

# Bracknell Forest Safeguarding Board

Annual Report 2020/2021



# Contents

1. Preface	3
2. Introduction	3
3. Independent Chair and Scrutineer Report	3
4. Governance (including requirements of Care Act and Working Together 2018)	6
5. Structure and membership of the Safeguarding Board and Multi Agency Safeguarding Arrangements	7
6. Progress against strategic plan priorities	
7. Impact of Covid-19 and the Board's response	9
8. The work of the Board's subgroups	11
9. Performance information	18
10. Future challenges and priorities	28
11. Financial Information	11
Appendix 1 - Strategic Plan 2020-2022 – action plan progress	30
Appendix 2: Contributions from Partners	36



#### 1. Preface

This report covers the period 1st April 2020 to 31st March 2021 and is published in accordance with the Care Act 2014, the Children and Social Work Act 2017 and the associated statutory requirements set out within Working Together to Safeguard Children 2018. Prior to its dissemination via the Safeguarding Board's website, it will be submitted to the Bracknell Forest Council (BFC) Chief Executive, the Local Police and Crime Commissioner and the Chairs of the local Health and Wellbeing Boards, Community Safety Partnership and Children and Young People's Partnership. It should also be presented to the Boards of the CCG and all partner agencies.

#### 2. Introduction

The Care Act 2014 and Working Together to Safeguard Children 2018 requires each local authority area to establish a Safeguarding Board with core membership from the local authority, the police and the local Clinical Commissioning Group. In July 2019 the local Safeguarding Adult Board and the Local Safeguarding Children's Board merged to form the Bracknell Forest All Age Safeguarding Board (BFSB).

Working Together to Safeguard Children 2018 (guidance on inter-agency working to safeguard and promote the welfare of children) states that in order to bring transparency for children, families and all practitioners about the activity undertaken, safeguarding partners must publish a report at least once in every 12-month period. The report must set out what they have done as a result of the arrangements, including reporting on Child Safeguarding Practice Reviews (CSPRs), and how effective these arrangements have been in practice.

Under the Care Act 2014, Bracknell Forest Safeguarding Board (BFSB) is also required to publish an annual report after the end of each financial year detailing what the Board has done during the year to achieve its main objectives, and what each member organisation has done to implement its strategies. The annual report must provide information about any Safeguarding Adults Reviews (SARs) that the Board has arranged which are ongoing or have been reported in the year (regardless of whether they commenced in that year).

This is the second annual report of the all age Bracknell Forest Safeguarding Board. It describes the work of the Safeguarding Board and its subgroups along with the contribution of the wide range of partners who are members of the safeguarding partnership that supports the work of the Board. These can be found in Appendix 2.

## 3. Independent Chair and Scrutineer Report

I am pleased to introduce the Bracknell Forest 2020/21 annual report.

The strategic focus of the Safeguarding Board's work for the past year has been to continue to establish the ethos required to support an effective 'all age' board. At the same time the Board has maintained an oversight of safeguarding within Bracknell Forest and has challenged partners to ensure robust local safeguarding processes are in place to keep vulnerable individuals safe. As well as Chairing the Safeguarding Board and Safeguarding Partnership, I established routine meetings with a wide range of senior officers and have continued to receive necessary data and relevant reports.

The restrictions imposed during the period of the pandemic placed tremendous strain on all services and inevitably increased the risks to vulnerable people and created challenges for all partners working to keep people safe.

#### 3.1 Evidence of Effectiveness

I have continued to observe a positive partnership ethos best demonstrated in their response to Covid-19 within the Borough. Despite the additional pressures of the pandemic, relationships have remained good and the openness to challenge sustained. The increased regularity of the Board's Safeguarding Partnership meetings has proved to be a particularly effective mechanism in which learning between agencies has taken place. This helped mitigate against the increased safeguarding risks during this period. As a result, the Safeguarding Board's Strategic Plan 2020-2022 reflects the unique circumstances created by the pandemic alongside the routine work required of the Board.

Reflecting the above requirements, the Board has collated information within a risk register that highlights the unique local and regional circumstances and challenges partners have collectively identified. Support for improved information sharing has been underpinned by the production of a Memorandum of Understanding, which has started to strengthen working between the Safeguarding Board and other local strategic partnerships. This approach is designed to enable improved communication between the partnerships' chairs, their officers and to provide a more efficient approach that avoids unnecessary duplication. To date these meetings have focussed on key areas of shared concern, including increased pressures on mental health services (for both children and adults), self-harm amongst adolescents and Children Missing Education (CME) together with a rise in the number of children on the EHE register, which although increased significantly, remained notably lower than other SE region LAs per 10,000 population

As a result of the Joint Targeted Area Inspection (JTAI) undertaken in January 2019, the Board ensured multi-agency oversight of the action plan and received evidence of progress related to required improvements. These included improved partnership involvement in child protection strategy meetings and child protection conferences, which have strengthened the decision-making process to support children.

The Board's 'all age' Rapid Review process has continued to offer an effective response and has ensured that learning is established in a timely manner. This, together with the wider process of ensuring local learning and management of statutory reviews, is overseen by the Board's Case Review subgroup (CRSG). The approach adopted within Bracknell Forest has been applied to range of cases during the year, with flexible approaches to learning having been endorsed by the Child Safeguarding Practice Review Panel.

I see the work of the CRSG as being essential to ensuring the dissemination of best practice and actions relating to any improvement required. To that end, the CRSG routinely tracks progress made against identified actions for improvement and seeks evidence of the impact of such activities. Along with the Bracknell Forest Learning & Development Forum, the CRSG also plays a crucial part in disseminating learning to those responsible for service development, practitioners and members of the public. During the pandemic learning events were transferred to an online environment with learning briefs continuing to be shared widely. As our most recently established function, I see the L & D Forum playing an important part in helping establish systems to enable the Board to understand better the embedding of learning within local organisations and in enhancing our links with non-statutory partner agencies.

To support its inter-agency communications, during the past year the Board has produced regular newsletters, circulated information via social media and promoted information links to its website. The Communication, Engagement and Prevention subgroup (CEP) have continued to identify how to engage with the local community in order to promote their role in identifying /reporting concerns and to obtain informative feedback. The CEP subgroup has recently produced 'What good looks like' documents in respect of the provision of services for children and care for vulnerable adults. During the year these were widely circulated throughout the local community.

During this period, extensive work has also been undertaken with our faith communities in order to identify inequalities and to promote safeguarding messages to 'seldom heard from'

communities in order that the Board can receive feedback to strengthen local safeguarding processes. It is intended that this work will lead to the production of a series of short videos containing strong safeguarding message from faith leaders. The first of these videos was coproduced with the local Imam and is the first of a number which, we hope, will be produced with different communities in their own language.

The Quality and Assurance subgroup (QA) has continued to develop its work. This has included recent audits focusing on the mental health of children returning to school after time at home due to Covid-19 and an examination of the quality of safeguarding referrals in respect of both children and adults. During the year, an enhanced peer review process was supported by members of the QA subgroup which is also working to strengthen its oversight of partners' safeguarding self-assessments in relation to children and adults (including their compliance with the existing 'Section 11' requirements). This will provide some strong evidence of the effectiveness of local safeguarding arrangements.

#### 3.2 Areas for focus

It is anticipated that the impact of the pandemic will continue to provide challenges which I consider the Board is well placed to meet. Therefore, in line with the agreed high-level direction contained within the strategic plan, the focus for the Board for 2021-22 should ensure it continues:

- To develop its understanding of the new safeguarding environment as a result of Covid-19.
   This includes the potential for new safeguarding risks and new effective ways of working; the impact of online/remote working being an example.
- To develop effective strategies to improve understanding of the difficulties and disadvantages some groups in the community face with the safeguarding process. This should assist improved understanding of partners' approaches to safeguarding.
- To work towards embedding contextual safeguarding (children at risk in the community) and a strong family approach to risks assessment processes.
- To improve the Board's ability to secure feedback from those it seeks to safeguard and ensure that the feedback shapes service development.
- To develop the Quality and Assurance process to ensure that the Board can focus on areas
  of weakness within the adult and children safeguarding process.
- To disseminate learning using a range of methods and to evaluate its impact on strategic priorities and practice

This report summarises the work of the Board during a year in which unique pressures were brought to bear on individuals and local systems.

I would therefore like to thank the many staff working across wide ranging local services for their hard work and the additional efforts they've made. Their responses have been outstanding and have ensured that vulnerable people in Bracknell Forest have continued to be supported.

Brian Boxall

Independent Chair and Scrutineer





# 4. Governance (including requirements of Care Act and Working Together 2018)

The main objective of the Safeguarding Board is to assure itself that local safeguarding arrangements and partners act to help and protect adults, children and families in the area. The Board has responsibility for overseeing safeguarding partnership working across key agencies; this oversight ensures that partners apply effective processes and procedures to protect those most at risk and offers appropriate support. It also ensures that those agencies practise safeguarding to a high standard and can evidence their performance.

The Board has a strategic role and this is comprised of core duties which include:

- Publishing a strategic plan for each financial year setting out how it will meet its main objectives
- Publishing an annual report detailing the activities of the Safeguarding Board
- Deciding when a Safeguarding Adult Review (SAR) or Child Safeguarding Practice Review (CSPR) is necessary following a Rapid Review of the circumstances of a case, then arranging for its conduct and if it so decides, implementing the findings

The role of the board is set out within the Care Act 2014 and Working Together 2018. In line with Children and Social Work Act and statutory guidance, the new multi-agency safeguarding arrangements are jointly agreed by the local authority, Thames Valley Police and East Berkshire CCG.

#### 4.1 Care Act 2014

The Care Act 2014 requires that the Safeguarding Board has a role in overseeing and leading adult safeguarding across the locality and in providing advice and assistance. In this context the Board is responsible for:

- Assuring itself that safeguarding practice is person-centred and outcome-focused
- Working collaboratively to prevent abuse and neglect where possible
- Seeking assurance that agencies and individuals give timely and proportionate responses when abuse or neglect have occurred
- Ensuring that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.



#### 4.2 Children and Social Work Act 2017/Working Together 2018

The Children and Social Work Act 2017 Act placed duties on three 'safeguarding partners' (Bracknell Forest Council, East Berkshire Clinical Commissioning Group and Thames Valley Police) to make safeguarding arrangements that respond to the needs of children within the borough.

The Act and the statutory guidance set out within Working Together 2018 identify their key responsibilities main responsibilities as being:

- To involve relevant agencies in their area
- To identify and supervise the review of serious safeguarding cases
- To publish their local safeguarding arrangements
- To arrange for independent scrutiny of their local safeguarding arrangements
- To publish a report every 12 months on what they and the relevant agencies have done as a result of the local safeguarding arrangements and how effective the arrangements have been in practice

# 5. Structure and membership of the Safeguarding Board and Multi Agency Safeguarding Arrangements

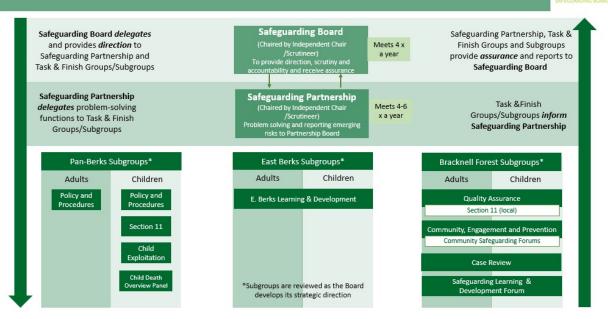
As outlined in our Annual Report (2019-20) in 2019 Bracknell Forest Council, Thames Valley Police and East Berkshire CCG published their multi-agency safeguarding arrangements for children, together with their plans to integrate the requirements of the Care Act to ensure an 'all age' approach to safeguarding the most vulnerable residents within the borough.

A structure to support our work (see figure 1.1) consists of:

- a Safeguarding Board whose membership includes senior decision makers of each of the three statutory partners and who fulfil the statutory requirements in relation to safeguarding both children and adults
- a Safeguarding Partnership whose membership includes representatives from a wide range of local partners from statutory and non-statutory organisations
- Local and regional subgroups and task and finish groups

### Bracknell Forest Multi-Agency Safeguarding Arrangements





 The Board has continued to develop following the merger which was effective from 1 July 2019. The Board comprises senior leads from statutory partners, has an independent chair and scrutineer and meets on a quarterly basis. The Board leads adult and children safeguarding arrangements across its locality. There has been 100% attendance from safeguarding partners throughout the year.

All partner organisations within Bracknell Forest are expected to prioritise a safeguarding approach that promotes the values of respecting individuals' dignity, individual rights and that aims to help them feel or actually be safe. Promoting the concept of 'safeguarding being everyone's business' is at the heart of the collaborative philosophy promoted within the work of the Board.

The partnership member organisations are currently:

Bracknell Forest Council	
East Berkshire Clinical Commissioning Group	Royal Military Academy
Thames Valley Police Local Policing Area	Royal Berkshire Fire and Rescue Service
Thames Valley Police Protecting Vulnerable People	Involve
Frimley Health NHS Foundation Trust	Public Protection Partnership
Bracknell Forest Public Health	Community Rehabilitation Company
Berkshire Healthcare NHS Foundation Trust	Care Quality Commission
Bracknell Healthwatch	CAFCASS
West London Mental Health Trust	Silva Homes
National Probation Service	Department of Work and Pensions
South Central Ambulance Service	Police and Crime Commissioners Office
Headteacher representatives	NHS England
Representative of Faith & Belief Group	The Ark
Bracknell Forest Council	Involve
East Berkshire Clinical Commissioning Group	National Probation Service
Thames Valley Police Local Policing Area	NHS England
Thames Valley Police Protecting Vulnerable People	Police and Crime Commissioners Office
Berkshire Healthcare NHS Foundation Trust	Public Protection Partnership
Bracknell Forest Public Health	Representative of Faith & Belief Group
Bracknell Healthwatch	Royal Berkshire Fire and Rescue Service
CAFCASS	Royal Military Academy
Care Quality Commission	Silva Homes
Community Rehabilitation Company	South Central Ambulance Service
Department of Work and Pensions	The Ark
Frimley Health NHS Foundation Trust	West London Mental Health Trust
Headteacher representatives	

The Board met four times in the year providing oversight and direction to strategic and operational safeguarding activity across Bracknell Forest.

# 6. Progress against strategic plan priorities

During 2019/20 the Safeguarding Board has developed its strategic plan for 2020 -2022 . Progress of individual actions is contained in the Appendix 1

The plan adopts a systems approach to ensure approaches to statutory safeguarding responsibilities and is underpinned by the following strands:

- Prevention ensuring partners work together to prevent all forms of harm recognising the long-term consequences
- Protection ensuring a robust outcome focussed approach to protecting people at risk of abuse and neglect
- Partnership seeking assurance of the effectiveness of local partnerships and collaborations to safeguard people
- People seeking assurance that people who use services are involved in safeguarding processes and the work of the Board

The overarching strategic direction for 2020 – 2022 is:

"Working together, and as individual partners, we will be vigilant to be able to quickly identify, understand, prioritise and respond to risks and issues arising throughout our local community, particularly those caused or intensified by the impact of Covid-19 as captured in the Board's risk register."

Oversight of the plan is provided by the Board and Partnership and subject to scrutiny by the ICS.

# 7. Impact of Covid-19 and the Board's response

Throughout the period of the pandemic, BFSB has reflected on its role and that of its subgroups. In consultation with its wider partners and the chairs of other strategic partnerships within the borough, the Board sought to develop further its responsive approach to the emerging safeguarding challenges whilst also maintaining its focus on its statutory functions set out within its Terms of Reference and Constitution. As a result, the Board's current Strategic Plan (see above) reiterates the importance of our core business, and also enables the constant reassessment of risks based on its analysis of evidence gathered from local organisations. Such information is routinely shared with other strategic partnerships operating within the borough and informs our review of the Board's priorities.

While Covid-19 has had a significant impact on the ability of our partners to maintain safeguarding standards established prior to the pandemic, the Board has been assured that an enormous effort has been made to develop innovative ways of working, with staff making great efforts to mitigate the worst of the effects. However, the Board is alert to the emerging evidence of how health and social inequalities have resulted in the increased vulnerability of some residents across the borough. We are yet to appreciate the true impact of harm that may have remained hidden or not fully realised during this period.

"During lockdown all contact with families was virtual or telephone, with the proviso that where risk or safeguarding concerns were identified a referral to CSC would be made."

"Referrals to safeguarding agencies have been monitored and an increase has not been identified."

"Comparison of safeguarding data has been used to identify trends."

"We are ready to make changes to our safeguarding approach if necessary"

"Colleagues have been given advice on signs to look for and asked to be extra vigilant"

"Guidance was circulated widely to colleagues, partners and the public"

Safeguarding Partnership comments on monitoring safeguarding concerns during Covid-19

#### 7.1 Communications

To be proactive in preventing / minimising harm during the pandemic, the Board's Business Unit (BU) revised its existing communications strategy and worked closely with others to reiterate key safeguarding messages designed to combat hidden harm and encouraging communities to remain vigilant, to spot signs of abuse/neglect and to report any concerns promptly.

The <u>BFSB website</u> has continued to be updated during the year to provide additional information relating to local and national measures. In turn, these messages are supported through the use of social media such as:

- Facebook <u>www.facebook.com/bfsafeguarding</u>
- Twitter www.twitter.com/BFSafeguarding

These activities are guided by an established strategy that ensures information is disseminated using one of the three channels below:

- 1. Local residents
- 2. Front line staff and volunteers
- 3. Strategic partners

In addition, the 'Board Bulletin' continued to provide an opportunity for the BU to update partners and promote key messages. Mindful of the need to reach all communities within our borough, BFSB further developed the work of the CEP subgroup, details of which are set out in section 8.2 below.

"Practitioners have received training to help engage with children virtually and have adapted to using several remote access platforms to interview parents"

"Face to Face or remote contact was maintained with all persons under supervision"

"Each week, our service called self-isolating customers to check up on them and have an informal chat."

"A revised tracking process was adopted to check if the family or young person had been known to the service within previous 12 months"

Safeguarding Partnership comments on communication with service users during Covid-19

#### 7.2 Local and regional leadership

As outlined in our annual report 2019-2020, the Board's response to Covid-19 has continued to be one of operating a high level of vigilance and to ensure an evidence-based approach to understanding the potential risks identified through regular meetings with our wider partners. This analysis continued to inform the Board's strategic planning and helped shape decision making in respect of information sharing with wider stakeholders, including residents within the borough. While the longer-term effects of Covid-19 will require the Board to continually review its work, this is done in conjunction with other strategic partnerships including:

- Community Safety Partnership
- Domestic Abuse Executive
- · Health & Wellbeing Board
- Care Governance Board
- Corporate Parenting Advisory Panel
- Children's Strategic Partnership
- BF Community Response Group
- BF Covid-19 Communication Group

## 8. The work of the Board's subgroups

#### 8.1 Quality Assurance subgroup

The Quality Assurance subgroup has met on four occasions during 2020/21. In addition to these meetings a QA Core Group has also been established to progress work in between formal meetings. The work of the subgroup has included:

- Analysis of data, including core safeguarding pathway data and individual partner safeguarding data.
- Receipt of reports on annual adult partner self-assessment and Section 11 (S.11) selfassessments.
- Monitoring progress of the Joint Targeted Area Inspection (JTAI) action plan.
- Carrying out a supported learning visit of the fire and rescue service.
- Receiving presentations of safeguarding quality assurance systems applied in partner organisations.
- Recommending a questionnaire to support the review of the multi-agency safeguarding arrangements.
- Undertaking multi-agency reviews and audits.
- The progress of the subgroup's work has continued to be influenced by Covid-19 restrictions. Monitoring of data and scrutiny work by the ICS continues to support the work of the subgroup.
- The subgroup Chair continues to ensure each partner representative contributes their organisation's safeguarding quality assurance work and performance information to the overall work of the group which facilitates discussion and challenge. Meetings continue to focus on:
- Supporting the Board to gain assurance that safeguarding arrangements are in place in all partner organisations.
- Identifying trends and risks.
- Supporting the Board to ensure its strategic priorities are addressed.

#### 8.2 Communications Engagement and Prevention subgroup

The Communications, Engagement and Prevention subgroup has met on four occasions. Its work has included:

- Implementing the 'What good looks' like campaign for adults arranging their own care and to support families / carers choosing activities for children.
- Promoting the 'Making Every Contact Count' approach, and the associated on-line training and commencing an evaluation of the training.
- Engaging with community leaders, including production of a video, to raise awareness of safeguarding amongst seldom heard members of the community, and to receive feedback.
- Supported the AWARE event highlighting exploitation risks.
- Development of a communications plan and campaign calendar.
- Overseeing the on-going development of the Board website and use of social media.

The progress of the subgroup's work has been affected by Covid-19, particularly the development of the safeguarding forum. However, a safeguarding forum is being planned for November 2021 if Covid-19 restrictions will allow.

"Video call was the primary communication method with internal networks and some external networks."

"Supervision with staff is being undertaken with social distancing and through virtual technology"

Safeguarding Partnership comments on communication amongst staff during Covid-19

The subgroup is now planning to embed and evaluate existing work and also considering the potential to take forward community engagement work with carer groups, to expand campaign materials and to implement work to map and promote indicators of risks and associated referral routes.

# 8.3 East Berkshire Learning and Development subgroup (L&DSG) and the Bracknell Forest L & D Forum

The East Berkshire Learning & Development subgroup aims to collate lessons learned from case reviews undertaken across Bracknell, Slough and the Royal Borough of Windsor and Maidenhead. Since its inaugural meeting held in January 2020 the subgroup met regularly to ensure systems could be developed to share learning consistently from local case reviews.

In addition, the L&DSG is responsible for promoting standards in respect of safeguarding training and will provide oversight of systems to quality assure single and multi-agency training. While the work of this group is still in development, the group has refined the East Berkshire Learning and Development quality assurance approach. While ensuring a collaborative approach is maintained across the region, BFSB has also worked to strengthen its support for local organisations operating within the borough.

"Training is commencing remotely, and staff are taking the opportunity to access drop-in training seminars"

"We are delivering safeguarding training remotely and providing teams with safeguarding advice, guidance and support and operating a business-as-usual approach"

"We are launching three online modules covering differing aspects of safeguarding" Safeguarding Partnership comments on training amongst staff during Covid-19

Following the creation of a dedicated Learning and Development Forum within Bracknell Forest, the Board has helped a range of organisations, (including many from our local voluntary and community sector) establish a framework for ensuring their staff and volunteers received high quality safeguarding training. The early stages of this work saw over 30 representatives attend an online training for trainers' event and with support from the Board's Business Unit, attendees have explored mechanisms to review the impact of such learning and to develop their quality assurance of such activities.

#### 8.4 Pan Berkshire Safeguarding Adult Policy and Procedures Subgroup

The subgroup has met twice during 2020/21 and continues to review the policy and procedures at each meeting and discuss amendments suggested by partners.

During the year, the subgroup carried out a major review of the website that hosts the pan Berkshire policy and procedures. The review included analysing feedback following the circulation of a questionnaire to partners and investigating options proposed by other providers. As a result of the review that pan Berkshire policy and procedure website will be developed to take account of feedback to ensure the policy and procedures remain accessible and can be used effectively.

#### 8.5 Pan Berkshire Safeguarding Children Policy and Procedures subgroup

The Pan Berkshire Policy and Procedures sub-group ensures that our online child protection policies and procedures are the subject of continuous review and where necessary that they are revised in line with any statutory guidance and/or evidence based best practice. While the subgroup draws on local learning, it works closely with the online provider 'Tri.x', to create robust policies and procedures. At each meeting of the subgroup, the current list of procedures is reviewed together with an agreed list of that are due for update. This ensures each chapter is reviewed at least every two years. Alongside any amendments suggested by Tri.x, the subgroup allocates chapters for review locally to ensure all remain current and reflective of local practice. During 2020-21 the subgroup continued to update the guidance publishing the changes on the home page of the website and disseminating details of these to colleagues subscribing to our automated email bulletin. Subgroup members also act as conduits to ensure learning from case reviews and/or audit/scrutiny work informs consideration as to the need for new, or revised procedures. Key messages in respect of the work undertake by the subgroup is now disseminated within a new twice-yearly newsletter. Details of the procedures can be found at: <a href="https://proceduresonline.com/berks/">https://proceduresonline.com/berks/</a>

#### 8.6 Pan Berkshire Section 11 subgroup

Section 11 (S.11) of the Children Act 2004 places a duty all organisations that provide services to children or provide staff or volunteers to work with or care for children to have arrangements that ensure they fulfil their statutory responsibilities to safeguarding and promoting the welfare of children. As a result, relevant organisations are required to submit a full S.11 audit /self-assessment every three years, with a mid-term review held at 18 months to assess progress and identify any further action prior to the next full submission. In 2020-21 there have been four S.11 Panels where ten full S.11 submissions and six mid-way reviews have been evaluated by the multi-agency Panel.

All self-assessments were submitted in advance, with a representative from the organisation invited to present their return to the Panel. This approach has been well received and has helped those submitting:

- Give context to the S.11 return
- Highlight what is working well and areas of improvement.



- Give evidence to validate the findings in the self-assessment
- Offer any other information to demonstrate compliance with S.11 duties
- · Put in place an action plan of improvements that is monitored by the organisation

As previously reported the Pan Berkshire S.11 subgroup endeavoured to maintain a business as usual throughout 2020-21 and despite the challenges from Covid-19, panel members have continued to attend virtual meetings of the panel with organisations continuing to submit their audits and mid-term reviews.

During the year, the panel acted as a critical friend and offered a high level of challenge to ensure organisations promoted good practice in safeguarding children. All panels held during 2022-21 were held online and there is a consensus that these have worked well. The panel was subject to a peer review in September '20. The feedback to the panel was positive and provided helpful observations on which to reflect and that will help shape the planned developments for the future of the panel.

In addition to the detailed analysis provided within the current S.11 tool, the following three cross cutting themes have featured as specific areas for consideration:

- The voice of the child.
- Safeguarding in commissioning arrangements
- · How safeguarding is promoted to volunteers as well as paid staff.

In order to improve the scrutiny of the panel and to be more evidence focussed, the panel also requests supporting information pertaining to their involvement in any case reviews, audits and/or inspections.

#### 8.7 Case Review subgroup (CRSG)

The CRSG was established as part of the current safeguarding arrangements in July 2019. As a result of the Covid-19 pandemic, meetings have continued to be held virtually and this has enabled work to be progressed effectively.

The primary function of the CRSG is to oversee Local Learning Reviews (LLRs), Safeguarding Adults Reviews (SARs) and Local Child Safeguarding Practice Reviews (LCSPRs) in accordance with the contemporary statutory guidance. In addition, the CRSG ensures learning

from its activities leads to improvements in local systems and/or practice (as highlighted in the case reviews summarised below).

The CRSG is also responsible for monitoring the progress of reviews, collating evidence of actions taken and their impact on practice. This ensures that, in conjunction with the east Berkshire Learning and Development subgroup, learning is disseminated promptly by partners to all relevant staff.

The subgroup has continued to facilitate the implementation of the all-age Rapid Review process to ensure an efficient response supports the gathering of information following notifications made by local partners.

Copies of all reports published by the CRSG, together with learning briefs related to its work can be found on the Board's website.

#### **Local Case Reviews**

#### Safeguarding Adult Reviews (SARs)

Under Section 44 of the Care Act 2014 the Safeguarding Board is required to arrange a Safeguarding Adults Review (SAR) when someone with care and support needs dies as a result of neglect or abuse and there is a concern that the local authority or its partners could have worked more effectively to protect them. SARs can also be commissioned when an adult has not died, but the Safeguarding Board knows or suspects that the adult has experienced serious abuse or neglect. It is intended that such processes enable the Board to ensure lessons are learnt, that they publish reports detailing the work of the review and the outcomes of SARs are contained within annual report such as this.

During 2020/21 Bracknell Forest Safeguarding Board commissioner one Safeguarding Adult

Review. At the time of writing this annual report the review had not been completed, but learning established early in this process was shared with the relevant partner agencies in order to highlight both the good practice observed and the areas requiring improvement.

The key themes emerging from this review related to partner agencies responses to concerns regarding Domestic Abuse and the part unconscious bias played in the assumptions that initially discounted the possibility of a woman being capable of such extreme violence and coercive control. In addition, learning identified the need for improvements in local systems to ensure information in respect of individual's mental health and substance misuse is appropriately considered within any assessments of the needs and/or risks they may pose and/or face. A formal report setting out the findings of the review will contain specific recommendations from an Independent Lead Reviewer. Subject to the approval of the Safeguarding Board, its Case Review subgroup will provide scrutiny of a detailed action plan designed to deliver lasting improvements where these are considered necessary.

During the year the dissemination of learning from the Board's GH SAR continued and scrutiny of the actions identified within the report were undertaken by the CRSG. Details of this SAR were reported in the Board's Annual Report (2019-2020) and are located on our website.

The delays previously reported in respect of the AB Nursing Home SAR were further exacerbated by the Covid-19 pandemic and delayed criminal prosecution. Therefore, the report is yet to be published, although the agreed action plan has been disseminated to partner agencies and has been completed.

In addition to the learning from SARs conducted within the borough, the CRSG worked collaboratively with neighbouring Safeguarding Adult Boards to share learning and has ensured the findings from the national Analysis of SAR (2017-2019) have also been shared with partner

agencies. A Task and Finish group will be formed to consider the recommendations contained in the report and will identify any areas for improvement.

During the year the CRSG worked to embed an 'all age' approach to strengthen the initial responses to cases where partners considered there to have been potential improvements to joint or inter-agency working. This new approach mirrors the Rapid Review process established in respect of children and is referred to in more detail at the end of this section.

#### Local Child Safeguarding Practice Reviews (LCSPRs)

<u>Working Together 2018</u> sets out the statutory requirements for case reviews and also highlights the learning that can be achieved through an initial analysis of cases that may not meet the requirements for a formal LCSPR.

During the period covered by this report the Bracknell Forest Safeguarding Board (BFSB) completed one LCSPR and commissioned one other.

While important learning was identified by the review completed during the year, it has been necessary to delayed publication due to the ongoing criminal investigation. To protect the identification of the child involved and their family members, the report will be published (with the agreement of the National Panel) in an anonymised format on the NSPCC website. However, a <u>learning brief</u> has been published and disseminated to support those agencies involved in the case further improve practice. In summary, this learning identified the importance of staff/volunteers understanding:

- Vulnerabilities associated with mental health difficulties
- The risk of child sexual exploitation
- The importance of the voice of the child and its impact on interventions and service development
- The dynamics of families who are reluctant to engage with services
- The challenges in assessing fluctuating capacity
- · The importance of building trusting relationships with children and their families

The brief reflects the involvement of the child and front-line staff; it highlights good practice and important learning to support practice improvements. This learning has also been disseminated via online multi-agency learning events. The review involved partners from a number of areas across the south east of England and received a high level of support from managers and staff alike.

The action plan that was devised to ensure the necessary improvements identified has been overseen by the CRSG who have received assurance that progress has been made in many areas and that planned work continues.

The LCSPR commissioned during the period covered by this report is ongoing; however during the initial Rapid Review and early stages of the LCSPR good practice and opportunities for learning have been identified. Relevant partner agencies have already taken action in respect to a number of areas identified and the Independent Lead Reviewer continues to offer external challenge to supporturther improvements.



#### Rapid Reviews and Local Learning Review

As referred to earlier in this section, the CRSG worked to embed an 'all age' approach to identifying potential learning and to help partner agencies work more effectively.

During 2020-2021, the Board undertook at total of four Rapid Reviews (RR) – two involving children and two relating to adults. Of the two RRs involving adults, one resulted in no further action and the other in the commissioning of a SAR. Of the two RRs held in respect of children, one case resulted in a Local Learning Review and the other resulted in a LCSPR, having been commissioned.

While the RR conducted following the death of an individual did not result in a SAR being conducted, learning from this case was identified during the process and included the importance of:

- Agreed mechanisms for tracing next of kin
- Out of hours communication between key organisations
- Accurate information exchange between partner agencies

In addition to the above learning the RR considered the potential impact of Covid-19 on the delivery of services. It acknowledged that there had been good use of telephone and online support, although it also noted the reluctance of other residents living within the home to enter the individual's bedroom to facilitate communication with the emergency services.

As stated above, the BFSB also conducted a LLR during the period 2020-21 and focussed on the learning established in respect of an older child from the Gypsy Roma Traveller (GRT) community injured in a road traffic accident. The review noted the importance of robust safeguarding within education and specifically:

- The vulnerability of the child not accessing education
- The importance of schools notifying the relevant local authorities of children not attending school.
- The importance of historic information regarding education being available despite the closure of schools.

The above learning is designed to inform safeguarding procedures and is the subject of on-going action to support required improvements. Subsequent to the RR, a multi-agency roundtable learning event considered the question of how effectively safeguarding measures were applied to children from GRT communities. As a result the BFSB was assured that there was no evidence to suggest any failure to safeguard children from these communities but were alerted to the prejudice and discrimination that they can experience. Details of the above learning will be set out within a multi-agency learning brief with associated learning events.

Further details relating to the RR process, (including LLRs), SARs, & LSCPRs can be found at Bracknell Forest Safeguarding Board - Safeguarding Adults Reviews SARs & CSPRs



# 9. Performance information

There are approximately 121,000 people living within Bracknell Forest with a relatively even split between males and females.

Children (aged between 0-17 years) make up 23% of this population.



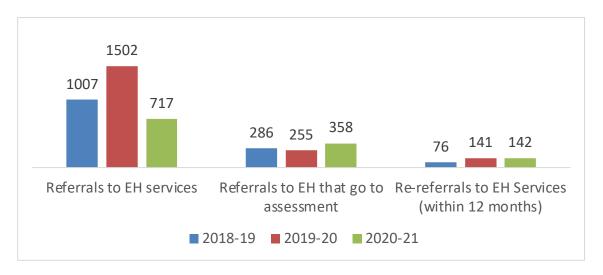
ONS Mid-2018 Population Estimates

# 9.1 Safeguarding Children Performance Information

#### Early Help

During 2020/21:

- there were 717 referrals (families) (covering 1428 children¹) received and processed by Early Help (EH)
   Duty Team to assess the most appropriate Early Help support to be offered.
- there were 142 families (290 children) re-referred within 12 months of a previous EH referral.
- there were 358 EH assessments completed during 2020-21 which includes both family assessments and targeted youth assessments. However, of the 717 referrals received, 679 families (95%) were offered an EH service (although being offered a service does not mean a service was taken up).



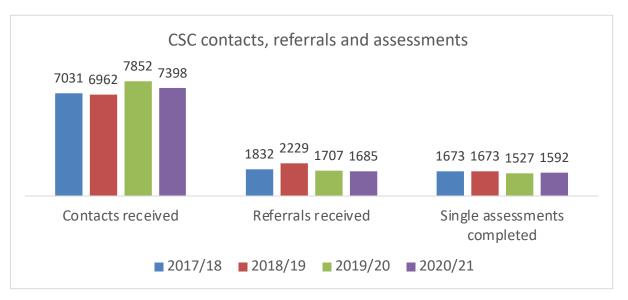


<sup>&</sup>lt;sup>1</sup> the graph shows number of children (rather than families) for 2018-19 and 2019-20

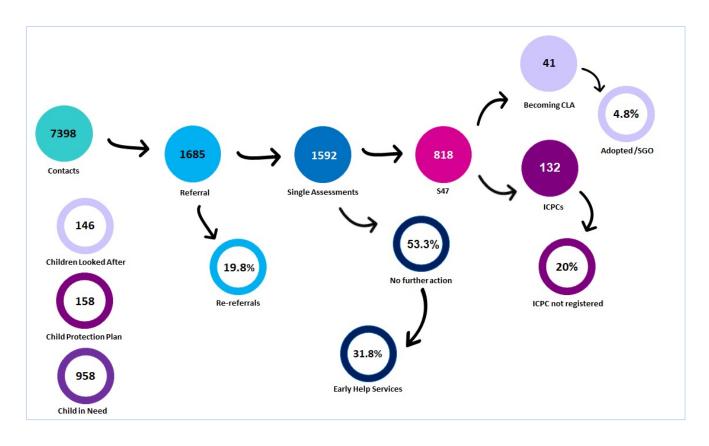
#### Children's Social Care

There were 7,398 initial contacts received by Children's Social Care (CSC) during 2020-21 which is a decrease of 6% from the previous year. Over a fifth (23%) of these contacts led to a referral which is higher than the previous year (20%). From the 1,527 referrals 88% led to an assessment compared to 77% the previous year.

The rate of referrals to CSC (593.6) during 2020-21 (per 10,000 under 18s) was higher than the national average (534.8), South East (581.1) and statistical neighbours (474.9) (from 2019-20).



The following children's safeguarding pathway shows contacts, referrals, assessments, CP plans, children looked after and child in need during 20/2021.



#### Children in Need



#### Snapshot at the end of March 2021

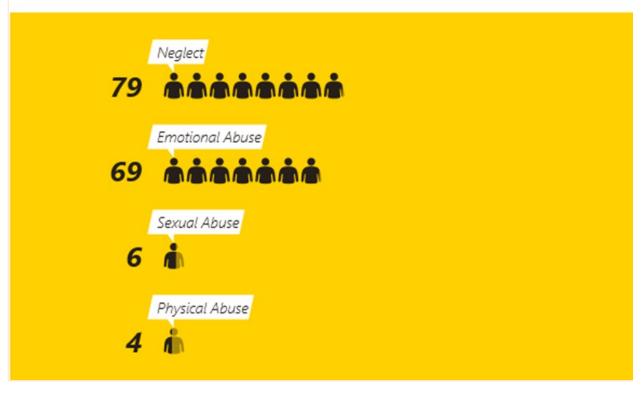
There were 132 children who had an Initial Child Protection Conference (ICPC) and from these 20% did not become subject to a child protection plan which is lower than the previous year (29%).

From the 158 children subject to child protection plans at the end of March, 19% were on a plan at any time previously compared to 24% the previous year (this includes 2% in the previous 12 months; 9% within the previous 2 years).

Children subject to CPP by Age Band & Gender	Male	Female
Unborn	(	6
Under 1 - Female	3	4
1 to 4 - Female	15	25
5 to 9 - Female	22	19
10 to 15 - Female	24	25
16 and over - Male	11	64
TOTAL	15	58

Neglect and emotional abuse made up the vast majority of children subject to child protection plans (94%) at the end of March 2021.

# CP PLANS BY ABUSE CATEGORY



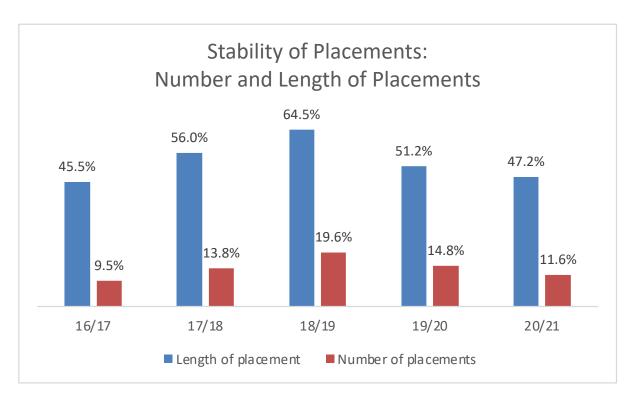
#### Snapshot at the end of March 2021

There were 146 children looked after (CLA) at the end of March which is slightly higher than the same point in the previous year (146). The rate per 10,000 under 18s was 51.4 compared to 53.0 in the South East, 49.1 for statistical neighbours and 67.0 across England.

The number of CLA with three or more placements was 12% at the end of March which has continued to improve over the last two years. The previous year of 15% compares to 13% in the South East and 11% nationally. Emergency and temporary foster care would count as new placements.

Length of placement<sup>2</sup> is also important for CLA as it delivers consistency and permanence which is key if they are to recover from the trauma they have experienced prior to coming into care. In Bracknell Forest this was 47% in 2020-21 compared to 51% the previous year (and 65% in the South East and 68% nationally)<sup>3</sup>. Reasons for children needing to move placements is to manage risk factors such as gang activity, missing episodes and county lines. There are also positive reasons for a move such as children stepping down from residential to live within a family environment of foster care, being placed for adoption or needing to move in line with their care plan.





71.4% of Year 6 CLA (who were in care for at least 12 months) achieved at least the expected level for both English and Maths and 50% of CLA Year 11 (12 months+) achieved the equivalent of 9 - 4 grades

5% of children looked after were adopted/Special Guardianship Order (SGO) expressed (as a % of CLA for at least six months). This is a lower percentage to the previous year (10%).

The number of privately fostered children remains low with two being the highest number recorded at any point in the year.

89% of care leavers aged 19, 20 & 21 were in suitable accommodation but over half (55%) were NOT in education, employment or training. 97% of all care leavers were in suitable accommodated with 31% NOT in education, employment or training. The main barriers to education, employment and/or training for care leavers includes those who are either parents or have a disability, are living out of borough and the lack of employment opportunities over the past 15 months (due to Covid). There is a support service which professionals can refer to and

a recent appointment (anticipated September 2021 start) will provide an intensive level of support to NEET Care Leavers. The intention is also to support care leavers out of borough by linking in with the equivalent service in the local area.

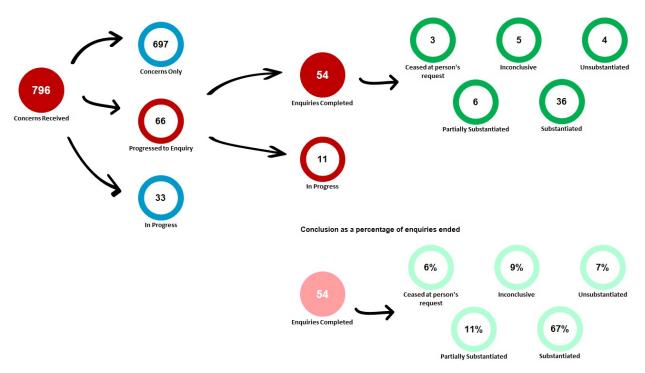


#### 9.2 Safeguarding Adult Performance Information

The performance data reflects the key data monitored by the Board and its Quality Assurance subgroup and to which all partners contribute. The safeguarding process including the definition of Concerns and Enquiries is found in the pan Berkshire safeguarding adult policy and procedures. A safeguarding concern is a sign of suspected abuse or neglect that is reported to the local authority or identified by the local authority. A safeguarding enquiry is an action instigated or taken by the local authority in response to a concern that abuse or neglect may be taking place.

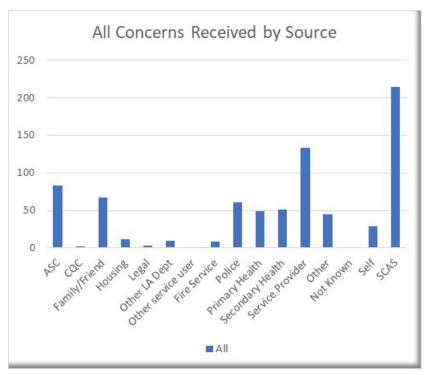
Concerns per 100,000 population	748.9
% of concerns progressing to enquiry	15.6%
Number of enquiries ended per 100,000 population	123.2

The table shows that 699 concerns were reported by partners to the local authority during 2019/20. The conversion rate of concerns received to enquiries taking place was 15.6 %. A total of 115 enquiries were completed during 2019/20. These included enquiries that were started before March 2019. 71% of these enquiries abuse or neglect were either fully or partially substantiated. Further details of the concerns received and enquiries completed during 2019/20 are included below.



The flow chart shows that of 796 concerns were reported by partners to the local authority during 2020/21 66 of these concerns progressed to a safeguarding enquiry. As a result of the 54 safeguarding enquiries completed during 2019/20 78% were either fully or partially substantiated. Further details of the concerns received and enquiries completed are included below.

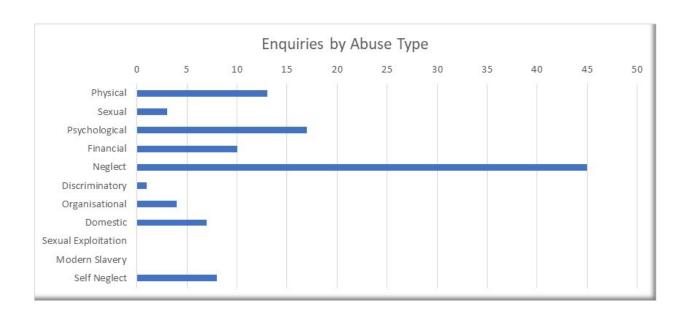
#### Safeguarding Concerns - Sources of Concerns



The graph shows the range of partners that have reported safeguarding concerns during 2019/20.

#### Completed Safeguarding Enquiries - Types of abuse

For all safeguarding enquiries completed, the greatest number of enquiries were due to neglect, followed by psychological, physical and financial abuse. This is similar to previous years when the majority of enquiries are due to these four types of abuse.

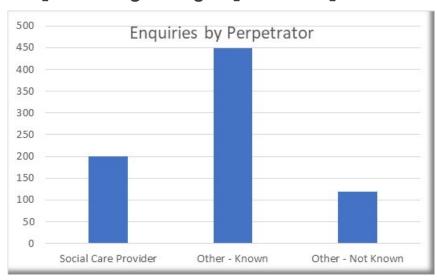


#### Completed Safeguarding Enquiries - Location of abuse



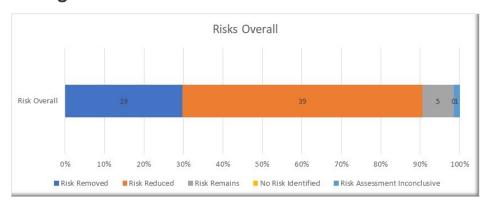
As in previous years the majority of abuse or neglect investigated during a safeguarding enquiry was due to abuse and neglect being reported to have occurred within a person's own home.

#### Completed Safeguarding Enquiries - Perpetrators of Abuse and Neglect



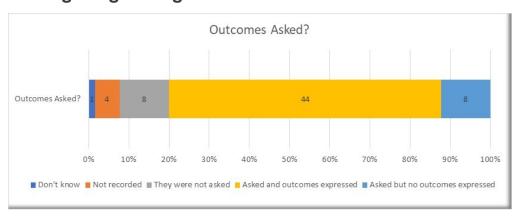
For the majority of safeguarding enquiries completed, the perpetrator was known to the person.

#### Management of risk



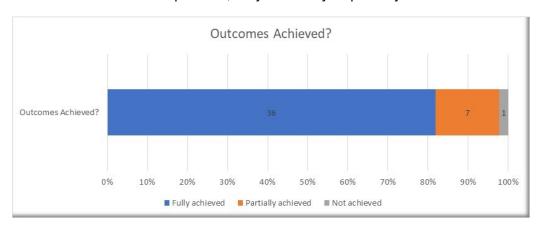
For safeguarding enquiries concluded, in the majority of cases (90%), risk was removed or reduced.

#### **Making Safeguarding Personal - Outcomes**

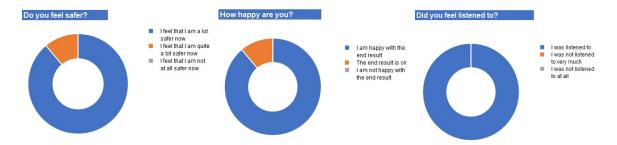


People were asked the outcomes they desired in 80% of safeguarding enquiries that were concluded.

When outcomes were expressed, they were fully or partially achieved in 98% of the cases.



#### Making Safeguarding Personal - Feedback



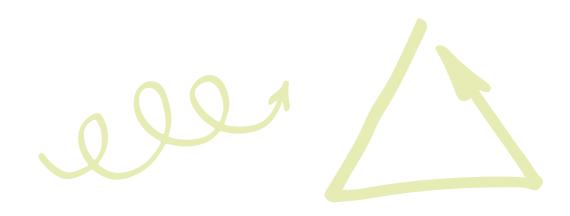
In the majority of cases where feedback was provided, adults who experienced the safeguarding enquiry process stated that they felt safer, felt listened to and were happy with the process.

## 10. Future challenges and priorities

While Covid-19 has provided significant challenges to the Board and partners during 2020-21 and they will continue to review the emerging priorities and will formulated plans that address both short- and long-term issues.

As stated in the introduction to this report and in line with the Board's Strategic Plan, the following challenges will be addressed through the work of the Board and its subgroups.

- To develop further its understanding of the new safeguarding environment as a result of Covid-19. This includes potential new safeguarding risks and new effective ways of working, the impact of online/remote working being an example.
- To develop effective strategies to improve understanding of the difficulties and disadvantages some groups in the community face with the safeguarding process. This should assist improved understanding of the partners' approach to safeguarding.
- To work towards embedding contextual safeguarding and a strong family approach to risks assessment processes.
- To improve the Board's ability to secure feedback from those it seeks to safeguard and ensure that the feedback shapes service development.
- To continue to develop the Quality and Assurance process to ensure that the Board can focus on areas of weakness within the adult and children safeguarding process.
- To disseminate learning using a range of methods and to evaluate its impact.



# 11. Financial Information

As there is no national formula for funding, levels of contribution are agreed locally. Bracknell Forest Council currently contribute the majority of the Board's direct funding. In addition, Bracknell Forest Council hosts the Safeguarding Board's Business Unit. The CCG and Thames Valley Police are the only other partners who currently contribute to the Board. Income and expenditure for 2020/21 are shown below.

#### Safeguarding Board 2020/2021

INCOME / BUDGET	
BF Council Budget (base budget plus adjustments)	49,375
Partnership Funding	55,947
Gross Budget	205,322
Underspend Carry Forward from Safeguarding Adult Board	2,303
Underspend Carry Forward from LSCB	36,782
Income LSCB Training 19/20 received 20/21	18,567
Underspend	57,652
AVAILABLE FUNDING 2020/21	262,974
COSTS	
Staff costs:	149,138
Business Managers x 2 (32 hours / 22.5 hours)	
Partnership and Performance Officer (22.2 hours)	
Business Support Officer (22.5 hours)	
Independent Chair and Scrutineer	18,472
Child and Adult Case Reviews (CSPRs and SARs)	16,896
Other costs	1,746
TOTAL SPENDING 2020/21	186,252
UNDERSPEND 2020/21 CARRIED FORWARD TO 2021/22	76,722

# Appendix 1

#### Strategic Plan 2020-2022 - action plan progress

1. Prevention – we will ensure partners work together to prevent all forms of harm recognising the long-term consequences

How we will do it	What we have done
i. By publishing up-to-date multi-agency guidance/ procedures that help partners maintain a high level of safeguarding awareness.	1a. Policy and Procedures (P&P) multiagency safeguarding guidance routinely reviewed through pan-Berks meetings (for adults and children separately).
	1b. Adult P&P website being reviewed for effectiveness and alterations agreed vi the work of a task and finish group taking feedback from practitioners
	1c. Children's P&P have continued to be updated on a quarterly basis. Local panel have ensured updates reflect our regional learning and Tri.x draw on national developments.
ii. By evaluating: partners work to prevent harm and offer of early help	Regular partnership meeting ensures feedback on effectiveness of local preventative work and informs the Board's Risk Register.
	Review of safeguarding referrals is underway that will help to evaluate effectiveness of partners work.
	QA sub group considers safeguarding performance.
	Rapid Reviews and Case reviews evidence compliance with procedures and inform actions to be taken to mitigate gaps.
	CEP subgroup agreed to schedule work on organisations promoting risks and referral routes.
ii. By evaluating: the strength of collaborative working within the borough to identify those who are most vulnerable.	Members of the Safeguarding Partnership provide updates on their work and emerging risks. This has supported and enabled collaborative working.
	The Risk Register is constantly updated reflecting this. Risks that apply to other partnerships are shared with them.
	The Risk Framework continues to be used and promoted to ensure widespread use as it is not fully embedded yet.
	The CEP subgroup is collating responses on feedback from children and adult on the services they receive and are promoting work to tackle inequalities and ensure the voice of seldom heard groups is captured.

How we will do it	What we have done
iii. By promoting and evaluating a 'contextual safeguarding' approach by partner organisations.	Recently established local multi-agency groups exploring exploitation and serious violence will inform the Board's strategy and the coordinated approach to working with other strategic partnerships.
iv. By supporting partners to continue to embed an 'all age approach' to safeguarding including expansion of the risk framework to develop its application for older children.	Work continues to promote an all age approach to safeguarding and is reflected in the reconfiguration of the local subgroups and is routinely promoted through the Board's safeguarding partnership. The Business Unit continues to promote this approach within its joint working with neighbouring safeguarding partnerships. Challenges identified within this work is shared within meetings of the BFSB and its Partnership. The Risk framework continues to be promoted and is currently the subject of a review relating to the structures required to support this approach. The Board continues to explore conceptual frameworks (such as the 'Family Approach') to support future strategic planning.
v. Through continual collation of risks identified by partner organisations and the mitigating actions being taken (to include a focus on the impact Covid and Covid recovery).	A risk register is informed by evidence provided by local partners and in line with the Board's strategic direction is continually updated following analysis undertaken within meetings of the Partnership and Safeguarding Board. As per the revised 'memorandum of understanding' risks and relevant information is now proactively shared with officer from other strategic partnerships.

2. Protection – we will ensure a robust outcome focussed approach to protect people at risk of experiencing abuse and neglect

How we will do it	What we have done
i. By working with partners, we will seek assurance that safeguarding thresholds are understood and where there is concern about decision making staff promptly challenge and if necessary, escalate issues using the SB procedures.	Thresholds Task and Finish Group reviewed and revised the guidance which were signed off at the Board meeting held 22 Apr2021 and will be reviewed annually. The review of safeguarding referrals is contributing to the assurance that thresholds are understood.  Multi-agency audits/LSCPRs/SARs
	scrutinise how thresholds are applied.

How we will do it	What we have done
ii. We will require partners to evidence the effectiveness of actions taken to safeguard the	CEP subgroup is collecting the voice of child /adults.
most vulnerable.	Individuals are routinely to invited to take part in learning reviews.
	QA subgroup review safeguarding performance data at each meeting and adult self-assessment data / BF S11 panel returns at 20 May 2021 meeting.
	The recent review of referrals helps evidence effectiveness of actions and areas for improvement.
	Case Review subgroup monitors progress against SAR/CSPRs multi and single agency action plans.
	Detailed discussion and corresponding challenge takes place at regular safeguarding partnership meetings.
iii. We will require assurance that local practice recognises the impact of inequalities and ensures safeguarding plans reflect the unique needs of the individual.	Discussions are taking place with community leaders to identify issues of inequality and challenges. Work is progressing to develop the Safeguarding Forum to enhance this work. We are also sharing information with other BF Boards through joint protocol meeting.
	CEP subgroup are collecting the voice of adult/children and raising awareness of MSP.
	Case Review subgroup work identified the need for equality of approach and action plans will aim to address this. The Business unit is currently supporting work to produce national guidance to ensure discriminatory abuse is robustly addressed within case reviews.
	Opportunities to strengthen practice will be considered on potential application of the family approach.

How we will do it	What we have done
iv. We will require partners to demonstrate compliance with the Mental Capacity Act (MCA) and the Liberty Protection Safeguards (LPS).	Periodic reports re LPS from Head of Safeguarding and Practice Development are being received by the Board and its Safeguarding Partnership.
	Annual adults self-assessment returns provide assurance of compliance with MCA.
	Case reviews also analyse compliance with MCA and has provided recommendations as required. Th Business unit will ensure its work with the Local Learning and Development Forum promotes the focus on LPS within partners training.
v. We will implement local, regional and national learning to ensure local procedures are the subject of continuous improvement.	The work of the East Berkshire L&D group continues to be developed. The BF L&D Forum promote key messages for inclusion in their development/training activities. The Case Review subgroup ensures reviews included learning events/ briefs and utilise webinars. Learning is shared between Boards within the region.

3. Partnership – we will seek assurance about the effectiveness of local partnerships and collaborations to safeguard people

How we will do it	What we have done
i. We will review and revise the Strategic Partnerships Memorandum of Understanding.	MoU has been updated and has been adopted by the Chairs of the Boards. Quarterly meetings of partnership chairs and officers are now taking place to share information on risks and priorities.
ii. We will ensure partners work effectively together to develop mutual understanding of each other's roles and functions.	Members of the Safeguarding Partnership group provide updates on their work and roles at each meeting.
	This is core to the work of the CEP subgroup e.g. comms plan, community leaders and forum.
	The BF L&D Forum facilitates mutual understanding.
	S11 and self-assessment contribute but will be strengthened by the work of the Business Unit and additional scrutiny provided by the ICS. The Case Review subgroup identifies good practice and areas for development.
	Pan Berkshire policy and procedures groups, regularly update procedures and promote clarity relating to the roles and functions of partners.

How we will do it	What we have done
iii. We will continue to support partners to identify emerging risks and to work collaboratively to implement effective solutions.	Risk register is central to identifying emerging risks and backed up by work of the sub-groups. Work with all key partners has helped establish potential risk. This collaborative approach has enabled contributed to the review of evidence supporting prioritisation of emerging risks and is shared as a standing item within each meeting of the Board.

4. People – we will seek assurance that people who use services are involved in safeguarding processes and the work of the board.

How we will do it	What we have done
i. We will work with local partners to establish an understanding the Bracknell Forest community as it relates to safeguarding .	CEP work has previously identified community leaders who are supporting the work to understand issues facing Bracknell Forest communities. This work includes making safeguarding videos and promoting the voice of individuals.
	The Board's Safeguarding Forum is being further developed to enhance this. The implementation of the memorandum of understanding is facilitating better information sharing amongst Bracknell forest partnerships which will include support to enable better understanding of local communities.
ii. We will require partners to work together to identify factors associated with inequalities and any barriers to people's engagement with local safeguarding processes and the work of the Board.	The Busines Unit is working with community leaders to identify safeguarding inequalities and to determine the needs of local community.
	The CEP are working with local communities to produce safeguarding materials.
	The future work of the Board's Safeguarding Forum is being further developed to enhance this.
iii. We will require partners to secure feedback from adults and children on the services they use.	The CEP subgroup and the Board's Safeguarding Partnership are receiving information collected by partners regarding the voice of children and adults.
	The CRSG has sought to strengthen the involvement of individual and begun to reflect this within dissemination of learning. Findings from the recent review of safeguarding referrals will additionally help identify any necessary improvement.

How we will do it	What we have done
iv. We will require partners to work together in an all age approach to improve communication of the safeguarding messages to the local community.	We are working with community leaders to identify safeguarding inequalities to determine the needs of local community. One safeguarding awareness video has been produced.
	The Safeguarding Forum is being developed to enable conversations around the different forms of inequality.
	Safeguarding messages are promoted via the board and partner's websites, social media and via campaigns and a partnership campaign calendar is in development.

# **Appendix 2: Contributions from Partners**

Partners were asked to provide a brief summary, outlining their responses to 3 areas:

- What were their safeguarding priorities/actions implemented during 2020/21 and how did these actions benefit people who use their services to stay safe (to include the impact of Covid-19)
- What are their adult and children safeguarding priorities/actions for the coming year (2021/22)?
- Details of the safeguarding training provided by each agency and any other safeguarding training attended by their staff and the impact observed as a result of the training?

#### 1. Bracknell Forest Council

Throughout the past year Bracknell Forest Council has continued to maintain the safeguarding of our residents as our number one priority. This has included a range of different challenges during the COVID-19 Pandemic, which have meant that the council has been focused on keeping people safe in different circumstances. Throughout this all of our services have focused on maintaining safeguarding standards in often difficult circumstances.

The following is a summary of some of our key safeguarding priorities & actions:

#### Adult Social Care:

- Embedded the new role of Principal Social Worker in supporting and leading professional standards
- Established a weekly Adult Social Care cell to oversee and coordinate efforts through the pandemic
- Further developed our Care Governance approach and contract monitoring and Quality assurance of Provider Services
- Established more frequent engagement with providers, supporting them with advice, guidance and funding to support vulnerable residents

#### Early Help

- Developed and implemented a new quality assurance framework
- Coordinated activity to ensure that vulnerable children were able to continue to attend educations settings through the pandemic
- Worked with partners to provide an agile response to increasing mental health and domestic abuse challenges
- Worked in partnership to target welfare support to those most in need during the year

#### Children's Social Care

- Ensured we maintained visibility of children at risk through maintaining all services, and lowering thresholds where children were less visible to other partners
- Incorporated children's services into our Care Governance Board, such that there are monthly multi-agency discussions about providers with quality concerns
- Embedded our full-time Principal Social Worker role, providing support to our workforce and raising standards

#### **Schools**

- Supporting all schools through the pandemic
- Supporting schools and early years providers with free school meals and welfare payments during holidays
- Supporting children with SEND through the pandemic

 Supporting all schools to stay open in order to provide places for vulnerable children throughout the pandemic

#### **Priorities:**

#### **Adult Social Care:**

Embedded the new role of Principal Social Worker (PSW) in supporting and leading professional standards

Our new PSW has been supporting practice standards, in order to ensure that the people who receive support can expect a consistent high standard. Our PSW has the opportunity to feedback regularly to senior leaders, ensuring that barriers to effectiveness are heard and understood and supporting a feedback loop of improvement.

Established a weekly Adult Social Care cell to oversee and coordinate efforts through the pandemic

Our ASC cell brought together managers from across adult social care related teams along with those leading on the council's response to the pandemic. The group was central to efforts to adapt rapidly to changing events, providing the support needed to individuals and the services that provide their support. As a result of this work we were able to continue key services throughout the pandemic and ensured that people who needed our help were always able to get it.

Further developed our Care Governance approach and contract monitoring and Quality assurance of Provider Services

This has been the first full year since the development of our new commissioning team. The team has added to the effectiveness of Care Governance, working alongside partners, our Safeguarding Practitioners and our operational delivery teams. The result has been that provider concerns have been managed more productively, ensuring that services safeguard people more effectively.

Established more frequent engagement with providers, supporting them with advice, guidance and funding to support vulnerable residents

During the year we have focused intensively on supporting providers through the pandemic with advice, funding, challenge and coordination. Along with enhancing the support and challenge from commissioning to providers – the council aligned with NHS colleagues and Windsor & Maidenhead and Slough to develop a COVID specific East Berkshire Care Governance meeting. Through agile and focused effort this work has helped to reduce the number of COVID outbreaks in care settings and response rapidly to curtail them when they have occurred.

#### **Quality Assurance**

Quality monitoring of adult social care safeguarding activity is supported through the model of adult safeguarding in place at BFC which involves an independent chairing role function; this enables a valuable overview of safeguarding activity and practice across all adult social care teams. Quantitative intelligence is analysed alongside monthly qualitative data to obtain an accurate picture of how all adults teams are delivering BFC safeguarding arrangements.

#### Early Help:

Developed and implemented a new quality assurance framework

Our new quality assurance framework has been implemented from the second half of 20/21. The purpose of the framework is to assure that all part of the service are delivering safe and high quality practice that is focused on outcomes. Implementing the framework has included peer reviews of practice and customer feedback. This is helping to identify areas for improvement, and through raising standards in a targeted way will help to keep children safe in the future.

Coordinated activity to ensure that vulnerable children were able to continue to attend educations settings through the pandemic

Working together with children's social care and education we have led on work to ensure that all children who are vulnerable had access to a school place during the pandemic and were supported to access this. Through our focused work we have been able to ensure that all children with a social worker had a school place and that the attendance of these children was above local and national averages.

Worked with partners to provide an agile response to increasing mental health and domestic abuse challenges

A range of initiatives have been in place to support children and families with mental health and domestic violence challenges during the pandemic. This has included the implementation of the Getting Help service, increased funding for Youth Line Counselling and supporting the roll-out of comprehensive workforce training. Our Early Help teams also provide a range of domestic abuse programmes, and the service is a core part of a local strategic partnership to tackle the issue. This work included the recruitment of an additional domestic abuse outreach worker and a widespread local communications campaign to reach victims and those at risk of domestic abuse to enable them to safely seek help through lockdowns.

Worked in partnership to target welfare support to those most in need during the year

Throughout the pandemic the Government have made a number of welfare funds available for local authorities to disburse, including the Covid Winter Grant/Local Support Scheme and the Test and Trace (including Discretionary) Scheme. We have coordinated our response across People services, working with corporate colleagues and partners, to proactively target funding and maximise the take up of help available by families in need in the borough. This included through our existing Crisis Fund, fuel grants, mobile phone top ups, help with school uniforms, vouchers for children in receipt of free school meals and under 5's eligible for the early years pupil premium and more. In recognition of the impacts that the pandemic has had on many households, the Council has provided a one-off Covid-19 recovery package in the budget for 2021/22 including £300,000 welfare support to tackle financial hardship.

#### Children's Social Care:

Ensured we maintained visibility of children at risk through maintaining all services, and lowering thresholds where children were less visible to other partners

Our primary focus in the past year has been to ensure that children were safe throughout the pandemic. Our leadership team focused throughout on creative ways to ensure that we kept children safe at each stage of the pandemic. This included reducing thresholds in order to maintain greater visibility, targeted supported for children under-one, increasing frequency of contact and maintaining face to face contact where children were at risk and increased management controls when making decisions about cases stepping down. The impact of this has been to keep children safe during the pandemic.

Incorporated children's services into our Care Governance Board, such that there are monthly multi-agency discussions about providers with quality concerns

The inclusion of children's service in Care Governance has added to the rigour we have in place to oversee the quality and safety of providers. The forum has introduced multi-agency discussions to support provider oversight and decision making about safety and quality improvements.

Embedded our full-time Principal Social Worker (PSW) role, providing support to our workforce and raising standards

Our PSW for children's social care started in March 2020 and supported our workforce throughout the pandemic. Significant progress was made towards supporting frontline staff to work within Covid19 restrictions, ensuring safe practice and consistent standards. Extensive practice improvement work continued throughout the year from development of a strong value base such as Diversity and Inclusions workshops, to addressing logistical challenges.



#### Schools:

#### Supporting all schools through the pandemic

Throughout the year our Education and Learning team has worked proactively with schools to support their efforts to maintain safety and wellbeing of local schools. This included supporting with public health guidance and DfE guidance and targeted support with local challenges. All schools were allocated a Standards & Effectiveness Partner, had regular contact with senior council staff and were supported with templates such as risk assessments. This support helps schools to operate effectively and maintain safety for the school community.

Supporting schools and early years providers with free schools meals and welfare payments during holidays

Councils had discretion as to how to allocate national funding. At Bracknell Forest we prioritised holiday food vouchers by offering £20 per child per week which was above the DFE standard rate of £15 per child per week. We also targeted not only those on free school meals but also the equivalent under 5's. Parents were able to redeem vouchers at their preferred supermarket of choice.

#### Supporting children with SEND through the pandemic

The council worked with schools promote support to children with SEND throughout the pandemic. This included undertaking individual risk assessments and monitoring all children who were not in school. Our Child Development Centre, which supports young children with SEND opened as early as public health guidance allowed to provide support to the most vulnerable children and their families. Working with the Early Help service the team developed a more in-depth approach to supporting families in which a child with SEND was absent from education.

Supporting all schools to stay open in order to provide places for vulnerable children throughout the pandemic

The council supported schools throughout the pandemic with clear messages about the priority of ensuring that all vulnerable children had access to a placement. Effective collaborative work was put in place to monitor attendance and provide targeted support. This included identification of 15 priority schools who were supported with multi-disciplinary meetings to support children to return to the classroom. The impact of this was that a higher proportion of vulnerable children was able to access education settings throughout the pandemic.

#### 2. CCG

The CCG is a committed safeguarding partner. Represented by the CCG safeguarding team, relevant and appropriate workstreams and multiagency meetings are attended and supported; this includes adult and children serious review panels and subcommittees.

This report begins by setting out the Covid 19 response; this was an exceptional response and formed a large part of the CCG safeguarding team's activity during 2020 – 2021. Each workstream is then considered and summarised to complete the report.

#### Summary of CCG safeguarding Covid response:

The emergency response to the global Covid 19 pandemic (herewith referred to as: Covid) commenced a nationwide lockdown resulting in NHS emergency strategies to ensure increased acute and community capacity to deal with increasing numbers of the population requiring NHS care. The Frimley Collaborative supported staff to work from home in line with Government mandate from 24.3.20.

The methods employed to increase support for safeguarding during Covid remained throughout 2020/21 and continued into 2021/22 reporting cycle. The CCG Safeguarding team, mindful of increased immediate safeguarding risks to the population were required to act quickly, flex the service, agree priorities and increase support across the system. The Frimley Collaborative agreed the safeguarding function is a core and therefore, protected, service during Covid. This was incredibly helpful. The team quickly reconvened and redesigned service provision to align with increased risk areas and visibly increase accessibility and support for the NHS frontlines and for our partner organisations.

The Named GPs for safeguarding were retained in their normal working place to provide a clinical service during Covid; they were also being consulted about any safeguarding developments by the team on a regular basis. The Designated Doctor for Child Protection organised for all child protection medicals to take place within community hospitals and settings; reducing the need for provision via acute services.

Within one week of the onset of national lockdown (April 2020); the impact was being felt on the safeguarding agenda, both in terms of operational delivery, advice and in relation to changing demands on the system which increased the demand on the safeguarding resource. Agreed local and national risks for safeguarding increased whilst families followed Government advice and guidance under the Covid Act 2020 to socially distance and stay at home. There was an understanding among health and care providers, the LAs and the community services that, as business continuity plans were being rapidly implemented, there was a consequential reduction in face to face professional contacts, this meant increased and hidden safeguarding risks to children and adults and Children and Young People in Care (CYPIC), also to our populations with learning needs or disabilities. This remained the case during 2020 – 2021.

#### Known safeguarding risks included:

- Domestic abuse increased with isolation, either escalations of abuse or new events; these had associated impacts on children and on other household members.
- CYPIC placements were at more risk of breaking down and were no longer certain, issues emerged regarding infection control and illness within foster parent households and residential care providers.
- Children on Child Protection Plans, CYPIC and Children in Need initially did not have access to their usual systems where they are visible to agencies; they were therefore at heightened risk of abuse or neglect.
- Families were under increased amounts of stress due to new financial pressures, household isolation, school closures and lack of normal outlets for stress and frustrations.
- Increased risk of all types of child and adult abuse.
- Increased risk of hidden criminal behaviours, especially criminal exploitation such as county lines and risks of radicalisation via social media.
- Reduced health based universal home visits for advice and support especially during antenatal and postnatal periods, where a there was also a reduction of wider family support.
- Risk of shaken baby; especially for babies up to 12 months.

- Risks of unsafe sleeping; especially for babies up to 12 months.
- Risks of parents/carers not seeking medical assistance when their baby, child, young
  person or adult they are caring for is ill; especially when the baby, child or adult is exhibiting
  signs of sepsis
- Older people with underlying conditions are more at risk of complications should they contract the virus
- People with a learning disability may have more underlying conditions than those in their peer age group
- People with a mental health condition may find it more difficult in isolation.
- Mental health issues increasing in complexity due to isolation and heightened anxiety making care provision especially challenging in and out of psychiatric settings
- Reduced opportunity for professionals to access regulated services and the homes.

#### The Safeguarding Workforce

In usual times, daily workforce activity across multiagency partnerships brings significant mitigation factors for prevention of abuse; people are seen out and about, at work, school and community settings. Universal and targeted partnership service delivery allows early detection of abuse by the workforce and/or by the public; alerts are raised accordingly. This protective factor was significantly reduced during 2020/21. Leaders across East Berkshire holding safeguarding roles had a wide breath of experience in a broad range of specialities and functions and worked hard to anticipate areas of risk and mitigate these risks as much as possible via effective multiagency communications amongst themselves and to the public.

Working with the Executive Director of Nursing, the CCG safeguarding team agreed the following changes in working arrangements as an immediate Covid response:

- Effective working from home using media platforms to continue core safeguarding and CYPIC meetings.
- Weekly meetings for the ICS system safeguarding health named and designated
  professionals to share risk factors and agree and action rapid responses and chaired by the
  Associate Director safeguarding. Membership expanded to include safeguarding leads from
  NE Hampshire and Surrey Heath CCGs. These were able to be reduced to 2, 3 and then 6
  weekly meetings as teams became used to pandemic working and response.
- 3 weekly SEND system wide meetings with LA SEND leads and SEND leads in health to share issues and emerging risks and agree and action rapid responses, chaired by the Associate Director safeguarding. These were slowly reduced to 6 weekly meetings by March 2021.
- 3 weekly CYPIC meetings with LA leads and health providers to share issues, emerging risks and areas for escalation, chaired by the Associate Director safeguarding. These were reduced to 6 weekly meetings by March 2021.
- Weekly CYPIC and Safeguarding South East system meetings with Designated children in care doctors and nurses to share risk factors and agree and action consistent and rapid responses; hosted by NHS England. These became 3 monthly meetings by January 2021.
- The CDOP processes moved to wholly virtual; training was given by the Named professional safeguarding to all other members of the team so that the joint area response to a child death can be implemented consistently and following specialist Covid guidance. This virtual platform will continue post Covid using the same model.
- Regular support advice and supervision was readily available to frontline safeguarding professionals across East Berkshire by the CCG safeguarding team including Continuing Healthcare Teams, medicine optimisation teams and members of the quality team.
- 3 weekly peer safeguarding supervision 'virtual drop in' sessions were implemented to all



providers and commissioning safeguarding teams.

- Increased support to care homes and residential homes via the CCG quality teams.
- Increased support to the acute trusts in relation to visitors/carers for children and adults with learning difficulties who may be hospitalised during this crisis.
- Ongoing support to LA teams and safeguarding Police teams and support to continue core functions.
- Ongoing support as a key player in Prevent.
- Working with system communications teams to provide regular alerts on all media platforms to the public about safeguarding risks and resources to assist.
- Analysis at speed of any emerging safeguarding issues which require swift communication to partners.
- Recognition and escalation of serious incidents, with support for the emergency response.
- Attendance at national safeguarding meetings which were arranged during Covid; this
  allowed the team to regularly receive and alert of any emerging risks and issues in and out
  of the area.

During 2020/21, NHS staff were working unprecedented long hours and required prompt advice and safeguarding support after 5 pm, during the night and at weekends. Safeguarding cases typically became more acute and placed a higher emotional toll on our frontline teams.

The pressures on workforce stretched all teams to full capacity and beyond. In recognition that frontline services needed increased support, the safeguarding team established and implemented an ICS 24/7 safeguarding urgent advice line. This decision was made following consultation and agreement with Community providers, Frimley Health Foundation Trust, GP leads and CCG system safeguarding leads. The line was implemented 5 days from decision on by 27.3.20. This was a 24-hour 7 day a week safeguarding advice line for use by NHS staff across the Frimley ICS. This was in response to Covid and in recognition that NHS frontline practitioners need as much support from the team as possible.

This line was available to NHS staff and did not replace in any way the excellent support that is being delivered by safeguarding teams across our providers and systems. Nor was it intended to replace direct referrals or telephone contact to other agencies and the Local Authorities; these communications are well known and work well. The advice line was an extra support and extra resilience during Covid and was manned initially by the safeguarding team on a rota basis

The line was able to be stepped down by September 2020 with the proviso it could be reestablished quickly should it be needed again.

It is pleasing to report at the time of writing that the safeguarding team members have provided

remarkable support for each other during Covid and are coping extremely well. They are alert and reactive to the stressors that a sudden change in working has prompted.

#### Working in multisystem partnership, workstreams included:

#### Safeguarding children

- Education and safeguarding sharing individual case concerns and increasing awareness
  of unregistered settings. Understanding of how Covid has affected schooling access and
  analysis of impact of this on potential increases in home education.
- Safer Sleeping awareness campaign relaunch: resources re-circulated across East Berkshire including a relaunch of the London Irish campaign 'Lift the baby.'
- Education from Reviews: Case studies of the reviews were incorporated in the safeguarding supervision for all Named and Designated professionals across East Berkshire CCG and CCG safeguarding training was updated accordingly.
- Child Death Overview Process (CDOP): New processes according to working together
  were fully embedded and successfully implemented during 2020; audit has demonstrated
  compliance and learning from deaths incorporated across the health systems.
- Children and Young People in Care: The Designated Nurse for children and young people in care (CYPIC) remained an active member of the corporate parenting panels during 2020 2021; work has included successful recruitment of a CYPIC CAMHS worker employed by BHFT. The CCG have lobbied NHS England to influence dentists to continue to see CYPIC during the pandemic and improve compliancy rates of health assessments for CYPIC who are hosted in other areas away from Berkshire.
- Review of Child Protection medicals: Covid highlighted the importance to ensuring
  adequate capacity and appropriate place for conducting urgent and non-urgent child
  protection reviews. The Designated Doctor for Child Protection successfully submitted a
  business case to increase resource and blend the acute and community response. It is
  expected this will be recruited and implemented early 2021.

#### Safeguarding adults

- Multi Agency Adult at Risk Framework awareness: updates circulated to all Named and Designated Professionals and GPs across East Berks
- Liberty Protection Standards (LPS) Preparedness: A multi-agency East Berkshire LPS
  Network Group has been established to provide oversight of the work in East Berks to
  ensure effective implementation in April 2022. Co-chaired by the CCG, this group has
  identified actions required by health partners to prepare for implementation.
- Female suicide workstream: The Berkshire Wide Multi-Agency Suicide Prevention Group is leading on this work locally and the Safeguarding team is represented at this group. It has been identified that the number of adult female suspected suicides in Berkshire for 2020 is sufficiently higher than for previous years; and this necessitated in a response group to look at cases in more depth and try to identify any patterns or themes which might indicate the usefulness of increased surveillance or preventative campaigning in particular areas.
- Care Governance Boards: The CCG Safeguarding team has provided input into Care
  Governance meetings, which take place to discuss safeguarding concerns within care
  homes, residential homes and domiciliary care provision. Key themes include unwitnessed
  falls and medication management. In response, the CCG Medicines Optimisation team and
  Quality team were able to provide prompt support, training and advice to these services as
  a joint response with the Local Authorities.
- LEDER reviews: Led by the CCG this important group considers the deaths of people
  with learning disabilities from age 4. During Covid, the key findings were that people with
  learning disabilities had significantly and substantially higher death rates in the first wave of
  Covid in England than the general population. This information was shared widely across
  the Safeguarding Partnership for Leaders to highlight in their own organisations, raising the
  awareness and the need for early identification, assessment and treatment.

#### **Domestic Abuse**

- The CCG Safeguarding & SEND Coordinator attends relevant partnership meetings and operational meetings for Domestic Abuse.
- The CCG placed a bid for Domestic Abuse project work December 2020 for £20 000; this
  was successful.
- £15000 has been allocated to support an IDVA at Frimley Park Hospital site.
- £5000 has been allocated for a project to raise awareness of DA among hard-toreach communities; this will be across Frimley ICS and will be led by the Safeguarding coordinator.
- The Safeguarding team are developing DA champions within the CCG.
- Raising awareness campaigns locally include bin hangers with phone numbers to call;
   hairdresser and housing officer D.A training and posters in multiple languages are available.
- Domestic Abuse updates are given within CCG training and the LA domestic abuse lead attended primary care training in November to give an update of statute and how to ask the domestic abuse question as safely as possible via virtual consultations.

#### Serious Violence

- East Berkshire is within the remit of the Thames Valley Violence Reduction Unit (TVRU) has been successful in a bid to fund a Violence Reduction Hospital Navigators Scheme at Wexham Park Hospital Emergency Department.
- This post has been successfully recruited to.
- To support the delivery of evidence-based responses to serious violence in East Berkshire, the CCG Safeguarding team is represented at regional and national Serious Violence groups and is a member of the NHS England South East Serious Violence Network

#### **Exploitation**

- The safeguarding coordinator represents the CCG as the exploitation lead.
- The Pan Berkshire exploitation group forms an overarching strategic direction across
   Berkshire and meets quarterly and incorporates partners from East and West Berkshire.
- This meeting is particularly helpful for sharing emerging themes, good practice/learning opportunities, intelligence across borders and incorporates training needs as well as reviewing process and protocols.
- The Bracknell Forest Exploitation Group: delivers on safeguarding all residents from modern slavery and exploitation, including exploitation of vulnerable adults.
- Prevent: The Designated Nurse for Safeguarding Adults is the Prevent lead for the CCG and a member of the Safeguarding Team attends each group.
- The Channel national guidance has now been recently updated by the Home Office and local processes will be updated in accordance in the new guidance.
- The channel panel is attended by the safeguarding coordinator and gathers relevant information from primary care.

#### **Primary Care and Safeguarding**

- GP Practices that were involved in Reviews have each carried out a Significant Analysis Event to identify learning within their Practice.
- Reviews with 'neglect' as a theme have been presented at GPs training events as case studies and training programme updated to raise awareness of professional curiosity in relation to neglect.
- Audits conducted by the CCG Safeguarding team to seek assurance that all East Berks

- GP surgeries have meetings with Health Visitors and Midwives in attendance to discuss vulnerable children on a regular basis.
- Primary Care Safeguarding Training updated to raise awareness of each Local Authorities Adults Multi-Agency Risk Framework and the importance of record keeping when managing a patient who self-neglects.
- Targeted work with the local authorities to improve communications around safeguarding information to raise alerts within the record.

#### GP Safeguarding Leads Meetings

- Safeguarding Lead GPs across East Berkshire are invited to attend bi-annual meetings chaired by the CCG Safeguarding team which provides them with updates and resources to share within their Practice.
- Examples of updates include information about the revised "Was not brought" policy for children and vulnerable adults and a new 'Child Sexual Exploitation' tool that can be used by practitioners to support a conversation and decision making when there are concerns for a young person.
- The team also provided additional resources to support GP's in undertaking the postnatal review in recognition of the change in service provision for new parents and babies, due to the Covid Public Health measures.
- GPs were encouraged to and agreed to undertake weighing of babies during the 8 weeks check as mutual aid for health visiting colleagues during lockdowns.

#### **Tripartite Meetings Audit**

- The CCG safeguarding team devised and sent out a questionnaire to all the Safeguarding Lead GPs and Practice Managers to gain assurance that tripartite meetings with GP, Health Visitors (HV) and Midwives (MW) were taking place.
- The aim of these meetings is to ensure appropriate and effective information sharing between the three teams so that any safeguarding issues can be highlighted and escalated early on.
- One of the historical issues was the difficulty in agreeing a time and day that suited everybody and that not all practices had a named HV or MW attached to them.
- The response and the general theme was that HVs and MWs were being invited but COVID-19 had affected the attendance of both.
- After liaisons with the MW and HV team leaders across East Berkshire, we were provided with contact lists for the allocated Community MW and HV and were able to share with the practice leads.
- The feedback has been really positive, and communication has definitely improved to the benefit of the families.
- 1. Strengthen the CCG safeguarding team resource to incorporate North East Hampshire safeguarding duty.
- 2. Carry out DA project across Frimley ICS
- 3. Proposal for development of a pilot to explore in practice role to be the expert in producing reports for safeguarding enquiries.
- 4. Consideration of new Fictitious Guidance and how this impact on primary care.
- 5. Review process for receipt of domestic abuse police reports including review the alert codes for recording each event.
- 6. Update FGM guidance.
- 7. CCG DA policy and implementation of DA champions.

Suicide work include communications to target women at risk of dying by suicide.

#### Primary Care Level 3 Safeguarding Training 2020/2021:

- Annually, the CCG Safeguarding Team provides Level 3 Safeguarding Training to Primary Care staff across the three place bases as part of their Protected Learning Time programme.
- This year, due to Covid it was not possible to offer face to face sessions.
- A significant and successful workstream resulted in a blended delivery of safeguarding training, ensuring all primary care staff were supported in achieving Level 3 competencies as outlined in the intercollegiate document for Safeguarding Adults and Children 2019.
- The refreshed offer included presentations from the CCG Safeguarding team, the Designated Doctor for Safeguarding Children and LAs.
- Bracknell Forest training was due for February 2021 but this was postponed to April 2021 due to lockdown; over 150 practitioners attended in April.
- Training included interactive smaller group work to review case studies.
- This training was backed up with a new CCG Safeguarding training library which holds a
  wealth of information that all Primary Care staff can access on safeguarding issues for their
  self-directed learning.

### Training topics included:

Children and Young People	Adults
Safe sleep and Sudden Infant Death	Domestic Abuse update provided by
Physical injuries to non-mobile babies and children.	local DA Services including using remote consultations
Non-therapeutic male Circumcision	Impact of Domestic Abuse on Men and the barriers to disclosure and seeking support
Chronic Neglect in Children and recommendations for primary care	Safeguarding during transition to adult services and implications for Primary Care
<ul> <li>Exploitation of Children and Young people and Serious Violence</li> </ul>	Hidden harms for adults at risk
Use of remote consultation	Balance of protection in public health and human rights
Fostering and Adoption Medicals	Trainar rigitio

### 3a. Community safety

Action	Benefit to People to Stay Safe
Compilation of new 3-year CSP Plan 2020-23	Strategic vision for partners based on a strategic assessment as well as public consultation
Further development of the Partnership Problem-Solving Groups (PPSGs)	Multi-partner creative problem-solving of complex and challenging locations and individuals
Improved reporting facility for ASB	Connection of members of the community more quickly and easily to the service that is best placed to resolve their complaint through improved signposting. This enables us to focus on cases of highest harm
ASB FAQ for Members	Information to enable members to support the community with ASB queries which results in fewer delays to the resolution of their query/complaint
Development of Comms Contact Network	Expansion of our community safety network to encourage community resilience by sharing prevention messages, alerts, and appeals for information
Modern Slavery and Exploitation Prompt Sheet and First Responder Training	Increased knowledge and understanding of how to identify a suspected victim of MSE, how to safeguard them and refer them for support
Reviewed Prevent Strategy and Action Plan 2020-23	An updated strategy and action plan reflecting current threat levels and nature of threat together with our approach to ensuring that we prevent risk of radicalisation and support those where risk is prevalent
Channel Assurance Statement 2021	A completed self-assessment of our compliance with national guidance so that gaps can be addressed

Action	Benefit to People to Stay Safe
Monthly DA meetings with WBC, RBC, BWA and CCG	Introduced during COVID to ensure sharing of police reports and support referrals across areas so that we could respond to trends
Monthly DA Services Meeting	Multi-partner meeting of DA stakeholders to identify duplications in service provision as well as gaps
Introduction of DA Sanctuary Scheme	Introduction of safe measures in properties where DA survivors wish to remain in their own home
ASB Community Trigger Process Review	Revision of thresholds, introduction of victim impact assessments, automatic signposting to victim support, independent chairing etc. in line with a revision of the ASB Act 2014 (January 2021)
Development of a Hate Crime Action Plan	Development of a set of actions against national guidance of ensuring a more intelligent approach to reported hate crime so that better support is offered to victims and more preventative work takes place
Set-up of CYP Serious Violence and Exploitation Strategic Group (public health approach)	Introduction of a public health-based approach to serious violence prevention in children and young people including action planning, service mapping, information-sharing and operational response
Extension of Town Centre Public Spaces Protection Order	Continuation of powers where alcohol can be seized and confiscated from anyone who is, or is likely to, carry out ASB within the Town Centre
Development of civil injunction knowledge and practice	Make use of civil tools to respond quicker and more effectively to stubborn ASB
Preparation for DA Act Duty: Support in Safe Accommodation	Review of the DA Executive in line with statutory guidance to ensure appropriate level of challenge in readiness for the Safe Accommodation Duty. Preparation for a Needs Assessment of all support in safe accommodation so that a strategy can be drawn up on how to address gaps
DA Comms	Innovative and creative approaches to reaching DA victims, perpetrators, family and friends during both lockdowns so that support was available in a range of ways
Cuckooing Awareness	Compilation of advice on signs of cuckooing and who to report to (public awareness)

### 3b. Community Safety Partnership: 2021/22

Priority 1. Tackle exploitation of children, young people and vulnerable adults

Our aims are to:

- · maximise the use of criminal and civil powers to target-harden areas, and deter offenders
- drive improved identification of victims and provide enhanced levels of immediate and sustained support
- make sure that the community is equipped to recognise and report exploitation and know how to minimise risk to all vulnerable people

We will achieve this by:

- · monitoring the use of civil powers, for example, Community Protection Notices
- increasing the number of practitioners trained to recognise the signs of exploitation and how to refer for support
- increasing the number of referrals of suspected victims of modern slavery and exploitation to the National Referral Mechanism

Priority 2. Reduce incidents of serious violence, sexual offences, and knife crime

Our aims are to:

- understand the risks around knife crime, reduce the harm it causes and reduce knife crime incidents
- increase awareness of what constitutes a sexual offence among young people, empower them to report sexual offences and bring more offenders to justice

We will achieve this by:

- · reducing personal robbery incidents
- increasing the number of young people engaged in outreach locations in awareness of violence prevention
- · monitoring increased confidence of young people to disclose or report sexual offences
- adopting a long term, preventative approach to violence reduction in collaboration with partners

Priority 4. Reduce harm caused by domestic abuse

Our aim is to:

- prevent and intervene at the earliest stage possible
- · reduce the risk of people becoming repeat victims of domestic abuse
- reduce the harm caused to children and young people affected by domestic abuse

We will achieve this by:

- monitoring the percentage of clients reoffending who have completed a perpetrator programme
- · monitoring the number of victims referred to Berkshire Women's Aid
- · monitoring the repeat rate of domestic abuse crimes
- continuing to deliver appropriate interventions and specialist support for children and young people affected by domestic abuse



#### Training 2020/21:

First Responder Training (Modern Slavery and Exploitation) – run by Victims First for BFC frontline practitioners in March 2021 – 36 attendees: included a prompt card on signs of MSE, what questions to ask and a step-by-step guide on what to do if someone is suspected victim of MSE – positive feedback received although low-medium take-up.

Domestic abuse training delivered by the Domestic Abuse Co-ordinator and adapted to be delivered online rather than face to face due to Covid-19. Available to anyone working in Bracknell Forest area (BFC and external agencies). Introduction to Domestic Abuse run three times over the year with 25 delegates attending, MARAC (Multi Agency Risk Assessment Conference) & DASH (Domestic Abuse, Stalking, Harassment & Honour Based Abuse) training run three times with 41 delegates attending. Introduction to DA also provided to 12 Environmental Health staff. Alice Ruggles Trust commissioned to deliver 2 Stalking Awareness sessions 24/11/2020, delivered online, available jointly across RBWM and Bracknell Forest with 91 attending (RBWM and BF). All positive feedback received.

DA Forum members have had presentations including from the Fire Service, and DA Coordinator and Public Health lead re. DA and suicide. DA Coordinator has continued to attend other online webinars provided by Standing Together and AAFDA (Advocacy After Fatal Domestic Abuse) to ensure knowledge is up to date and where relevant use the information to update local training sessions.

### 4. Frimley Health Foundation Trust

The last year for the Safeguarding Adult & Children Teams cross site (Frimley Park & Wexham Park Hospital) has been challenging due to Covid-19. The Team have had to adapt ways of working due to social distancing, stoppage of face to face training, staff shielding, redeployment and working environment changes due to COVID-19.

The Teams on both sites have experienced a significant increase in the number of children and young people presenting in acute mental health crisis with additional complex social circumstances. Many have required protracted inpatient stays and multiagency working, oftentimes with many challenges.

There have been a cohort of children who have not been seen face to face by professionals outside of the organisation and for some this has been beneficial but for others detrimental to their wellbeing.

During the 1st wave, a slight reduction in referrals was noted however this did not last long. Following release of restrictions within the local communities, presentations to the Emergency Departments on both sites increased.

The children's safeguarding team completed an audit looking at themes and presentations to the Emergency Department. It was identified that there was a significant increase of babies presenting under 28 days highlighting the changes of community midwifery and health visiting services during the pandemic as well as support networks being removed resulting in isolation. The findings were shared with maternity services and processes were adjusted with the aim of preventing attendances to hospital where appropriate. It is felt that the findings were not entirely related to the COVID-19 pandemic but, a reflection of the changing landscape in the community provisions and needs of the service users. There are ongoing conversations within the ICS about how to support families in the community with the hope to reduce hospital attendance rates.

There has also been a noted increase in adult mental health presentations, increase in request for Tier 4 beds and increase in detentions under the mental act as acutely unwell. It is thought that given the advice to 'stay home', people tried to manage at home and became increasingly unwell. At the point of presentation, they required detention and a Tier 4 admission. There was also a marked increase in alcohol presentations, predominantly on the Wexham Park Hospital site.

During the last year, the adult safeguarding team proactively supported staff on the wards assisting with DOLs applications and referral to adult social care due to redeployment of ward staff. The Frimley Park Hospital site in particular, have experienced an increase in section 42 enquiries and disclosures of domestic abuse especially in the older generation. The latter is apparent at Wexham Park Hospital also.

The Safeguarding Adult and Children's Team have continued to provide a safe service, identifying risk, referring as appropriate, and supporting staff through supervision. The majority of the team were not redeployed and remained visible within the hospital. Team members experienced many enhanced roles and responsibilities such as, gaining certification to administer the Covid Vaccine, volunteering on ward areas, feeding patients at mealtimes and be on call (24/7) for safeguarding concerns/queries within Frimley ICS. The Teams showed a commitment to excellence and exceptional working together within their individual team, wider team and within the organisation helping colleagues through unprecedented times.

Advances in digital communication tools have allowed the team to be involved in multiagency working and continue to virtually attend meetings without having to leave the hospital which has been time efficient.

#### **Priorities**

- Streamline safeguarding practice and data collection processes across the Trust's safeguarding teams.
- Review pathways for 16-18-year-old young people who attend with challenging behaviour.
- Fully integrate CP-IS (child protection information sharing) system, across the Trust in line with the development of integrated systems.
- Review and update training strategy against trajectories in order to achieve the MAST target of 85% or above for all competencies.
- The safeguarding adult and children teams continue to develop their profile and alignment within FHFT and worked in partnership with multi-agencies to meet the legislative requirements for safeguarding.
- · Plans on recruitment on both sites into both adults and children teams
- On-going work to implement the Safeguarding and Vulnerable Patient structure, maximising
  the opportunities to strengthen cooperation and alignment across safeguarding, mental
  health, learning disabilities and dementia services to provide support for both staff and
  patients.

- Continue to develop and embed safeguarding arrangements across the Trust in accordance with legislation, statutory and national guidance.
- Review and update training strategy against trajectories in order to achieve the MAST target of 85% or above for all competencies.
- Develop online package of training following impact of Covid-19 and face to face training.
- Implement level 3 adult training for staff in line with the intercollegiate guidance.
- Introduce and embed the relationship of the Independent Domestic Abuse Advocate (IDVA)
  who will be working cross site. Tender recently awarded to Hestia to provide an IDVA
  service cross site.
- Introduce and embed Hospital Navigator role on the Wexham Park Hospital Site. Hospital Navigator is a project led by Thames Valley Police. Wexham has been identified as one of 5 acute Trusts in the Thames Valley area as a hot spot for knife crime/serious youth violence.
- · Plans on recruitment on both sites into both adults and children teams

#### **Training**

As previously mentioned, Covid-19 and social distancing impacted significantly on how training was delivered. Prior to Covid19, training could facilitate up to 50 staff members face to face. Social distancing reduced numbers to less than 10. Mandatory training was facilitated 2 weekly to sustain compliance, this was also stopped as all staff were required in ward areas to meet the demands of Covid19.

Despite this, safeguarding children compliance has increased, Trust level 2 compliance is 91% and Level 3 compliance is 93%.

Level 3 adult compliance reduced significantly following the changes to the Training Needs Analysis as a result of the publication of the Intercollegiate Document. Similar to children's compliance, Level 3 adult compliance continues to increase. A training improvement plan was submitted to and approved by Frimley CCG.

The teams have continued to offer bespoke sessions as well as Microsoft Teams training to ensure compliance was sustained. In addition, a virtual programme of training is nearing completion. This will give staff the opportunity to complete training remotely.

#### 5. Healthwatch

Being the new Healthwatch provider for Bracknell Forest from January 2021 our safeguarding priorities have been to induct the staff team into Bracknell Forests safeguarding procedures.

#### **Priorities:**

- 1. To continue to be engaged with the local safeguarding board and associated meetings as appropriate.
- 2. To recruit Healthwatch volunteers and induct in to organisational and local safeguarding procedures.
- 3. We are currently reviewing internal reporting procedures on an organisation wide basis and will be implementing revisions when complete. (Organisation in this context refers to Help and Care who hold the contract for Healthwatch Bracknell Forest).
- 4. We wish to explore with local authority safeguarding partners the possibility of Healthwatch Bracknell Forest providing a system/service for local residents to feedback safeguarding experiences to Healthwatch as an independent organisation

#### Training:

- 1. Staff have been provided with internal safeguarding training. This will be refreshed when we implement our revised reporting procedures.
- 2. We will also be seeking Local Authority training for staff and volunteers once we restart our face to face engagement and also our programme of Enter and View (statutory power to enter and view health and social care services)

### 6. Royal Berkshire Fire and Rescue Service

In November 2020, RBFRS initiated and implemented a Safeguarding Peer Review. There were three core themes with the Peer Review: efficiency, capacity and resources. The Safeguarding Manager invited members of all 6 Local Authority from various Safeguarding Adult Boards/ Partnerships, including on practitioner levels. We also saw this as a great opportunity to invite internal staff so they felt their voices could be heard from a service user perspective. The Chair of this Peer Review was the Safeguarding Adult Business Manager at Bracknell Forest Council, Dave Phillips.

As a result of this Peer Review, a report with recommendations has been shared with all Safeguarding Adult Boards and Partnerships to ensure we are remaining transparent.

The HMICFRS (Her Majesty's Inspectorate Constabulary for Fire and Rescue Services), audited RBFRS in 2020 and we were deemed as a good service.

During 2020-2021 we signposted 489 safeguarding referrals throughout Berkshire to external agencies and signposted 69 referrals within the Bracknell Local Authority. Of these referrals we signposted 6 safeguarding referrals through to Children's Services and 63 safeguarding referrals through to Adult Services within the Bracknell area.

During 2020-2021 we received 20 Threats of Arson referrals within the Bracknell area. The majority of which were linked to Domestic Violence. Threat of Arson referrals are dealt with within 48 hours where we visit the address to provide/fit arson proof letter boxes, fire retardant sprays and smoke detection as well as extensive advice.

The number of referrals for safeguarding and threats of arson has increased during Covid-19 due to a number of reasons, such as the Safeguarding Peer Review, a review of all internal safeguarding and threat of arson policies and procedures and staff training.

Regular data reports are provided to Bracknell Forest Safeguarding Board on a quarterly basis. This involves data such as the number of adult and children's referrals, number of Threat of Arson referrals, number of Safe and Well Visits delivered and number of Adult at Risk Programme training sessions provided to external agency professionals.

A Safeguarding Working Group (SWG) Terms of Reference has been agreed by members within RBFRS. However due to Covid-19 there has been a delay in reinstating this, but with support of the new Safeguarding Support Officer we hope this will take place within the next quarter.

#### Priorities for 2021/22:

An Action Plan and Action and Decision log will be devised following the recent RBFRS Safeguarding Peer Review.

A robust induction for the newly appointed Safeguarding Support Officer will take place to ensure resilience, capacity, efficiency and resource is improved.

Provision of singular training packages online for all staff will be devised, written and implemented so that awareness is more accessible for operational staff.

Establish a Training Protocol and Strategy. Training will continue and be developed in order to sustain performance and more awareness for operational staff and support staff to ensure that all signs are recognised straight away.

Improve attendance at all Berkshire Safeguarding Adult and Children's Boards/Partnerships



Meetings where possible and where necessary.

Due to the demands of referrals during Covid-19, we postponed our internal Safeguarding Working Group. With the support of the new Safeguarding Support Officer this will be reinstated with key internal stakeholders to ensure that SCR and SAR case audit learning is shared wider within the organisation. We hope to involve all three corners of the organisation by getting representation from Prevention, Response and Protection.

#### Continuous improvement of the Safeguarding function.

The HMICFRS (Her Majesty's Inspectorate Constabulary for Fire and Rescue Services), will be auditing again in the spring of 2022 and so we are making preparations and improvements for this. Quality assurance also through NFCC Self-Assessment, Section 11 and SAB Self-Assessment completion and submission.

Evaluation Toolkit with Becca Chapman. 30.09.21.

Health and Wellbeing for all Safeguarding responders and Managers within RBFRS. Continuation of Support and Supervision Sessions internally and externally (Safeguarding Working Group, Bracknell Forest Council and South East Regional Fire and Rescue Service Safeguarding Managers Group).

#### **Training**

RBFRS has seen a significant increase in safeguarding referrals and threat of arson referrals this financial year. One of these reasons we feel is due to the comprehensive training package that we now have available within RBFRS. We feel that staff feel more confident in raising safeguarding concerns.

- Adult Safeguarding face to face training to all front line staff and the majority of support staff. This includes training on domestic violence, modern day slavery, exploitation, cuckooing, mate/hate crime, county lines, FGM and PREVENT
- Children's Safeguarding face to face training has been delivered to all front line staff. An online course has now been written and implemented for easier access to operational staff.
- Designated Safeguarding face to face training (Level 2 Children's and Adults) for all
  managers with Safeguarding responsibilities, the Safety Education Team who work with
  children and young people, and the Safe and Well Technicians who work with vulnerable
  adults.
- Safer Recruitment and DBS face to face training has also been delivered to all of Human Resources staff and all managers deemed to be in roles that interview.

Training will continue to be developed in order to sustain performance and more awareness for operational staff and support staff to ensure that all signs are recognised straight away. With the assistance of the Safeguarding Support Officer starting in role this week, we hope to write

specific on-line training courses that go into abuse area's in more detail, such as domestic violence, FGM, PREVENT, modern day slavery, exploitation, cuckooing, mate/hate crime, county lines.

The Safeguarding Manager has also attended the following Safeguarding additional training:

Children's E-Learning Level 1 Course

Personal Safety Training

Case Review Development Day Slough Council

Abuse of Position of Sexual Gain Thames Valley Police

Stalking Awareness Training

Raising Awareness Online Webinar AWARE (Awareness With Action Reduces Exploitation)
Domestic Violence, Modern Day Slavery, Child Exploitation, County Drug Lines, Knife Crime

Introduction to Domestic Violence Training Bracknell Forest Council

Equality & Diversity E-Learning

DASH and MARAC Training Bracknell Forest Council

Exploitation of Children and Adults Slough Council

County Lines Proactive Safeguarding Conference TVP (County Lines, Section 45 Defence, NRM, Tackling Cuckooing, Complex Safeguarding) County Lines Proactive Safeguarding Conference

Mental Health First Aider Training (cancelled due to Covid but will be re-booked this financial year).

Level 3 and Level 4 Safeguarding Training will be attended by the Safeguarding Manager and Safeguarding Support Officer in Nov 2021.

#### 7. Silva Homes

Strategically, our main priority this year was to modernise our safeguarding policy, as part of a wider project to update all customer facing policies. This project was successfully completed.

The Covid-19 pandemic changed our focus, and we instigated a variety of measures to offer support and assistance to vulnerable customers.

We made outbound calls to over 1000 customers and identified several people that needed support with access to food and/or medication. During the first lockdown we were doing about 30 volunteer shops a week and purchased goods on behalf of others up to £5500.

We had to change the way we investigated and reported safeguarding concerns, and the number of referrals to other agencies dramatically increased. Our average in the last couple of years was around 25 formal referrals, but in 2020/21 we made 78.

We had to change the delivery method but continued to offer safeguarding training to all new starters – specifically dealing with local arrangements and promoting personal responsibility and the victim's voice. We made modern slavery training mandatory for every colleague in the business.

As we were not always able to visit customers in lockdown, in 2021 one of our immediate priorities is to carry out home visits to every customer flagged as a safeguarding concern during the various lockdown periods.

This year we will be producing our new safeguarding procedure and have been developing a process for securely storing and managing safeguarding cases in a bespoke section of our housing management software.

We have reviewed our support services, and in June 2021 we launch a new combined tenancy sustainment and money advice service – tenancy support – making sure our most vulnerable customers have access to the information and support they need to successfully maintain their homes.

#### **Training**

All colleagues now undertake mandatory modern slavery training.

Any colleague with a role that could interact with a customer undertakes safeguarding e-learning, and front-line colleagues also complete a more in-depth classroom training.

Every new starter attends an introduction to safeguarding including local arrangements and reporting tools. We have noticed an increasing number of safeguarding concerns raised by repairs and servicing since introducing this training at the start of each colleague's career with Silva.

Any colleague in a role that offers support to vulnerable customers can attend various training, conferences, or partnership events, on subjects like domestic abuse, FGM, hoarding, benefits advice, and tackling county lines drug gangs.

#### 8. The Ark

Keeping vulnerable members of the community safe during the pandemic: from exploitation but also physical and mental well-being. This was done through:

- Delivery of a central community response working in partnership with BFC and providing safeguarding training to the community responders (volunteers) and raising awareness of safeguarding and prevention in the wider community
- RAG risk rating of unpaid family carers and those they care for at risk of social isolation, risk of caring role breaking down etc.
- Delivery of a 'closed' online activity group for people with disabilities. This was monitored and also staff available to provide information and advice to members

Keeping vulnerable members of the community safe during the post-pandemic 'recovery' stage: from exploitation but also physical and mental well-being

#### **Training**

Delivered:

Accessible Safeguarding Adults training delivered to trustees and supported volunteers (who all have learning disability and/or autism)

Online Safeguarding Adults Levels 1 & 2 through our training provider iHasco – mainly to volunteers

Attended:

**MECC** 

**Domestic Abuse Awareness** 

Mental Health First Aid

Greater awareness of Safeguarding and what it is and prevention

### 9. Trading Standards / PPP

During the last year we have been involved in the following activities in relation to safeguarding:

- We have a dedicated officer who helps vulnerable people get money back from financial scams and helps ensure that measures are put in place so they are not targeted again
- Officers have been involved in working with Hoarders and properties that are considered to be filthy and verminous
- The housing team have continued their work for private sector housing disrepair, working on licensed caravan sites where we generally find vulnerable people living and HMO licensing and targeting roque landlords
- All licensed taxi drivers and operators have had to attend safeguarding training as part of their licensing conditions

Some visits did initially stop during Covid- 19 and resources have been required for other areas of work that we undertake such as enforcement of the Covid regulations. Most officers are now back out in the community carrying out visits in both commercial and residential settings.

Safeguarding and modern slavery has been added as one of the cross cutting priorities for 2021-2023 for PPP

#### **Training**

We have made it a mandatory requirement for all licensed taxi drivers to undertake classroom based safeguarding training- due to Covid this has been done via Zoom using Blue Lamp Trust. We are now looking at whether this should also be rolled out to licensed premises as well.

New starters have undertaken safeguarding training and a number of officers have had further modern slavery training to raise awareness of what to look out for as a service we visit not only residential premises but commercial premises.

Our response team has had domestic violence awareness training- this helps officers recognise potential signs of DV when carrying out their visits or speaking to people on the phone and knowing where to sign post this

### 10. Thames Valley Police

- 1. Domestic Abuse. Positive intervention, increased arrest rates and positive outcomes for victims. Increase in use of DVPNs/DVPOs in cases where there is no realistic prospect of conviction. Protect victims of domestic abuse, safeguard and prevent further offences.
- 2. Identification and disruption of OCG including County drugs lines. Protect vulnerable adults at risk from cuckooing and protect vulnerable children at risk of exploitation (drug running)
- 3. Fraud victims (banking protocol attendance and operation signature visits) Protect vulnerable adults from financial exploitation and ensure correct sign posting to services.

#### Taken from TVP strategic plan 21/22:

Priority Outcome One; Community Engagement and problem solving (focus on vulnerability and safeguarding) Serious Violence incl. knife crime, Organised crime and drugs lines (targeting vulnerable adults and children at risk).

Priority outcome three; Protecting the vulnerable. Focus on domestic violence and the MATAC process and increase victimless prosecutions and orders where prosecution is not realistic, focus on stalking and use of Stalking protection orders, Focus on exploitation and fraud vulnerability.

#### **Training**

Banking protocol (Adults at risk of financial exploitation)

DA Matters (domestic abuse training)

CDL training (national county lines co-ordination centre)

Victims code training

SAVE3 (Safeguarding Vulnerable exploitation, 3rd module)

Modern Day Slavery

Public Protection (4 strands)

Local team briefings to LPA staff from PVP (Safeguarding including voice of the child)



#### 11. West London Mental Health Trust

#### Children

During 2020/2021 Broadmoor Hospital implemented a revised process for the management of child photographs within the hospital. This ensures that there is a consistent and fully auditable process, which is managed and co-ordinated centrally. This process is now firmly embedded within Hospital policy.

Local procedures were put into place to develop the governance of telephone calls with approved children. This focused on consistency of decisions concerning patient suitability, and proportionate risk assessments. The developed system allows for any request for a telephone call to a child to be reviewed by members of the Hospital's Child Visits panel, which includes Local Authority Children's Social Care representation.

Due to COVID, the hospital had to stop all social visits, including child visits, for a period of time. Instead the hospital provided a Virtual Visits platform that included child visits. Virtual child visits are only permitted for children whose families have been authorised through the robust child visits procedures in line with the High Secure Directions 2013.

Work has been undertaken to develop the safeguarding children referral system. This has been revised, using the RIO clinical system, and centralised. In addition, the Trust's central safeguarding team has worked closely with the hospital in developing child visiting templates on RIO.

In capturing the voice of the child, we continue to use child visit feedback forms which are child friendly. The Social Work Department will also contact families who have visited to confirm that child visits are in the best interests of the child, gaining the child's views and wishes (subject to the age of the child).

The hospital has a purpose build child visits suite that has been redecorated this year. The suite also has an enclosed garden area. Further developments are proceeding to make this space more child friendly.

#### **Adults**

Work has continued to centralise the Safeguarding Adults referral process and safeguarding care planning using the RIO clinical system. The referral system and care planning, including Mental Capacity Act requirements, are now fully integrated within this centralised system.

In accordance with the Safeguarding Board's focus on capturing the voice of the adult, we continue to use safeguarding closure forms and patient exit questionnaires for those who have had safeguarding plans and interventions.

Individual wards are now using a specific safeguarding and Prevent section within their clinical team meetings, to identify any low level safeguarding concerns (which do not meet

the threshold for a formal safeguarding referral) that are being managed effectively at a ward level. The details of these cases are reviewed by the Hospital's Safeguarding Panel which has representation from Bracknell Forest Safeguarding Team, the Trust's central safeguarding team and NHS England.

During 2020-2021 there has been a notable increase in Best Interest cases, including Court of Protection case referrals. The hospital promotes family involvement in such cases (where appropriate) in accordance with the principles of the MCA 2005 and all Best Interest meetings include a representative from Bracknell Forest Council Safeguarding Team.

Processes to provide reassurance and safeguarding input for patients who are subject to Long Term Segregation are now firmly established. This includes the Hospital's Safeguarding Adult Panel reviewing these cases. An appointed Social Worker attends the Hospital's Seclusion Management and Review Group to raise or review any safeguarding related concerns.

The Hospital has established (and various senior staff have been facilitating) a BAME Carers group which started in July 2020. There is an established and consistent Carer membership to this group.

The Trust has developed its approach to Domestic Abuse, covering Safeguarding Children and Adults. A Domestic Abuse co-ordinator was appointed and each service area has a trained Domestic Abuse Prevention Advocate (DAPA). Working partnerships with accredited specialist Domestic Abuse services are established across the Trust.

The processes for Prevent continue to develop, with the Trust now using the National referral form. There is a consistent approach between the Hospital Security Directorate and the Hospital Safeguarding team to ensure relevant concerns are identified and cases are progressed. The Hospital has an established link with the local Counter Terrorism Police Unit. The Trust has started a Prevent Leads meeting, where the Leads meet to support one another and discuss new developments and best practice.

#### **COVID** Impact

The Hospital mitigated the stopping of visits by introducing virtual visits for both adults and children who were already approved for visits. External professionals have been able to have virtual meetings. CPA meetings and Tribunals continued using virtual platforms. Carers forums also continued as virtual forums, via MS Teams.

Safeguarding meetings and safeguarding panels continued throughout this year, using virtual attendance and limited physical attendance at meetings.

The hospital developed a COVID management group to ensure the hospital was operational and safe. National guidance was adhered to throughout the pandemic, and COVID measures continue to be reviewed via this group in accordance with Government directions and quidance.

#### **Priorities for 2021/22**

To continue to obtain information from adults and children so we can evidence their voices. It is hoped that we will be able to undertake two audits in relation to children's and adults' voices, where the data can be analysed and any action planning put in place.

We will continue to develop practice that is in accordance with the Mental Capacity Act and Best Interests.

The Broadmoor Hospital Social Work team will be subject to TUPE to direct Trust employment on 1st July 2021, so work has started to revise the strategic level agreements that were previously in place as Ealing Council will no longer be a stakeholder.

There will be a requirement for Social Workers within the hospital to be DAPA trained.

The hospital will also deliver safeguarding in accordance to the wider Trust Safeguarding Strategy.



#### **Training**

The Trust's Central Safeguarding Team completely revised mandatory training requirements in January 2020. This meant that all registered professionals had a mandatory requirement to undertake Safeguarding Adult and Children training at Level 3. Due to the COVID 19 pandemic, training was put on hold for a period of time before being reintroduced through virtual platforms. Currently the percentage of required staff who have completed Safeguarding Children Level 3 is 77% and Safeguarding Adults Level is 76%. MCA training staff compliance is 92% and Prevent (WRAP) compliance is 98%.

The Central Safeguarding Team have provided specialist training sessions and webinars on various safeguarding related topics, including Fabricated Induced Illness, Child Sexual Exploitation, Modern Slavery, Coercive Control and Domestic Violence.

External training opportunities have been made available to staff. Within the Social Work department, access to safeguarding training events and webinars hosted by Ealing Council and Bracknell Forest Council have been made available.

Staff within the hospital continue to have a good level of understanding around safeguarding and this has been enhanced by the new mandatory training requirements for all registered professionals.

There is a greater understanding around the Mental Capacity Act which is evidenced in the substantial increase in Capacity Assessments being undertaken and subsequent Best Interest processes.



# 12. National Probation Service - South West South Central.

# Safeguarding Children and Vulnerable Adults Delivery plan 2020/2021 Introduction

The role of the National Probation Service is to protect the public, support victims and reduce re offending and in carrying out its functions, is committed to protecting the rights of a person, whether an adult or a child, to live in safety, free from harm, abuse and neglect.

#### Safeguarding Children:

Safeguarding is everyone's responsibility and children are best protected when professionals are clear about their responsibilities both individually and in a multi- agency setting. Safeguarding children is defined as:

- Protecting children from maltreatment
- · Preventing impairment of children's health or development
- Ensuring children grow up in circumstances consistent with the provision of safe and effective care; and
- Taking action to enable all children to have the best outcomes

Child Protection is part of safeguarding and promoting the welfare of children. (NPS Safeguarding and Promoting the Welfare of Children, Policy Statement Jan 2017).

#### Safeguarding Vulnerable Adults:

The Care Act 2014 sets out the statutory framework for the provision of adult social care and for adult safeguarding and the NPS is a relevant partner in Safeguarding Adult Boards as part of the multi- agency cooperation and collaboration with the main aims to:

- · Promote the well- being of adults needing care and support, and their carers
- Improve the quality of care and support for these groups
- Smooth the transition from children's top adult services
- Protect adults with care needs who are experiencing or at risk of abuse or neglect or are unable to protect themselves because of their care and support needs

#### Key developments and references:

- NPS Safeguarding and Promoting the Welfare of Children Policy Statement January 2017
- NPS Safeguarding Adults At Risk Policy Statement May 2017
- NPS Safeguarding Adults at Risk Practice Guidance May 2017
- · EQUIP- has most of the relevant documents including Toolkits for practitioners
- NOMS Guidance for Working with Domestic Abuse August 2017.
- NOMS Guide for staff on working with perpetrators of child sexual exploitation
- NPS National Partnership Frameworks for Local Safeguarding Children Boards, Multi-Agency Risk Assessment Conferences and Multi-Agency Safeguarding Hubs and Safeguarding Adults Boards
- HM Govt "Working Together to Safeguard Children" 2018
- PI 02/2014: Safeguarding of Children and Vulnerable Adults.

#### Considerations for divisional delivery:

- Each LDU provides a Safeguarding Lead to cascade information to their respective LDUs and to support/review the delivery plan
- The delivery plan is a working document and provides objectives around core aspects of offender management and delivery of objectives that ensure the safeguarding children
- The delivery plan draws on both the NPS Safeguarding and Promoting the Welfare of Children Policy Statement and the NPS Safeguarding Adults at Risk Policy Statement to ensure a consistent and effective approach across the division and in line with national expectations.

#### **DELIVERY AREA 1**

# ENSURING STAFF ARE CLEAR ABOUT THEIR RESPONSIBILITIES AND HAVE THE KNOWLEDGE AND SKILLS TO RESPOND TO SAFEGUARDING CONCERNS

(a)

#### **Activities**

- NPS Policy Statements- all staff including practice staff, administrative staff and managers are familiar with the policy (it is on EQUIP)
- Staff are aware of Local Authority responsibilities for assessments and thresholds for Care and Support for Adults

#### Who/How?

- All SPOs to ensure this happens within their own teams via team meetings and practice workshops.
- · Within induction of new staff

#### Review Date - Mar 2021

#### **Expected Outcome**

- Clarity around roles and expectations regarding Safeguarding Children and also Vulnerable Adults
- Ensure safeguarding work is embedded in everyday activities
- The needs of the child are recognised and pursued.
- Identification of adults who are vulnerable and have care and support needs

#### b) Training/Development

#### **Activities**

- SPOs identify training needs
- All staff successfully (100% across division) attend mandatory training (e-learning and Safeguarding and Domestic Abuse classroom 2-day training plus any LSCB training and Adult Safeguarding e-learning and 1-day classroom training)
- Training records are fully updated
- Refresher training completed every 3 years
- All staff attend specific training required re CSE and Neglect
- NPS staff are aware of responsibilities at Child Protection and multi-agency meetings and any professionals meetings re Safeguarding Adults
- Training is recorded on MyLearning

#### Who/How?

- ALL LDU SPOs
- SPOs nominate relevant staff for training and ensure new staff and induction processes provide information about local procedures and mandatory training
- All staff to take personal responsibility for identifying when this is due
- SPOs provided support to staff when attending CP meetings and further training accessed when available (LSCB/local training if available)
- Staff aware of local contact re Children's Services and Adults Services
- SPOs run off list of who has been trained, who needs refresher training and new staff who need training.

#### Review Date - Mar 2021

#### **Update/issues/Progress**

#### Use MyLearning for data re who has attended

- Expected Outcome
- 100% staff have attended mandatory training and are able to evidence awareness and use
  of skills in work with offenders and their families
- Mandatory training should be part of SPDR objectives

#### c) Sharing information

#### Activities

- Referrals and concerns and information shared appropriately and in a timely manner with other agencies
- Managers are able to escalate any concerns to resolve in a speedy manner
- Referrals are recorded on NDelius and responses also recorded as per CRI instructions

#### Who/How?

- All staff and overseen by managers and senior managers
- Escalate within 3 weeks and record on NDelius

Review Date - Mar 2021 for review and then ongoing activity for relevant cases

#### **Expected Outcome**

- Staff are able to make referrals and liaise with local agencies in order to ensure the welfare of children
- Managers are aware of referrals and concerns and these are recorded clearly on NDelius and the purpose of referral is clear.
- Use of Safeguarding Referrals Practice Improvement tool to quality assure referrals for Safeguarding Children and also local processes re Safeguarding Adults processes and the Care Act 2014

#### d) EQUIP

#### **Activities**

 Promote and monitor the use of EQUIP re process maps and information re Safeguarding Children and also Vulnerable Adults

#### Who/How?

- · All staff to be aware
- Neglect toolkit now added to EQUIP.

#### Review Date - Mar 2021

#### **Expected Outcome**

- To ensure local practice is in line with national practice- consistency of approach
- To ensure toolkits and good practice guidance is used and embedded into practice

#### e) Practice improvement and quality assurance

- Activities
- Embedding the Safeguarding Referrals Practice Improvement Tool for Safeguarding Children Referrals to ensure good quality referrals
- New OASys AQA tool used to highlight any safeguarding practice issues
- Cross reference NDelius flags and register for case discussions in supervision as standard agenda item
- Dissemination of learning from SCRs, SFOs, Inspections. Audits and OASys QA
- SPOs countersigning OASys- to ensure quality of child/adult safeguarding assessment and risk management

#### Who/How?

- SPOs use across the division
- · SPOs across the division
- LDU Heads/SPOs to provide learning lessons from local activity and divisional SFO and other learning

#### Review Date - Mar 2021- for review

#### **Expected Outcome**

- To support staff learning and development and to ensure consistency in safeguarding practice
- · Greater awareness of policy, key safeguarding principles and practice guidance
- To provide assurance that NPS are meeting their agency responsibilities

 To improve practice by learning from internal/external sources about current practice and to monitor and review the embedding of the learning

#### **DELIVERY PLAN 2**

### IDENTIFYING SAFEGUARDING CONCERNS AND EFFECTIVE ASSESSMENT

# a) Ensure clear systems in place for children's services checks and, when relevant, Adult Social Care checks

#### **Activities**

- Pre-sentence
- Post sentence and recorded that this has been done

#### Who/How?

SPO's (Court –based and OM based) to ensure there is compliance with the policy and guidance re checks and provide assurance to senior managers. To escalate any concerns to Senior manager lead

#### Review Date - Mar 2021 for review

#### Update /issues/progress

Need to assure that safeguarding checks are being undertaken and recorded

#### **Expected Outcome**

 To enable staff to make effective assessments and support effective risk management as well as monitoring and reviewing behaviour and risk

# b) Use of NDelius flags and use of MIS reports and clear recording Activities

- SPOs to monitor via MIS reports that all relevant cases are recorded and registered correctly on NDelius to facilitate data collection
- CRI023 to be used to provide necessary guidance

#### Review Date - Mar 2021

#### **Expected Outcome**

# To identify relevant cases and to ensure reflective discussion within supervision

## c) Gaining information from a variety of sources to identify any relevant concerns

#### Activities

- OMs/court staff should be aware of local arrangements for requesting and gaining information from Children's Services, Police, MASH's and any other relevant agencies
- Information from offender as result of assessment, investigative questioning and home visits to identify any concerns or issues including age inappropriate relationships
- All safeguarding cases to have home visit conducted by OM
- Staff are aware of the Voice of the Child and the Think Family focus and ensure Golden
  Thread of Safeguarding is evident throughout their work with children and vulnerable
  adults.
- Care and support needs of adults are identified and assessed in line with NPS Adults at Risk practice guidance

#### Review Date - Ongoing for all relevant cases

#### **Expected Outcome**

- All staff have good awareness of local resources and agencies and liaise accordingly using the NPS policy as guidance to practice and the relevant toolkits.
- All concerns relating to children are identified at earliest opportunity
- To provide full information from range of sources to inform assessments so that they are accurate, reliable and fair

#### d) Timely referrals to Children's Services

#### **Activities**

- Adult Safeguarding Enquiries:
- Discussion and liaison with Adult Social Care around care and support and needs and advice about whether referral required.

#### Who/How?

- OM to discuss with SPO when necessary
- OM to be aware of local threshold document for referrals/Early Help.
- Use of PiT for referrals by both OM and SPO for Safeguarding Children referrals
- OM to record on Ndelius using CRI023 guidance
- If no response to referral in 3 weeks to be escalated via SPO and recorded fully on Ndelius

#### **Review Date - Ongoing activity**

#### **Update/issues/progress**

Ensure SPO are aware of no response from CS and escalate and record on NDelius

#### **Expected Outcome**

- Good quality referrals are submitted to Children's Services giving full details of concerns and safeguarding issues
- There is a clear audit trail of the referral and OMs escalate as appropriate via SPO so continued focus on safeguarding and liaison with Children's services and Adult Social Care to ensure positive outcomes for children and vulnerable adults

#### e) Quality assurance of Safeguarding referrals

#### Activities

 SPOs when countersigning OAsys, including use of Safeguarding Referral PIT when required

#### Review Date - Mar 2021

#### **Expected Outcome**

 For quality and assurance of OMs case assessment skills and case management and safeguarding practice

#### **DELIVERY PLAN 3**

#### SENTENCE PLANNING AND MANAGING RISK

# a) Ensure any safeguarding concerns are fully incorporating into sentence planning and RMP in OASys and that these are shared accordingly Activities

RMPs must have a safeguarding focus when identified

### b) Home visits are a key area of risk management and are undertaken on all relevant cases

#### **Activities**

- Care and support needs of vulnerable adults and risk issues (link to domestic abuse, extremism, hate crime etc) are integrated into relevant plans.
- Assessment of whether adult learning disability or difficulty linked to risk of re offending or risk of harm to others and incorporated into SP and RMP.

#### Who/How?

- OMs in OASys and for SPOs to oversee via countersigning and case discussion
- Awareness of NPS Safeguarding Policy Statements by all staff and to be used by SPOs with teams as part of practice/development sessions.

#### Review Date - Ongoing for all relevant cases

#### **Expected Outcome**

- For effective case management and risk management and to ensure the safety of children
- Decision making is defensible and open to scrutiny and OMs are able to effectively monitor,

review and address dynamic risk factors and safeguarding concerns

#### b) Multi-agency working

#### Who/How?

- Attendance at Child Protection conferences, Core Groups, Child in Need meetings, Strategy meetings, Professionals' meetings and Adult Social Care meetings as required by OMs and SPO (when relevant). Ensure reports provided for meetings when required and record any actions and incorporate into Sentence planning and RMP
- Liaise and share information with other agencies as relevant
- Sharing of information with parents/carers to ensure multi agency approach

#### **Review Date - ongoing**

#### **Expected Outcome**

- Full participation at any Safeguarding/Child Protection meeting to provide NPS perspective and to share any plans for on-going management to address risks.
- Liaison with Adult social Care and any subsequent professionals' meetings

### c) On-going review of safeguarding cases and concerns

#### Who/How?

- OM to monitor any changes in circumstances that may link to safeguarding and to share any new information as necessary and to update OASys if significant change.
- SPO to have management oversight of child safeguarding cases and to discuss in supervision and when required in order to support the OM.
- Adult Safeguarding cases also require management oversight in accordance with risk posed and a multi-agency approach
- Use of MAPPA L1 reviews (if relevant) for oversight of relevant cases

#### Review Date - On-going

#### **Expected Outcome**

 Management oversight of safeguarding cases is in line with NPS guidance and policy and appropriate support and actions are taken to maintain the safety of children and vulnerable adults and protect them from harm.

#### **DELIVERY PLAN 4**

#### **MULTI-AGENCY AND PARTNERSHIP WORKING**

# a) Attendance and participation at LSCB/ SAB meetings at senior and middle manager level

#### Who/How?

 LDU Heads/SOSMs to attend LSCB and SAB meetings and delegate middle managers to relevant sub groups (as within NPS Partnership Framework for LSCB and SAB)

#### **Review Date - ongoing**

#### **Expected Outcome**

- To play our full part in safeguarding children, sharing information and our responsibilities in Working Together.
- To promote the welfare of children and vulnerable adults and promote positive outcomes. To ensure we meet our statutory responsibilities
- b) Partnerships arrangements within local MASH's

#### Who/How?

 Participation as agreed at local level in accordance with NPS Partnership Framework for Multi Agency Safeguarding Hubs

#### Review Date - Ongoing -Review Mar 2021

#### **Expected Outcome**

 To play our full part in safeguarding children, sharing information and our responsibilities in Working Together. To promote the welfare of children and promote positive outcomes

## c) Child Protection conferences/core Group meetings- to be attended by NPS staff for relevant cases

#### Who/How?

 OM who holds the case to attend and each team will hold list of all CP cases and oversight provided by SPO

#### Review Date - Ongoing - Review Mar 2021

#### **Expected Outcome**

• To ensure relevant information, actions and risk management is in place for relevant cases d)Serious Case Reviews

#### Who/How?

 LDU Heads to ensure active participation in any SCR's and identify an author of an Internal Management Report if requested. Any learning to be disseminated via the LDU and also provided to the Head of Public Protection for division wide learning

#### Review Date - Ongoing - Review Mar 2021

#### **Expected Outcome**

• To participate in activity that actively promotes learning for wider dissemination and to ensure lessons learnt messages are acted on when relevant.

#### e) Quality assurance

#### Who/How?

- Section 11 audits are completed by LDU Heads or delegated person and also commitment to undertake/contribute to any other audit/inspection activity required within the multi agency setting or within the NPS at divisional or national level.
- Adult Safeguarding Audit template in development

#### Review Date - Ongoing - Review Mar 2021

#### **Expected Outcome**

 To assure compliance with processes, policy and practice and to identify any development needs or learning for the organisation

Annual Report 2020/2021