflections on the CYJS service are set out in the corporate statement.
- b. Overall LCC considers CYJS acted within national guidelines. Some issues are acknowledged with the quality of record keeping.
- c. AR did not satisfy the criteria for a high-risk assessment under YJB guidance. LCC considers that the reduction to low risk at the end of the RO was in accordance with the national framework, although LCC recognises that the bereaved, victims and their families may find this difficult to accept bearing in mind what AR went on to do.

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<sup>46</sup> LCC000085

<sup>47</sup> LCC000449

<sup>48</sup> LCC000089

<sup>49</sup> LCC000092

<sup>50</sup> LCC000310

<sup>51</sup> LCC000488

- d. In the corporate statement some reflections are given about the limitations of the CYJS service nationally: the RO objectives were in line with national guidance but were generic and lacked specific focus; lockdown had a challenging impact on the delivery of CYJS services; following YJB guidance CYJS risk assessments look at risk in the near future (6 months) not long term; and compliance with ROs turns on participation rather than benchmarked progress.
- e. With hindsight, more might have been done to work with AR on the issues in the First Prevent Referral, e.g. safety planning to assist parents with monitoring his search history. The focus of CYJS was on the terms of the RO which is the remit of the CYJS statutory intervention. AR had been referred to Prevent and that referral was not progressed. In the last five years there has been a growing awareness of risks of online harm and CYJS would now offer advice and safety planning. The Inquiry should be aware CYJS has no ability to monitor activity online unless this is a specific aspect of the offence.
- f. The Second Prevent Referral was received after the RO ended. It did not indicate immediate danger but could have been better explored in the “future behaviours” section. As the RO had ended, further action would not have been taken but if AR had been referred to Channel he could have been referred back to CYJS.

*Early 2021 to September 2021*

22. During this period:
- a. The Second Prevent Referral was made by Acorns on 1 February 2021<sup>52</sup>. CFW were notified of this and responded that AR was closed to the service.
  - b. On 16 February 2021 AR received a diagnosis of autism.
  - c. On 1 April 2021 AR was allocated to work with Samantha Steed of CAMHS.
  - d. On 22 April 2021 the Third Prevent referral was made<sup>53</sup>. It is not clear what CSC knew of this at the time.
  - e. In June 2021 AR’s father requested a Parent Carers’ Needs assessment pursuant to s. 17ZD of the CA 1989 (“the Carers’ assessment”)<sup>54</sup>. This was not a safeguarding referral in respect of AR, but of the parents’ needs as carers, that looked at whether the family was entitled to further funding for support needs.
  - f. The assessment was passed to a SW, Ms Haydock. She spoke with the parents and DR but could not persuade AR to engage in the assessment.

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<sup>52</sup> LCC000455

<sup>53</sup> LCC001399

<sup>54</sup> LCC000108

- g. In the summer of 2021 AR asked to see the Prevent referrals. It transpired in July 2021 that his father had shown them to him. The relationship between AR and Acorns began to deteriorate as a result of the referrals.
- h. On 18 August 2021 CAMHS reported to CSC that AR had disclosed physical aggression and emotional abuse at home. On the same day a SW, Ms Rhodes, visited and spoke to AR but he would only discuss his complaint. Tension with the father was clear and AR poured milk on his parents' bed while Ms Rhodes was there. No recent physical altercations between AR and the father were reported.
- i. On 7 September 2021 the carers assessment was completed<sup>55</sup>. Amongst other things the SW noted a recommendation by Acorns that AR would benefit from some social support outside of school: "a very skilled trusted professional to slowly build a rapport with AR at home for approximately 3-6 months as the main barrier for AR is distrust. [Ms Allred] felt it would take approximately 12 months for AR to be ready to access social activities and would need a graded approach." It was also noted that CAMHS were working with AR on graded exposure.
- j. The SW recommended that AR should have a carer once a week to support him to access the community. This recommendation was not accepted by the SW's manager who felt that needs could be met through CFW support<sup>56</sup>.
- k. On 20 September 2021 AR was referred to CFW with unmet social needs, education needs and dietary concerns<sup>57</sup>. In the referral to EH the SW did request direct support to help AR access the community but the view of Ms Allred about the skill and long term nature of the support needed was not included.

23. LCC's observations about this period are:

- a. Ms Hodson volunteers that the wording of the Second Prevent Referral could have been more robust, although it shared all the key information.
- b. At the time of the Second Prevent Referral a decision had been made to close AR to CFW but the process of closure was not complete. The closure was based on withdrawal of consent and therefore was consistent with Working Together 2018. LCC accepts that CFW could potentially have explored the need for wider family support, but addressing the issues within the Prevent referral was for the police.

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<sup>55</sup> LCC000110 LCC000247

<sup>56</sup> LCC000120

<sup>57</sup> LCC000115

- c. The Carers' assessment was completed on an incorrect form. The SW used a CAF Form, which says at the top that it is a safeguarding assessment. It was not a safeguarding assessment but the "reason for assessment" box is correct<sup>58</sup>.
- d. The assessment was of parental need and CSC did not have permission to carry out a CAF assessment. It could therefore only have done so with consent or if the relevant threshold under s. 47 CA 1989 was met.
- e. During the course of the Carers assessment the SW did not see AR. Two attempts to engage with him failed. There is an issue with record keeping because she did not keep notes of her attempts. AR was seen by Ms Rhodes on 18 August 2021 and Ms Haydock took into account what she had learned during that visit.
- f. Although the referral for the Carers' assessment was not in relation to safeguarding concerns and it was confirmed by the father that he did not have any, it is acknowledged that during the course of it the SW was made aware of a number of issues: the Prevent referrals, difficulties in the relationship with Acorns and the report of issues between AR and his father. The SW could have sought consent to carry out an assessment of AR under s. 17 CA 1989.
- g. Nonetheless the assessment shows the SW did in fact consider AR's needs in her assessment. She considered he had unmet needs around social isolation and diet, requiring a SEN placement and support for anxiety that he was receiving from CAMHS. There was a request for funding for a carer to support AR to access the community and attend social activities. AR was deemed to be on level 3 Continuum of Need and suitable for referral to the Family Intensive Needs Team, because the issues identified were to do with family support.
- h. It was recorded that a meeting should be held before being stepped down to EH to highlight concerns and unmet educational and social needs and how to address this, i.e. moving schools; if it was later deemed that AR needed further support within children's social care's remit, then the decision was to be reconsidered.
- i. CAMHS was continuing to work with AR at the time on graded exposure.

24. LCC's reflections are:

- a. So far as the SW was aware, Prevent had considered the referrals. As a result the issues in them had been assessed within that process. Prevent did not signpost AR to LCC to address any needs they had identified.

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<sup>58</sup> LCC is undertaking work to further improve support for children and families with SEND. The form for Carers Assessments is to be updated and the process for social workers to access it is being simplified

- b. The meeting between the SW and CFW did not take place because she left LCC before it could. A meeting was held between her manager and CFW.
- c. With hindsight it seems to LCC that the provision specified could have been more precise. The SW had appreciated a need for a support worker to work regularly with AR to address his social isolation. When the decision was made that this need could be met by EH through the TYS provision, more detailed recommendations about the duration of that provision and what issues it was to tackle were not translated into the EH plan. The planned meeting to discuss this did not take place with the SW. LCC considers the plan should have been for TYS to work with AR for at least six months and that the input of CAMHS would be beneficial to support the TYS worker to address socialisation as they were working on graded exposure to the community.
- d. LCC's position is that child protection processes were not engaged in this period. S. 47 requires the SW to act if they consider that there is reasonable cause to suspect that a child is suffering or is likely to suffer significant harm. CSC had investigated the disclosure reported by CAMHS and the wider carers assessment did not reveal other concerns of this nature. The support needs identified were around family support, not child protection.
- e. CFW had the resources to meet the identified needs, which were primarily around social isolation, diet and parenting.
- f. The s. 47 threshold was not even arguable met and a s. 17 CIN was not required.

*October 2021 to February 2022*

- 25. From October 2021 EH become involved.
  - a. On 5 October 2021 Louise Lewis, FSW, carried out an EH assessment<sup>59</sup> and on 2 November 2021 she completed an EH plan<sup>60</sup>. CFW were alive to the issues of the Prevent referrals and some of AR's extreme thoughts. They were aware though that two of the Prevent referrals had been closed with no further action and recognised the need to learn the outcome of the third.
  - b. AR was discussed in Ms Lewis's supervision<sup>61</sup>. Ms Lewis's supervisor, Sharon Barrett, had been involved with AR previously supervising other FSW. It was recognised that there were issues with the family's capacity for change and that they had received support in the past for the same concerns. It was recognised that key workers needed to build a positive relationship with AR to challenge his views. It

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<sup>59</sup> LCC000321

<sup>60</sup> LCC000324

<sup>61</sup> LCC000401

was also understood that AR was refusing school and spending 24 hours a day at home and he had no specialist placement.

- c. CFW proposed to bring in a worker from TYS<sup>62</sup>. AR was introduced to the worker, Mr Coughlan, on 3 November 2021.
- d. On 5 November 2021 a police incident occurred when AR reacted extremely causing damage when someone knocked on the door.
- e. The EH Plan was updated and more detail was recorded on 19 November 2021<sup>63</sup>.
- f. On 30 November 2021 a second police incident occurred. AR kicked his father in the leg causing no injury and threw a plate at a car parked on the driveway cracking the windscreen. On 6 December 2021 the police made a safeguarding referral.
- g. A TAF meeting took place on 7 December 2021<sup>64</sup>. Following updates from the relevant agencies it was felt that the plan was making small steps in the right direction and there were positives for the family.<sup>65</sup>
- h. On 15 December 2021 the final EHCP was approved.
- i. On 5 January 2022 it is reported to CFW that AR was not attending school.
- j. A decision was made on 7 January 2022 that AR would be stepped down from CFW once the TYS sessions are completed.
- k. On 11 January the EH Plan was updated again<sup>66</sup>. TYS had seen AR. CAMHS reported that AR had been seen by the psychiatrist and his medication was being reviewed. AR's sensory issues around food were being addressed and the parents had completed the Triple P parenting course and were waiting for Rising Rapids.
- l. Two safeguarding concerns were noted at Acorns on 21 and 26 January 2022 when AR was talking about the holocaust. As a result of Acorns' previous experience of Prevent they did not make referrals for them.
- m. Ms Lewis referred AR to the transitions team of ASC.
- n. A TAF meeting took place on 10 February 2022<sup>67</sup> and all the professionals present agreed AR could be stepped down from EH.
- o. There was a CFW supervision to consider AR<sup>68</sup>. It was felt he had made good progress and that the parents needed to take ownership going forwards, with minimum reliance on agencies. No safeguarding risks were identified. The main issue was the father relying on professionals to take on the parenting role.

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<sup>62</sup> LCC000226

<sup>63</sup> LCC000325

<sup>64</sup> LCC000327

<sup>65</sup> LCC000131

<sup>66</sup> LCC000331 LCC000927

<sup>67</sup> LCC000336

<sup>68</sup> LCC000409

- p. On 21 February 2022 the final TYS meeting took place.
- q. On 23 February 2022 a third safeguarding concern was logged by Acorns about comments made by AR about Jewish people.
- r. On 4 March 2022 AR was offered a place at Presfield Special School in Southport.
- s. On 7 March 2022 the case was proposed to close to CFW: all actions complete.
- t. On 11 March 2022 a TAF meeting<sup>69</sup> was attended by education, CAMHS and CFW. They agreed AR no longer required level 3 support. Ongoing support was to be managed through the EHCP. The father expressed concern about the case closing to CFW. Attendance issues at school were to be addressed by Presfield's attendance officer. The father was given the CFW contact number.
- u. The Episode was closed on 14 March 2022<sup>70</sup>.

26. LCC offers the following observations:

- a. The EH assessment of 5 October 2021 showed that the FSW had insight into AR including around his extreme thoughts and risks arising out of the Prevent referrals.
- b. The CFW team also recognised some key issues, questioning the family's capacity for change and recognising the need for key workers to build trusted relationships.
- c. The idea of involving TYS was a good one in terms of the interventions CFW could offer, but the direction to CFW given by CSC about the duration and nature of that support should have been more precise as explained above.
- d. Online social media safety was recognised in the EH Plan of 2 November 2021 as a safeguarding risk but there was no plan to address it. It is accepted if it was flagged there should have been a plan. In some mitigation, CFW knew Prevent had discharged AR, suggesting this was not a significant concern.
- e. In terms of the closure to CFW, a number of positive steps had been achieved. CFW had regular interaction with AR and the family for just over six months. There was an identified plan of work that had been completed. AR had started to attend local youth provision and the father had completed a Triple P parenting course. AR had a place at an appropriate educational setting. He had a EHCP in place that set out his health and educational needs. He continued to be supported by CAMHS and TAF would continue, led by education. Although AR reported nothing had changed, his RADAR score had improved. The family was on the waiting list for family therapy with CAMHS.

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<sup>69</sup> LCC000343

<sup>70</sup> LCC000115

27. LCC's reflections are:
- a. As accepted above, CSC should have provided more precise instructions to CFW in September 2021 about the duration and nature of the support that TYS was to provide. Had they done so TYS intervention would have continued and AR would not have closed at this point to CFW. Further, despite the plan having progressed, it would have been reasonable to keep AR open to CFW given the educational transition and that embedded school attendance was not securely in place.
  - b. In 2022 the understanding of neurodiversity and training around this was not as developed as it is now. Had it been, knowledge of AR's neurodiversity and potential for him to struggle with change would have strengthened the decision to keep support in place during this transition.

*17 March 2022 to 23 March 2022*

28. On 17 March 2022 the incident occurred on the bus:
- a. Louise Lewis and Sharon Barrett were contacted by CAMHS on 17 March 2022<sup>71</sup> who informed them AR had gone missing.
  - b. CFW knew AR was meant to be attending Presfield School for a taster day.
  - c. Ms Lewis was also contacted by the father to report AR was missing.
  - d. Ms Steed later contacted Ms Lewis to say the police had found AR.
  - e. No information was provided to Ms Lewis that day beyond this. On the basis of what she knew she did not consider there was a reason to reopen the case to CFW.
  - f. On 18 March 2022 the police report was received by MASH<sup>72</sup>. It contained key information: AR had admitted he had a knife, he said he was planning to stab someone with the knife on the way home. He also said he had tried to make poison in the past. AR explained that he wanted embarrassing videos removed from his social media and his psychologist had explained if he committed a crime he could get his account deleted. The police formed the view that he was having a bad mental health episode. It was recognised that AR did not seem to appreciate the seriousness of the incident and did not think he was doing anything wrong.
  - g. It seems that the referral was considered by a different worker, Gillian Anson, part of the MASH team, on 23 March 2022<sup>73</sup>. Although she emailed Ms Lewis on 23 March 2022 about the case<sup>74</sup> she did not share the key details about the knife, the threat to stab someone or the poison. Ms Lewis replied with an update of the

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<sup>71</sup> LCC000989

<sup>72</sup> LCC000156 LCC000157

<sup>73</sup> LCC000344

<sup>74</sup> LCC000910

position when the case was closed. There then appears to have been a decision by Kerry Leigh, a MASH team coordinator, that no further action was warranted<sup>75</sup>.

- h. A Missing from Home (“MFH”) interview was undertaken by Amanda Chapman of the MFH team, on 22 March 2022<sup>76</sup>. She completed a brief form.

29. LCC accepts the following in relation to this incident:

- a. Those who had been working with AR in CFW did not see the information shared by the police with MASH. It is accepted it should have been discussed with them.
- b. The expected communication between MASH, CFW and MFH did not take place.
- c. The information provided to LCC was concerning: AR had been in possession of a knife and stated an intention to harm; talked about making poison; he expressed misunderstanding of consequences and emotional detachment indicating a need for continued mental health support and close monitoring.
- d. The MFH interview on 22 March 2022 was of poor quality. It was a missed opportunity to explore AR’s comment about wanting to harm someone and his interest in knives. Had a connection been made between the incidents in 2019 and in 2022 this could have led to greater curiosity about AR’s access to knives and his use of the internet. What AR or his parents would have disclosed is not known.
- e. AR should not have been closed by the SW in MASH without further action, although her reasons for doing so are not known.

30. LCC’s reflections are:

- a. At the time workers in the MFH team were a separate, specialist service. This increased the risk of them being isolated and MFH interviews taking place without a proper understanding of the history of the child.
- b. There should have been a referral to CSC.
- c. CSC should have initiated a social work assessment, which would have incorporated the views and work of all multiagency partners.
- d. There is a range of actions that might have resulted from this. LCC accepts that intervention would have occurred. The precise nature of that would depend on the views of the multiagency partnership, but would include consideration of a Prevent referral, interventions by other agencies and, from the perspective of CSC it is likely he would have stayed open to a social worker, probably in the Contextual Safeguarding Team and received a referral to the Youth Justice “Prevention and Diversion” service.

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<sup>75</sup> LCC000344

<sup>76</sup> LCC000251

- e. Another option potentially open to CSC would have been to take legal advice because it was arguable that AR was beyond parental control<sup>77</sup>. This is a step CSC probably would have only elected to take if the strategy above did not achieve progress and having drawn on the expertise of police, CYJS and CAMHS to inform future interventions.

*April 2022 to March 2024*

- 31. From 19 April 2022 AR was registered at Presfield School in Sefton. His final EHCP was signed on 25 April 2022. Thereafter:
  - a. AR never adequately engaged with Presfield and barely attended. He remained under the care of CAMHS.
  - b. On 14 May 2022 there was a police incident involving AR flooding the bathroom because his father had removed his laptop.
  - c. On 16 and 17 May 2022 Presfield contacted CFW, which appears to have been interpreted as a request for information. A response was given that information cannot be shared without parental consent unless there is a safeguarding issue, which was not evidenced in their contact. LCC spoke with Mark Rigby of Presfield who advised he had told the father to self refer<sup>78</sup>.
  - d. On 20 May 2022 a police safeguarding referral was made. CFW discussed the position with the school because the support that was sought was unclear. The school was asked to complete a referral with the family and explain what needs CFW were being asked to meet.
  - e. There was then a protracted period when AR was not attending school and Presfield and CAMHS sought to work with the family in relation to attendance.
  - f. On 14 July 2022 Presfield wrote saying they were unable to meet AR's needs and revoking LCC's sixth form place<sup>79</sup>.
  - g. On 8 August 2022 Suzanne Walmsley, a social worker in ASC, was allocated to assess AR's needs in relation to his transition to adult services.
  - h. AR was reinstated to Presfield but did not attend<sup>80</sup>.
  - i. In January 2023 AR's parents completed the parental input for an annual review, saying that they did not think Presfield was suitable and that LCC should identify another placement<sup>81</sup>. No alternative provisions were explored because Presfield

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<sup>77</sup> S. 31 Children Act 1989

<sup>78</sup> LCC000226/63

<sup>79</sup> LCC000178

<sup>80</sup> LCC000442 LCC001247

<sup>81</sup> LCC000417

had places and were thought to be legally able to meet his needs<sup>82</sup>. It was felt that Presfield had not provided good enough evidence that they were unable to do so. As a result he was given a more therapeutic offer and tutoring from March 2023.

- j. On 22 March 2023 Presfield made a request for support because AR had not been seen by the school since 25 May 2022, reporting he was too anxious to engage. CSC attempted to reach the family and could not. Consideration was given to whether consent could be overridden under s. 47 and the conclusion was that it could not. The recommendation was to close the case.
- k. On 3 April 2023 the father contacted MASH for support, reporting that things were better when CFW was involved<sup>83</sup>. On the 4 April 2023 CFW become involved again<sup>84</sup>. No risks posed by AR were identified at this point.
- l. On 4 April 2023 a CAF assessment was started and a new FSW became involved, Ms Williams<sup>85</sup>. A decision was made to involve Mr Coughlin of TYS too.
- m. Ms Williams met AR on 14 April 2023 and discussed the situation with the family. The father reported that AR was less aggressive. AR reported high anxiety and that he was very isolated. He said that he was safe online and only used Youtube.
- n. On 2 May 2023 Ms Williams had a direct work session with AR walking in the local area. AR presented as calm and relaxed and engaged with a conversation about what he wanted from direct work and school. He did not want to engage with TYS or become more social. This was the last successful visit between LCC and AR.
- o. On 21 May 2023 Ms Williams completed a CAF. She had tried to visit AR twice since 2 May and on both occasions he had given excuses not to see her. LCC's understanding was that previous interventions had helped and conflict in the home had reduced. AR was engaging to an extent with school and CFW. AR was assessed at level 3 on the Continuum of Need. He was to be referred to TYS for support for social isolation and have direct support for anxiety to teach coping skills.
- p. On 25 May 2023 a TAF meeting took place<sup>86</sup>. The father reported AR's mood had improved with medication. AR's attendance at school had been patchy, varying week to week and patchy engagement with mental health services. He had initially engaged well with CFW but there had then been failed visits. The family was receiving family therapy from CAMHS. Ms Williams drew up an EH Plan reflecting

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<sup>82</sup> LCC000442

<sup>83</sup> LCC000226/82

<sup>84</sup> LCC000188

<sup>85</sup> LCC000192

<sup>86</sup> LCC000359

- what had been agreed<sup>87</sup>. The record is wide ranging but includes a note that there were no concerns about AR's online behaviour according to the father.
- q. In late May / June Ms Williams continued to try regularly to see AR but he did not engage. From 8 June 2023 TYS worker Mr Coughlan tried to engage AR too.
  - r. On 22 June 2023 another TAF meeting was held<sup>88</sup>. CAMHS could not attend. The father was worried about lack of engagement and wanted Ms Barrett to become involved. It was reported that the case was likely to close if there was continued non-engagement. An EH plan of 22 June 2023 recorded the situation<sup>89</sup>.
  - s. On 27 June 2023 the TYS wrote to AR to encourage engagement.
  - t. A home visit could not be arranged with Ms Barrett because she was off work.
  - u. A TAF meeting was held on 17 July 2023<sup>90</sup>. TYS encouraged the parents to challenge AR and remove choices from him, regaining the power dynamic. CFW offered to make referrals for therapeutic support but the father said AR did not want support outside of school. The parents declined repeating the Triple P course and a one to one tailored version of the course was considered.
  - v. On 14 August 2023 Suzanne Walmsley of the ASC Transitions Team contacted the family to initiate a transitions assessment to ASC under the Care Act 2014, to assess services require by AR when he turned 18<sup>91</sup>.
  - w. On 6 September 2023 a meeting took place between the father, Ms Williams and Ms Barrett. It was explained that as AR was refusing support the only role CFW could offer was support to the parents. Dad did not want this and it was explained that without consent CFW could not work with the family.
  - x. On 13 September 2023 a TAF meeting took place<sup>92</sup> and it was noted that there was no progress by CFW because AR was not engaging and the parents had declined support. AR had been seen by a police safeguarding officer and education options were discussed.
  - y. On 22 September 2023 a decision was made to close AR to CFW but he would remain on a Continuum of Need level 2.
  - z. On 25 September 2023 an AH Psychiatrist visited AR but he would not engage.
  - aa. On 29 September 2023 the case was closed to CFW. There were no safeguarding concerns relating to AR and the father had reported no concern about his online behaviour. The school were going to continue to encourage AR to attend.

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<sup>87</sup> LCC000358

<sup>88</sup> LCC000361

<sup>89</sup> LCC000360

<sup>90</sup> LCC000363

<sup>91</sup> LCC000533

<sup>92</sup> LCC000365

- bb. On 9 November 2023 Ms Walmsley of ASC attended the family home for a Care Act 2014 assessment. She wrote a retrospective note of the visit into the case notes on 30 July 2024. Contemporaneous supervision notes suggest she concluded AR was eligible for post 18 support to help with prompting and accessing the community but he would not engage with the assessment.
- cc. In November 2023 Presfield again reiterated they could not meet AR's need because he was not attending<sup>93</sup>. AR's father wanted him to remain on the roll.
- dd. In March 2024 there was a decision to cease his EHCP before he turned 16.

32. LCC's observations are:

- a. AR was without meaningful education for a period of about two years.
- b. Although AR's issues in education began before the pandemic it is relevant to note that they continued during and after it. In this respect AR was one of many. The impact of the pandemic on children with SEN was huge. There was a significant increase in children struggling with anxiety and therefore with attendance at school settings, in particular children with anxiety relating to conditions such as ASD.
- c. The pandemic and the increase in need impacted LCC's SEND and Inclusion services, which were already under pressure.
- d. LCC did not know that AR continued to have an intense interest in violence during this period. Both AR and his parents were asked about his internet use and were reassuring that there were no concerns. This is against the background of LCC knowing that Prevent had closed three referrals.
- e. Reports from the parents about AR's behaviour were reassuring: that AR displayed less aggression at home.
- f. It will be for the Inquiry to establish what AR was doing during this period in terms of his internet activity and purchasing of weapons and what his parents knew. The parents' reports to LCC, apart from about AR's anxiety and attendance at school, were that things were better from the perspective of AR's challenging behaviour.
- g. It is accepted that LCC could have provided better support to Presfield and AR to seek a more effective solution for his education.
- h. LCC tried to support AR through CFW but it is a consensual service and he did not engage. He did not meet the threshold for escalation to CSC.

33. LCC's reflections are:

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<sup>93</sup> LCC000226

- a. In April 2022 AR was enrolled at Presfield but did not attend for two months. In the Rapid Review it was acknowledged that the LCC Attendance and SEND teams could have worked more collaboratively to try and improve AR's attendance.
  - b. The Rapid Review also considered that from the summer of July 2022 when Presfield said it could not meet AR's needs LCC should have explored therapeutic section 19 Education Act 1996 or section 61 Children and Families Act 2014<sup>94</sup> offers and that communication from LCC to the school around this issue had been poor.
  - c. The Rapid Review concluded that disagreements on placements should have been resolved and further provision sought in November 2023 when Presfield reiterated that they felt they could not meet needs as AR was not attending but AR's father wanted him to remain on the roll.
  - d. LCC Education agreed that there was learning regarding record keeping relating to EHCP records that need addressing. There was a lack of information about the interaction between education, health and social care and detail about AR and his presentation. It was also highlighted that the ceasing of AR's EHCP occurred unusually quickly and there should have been more exploration of possible placements and support for him before it was ended. It was acknowledged that a lack of understanding around the legislation on EHCPs was a factor in this case as was the impact of Covid 19.
  - e. It was acknowledged that EHCP review meetings were poorly attended by multi agency partners, and that this had a knock-on effect on the decision making ability of SEND case workers as this prevented them from having an up to date, full picture of AR and his needs.
34. Turning to the referral to the transitions team of ASC, it is accepted that a transitions assessment under the Care Act 2014 should have been completed. Although this is regrettable the assessment was concerned with provision following AR's 18<sup>th</sup> birthday. As this occurred after the events with which the Inquiry is concerned LCC does not address this further at this stage.

### **Improvements**

35. The Inquiry process is an important moment of rigorous scrutiny of LCC's services; however LCC's attitude to improvement is proactive not reactive. LCC continually assesses and develops its working practices both in line with national guidance and good practice. New leadership is in place in key areas and a range of changes have already

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<sup>94</sup> Education Otherwise Than At School (EOTAS)

been made that are explained in the corporate statements<sup>95</sup>. LCC believes multi agency working has progressed significantly.

36. LCC welcomes the fact that Prevent now accept referrals for children who do not have a single ideology and this has already strengthened the multi-agency response for children in this category. LCC promotes awareness of the Prevent duty within the whole organisation with tools and monitoring to ensure compliance together with more interventions now being available if a child is not accepted by Prevent.
37. There is now greater focus on the assessment of risks posed by children to others across all departments, including development of a serious violence toolkit offering evidence-based resources and responses.
38. Key areas of improvement include in social care include:
  - a. An autism support team was developed by the ICB in 2022, which now supports CSC to ensure service can meet the needs of children who are neurodiverse.
  - b. CSC and EH employees are now trained in working with children with neurodiversity needs.
  - c. There are now tools and training to address:
    - i. Emerging issues relating to online harm;
    - ii. Assessing and working with children who are at risk of perpetrating violence, incorporating learning from the national report on serious youth violence by Ofsted;
  - d. Contextual safeguarding was redesigned, implemented in 2023. MFH workers are now incorporated into a wider multi-disciplinary team, improving the sharing of knowledge and expertise.
  - e. The Return Home conversation form has been updated and strengthened.
  - f. Assessment and planning quality is an ongoing area of improvement since inspection in 2022 and LCC has commissioned a nationally recognised provider to support with this. Internal and external audit evidence an improving picture.
  - g. Audit also evidences improved record keeping and minutes of statutory meetings on children's files.
  - h. There is better access to shared records across social care departments.

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<sup>95</sup> See Joint Targeted Area Inspection ("JTAI") of the multi-agency response to serious youth violence in Lancashire dated 16 May 2024; January 2023 Ofsted report of its inspection of Children's Services in November 2022 in which LCC improved its grading to "good" from the 2018 report "requires improvement" and the Area SEND inspection published in February 2025 that reported areas of good practice along with significant concerns that must be addressed urgently, but recognised the plans in place to do so.

39. Education now has access to live data on school attendance so that it is no longer reliant on school reporting issues with absence and can make more effective decisions when a child is not attending. Significant improvements have been made in Education in relation to SEND and the EHCP process.

### **Conclusions**

40. This opening statement is necessarily provisional. There has been limited and incomplete opportunity for consideration of evidence disclosed to date from other core participants and there is evidence not yet available to LCC. These factors place some limitations on what LCC is able to say to assist the Inquiry at this stage.
41. Understanding and intervening in respect of the risk children pose to others can only be done in a multiagency context. Although education and social care play an important role as safeguarding partners, CAMHS, the NHS and the police are needed to diagnose, advise on and intervene with those risks. There can be a danger that LCC's departments, in particular schools and social services, are seen as "lead agencies by default", because if multi agency working does not function efficiently, they are the services left dealing with children in need day to day, trying to manage them with the resources they have available when other agencies may be able to offer more expert insight and intervention.
42. LCC considers its initial response to AR's exclusion from RHS and the attack there in December 2019 was appropriate. Staff at Acorns worked carefully with AR gaining valuable insights. He was recognised to pose a risk to others in the school setting and it was understood that part of that risk was due to undiagnosed and unmet neurodevelopmental needs. A plan was put in place for assessment and intervention in March 2020, which coincided with Covid19. The impact of the national lockdown on all services should be remembered. CSC had to prioritise the most high-risk vulnerable children. That said, LCC accepts that it should have had in place more robust monitoring of the 2020 multiagency plan so that it knew what was being done and whether the planned interventions were having an effect. CYJS recognises some inherent limitations in the service that it offers, but its interventions were in accordance with national guidance.
43. At the time of LCC's key interactions with AR the concept of children and young people who are fixated on violence did not feature in Working Together and were not recognised in social work practice. Following on from this, the impact of neurodiversity in this area was not well understood nationally or locally. Although it is accepted CSC had a role in

safeguarding children who pose risk to others, and CSC recognised this, the focus of the social care structure was on protecting children from abuse and neglect. Statutory thresholds are not well suited to assessing children who pose risk. There has been significant work nationally recently on understanding and managing the risks children with the capacity for violence pose but the limitations of the statutory framework remain.

44. It is important to engage with the complexity of AR, including the latency of his risk over a protracted period which made it difficult for LCC's employees engaging with him to see and understand what was happening, particularly during periods of non-engagement when time had passed since incidents of significance. Focus only on significant events can cause periods of time when little out of the ordinary occurred to be lost from sight. One of the difficult issues is the question of how risk is and should be understood over a protracted period. Risk assessments are usually dynamic and take into account what is known from the past but also recent information. The clearest insights gained into AR were in 2019/20, several years before the attack. Further important insight was then presented by the incident in March 2022, although a connection was not made between the significance of this event and what had been learned of AR several years earlier. Neither teachers nor social workers have the expertise to identify how the risk presented by a child's neurodiversity might endure over time.
45. LCC accepts that AR should have continued to receive support from TYS during his transition to Presfield in 2022 and that AR should have been referred to CSC for a multiagency assessment and intervention after the incident on the bus in March 2022. What those assessments would have revealed and interventions would have achieved is not known. Although closer in time to July 2024 the incident on the bus was still more than two years before the attack. From the perspective of LCC, between late 2022 and 2024 there were periods of contact with the family, but that contact did not give rise to new or reinforce earlier concern. Primarily there was a lack of engagement, school avoidance, social anxiety, some interfamilial conflict but, from 2023 onwards, reassurance from the parents that AR's behaviour at home had improved and his online activity was not of concern. This picture was not unusual. LCC's employees deal with many children in need. More of them than it would wish carry knives. Some present as violent. Many require education in PRUs. Difficulties with engagement and school avoidance are common. The Inquiry will hear from some of LCC's witnesses that there were features of AR that showed that he was different, some presenting at the very earliest stage of the chronology. They became less obvious over time. One of the questions that may be important is how knowledge of those unusual features and the risks they present can be

assessed, retained and understood across agencies over a period of years, so that new events are not taken at face value, but are understood with them in mind.

46. On a final note, the Inquiry will hear from witnesses employed by LCC who worked in these complex areas. LCC asks that its witnesses are considered with understanding and an awareness of the challenges of the work that they do.
47. Inevitably this opening statement cannot cover all of LCC's involvement with AR. LCC recognises that there may be other areas of interest to the Inquiry that are not addressed here. LCC will further assist the Inquiry's important work to the best of its ability.

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