



# Bracknell Forest Safeguarding Board

Annual Report  
2021/2022



**Bracknell Forest**  
SAFEGUARDING BOARD



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# 1. Introduction

This report covers the period 1st April 2021 to 31st March 2022 and as an all-age safeguarding board is published in accordance with both 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 (guidance on inter-agency working to safeguard and promote the welfare of children).

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.

Working Together to Safeguard Children 2018 states that safeguarding partners must publish a report annually and under the Care Act 2014, the Board is also required to publish an annual report after the end of each financial year.

This is the third annual report of the Bracknell Forest Safeguarding Board (BFSB). It describes the work of the Safeguarding Board and its subgroups along with the contributions of the wide range of partners who are members of the Safeguarding Partnership that supports the work of the Board.

## 2. Independent Chair and Scrutineer report

I am pleased to introduce the Bracknell Forest 2021/22 annual report.

During the past year the strategic focus of Bracknell Forest Safeguarding Board has been to continue to embed an ethos that supports an effective 'all age' approach to work undertaken within the borough. At the same time the Board has maintained an oversight of the statutory requirements in respect to both children and adults and has challenged partners to ensure robust local processes are effective and keep vulnerable individuals safe. As well as chairing the Safeguarding Board and Safeguarding Partnership, I have established routine meetings with a wide range of senior officers and have continued to receive the necessary assurance through a range of data and relevant reports.

The restrictions imposed during the period of the pandemic placed a tremendous strain on all services. It increased the potential risk to vulnerable people and created significant challenges for all partners working to keep people safe. While government restrictions have lifted it is clear that partners are having to continue to work hard to mitigate the ongoing impact of Covid-19.

### **Evidence of Effectiveness**

#### **Partnership Working**

I have continued to observe a positive partnership ethos best demonstrated in their response to Covid-19 and despite these additional pressures, relationships have remained good with partners maintaining an openness to challenge where this has been necessary. The Board's Safeguarding Partnership meetings have proved to be a particularly effective mechanism through which learning between agencies has taken place. Through regular meetings of this group, partners collaborated to help mitigate against the increased safeguarding risks during this period.

As a result, the Safeguarding Board's Strategic Plan 2020-23 reflects the unique circumstances created by the pandemic and the routine work required of the Board.

The Board has continued to collate 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 has been supported by an operational managers' group which has started to identify common themes and processes. This approach is designed to enable improved communication between the partnership 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. These include increased pressures on mental health services (for both children and adults), self-harm amongst adolescents and the elective home education of the most vulnerable children. The current focus has been on transitional safeguarding, risk and referral routes and the sharing of risk registers.

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.

While there is evidence that physical attendance at strategy meetings and child protection conferences reduced during the pandemic, there is evidence that in the absence of physical partner representation, technology has enabled virtual attendance, and where this is not possible relevant information is being provided. However, partners are aware of the need for further exploration as to the effectiveness of different approaches and for this to ensure a better understanding of the impact of these on the effectiveness of the process and especially the experience of families.

### **Areas for focus**

Whilst the pandemic is no longer resulting in national restrictions, it continues to provide challenges which I consider the Board is well placed to meet. In addition, issues such as the pending cost of living crisis and the war in Ukraine will inevitably present different challenges and will impact on safeguarding. To that end a forthcoming session of Safeguarding Board and Safeguarding Partnership will examine the longer-term impact of Covid-19 along with the new crisis. This will help to identify how the traditional approach to safeguarding may have to be adapted with feedback already suggesting that issues such as mental health and hidden harm are likely to emerge. The further development of 'Transitional Safeguarding' has previously been agreed as a priority for the Board. This is being supported by those leading local strategic partnerships and is the focus of a recently established task and finish group.

Therefore, in line with the agreed high-level direction contained within the Board's strategic plan, its focus for 2022/23 should ensure it continues:

- To develop its all-age approach to securing assurance of core safeguarding activities.
- To develop its understanding of the new safeguarding requirements emerging from the impact of the pandemic. This includes the identification of potential safeguarding risks and effective ways of working.
- To develop effective strategies to improve understanding of the difficulties and disadvantages faced by some groups within our community and that inform local safeguarding 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 promote multi-agency support for vulnerable children transitioning into adulthood and practice that is informed by an understanding of contextual and complex safeguarding.

- To develop the quality assurance process to ensure that the Board can focus on areas requiring improvement within the adult and children safeguarding process.
- To develop work in respect of:
  - Contextual Safeguarding
  - Serious violence and exploitation
  - Evaluating the impact of local procedures and learning from multi-agency case reviews/ audits.

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*  
March 2022





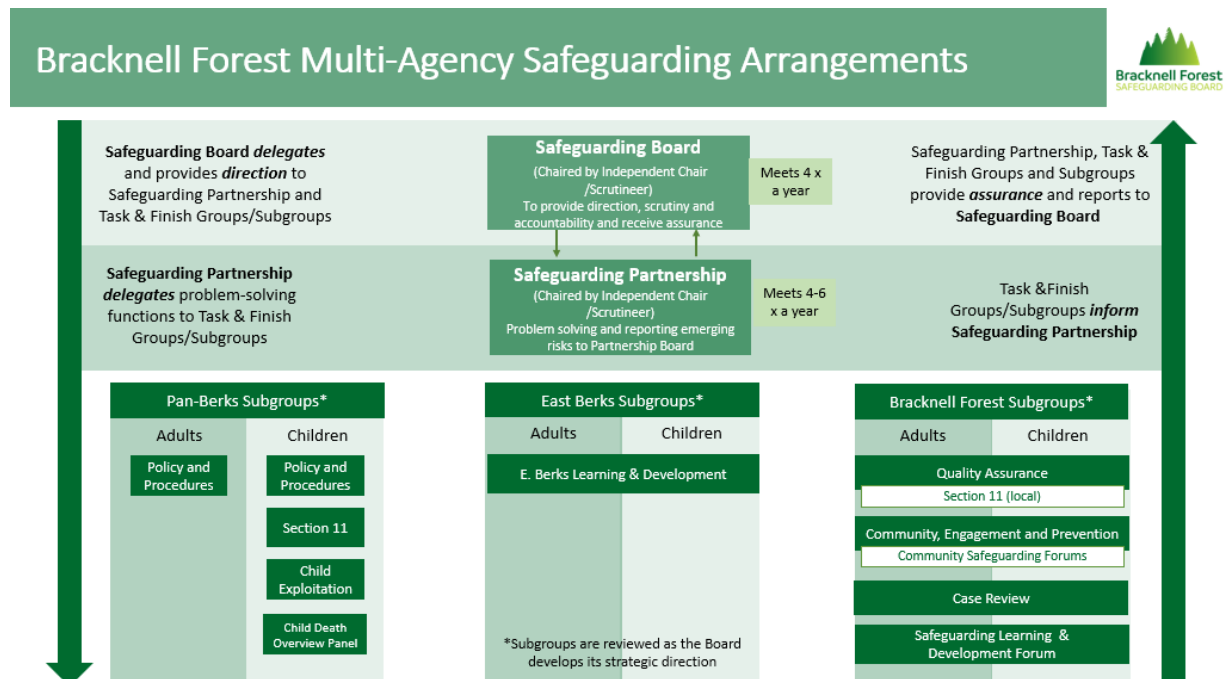


### 3. Safeguarding Board Structure and Multi-agency Safeguarding Arrangements

In 2019 Bracknell Forest Council, Thames Valley Police and Frimley 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



The Board has continued to develop following the merger which was effective from 1st July 2019. The Board comprises senior leads from statutory partners, has an Independent Chair and Scrutineer (ICS) 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 individual's 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:

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

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







## 4. Progress against strategic plan priorities

During 2019/20 the Safeguarding Board has developed its strategic plan for 2020-2022. During 2022, the Board agreed to extend the duration of the plan to 2023. 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 – 2023 is:

**“Working together, and as individual partners, we will be vigilant to be able to identify, understand, prioritise and respond quickly 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.



# Partner Organisations' Contributions to the Strategic Plan

The Board asked partner organisations how their adult and children safeguarding priorities/actions, implemented during 2020/21, contributed to the Board's Strategic Plan.

## **Bracknell Forest Council**

The council has continued to work tirelessly to safeguard all members of our community.

During 2021/22 we continued to support the community through the Covid-19 pandemic. This support included universal support with key issues such as vaccine roll-out, public health and health protection messages and support to social care providers to maintain safe practices and financial sustainability. In addition to this, our practitioners have worked hand-in-hand with local partners to maintain vigilance and awareness of potential harms that were direct impacts of societal changes during the pandemic. One example of this approach was our focus on face-to-face working in children's social care so that we directly saw children at risk and their circumstances. We have developed a Covid-19 Recovery Strategy for children's social care to oversee our emergence from the pandemic and ensure that children are safeguarded.

We have continued to strive to develop our consistency of practice through quality assurance activities. This includes work that the council supports through the Safeguarding Board's Quality Assurance Subgroup, and our internal audit programme. Our monthly Quality Board is chaired by our DASS/DCS and provides effective overview of practice as well as alignment to learning from Safeguarding Board partners. The council has continued to evaluate our services against regulatory and inspection standards, undertaking self-assessments and internal peer reviews of our practice and our policies and standards, developing action plans for continuous improvement as a result.

The council supports partnership work to enhance safeguarding. We support, lead and coordinate a network of Bracknell Forest-based partnership groups at a strategic and operational level. During 2021/22 we re-introduced the Learning Disability Partnership Board to ensure that people who use services and partner agencies are actively shaping the way that we develop and deliver services and support.

## **Frimley Clinical Commissioning Group (CCG)**

See CCG response to 'changes made in light of findings from SARs and CSPRs' on page 37.

## **Thames Valley Police**

- We will seek assurance about the effectiveness of local partnerships and collaborations to safeguard people
- We prioritise investment in the Board and Partnership work in TVP. We contribute financially and represent TVP at all statutory meetings. We have MASH and missing/exploitation hubs where we have co-located teams. We have safeguarding officers on all local police areas within our Neighbourhood teams, and as you can see from the training programme we have invested heavily in training in vulnerability and risk.
- We will work to ensure partners work together to prevent all forms of harm recognising the long-term consequences.
- We have a violence reduction unit who have a pioneering approach to data sharing across all statutory agencies. They are also driving awareness around trauma informed policing. Their emphasis is on prevention and diversion for young people involved in exploitation,

knife crime, DA, and VAWG related offences. Long term problem solving, and partnership approach is the key.

- We will ensure a robust outcome-focussed approach to protecting people at risk of abuse and neglect.
- TVP strategic priorities are very much aligned to the drive for outcomes (criminal justice and out of court disposals). TVP VAWG strategy has a pillar of work around relentless pursuit of perpetrators with a focus on outcomes for suspects in the system.
- We will seek assurance that people who use services are involved in safeguarding processes and the work of the Board.
- Voice of the child and more recently voice of the adult have been woven throughout our processes over the past 5 years. Our risk assessment processes around DA has incorporated voice of the child; our adult protection referrals include a section on voice of the adult. We regularly audit and monitor both aspects in our service improvement reviews and performance meetings.

### **Berkshire Healthcare NHS Foundation Trust (BHFT)**

- Partnership – BHFT engaged in multi-agency working groups and sent senior representation to the Board (Director Level) to ensure strong partnership working.
- Prevention – The Trust has facilitated virtual face to face safeguarding training incorporating learning from local reviews to ensure staff are competent in recognising early signs of abuse and neglect and taking action to prevent harm. Safeguarding has been prioritised during the pandemic and NHS safeguarding staff have not been relocated. The trust run on-call advice lines for staff for both safeguarding children and safeguarding adults to ensure staff have quick access to advice. All staff working with children receive Child protection case supervision. Multi-agency meetings such as strategy meetings, early help meetings and core groups are prioritised by staff.
- Protection – Child protection conferences are prioritised and staff receive supervision where child protection plans and outcomes are reviewed with a specialist child protection named professional. Named professionals support staff to challenge where cases are not progressing or positive outcomes for children are not evident
- BHFT has a strong user feedback system to inform development of services

### **Frimley Health Foundation Trust (FHFT)**

FHFT carried out 4 audits:

1. Information sharing deep dive to analyse the presentations referred to identify themes and patterns to help inform the partnership and enable service provision.
2. Analysis of young people mental health presentations. Findings from this have been shared with safeguarding partners and commissioners to inform future service development
3. CPIS audit to assess whether the appropriate information for safeguarding was being shared in a timely manner.
4. MCA and DoL audit to assess the use of MCA and appropriate DoLS applications to ensure any Deprivation of liberty was carried out in a person's best interests and in the least restrictive way including their wishes and feelings are known and recorded. Updated training is now in place as an outcome from this audit.

## Broadmoor

### Safeguarding Adults:

In July 2021, the social work service TUPE'd into direct Trust employment, previously being employed by Ealing Council. This resulted in revising the Section 75 Tri-Partite agreement and associated risk assessment **(Partnership)**

We continue to ensure the completion of closure forms involving patients and their views for every termination of a safeguarding plan. On closure, any safeguarding related action points that do not need a stand-alone plan are incorporated into the patient's nursing care plan. **(Prevention, Protection, People)**

There is continued close monitoring of "below-safeguarding threshold" concerns, with each of the 14 wards using specific safeguarding and Prevent action logs within their clinical team meetings for these cases. **(Prevention and Protection)**

In 2021-2022 we continued to have safeguarding representation through an allocated social worker attending the Seclusion, Management and Review Group (SMARG). The social worker contributes to long term segregation reviews with patients. **(Prevention, Protection and People)**

A social work safeguarding representative attends the Internal Referrals and Transfers weekly meeting (IRT). This meeting makes decisions on all internal patient transfers between wards. **(Prevention and Protection)**

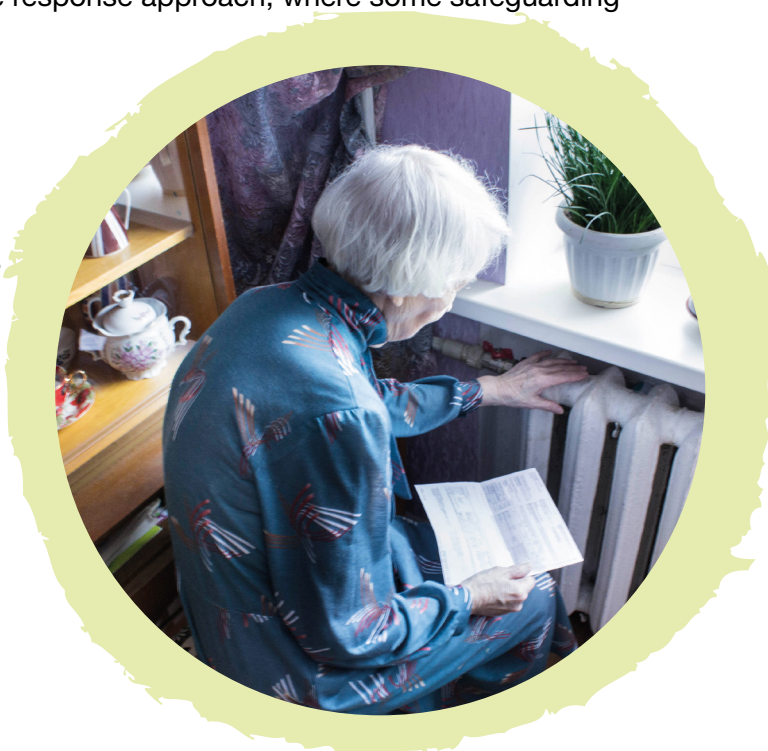
The hospital has continued to develop staff awareness on maintaining professional boundaries. Staff receive mandatory boundaries training, and the Trust has recently commissioned active bystander training.

In August 2021, Broadmoor Hospital started to implement the "Safewards" initiative. This is a recognised model that encourages staff, patients, carers and other support persons to work together to make wards safer for everyone.

Social workers and other disciplines now act as Domestic Abuse Prevention Ambassadors (DAPAs), having received the required training. The Trust has also published a Staff Affected by Domestic Abuse policy, ratified in June 2021. **(Prevention, Partnership, Protection and People)**

We continue to adopt "making safeguarding personal" principles, enabling patients (where possible and appropriate) to contribute to decision making and their safeguarding planning. The hospital maintains a proportionate response approach, where some safeguarding related concerns are effectively and proportionately managed outside of a formal safeguarding framework. **(People)**

An established BAME carers group continues to meet every two months, facilitated by the social work manager. The group continues to review and provide input into ensuring services delivered are culturally sensitive and appropriate to people from a BAME background. **(People and Partnership)**





## Safeguarding Children

In this review period, authorised children (approved to have child visits in their best interests) have had both face to face and virtual visits with their relatives. Following some suspensions of face-to-face child visits due to Covid-19, face to face child visits have now resumed with Covid-19 management protocols in place. All child visits are subject to robust assessment and authorisation in full compliance with the Department of Health, High Secure Directions for Child Visits (2013). In the last year (April 2021-March 2022), there was a total of 28 face to face and 18 virtual child visits. There are presently 15 families who are approved to have child visits.

### **(Prevention, Protection and People)**

The child visits panel and the safeguarding children clinical improvement group (SCCIG) are held monthly. The panel and the SCCIG have representation from Bracknell Forest children's social care department. **(Prevention, Partnership and Protection)**

The Trust's central safeguarding team has led a project to develop a more unified recording process for preparing and collecting feedback on child visits across the whole Trust, including Broadmoor Hospital. **(Prevention, Protection and People)**

The new child visits film has recently been completed, following the move into the new hospital in 2019. This new film provides information to families and children and features a "walkthrough" of a child visit from a child-focused perspective, using a child actor. **(People)**

The Trust central safeguarding team now produce a monthly safeguarding children and adult data report for all individual service lines across the Trust, including Broadmoor hospital. This report is reviewed by the SCCIG and focuses on child visits, training compliance, Trust developments, projects and initiatives. **(Prevention, Partnership, People and Protection)**

## Royal Berkshire Fire and Rescue Service (RBFRS)

Please see the below points regarding how RBFRS' Safeguarding Team has contributed to the Bracknell Forest Strategic Plan and what actions and priorities we have implemented:

The Safeguarding Team have designed and created a Safeguarding Action Plan of our key actions and priorities. This is based around our quality assurances to ensure we are effective with partners and collaborating together to safeguard vulnerable adults and children. Please see the Prevention section below.

The four areas of the BF Strategic Plan:

- **Partnership - We will work to ensure partners work together to prevent all forms of harm recognising the long-term consequences.** The Safeguarding Team has created an up to date Safeguarding Information Sharing Agreement which we intend to share with all key partners soon. We attend regular Professional's meetings, Child Protection meetings, Risk Framework Meetings, Section 42 and Section 47 enquiry meetings, MAPPA and MARAC meetings to provide support to partners and the vulnerable individual being discussed. We will continue to cascade our service provisions through to external agencies, teams and departments.
- **Prevention - We will seek assurance about the effectiveness of local partnerships and collaborations to safeguard people.** We seek assurance from specific safeguarding criteria or assessments, as follows: the National Fire Chiefs Council Self-Assessment, Berkshire Safeguarding Adult and Children's Self Assessments/Section 1 Audits, the Peer Review that RBFRS implemented with the assistance of Bracknell Adult Board, the National Safeguarding Fire Standards, our internal Service Plans and HMICFRS (Her Majesty's Inspectorate and Constabulary for Fire and Rescue Service's). We are currently being inspected for the next 6 weeks by HMICFRS. The Safeguarding Team have two slots where they will be scrutinised and questioned.

- **Protection - We will ensure a robust outcome-focussed approach to protecting people at risk of abuse and neglect.** Due to the significant increase in safeguarding referrals and Threat of Arson referrals, not just recently but in the past five years, we believe that we have a very robust outcome-focused procedure in place to protecting individuals at risk of abuse and neglect. We have a 24/7 provision of support from managers and Duty Officers within RBFRS who regularly collaborate and communicate to ensure we are being consistent in providing a good service to those most at need.
- **People - We will seek assurance that people who use services are involved in safeguarding processes and the work of the Board.** Throughout our Safeguarding Training courses to all staff and volunteers we have emphasised the importance of considering the voice of the individual who is at risk. Part of our training involved Making Safeguarding Personal (MSP) and we also have a page on MSP on our Safeguarding Intranet page. We also have a caveat on our new safeguarding referral form that specifies their awareness of considering the individual's point of view and involving them in the conversation regarding safeguarding them for further support.
- Actions from the previous submission in 2020/2021:
  - A3 There is demonstrable commitment to safeguarding adults. This includes senior management representation on, and active support of, the BFSB (Board members need to be sufficiently senior to commit resources and make strategic decisions) as well as participation in any Safeguarding Adults Review (SAR) undertaken by the BFSB.
  - To review our attendance at Adult Safeguarding Boards and their subgroup meetings. The Safeguarding Team have designed a Meeting Structure Framework which has now formed part of our Safeguarding Action Plan and we hope to increase our attendance at Board meetings and their subgroup forums.
  - This framework has been presented to both management tiers in Prevention and Collaboration (Safeguarding) departments. Further discussions will be held with regards to how best to implement further capacity to increase attendance at all Berkshire Safeguarding Boards.
  - The Safeguarding Team have taken the points to the RBFRS Safeguarding Working Group.
  - In November 2020, RBFRS initiated and implemented a Safeguarding Peer Review. There were three core themes within the Peer Review; efficiency, capacity and resources. The Safeguarding Manager invited members of all six Local Authorities 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. These themes were due to the lack of capacity which has improved support of the safeguarding function. However, due to the significant increase in referrals, we are still feeling the strain of attending all Board meetings on a regular basis. We hope this will be improved in the near future.
  - 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.
  - As part of our submission in 2020/21, we have created an action plan that now highlights, in a central place, what all our actions are as an organisation.

## **National Probation Service (NPS)**

Following unification of the Probation Service, the addition of a new “Regional Information Assurance Lead” posts have been agreed. Once appointed, the new leads will ensure regions are following all relevant policy and guidance and will ensure regional information sharing agreements are in place, being monitored and managed effectively.

The HMMPS Information Sharing Policy provides guidance and support to practitioners in establishing Information Sharing Agreements to make the process as straight forward as possible.

The MASH national partnership framework sets out the Probation Services’ principles for engagement with MASH, one being commitment to timely and appropriate information sharing that is defensible within legislation and proportionate to risk and circumstances.

Probation’s Safeguarding Children Partnership Framework sets out the process of information sharing on an internal and external basis.

Local Community Safety Partnership Information Sharing Agreements: Each PDU would have one with the local community safety partnerships. Copies would not be national but there is this overarching policy framework that would include children services as a “relevant local authority”.

The Joint National Protocol outlines the process of information sharing between the Probation Service and Youth Offending Service.

Staff are pointed to relevance guidance from relevant websites, Local Authority web pages etc to help them understand the thresholds for making a referral for Early Help, TAC, CIN and CP.

Staff have access to and understand local safeguarding children and adult partnership procedures.

Staff contribute to and attend multi-agency forums and meetings e.g., TAC, CIN, CP, MAPPA and MARAC.

Relevant processes are loaded on to process mapping portal to support practitioners with processes for sharing information, with other practitioners and with safeguarding partners.





## **Community Safety Partnership**

The Bracknell Forest Community Safety Plan for 2020-23 contains the following priorities together with our aims and how we will achieve them:

### **Tackle exploitation of children, young people and vulnerable adults**

Aims:

- 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

This will be achieved 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

### **Reduce incidents of serious violence, sexual offences, and knife crime**

Aims:

- 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

This will be achieved 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

### **Work with communities to deal with crime and antisocial behaviour hotspots (including drug related crime)**

Aims:

- consult with communities to identify crime and disorder hotspots and work to improve the safety in these areas using civil and criminal legislation

This will be achieved by:

- exploring and investigating hotspots identified in the 2019 Crime and antisocial behaviour consultation
- monitoring the number of cases referred and resolved by the partnership problem solving groups

## Reduce harm caused by domestic abuse

Aims:

- 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

This will be achieved 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

## Reduce incidents of residential burglary and theft from vehicles

Aims:

- make Bracknell Forest a hostile place for burglars and vehicle thieves to operate by encouraging community resilience, holding developers to account and pursuing offenders

This will be achieved by:

- reducing incidents of thefts from vehicles
- reducing incidents of residential burglary
- increasing the number of crime prevention messages to the community



**Indicators of note are:**

No.	Priority	Indicator	Summary	BFSB Strategic Priority
1.2	Tackle exploitation of children, young people and vulnerable adults	Monitor the number of children referred to the MACE and Makesafe Exploitation Prevention Groups	68 Makesafe referrals  16 MACE referrals	Partnership Prevention
1.3	Tackle exploitation of children, young people and vulnerable adults	Monitor the number of exploitation prevention community awareness campaigns	Act Now joint-funded between police and CSC working with a cohort from different schools identified as being at risk of exclusion. Includes activities and mentoring	Partnership Prevention
3.1	Work with communities to deal with crime and ASB hot-spots (including drug-related crime)	Monitor the number of cases referred and resolved by the partnership problem-solving groups	Main PPSG: 28 referred 25 resolved  Town Centre PPSG: 15 referred 19 resolved	Partnership Prevention
4.1	Reduce harm caused by DA	Monitor the reduction of harm through the work of the MATAC (Multi-Agency Tasking and Co-ordination – DA Perpetrators), including partnership engagement	47 cases discussed	Partnership Prevention Protection
		Monitor the % of clients reoffending who have completed the agreed work with DAPS (Domestic Abuse Perpetrator Service)	69 referrals.  Of the 91 that have completed the programme (in previous 4 years) 7 have re-offended (that we are aware of and has resulted in police intervention) = 7.69% recidivism rate.	Prevention Protection
		Monitor the number of referrals to BWA	238 referrals	Prevention Protection
		Monitor the risk levels for victims supported by BWA at case referral and closure	Q1: 90% reduced risk Q2: 100% reduced risk Q3: 94% reduced risk Q4: 91% reduced risk	Prevention Protection

It is also noted that a review of CSP key focus areas for the 2022/23 year took place in January 2022 followed by a public consultation to ensure that the CSP was focussing on those areas of most importance to the community. The review and consultation contributed to all 4 strategic priorities of the BFSB.



## **Silva Homes**

### **Partnership - We will work to ensure partners work together to prevent all forms of harm recognising the long-term consequences.**

We attend many meetings of the safeguarding and community safety partnership, including MARAC, child protection and risk framework meetings.

We have used our internal transfer process to move customers identified as at risk of harm by partnering agencies.

Our hoarding support group is available for all partnering agencies to refer individuals to.

### **Prevention - We will seek assurance about the effectiveness of local partnerships and collaborations to safeguard people.**

As part of an independent review of our safeguarding processes we have tightened our procurement processes to require safeguarding statements from all partnering agencies that we contract to go into customers' homes.

Colleagues know to prioritise strategy meetings, early help meetings and core groups.

### **Protection - We will ensure a robust outcome-focussed approach to protecting people at risk of abuse and neglect.**

Our customer relations partners (tenancy) investigate every concern raised by colleagues, partnering agencies and members of the community.

Following the lifting of Covid-19 restrictions, we pro-actively carried out a home visit to every customer that had been flagged as at any level of potential risk during the pandemic.

### **People - We will seek assurance that people who use services are involved in safeguarding processes and the work of the Board.**

Every new starter has an induction session with our safeguarding lead which includes a section on making every contact count and the voice of the individual in the safeguarding process.

## **Involve Community Services**

We have increased the number of child and adult safeguarding training sessions to the sector so to strengthen understanding of this across the VCS. In addition, we have worked in partnership to develop an in-house learning pack that can be utilised by organisations.

## **The Ark Trust**

Informing the Board of issues within the community – particularly those of unpaid carers, people with disabilities and those impacted by Covid-19. Supporting the carers Voice project/work streams.

Providing services and activities to the community to prevent harm, potential safeguarding issues e.g. the community hub, signal4carers, hospital2home, befriending.

## Healthwatch Bracknell Forest

Our safeguarding approach ensures we contribute to all elements of the strategic plan that are relevant to our services.

1. Recruitment of staff and volunteers are recruited, and DBS checked in line with our recruitment policies and procedures and our safeguarding policies and procedures.
2. We have clear procedures for our staff and volunteers to follow when identifying and responding to risk of harm/safeguarding concerns.
3. We maintain a culture that instils that safeguarding is “everyone’s business” – This culture is maintained via staff/volunteer meetings, induction, debriefs on activity, cross organisational training, learning, reflection and collaboration.
4. We have an organisational safeguarding lead who provides support and guidance across teams and maintains a log of safeguarding that includes learning and reflection to improve practice as required.
5. We work collaboratively with a range of partners in the borough, sharing best practice and intelligence as required and appropriate.

## 5. Impact of Covid-19 and the Board’s response

Throughout the period of the pandemic, BFSB has continued to develop 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. The Board has maintained a focus on the 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 the review of the Board’s priorities.

The Board facilitated a partnership workshop in March 2022 to determine the impact of Covid-19. As a result it was agreed that the true impact of the pandemic, particularly in relation to the true impact of harm that may still remain hidden or not fully realised, was yet to be determined. It was also agreed that increased cost of living and the war in Ukraine would further increase local people’s vulnerability. It was therefore agreed the Board strategic direction, being vigilant on emerging risks, would continue during 2023.



## 6. 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 BFSB website 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 - [www.facebook.com/bfsafeguarding](http://www.facebook.com/bfsafeguarding)
- Twitter – [www.twitter.com/BFSafeguarding](http://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 the borough, BFSB further developed the work of the CEP subgroup, details of which are set out in section 7.2 below.

### 6.1 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





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

### 7.1 Quality Assurance subgroup

The Quality and Assurance (QA) subgroup has continued to develop its work. Data for safeguarding children and adults core pathways are reviewed at each meeting. Safeguarding data provided by partners is also reviewed periodically. A multi-agency review of the quality of safeguarding referrals in respect of both children and adults identified both good practice and some areas for improvement. As a result, a multi-agency partnership action plan has been produced and will be monitored over the coming year.

The subgroup continued to receive assurance of partners' safeguarding systems with presentations from Bracknell Forest Early Help, Children's Social Care, Frimley Health Foundation Trust and Berkshire Healthcare NHS Foundation Trust. The subgroup also continued with its oversight of partners' safeguarding self-assessments (including their compliance with the existing 'Section 11' requirements), and its oversight of the JTAI action plan.

### 7.2 Communications Engagement and Prevention subgroup

The Communications, Engagement and Prevention (CEP) subgroup has met on four occasions. To support its inter-agency communications, during the past year the Board has produced bulletins, circulated information via social media and promoted information links to its website. The CEP subgroup has continued to identify how to engage with the local community to promote their role in identifying /reporting concerns and to obtain informative feedback. The CEP subgroup continues to promote 'what good looks like' documents in respect of the provision of services for children and care for vulnerable adults.

During this period, work has continued to identify inequalities and to promulgate safeguarding messages to 'seldom heard from' communities in order that the Board can receive feedback to strengthen local safeguarding processes.

The 2021 Safeguarding Week provided a further opportunity for the Board to promote its community engagement work and to raise awareness of safeguarding risks. A Safeguarding Forum attracted representatives from a wide range of community groups and organisations. Other events at the Lexicon Shopping Centre and the Bracknell Vaccination Centre also helped to spread key safeguarding messages. In addition, banners containing safeguarding messages were provided by the Board and promoted by partners within the voluntary sector.

Additional work in progress includes:

- Capturing the lived experience of carers and young carers, and producing corresponding safeguarding awareness resources
- Focusing on prevention activity and resources
- Developing resources to support staff of all organisations and the public, to be able to recognise risks before they become a safeguarding matter, and to ensure everyone is aware of the corresponding reporting pathway.

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.

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

The East Berkshire Learning & Development subgroup has continued to collate lessons learned from case reviews undertaken across Bracknell, Slough and the Royal Borough of Windsor and Maidenhead. The subgroup meets regularly to ensure systems are developed to share learning consistently from local case reviews. In addition, the group is responsible for promoting standards in respect of safeguarding training and will provide oversight of systems to quality assure single and multi-agency training. The group has reviewed its quality assurance approach and is working to improve its evaluation of the impact of learning and training. While ensuring a collaborative approach is maintained across the region, BFSB has also continued to work to strengthen its support for local organisations operating within the borough.

Following the creation of a dedicated Learning and Development Forum within Bracknell Forest, the Board has helped a range of organisations, (including many from the local voluntary and community sector) establish a framework for ensuring their staff and volunteers received high quality safeguarding training. Partners have started to share their training strategies and the group are supporting partners in establishing their role to improve the quality and evaluation of their training.

### 7.4 Partner Safeguarding Training

The Board asked partner organisations to provide information about their safeguarding training during 2021/22.

#### Bracknell Forest Council

During 2021/22 the following safeguarding training has been completed by BFC staff.

E-learning: Safeguarding Children 164 (16% of all staff)

E-Learning: Safeguarding Adults 271 (26% of all staff). This is a mandatory course.

#### Face to Face Courses

Level 1	Safeguarding Children	16
Level 2/3	Safeguarding Children	1
Level 2/3	Safeguarding Children - refresher	3
Level 1	Safeguarding Adults	22
Level 2/3	Safeguarding Adults	21
Level 1	Mental Capacity Act	9
Level 2	Mental Capacity Act	13
Level 3	Mental Capacity Act	17

The safeguarding children and adult courses are multi-agency and therefore open to all partners.

Other safeguarding courses available to staff included:

- Child neglect and poverty aware practice
- Child protection conferences induction/refresher
- Children Looked After reviews induction/refresher
- Court procedure
- Discharge of care orders and revocation of placement orders
- Managing allegations against adults who work with children and young people

## **Frimley Clinical Commissioning Group (CCG)**

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

The e-learning packages are national packages offered across the health system.

**Level 1** - Adults and children safeguarding, Prevent and Modern Slavery is a mandatory requirement for all CCG staff, and this is conducted by way of an e-learning package.

**Level 2** - As a CCG we have very few front-line practitioners, however we recognise that some do contribute and are involved in case discussion and MDT meetings where commissioning of services and provision is considered. We have identified those that need level 2 and level 3 training and have endeavoured to enrol them on the correct courses to cover the need and in line with the NHS intercollegiate training guidance for adults and children. Level 2 is delivered partly by e-learning and partly via an interactive Teams training session, which is then evaluated via the written feedback given by each attendee for its effectiveness.

**Level 3** – Our Continuing Health Care Nurses, Medicines Optimisation Team and Leaders in our Quality and Adults/Children's commissioning teams receive Level 3 training. Additionally, we provide Level 3 training via MS Teams for Primary Care and other colleagues three times a year covering adults, children and Prevent, as well as having a local focus on safeguarding reviews which we discuss interactively as case studies that have taken place across East Berkshire; this is well attended. We request evaluation feedback of the impact of the training after each session and adapt our next training sessions based on this.

As we develop into an ICB we have IT systems that are aligning across five Places and therefore the training certification and recording for level 2 and 3 training reporting on level 2 and 3 is in progress.

Level 1-82% Adults 81% Children

### **3b. Evaluation on the quality of your training activity/programme.**

For Level 2/3 we have moved to MS Teams to deliver training, and this was gratefully received both by presenters and attendees. The interactive case studies produce an additional learning opportunity to discuss and ask questions. To enhance training, we also provide a CCG training library which can be accessed by all to support self-directed learning. We also respond to individual needs by offering short, focused webinars on topics that are relevant at the time following a Rapid Review, a SARs or a CSPRs. We use evaluation forms to ask the attendees about their experiences and opinions of the training we provide, and any recommendations are noted and acted upon. One example of this was the Safeguarding Lead GPs meeting which we had previously conducted separately for each East Berkshire location but have now combined to one meeting for a richer learning across the Primary Care Networks.

### **3c. Details on the impact of safeguarding training on practice.**

We ask for reflective evaluations from all those present at training to gauge the impact it has had and one of the questions is how you will change your practice following this.

We see a noticeable increase in reaching out/enquiries into the CCG Safeguarding Team and an increase in referrals to agencies. An good example would be: following the training session given of the male victim of domestic abuse, we had positive feedback from a GP Practice that the training had given them confidence to have a conversation with a male patient and they were able to direct him to further support.

### **3d. Has the organisation identified any gaps in safeguarding training?**

We respond to local issues and this shapes any training going forward. Going into the ICB and as part of the ICS System we are currently discussing a joint strategy and safeguarding training plan which all organisations can use.

An area that we want to include is resilience and keeping staff feeling safe in safeguarding and recognising this as an emotive area of work.





## **Thames Valley Police**

Vulnerability and risk package 1 (V&R1). This package covers:

- Adult Protection/at risk (Voice of the Adult)
- Safeguarding referrals to MASH
- Stalking Protection Orders
- Clare's Law
- Sarah's Law
- Professional Curiosity/Secondary Investigation

The target audience for this is:

- Front line Officers
- NH Teams (incl PCSO's)
- RP Officers
- Specials

In relation to Special constables delivery we have split the package into two parts as a specials training evening only lasts 2.5 to 3 hours.

To date we have trained 1168 officers and staff which equates to 45.59% of the 2562 target audience. Of the remaining 1394, 816 people are currently enrolled for scheduled dates. The remainder are still being worked on. No evaluation of the training has taken place as yet – this will follow soon.

As of August 2022, we will be launching the V&R2 package (which will have the same target audience as V&R 1) and cover:

- FGM
- Rape and serious sexual assault
- Radicalisation
- Autism Awareness

We have also delivered DA Matters training to approx. 2,500 frontline officers and staff over 2020-2022 (delays due to Covid-19). Final evaluation has been incredibly positive. We are growing a DA matters champion network of specialists and currently have 110 champions who have received additional training and will take on additional roles within the organisation.

## Berkshire Healthcare NHS Foundation Trust

3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.

**Safeguarding training compliancy Trustwide in 2021/22 was as follows:**

Training	Level	Compliance level				Target
		Q1	Q2	Q3	Q4	
Safeguarding Children	One	79.82%	84.13%	88.19%	89.29%	90%
Safeguarding Children	Two	90.35%	90.38%	91.83%	92.53%	90%
Safeguarding Children	Three	86.09%	87.02%	90.48%	89.22%	90%
Safeguarding Adults	One	88.60%	88.00%	95.40%	93.67%	90%
Safeguarding Adults	Two	60.18%	79.22%	85.76%	90.92%	90%
Safeguarding Adults	Three	26.77%	38.01%	66.16%	81.60%	90%
Prevent	Wrap	94.90%	95.50%	96.95%	98.39%	90%
Prevent	Channel	95.60%	94.33%	99.51%	99.56%	90%
MCA		84.69%	84.77%	85.97%	86.77%	90%
DoLS		82.50%	87.84%	93.42%	95.92%	90%

Initially level one training was e-learning and level two safeguarding adults training was e-learning but since January 2022 all training has been virtual face to face training including induction.

A large cohort of clinical staff (approx. 1500) were moved from requiring safeguarding adults level two training to requiring safeguarding adults level three hence the drop in compliance levels to 26.77% in June. Extra training was facilitated and it is forecast that by June 2022 over 90% of staff who require it will be compliant at level three. Some staff moved from requiring level one to requiring level two. And this training is now compliant at 90%.

### 3b. Evaluation on the quality of your training activity/programme.

Evaluation sheets are completed by staff following training and reviewed quarterly by named professionals. Training is regularly updated in line with local learning and information from evaluations. In Quarter four a mental capacity act audit was completed and recommendations from the audit will inform MCA and DoLS training going forward

### 3c. Details on the impact of safeguarding training on practice.

The MCA audit evidenced improvement in practice from the audit which was completed the previous year. Staff demonstrate knowledge of safeguarding and the advice lines are well used by all services. Calls to the advice line demonstrate that staff recognise safeguarding concerns and seek specialist advice to ensure they have followed processes correctly.

### 3d. Has the organisation identified any gaps in safeguarding training?

Training is constantly evaluated and reviewed. It was recognised that e-learning at induction which was introduced at the beginning of the pandemic meant that some staff were not clear about their responsibilities and how to get advice and support. Work was completed with the learning and development department and timetables were changed to ensure all safeguarding training is now virtual face to face.

## Frimley Health Foundation Trust (FHFT)

**3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

### TRAINING

- Level 1 training is completed via e-learning with support from the learning and development team if needed.
- Level 2 training is completed by e-learning to all staff at induction.
- Level 3 safeguarding children's training is delivered to key staff as identified by the intercollegiate guidance (2019).
- National requirement set in 2018 for level 3 adult safeguarding training as identified in the intercollegiate guidance, increased the numbers of staff required to receive this training. Targeted training commenced in a staggered approach. The Training Needs Analysis (TNA) was amended in October 2020 to incorporate medical staff and band 7 nurses, further changes are planned for the future.
- Level 3 safeguarding adults training is completed via e-learning and via MS teams. Publication of the intercollegiate document increased the denominator of staff requiring level 3 training and so we experienced a subsequent drop in compliance. This is being rectified with a clear trajectory being worked through to achieve 85%
- Learning disability training will be added to the Statutory and Mandatory training in due course. A plan will be developed to implement this training for Trust staff. Currently all Trust staff receive LD training at induction.

Safeguarding Adults Level 1	92.77
Safeguarding Adults Level 2	93.62
Safeguarding Adults Level 3	62.51
Safeguarding Children Level 1	94.76
Safeguarding Children Level 2	92.04
Safeguarding Children Level 3	92.55
Prevent Basic Awareness Level 2	93.07
Prevent WRAP	90.40

*Training compliance (31st July 2021)*

### **3b. Evaluation on the quality of your training activity/programme.**

All training is cross referenced and complies with the intercollegiate documents for both adults and children.

Evaluations are completed and reviewed. Learning from serious case reviews is embedded within the training.

A blended approach to training via MS Teams and eLearning is used, enabling the face-to-face element to be achieved.

### **3c. Details on the impact of safeguarding training on practice.**

Numbers and quality of referrals to social care are monitored and reviewed by the safeguarding team. Audit is planned for next year.

### **3d. Has the organisation identified any gaps in safeguarding training?**

All training is current and up to date and has had a recent review. No gaps identified in the training offer.



## **Broadmoor Hospital**

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

All staff are mandated to complete safeguarding adults and safeguarding children training. Between April 2021 and March 2022, all courses were delivered through e-learning and virtual training sessions. All registered professionals have a mandatory requirement to complete level 3 training courses for both adults and children. **(Prevention, Protection, Partnership and People)**

The level 3 training programmes comprise a modular e-learning programme, followed by a requirement to attend a tutored training session using Microsoft teams. At the time of writing, training compliance percentages are as follows:

- Safeguarding Level 1 (including children, adults and Prevent): **98%**
- Safeguarding Level 2 (including children, adults and Prevent): **99%**
- Safeguarding Adults Level 3: **89%**
- Safeguarding Children Level 3: **91%**
- Prevent: **99%**
- MCA training: **93%**

In addition to mandatory training, the Trust has provided several highly valued training sessions and webinars that have included topics on fabricated induced illness, adverse childhood experiences, trauma-informed care, and domestic abuse (including working with perpetrators of domestic abuse). In this past year, the Trust has further commissioned training from Small Steps, looking at the radicalisation impact of far-right extremism. Domestic Abuse Prevention Ambassador (DAPA) training has been delivered to approximately 100 staff across all Trust service lines, including high secure services. Other virtual training events have been delivered on labour and criminal exploitation, domestic servitude, modern slavery and child exploitation. Additionally, there have been many webinars on Liberty Protection Safeguards (LPS).

**(Prevention, Protection, Partnership and People)**

Broadmoor Hospital has continued to provide bespoke child visits training. We currently have 24 child visit trained staff employed at the hospital.

### **3b. Evaluation on the quality of your training activity/programme.**

A wide range of safeguarding related mandatory training courses and specialist training events, webinars and conferences have been made available to staff over the last year. Notably, there has been a substantial increase in webinar events provided or commissioned by the Trust during the pandemic. All Trust delivered training is subject to evaluation and feedback from attendees. Training packages are regularly updated to include relevant topics, such as contextual and transitional safeguarding, Covid-19 and safeguarding, and up-to-date statistical data on safeguarding trends.

### **3c. Details on the impact of safeguarding training on practice.**

Training continues to influence good safeguarding practices across the hospital. Staff have a mandatory requirement to attend periodical refresher training which keeps skills, knowledge and awareness up to date. The Trust central safeguarding team has also issued various “bite-size” briefings focusing on safeguarding adults and children practice developments.

Training impact is monitored by the respective governance meetings for safeguarding adults and children, the clinical governance meeting for Broadmoor Hospital and is also monitored at a strategic level through the Trust combined safeguarding governance group, chaired by the Trust’s medical director. (Prevention and Protection)

### **3d. Has the organisation identified any gaps in safeguarding training?**

West London Health Trust continues to provide relevant and up to date training for staff. This includes the commissioning of bespoke training on safeguarding related topics for the forensic and high secure services.

## **Royal Berkshire Fire and Rescue Service**

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

92% of all RBFRRS staff and volunteers have attended the face to face Children's Level 1 Safeguarding Training and Adults Level 1 Safeguarding Training. The remaining 8% of staff and volunteers is due to a natural turn-over of staff and people leaving the organisation, so these individuals will filter over into this financial year's input of training.

We have created a Safeguarding Training Framework that now involves e-learning training for adults and children as part of employee's refresher training moving forward and in other more specific areas such as the Home Office core training objectives such as Prevent, Modern Day Slavery, Exploitation and Female Genital Mutilation (FGM).

Due to the increase of Domestic Violence cases during the Covid-19 pandemic, this has resulted in more referrals being signposted through to agencies from our staff and RBFRRS also receiving more Threat of Arson referrals from other agencies. Approximately 50% of our Threat of Arson referral received were related to Domestic Violence cases. Please see the figures for referrals below.

As a result of the increase of Domestic Violence cases, the Safeguarding Team arranged for the DASH charity to deliver five training sessions online to ensure we understood the signs and indicators of Domestic Violence. This was delivered to 167 front line staff.

In our last Safeguarding Working Group meeting internally, we invited Figen Murray, the mother of Martyn Hett, who tragically died at the Manchester Arena Bombing. She has created Martyn's Law which now forms part of the Protect Duty. Martyn's Law is a piece of legislation that creates a coherent and proportionate approach to protective security. The new law will apply to any place or space to which the public have access. Figen has lobbied for stronger anti-terrorist security measures. We have recorded this session to ensure we can share this across the organisation.

### **3b. Evaluation on the quality of your training activity/programme.**

We are due to implement our evaluation of training later this year which our Learning and Development Team and Data Team will be assisting with.

We are also due to attend the Bracknell L&D Subgroup to present on our new Safeguarding Training Framework in July 2022.

### **3c. Details on the impact of safeguarding training on practice.**

Since we have had a Safeguarding Manager in place in RBFRRS we have seen a 1008% increase in the past 5 years in referrals from operational staff, Safe and Well Technicians, control staff, support staff and volunteers. In the past year we have seen an increase from 489 to 566 safeguarding referrals. We have also seen a 74% increase in threat of arson referrals in the past financial year.

The above increase in referrals, we believe, has been due to face to face delivery to staff in Safeguarding Children and Adults Training. The Safeguarding Team, Safety Education Team and Prevention Hubs have also worked hard in cascading our service provisions to multiple other agencies. Please see below figures for the last financial year for Bracknell:

- 736 Safe and Well Visits were delivered.
- 36 Bracknell professionals attended the Adult at Risk Programme training.
- 66 safeguarding concerns and referrals were signposted into adult and children services or other agencies from our staff and volunteers.
- 29 Threat of Arson referrals were received and as a result Threat of Arson Safe and Well Visits were delivered to these properties to ensure our most at risk were safer and more reassured in their homes.
- Our Safety Education Team are supporting Bracknell Adult Board/Services with the delivery of the Risk Framework Tool training to agencies.

During Covid-19, RBFRS has seen an increase in the amount of Safeguarding referrals and Threats of Arson referrals. We believe that this is also due to being a direct impact of pressures within the community and society as a whole such as Domestic Violence, mental health and financial strain due to job loss.

The RBFRS Safeguarding Audit implemented in 2020 was utilised to discuss concerns like capacity and resources within RBFRS and the Safeguarding Team due to the increase of referrals. This was incredibly beneficial due to now having an extra resource within the team, our Safeguarding Support Officer, which was agreed by our Senior Management Team.

### **3d. Has the organisation identified any gaps in safeguarding training?**

Recently we have designed a Safeguarding Training Framework for the organisation as a whole. This has been incorporated into our Safeguarding Action Plan for a more streamlined focus. This framework is currently with our L&D Manager for authorisation and agreement.

We believe we can improve on the reporting and efficiency of training, which the framework will hopefully also assist with the capacity and resource within the team.



## **National Probation Service (NPS)**

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

Out of 10 staff required to complete child safeguarding training in the Bracknell office, 9 staff have completed Child Safeguarding e-learning and 8 staff have completed the Safeguarding Children face-to-face course.

This means that 85% of the required Child Safeguarding training has been successfully completed.

9 out of 10 have completed safeguarding adult training.

### **3b. Evaluation on the quality of your training activity/programme.**

Evaluation sheets are completed by staff following training and reviewed quarterly by named professionals. Training is regularly updated in line with national learning and information from evaluations.

### **3c. Details on the impact of safeguarding training on practice.**

The Probation Service have a number of audit and assurance tool to monitor practice

### **3d. Has the organisation identified any gaps in safeguarding training?**

A new competency based framework for probation staff requires all mandatory training to be completed in order to receive pay progression, which should increase the completion of mandatory training.

## **Community Safety Partnership**

### **Safeguarding Training Provided**

- Introduction to DA – x4 sessions delivered as half day virtual sessions with 52 delegates attending.
- MARAC (Multi Agency Risk Assessment Conference) and DASH (Domestic Abuse, Stalking, Harassment and Honour Based Abuse) training – x4 sessions delivered as half day virtual sessions with 56 delegates attending.
- Single agency MARAC and DASH – x2 sessions (one for BWA and one for Victims First) delivered as half day virtual sessions with 22 attending.
- Cut It Out training (for hairdressers/beauticians/barbers) - x1 session delivered as 1 hour evening session with 11 attending.
- Prevent e-learning - 17
- Modern Slavery and Exploitation e-learning – 269

### **Safeguarding Training Attended**

Children Safeguarding Training – All 6 members of the team attended this in 2021/22

Risk Framework Training – 2 team members attended refresher training

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

Community Safety Service: 100% have completed:

Modern Slavery and Human Trafficking

Safeguarding Children

Risk Framework Training



### **3b. Evaluation on the quality of your training activity/programme.**

BFC undertakes feedback with internal staff who attend the Introduction to DA and the MARAC & DASH training. Feedback is not sought from external delegates, but the DA Coordinator sometimes gets contact from delegates afterwards with feedback/requests to join the DA newsletter distribution list.

### **3c. Details on the impact of safeguarding training on practice.**

Other than the initial feedback after the training has taken place, no further details are sought from delegates re. the impact of the training.

### **3d. Has the organisation identified any gaps in safeguarding training?**

Trauma-informed training: Understanding domestic abuse and the impacts on those experiencing it.

This gap was identified through the recent Domestic Abuse Safe Accommodation Needs Assessment and Strategy Development which included a victim/survivor consultation. Training provision is currently being explored through the DA Executive for delivery in 2022/23.

## **Silva Homes**

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

No breakdown by year but can summarise training totals.

These are the set safeguarding sessions. Individual colleagues may have also attended various partner led sessions. Where some are incomplete, they are new starters with us.

- Modern slavery (e-learning): 245 required. 237 completed.
- Safeguarding adults for housing (e-learning): 51 required. 48 completed.
- Safeguarding children for housing (e-learning): 48 required. 45 completed.
- Safeguarding training (classroom): 180 required. 171 completed.
- Safeguarding local arrangements as part of the Silva induction (classroom): all new starters since 2018.

### **3b. Evaluation on the quality of your training activity/programme.**

An internal audit of training has identified that we should increase the number of colleagues that are taking the online safeguarding modules. This will be rolled out in the next few months.

The classroom training is provided by an external agency and evaluation forms are completed after each session.

### **3c. Details on the impact of safeguarding training on practice.**

The safeguarding concerns raised by colleagues has increased every year following the introduction of safeguarding arrangements as part of the corporate induction process.

Formal referrals peaked in the Covid-19 pandemic, when colleagues were unable to reassure themselves that individuals were free from the risk of harm.

Our audit of our own safeguarding arrangements found that colleagues “were aware of their responsibilities and of when and how they should raise safeguarding concerns”.

### **3d. Has the organisation identified any gaps in safeguarding training?**

We had noticed that our work on training safeguarding, specifically with front facing colleagues had led to a year-on-year increase in reporting, but as a landlord, the number of identified

hoarded properties was still lower than might statistically have been expected. This year we have launched a new toolbox talks style training session for front line repairs colleagues (those most likely to be in a customers home) and a new quick reporting tool for hoarding.

## **Involve Community Services**

All staff receive safeguarding updates and undertake Level-1 training bi-annually. Those who are in supervisory positions are also expected to undertake level 2-3 training.

### **3b. Evaluation on the quality of your training activity/programme.**

Our training is well received by both Involve colleagues and the wider sector. We use knowledgeable trainers who have a breath of experience in their respective fields.

### **3c. Details on the impact of safeguarding training on practice.**

We know that our training programme is making a difference. We know this as colleagues across the sector will come to us, recalling their training to discuss an issue of concern and seek guidance.

### **3d. Has the organisation identified any gaps in safeguarding training?**

We seek to get our staff onto safeguarding training during their induction period. Often this acts as refresher learning as they are coming from fellow providers who are providing care to residents. Given the expansion of our safeguarding training offer, I am confident we have provision to accommodate need. That said, Involve can not be accountable for other charities, social enterprises and community groups but will continue to ensure cost sensitive safeguarding learning into the future.

## **The Ark Trust**

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

4 staff members/key volunteers have received training – 2 online, 2 face to face  
5 people were due for training this year so 80% - but the remaining individual is currently not active (key volunteer)

### **3b. Evaluation on the quality of your training activity/programme.**

Preferred training method is online (due to pandemic) but this was not suitable for staff and key volunteers with additional learning needs – a bespoke training session was delivered face to face.

### **3c. Details on the impact of safeguarding training on practice.**

Awareness raised in staff, increase in referrals to not just safeguarding but to Adult Social care for care needs/carers assessments

### **3d. Has the organisation identified any gaps in safeguarding training?**

As above – training for staff and key volunteers with additional learning needs – so a bespoke course delivered.

## **Healthwatch Bracknell Forest**

### **3a. The number who have completed safeguarding training, the proportion (%) against set targets/required staff, broken down by face to face/online training/e-learning and training levels.**

4 (100%) received face to face and e-learning training. Safeguarding Level 2

**3b. Evaluation on the quality of your training activity/programme.**All staff reported the training met their needs and was applicable to their practice

**3c. Details on the impact of safeguarding training on practice.**

Staff awareness increased and maintaining by applying learning in to practice

**3d. Has the organisation identified any gaps in safeguarding training?**

No

## **7.5 Pan Berkshire Safeguarding Adult Policy and Procedures Subgroup**

The subgroup has met twice during 2021/22 and continues to review the policy and procedures at each meeting and discuss amendments suggested by partners.

During the year, the subgroup has continued to update its dedicated website and monitored its usage. A new multi-agency Hoarding Protocol was implemented in Bracknell Forest as a local policy linked to the pan Berkshire Self-Neglect Guidance. Training is being implemented to support the introduction of the protocol. Work has been progressing to review and update the:

- Self-neglect policy
- Reporting of Safeguarding Concerns Policy (in line with national guidance)
- Allegations Management Policy
- Information Governance Policy

## **7.6 Pan Berkshire Safeguarding Children Policy and Procedures subgroup**

BFSB has continued to support the pan- Berkshire safeguarding arrangements that ensure multi-agency policy and procedures are in place and provide important guidance to those working in the region. This subgroup is well supported by colleagues representing a range of disciplines and works closely with a respected national provider.

Through its routine meetings the group scrutinise chapter amendments suggested by the procedure's provider, but also has a timetable of chapters for local review. This cross border and multi-disciplinary approach enable all Berkshire Safeguarding Partnerships to maintain up-to-date localised procedures that are easily accessed by all practitioners via an online platform.

The impact of the group's work is demonstrated by its response to the findings from local case reviews and national learning, an example being its work to revise guidance on engaging families that followed a Bracknell Forest Local Child Safeguarding Practice Review. Similarly, learning from reviews conducted by neighbouring partnerships helped inform the guidance to provide greater clarity as to when a case is stepped down from a child protection plan. This now ensures that a child in need plan is in place for at least three months and is the subject of management scrutiny and review before closure. In addition, it also states that where significant change occurs within 3 months of a conference that has ended a Child Protection plan, a multi-agency strategy meeting should be convened, to determine whether the criteria for a section 47 enquiry is met and whether a Child Protection conference should be held. Such arrangements are considered to be examples of how an issue raised in one local authority area can positively impact procedures that are accessed by six local authority areas.

Details of the procedures can be found at: <https://proceduresonline.com/berks/>

## 7.7 Pan Berkshire Section 11 subgroup

### Purpose

To assess the safeguarding effectiveness for all Pan Berkshire statutory and voluntary organisations, by reviewing and evaluating S.11 returns of the three yearly audit of S.11 Children Act 2004, acting as a critical friend, with the aim of improving safeguarding and improving the welfare of children and young people in Berkshire.

Annual activity included:

- The arrangements were reviewed as Wokingham were no longer able to host and chair the subgroups
- Debbie Hartrick (Frimley CCG) and Jon Ennis (Probation) agreed to chair the subgroup jointly
- The audit tool was reviewed and updated
- It was agreed that there was no longer a need for mid-term reviews unless there was a cause for concern.
- Reviewed 3 agencies.

## 7.8 Case Review subgroup (CRSG)

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 work, 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 National Child Safeguarding Practice Review Panel.

Ensuring the recruitment of independent lead reviewers is compliant with IR35 tax regulations has continued to impact on the Board's ability to conduct Local Child Safeguarding Practice Reviews within the required timescales. As a result, the work of the CRSG is essential in ensuring dissemination of best practice and actions relating to any improvement required. To that end, the subgroup routinely tracks progress made against identified actions for improvement and seeks evidence of the impact of such activities.

Along with the Bracknell Forest Learning and Development Forum (BFLDF), the CRSG also plays a crucial part in disseminating learning to those responsible for service development, to practitioners and is made available to members of the public via the Board's website. Learning events continue to be held in an online environment with learning briefs shared widely via email and through a reciprocal agreement with neighbouring Safeguarding Boards/ Partnerships. The BFLDF plays an important part in consolidating systems to enable the Board to understand better the extent to which learning has been embedded within local organisations and in enhancing our links with non-statutory partner agencies.





## 7.9 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 2021/22 Bracknell Forest Safeguarding Board commissioned two Safeguarding Adult Reviews. At the time of writing this annual report these reviews have 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 issues emerging from these reviews include:

- Long term exposure to violence within the family
- Impact of substance misuse and associated criminality
- Effects of pandemic on individuals and service provision
- Effects of long-term trauma resulting in serious mental ill-health
- Oversight of medications prescribed
- Vulnerability of care leavers during transition from children's to adults' services

During 2021-22 the Safeguarding Board concluded one SAR (reported in last year's annual report). 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 was published, learning brief produced and multi-agency seminars supported the dissemination of learning.

Learning in respect of the AB Nursing Home SAR were revisited following the successful prosecution of the owner of the home. A subsequent review of the additional information that had come to light during the prosecution provided further insight and was considered during an extraordinary meeting of professionals chaired by the original independent lead reviewer. Further actions were recommended and are subject to the Board's approval; it is intended the final report (with addendum) will be published in the coming months.

In this period the Safeguarding Board continued to have oversight of actions identified in earlier SARs. In addition to the learning from SARs conducted within the borough, the CRSG continues to work collaboratively with neighbouring Safeguarding Adult Boards to share learning.

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

Working Together 2018 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. Important learning has been identified by the review completed during the year and, subject to the Board's approval, it will be published anonymously and will be referenced in next year's Annual Report. A learning brief will be published and dissemination of learning will be further supported by a series of online seminars. Following a Rapid Review held in late 2021 the Board has commenced an LCSPR which is linked to one of the SARs referred to above. While these reviews will formally report on their findings, initial learning identified during the Rapid Review was shared with relevant partner agencies and will be extended by publication of a learning brief and multi-agency seminars.

Additional learning events were supported in respect of Child A (LCSPR), previously reported on. Due to on-going criminal prosecutions it has not been possible to publish this review as yet.

## **Rapid Reviews and Local Learning Review**

During 2021-2022, the Board undertook a total of ten Rapid Reviews (RR), three of which are referred to above due to them meeting the necessary threshold for a review. Of the remaining seven, one involved a child and six related to adults. Further details relating to the RR process, (including LLRs), SARs, & LCSPRs can be found at Bracknell Forest Safeguarding Board - Safeguarding Adults Reviews SARs & CSPRs

## **7.10 Partner Implementation of Case Review Findings**

The Board asked partner organisations what changes their organisation has made in light of findings from CSPRs and SARs.

### **Bracknell Forest Council**

Changes made by BFC as a result of learning from child safeguarding practice reviews (CSPRs) and safeguarding adult reviews (SARs) are:

#### **SAR Adult GH**

A range of actions from the SAR for GH have been completed including:

- Compliance with the procedures for the correct execution of Section 135(1) MHA 1983 (as amended 2007) warrant has been reinforced with specific training, supervision and quality assurance arrangements in place
- EDS Mental Health Policies & Procedures have all been reviewed and updated in accordance with the EDS Service Review

#### **SAR Adult L**

A range of actions from the Adult L SAR have been completed including:

- Promotion of the local DA pathway, to ensure staff and members of the public are aware of the contact details and help numbers of services.
- Updated domestic abuse training materials to ensure they reflect the learning from SAR for Adult L.

- Ongoing awareness, training and increased use of the risk framework assessment tool to support adults at risk where this is more appropriate for their needs than the usual S42 safeguarding process.

### **LCSPPR Child N**

A range of actions from the LCSPPR for Child N have been completed including:

- Strengthened approach to serious concerns for neglect of a child and the need for joint investigation to take place
- Implementation of a proactive approach to developing practitioners' knowledge and skills in working with resistant families and promoting training and reflective supervision.

### **LCSPPR Child A**

A range of actions from the LCSPPR for Child A have been completed including:

- Training opportunities to promote better understanding of mental health systems, in order that non-mental health staff are confident regarding what is required on a case-by-case basis and how vulnerable children can access the correct support
- Professionals are supported better to work with families who resist offers of help and support, including when the appropriate use of authority is necessary to safeguard children.
- Learning brief disseminated to staff and the voice and direct words of Child A are used when training professionals and in supervision to provide an understanding of the impact of systems and practice on children who have mental health concerns and who are at risk of exploitation.

### **Frimley Clinical Commissioning Group (CCG)**

We make safeguarding practice changes in response to all SARs, CSPRs and Rapid Reviews across the Frimley CCG landscape. During 2021/22 across Frimley CCG footprint:

- CP Medicals and pathways training for practitioners was held and a webinar was shared with organisations.
- The 'was not brought' Policy was refreshed for Primary Care.
- We reviewed how Primary Care record domestic abuse on their patient systems (including other safeguarding flags) and the document is processing and due to be released shortly.
- Updated our Level 2 and Level 3 training to include professional curiosity, unconscious bias and awareness of males as victim of domestic abuse.
- All learning guides/briefs are shared across all health organisations and within the Safeguarding learning and development groups.
- As part of a review outcome, we have shared the importance of acknowledging fathers (and in line with the 'Invisible men' report).
- Produced a template of questions for GP/Associate practitioners to support undertaking assessments for temporary registered patients in Care Homes.
- Shared information with practitioners being cognisant of the link between abusive head trauma in babies and epistaxis (nose bleeds).
- Raised the profile of risk on safe sleep overlay deaths.
- Effective v Efficient communication paper shared across health organisations and at level 2 and level 3 training events.
- Self-neglect has a focus following SARs across East Berkshire, with task and finish groups meetings for all partners (the CCG are members).

- Learning was presented to Mental health and LTP practitioners to support how crisis team services are commissioned, hearing the ‘voice of the child’.

## **Thames Valley Police**

Internal Recommendations for organisational change from Individual Management Reviews (IMRs) have to be channelled through the Governance & Service Improvement Recommendations & Learning panel, and if adopted are assigned an action owner and actions are followed up for updates.

### **Learning Dissemination**

Learning from CSPRs, SARs and all other types of statutory case review (occasionally non statutory too) is disseminated throughout TVP on completion of the written product, whether that be an extended Chronology, IMR or other product. Learning can sometimes even be derived for urgent matters following a Rapid Review which reveals vital fast time learning as necessary.

Written Case Studies are produced from each Individual Management Review (IMR) which comprise a 3-4 page document, detailing individual learning for each individual role profile, team or forcewide. More formal recommendations for organisational learning are also highlighted. These are put in place where training, resources or policy is inadequate or needs review. The latter Recommendations have to be channelled through the Governance & Service Improvement Learning & Recommendations Panel for approval (as above).

The Case Studies are published on the Intranet for all colleagues to view. They are also proactively sent out via email to key stakeholders and Learning & Development colleagues. During the period in question (2021/2022), two of the Case Studies were turned into ‘Vodcasts’ which consisted of films lasting 8-10 minutes long, containing extracts from voice recordings, interviews, photographs etc. These have been published on the TVP Moodle package as mandatory courses for certain groups of officers and more Vodcasts are currently being created.

A Compendium of Learning from Forcewide Reviews was collated which detailed 8 learning themes for 2021. These consisted of:

1. Intelligence Sharing
2. Inaccurate nominal recording
3. Ownership of risk management
4. Minimising risk involving mental ill-health
5. Undertaking secondary investigations
6. Hearing the voice of the child
7. Supervision of protracted investigations
8. Demonstrating professional curiosity

A forcewide online conference was also held to go through the learning themes identified. As a result of the conference, regular meetings and information sharing is taking place to proactively share relevant learning with specialist departments (such as Criminal Justice, Policing Strategy, PVP) and Operational Working Groups to progress the themes.



## **Berkshire Healthcare NHS Foundation Trust (BHFT)**

- Transition work between CAMHS and CMHT to ensure safer transition from children's mental health services to adult mental health.
- Website reviewed to ensure information is available to partner agencies about BHFT mental health services. Pathways are available on BHFT website. Existing common point of entry triages all referrals and signposts both clients and professional
- Safeguarding children training enhanced regarding working with resistant families
- Pilot has started of Multi-agency professionals forum for discussing complex cases as required.
- Staff reminded via safeguarding newsletter to use the Berkshire procedures online escalation policy. Safeguarding support with escalation is provided via the on-call safeguarding advice line for BHFT staff and through child protection supervision
- All named professionals have recently received further specialist child protection supervision training and new a supervision process was piloted and has been rolled out.

## **Frimley Heath NHS Foundation Trust (FHFT)**

Learning from local Child Safeguarding Practice Reviews, Domestic Homicide Reviews, Safeguarding Adult Reviews is disseminated during discussion sessions in the level 3 training along with general learning from relevant national reviews including Child Q Haringey and Star and Arthur.

## **Broadmoor Hospital**

Local CSPRs and SARs are reviewed at the Trust's respective safeguarding adult and children governance meetings. The safeguarding lead from Broadmoor Hospital attends these separate meetings. Feedback from any learning lessons and recommendations appropriate for Broadmoor Hospital are then discussed at the Broadmoor Hospital safeguarding adult panel or safeguarding children clinical improvement group. These governance groups will also agenda SARs and CSPRs of national significance. Changes in practice will then be formally implemented through Broadmoor Hospital's clinical improvement group and senior management team meetings. (Prevention, Protection, Partnership and People)

The Trust is currently engaged with a multi-agency learning event to review diabetes, mental health and safeguarding cases. In addition, the Trust is developing a self-neglect protocol with one of the SABs we work with, which will be rolled out across the Trust. (Prevention and Protection)

The Trust are also developing a think family and safeguarding model with one of the London local authorities and will be delivering a presentation to the adult safeguarding conference in September 2022. (Prevention, Partnership and People)

## **Royal Berkshire Fire and Rescue Service (RBFRS)**

Actions that RBFRS' Safeguarding Team has implemented over the last year with regards to changes we have made in light of findings from CSPR's and SAR's:

- We now have a Case Review section on our Safeguarding intranet page for all staff and volunteers to observe. This allows us to share any SAR/CSPR templates for organisational learning and any other internal cases.
- Within our Safeguarding Working Group, which takes place on a quarterly basis, a standard agenda item is for case reviews and reflective practice. At each meeting we ask for discussion and learning around a case from either of our three departments; prevention, protection or response. We also include any learning from our Boards.

- RBFRS Safeguarding Team are now the Leads for our South West Regional Fire and Rescue Service Safeguarding Forum. This takes place on a quarterly basis. We have included a Case Review and Reflective Practice standard agenda item. This has been received very well with all six Fire and Rescue Services across the South West. We already have a couple of offers at the next meeting in September for other fire and rescue services (Hampshire and Dorset and Wiltshire) to discuss other SAR's, CSPR's, DHR's or internal cases where others will benefit from the learning.
- We offer operational crews and any member of staff face to face Safeguarding Support Sessions. This is where the Safeguarding Team can visit teams/crews on fire stations to talk through the key elements of a case, to update them around the key learning and outcomes and to check on their own welfare and to offer support through this process. We have delivered two Safeguarding Support Sessions to two different operational crews regarding a child who was significantly neglected during Covid-19 and where the parents intentionally concealed the living environment and another case involving an adult living in significant self-neglect, whose circumstances had worsened during the pandemic also.
- The Safeguarding Team have created their own posters and guidance sheets for front line staff on three key topics; emollient creams, self-neglect and pressure sores. Posters provided by the board have assisted us with this but we have tailored them to be more useful and specific to our front line staff. These are now available on our Intranet Safeguarding page for all staff and volunteers. These topics are direct learning from SAR's in the past.

### **National Probation Service (NPS)**

The Probation Service is primarily an adult-facing service. Probation Service staff, either working in courts or sentence management, may not routinely have direct contact with children as part of their work. However, the Probation service has a statutory responsibility to contribute to the safeguarding of children and is committed to ensuring that where relevant our work is informed by the voice of the child. NPS process ensure that the "voice of the child" is incorporated into the daily work of probation practitioners and provides extension guidance to support child safeguarding practice, in addition to the identification and support for people who have experienced care.

## Community Safety Partnership (CSP)

### Adult L: 2021

1.1	BF MARAC	To review and if necessary, revise DA pathways relating to the MARAC process	BF MARAC to provide evidence/ assurance of the adequacy of the local arrangements.	TVP completed a TV wide MARAC review in 2021 with actions being taken forward by TVP lead. Report has been shared with DA Exec.  BF MARAC Self-Assessment to take place July 2022.
1.2	BF MARAC	MARAC to request partners to provide assurance that their staff are aware of and understand the MARAC pathways	Relevant staff have access to and understand pathways relating to the MARAC.	MARAC and DASH training delivered by DA Coordinator. Recommendation to BFC staff that this is completed within 6 months of starting role.  See comment above re. Self-Assessment.
1.3	DA Executive	To review and update the existing training materials to ensure they reflect the learning from the KK SAR. (Link to Rec. 6)	BFSB to receive evidence that the training materials have been updated and reflect the learning from the review.	BFC DA webpages are under constant review.  BWA new helpline number circulated across DA network and on relevant documents/ training materials.  '1 page' document with key numbers /websites being developed.
1.4	DA Executive	a) To review the available contact information and help numbers relating to DA.  b) to ensure this information is available across key partner websites.	People at risk of DA are offered timely support/protection/ sign-posting etc	DHR's, on completion should be sent to the TV Office of the Police and Crime Commissioner and the DA Commissioner. Also shared with the Thames Valley DA Coordinators.  The Home Office are due to launch an online data set in 2022 of all DHRs.
8.1	BFSB & CSP	BFSB and CSP to establish a mechanism that ensures:  a) the development of a portal enabling coordination of information relating to SARs/CSPRs/ DHRs  b) The BFSB/CSP are updated on the use of the portal	Partner agencies & professionals have easy access to information relating to learning.  To ensure the portal enables access to up-to-date information provided by trusted sources	DHR's, on completion should be sent to the TV Office of the Police and Crime Commissioner and the DA Commissioner. Also shared with the Thames Valley DA Coordinators.  The Home Office are due to launch an online data set in 2022 of all DHRs.

## Silva Homes

Relevant case findings are discussed at the operational meetings. Learning can be shared at a team level or via the intranet for any organisation wide messaging.

Silva Homes have tracked the formal referrals we make to partnering agencies for years, but we have recently changed our process to track concerns raised by colleagues that didn't result in a formal referral. This is to allow us to look for patterns, and re-visit customers that may have been ok at one point in time, but with a risk of deteriorating.

## Involve Community Services

No changes as such other than to ensure some of the key messages are cascaded to the wider sector.

## The Ark Trust

Included unconscious bias training in staff training

# 8. Performance information

There are approximately 122,000 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.



Figure 1 ONS Mid-2019 Population Estimates



## 8.1 Safeguarding Children Performance Information

### Early Help

During 2021/22:

- There were 792 referrals (families) (covering 1,681 children) received and processed by Early Help (EH) Duty Team to assess the most appropriate Early Help support to be offered.
- There were 424 children re-referred within 12 months of a previous EH referral (compared to 290 in the previous year).
- There were 309 EH assessments completed during 2021-22 which includes both family assessments and targeted youth assessments. Of the 792 referrals received, 469 families were offered a service leading to an assessment (59%) however this does not include those offered other EH involvement such as, parenting programmes, Getting Help, Education Welfare Service (EWS) support. Those being offered a service (which may not be taken up) is lower than last year where it was 94%. The reduction is related to the EH duty system now triaging referrals more thoroughly/accurately leading to other types of EH involvement (up from 4% to 21%) or being signposted to other services / not accepted by EH (up from 2% to 20%).

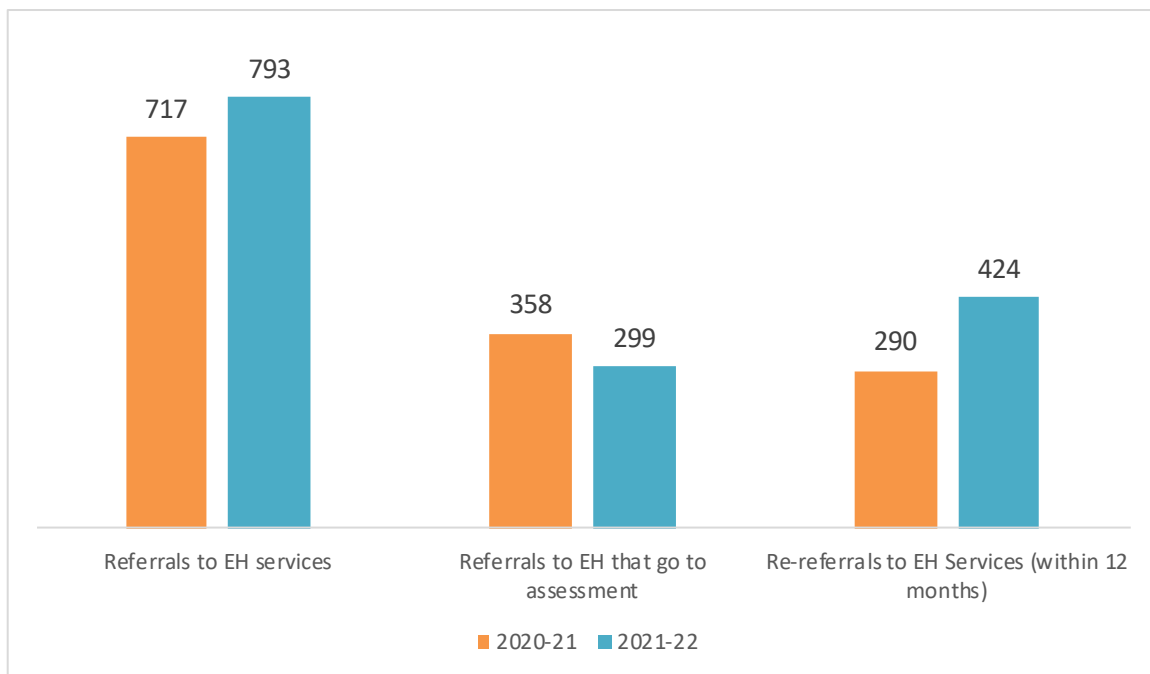


Figure 2 Referrals to Early Help services



## Children's Social Care

There were 8,150 initial contacts received by Children's Social Care (CSC) during 2021-22 which is an increase of 10% from the previous year. Just under a fifth (18%) of initial contacts led to a referral. From the 1,562 referrals, 84% led to an assessment compared to 89% the previous year.

The rate of referrals to CSC (517.8 per 10,000 children U18) was higher than both the national average (437.8), South East (479.3) and statistical neighbours (441.94) (from 2020-21).

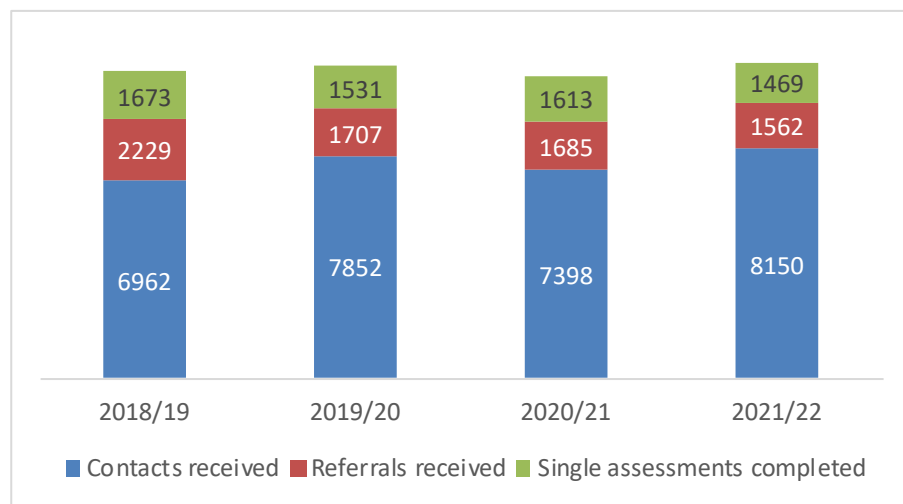


Figure 3 Children's Social Care contacts, referrals and assessments

The following children's safeguarding pathway shows Contacts, Referrals, Assessments, Child Protection Plans, Children Looked After and Child in Need during 2021/22.

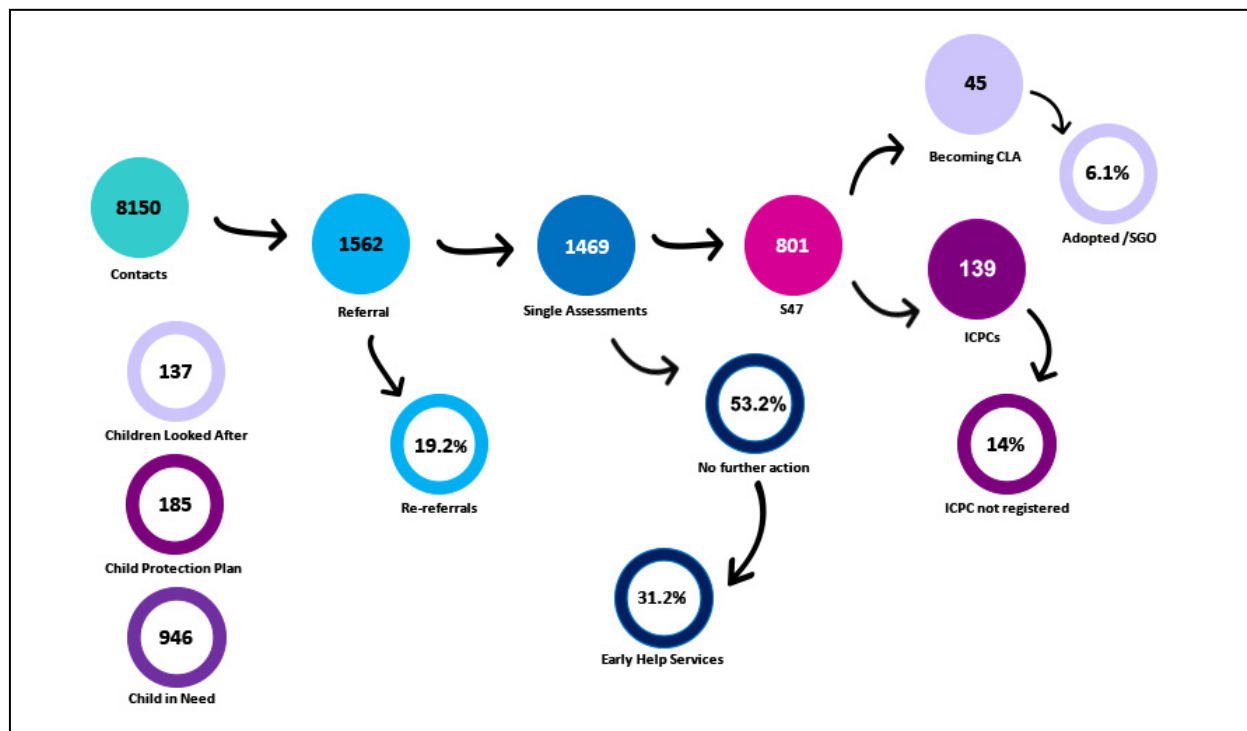


Figure 4 Children's safeguarding pathway 2021/22

## Children in Need

# CHILDREN IN NEED



Figure 5 Snapshot at the end of March 2022

There were 139 children who had an Initial Child Protection Conference (ICPC) and from these 14% did not become subject to a child protection plan which is lower than the previous year (20%).

From the 185 children subject to child protection plans at the end of March, 23% were on a plan at any time previously compared to 19% the previous year (this includes 7% in the previous 12 months; 14% within the previous 2 years).

Children subject to CPP by Age Band & Gender	Male	Female
Unborn	4	
Under 1	9	5
1 to 4	19	20
5 to 9	30	22
10 to 15	33	29
16 and over	7	7
<b>TOTAL</b>	<b>185</b>	

Figure 6 Children subject to CPP by age and gender

Neglect and emotional abuse made up the vast majority of children subject to child protection plans (96%) at the end of March 2022.

## CP PLANS BY ABUSE CATEGORY



Figure 7 Snapshot of number of CP plans at the end of March 2022

There were 137 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 47.9 compared to 53.0 in the South East, 51.0 for statistical neighbours and 67.0 across England.

The number of CLA with three or more placements was 13% at the end of March which is slightly higher than the previous year of 12% but that was an improvement from previous years. Emergency and temporary foster care would count as new placements.

Length of placement<sup>1</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 64% in 2021-22 compared to 45% the previous year (and 68% in the South East and 70% nationally)<sup>2</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.

<sup>1</sup>This performance indicator measures children 0-16 who have been looked after for 2.5 years and in the same placement for 2 years.

<sup>2</sup>A higher figure is more positive.



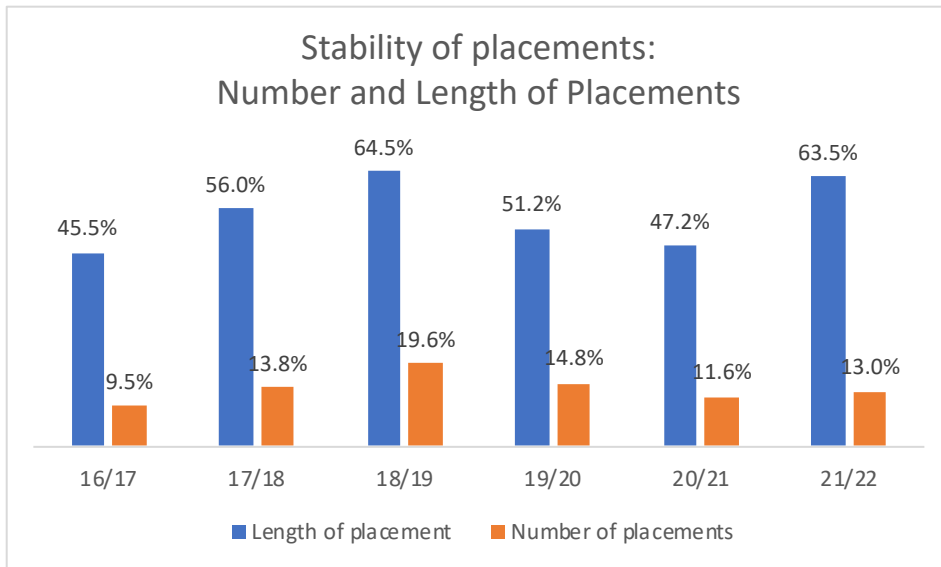


Figure 8 CSC Stability of Placements

6% of children looked after were adopted/Special Guardianship Order (SGO) expressed (as a % of CLA for at least six months). This is a slightly higher percentage to the previous year (5%).

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

93% of care leavers aged 19, 20 & 21 were in suitable accommodation but 43% were 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. There is a support service for NEET Care Leavers which professionals can refer to.

## 8.2 Safeguarding Adult Performance Information

The performance data reflects the key data monitored by the Board and its Quality Assurance subgroup 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	902
No. people involved in Concerns	653
Concerns progressing to enquiry	108
% of concerns progressing to enquiry	20.2%
Number of enquiries ended	109
No. people involved in Enquiries	132

Figure 9 Adult Safeguarding Concerns/Enquiries 2021/22

The table shows that 902 concerns were reported by partners to the local authority during 2021/22. The conversion rate of concerns received to enquiries taking place was 20.2%. A total of 109 enquiries were completed. These included enquiries that were started before March 2021. Further details of the concerns received and enquiries completed during 2021/22 are included below<sup>3</sup>.

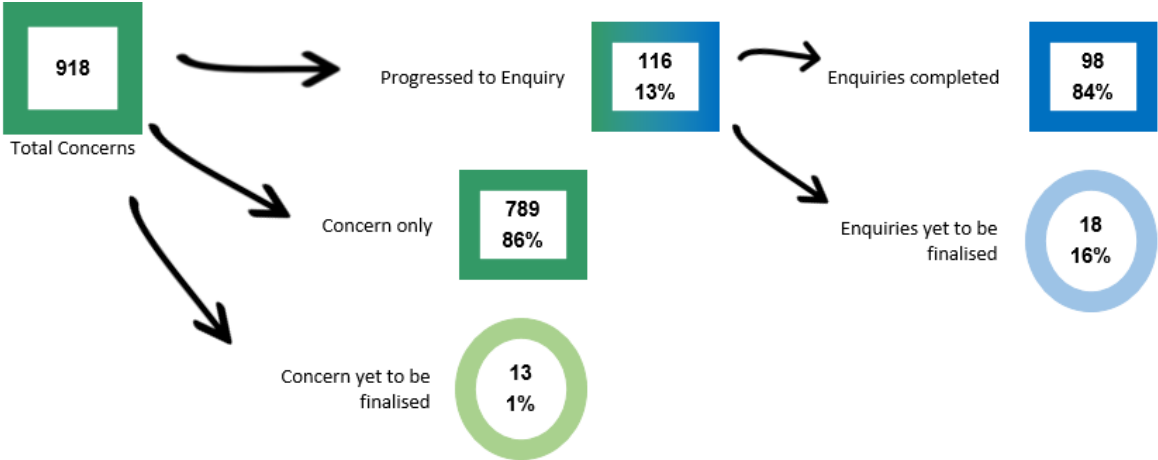


Figure 10 Adult Safeguarding Pathway 2021/22

The flow chart shows that of 918 reported concerns, 116 progressed to a safeguarding enquiry. As a result of the 98 safeguarding enquiries completed during 2019/20. Further details of the concerns received and enquiries completed are included below.

**Safeguarding Concerns – Sources of Concerns**

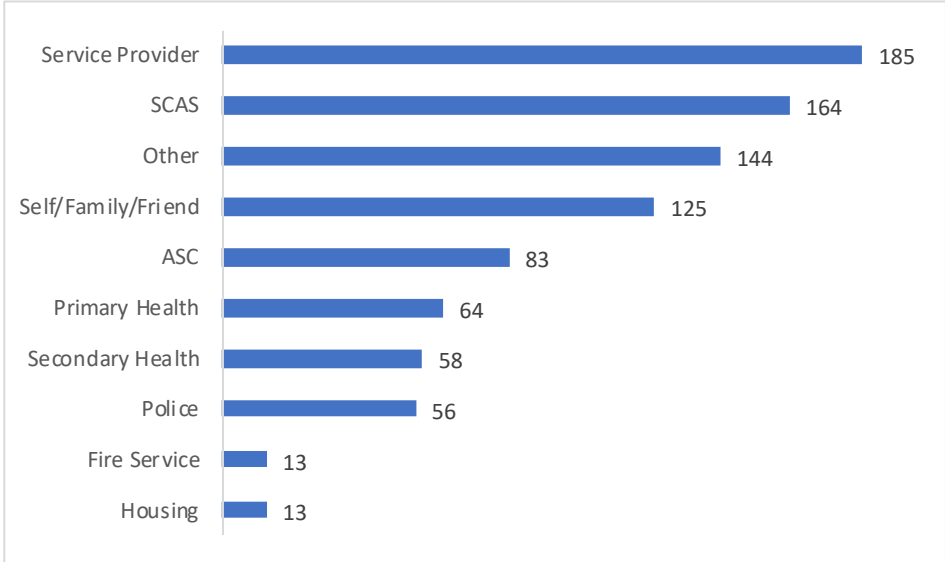


Figure 11 Source of Concern 21/22

The graph shows the range of partners that have reported safeguarding concerns during 2021/22.

<sup>3</sup> Figure 2 shows live data so differs from submitted figures shown in Figure 1

## Completed Safeguarding Enquiries - Types of abuse

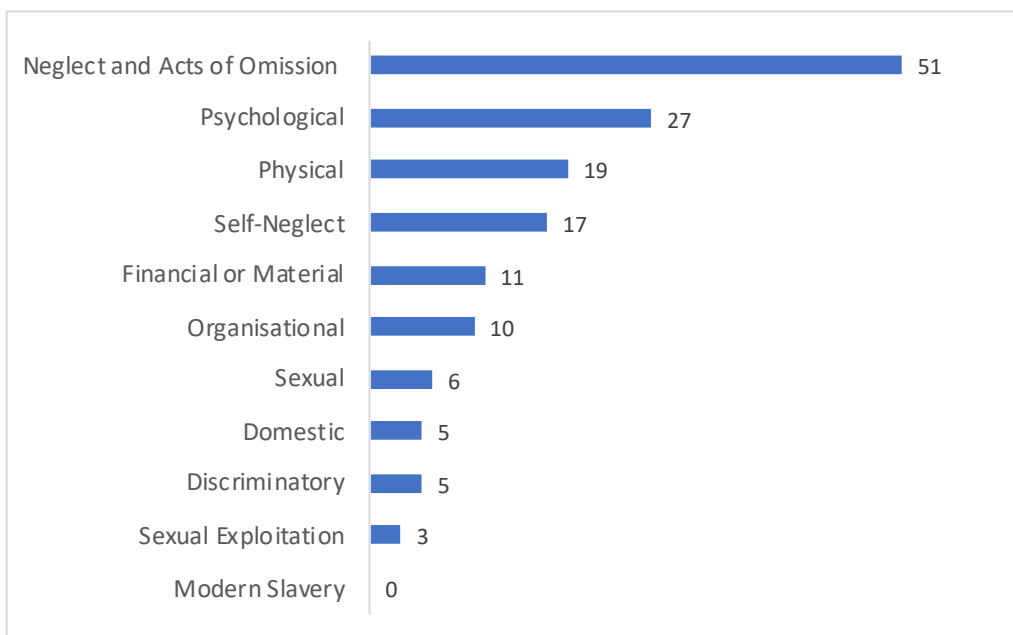


Figure 12 All enquiries concluded by abuse type

For all safeguarding enquiries completed, the greatest number of enquiries were due to neglect, followed by psychological, physical and self-neglect. This is a slight change to previous years where an increase in self-neglect has made it higher than financial abuse for the first time.

## Completed Safeguarding Enquiries - Location of abuse

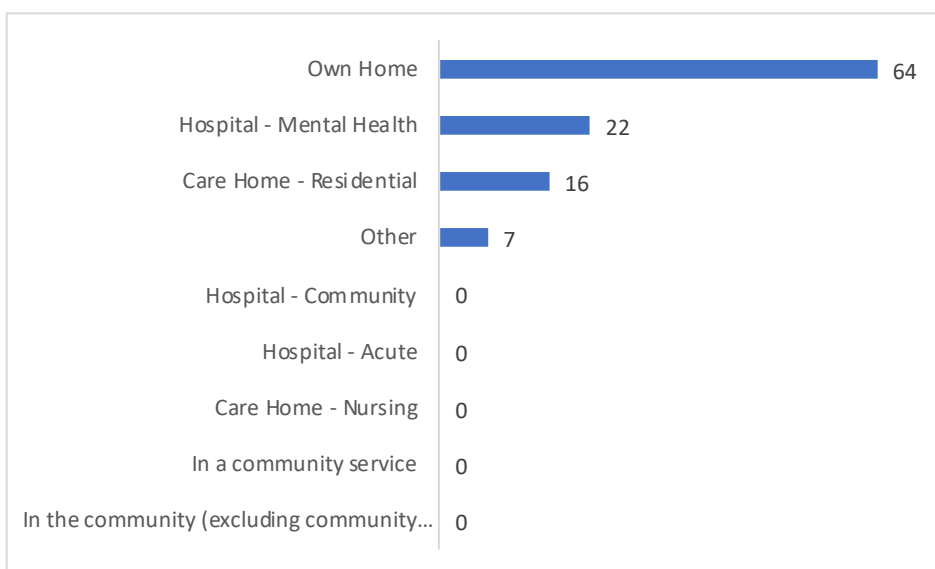


Figure 13 All enquiries concluded by location of abuse

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

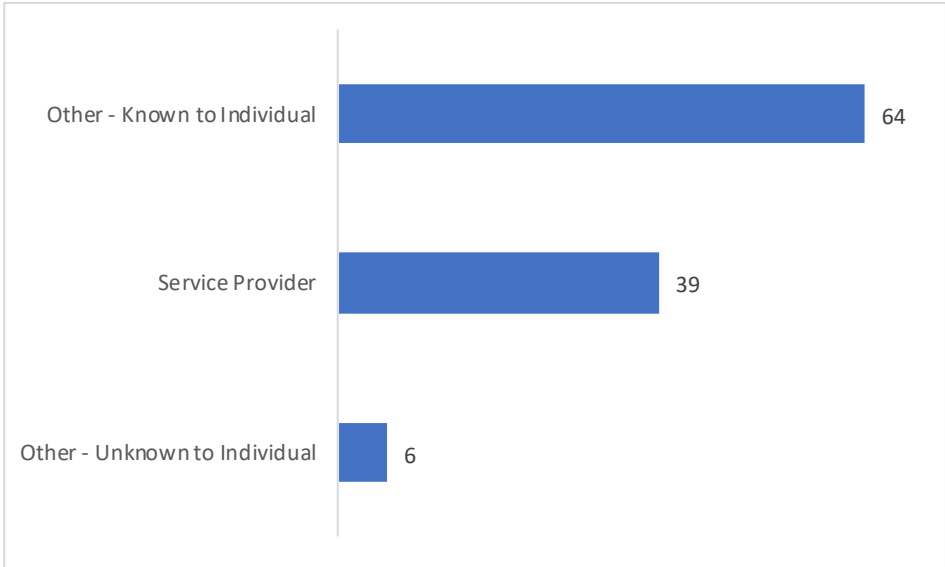


Figure 14 All enquiries concluded by source of risk

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

## Management of risk

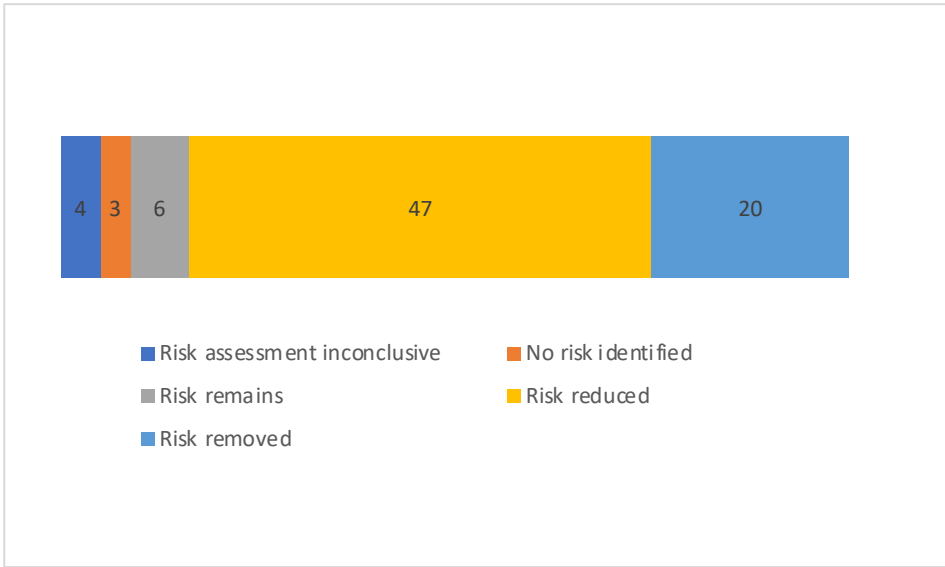


Figure 15 Risk level of actions taken

For safeguarding enquiries concluded, in the majority of cases (84%), risk was removed or reduced.



## Making Safeguarding Personal – Outcomes

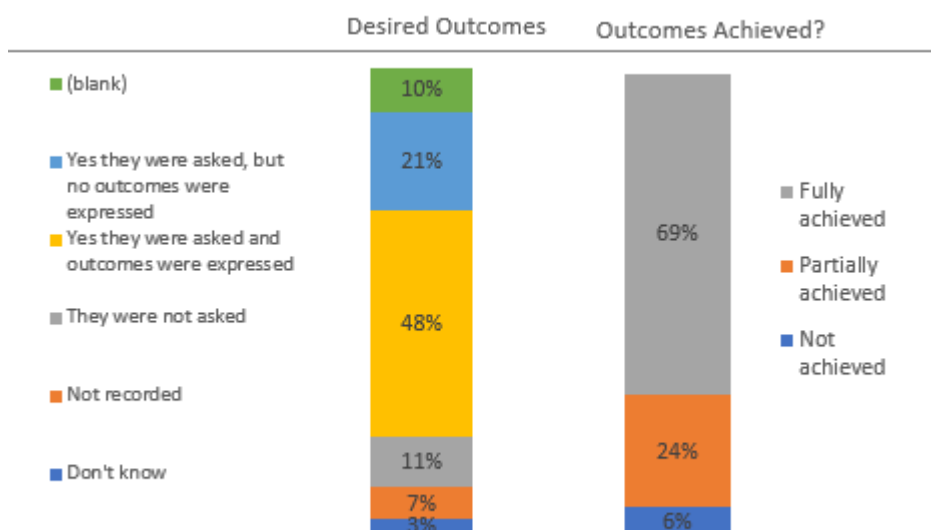


Figure 16 Outcomes desired and achieved

People were asked the outcomes they desired in 69% of safeguarding enquiries that were concluded. Where outcomes were expressed, they were fully or partially achieved in 94% of the cases.

## 9. Future challenges and priorities

While Covid-19 has continued to provide challenges to the Board and partners during 2021-22 they will continue to review the emerging priorities and will formulate 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:

- Serious violence and exploitation including developing work to gain assurance of adult exploitation.
- Contextual safeguarding.
- Understanding roles and responsibilities.
- Evaluating the impact of training, learning from case reviews and the work of the Board itself.
- Evaluating impact of partners' prevention and early help work.
- Maintain focus on understanding the safeguarding environment as a result of covid 19 and taking account of extra pressures due to the cost-of-living crisis and war in Ukraine.

Maintaining focus on co-production and understanding lived experiences.

## 10. 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 2021/22 are shown below.

Safeguarding Board 2021/22	
<b>INCOME / BUDGET</b>	
BF Council Budget (base budget plus adjustments)	156,125
Partnership Funding	56,497
Gross Budget	212,622
Underspend	76,722
AVAILABLE FUNDING 2020/21	<b>289,344</b>
<b>COSTS</b>	
<b>Staff costs:</b>	158,720
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	19,336
Child and Adult Case Reviews (CSPRs and SARs)	3,180
Other costs	6,873
TOTAL SPENDING 2020/21	<b>188,109</b>
UNDERSPEND 2020/21 CARRIED FORWARD TO 2022/23	<b>101,235</b>

# Appendix 1

## Strategic Plan 2020-2023 – action plan progress – May 2022 update

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

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) multi-agency safeguarding guidance continue to be routinely reviewed through pan-Berks meetings (for adults and children separately).

1b. Adult P&P website reviewed for effectiveness following the work of a task and finish group taking feedback from practitioners. Each local authority to contribute £450 per year to maintain website.

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.

1d. Consideration is being given to the need for local policies given the existence of the online PB P&Ps. Work has commenced on developing a local neglect strategy. Local Multi Agency Hoarding Protocol agreed & circulated.

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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 completed which has helped to evaluate effectiveness of partners work and highlighted need for further emphasis on prevention – Prevention is on forward plan for QA Sub Group and is included in TOR for Transitional Safeguarding review 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 continues to develop work on organisations promoting risks and referral routes.

iii. By evaluating:  
the strength of collaborative working within the borough to identify those who are most vulnerable.

Members of the Safeguarding Partnership continue to 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 further promotion of the framework is taking place.

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.

Subgroups are evaluating strengths through case reviews and multi-agency reviews.

The well attended Safeguarding Forum highlighted local risks to community organisation and provided resources to support collaborative working.

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iv. By promoting and evaluating a 'contextual safeguarding' approach by partner organisations.

Recently established local multi-agency group exploring exploitation and serious violence has started to report to the to the Board's. Recent partnership workshop discussed serious violence and exploitation and outputs to be discussed by the Board to inform its strategy and the coordinated approach to working with other strategic partnerships. The Transitional Safeguarding review includes contextual safeguarding in it TOR and this review commencing formally in January 2022 will inform this work.

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v. 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 continues to be 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 proposed e-learning helps promote understanding of an all-age approach. The Risk Framework is to be promoted further through presentations to partners and meetings (May) arranged to explore application to children. The Board continues to explore conceptual frameworks (such as the 'Family Approach') to support future strategic planning. The review of Transitional Safeguarding will incorporate the all-age approach and the frameworks referred to above.



vi. 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. Meetings have taken place to further develop the 'memorandum of understanding' between BF partnerships and further ensure that risks and relevant information is proactively shared between strategic partnerships.

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

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 gave assurance that thresholds are understood but further awareness raising will take place and further assurance gained that the thresholds are well understood. Multi-agency audits/LSCPRs/SARs continue to scrutinise how thresholds are applied on an ongoing basis.

ii. We will require partners to evidence the effectiveness of actions taken to safeguard the most vulnerable.

CEP Subgroup is collecting the voice of child / adults. Individuals are routinely invited to take part in learning reviews.

QA sub-group review safeguarding performance data at each meeting and adult self-assessment data. BF and S11 panel returns are scheduled to be analysed in forthcoming meetings.

The recent review of referrals has helped 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.

Key partners provided evidence and case studies of actions at community forum in November 2021. QA and Case Review Sub group working together to evaluate impact of learning from case reviews. Boards QA Framework will focus on impact of work.

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 continue to take place with community leaders to identify issues of inequality and challenges. The Safeguarding Forum highlighted the importance of reaching all communities. The Safeguarding Board is also sharing information with other BF Boards through joint MOU meeting to ensure issues are addressed appropriately. CEP subgroup has been collecting the voice of adult/ children and raising awareness of safeguarding matters. The audits of safeguarding referrals / concerns provided assurance that cases were being dealt with appropriately. However recent feedback has highlighted potential to improve cultural awareness.

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. Potential Inequalities to be discussed sub group chairs meeting.

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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. The partnership has been advised to ensure awareness of MCA is maintained. The Business unit is to ensure its work with the Local Learning and Development Forum promotes the focus on LPS /MCA within partners training. Proposed e-learning could assist also.

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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 promotes key messages for inclusion in their development/training activities. The Case Review Subgroup ensures reviews include learning events/briefs and webinars. Learning is shared between Boards within the region. Safeguarding Forum shared case studies and promoted safeguarding matters to community representatives for dissemination in Nov 2021. A further forum will take place in June 2022. Task and finish group shared approaches to rapid reviews will undertake to analyse these from past 12 months to identify themes.

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

i. We will review and revise the Strategic Partnerships Memorandum of Understanding.

MoU has been adopted by the Chairs of the Boards. Meetings of partnership officers have been taking place. A common theme of Transitional Safeguarding has already been agreed through this work and the first meeting of a multi-agency task and finish group is taking place in January. A Partnership meeting identified that serious violence is an area of joint concern. Common themes like these demonstrates the need for joint governance such as the MOU should provide.

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 meetings and forum.

The BF L&D Forum facilitates mutual understanding.

A local BF self-assessment for organisations has been developed and is being implemented to strengthen this work. Additional scrutiny provided by the ICS. The Case Review subgroup continues to identify good practice and areas for development.

The Safeguarding Forum in Nov 2021 ensured partners clarified their local work amongst a wide range of community organisation representatives. Further forum taking place in June. ICS is further developing the sub group chairs meeting to include pan Berkshire sub groups.

Pan Berkshire policy and procedures groups regularly update procedures which promote clarity relating to the roles and functions of partners. Further work has been identified to promote the policy and procedures.

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 subgroups. Work with all key partners has helped establish potential risks. This collaborative approach has strengthened problem solving and has supported the prioritisation of emerging risks. The risk register is shared as a standing item within each meeting of the Board. The register continues to be updated as a result of information received from all sources but particularly Partnership and Board meeting discussions. Risk and referral route awareness being developed by CEP and MOU group.

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

i. We will work with local partners to establish an understanding of 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 group is now being expanded as a result of collaboration with the newly appointed local authority community engagement manager. This work includes making safeguarding videos and promoting the voice of individuals.

The Board's Safeguarding Forum has been 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 and how to engage them.

The Safeguarding Forum in November promoted the need to understand safeguarding needs of all 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 Business Unit continues to work with community leaders and all partners through subgroups and the safeguarding partnership to identify safeguarding inequalities and to determine the needs of local community.

The CEP subgroup is working with local communities to produce safeguarding materials.

This action was promoted at the Safeguarding Forum.

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 has additionally helped to identify any necessary improvement.

The Transitional Safeguarding review will seek feedback from children and adults regarding their experiences and the CEP subgroup is working to promote the voice of carers.

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iv. We will require partners to work together in an all-age approach to improve communication of the safeguarding messages to the local community.

Work with community leaders to identify safeguarding inequalities to determine the needs of local community. One safeguarding awareness video has been produced. The Safeguarding Forum has been developed to enable on going 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.

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# **Bracknell Forest Safeguarding Board**

**Annual Report 2021/2022**