



HILLINGDON
LONDON



Social Care, Housing and Public Health Policy Overview Committee

Councillors on the Committee

Jane Palmer (Chairman)
Duncan Flynn (Vice-Chairman)
Judith Cooper
Alan Deville
Ian Edwards
Tony Eginton
Janet Gardner
Becky Haggar
Paula Rodrigues

Date: WEDNESDAY 26
SEPTEMBER 2018

Time: 7.00 PM

Venue: COMMITTEE ROOM 4 -
CIVIC CENTRE, HIGH
STREET, UXBRIDGE

**Meeting
Details:** Members of the Public and
Press are welcome to attend
this meeting

Published: Tuesday 18 September 2018

Contact: Anisha Teji
Tel: 01895 277655
Email: ateji@hillington.gov.uk

This Agenda is available on the Council's Intranet (Horizon) at:
<https://modgov.hillingdon.gov.uk/ieListMeetings.aspx?CId=324&Year=0>

Putting our residents first

Lloyd White
Head of Democratic Services
London Borough of Hillingdon,
Phase II, Civic Centre, High Street, Uxbridge, UB8 1UW
www.hillingdon.gov.uk

Useful information for residents and visitors

Travel and parking

Bus routes 427, U1, U3, U4 and U7 all stop at the Civic Centre. Uxbridge underground station, with the Piccadilly and Metropolitan lines, is a short walk away. Limited parking is available at the Civic Centre. For details on availability and how to book a parking space, please contact Democratic Services. Please enter from the Council's main reception where you will be directed to the Committee Room.

Accessibility

For accessibility options regarding this agenda please contact Democratic Services. For those hard of hearing an Induction Loop System is available for use in the various meeting rooms.

Attending, reporting and filming of meetings

For the public part of this meeting, residents and the media are welcomed to attend, and if they wish, report on it, broadcast, record or film proceedings as long as it does not disrupt proceedings. It is recommended to give advance notice to ensure any particular requirements can be met. The Council will provide a seating area for residents/public, an area for the media and high speed WiFi access to all attending. The officer shown on the front of this agenda should be contacted for further information and will be available at the meeting to assist if required. Kindly ensure all mobile or similar devices on silent mode.

Please note that the Council may also record or film this meeting and publish this online.

Emergency procedures

If there is a FIRE, you will hear a continuous alarm. Please follow the signs to the nearest FIRE EXIT and assemble on the Civic Centre forecourt. Lifts must not be used unless instructed by a Fire Marshal or Security Officer.

In the event of a SECURITY INCIDENT, follow instructions issued via the tannoy, a Fire Marshal or a Security Officer. Those unable to evacuate using the stairs, should make their way to the signed refuge locations.



Terms of Reference

The Following Terms of Reference are common to all Policy Overview Committees (referred to as “The overview role”):

1. To conduct reviews of policy, services or aspects of service which have either been referred by Cabinet, relate to the Cabinet Forward Plan, or have been chosen by the Committee according to the agreed criteria for selecting such reviews;
2. To monitor the performance of the Council services within their remit (including the management of finances and risk);
3. To comment on the proposed annual service and budget plans for the Council services within their remit before final approval by Cabinet and Council;
4. To consider the Forward Plan and comment as appropriate to the decision-maker on Key Decisions which relate to services within their remit (before they are taken by the Cabinet);
5. To review or scrutinise decisions made or actions taken by the Cabinet, a Cabinet Member, a Council Committee or an officer.
6. To make reports and recommendations to the Council, the Leader, the Cabinet, a Policy Overview Committee or any other Council Committee arising from the exercise of the preceding terms of reference.
7. In accordance with the Local Government and Public Involvement in Health Act 2007, to consider ‘Councillor Calls For Action’ (CCfA) submissions.

To perform the overview role outlined above in relation to the following matters:

1. Social care services for children, young persons and children with special needs
2. Oversee the Council’s Corporate Parenting responsibilities
3. Adoption and Fostering
4. Family Services
5. Adult Social Care
6. Older People’s Services
7. Care and support for people with physical disabilities, mental health problems and learning difficulties
8. Asylum Seekers
9. Local Authority Public Health services
10. Encouraging a fit and healthy lifestyle
11. Health Control Unit, Heathrow
12. Encouraging home ownership
13. Social and supported housing provision for local residents
14. Homelessness and housing needs
15. Home energy conservation
16. National Welfare and Benefits changes

Agenda

- 1** Apologies For Absence And To Report The Presence Of Any Substitute Members
- 2** Declarations Of Interest In Matters Coming Before This Meeting
- 3** To Receive The Minutes Of The Previous Meeting 1 - 4
- 4** To Confirm That The Items Of Business Marked As Part I Will Be Considered In Public And That The Items Marked As Part II Will Be Considered In Private
- 5** Review - Universal Credit And Other Welfare Benefit Changes 5 - 16
- 6** Hillingdon Local Safeguarding Children Board Annual Report, Safeguarding Adult Board Annual Report 17 - 94
- 7** Annual Complaint Report For Housing And Social Care Services For 1 April 2017 To 31 March 2018 95 - 126
- 8** Matters Requested To Be Raised By A Member Under Committee Standing Order No 18 127 - 128
- 9** Forward Plan 129 - 132
- 10** Multi Year Work Programme 133 - 136



Minutes

SOCIAL CARE, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE

30 July 2018

Meeting held at Committee Room 4 Civic Centre, High Street, Uxbridge

	<p>Committee Members Present: Councillors Jane Palmer (Chairman), Duncan Flynn (Vice-Chairman), Alan Deville, Ian Edwards, Janet Gardner, Becky Haggar, Nicola Brightman and John Morse</p> <p>LBH Officers Present: Mark Billings – Housing Manager, Rod Smith – Service Manager - Tenancy Services, Ana Popavici – Deputy Director Children's Services, Sandra Taylor - Assistant Director, Provider and Commissioned Care, Janice Altenor – Head of Service – Safeguarding and Quality Assurance, Peter Malewicz – Finance, Education & Children's Services Finance Manager and Anisha Teji – Democratic Services Officer</p>
13.	<p>APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS (<i>Agenda Item 1</i>)</p> <p>Apologies were received from Cllr Judith Cooper and Cllr Paula Rodrigues, with Cllr Nicola Brightman substituting.</p> <p>Apologies were also received from Cllr Tony Eginton, with Cllr John Morse substituting.</p>
14.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (<i>Agenda Item 2</i>)</p> <p>None.</p>
15.	<p>TO RECEIVE THE MINUTES OF THE PREVIOUS MEETING (<i>Agenda Item 3</i>)</p> <p>RESOLVED: That the minutes from the meeting on 13 June 2018 be confirmed as an accurate record, subject to clarifying that there was a national fund of £30 million for rough sleeping.</p>
16.	<p>TO CONFIRM THAT THE ITEMS OF BUSINESS MARKED AS PART I WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED AS PART II WILL BE CONSIDERED IN PRIVATE (<i>Agenda Item 4</i>)</p> <p>It was confirmed that there were no Part II items and that all business would therefore be conducted in public.</p>

17. **MAJOR REVIEW - UNIVERSAL CREDIT AND OTHER WELFARE BENEFIT CHANGES: LIKELY FAVOURABLE AND ADVERSE IMPACTS, RISKS AND LOCAL PARTNERSHIP RESPONSE** (*Agenda Item 5*)

Officers introduced the scoping report for the major review, entitled Universal Credit and other welfare benefit changes: likely favourable and adverse impacts, risks and local partnership response.

The Committee was informed that the review was concerned with understanding the current and likely impact of future of Universal Credit and other welfare reform changes on Hillingdon residents and organisations. It was hoped that some practical recommendations would be made from the review. The terms of reference were also highlighted to the Committee.

Members considered the scoping report to be a good start to the review. It was noted that mechanisms should be put in place before the changes went live in October/November 2018. Members were informed that mechanisms were actively being worked on and changes were introduced to ways of practice through a pilot scheme in postal areas HA5 and HA6.

Members were keen to hear from residents throughout the review as they were the people most affected by the changes and the best experts. Members also welcomed hearing from DWP representatives and hearing from similar local authorities that had already rolled out the changes. Officers told the Committee that Hounslow and Oxford were good examples and similar to Hillingdon in many ways. Risks were managed and there was a good working group in place to try to negate any risks.

Members discussed the changes and agreed that training for Members would also be helpful in completing forms and the changes in Universal Credit. Members agreed that it would be useful to consider the review from the situation at the beginning, to where changes were made, to the current situation.

Members' attention was drawn to two reports; the Department for Work and Pensions: Rolling Out Universal Credit and Carrying the debt from the National Federation of ALMOs. These reports were detailed and it was agreed that these would be sent to Members to read.

RESOLVED: Members agreed the report titles, scoping report and witness that would be required to enable the Committee to conduct its review.

18. **2019/20 BUDGET PLANNING REPORT FOR SERVICES WITHIN THE REMIT OF SOCIAL CARE, HOUSING & PUBLIC HEALTH POLICY OVERVIEW COMMITTEE** (*Agenda Item 6*)

Officers introduced the 2019/20 Budget planning report and provided an overview of the key highlights. The report provided a strategic context in which the detailed proposals were to be discussed at POC meetings in January 2019. The report provided a broader financial position of the Council.

Members questioned the cost of servicing the capital finance cost debt and the assumptions factored in for the interest rates. Officers confirmed that they would provide further information on this.

In response to Member questions regarding ball point figures of anticipated savings, officers explained that they were always looking to the future and considering new

initiatives that would deliver savings, such as the supported living programmes where investment in early intervention and other support could avoid more costly intervention at a later date.

RESOLVED: That the Committee noted the financial context in which the 2019/20 budget setting process would take place in advance of detailed savings proposals being developed and approved at Cabinet in December 2018.

19. **TACKLING CHILD SEXUAL EXPLOITATION IN HILLINGDON** (*Agenda Item 7*)

Officers introduced the report entitled "Tackling Child Sexual Exploitation in Hillingdon" and provided an overview of the key points.

The key points noted during discussions were that the position has strengthened since the 2015 strategy was introduced, focussing on prevention and support. There was a focus on the wider context of vulnerabilities and this had already been started in Hillingdon in comparison to other boroughs.

In response to Member questions, officers confirmed that there had been an improvement since the operational changes in terms of the police moving to three boroughs. It was helpful to have an overview of neighbouring boroughs.

Members thanked officers for the report and acknowledged the current situation. Members commented that there was clearly an improvement in the services which was demonstrated in the report.

RESOLVED:

That the Committee:

- (1) Recognised the ongoing commitment of Children Social Care and its partners to effectively intervene into the lives of those children who are sexually exploited.**
- (2) Continued to invest in Hillingdon's children to successfully prevent and intervene in Child Sexual Exploitation and other contextual risk factors (gangs and youth violence, county lines, human trafficking, modern slavery, etcetera).**

20. **LOOKED AFTER CHILDREN ANNUAL REPORT AND PERFORMANCE REPORT (JULY 2018)** (*Agenda Item 8*)

The Chairman commented that there had been an excellent Ofsted report for management in childrens services, there had been a huge difference in performance and this was largely down to officers. The Council was serving children better and the detailed report was a reflection of the services.

Officers introduced the report and provided an overview. Officers added that the service was responding proactively to changes and were aware of areas of concern and what action needed to be undertaken. Honesty was key and there was a relationship of trust around the table. It was noted that adults services were running homes for children. There was partnership working with adult services and this worked well.

In response to Member questions, further information would be provided in relation to the percentage of the total cost of Home Office grant and what the plans of actions

were in relation to areas of improvement. It was also noted that in relation to the recruitment of foster carers, recruitment was hard due to a number of circumstances such as gender siblings, space and a competitive market. A number of initiatives had been introduced to try to encourage new suitable people to sign up.

Members congratulated officers for their hard work and the improvements made. Members asked for the annual foster carer report to be included in the work programme.

RESOLVED: That the Committee noted the contents of the report and the role the Committee and all Members have in championing the corporate parenting ethos across the Council.

21. **FORWARD PLAN** (*Agenda Item 9*)

RESOLVED: That the Cabinet Forward Plan be noted.

22. **WORK PROGRAMME** (*Agenda Item 10*)

RESOLVED: That the work programme be noted.

The meeting, which commenced at 7.00 pm, closed at 8.01 pm.

These are the minutes of the above meeting. For more information on any of the resolutions please contact Anisha Teji on 01895 277655. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

REVIEW - FIRST WITNESS SESSION

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Anisha Teji, Democratic Services Officer
Papers with report	Universal Credit and other welfare benefit changes Paper for Witness Session One: Information and analysis Setting the scene: Understanding universal credit and the claimant journey
Ward	All

HEADLINES

As part of the Committee's review into how the Council can support residents through the transition to, and future successful management of, their Universal Credit (UC) claims, the following witness has been invited to present supporting information to the Committee.

Witness presenting evidence is:

Inderpal Mudhar – representative from the Department of Work and Pensions

RECOMMENDATIONS

That the Social Care, Housing and Public Health Policy Overview Committee notes and comments on the information presented as part of the witness session.

SUPPORTING INFORMATION

The agreed Terms of Reference for the review are set out below:

Terms of Reference

1. To understand the impact that the introduction of the full UC service has had in areas where it has been rolled out. To include the cumulative impact of the introduction of UC and other welfare benefit changes.
2. To understand the impact that UC, alongside other welfare benefit changes, is having and is expected to have on local residents in Hillingdon and on the income and costs of the Council, housing associations and other local organisations.
3. To examine how the Council services, housing associations and voluntary groups are supporting residents to transition to UC and manage their claims.
4. To make practical, prudent recommendations to Cabinet (and other bodies if applicable) from the Committee's findings to support residents transitioning to UC and to manage their claims.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee – 26 September 2018

Implications on related Council policies

A role of the Policy Overview Committees is to make recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Policy Overview Committees directly engage residents and external partners in the work they do.

Financial Implications

As set out in the appendix.

Legal Implications

As set out in the appendix.

BACKGROUND PAPERS

As set out in the appendix.

Appendix

Universal Credit and other welfare benefit changes Paper for Witness Session One: Information and analysis Setting the scene: Understanding universal credit and the claimant journey

1. This paper provides brief statistical information regarding households likely to be affected by the roll-out of Universal Credit (UC) in Hillingdon. It considers how UC works in practice and its likely impact, drawing on available information regarding others experience.

Current claimants

2. As at 12 September 2018, there were 30 UC claimants residing in Hillingdon Council Housing. These cases were part of the live service prior to new claims ceasing in December 2017 and are still current claims. Since the 'go live' date for the HA5 and HA6 postcodes on 4 July 2018, there have been 21 landlord verifications confirmed by Hillingdon Council to the Department for Work and Pensions (DWP). The main Full Service roll-out of UC for new claimants in Hillingdon is scheduled for 24 October 2018.

Future claimants

3. From 24 October 2018, all new claimants will claim UC rather than legacy benefits. They will not be able to make a claim for Housing Benefit unless they:
 - Have reached state pension age;
 - Have more than two children (unless they are reclaiming within 6 months of a previous UC claim - from February 2019 UC will accept claims from families with three or more children);
 - Are in exempt accommodation or temporary accommodation (they will need to claim UC but also Housing Benefit for their housing costs).
4. The number of welfare benefit claimants is constantly changing, however the current number of legacy benefit claimants gives an understanding of broad numbers of people likely to claim UC. The DWP produced the following estimates for the number of households yet to move to UC, by benefit group, by constituency in December 2017:

	Universal Credit	“Legacy” benefits	% on UC
Ruislip, Northwood and Pinner			
Housing (no. of households)	80	3,100	2%
Children (no. of households)	10	2,400	0%
Incapacity (no. of households)	10	1,400	0%
Unemployment (no. of people)	120	400	24%
Total households	240	4,400	5%
Uxbridge and South Ruislip			
Housing (no. of households)	120	4,900	% on UC
Children (no. of households)	30	4,100	2%
Incapacity (no. of households)	20	2,000	1%
Unemployment (no. of people)	160	400	1%
Total households	300	6,800	28%
Hayes and Harlington			
Housing (no. of households)	150	8,700	2%
Children (no. of households)	60	8,100	1%
Incapacity (no. of households)	10	2,800	0%
Unemployment (no. of people)	230	1,000	19%
Total households	440	12,300	3%

Notes: The Ruislip, Northwood and Pinner constituency extends into Harrow, the other constituencies are entirely within Hillingdon and have coterminous boundaries.

Data is taken from the House of Commons Library constituency data tool. This estimates the number of households claiming legacy benefits and tax credits by combining caseload data. One household can claim more than one benefit and some of the data relates to households and some to individuals. To compile the estimates, assumptions are made and figures rounded. These factors combine to mean that the totals are not a simple addition of the other figures.

Rolling out Universal Credit

5. Following on from a series of delays, UC's introduction is now moving at a faster pace. Around 50 job centres a month are converting to UC for all new claims and by the end of the year all new claims to working-age benefits are set to come via UC. The overall caseload will increase next year through the introduction of managed migration, however this will not be a rapid transition. It is not until 2020-21 that cases are expected to move at anything approaching scale and it is only by 2022-23 that all of the existing benefit cases are expected to have been migrated.

Components of Universal Credit and how it is paid

6. Universal Credit awards comprise a **standard allowance** with **additional amounts** for children, housing and other needs and circumstances such as childcare and caring. The actual amount a family receives will however depend on its income and savings. **Unearned income** – such as income from certain benefits, or an occupational pension – will usually reduce the maximum UC award on a pound for pound basis. **Earned income** – i.e. income from employment or self-employment – will reduce the UC award at a constant taper rate of 63 pence for each additional pound of net earnings.
7. UC is paid monthly in arrears and normally in a single payment. It is based on current income with monthly awards calculated on an ongoing basis. HMRC's Real Time Information allows DWP to automatically adjust the UC award if their wages change. UC is underpinned by a "conditionality" framework backed up by a sanctions regime for non-compliance.

UC and the Benefit Cap

8. UC claimants will have the Benefit Cap applied to their total benefit income. This differs from Housing Benefit (HB) where only HB is reduced by the Benefit Cap. There are exemptions to the cap for people who claim certain elements for example the carer's element of UC.

UC Full Service

9. UC 'Full Service' (UCFS) is the roll out of the full digital service to all new claimants. The claim is made online and the ongoing management of the claim is via the digital portal. All communication with DWP and Jobcentre Work Coaches will be through the claimants' online journal. Instructions and meetings will all be sent through the journal. Claimants will need to be online frequently in order to keep up with the ongoing claim requirements. UCFS will be affecting many more claimant groups who are less likely to be digitally confident.
10. DWP have provided Local Authorities with funding to commission Personal Budgeting Support (PBS) and Assisted Digital Support (ADS) for UC claimants.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 Sept 18

PBS helps claimants to manage their monthly benefits. ADS provides support with new online claims for UC and ensures that the claimant has the digital skills to maintain their claim on the digital portal.

11. The rate of transfer will depend on how frequently households have a change that triggers the move to UCFS. Examples of changes triggering a UCFS claim:
- Moving into work or out of work;
 - Going from full time to part time work or vice versa;
 - Becoming liable for rent for the first time;
 - Becoming responsible for a child for the first time;
 - Partner joining or leaving household;
 - Moving into new LA area;
 - Coming out of prison / hospital;
 - Taking on or stopping caring responsibilities.

Vulnerable residents

12. The DWP has discretion to alter the payment arrangements for claimants who are deemed to be vulnerable, for example those suffering from domestic abuse or those who have alcohol/ drug dependency. Registered Housing Providers also have the power to request alternative payment arrangements for their tenants, for example those with substantial rent arrears or those considered vulnerable.

The aims of UC and whether they are being met

13. The stated aim of Universal Credit (UC), for which there was widespread support, was to simplify the benefits system, make it more efficient and increase the incentives for people to work rather than stay on benefits. It began life intending to be more generous to most claimants than it is now. Budget cuts (particularly in the size of work allowances) and significant processing issues have eroded many of the gains from UC. The rigidity of the system's processes are reported to struggle with the fluid reality of people's lives, leading to stories of payment delays and financial hardship and resulting in a number of changes to UC.
14. A much publicised National Audit Office report in June 2018 criticised delays and the costs of implementation and concluded that UC has not delivered value for money. The report however considered that the Department [DWP] has now got a better grip of the programme in many areas and that there is no practical alternative but to continue with UC.
15. Also in June 2018 the DWP published the Full Business Case for the UC programme and a research report 'Understanding the impact of UC on the labour market'. The analysis claims a positive impact on the labour market however states that most of the labour market improvements are still to come. UC is expected to deliver improved labour market outcomes through:

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 Sept 18

- Removal of financial incentive barriers in the legacy system in which claimants faced losing money from taking up work or more work;
- Improved simplicity – UC is designed to help claimants understand their choices better. In many cases, the complexity of understanding the interactions of six legacy benefits meant that claimants were unaware of the choices available to them. UC’s design is a systematic solution to this problem, and also enables a smoother transition into work;
- Additional conditionality – more claimants will be brought into the labour market and will be supported to find work;

16. As UC has been rolled out the impact it is having on labour market participation has been compared to similar Jobseeker Allowance (JSA) claimants. This showed that UC claimants were on average 4 percentage points more likely to have been in work in the six months following the claim than their JSA counterparts. A survey of claimants also found that, in comparison to their JSA counterparts, UC claimants were undertaking higher levels of job search activity. The UC performance framework will continue to measure:

- People finding work quickly (earning in the 3rd month of claiming UC)
- Don’t want to leave people behind (reached 6th month of claim and have not yet had earnings)
- People to keep hold of their jobs (proportion of those in work that stay for at least 3 months)
- People to become more self-reliant (average earnings of those in work)

Cumulative impact

17. UC is one of a number of reforms to the welfare system since the Welfare Reform Act of 2012, which includes the under-occupancy rules for social housing, the Benefit Cap, reform of Local Housing Allowance for private rented properties, changes to Disability Living Allowance and Employment Support Allowance.

18. The combined and cumulative impact of these welfare reforms alongside the introduction of UC is difficult to monitor due to its complexity and the fact that individuals will have very different experiences based on their circumstances. However there are concerns that those with barriers to employment and vulnerable residents, in particular could be at risk of greater poverty and housing instability.

Homelessness

19. Tenants in the private sector are likely to suffer more from delayed and reduced payments of their housing costs than under the Housing Benefit system. The knock on effect is likely to be an increase in households facing the threat of eviction. It is also likely that the private rental market will become harder to access for people receiving Universal Credit. Private landlords have a long

history of resistance to offering housing to benefit claimants and an increase in arrears is likely to have a negative impact.

Others experience of UC

20. The National Federation of Arms Length Management Organisations (ALMOs) and the Association of Retained Council Housing (ARCH) have been undertaking and reporting joint surveys for the last 3 years looking at the impact of the roll-out of UC. 'Carrying the debt' reports figures as at 31 March 2018 and summarises findings from 38 organisations.

21. NFA and ARCH welcomed recent policy changes and were particularly pleased that the previous seven day waiting period had been removed so UC entitlement now starts on the first day of the application and that those already on Housing Benefit continue to receive their award for the first two weeks of their UC claim. They were also very supportive of the roll-out of Trusted Partner status and access to the Landlord Portal. The two trade bodies also want payments to be made in advance rather than in arrears to stop claimants slipping behind on rent in their first month.

Key Findings

- A significantly higher proportion of tenants claiming UC are in arrears (74%) compared to all households living in council and ALMO homes (26%)
- The average level of arrears per household for all tenants was £328, which is approximately 4 weeks rent. For households in receipt of UC, the national average level of arrears was around one and a half times higher at £520. This ranged from approximately 5-7 weeks' rent outside London, and 14 weeks' in London.
- The percentage of UC households in arrears decreased from 76% in 2017 to 72% in 2018. The average amount owed is very similar (£514 versus £523);
- On average, 25% of the total arrears debt was attributable to households on UC, even though they only made up 5% of total households.
- About 76% of UC claimants in arrears were recorded as having arrears before they moved onto UC; this is an increase from 60% last year.
- Only 29% of households on UC were subject to an Alternative Payment Arrangement where the rent is paid directly to the landlord, down from 41% in 2017 and 44% in 2016.

22. The key message from this years survey is the length of time it can take for tenants to clear the arrears built up in the transition to UC. Evidence from early adopters suggests that it can take between 18 and 24 months to repay the arrears created by the move to UC.

23. Feedback is also highlighting that the current UC system is a real problem for people on zero hours contracts, temporary or seasonal work. The current design of UC does not sit comfortably with the 'gig economy'.

Other council's actions to assist with UC

22. The following list is by no means exhaustive but provides some information regarding the type of responses taken by various local authorities in relation to UC. Their objectives include: protecting council income; preventing homelessness and mitigating the worst effects for vulnerable people.

- Making information available on their websites i.e. Locations of public computers and sources of IT support and work clubs, foodbanks, welfare rights, credit unions and budgeting advice;
- Ensuring officers involved in supporting UCFS customers have, or can access, expertise and decision making authority in at least the following areas:
 - Universal Credit claim & payment rules
 - Budgeting, money management and identifying priority payments
 - Debt resolution remedies
 - Housing Benefit
 - Council Tax Support
 - Housing Advice and homelessness prevention
 - Collection of Council rent, Council Tax and Housing Benefit overpayments;
- Ensuring links between budgeting support and assisted digital support providers to wider support to promote ongoing skills and employment support;
- Improving data sharing and communication between statutory and non-statutory agencies, landlords and the community and voluntary sector;
- Assisting vulnerable clients with online claims, taking client referrals from social services staff;
- Availability of Discretionary Payments for UC claimants who have housing costs included in their UC payments. Some councils also make available discretionary welfare provision i.e. small grants;
- Establishment of cross-service and cross-organisational working groups;
- Build and maintain relationships with private and social landlords;
- Comprehensive staff training. Training offered as required to support internal and external colleagues.

Looking ahead: Managed Migration

23. So far, all UC claims have been made by those who are newly entitled following a change in their circumstances. This 'natural migration' will continue, but will be supplemented from the middle of 2019 by the gradual transition of existing benefit recipients onto UC. This will include working families (with and without children,

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 Sept 18

with and without housing cost needs, and with and without disability) and Employment and Support Allowance (ESA) cases covering people who are unable to work due to long-term illness and disability.

24. Transitional Protection payments will be made to cover any reduction in entitlement associated with the managed migration forming part of the UC award. After migration, any increase in the claimant's earnings lowers their monthly UC payment (which includes their transitional protection). The protection comes to an end if the claimant's circumstances change in a significant way (such as falling out of work or a change in relationship status) and is reduced if there is a change to an element of UC (such as an additional child element or change in rent). Once reduced, the transition protection element cannot be increased and nor is it updated each year in line with inflation.
25. The onset of managed migration brings new risks to the implementation of UC. The legacy population includes complex cases, such as working families with children, that are not yet well established in the UC system and are more likely to fall foul of continuing procedural teething problems. Additionally some may have little or no relationship with DWP and may actively avoid one – such as single parents who may currently claim tax credit and Housing Benefit support but not DWP-administered benefits like income support or Jobseekers Allowance.
26. The Social Security Advisory Committee has consulted on government proposals for moving claimants to UC from other working age benefits. This consultation has now closed and the outcome is awaited.

Background Papers

Carrying the debt: measuring the impact of Universal Credit on tenants and landlords - survey results 2018, Association of retained council housing and National Federation of ALMOs, July 2018

http://www.almos.org.uk/news_docs.php?subtypeid=24

House of Commons Briefing Paper, Universal Credit roll-out: 2018-19

<https://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-8299>

National Audit Office Report: Rolling out Universal Credit, June 2018

<https://www.nao.org.uk/report/rolling-out-universal-credit/>

Understanding the impact of Universal Credit on the labour market, Ad hoc research report no. 64, DWP, June 2018

<https://www.gov.uk/government/publications/universal-credit-understanding-its-impact-on-the-labour-market>

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 Sept 18

Universal Credit Programme full business case summary, DWP, June 2018
<https://www.gov.uk/government/publications/universal-credit-programme-full-business-case-summary>

This page is intentionally left blank

HILLINGDON LOCAL SAFEGUARDING CHILDREN BOARD ANNUAL REPORT, SAFEGUARDING ADULT BOARD ANNUAL REPORT

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Andrea Nixon, Safeguarding and Quality Assurance
Papers with report	Hillingdon Local Safeguarding Children Board Annual report, Safeguarding Adult Board annual report
Ward	All

HEADLINES

The Hillingdon Local Safeguarding Children Board (HLSCB), and the Safeguarding Adult Board (SAB) has a statutory duty to publish an annual report on the effectiveness of child and adult safeguarding and promoting the welfare of children and adults in the Borough. Once agreed by the HLSCB and SAB, the reports are submitted each year to the Cabinet for consideration, along with the Chief Executive, the Leader of the Council and the Chairman of the Health and Wellbeing Board.

RECOMMENDATION

That the Committee notes the annual reports and agrees any comments to be included within the two safeguarding reports when they are presented to the Cabinet.

SUPPORTING INFORMATION

HLSCB:

The annual report lays out the work undertaken by the Board this year, and includes specific reports from each of the agencies that make up the Board. The purpose of the annual report is to provide evidence about the standard to which the agencies responsible for safeguarding children in the London Borough of Hillingdon have performed.

There will be significant changes to local safeguarding children boards over the next year, brought about by the Children and Social Work Act 2017. As a result Hillingdon will have new safeguarding arrangements overseen by the safeguarding partners who consist of the local Borough Police Commander, Chief Operating Officer of the Clinical Commissioning Group and the Chief Executive of the local authority.

The OFSTED inspection took place in Hillingdon in April 2018. This report has been slightly delayed to allow time for results of that OFSTED inspection to become public. The OFSTED inspection process provides the best evidence of the state of safeguarding in the borough. Whilst OFSTED only inspect children's social care, the work of partners supports their work and so the OFSTED inspection is a reflection of the state of play of safeguarding here in Hillingdon.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

The fantastic news is that OFSTED decided that Hillingdon is graded as 'good' with outstanding features in terms of Leadership.

SAB:

The annual report lays out the work undertaken by the Board this year, and includes specific reports from each of the agencies that make up the Board. The purpose of the annual report is to provide evidence about the standard to which the agencies responsible for safeguarding adults in the London Borough of Hillingdon have performed.

This year a joint LSCB and SAB conference was held in partnership with the CCG to highlight to professionals the importance of early recognition of the signs of Sepsis. This was very well attended by professionals from all fields and a second event is arranged for November this year. The SAB audit programme has progressed with a current audit looking at the journey of the vulnerable adult through Heathrow airport and the service they receive outside of the airport. There is also work currently looking at the Sect. 136 referrals. A spot audit was undertaken by CNWL which dispelled the myth that a lot of the Sect. 136's were from Heathrow.

We now have a training programme for professionals working with vulnerable adults. This can be accessed via learning zone.

The SAB have a proactive action plan for the coming year. Our priorities are Modern day Slavery, Domestic Abuse, Adult Grooming/Financial abuse and audit of current training. Progress on the action plan will be reported at each board meeting.

Implications on related Council policies

A role of the Policy Overview Committees is to make comments and/or recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

The work of the Boards seeks to improve outcomes for the Council's most vulnerable residents.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL



2017-
2018

LSCB ANNUAL REPORT



- @ lscb@hillington.gov.uk
- @ [@hillington_lscb](https://twitter.com/hillingdon_lscb)
- www.hillingdonlscb.org.uk

Andrea Nixon & Zeld Rowland
Local Safeguarding Children Board
2017-18

Contents

1.0 Foreword.....	Error! Bookmark not defined.
2.0 Hillingdon LSCB Governance & Accountability Arrangements	6
2.1 Future Safeguarding Arrangements.....	7
3.0 Hillingdon LSCB Structure Chart 2017-18.....	8
4.0 LSCB Task & Finish Groups	9
4.1 Risk & Vulnerability Task & Finish Group.....	9
4.2 Harmful Sexual Behaviour Task & Finish Group	9
5.0 LSCB Partner Members & Linked Strategic Boards	10
6.0 Local Demographics	11
7.0 Safeguarding Children Performance Data.....	12
8.0 LSCB Multi-Agency Audits	14
8.1 Joint Midwifery/Children's Services Audit	14
8.2 Joint UKBF/Children's Services Audit	14
8.3 Multi-Agency Neglect Audit	14
8.4 LSCB MASH Review Process	14
9.0 Safeguarding Children Training Program	16
9.1 Training Attendance & Impact upon Practice.....	16
9.2 Specialist Learning Events.....	17
9.3 Hillingdon LSCB Safeguarding Children Training Program Data	18
10.0 Hillingdon LSCB Partners' Achievements 2017-2018	19
10.1 London Borough of Hillingdon - Children's Services	19
10.2 Hillingdon Clinical Commissioning Group (CCG)	22
10.3 Metropolitan Police Service	25
10.4 Central & North West London NHS Foundation Trust (CNWL).....	26
10.5 The Hillingdon Hospital	28
10.6 London Borough of Hillingdon - Youth Offending Service	30
10.7 Prevent	31
10.8 London Borough of Hillingdon - Children's Rights & Participation Team	32
10.9 London Borough of Hillingdon - LADO & Schools Child Protection Lead	33
10.10 London Borough of Hillingdon - Early Intervention & Prevention Service	34
10.11 London Borough of Hillingdon - Domestic Abuse Steering Executive	37
10.12 Health Watch Hillingdon	39
10.13 Child Death Overview Panel (CDOP).....	41

11.0 Serious Case Reviews	42
11.1 Briefing Note for Practitioners & Managers - Operation Baker.....	42
12.0 Hillingdon LSCB Board Priorities 2018-2020	43
13.0 LSCB Good News Stories	44
14.0 Appendices	45
Appendix 1 - Glossary	45
Appendix 2 - Hillingdon LSCB Budget Summary 2017-2018	46
Appendix 3 - LSCB Annual Report Contribution Questions	46

1.0 Foreword: Independent Chair Steve Ashley



This annual report fulfils a statutory requirement that the safeguarding children board has, which is to produce a report providing a summary of the work undertaken by agencies and most importantly commenting on how well children in the borough are safeguarded.

This year is unusual for two reasons. Firstly, it is the last annual report of the safeguarding board in its current form. The changes to local

safeguarding children boards, brought about by the Children and Social Work Act 2017, will be implemented by this time next year. As a result Hillingdon will have new safeguarding arrangements.

This will be overseen by the safeguarding partners who consist of the local Borough Police Commander, Chief Operating Officer of the Clinical Commissioning Group and the Chief Executive of the local authority. Next year's report will be produced by the independent person who will have overseen the safeguarding arrangements and made sure they are fit for purpose and being effectively implemented.

The second reason concerns the OFSTED inspection that took place in Hillingdon in April 2018. This report has been slightly delayed to allow time for results of that OFSTED inspection to become public. The OFSTED inspection process provides the best evidence of the state of safeguarding in the borough. Whilst OFSTED only inspect children's social care, the work of partners supports their work and so the OFSTED inspection is a reflection of the state of play of safeguarding here in Hillingdon.

The fantastic news is that OFSTED decided that Hillingdon is graded as 'good' with outstanding features in terms of Leadership. "

"The willingness and curiosity to constantly learn from new ideas result in positive outcomes for children. Leaders have implemented actions quickly and effectively following external peer review and the Hillingdon Safeguarding Children Board diagnostic".

Source: OFSTED Inspection Report of London Borough of Hillingdon Council's Children's Services. Published 30th May 2018

It is difficult to express just how important this finding is. At a time when so many boroughs are being graded as inadequate, Hillingdon has shown that its children's services are providing the level of protection you would expect and in many areas is providing exceptional service. This result is a testament to all of those involved on the front line of child protection.

"Partners have a good understanding of thresholds when making referrals, and these are consistently applied for children in need of help and protection. Decisions are timely, with good evidence of management oversight."

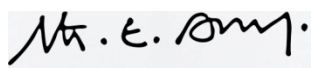
Source: OFSTED Inspection Report of London Borough of Hillingdon Council's Children's Services. Published 30th May 2018.

It also highlights the level of commitment by politicians, who have supported safeguarding both financially and with a passion and enthusiasm I have not seen elsewhere. I should also say that over the last two years, Tony Zaman, Corporate Director Adult, Children and Young People services and Anna Popovici, Deputy Director Children and Young People Services, have led from the front and supported and directed their staff to help them achieve this fantastic result.

Of course, the OFSTED report is only part of the picture. Safeguarding is a partnership business. The police have had a difficult year in terms of the work they have dealt with and the reorganisation of their resources. They have continued to ensure that safeguarding services are delivered. In fact, the new Commissioner has made it clear that safeguarding is a top priority for the Metropolitan Police and this is reflected in the work of all those officers who work in safeguarding across the borough. Equally, our health colleagues are prepared to engage with the partnership to ensure that everyone involved in health, from midwives and health visitors through to accident and emergency staff and school nurses, have safeguarding as a priority. There has been a real change in how those children with mental health issues are being helped. Whilst there is still much work to be done in this area there is a significant improvement in the offer that is being made by Children and Adolescent Mental Health Services (CAMHS).

As I have said this will be the final LSCB annual report. It has been a real pleasure being involved in safeguarding work over the last few years in this borough. We have seen significant improvements and whilst there is always more work to be done, I am pleased to say that there is evidence that safeguarding children is not only a priority for agencies, but is at a highly effective level.

I would like to thank all of those who are engaged in looking after and protecting our children, whether as a leader, front line worker or member of the third sector. Your work might often go unseen, but it is the most vital work there is; children after all are our future. Thank you.



Steve Ashley

Independent Chair

Hillingdon Local Safeguarding Children Board

2.0 Hillingdon LSCB Governance & Accountability

Hillingdon LSCB is comprised of statutory and voluntary partners. These include representatives from Health, Education, Children's Services, Police, Probation, Youth Offending Service and the Voluntary Sector.

Our main role is to co-ordinate what happens locally to protect and promote the welfare of children and young people in Hillingdon and to monitor the effectiveness of those arrangements to ensure better outcomes for children and young people. The efficacy of Hillingdon LSCB relies upon its ability to champion this safeguarding agenda through exercising an independent voice.

Our purpose is to ensure that all children and young people in our authority are protected from abuse and neglect. Children can only be safeguarded from harm if agencies work well together, follow guidance and procedures based on best practice and are well-informed and trained.

Safeguarding is action taken to ensure the safety and wellbeing of children to protect them from harm. Safeguarding means:

- Protecting children from abuse and maltreatment;
- Preventing harm to children's health or development;
- Ensuring children grow up in a safe and caring environment;
- Taking action to enable [all](#) children and young people to have the best possible outcomes.

Child protection is part of safeguarding. It focuses on protecting individual children identified as suffering or likely to suffer significant harm. All organisations working with children and families in Hillingdon provide support to ensure children are effectively safeguarded (doing the right things to make them safe).

Regulation 5 of the Local Safeguarding Board Regulations (2006) sets out the functions of the LSCB as per section 14 of the Children Act 2004.

2.1 Future Safeguarding Arrangements

The Children and Social Work Act (2017) received Royal Assent in April 2017. Chapter 2 of the Act, entitled 'Safeguarding of Children' will affect the Board in three ways:

- The establishment of a Child Safeguarding Practice Review Panel. This panel will replace the existing national panel that looks at serious case reviews and in essence, abolishes Serious Case Reviews as they currently work;

- Abolition of Local Safeguarding Children Boards;
- Changes to Child Death Overview Panels.

The Children & Social Work Act (2017) abolishes the statutory requirement for an LSCB and deals with safeguarding arrangements under section 16 - "Local arrangements for safeguarding and promoting welfare of children". This section states that:

"The safeguarding partners for a local authority area in England must make arrangements for—

(a) The safeguarding partners, and

(b) any relevant agencies that they consider appropriate,

to work together in exercising their functions, so far as the functions are exercised for the purpose of safeguarding and promoting the welfare of children in the area."

The safeguarding partners are clearly identified as:

- *"the local authority;*
- *a clinical commissioning group for an area any part of which falls within the local authority area;*
- *the chief officer of police for a police area any part of which falls within the local authority area."*

In terms of what this means in practice, the *Children & Social Work Act (2017)* firstly provides details on how the *"local arrangements"* are required to deal with local child safeguarding reviews. In a separate section, it provides some detail on how the safeguarding partners put in place *"local arrangements"*.

It states that local safeguarding partners must publish these arrangements. In terms of what the arrangements might look like, the only statutory requirements are:

- there must be arrangements for scrutiny by an independent person of the effectiveness of the arrangements;
- a requirement that all safeguarding partners and relevant agencies for the local authority area act in accordance with the arrangements;
- at least once in every 12 month period, the safeguarding partners must prepare and publish a report on what the safeguarding partners and relevant agencies for the local authority area have done as a result of the arrangements, and how effective the arrangements have been in practice.

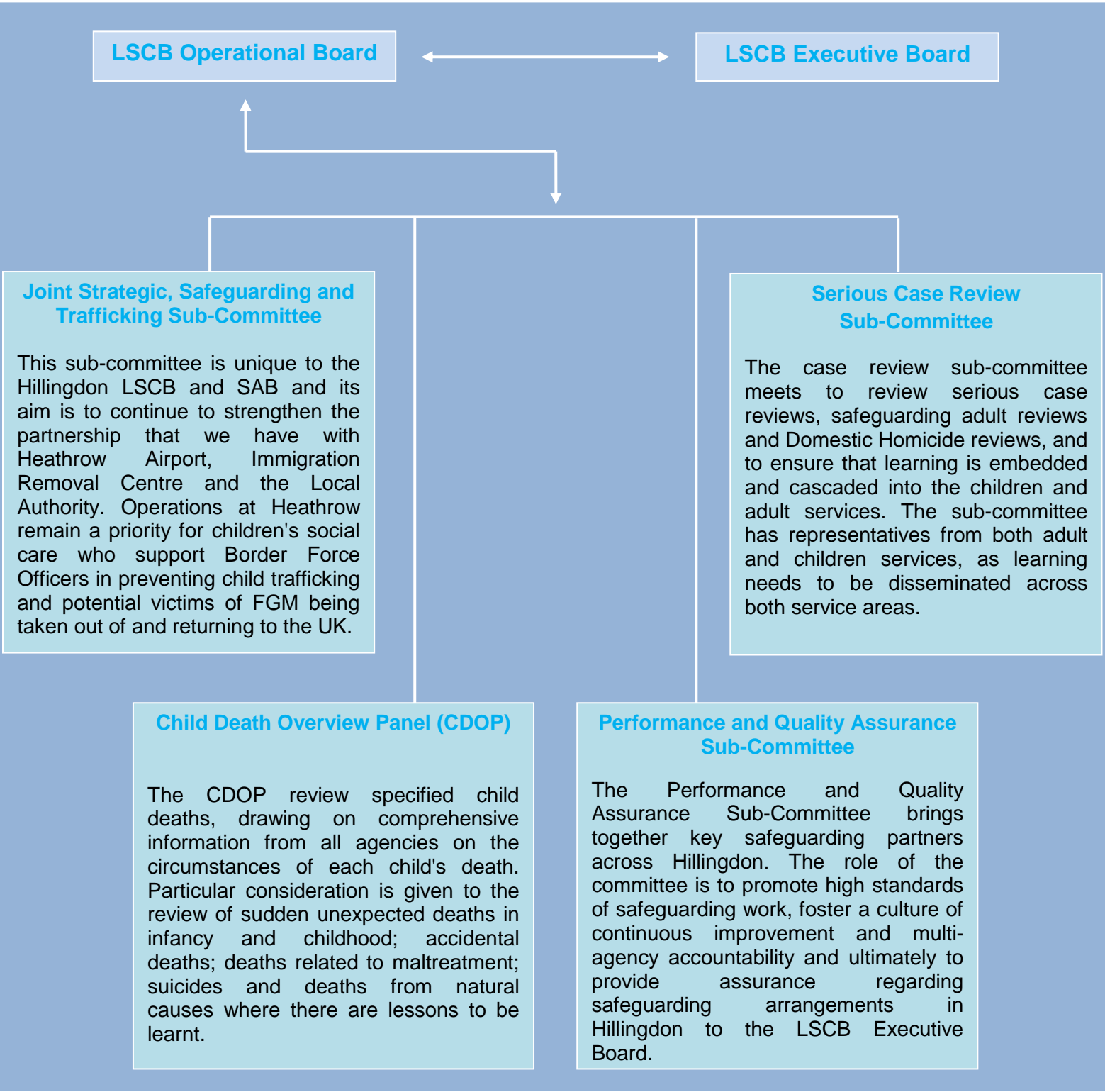
There are further statutory requirements regarding the provision of information by agencies, and the requirement to follow directives of the Secretary of State; but these are largely standard clauses.

The final two areas that the Children & Social Work Act (2017) covers are relevant. In terms of funding, the Act states:

"The safeguarding partners for a local authority area in England may make payments towards expenditure incurred in connection with arrangements: by making payments directly, or by contributing to a fund out of which the payments may be made."

The next step will be for the key partners to meet and agree how this will move forward in line with the new legislation.

3.0 Hillingdon LSCB Structure Chart 2017-18



LSCB Operational Board

LSCB Executive Board

Joint Strategic, Safeguarding and Trafficking Sub-Committee

This sub-committee is unique to the Hillingdon LSCB and SAB and its aim is to continue to strengthen the partnership that we have with Heathrow Airport, Immigration Removal Centre and the Local Authority. Operations at Heathrow remain a priority for children's social care who support Border Force Officers in preventing child trafficking and potential victims of FGM being taken out of and returning to the UK.

Serious Case Review Sub-Committee

The case review sub-committee meets to review serious case reviews, safeguarding adult reviews and Domestic Homicide reviews, and to ensure that learning is embedded and cascaded into the children and adult services. The sub-committee has representatives from both adult and children services, as learning needs to be disseminated across both service areas.

Child Death Overview Panel (CDOP)

The CDOP review specified child deaths, drawing on comprehensive information from all agencies on the circumstances of each child's death. Particular consideration is given to the review of sudden unexpected deaths in infancy and childhood; accidental deaths; deaths related to maltreatment; suicides and deaths from natural causes where there are lessons to be learnt.

Performance and Quality Assurance Sub-Committee

The Performance and Quality Assurance Sub-Committee brings together key safeguarding partners across Hillingdon. The role of the committee is to promote high standards of safeguarding work, foster a culture of continuous improvement and multi-agency accountability and ultimately to provide assurance regarding safeguarding arrangements in Hillingdon to the LSCB Executive Board.

4.0 LSCB Task & Finish Groups

The LSCB had two ongoing Task & Finish (T&F) Groups over 2017-18. These included:

4.1 Risk & Vulnerability Task & Finish Group

A Chair's Challenge was issued in mid-2017, asking agencies to outline the individual and multi-agency challenges of working to address Child Sexual Exploitation (CSE), Missing Children and Serious Youth Violence (SYV) in the borough. The Risk & Vulnerability T&F Group was set up in response to the findings of the Chair's Challenge, which indicated a clear need to work on bringing agencies together, but also - crucially - to develop a framework where these frequently inter-linked risk areas are considered and responded to holistically for each child, rather than directing services at CSE, Missing or SYV individually.

After a scoping exercise to understand the nature of these issues in Hillingdon and considerable work in reviewing the structures in place, the T&F Group drafted terms of reference for the new Vulnerable Young People Risk Management Group (VYPRMG). This panel meeting will -

- review all high and very high risk cases that come to the attention of safeguarding services in Hillingdon,
- review groups of children that may have been pulled into organised exploitation and/or crime;
- consider borough-wide intelligence around exploitation and organised crime involving children and develop multi-agency tactical responses (including disruption activities or joint operations with Police) beyond the scope of individual cases, to safeguard children and families in Hillingdon.

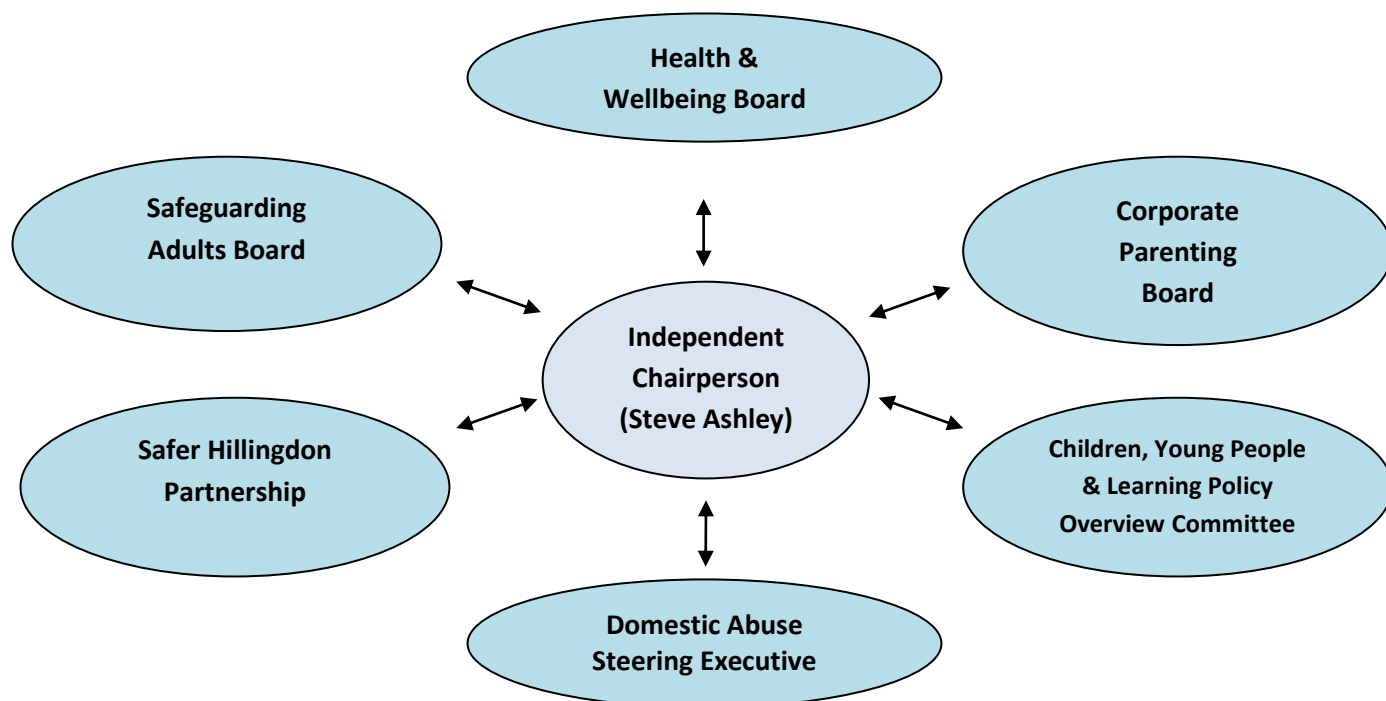
The new VYPRMG panel is due to meet for the first time in May 2018, incorporating and expanding upon the previous MASE model. The VYPRMG Panel has also be designed to be flexible in being able to review and respond to other safeguarding needs as they arise, for example the burgeoning area of Child Criminal Exploitation (CCE - also known as 'County Lines') going forward.

4.2 Harmful Sexual Behaviour Task & Finish Group

The LSCB has remained aware of the developing area of research and practice on Harmful Sexual Behaviour, and in late 2017, partner agencies completed the NSPCC Harmful Sexual Behaviour Audit Tool. This audit raised a number of areas of development, in terms of the borough's understanding of and response to Harmful Sexual Behaviour across multi-agency partners.

As a result of this audit, a data-gathering exercise is due to begin in May 2018. Partner agencies will collect specific data on the number of cases Harmful Sexual Behaviour identified in a three month period, to understand the scope of the issue in Hillingdon, with a view to considering current and future service provision in this safeguarding area.

5.0 LSCB Partner Members & Linked Strategic Boards



Hillingdon Safeguarding Adults Board:

The Safeguarding Adult Board is a statutory requirement for local authorities. Its focus is to ensure that adults, and especially vulnerable adults, are protected and partners work together to make sure this happens.

There are areas of overlap with the LSCB in areas such as Domestic Abuse, Modern Slavery and the Prevent agenda, for example, making it imperative that there are strong communication links between both Boards.

Hillingdon Domestic Abuse Steering Executive:

The domestic abuse executive board brings together statutory and non-statutory agencies in order to ensure that the Mayor of London strategy, 'Violence against Women and Girls' is implemented.

Safer Hillingdon Partnership:

The Community Safety Partnership Board is required by law to conduct and consult on an annual strategic assessment of crime, disorder and anti-social behaviour, substance misuse and re-offending within the borough. The findings are then used to produce the Safer Hillingdon Partnership's community safety plan.

Hillingdon Children, Young People & Learning Policy Overview Committee:

The Policy and Overview Committee provides scrutiny and challenge to the Board by elected members.

Hillingdon Health and Wellbeing Board:

The Health and Wellbeing Board is a statutory requirement for local authorities. The board brings together the NHS, the local authority and Health Watch to jointly plan how best to meet local health and care needs in order to improve the health and wellbeing of the local population, reduce health inequalities and commission services accordingly.

6.0 Local Demographics

The health and wellbeing of children in Hillingdon is mixed compared with the England average.

The level of child poverty is similar to the England average with 19.9% of children aged under 16 years living in poverty.

In Hillingdon, 43.1% of the 0 to 19 population are White British, 33.1% are from Asian or Asian British groups, 16.0% are from Black or Black British groups and 7.8% in mixed ethnic groups.

21.7% of the borough's population is under 16 years old.

(Source: Hillingdon Council website.)

There are over 80,000 children and young people aged 0-19 living in Hillingdon which represents 26.5% of the total population, compared with 24.5% in London as a whole. There are slightly more boys than girls at all ages, similar to the national picture. (Source: Joint Strategic Needs Assessment (JSNA) Children and Hillingdon Council website, Young People Demographics).

Hillingdon is situated in North West London and is the second largest borough of London's 33 boroughs.

Hillingdon sits on the outskirts of Greater London and is made up of 3 localities and 22 wards.

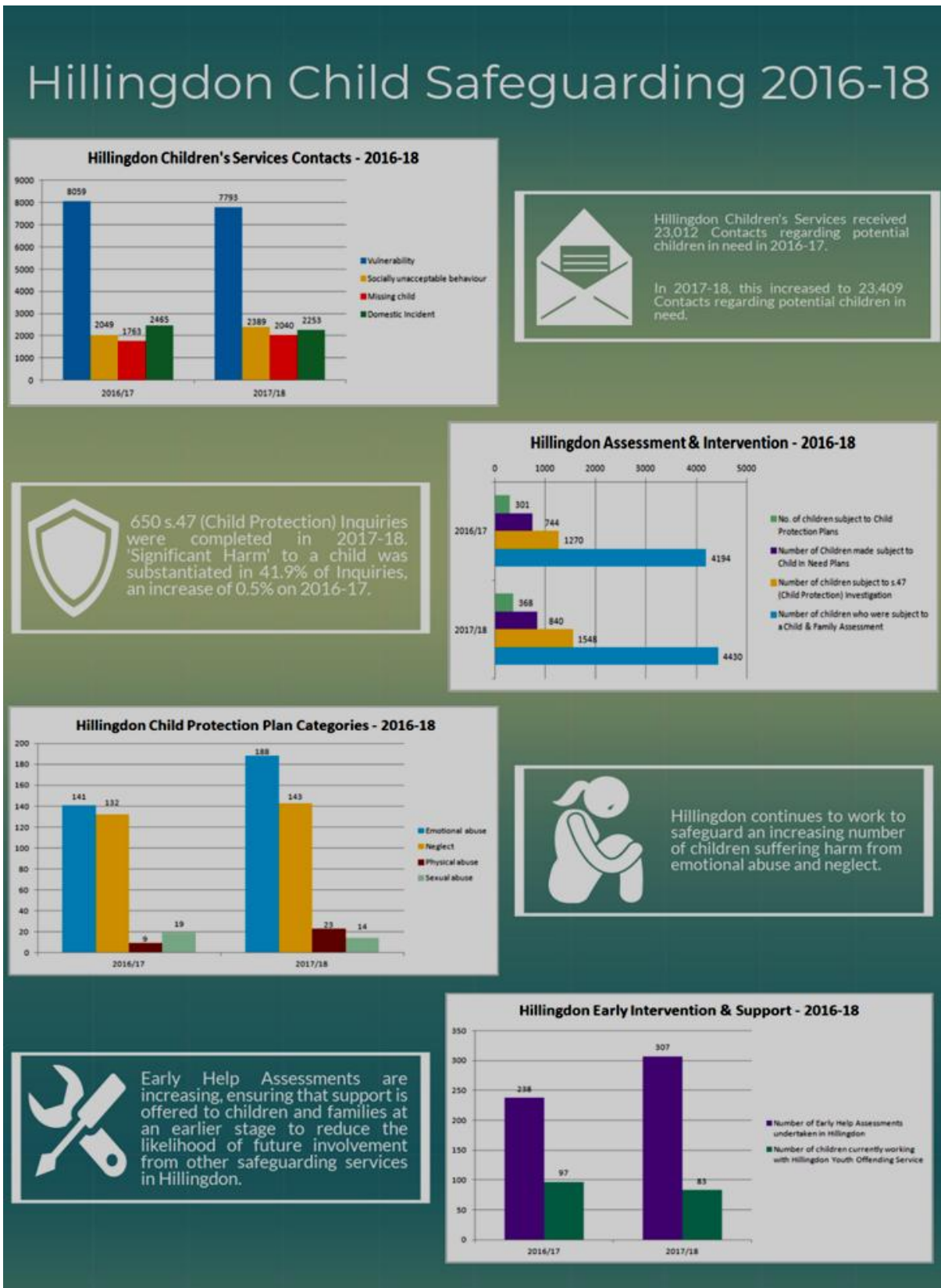
Hillingdon looked after 85 children who were seeking asylum in 2017.

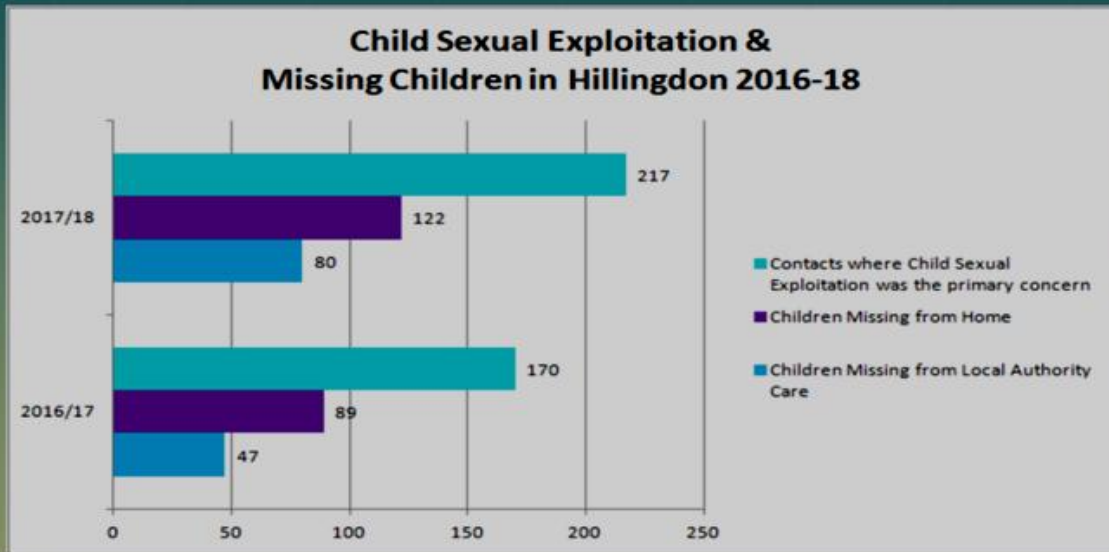
Croydon (390) was the only local authority to care for more children seeking asylum in the UK in 2017 in the greater London area.

The largest single group of children (23,073) in Hillingdon are aged between 0 and 4yrs. In 2016, this group of children made up a projected 7.6% of Hillingdon's total population and approximately 28% of all children in the borough.

(Note - projected statistics include 18-19yr old Hillingdon, residents in the same group as 15-17yr old children, which may mean that children aged 0-4 actually comprise a % of all children in Hillingdon).

7.0 Safeguarding Children Performance Data





Hillingdon Children's Services has devised a new 'Missing Policy' which contains active measures to support and safeguard children who go missing from home or local authority care, which may have contributed to the lower rate of combined total missing incidents in 2017-18.

Hillingdon LSCB has supported Children's Services and the multi-agency safeguarding partnership in developing the multi-agency Vulnerable Young People Risk management Group (VYPRMG) - a monthly 'tactical' group that has taken on the functions of the previous Multi-Agency Sexual Exploitation (MASE) Panel whilst also examining cases and intelligence trends regarding serious youth violence, missing children and children at risk of sexual exploitation.

The VYPRMG also has the capacity to respond directly to developing risks for young people by carrying out multi-agency investigative and disruption operations in conjunction with Police and safeguarding partners.

Looked After Children in Hillingdon

310 → 290 The number of children in the care of Hillingdon Children's Services dropped by approximately 6% in comparison to 2016-17.

86% → 91% The number of children in the care of Hillingdon Children's Services at the end of 2017-18 with an up-to-date health assessment increased approximately 5% on 2016-17.

35 → 39 Hillingdon is working to stabilise and reduce the number of children who experience multiple 'placement moves' whilst in local authority care. An increase was noted in 2017-18; Children's Services are working to ensure children do not move unless absolutely necessary.

10 → 17 Hillingdon has focused on the identification and support of children who are Privately Fostered. The number of children identified as Privately Fostered increased by 70% over 2017-18.

8.0 LSCB Multi-Agency Audits

The LSCB completed a range of multi-agency audits in 2017-18. These included:

8.1 Joint Midwifery/Children's Services Audit

This audit sought to understand the role of Community Midwifery within the Child Protection Case Conference process and identified areas where both Community Midwifery and Children's Services could work more effectively to ensure meaningful input into case conferences and that Child Protection Plans adequately reflect the role of midwifery in safeguarding unborn and newly-born children. This audit assisted Hillingdon CCG in developing a safeguarding midwifery team going forward.

8.2 Joint UKBF/Children's Services Audit

This audit sought to understand the journey of unaccompanied children from port of entry to local authority care, including some children who were suspected victims of trafficking. Both UKBF and Children's Services found this audit to be extremely useful in identifying process issues that may be impacting upon children, both at Heathrow Airport and in care; in particular issues that may lead to children being vulnerable to further exploitation once they came into local authority care. UKBF have made a number of changes to their processes at Heathrow on account of this audit, whilst Children's Services are currently developing a Modern Slavery protocol for their staff. A re-audit of this area is planned for summer 2018.

8.3 Multi-Agency Neglect Audit

This exercise was still in progress at the conclusion of 2017-18 and seeks to look at the multi-agency responses to children aged 8-16, where they have come to attention of safeguarding services primarily due to Neglect reasons. The audit seeks to understand how the multi-agency network has responded to these concerns over time, whether support and intervention has been timely enough and what action is being taken to ensure that opportunities are not missed to safeguard children.

8.4 LSCB MASH Review Process

As part of preparations for an anticipated OFSTED inspection (completed April 2018), the LSCB Quality Assurance & Training Officer undertook a wide-ranging review of Hillingdon's Multi-Agency Safeguarding Hub (MASH) Service between September and December 2017. This review process included:

- Completion of over 50 case audits;
- Examination and mapping of the entire MASH process with MASH staff;
- Review of the MASH Management model;
- Distribution of an online survey to all MASH staff of over 100 questions examining process, thresholds, outcomes and the experience of working in the MASH;

- Review of over 3000 pieces of data from the MASH 'Guardian' system to understand MASH thresholds, how partner agencies provide the MASH with safeguarding information and what this data indicated regarding safeguarding trends in Hillingdon;
- Qualitative discussions with a range of MASH staff members.

This process was integral in Children's Services re-appraising and re-organising aspects of the MASH, with the review process contributing to:

- a change in MASH management style (rotating MASH Manager to fixed MASH Manager);
- cessation of some inappropriate risk assessment processes, whilst highlighting strengths in other aspects of how the MASH triages and assesses safeguarding Notifications;
- developing an understanding of how and when the MASH has sought multi-agency information from the Guardian system from its safeguarding partners over its 3+ years of operation and what this means in terms of the threshold where MASH Managers decide whether or not to seek information from multi-agency partners on particular safeguarding concerns when they present (eg. domestic abuse, substance misuse, neglect);
- developing an understanding of how MASH workers feel invested in the MASH and understanding how they see their role in safeguarding children in Hillingdon;
- an understanding of the need to immediately resolve long standing ICT issues that have prevented partner agencies from using the Guardian system to directly share information and thus reduce delay and risk that may arise from not being able to share this information directly;
- the need to 're-launch' the MASH to re-involve satellite partners (those agencies who share information with the MASH but are based outside of the MASH Hub on a full-time basis) in the purpose of the MASH and thus strengthen multi-agency relationships;
- highlighting of the need for MASH workers to actively consider the issue of Consent on all safeguarding Notifications and actively challenge referring agencies when Consent may not have been properly addressed prior to a Notification being sent in to the MASH;
- highlighting the vast potential of the MASH and its Guardian system in developing a deeper understanding of safeguarding trends and issues within Hillingdon, which it could then share with partner agencies to ensure enhanced, coordinated responses to safeguarding on an operational and strategic levels.

The LSCB MASH Review was felt to be an integral part in assisting Children's Services in reorienting their MASH to meet safeguarding needs in Hillingdon, with the process being directly recognised within the recent OFSTED ILACS inspection.

9.0 Safeguarding Children Training Programme

The LSCB increased its ability in 2017-18 to quality assure the work of partner agencies, whilst also ensuring access to a varied, multi-agency safeguarding training for professionals in Hillingdon. This has been achieved via:

- An improved multi-agency auditing programme with active participation and support from partner agencies;
- An expanded multi-agency training programme that has sought to provide information and learning about a wider range of safeguarding issues, including developing areas of concern such as modern slavery and honour-based abuse;
- Conducting specialist learning events, such as the Sepsis Masterclass and s.175 Schools Audit Launch event;
- Continued development of multi-agency statistical measures such as the 'scorecard' developed by the Performance & Quality Subcommittee. This ever-developing document continues to gather a range of safeguarding indicators from partner agencies and seeks to understand and challenge trends and concerns that arise in safeguarding children within Hillingdon;
- Active Task & Finish (T&F) Groups - most notably in 2017-18 this included the Risk & Vulnerability and Harmful Sexual Behaviour T&F Groups, which had direct implications for safeguarding practice;
- Supporting partners by way of direct oversight, such as the LSCB MASH Review process, which had a direct influence upon safeguarding practice at the entry-point for children coming to the attention of Children's Services.

9.1 Training Attendance & Impact upon Practice

Over the 2017-2018 year, 1108 multi-agency places were made available to safeguarding professionals and members of the public in Hillingdon, leading to over 770 delegates accessing face-to-face training for the year, an increase of 119 persons trained in comparison to 2016-17. In addition to this, a further 330 E-Learning places were taken up in 2017-18.

The LSCB Multi-Agency Training Programme is self-sustaining on account of a modest-charging structure for delegates who are not part of a LSCB partner agency. This meant that in 2017-18, the LSCB was able to offer specialist awareness-raising training in emerging areas of safeguarding concern, such as Modern Slavery, Honour-Based Abuse (Violence), Forced Marriage and Female Genital Mutilation alongside other established multi-agency safeguarding courses. Feedback from these sessions in particular suggests that the LSCB has been effective in disseminating knowledge and developing expertise in areas that delegates have indicated they have received little or no previous training.

There are a range of measures across the training programme that have outlined its impact upon attendees, including -

- 93% of delegates left an LSCB course with at least a 'Good' level of knowledge about the subject area they had learned about, up from 48% prior to attending training;

- 85% of all delegates at LSCB courses left feeling at least 'Confident, need guidance in complex situations' in working with the subject area that they had learned about, up from 46% prior to attending training.

This suggests that LSCB courses had a considerable impact in boosting practitioner knowledge about safeguarding issues and confidence in working with safeguarding issues in the community.

9.2 Specialist Learning Events

The LSCB has conducted 2 specialist learning events in 2017-18:

- **Sepsis Masterclass** - Hillingdon Local Safeguarding Children's Board (LSCB) convened a Child Death Overview Panel (CDOP) meeting in late 2017, where a small number of children in Hillingdon were noted to have passed away either due to Sepsis, or where Sepsis was identified as a contributing factor to the child's death.

Given the severe implications Sepsis has for the health of all members of the community (particularly for young children and older adults) and the limited knowledge of the condition within the wider safeguarding network, preparations were made in partnership with Hillingdon Clinical Commissioning Group (CCG) to hold a Sepsis Masterclass. The aim of this masterclass event was to provide a local platform for medical practitioners (local and national), allied health professionals and those with personal experience of Sepsis to share their knowledge and expertise in identifying, responding and supporting service users who may be at risk of developing Sepsis.

This half-day learning event was convened on Tuesday, 30.01.2018 with 118 safeguarding and care professionals working with both children and adults in attendance. Over half of all delegates in attendance rated the range of speakers they experienced as 'Great' and a range of positive comments were received indicating that the mix of medical knowledge and a personal account of Sepsis (as relayed by the UK Sepsis Trust) led to a powerful day where awareness of Sepsis, its symptoms and how to address this condition was raised substantially. Planning is underway for an expanded, full-day event to further expand upon the 'Just think Sepsis' message in Hillingdon.

- **s.175 Schools Audit Launch Event** - The LSCB is due to administer the bi-annual s.175 Schools Audit in 2018. Therefore, a learning event was held in December 2017 to revisit the previous audit findings and framework, whilst also seeking feedback from the safeguarding community to develop a new s.175 audit tool for 2018. This day was also a considerable success, with over 50 teachers and delegates from education in Hillingdon in attendance. The s.175 audit is due to commence in May 2018.

9.3 Hillingdon LSCB Safeguarding Children Training Program Data

Course Title:	Total Attendees:	Total Places Offered:	%
Initial Working Together to Safeguard Children (Level 3)	282	283	99%
Refresher Working Together to Safeguard Children (Level 3)	142	200	71%
Early Help in Hillingdon	18	50	36%
Introduction to Child Sexual Exploitation: What do professionals need to know?	82	101	81%
Child Sexual Exploitation: A Trauma-Focused Approach	37	48	77%
Core Groups & Child Protection plans	29	75	39%
Domestic Abuse Awareness & Impact on Children & Young People	62	100	62%
Child Protection Case Conferences: A Signs of Safety Approach	33	50	66%
Missing Children from Home/Care	58	60	97%
True Honour: Female Genital Mutilation	42	50	99%
True Honour: Modern Slavery	39	50	99%
True Honour: Honour-Based Violence/Abuse	40	50	99%
True Honour: Forced Marriage	43	50	99%
Direct Delivery Training Sub-Total:	907	1167	78%
Introduction to Safeguarding eLearning	314	--	--
Refresher Safeguarding Children eLearning	8	--	--
Early Help Assessment & Team Around the Family eLearning	13	--	--
E-Learning Subtotal:	335	--	--
Grand Total - Training Places Accessed:	1242		

10.0 Hillingdon LSCB Partners' Achievements 2017-2018

10.1 London Borough of Hillingdon - Children's Services

This has been an eventful year for Hillingdon Children's Services Department. In December 2017, we invited peer reviewers from the Local Government Association (LGA) to provide us with a candid view of the services we provide for children and their families. The feedback overall was positive. They concluded that Hillingdon social workers use a strength-based model of practice; children are kept at the centre of decision-making, with good examples of child-centred practice. They commented on the high level of commitment from staff that will 'go the extra mile' to do the right thing regarding children and their families. In the majority of cases reviewed, children were deemed to be receiving the right service at the right time. Areas for improvement were those already identified and referenced in our self-evaluation as being actively worked on. The review provided affirmation that our self-evaluation of the services we provide was correct and that our improvement journey was on an upward trajectory.

In April 2018, Hillingdon was the first London Borough to be inspected under the Inspection of Local Authority Children's Services framework (ILACS). We received grades of 'Good' across all areas and 'Outstanding' for leadership. This Inspection reflected the significant improvement in services for children that has been achieved since the previous OFSTED inspection in 2013. It found evidence of a shared determination to improve outcomes for children, services of consistently high quality, delivered by committed and highly motivated staff. This was observed in practice from first contact with children and families in early help and the MASH, through to child protection, child in need, looked after children's services, leaving care and safeguarding services. The inspection findings indicated that children's needs are promptly assessed and that reports are comprehensive and of good quality. They provide clear analysis of risks to children and are regularly updated to reflect changes in children's circumstances.

The inspection also found -

- evidence of a child-centred approach with good direct work with children and young people, using evidence based approaches and tools;
- Children being at the centre of practice was also found to be evident in strategic and operational decision-making;
- Children's Services' audit process was deemed effective in identifying standards and trends within practice and evidenced that in the majority of cases, children were provided with the right response at the right time. Audit findings are linked to service development and practice improvement. Themed audits enable the service to focus on specific aspects of practice and learning is cascaded to the social work practitioners through a weekly practice newsletter from the Principal Social Worker.
- Training needs are identified and responded to for the whole children's workforce and individual practice support is delivered by the Practice Improvement Practitioner, as a commissioned service from the Safeguarding & Quality Assurance Team. This year has seen

social workers trained in the strength based Signs of Safety approach and the neglect assessment tool, Graded Care Profile 2.

- Effective partnership working is seen as a strength and there is a clear understanding of thresholds for intervention.
- The impact of senior leadership was commended and deemed 'Outstanding'. OFSTED Inspectors found that this has been integral to maintaining a highly motivated workforce with a shared determination and commitment to improve outcomes for children. They found that leaders knew their services well and were already aware of and acting on the small number of weaker aspects of the service, noted by inspectors.

10.1.1 Future Safeguarding Initiatives

The plan for the next 12 months is to continue to build on and further develop the improvements that have already taken place. Key areas are those identified by the inspection. These are:

- Improve the quality of strategy discussions to ensure that partner information is included to inform decision making;
- Improve the timeliness and quality of return home interviews when children are missing from care or home;
- Ensure that children in care understand their rights to complain and have independent advocacy;
- Improve timely and effective permanency plans for all children including those who live in long-term foster placements.

The responses below demonstrate the value of having a consistent, motivated and skilled workforce:

- *'I would like to say thank you for always being supportive, even when I feel like I can't do it.'*
- *'You always are encouraging me, not putting me down. You constantly check in with me to make sure I am doing OK, not only academically as well as physically and emotionally''.*
- *'For me as a young person the most important support that I received from M is how she behaves with me like an adorable friend. I went through lots of hard time last year and she tried her best to calm me down and remind me I'm strong and I can do it. She's given me self confidence when I really needed it.'*

10.1.2 Looked After Children, Care Leavers and Asylum-Seeking Children

The Children and Social Work Act 2017 has extended local authority responsibilities for the population of looked after children who leave care to the age of 25 years. The leaving care service

has already implemented a strategy in response to this and contact has been made with those young people who have been identified as being eligible for a service.

The OFSTED inspection highlighted this proactive response as an area of strength. It is acknowledged that we need to improve our permanency plans for children, particularly those in long term foster care. Work is underway to review a number of cases of children who became looked after during a set period. It will focus on why they came into care, the impact of social care intervention prior to and whilst being looked after and the exit strategy for young people leaving care. This will assist in identifying how effective our care planning is in this area and inform what improvements are required, as well as reinforcing what works well.

As a port authority, we are uniquely positioned to encounter a higher level of unaccompanied asylum seeking children. We meet with UK Border Force for strategic meetings related to safeguarding children that enter the UK via Heathrow. A joint audit is planned between Children's Services and UK Border Force to measure the effectiveness of the safeguarding procedures, which will focus on the child's journey from landing, through to becoming looked after.

Work has commenced on developing safeguarding protocols between UK Border Force and children's Out of Hours Service. This will ensure that referrals are screened appropriately and children are not kept at the airport for unnecessarily long periods. In addition, there is a review of our Out of Hours Service, with more flexible working arrangements being introduced to ensure that the response to children requiring a service is more robust and transitioned more effectively to the day teams.

Contextual safeguarding is an approach that has been devised to recognise the abuse and harm that can be suffered by young people beyond their families. It recognises that this can occur within the context of a neighbourhood, in schools and online and that the influences experienced by children and young people often undermine parental and carer relationships.

In response to these issues, we need to consider child protection in the wider context from both a strategic and operational perspective. The multi-agency Vulnerable Young People's Risk Management Group commenced in June 2018. The group meets monthly and provides a strategic focus and overview of children and young people who are deemed high risk by their associations or actions linked to child sexual exploitation, drugs (including county lines), radicalisation (including far right views), sexually harmful behaviour and missing episodes. Emerging themes and trends will be shared and analysed with partner agencies to form a profile of the borough. This will inform strategic plans for interventions to reduce risks.

A newly commissioned children's advocacy service will improve the quality and analysis of our return home interviews following children's missing episodes. Improving the frequency and quality of strategy meetings involving key agencies will also enable a greater understanding of risks and shared responsibilities. This will inform how we need to tailor services to ensure that vulnerability is reduced and children are adequately safeguarding when required.

10.1.3 OFSTED ILACS Inspection 2018

Following the successful outcome of our OFSTED inspection, Hillingdon has been approached by a number of other local authorities to provide advice on preparation for their inspections. OFSTED

have also returned, having asked us to host a focus group where they obtained feedback on the ILACS framework from practitioners across the service.

During the inspection, OFSTED inspectors met with a group of our young people who were representatives of our Children in Care Council. One young person put forward a challenge, by asking the inspectors why they were not meeting more young people. Following the inspection, OFSTED wrote to the young people, describing them as an impressive group of young people and saying how much they enjoyed hearing about the work of the groups. The inspectors thanked them for sharing their views and experiences and said that this had helped them to understand what is working well and what needs to improve. We have since established that OFSTED are requesting to meet children and young people from other children in care councils as part of their inspection methodology.

Please click the link below to access Hillingdon Council's OFSTED ILACS Inspection report:

https://reports.ofsted.gov.uk/sites/default/files/documents/local_authority_reports/hillingdon/070_%20Hillingdon_Inspection%20of%20local%20authority%20childrens%20services.pdf

10.2 Hillingdon Clinical Commissioning Group (CCG)

NHS Hillingdon Clinical Commissioning Group (CCG) is a statutory NHS body with a range of statutory responsibilities, including safeguarding children and adults. Like all CCGs, it is a membership organisation that brings together general practices to commission local health services for Hillingdon's registered and unregistered population. One of the advantages of being a clinically-led organisation is that the CCG is in the unique position of being able to take account of the experience of patients who are best placed as service users, to know the right services for the area and can comment objectively when new services are commissioned.

The CCG ensures that safeguarding is included in all contracts of the services from which it commissions NHS services and requires and obtains assurance from all provider organisations that they are meeting safeguarding requirements. This is interrogated through its contracting arrangements and is monitored at monthly contract, quality and risk meetings.

Safeguarding training for all CCG staff is monitored as part of the Brent, Harrow and Hillingdon (BHH) Mandatory training arrangements.

- The CCG's Safeguarding Leads are compliant at the required Safeguarding Children training level (Named GP at 4; Designated Nurse and doctor at Levels 4 and 5).
- The Named GP has delivered Level 2 training to CCG staff as well as GPs and Practice staff.

10.2.1 Regulatory Inspection

Following the joint Hillingdon inspection (2016-17) by CQC and OFSTED for Children and Young People with Special Education Needs and Disability (SEND), as set out in the Children and Families Act 2014, a Designated Clinical Officer (DCO) is now in place to complement the SEND Designated Medical Officer (DMO). The CCG regularly reviews and monitors Safeguarding Children activities of its Provider organisations and will interrogate and review any gaps.

10.2.2 Challenges in the Reporting Period

Child Protection Information System (CP-IS) has proved to be challenging for unscheduled care providers. However, with regular meetings with the Designated Nurse and the NHS London Digital lead, these issues have been resolved and all unscheduled care providers are now compliant by having the required systems and processes in place.

Child Sexual Abuse (CSA) Hub – following a commissioned Review (by NHS England) plans (led by Hillingdon CCG) are now in place to make a North West London CSA Hub a reality in the next financial year.

10.2.3 Progress on Safeguarding Priorities in the Reporting Period

- All Provider Trusts are organising or have systems and processes in place for Safeguarding Supervision for relevant staff (e.g. Policies and guidelines, training). Safeguarding Children training has been updated and includes Child Sexual exploitation (CSE); Female Genital Mutilation (FGM) and PREVENT and Domestic Abuse.
- All relevant members are encouraged to attend training, provided by the Local Safeguarding Children Board (LSCB), at the level that is suitable for their role. We continue to encourage recording and reporting of Interventions with victims of Domestic Violence and Abuse and like training, this is reported in the quarterly Safeguarding (Children) Health Outcomes Framework (SHOF).
- Safeguarding Children profile continues to be raised within the CCG and all relevant management and quality meetings. The CCG is represented on the LSCB (executive and operational) and LSCB subgroups, key pan-Hillingdon groups as well as relevant patch, regional, pan-London and national groups.

10.2.4 Safeguarding Priorities for 2017/18

- Safeguarding Training – maintain and update single and multi-agency training (including specific training for Commissioners).
- Engagement of all Primary Care staff;
- Reinforce recording and reporting of interventions with victims of Domestic Violence and Abuse, CSE and FGM;
- Continue to seek assurance from provider organisations regarding safeguarding requirements, arrangements and priorities (e.g. Section 11 arrangements) and those set by the LSCB;
- Compliance with the national changes of the functions and duties of CDOPs and LSCBs;
- Continue to work towards the delivery of a North West London CSA/CSE Hub services for local children.

10.2.5 Good News Stories

- Domestic Homicide Review Learning event was well-attended by our Safeguarding NHSE representative, some of our GP Safeguarding leads and Practice staff;
- A successful Sepsis Masterclass (learning from our Child Death Overview Process) with national and local speakers including the Sepsis Trust, Child Death Overview Process Lead, our acute Hospital and Local Primary Care lead GP for Education;
- Increased and improved contact from Primary Care regarding all aspects of Safeguarding Children, including the impact of Domestic Violence and Abuse;
- Child Sexual Abuse (CSA) Hub plans are being progressed;
- Increased compliance with CP-IS from all of our unscheduled care providers;
- The CCG pilot of a paediatric community integrated clinic (in Hayes & Harlington), where a local consultant paediatrician works alongside a local GP to see children in the community as oppose to referring them to the hospital. All GPs across the borough can refer children to this clinic. The success of this 'Pilot' is leading to further clinics in the middle and north of the borough.
- Investment in the increase in paediatric consultants at the Hospital continues to meet the waiting times at the Paediatric A&E.

10.2.6 Good Practice Examples

- Better communication links with GPs and Practice Staff – the Designated Nurse attends GP Practice meetings as requested.
- Visits to GP Practices to discuss safeguarding needs/gaps are well-received;
- We have established a safeguarding meeting/supervision forum for Safeguarding GP Leads and relevant Practice staff;
- Safeguarding and Early Help Referral forms and a Case Protection Conference Report template are now accessible to GPs via their electronic recording system;
- Successful monitoring of provider participation and completion of the DHRs and SCRs Action Plans;
- Relevant safeguarding children information continues to be cascaded to staff via CCG newsletter;
- Safeguarding children is now a standing agenda item at all Contract Quality Monitoring and Quality, Safety and Clinical Risk meetings;
- Safeguarding (requirements and assurance) is being included in all contracts.

10.3 Metropolitan Police Service

The Metropolitan Police Service have policies in relation to regular supervision of investigations; additional reviews conducted on more serious investigations such as rapes and GBHs which include the requisite timeframes and rank to conduct those reviews. Additionally, we have daily Pacesetter meetings where all crimes of risk are discussed and these meetings are normally chaired at CASO (Child Abuse & Sexual Offences Command) Detective Superintendent level. Metropolitan Police Policy also covers Police Protection and defines the Designated Officer as the CAIT DI who has oversight and responsibility for the Police Protection. Additionally, we have other measures in place through the hierarchy of supervision, which manage the risk where we have outstanding offenders.

The Metropolitan Police Service is entering a period of significant change, which includes a restructure of Territorial Policing. CASO (and therefore CAIT teams) will not exist under the new model and it is anticipated that this will come into effect in approximately October 2018. The officers who currently work in Child Abuse Investigation Teams and the work itself, will fall under the responsibility of the new BCUs (Basic Command Units).

The Safeguarding Lead for the new West Area BCU, which will include the London Borough of Hillingdon, is Detective Superintendent Robert Mahoney. Under the new Safeguarding model, there will be closer working between CAIT, CSU and Sapphire staff.

10.4 CNWL NHS Foundation Trust

CNWL provide assurance on Leadership and Workforce, Training, Safeguarding Children Supervision, Partnership Working, Wider issues and Vulnerable Groups, Adult Issues and Early Help, Learning from incidents and staffing to the CCG every quarter. Safeguarding children is a standing agenda item on all levels of board meetings.

Safeguarding updates are communicated to staff via the Trust's Weekly Bulletin, which is circulated to all employees. There is a designated safeguarding section within the Trust's intranet site, which is regularly updated with any new developments and guidance pertinent to safeguarding. Where Trust employees attend LSCB subgroups, relevant information is cascaded to the wider services, contributing to increased frontline knowledge and awareness. This is evidenced in the number of calls to safeguarding children leads in the Trust seeking advice about a child.

10.4.1 Safeguarding Learning Methods

Learning from safeguarding children cases is shared in a variety of ways:

- Bespoke CNWL face to face learning sessions;
- Shared multi-agency learning;
- Briefings via email and Trustnet;
- Inclusion of learning in Safeguarding Children Training.

10.4.2 Integration of Learning into Practice

- In Hillingdon, learning from relevant SCRs outside of CNWL is shared via the Children Service Leads monthly meeting or during group CP supervision sessions;
- CNWL is represented at MARAC and MASE meetings, where we have a system of sharing relevant information from the meeting with key health professionals. This results in targeted work with these vulnerable children and young people;
- Safeguarding children supervision for Community Health Services in Hillingdon is provided on a one to one basis for health visitors and school nurses every 12 weeks, as a minimum. The compliance rate for safeguarding children supervision is consistently over 90%. High quality supervision is the cornerstone of effective safeguarding of children and young people and CNWL rightly prioritises releasing staff from clinical duties to attend their supervision sessions;
- The impact of this commitment is that supervisors are aware of cases that require escalation in good time and can effectively support staff with the process.
- CNWL adult mental health services line managers are expected to discuss safeguarding as part of their monthly supervision. Additionally, the Safeguarding Children Team facilitates

group supervision sessions on a three monthly basis, where the focus is on safeguarding children topics. CNWL provide safeguarding children supervision to staff working in substance use settings and offender care.

- Compliance with all levels of safeguarding children training is consistently over 95%. CNWL clinical staff are trained to level 3 and the course delivered incorporates a wide variety of topics including FGM, CSE and modern slavery;
- Domestic Abuse training is included in all CNWL mandatory Safeguarding Children and Adult training;
- CNWL contributed to two multi-agency audits for the LSCB - MASH and neglect. CNWL community staff completed two audits - evaluation of safeguarding children supervision and record quality of children subject to child protection plans. There were no recommendations from either of those audits as the practice standards were met;
- CNWL continue to work with 'Standing Together' (specialist voluntary sector domestic abuse service) to provide additional in-house domestic abuse training throughout mental health services in the Trust. Currently, over 45 services have been trained. Training will be available until at least March 2018, when funding for the Standing Together mental health worker will be reviewed. In order for training to be sustainable, there is a plan for CNWL safeguarding leads/champions to complete "train the trainer" sessions to facilitate this programme in future. Standing Together are also in the process of liaising specifically with Improving Access to Psychological Therapies (IAPT) services around what support might be of benefit with regard to domestic abuse, with a view to seeking external funding for this work.

10.4.3 Future Safeguarding Initiatives

- The CNWL Domestic Abuse Policy has recently been ratified. This includes clear guidance around 'routine enquiry' – when every woman entering CNWL services will be asked about their experiences of domestic abuse. There will be a number of workshops/briefings throughout the Trust leading up to a launch event later in the year for this policy (learning event);
- CNWL Hillingdon Crisis Team - The three hub model for the Crisis Team was established. The savings from the New Models of Care Project were invested in additional clinicians, to add to existing staffing numbers to continue to build the 24/7 crisis pathway across North West London. This team supports young people and their families for intensive short spaces of time, to avoid the need for hospital admission or to support early discharge. The 3 clinical leads for the hubs have been identified, and are being supported through additional NHSE monies to facilitate quick start-up of the service. A launch for the CNWL service is planned for April 2018.

10.5 The Hillingdon Hospital

10.5.1 Enhanced Safeguarding Awareness

There has been an increase in staff knowledge and awareness of safeguarding/child protection risks which can be evidenced via:

- Audit of Interagency Referral (IAR) forms;
- An increased number of referrals to Children's Services;
- All referrals to Children's Services are reviewed by the safeguarding team and feedback given to staff. This has resulted in an improvement in quality of information shared with Children's Services;
- Fewer incidents of missed referrals to Children's Services and other relevant agencies.

There has been increased awareness that 16-17 year olds being cared for in adult areas should receive safe and effective care in accordance with statutory guidance. This can be evidenced via:

- Safeguarding Children Training Level 1 to 3 includes the welfare of 16 and 17 year olds;
- The Children and Young People's Board at the Trust is working to improve the care given to the young people. This board is chaired by an Executive Board Member for the Trust;
- Alerts are sent to the safeguarding children team regarding all 16 and 17 year olds admitted as an inpatient.

10.5.2 Safeguarding Learning Responses & Planning

Learning from audits and serious case reviews continues to improve care for children and their families.

- Following Serious Case Review Baby W and a LSCB Audit, the Trust has expanded the midwifery team and there has been an introduction of the Topaz Complex Needs Team. Topaz will care for women with complex needs from the antenatal to the postnatal stage;
- There has been an appointment of a part time Named Midwife for Safeguarding Children.

Plans for the next 12 months to maintain or improve safeguarding practice:

- Improve the care of 16-17 year olds within the organisation by ensuring in their discharge of duties, that staff safeguard and promote their welfare. There is work underway looking at the transition of children from paediatrics to adult services;
- To fully implement safeguarding children supervision in practice;

- Work with partner agencies to review and improve the care of children and young people presenting Mental Health and related needs;
- To fully implement the NHS England Female Genital Mutilation Information Sharing system. This system aims at alerting GPs of pregnant/postnatal women who have suffered FGM and are expecting a female infant.

10.6 London Borough of Hillingdon - Youth Offending Service

The Youth Offending Service is in on a journey of continuous improvement. There is evidence of good joint working with social care colleagues on shared cases, as noted by OFSTED in their recent report. All practitioner staff have completed mandatory training. Assessment audits have been undertaken, along with case file audits. The counter signatory process requires managers to validate assessments of risk and safety and well-being concerns. There is a quality of discussion at internal risk management and case planning meetings and contact recording template requires staff to actively consider safeguarding issues identified in sessions with young people.

10.6.1 Safeguarding Practice Improvement Initiatives

In the next 12 months, YOS will undertake the following plans to maintain or improve safeguarding practice:

- Maintain mandatory training for staff;
- Whole team training on the impact of trauma through a youth justice lens;
- Embedding the recently developed Champions programme where individual staff take a lead role on practice themes and issues, such as CSE, Serious Youth Violence, County Lines, FGM;
- Work to align YOS review processes with CIN, CP and LAC forums;
- Refresher Training on AssetPlus assessment based on aggregate findings of the assessment audits;

10.6.2 The AXIS Project

In addition to the safeguarding practice improvements outlined above, further development of the AXIS project to facilitate early identification and mapping of local young people at risk of Serious Youth Violence, CSE and Missing, is a key priority. Since its inception in October 2017, the AXIS Project has identified over 200 young people who appear vulnerable to these risks.

The information developed by AXIS is shared with existing lead professionals to inform their risk assessments and risk management plans. Those with no lead professional are encouraged to participate in an Early Help Assessment and short-term interventions which involve facilitating and sustaining their engagement in appropriate, ongoing support services.

The AXIS team meet the Hillingdon Police Gangs Unit on a regular basis and attend multi-agency forums to share and analyse information. This has resulted in a visual mapping of key themes, areas and individuals of concern, used to inform operational and strategic response.

10.7 Prevent

We continue to deliver a programme of training and engagement with local agencies raising awareness to local referral pathways and support. Over 4000 staff have now received WRAP training delivered by the local authority.

- The Channel panel in Hillingdon is well established. The panel is chaired by Hillingdon's Prevent Lead and has representation from health, mental health, children's services, early intervention, LADO, police, housing, youth offending, probation, schools/education and others as appropriate. As a port authority, we manage any referrals relating to the safeguarding of children that come through the airport, including those relating to counter terrorism. We have introduced a protocol with the counter terrorism police at Heathrow airport, to ensure timely sharing of information, in order to best assess needs. This protocol is currently being tested, with the intention to be adopted as a model for 'port authorities' nationally;
- Sadly, during this past year we have experienced a number of terrorist/violent extremist related incidents in the UK. Subsequently, we have seen an increase in the number of referrals being made. This is reflective of the national picture and local agencies have worked effectively, in partnership, to manage the increase in concerns stimulated by these incidents, and identify those who might be vulnerable;
- Schools and education establishments in the borough are the main source of referrals received in relation to radicalisation. The Prevent lead provides training for school staff and attends the school safeguarding leads hub meetings on a regular basis to ensure schools are supported and equipped in relation to the Prevent Duty. Feedback from schools locally has been very positive and they very much value this support;
- We work with local partners through the Strong and Active Communities Partnership to build resilience. Engagement with the community is a key aspect of the Prevent work. Local schools, the college and Brunel University London are pro-active partners in delivering against the aims of Prevent and the wider duty in relation to promoting British values;
- We are running a 2-year, MOPAC funded programme in collaboration with schools, the college, University and community, aimed at tackling hate crime and extremism. The aim is to equip young people and members of community groups to challenge hate crime and extremism, keep themselves safe from negative influence, develop critical thinking skills, increase understanding of others and build positive relationships.

10.8 London Borough of Hillingdon - Children's Rights & Participation Team

London Borough of Hillingdon has three established and well-attended children in care council's (CiCC) - Talkers, Step Up and Stepping Out, who meet monthly and are part of the regional Children in Care Council Network and whose views are presented at Corporate Parenting Board.

In 2017/18 we have been involved in:

- A Participation Day for Looked After Children aged 7-11 years old;
- Contributed input to the development of marketing materials in fostering recruitment;
- Consultation on the licence agreements for Staying Put;
- Development of a leaflet for care leavers to accompany the new financial policy;
- Consultation with the Children in Care Council (CiCC) resulted in Operation Make Safe, a joint Social Care/Police operation to make Hillingdon's high streets safer.

The Children's Rights & Participation Team also supported the design and delivery of the Annual Care Leavers Conference, choosing the theme, "Chasing Your Dreams - Education, Training and Employment". The event, supported by Brunel University London had 9 education, training and employment providers, with 100% of attendees stating that the event was enjoyable, useful and helpful.

192 children and young people were nominated for KICA (Kids in Care Awards) 2017, with 21 young people being actively involved in the preparation, support, presenting and performing at the red carpet awards evening.

10.9 London Borough of Hillingdon - LADO and Schools Child Protection Lead

- Number of Referrals from April 2017 - March 2018 - 157. This is higher than previous years, demonstrating that the role of the LADO is becoming better known;
- Staff and Volunteers referred include - child minders, nursery staff, school staff, sports coaches, police staff, religious staff, fire service staff, ambulance drivers, youth group staff, foster carers, drivers and passenger assistants. This demonstrates the wide range of organisations that are aware of the LADO role;
- Third largest cohort of staff that were referred in 2016 were drivers and passenger assistants of children with special needs. 210 staff have now been trained in Level 1 safeguarding - previously this cohort did not receive any training and thus, the referral rate of allegations has greatly reduced;
- New system in place to manage complaints from OFSTED, joining up LADO Service, Safeguarding children in Education and the School Improvement Service, being overseen by the Complaints Service;
- Over 25% of schools/education establishments in Hillingdon have had face-to-face level 1 safeguarding training delivered by the Lead CP Schools Adviser;
- Increased confidence in DSL to deliver the Level 1 safeguarding training to their school staff by providing them with the PowerPoint Slides used by Lead CP Adviser;
- All Schools participating in the safeguarding clusters have received the PowerPoint Slides developed by the CP Lead, so that DSL can deliver the training to school staff.

10.10 London Borough of Hillingdon - Early Intervention & Prevention Service

10.10.1 Case Recording & Evidence of Impact

The quality and impact of safeguarding practice can be evidenced via:

- Each open Key Work and TAF case within the Key Work Service being scrutinised monthly during Supervision;
- March 2018 saw 58% of Key Work referrals come from Children's Social Care teams and MASH/Triage.

All Key Work cases are recorded on a common system shared with Social Workers against presenting concerns, which are identified from the following characteristics:-

- Anger Management, At Risk/Occurring Family Breakdown;
- At Risk of Exclusion, Behaviour and/or Emotional Difficulties, Bereavement/history of Bereavement;
- Brink of Care, Bullying, Child on Adult Abuse;
- Children Missing Education, Children with SEND, CSE;
- Debt Problem, Domestic Abuse history, Emotional and/or Physical Abuse;
- Harmful Sexual Behaviour, Housing, Learning Difficulties and Disabilities;
- Long term Illness (Child Parent), Low Confidence / Self-Esteem, Mental Health, NEET;
- Youth Offending / ASB, On Benefits, Parental Conflict;
- Poor Attendance, Pregnancy, Refugee/Asylum Seeker (not yet citizen);
- Reunification from care, Sexual Abuse, Sexualised Behaviour, Substance Misuse;
- Support with Parenting Skills / Strategies, Teenage Parent, all 6 Troubled Families criteria, Truancy Sweep.

10.10.2 Evidence of Safeguarding Audits & Training

- Six Key Work cases per month are audited for quality assurance purpose;
- 2 external Early Help Assessments and all external TAFs are audited per month. Development and training opportunities are identified and actioned as a consequence;
- Children Missing Education processes and practices were subject to Internal Audit scrutiny during the summer of 2017;
- CME was a key line of enquiry during the recent OFSTED inspection, as was Early Help and the interface with MASH/Triage.

- All Key Workers are signed up to the Graded Care Profile 2 programme training;
- Several have completed the Mental Health First Aid training; all are current with Working Together training;
- The Participation Key Work Team has delivered on two Attendance Network events for Key Workers and school colleagues. Through this route they have received updated training on Prevent and Axis (Serious Youth Violence project);
- The Key Work Service is a partner in MAP/MASE, SYVV Panel, MARAC, Managed Moves and Fair Access Panels;
- The Key Work Service has informed the LSCB Neglect Audit and Newton review.

10.10.3 Future Safeguarding Practice Initiatives

Plans for the next 12 months to maintain or improve safeguarding practice include:

- The Key Work Service will be a partner at the newly merged MAP/MASE/SYVV Panel;
- All Key Workers will have completed the Graded Care Profile 2 programme;
- Harmful Sexual Behaviour will be a key focus, as that working party delivers on outcomes;
- Truancy Sweeps to protect the most vulnerable are planned with Safer Schools Police colleagues for the forthcoming year;
- One team leader in the service is pursuing the Gateway to Social Work programme with WLA;
- When the City & Guilds level 4 Working with Vulnerable Children and Families is wrapped into the Apprenticeship Gateway, the remaining 6 Key Workers not yet qualified will be afforded the opportunity;
- Review and further development of the Pre-Exclusion Project to drive down permanent exclusion rates.

10.10.4 Forthcoming Events

- A further Attendance Network was booked for July 2018, with School Refusal as the keynote address.

10.10.5 Positive Feedback from Service Users

- *"Mr Frost said that after speaking to you that he and his wife felt so much better and appreciated your help and advice. They did not know that we existed until his Mum told him about us. He said that you gave great advice."*
- *"Your team was very helpful with a difficult situation that school decided was not gonna be helpful or understanding. Just keep doing what you're doing was so helpful to know someone was on our side".*
- *"Thank you for your caring nature, professional, refreshing."*
- *"Look how well Axxx did. If it wasn't for your help she would never have achieved this. Tks once again xx"*

"I would like to thank you for your support alongside the school in relation to my son KJ educational progress. You have been punctual and focused on the matter particularly very communicative. You had shown a hard working approach with clear positive vision. I will definitively recommend you for hard work recognition and wish your line manager to look at my email."

10.11 London Borough of Hillingdon - Domestic Abuse Steering Executive

- In Hillingdon, we are all too aware of the devastating consequences of domestic abuse and other forms of violence and abuse on victims and their children. On average, there are in excess of 5000 domestic abuse crime and incidents recorded by the police in Hillingdon. Many more go unreported. Tragically, the domestic abuse crime statistics also relate to 16/17 year olds who are in intimate partner abusive relationships too;
- The number of high-risk domestic abuse cases being managed by the Multi-Agency Risk Assessment Conference (MARAC) has been increasing. In the last 12 months, 297 cases (and increasing) have been referred to MARAC and at least 443 children have been part of those abusive households;
- A rejuvenated and re-focused Domestic Abuse Steering Executive is providing the governance, direction and leadership to prevent and tackle the many crimes and abuses associated with Violence Against Women and Girls including Domestic Abuse, Modern Day Slavery, Honour-Based Abuse, Forced Marriage, Female Genital Mutilation, Sexual Violence and Stalking. This strategic group is supported by 5 operational delivery groups, made up of a diverse range of local professionals who will soon be supported by independent members from the local community.

10.11.1 Hillingdon Violence Against Women & Girls Strategy

The Steering Executive has developed Violence Against Women and Girls Strategy, which has set out its Vision as:

'Preventing and eradicating all forms of violence and abuse against women, children and men in Hillingdon Borough and support those so victimised to achieve their full potential in life'.

The work towards achieving this vision is underpinned by the 4 key priorities of:

1. Prevention and Early Intervention;
2. Service Provision;
3. Pursuing Perpetrators;
4. Partnership Working.

We have worked hard to listen to victims and survivors of domestic abuse and local statutory and voluntary sector professionals. This has allowed us to better shape:

- Our responses to domestic abuse;
- Our understanding of the whole range of organisations and agencies to providing support to victims/survivors and their children;
- Our services to prevent domestic abuse and ensure early intervention to prevent the abuse worsening;

- Our training provision to local multi-agency statutory and voluntary sector professionals:
 - In the last year, we had 7 multi-agency training events focussed on domestic abuse and the wider subject of Violence Against Women and Girls, which has seen approximately 430 professionals trained;
 - It is great to see that this cycle of regular training will continue.

10.12 Health Watch Hillingdon

10.12.1 Mental Health, Wellbeing and Life Skills Pilot Summary

Between November 2017 and March 2018, Healthwatch Hillingdon delivered a Mental Health, Wellbeing and Life Skills Pilot Programme to a group of Year 12 and Year 13 students at Barnhill Community High School. The aim of the programme, which was funded in part by Hillingdon Community Trust, was to support the school to develop a whole school approach to promoting students' emotional wellbeing. Participating students took part in 12 weeks of mental health and wellbeing awareness and life skills sessions, which culminated in them creating a mental health awareness and signposting campaign to benefit the whole school community.

10.12.2 Mental Health, Wellbeing and Life Skills Pilot Full Description

- In 2015, Healthwatch Hillingdon produced 'Seen & Heard – Why not now?' a report about children and young people's experiences of Hillingdon's mental health and wellbeing services;
- As part of our recommendations to commissioners on how services could be improved, we outlined several initiatives which were required in schools, including action to develop children and young people's social and emotional skills;
- We wanted to help schools build on their existing good work, so we developed the Mental Health, Wellbeing and Life Skills programme to be delivered with groups of students at Key Stage 4 and above;
- We successfully applied for funding from Hillingdon Community Trust and delivered the programme as a pilot at Barnhill Community High School between November 2017 and March 2018.

The programme is designed to support schools to develop a whole school approach to promoting children and young people's emotional wellbeing by:

- Developing students' confidence, knowledge and skills – important for emotional resilience;
- Increasing whole school understanding of mental health issues, contributing to reduced stigma and discrimination and a more open and accepting school environment;
- Increasing whole school knowledge of how to access appropriate wellbeing and mental health information and support;

- Eighteen Year 12 and Year 13 Health and Social Care students participated in the programme and learned about:
 - Mental health awareness;
 - Stigma and discrimination;
 - How to improve and protect their own wellbeing;
 - How to help others access support;
 - Life skills such as project planning, research, teamwork, negotiation, data management and public speaking and presentation skills.
- In February, students delivered a presentation to key stakeholders about what they learned during the programme, the results from a whole school mental health survey and their plans to develop a campaign to benefit the whole school community.

The programme culminated in the students creating a campaign to raise awareness of mental health and wellbeing throughout the school community and ensure fellow students know where to go for advice and support. The final impact is currently being assessed (March 2018) but to date, as a result of the programme, several students have reported mental health difficulties and using self-harm and other potentially harmful mechanisms to cope with their emotions and have reached out for help within the school.

Both the school leadership and Hillingdon Community Trust are very impressed with the programme and pupils have reported a greater understanding of mental health and related stigma and discrimination. After the successful outcomes and learning from the pilot programme, Health Watch Hillingdon is actively seeking funding to be able to extend the programme to other schools in the borough.

10.13 Child Death Overview Panel (CDOP)

10.13.1 CDOP Processes & Outcomes

- CDOP is one of Hillingdon LSCB's four sub-groups and is chaired by the Director of Public Health. The Vice Chair is the Designated Paediatrician for child deaths in Hillingdon. The panel consists of multi-agency representation;
- The CDOP is notified of all deaths of children (expected and unexpected) who are residents within the London Borough of Hillingdon. Relevant information is collated for each case and is discussed to determine if the death was preventable;
- Where a death is unexpected, a rapid response meeting is convened. These meetings are held to ensure that all the relevant information is gathered as soon as possible and relevant actions are recommended. The current process for managing unexpected child deaths in Hillingdon is detailed on the [LSCB Website](#);
- The panel also has the role in identifying patterns or trends in local data and reporting these to the LSCB. The lessons and trends identified from the reviews are compiled and reported to the Board on an annual basis;
- The CDOP met 3 times during 2017/18 to discuss and review child death cases and the group had good attendance and engagement from key partner organizations;
- Between 1 April 2017 and 31 March 2018, the CDOP were notified of the deaths of 24 children who were residents of Hillingdon at the time of their deaths. The panel reviewed a total of 22 deaths during this period;
- Since March 2017, bereaved parents have been sent an information leaflet about the Hillingdon CDOP review process inviting them to contact CDOP to share any information, which may help the review process. No families have contacted CDOP to share information.

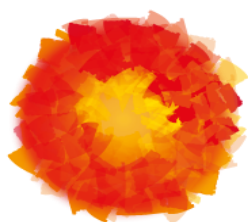
10.13.2 CDOP Responses

A close working relationship between CDOP and the SCR sub-group continues. A process is in place to allow cases and concerns to be shared between both groups. Actions that have been implemented as a consequence of Hillingdon child deaths during this period include the following:

- A Sepsis Masterclass was held in January 2018, following a significant rise in the number of cases reviewed at the CDOP panel where Sepsis had been the cause of death;
- Minutes from Mortality Review meetings held at The Hillingdon Hospital are now shared with the CDOP;
- A quarterly CDOP newsletter has been developed for professionals, highlighting concerns from child deaths that practitioners need to be aware of and inform

parents. This is published on the LSCB website.

- A common theme that has been identified through child death reviews in Hillingdon is the risk of co-sleeping (parents/carers sharing a bed or sofa with their baby). Hillingdon LSCB has promoted the work of [The Lullaby Trust](#), who provide expert advice on safer sleep for babies, emotional support for bereaved families and raises awareness of Sudden Infant Death Syndrome.



THE UK
SEPSIS
TRUST



11.0 Serious Case Reviews (SCR)

In England, a Serious Case Review (SCR) takes place after a child dies or is seriously injured and abuse or neglect is suspected to be involved. It identifies lessons that can help prevent similar incidents from happening in the future. Hillingdon LSCB follows statutory guidance set out in [Working Together to Safeguard Children 2015](#) for conducting a serious case review. The Hillingdon LSCB SCR sub-group met 3 times during the 2017-18 year. It reviewed actions from previous local SCRs and national reviews to ensure any lessons learnt are implemented. Hillingdon LSCB did not initiate any SCRs during 2016/17.

11.1 Briefing Note for Practitioners and Managers, Operation Baker

The Briefing Note for Practitioners and Managers, Operation Baker is being circulated following the publication of a recent serious case review. The review examined a period between 1st January 2011 and 6th August 2014. The report concerned four children.

In September 2013, the London Borough of Hillingdon identified that organised child sexual exploitation was taking place in the borough linked to drug taking and criminal activity. A joint police and children's social care investigation was launched called Operation Baker. The investigation led to the arrests and successful prosecution of five individuals. Four of those individuals received custodial sentences for serious sexual offences and the fifth, a suspended sentence for drugs offences.

A link to the Briefing note can be found below:

<https://hillingtonlscb.org.uk/wp-content/uploads/2018/03/Operation-Baker-Briefing-Note.pdf>

12.0 Hillingdon LSCB Priorities 2018-2020

- To ensure that partners work together to protect Hillingdon's children from identified risks to their safety and welfare;
- To oversee the implementation of the Early Intervention and Prevention Service in Hillingdon;
- To ensure that Hillingdon LSCB can evidence the effectiveness of single agency and multi-agency safeguarding arrangements, in order to satisfy ourselves that risks to children and young people are identified early to protect them from harm;
- To ensure that arrangements for assessing the safety of home-educated children and young people are robust;
- To assess the safety of children and young people with a disability. This will include an audit and analysis of training undertaken by professionals working with children with disabilities;
- To assess the effectiveness of safeguarding in the various communities of the borough.

13.0 LSCB Good News Stories

The LSCB's training programme is continually reviewed. We now have courses on FGM, Honour based violence, Forced Marriage and Modern Day Slavery. Training is currently in development for County Lines and Neglect.

Our Twitter account now has 750 followers. We Tweet each day and actively follow National safeguarding and charity twitter accounts.

Hillingdon LSCB held a CDOP meeting in late 2017, where a number of children in Hillingdon were noted to have passed away either due to Sepsis, or where Sepsis was identified as a contributing factor to the child's death. In partnership with Hillingdon Clinical Commissioning Group a Sepsis Masterclass was arranged which over 100 professionals attended.

The LSCB Multi-agency Auditing Program has supported enhanced safeguarding resources for children, such as the specialist safeguarding midwifery team at The Hillingdon Hospital.

The LSCB has sought to engage directly with education partners in order to implement an effective, education-focused s.175 Schools Audit in 2018-19.

14.0 Appendices

14.1 - Appendix 1 - Glossary

Acronym	Meaning	Acronym	Meaning	Acronym	Meaning
ASB	Anti Social Behaviour	DHR	Domestic Homicide Review	SAB	Safeguarding Adults Board
BCUs	Basic Command Units	DSL	Designated Safeguarding Lead	SCR	Serious Case Reviews
CAIT	Children Abuse Investigation Team	FGM	Female Genital Mutilation	SHOF	Safeguarding (Children) Health Outcomes Framework
CAMHS	Child & Adolescent Mental Health Service	(H)LSCB	(Hillingdon) Local Safeguarding Children Board	SEND	Special Educational Needs and/or Disabilities
CASO	Child Abuse & Sexual Offence Command	IAR	Interagency Referral Form	SYV	Serious Youth Violence
CCE	Child Criminal Exploitation	ILACS	Inspection of Local Authority Children's Services	SAB	Safeguarding Adults Board
CCG	Clinical Commissioning Group	IRO	Independent Reviewing Officer	T & F	Task & Finish Groups
CDOP	Child Death Overview Panel	LAC	Looked After Child	THH	The Hillingdon Hospital NHS Foundation Trust
CICC	Children In Care Council	LGA	Local Government Association	UKBF	United Kingdom Border Force
CIN	Children in Need	LADO	Local Authority Designated Officer	VYPRMG	Vulnerable Young People Risk Management Group
CNWL	Central & North West London NHS Foundation Trust	LBH	London Borough of Hillingdon	VAWG	Violence Against Women and Girls
CP - IS	Child Protection Information System	MARAC	Multi Agency Risk Assessment Conference	YOS	Youth Offending Service
CP	Child Protection	MASE	Multi Agency Sexual Exploitation		
CPPs	Child Protection Plans	MASH	Multi Agency Safeguarding Hub		
CSE	Child Sexual Exploitation	MOPAC	Mayor's Office for Policy & Crime		
CSE Hub	Child Sexual Abuse Hub	MPS	Metropolitan Police Service		
DA	Domestic Abuse	OFSTED	Office for Standards in Education		

14.2 Appendix 2 - Hillingdon LSCB Budget Summary 2017-2018

Income 2017/2018	
London Borough of Hillingdon	£138,568
NHS	£61,200
Contributions from Partner Agencies	£2,550
Revenue from Training Courses	£38,762
Total	£241,080
Outgoings 2017/2018	
Staffing	£181,741
Non-Staffing	£4,741
Training	£16,528
Chairman	£39,842
Total	£242,852
Variance: £1,772 overspend	

14.3 Appendix 3 - LSCB Annual Report Contribution Questions

Questions asked to statutory and non-statutory Hillingdon Local Safeguarding Children Board re their contribution to the LSCB Annual Report:

1. What do you know about the quality and impact of safeguarding practice in your setting/organisation?
2. How do you know? (Audits, training, inspections etc)
3. What are your plans for the next 12 months to maintain or improve safeguarding practice?
4. Any good news stories, positive feedback from service users (direct quotes if possible) and events you are planning to hold.

2017-
2018

SAB Annual Report

Page 65



 @hillingtonSAB
 www.hillingdonsab.org.uk

Andrea Nixon
Safeguarding Adults Board
2017 -2018

Foreword Independent Chair Steve Ashley



Welcome to the annual report of the Adult Safeguarding Board. The Board is a statutory requirement in every local authority area. I am the chair of the Board and I am independent of the agencies in Hillingdon. The Board brings together all those agencies that are involved in safeguarding adults, as well as voluntary bodies and private sector companies providing services. It ensures that there is a coordinated approach to protecting and supporting adults at risk of abuse or neglect. This may be young adults who need support and protection through to our older people. The range of issues faced by adults at risk of abuse or neglect in Hillingdon is wide. From mental health, drug and alcohol issues to elder abuse, agencies need to be resourced and have in place processes that enable them to respond to those at risk of abuse or neglect and provide them with the support and protection they need to enjoy their lives.

This report sets out the work conducted by agencies in Hillingdon to safeguard adults and describes how those agencies have worked together to deal with some major issues.

One of the primary responsibilities of the Board is to hold agencies to account. To do this, we have improved our performance management processes and begun to develop an audit process to ensure that the quality of the services being provided is at the right level.

We have strengthened our ties with Heathrow airport to ensure we understand the particular issues that having one of the world's busiest airports on your patch can create. Our work with the Border Agency and Heathrow management has seen better joint working and a clearer understanding of responsibilities.

Foreword Independent Chair Steve Ashley

The Board held a successful seminar on sepsis. Sepsis kills 44 000 people a year and the elderly and small children are at greatest risk. The seminar was attended by professionals across both the private and public sectors and raised awareness. The seminar is acting as the catalyst for further training.

The Board has also developed a training programme that is specifically designed for those professionals that work with adults at risk of abuse or neglect, and is being well supported by companies whose staff work with older people. We have consolidated this work by developing short webcasts in partnership with students at Brunel University. This enables those on the front line to understand how agencies can help each other protect the most vulnerable.

These are just some examples of the current work of the Board. I am pleased to say that partners are working well together and despite the continued financial pressures, are performing well.

This report is a window into the work that is being conducted in Hillingdon. Our website provides more detailed performance information and statistical analysis. We also have a social media presence on Twitter.

Thank you for taking the time to read this report. If there are any issues raised on which you would like to receive further information, please contact us via the website.

Hillingdon Safeguarding Adults Board Governance & Accountability Arrangements

The Care Act 2014 requires all local authorities to set up Safeguarding Adults Boards (SABs) with other statutory partners, including the Police and Clinical Commissioning Group (CCG).

The Hillingdon Safeguarding Adults Board continues to work with partners to embed the requirements of the overarching Care Act to:

- Assure that local safeguarding arrangements are in place as defined by the Act.
- Prevent abuse and neglect, where possible.
- Provide timely and proportionate responses when abuse or neglect is likely or has occurred.

The legal framework for the Care Act 2014 is supported by statutory guidance on how the Care Act works in practice.

The guidance has statutory status, which means that there is a legal duty to have regard to it when working with adults with care and support needs and carers.

The SAB takes the lead for adult safeguarding across Hillingdon to oversee and co-ordinate the effectiveness of the safeguarding work of its members and partner organisations.

Through common membership, there are links to Multi Agency Public Protection arrangements (MAPPA), the Domestic Abuse Multi Agency Risk Assessment Conference (DA MARAC) and the Community Risk MARAC (CR MARAC).

Over the last year the Board has been well supported by elected members. The lead member for Adult Safeguarding attends the Executive Board meeting. The SAB is now closely allied to the Health and Well Being Board and the Care Governance Board.

Elected Members have taken a lead in safeguarding issues. Considerable work has been undertaken in the community supporting front line professionals. This level of engagement by Members is essential in the process of continuous improvement.

Hillingdon Safeguarding Adults Board Structure Chart

The Hillingdon SAB has three subcommittees that support the Board in meeting its objectives that are set out in the business plan. The three subcommittees of the SAB are held regularly throughout the year and provide a report to each SAB operational Board. The Performance and Quality subcommittee also present emerging themes to the SAB Executive Committee.

Safeguarding Adults Board

SAB Executive

Joint Strategic Safeguarding and Trafficking

This sub-committee is unique to Hillingdon SAB and LSCB. The aim is to continue to strengthen the partnership that we have with Heathrow Airport, Her Majesty's Immigration Removal Centre and the Local Authority. Work is continuing on developing robust referral pathways regarding vulnerable adults arrive at Heathrow.

There is improved engagement between UK Border Force and Adult Mental Health services. The SAB Business Unit attends safeguarding meetings that are held monthly at H.M.Colnbrook Immigration and Removal Centre. The SAB has requested that data reported at these meetings be shared with the Board. This request has been made to the Home Office and we still await a response.

Safeguarding Adults Review

Responsible for commissioning an independent review when an adult at risk dies, or is significantly harmed and for ensuring that learning from SARs is implemented and publicised.

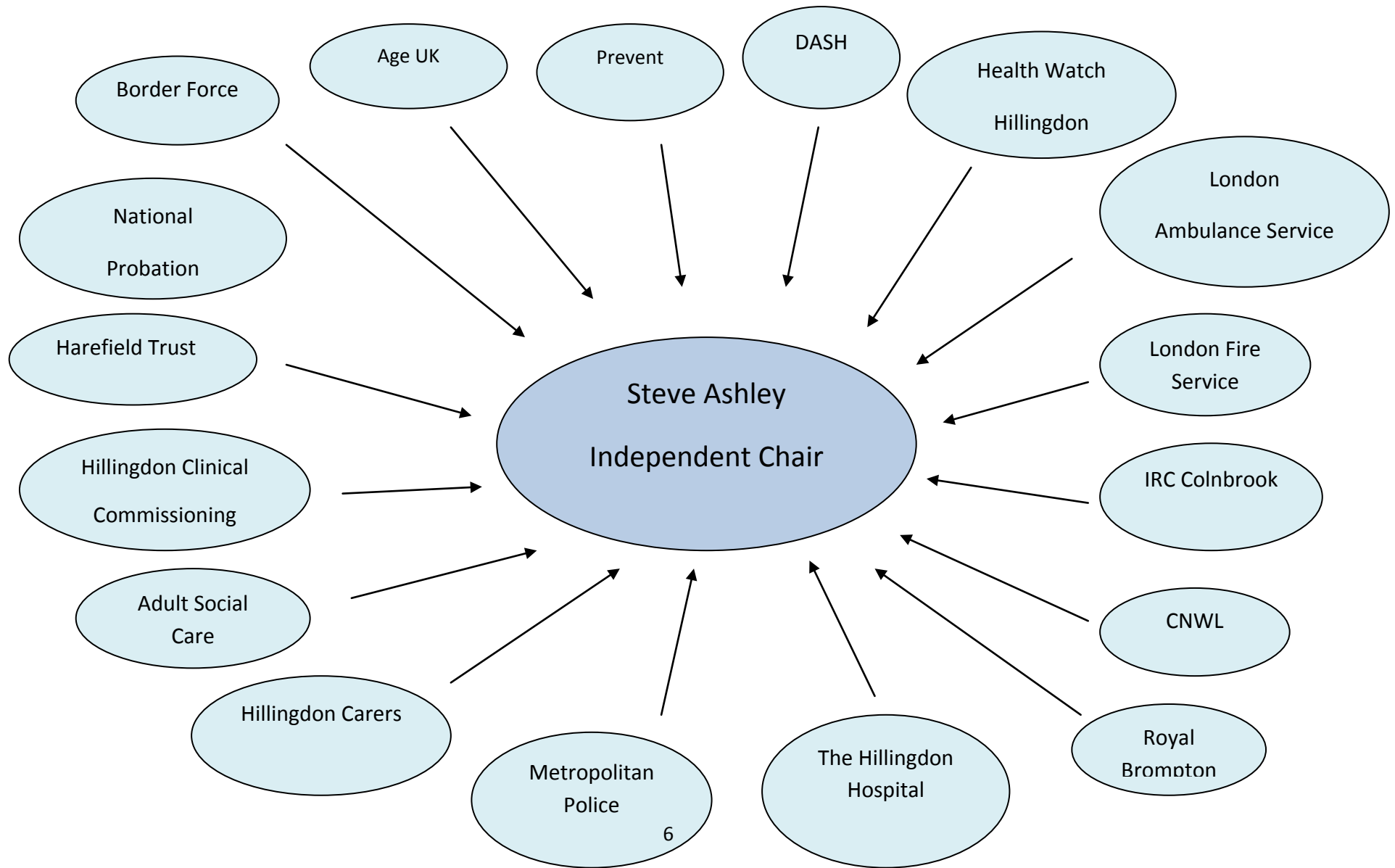
Performance and Quality Assurance

Responsible for the production of performance data on safeguarding across partner agencies in the form of a dashboard, which enables partner members to collectively interrogate information, influence service improvements and identify what is working well.

The development and scrutiny of the dashboard has led to agency specific 'deep dives' in order to provide dialogue to support the data.

Page 69

Hillingdon Safeguarding Adults Board Partner Members



Strategic Boards That are Linked to the Safeguarding Adults Board

Local Safeguarding Children Board:

The Local Safeguarding Children Board is no longer a statutory requirement. However, there is a requirement for statutory partners, Police, CCG and the Local Authority to ensure that safeguarding arrangements are in place. This year there has been a focus on the two boards working more closely together, which has included joint training events and joint membership of the Joint Strategic Safeguarding and Trafficking subcommittee.

Safer Hillingdon Partnership:

The Community Safety Partnership Board is required by law to conduct and consult on an annual strategic assessment of crime, disorder and anti-social behaviour, substance misuse and re-offending within the borough. The findings are then used to produce the partnerships Community safety plan.

Health and Wellbeing Board:

The Health and Wellbeing Board is a statutory requirement for local authorities. The board brings together the NHS, the Local Authority and Health Watch to jointly plan how best to meet local health and care needs in order to improve the health and wellbeing of the local population, reduce health inequalities and commission services accordingly.

Domestic Abuse Steering Executive:

The domestic abuse executive board brings together statutory and non statutory agencies in order to ensure that the Safer Hillingdon Partnership's Domestic Abuse strategy is implemented.

Local Demographics

Life expectancy in Hillingdon for both men and women is higher than the England average.

However, life expectancy is 6.1 years lower for men and 5.5 years lower for women in the most deprived areas of Hillingdon than in the least deprived areas.

Hillingdon is the second largest of London's 32 boroughs covering an area of 42 square miles.

Hillingdon is ranked 23 out of 33 London boroughs for deprivation in London (including City of London) and 138 out of 326 Local Authorities in England (1 being the most deprived) Source: DCLG 2010 Indices of Multiple Deprivation.

The population of Hillingdon has a different age structure when compared with London. In general, Hillingdon has a higher proportion of 5-19 and 50+ year olds, but a smaller proportion of 25-39 year olds. In London 55% of the population are from Black and minority ethnic (BME) communities; in Hillingdon 48% of the population are from BME communities.

Hillingdon's male life expectancy from birth is 80.5 and female is 83.7 (based on 2013-15 data), which means that a baby born in Hillingdon can expect to live a similar number of years as the England average for both genders (79.5 and 83.1 respectively).

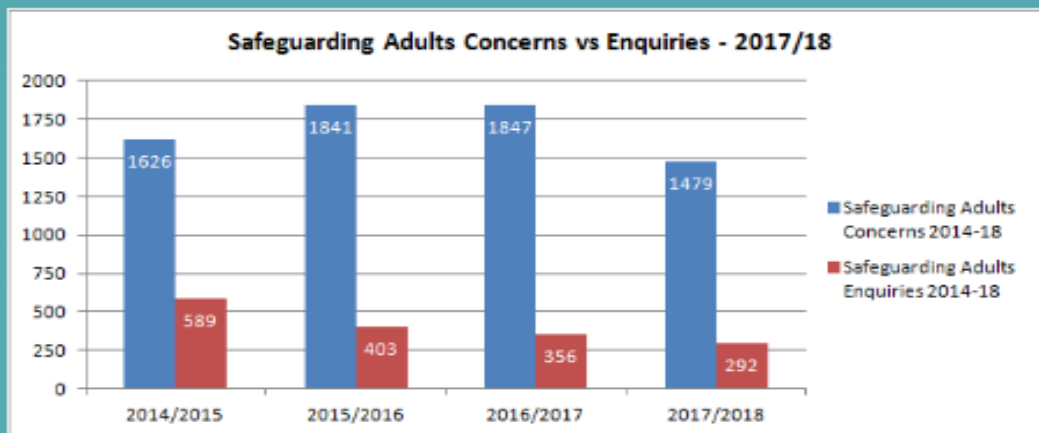
According to the Greater London Authority in 2017, in Hillingdon, 43.2% of the population are White British, 9.9% are White Other and 46.9% are from Black & Minority Ethnic groups (source: GLA 2015 Round Demographic Projections, 2016).

The Greater London Authority 2012 Round Final Ethnic Group projection figures (GLA EGRP 2012) for 2015 estimate that Hillingdon is becoming more diverse with Black and Minority Ethnic (BAME) groups accounting for 45% of the usual resident population and White ethnic groups accounting for 55% of the population in 2015.

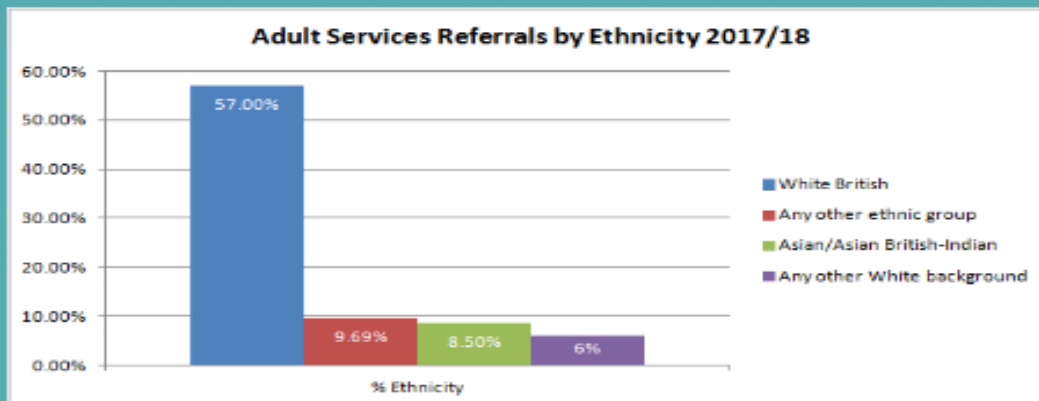
Safeguarding Adults Performance Data

Safeguarding Adults Report: 2017-18

Safeguarding Adult Concerns by Age



Safeguarding Adult Concerns by Gender

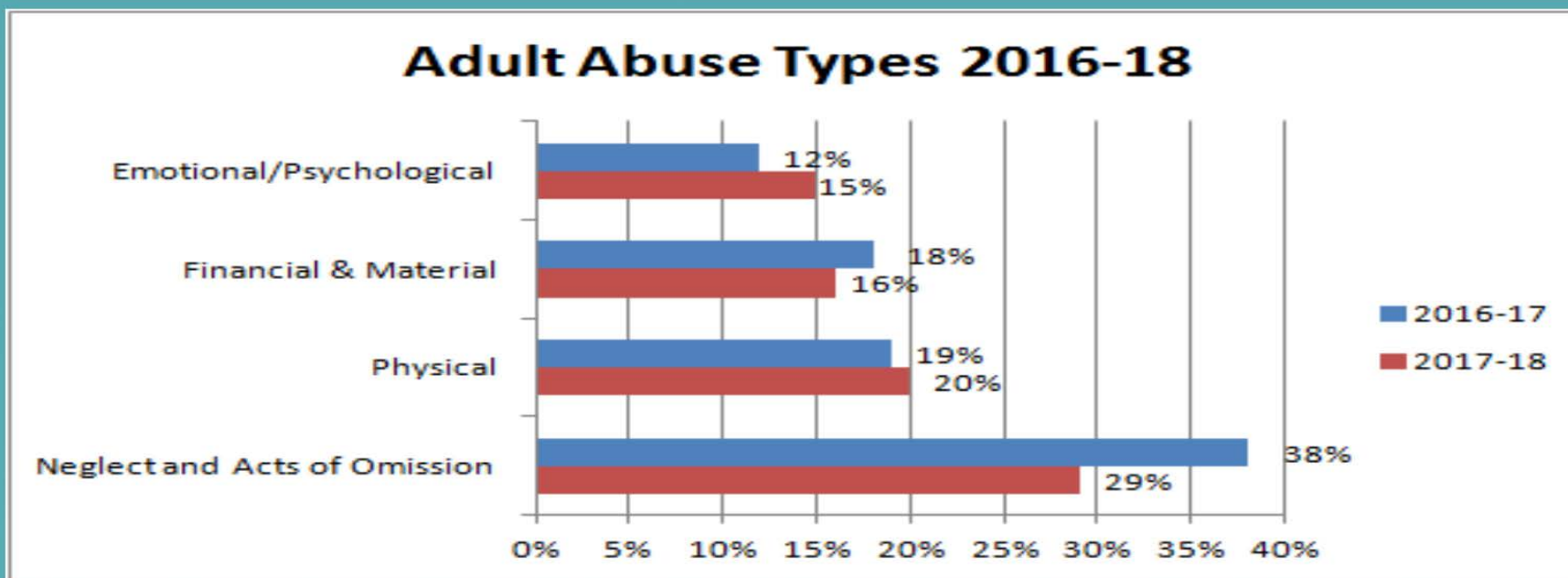


(Four most prevalent ethnic backgrounds reported in 2017-18)

Safeguarding Adults Performance Data

Reported Safeguarding Concerns

The graph below outlines the four most common types of abuse reported to Adult Services in both 2016-17 and 2017-18. Considerable consistency is seen across all abuse types, except 'Neglect & Acts of Omission', which decreased almost 10% in 2017-18. An increase is seen in the rate of reported Financial & Material Abuse.

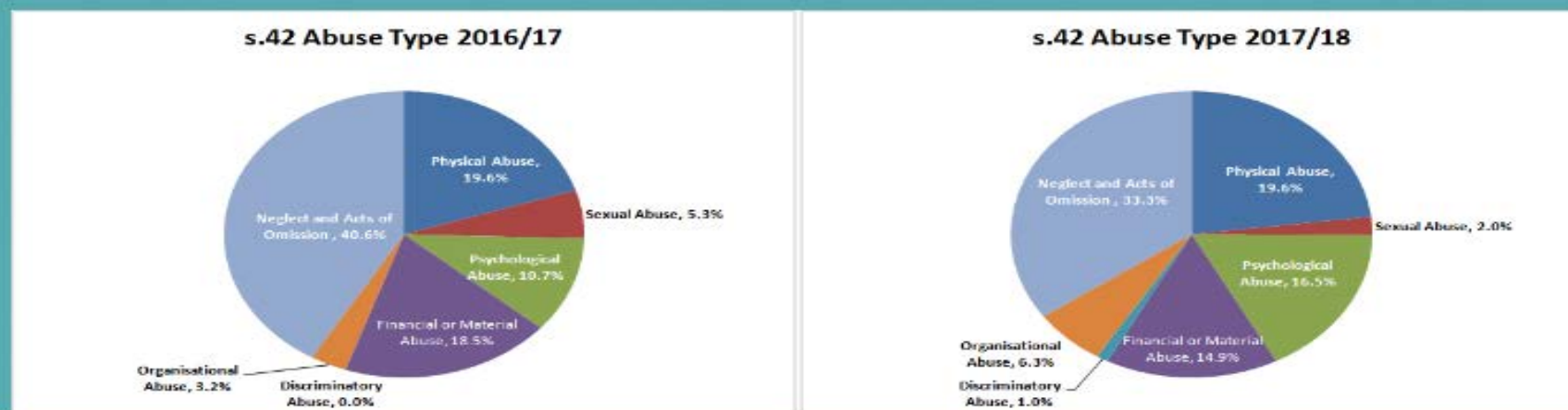


Safeguarding Adults Performance Data

s.42 Safeguarding Enquiries

s.42 Safeguarding Enquiries are undertaken when -

- an adult has needs for care AND support;
- adult is experiencing, or is at risk of, abuse or neglect;
- As a result of those needs the adult is unable to protect himself or herself against the abuse or neglect, or the risk of abuse or neglect.



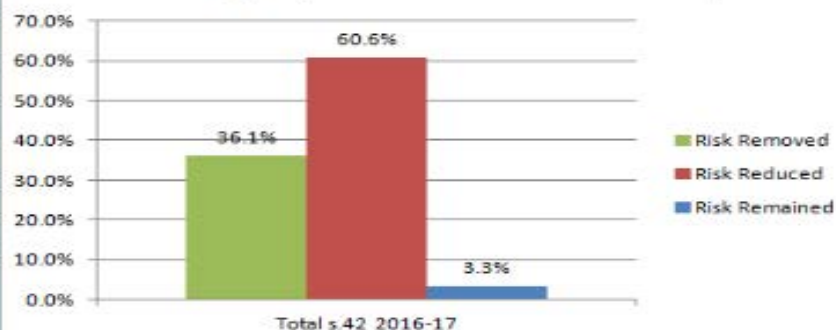
The largest proportion of s.42 Safeguarding Enquiries are consistently generated by concerns about a vulnerable adult suffering from neglect or acts of omission occasioning neglect, although as with wider adult safeguarding concerns, a decrease of over 7% has been observed in the 2017-18 year. Neglect, Financial & Material Abuse and Physical Abuse combined to comprise over 70% of s.42 Safeguarding Enquiries in 2017-18, down from almost 80% in the previous year. An increase in s.42 Safeguarding Enquiries regarding psychological abuse occurred in 2017-18.

Safeguarding Adults Performance Data

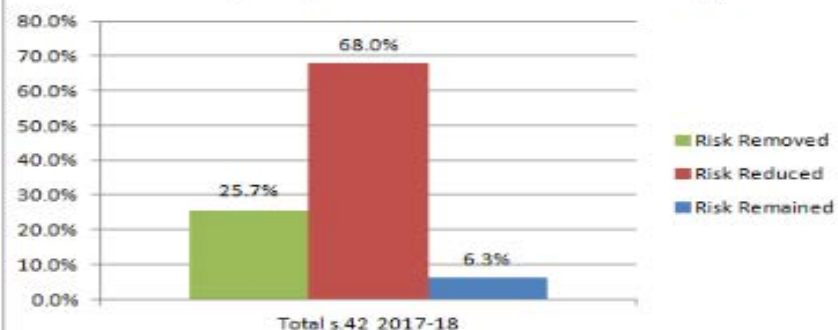


In 2017-18, over 80% of s.42 enquiries led to a safeguarding risk being identified and action taken to enhance the safety and well-being of vulnerable adults in Hillingdon.

s.42 Enquiry Risk Resolution 2016/17



s.42 Enquiry Risk Resolution 2017/18



s.42 Safeguarding Enquiries concluded in Hillingdon have consistently led to the reduction and removal of risk to vulnerable adults. In 2017-18, there was a small increase in concluded s.42 Safeguarding Enquiries where risk remained, however over 90% of enquiries led to the removal or reduction of safeguarding risk to adults.

Safeguarding Adults Training

Standardised training across the health and social care system is key to promoting good evidenced based care. The aim of training is to prevent safeguarding concerns arising and to ensure that they are appropriately dealt with when they arise.

The Hillingdon Safeguarding Adult Board is working hard to ensure that providers of services to some of the most vulnerable people in Hillingdon are equipped to deal with the challenges which are presented to them effectively.

Links across the whole health and social care system in terms of training is imperative to support good outcomes for vulnerable people in Hillingdon.

A proposal was previously presented to the partners of Hillingdon Safeguarding Adult Board to outline the contributions which would be required to develop a training programme. Whilst partners thought a standardised programme was a good idea, most partners wanted to pay for training when they required it rather than be part of an ongoing programme.

Some funding has now been agreed with Hillingdon CCG and The London Borough of Hillingdon, which will enable a revised training programme to commence. This will include training that would be available for care home staff in relation to the Accountable Care Partnership. The training for care home staff is intended to support good practice and prevent adult safeguarding concerns from arising, in keeping with the principle of prevention that is central to The Care Act.

The Plan is to provide a training programme for the year similar to the Local Safeguarding Children's Board.

Hillingdon Safeguarding Adults Board Statutory Partners' Contribution to Priorities 2017 - 2018

Adult Social Care: The London Borough of Hillingdon

In September 2017, the Council developed the Adult Social Care (ASC) Triage Team. Working closely with the MASH (Multi Agency Safeguarding Hub), the role of ASC Triage Team is to provide a robust and consistent response to all adult safeguarding concerns. The team dealt with 1479 Safeguarding concerns during 2017/18.

Of the concerns received in 2017/2018, 247 progressed to Section 42 enquiries. Making Safeguarding Personal remains central to practice, with 93% of people saying that their outcomes were met. Over 90% of Section 42 enquiries resulted in the assessed risk being reduced or removed.

Linking in with the Care Quality Commission (CQC), the Council's Quality Assurance Team continues to work with providers to monitor and improve standards and promote good practice. The Social Work teams work closely with the Quality Assurance Team and Hillingdon CCG to feed into the Council's Care Governance framework. A provider forum was also held in November 2017, which was well attended by over 100 care and support providers.

The Council is also taking a lead role in redesigning the current hospital discharge pathway in partnership with Hillingdon CCG, The Hillingdon Hospital and CNWL, to expedite safer and timely discharges.

Adult Social Care continues to meet the challenge of a rising demand for Deprivation of Liberty Safeguards (DoLS), with a projected 1450 applications being dealt with this year. For every assessment, the focus is on the resident, their voice, their family and friends' voices and ensuring that these are central to the DoLS process. Adult Social Care offer formal advocacy for all residents, either for them directly or for their family or friends if they are befriended.

In relation to cases submitted to the Court of Protection, the Council's Legal team has been complimentary about the quality of work particularly with regard to the Social Workers' witness statements.

Adult Social Care continues to train and support in-house Best Interests Assessors (BIA) by way of accredited BIA training, refresher training and a regular BIA Forum.

The Council has delivered a wide range of training covering Safeguarding (for Enquirers and Safeguarding Adults Managers); DoLS and Best Interest Assessments; Domestic Abuse; Mental Capacity Act and Modern Day Slavery.

Hillingdon Safeguarding Adults Board Statutory Partners' Contribution to Priorities 2017 - 2018

The Metropolitan Police

There have been no inspections in the reporting period for this report. However a review of 'Hillingdon Police Vulnerable Adult Safeguarding Arrangements' has taken place and a report will be published shortly.

In addition to the increase in staffing levels and prioritisation of adult safeguarding by Hillingdon Police, a number of reforms to systems and processes are underway. Previously no system existed whereby Vulnerable Adult (VA) crimes were triaged, risk assessed or allocated to relevant departments. VA crimes were spread across the whole Police Criminal Investigation Department (CID) remit. Changes are currently being implemented following an internal review will address these issues and an investigator with relevant experience will be assigned. This work is still in progress, but follows an ethos of continuous improvement and self analysis.

As a result of training and intervention from Police MASH, Heathrow stakeholders have moved safeguarding to a higher priority within their byelaws so that safeguarding is considered first prior to any lawful ejection of an individual from Heathrow Airport.

The implementation of social services safeguarding team has improved communication and collaboration between partners and enabled a report of wrongdoing to be dealt with promptly. As a result of training and intervention from Police MASH, an elderly lady who was being groomed for her money and property was promptly safeguarded and the perpetrator, who was in a position of trust, has been subject to discipline procedures, which resulted in dismissal.

It needs to be highlighted that Hillingdon Borough police are due to merge with Hounslow and Ealing Borough Police which will inevitably require some changes to the current systems of all three Boroughs and a standardisation of approach may well result.

Hillingdon Safeguarding Adults Board Statutory Partners' Contribution to Priorities 2017 - 2018

Adult Safeguarding NHS Hillingdon Clinical Commissioning Group (CCG)

During 2017/18, the Care Act 2014 has been further embedded within practice. There have been closer working partnerships with the statutory body for Adult Safeguarding (the London Borough of Hillingdon) and Hillingdon CCG. For example, supporting good practice within care homes and addressing adult safeguarding concerns.

The Designated Safeguarding Adult Nurse has also:

- Led on a number of Section 42 adult safeguarding enquiries;
- Supported the Accountable Care Partnership (ACP) for Older People Model of Care.
- Been appointed as the Vice Chair to the Adult Safeguarding Board and is supporting the development of a training programme.
- Led on the action plan for the Domestic Homicide Review Case of 'Charlotte'. The lessons learnt continue to be embedded in practice and developed further.
- Participated in a number of The London Borough of Hillingdon subgroups to develop the Domestic Violence and Abuse Strategy for Hillingdon.
- Attended the Multiagency Risk Assessment Conference (MARAC) meetings on a monthly basis.
- Integrated into the Channel Panel meetings, providing updates on lessons learnt for CCG staff and working with primary care to develop resources for practices. Prevent has also been an area of advancement over the last year.

Hillingdon CCG has been working with NHS England to develop a Mental Capacity Act Template for GPs to use when making a Mental Capacity Act assessment. This is now in the pilot phase.

Hillingdon CCG have continued to monitor providers with the completion of the Safeguarding Health Outcomes Framework. They have worked collaboratively with Continuing Health Care staff and instigated NHS Provider lead groups and GP Practice leads group, in order to progress good practice further and devise solutions to difficult adult safeguarding situations.

Hillingdon Safeguarding Adults Board Statutory Partners' Contribution to Priorities 2017 - 2018

Adult Safeguarding NHS Hillingdon Clinical Commissioning Group (CCG)

During the past year, CCGs have been taking the lead role for the LeDeR programme within their areas which is as advised by the University of Bristol as:

'The Learning Disabilities Mortality Review (LeDeR) Programme aims to make improvements to the lives of people with learning disabilities. It clarifies any potentially modifiable factors associated with a person's death, and works to ensure that these are not repeated elsewhere.'

The Designated Nurse is the Local Area Contact (LAC) for the reviews. The LAC allocates all the reviews. The Terms of Reference has been agreed and the steering group has now had two formal meetings and provides reports into the Safeguarding Adults Board.

"Peer Reviews are well established and take place twice a month. Safeguarding Adult Lead".

CNWL NHS Foundation Trust

"Prevent Event training – we are on target to meet the 85% compliance set by NHS England by the end of March 2018. In HCH 84% of staff are trained and in MH it is 77%."

CNWL NHS Foundation Trust

Hillingdon SAB & Partner Agencies Summary of Achievements

"Monthly Hillingdon safeguarding Meetings held at the Civic Centre is well established and provides an opportunity for CNWL to meet with LBH regarding safeguarding adults, and for us to give assurance to LBH as to how we manage our safeguarding adults under the section 75 agreement."

CNWL NHS Foundation Trust

"Safeguarding training is mandatory for all staff and is regularly updated. Staff more aware of issues around safeguarding and how to report them. Safeguarding is a board agenda item. Now have a lead safeguarding trustee who has undergone training."

Hillingdon Carers

Hillingdon SAB & Partner Agencies Summary of Achievements

Page 84

"Updated CNWL Domestic Abuse Protocol released in August 2017. In this it stresses that staff need to routinely ask about DA for every female service user. Selective enquiry should be undertaken with all male service users presenting with indicators of abuse. This is also in accordance with NICE guidance. We plan to get a DA template added on to SystemOne (new electronic record keeping) so that this information is captured across the borough for all service users."

CNWL NHS Foundation Trust

"The LFB has an adult safeguarding policy. LFB staff have received safeguarding training in the last twelve months. The LFB may need to consider providing modern day slavery, sexual exploitation and domestic abuse awareness for frontline operational staff in the borough. LFB engage in joint action days with the Met Police and partners with LFB safety officers and operational crew."

London Fire Brigade

Hillingdon SAB & Partner Agencies Summary of Achievements

"Prevent awareness training is delivered as part of mandatory adult safeguarding training, which is every three years. A train the trainer day was facilitated by the NHSE (London) Prevent lead for WRAP training. Twenty trust staff attended the training event which was well received. The percentage of eligible staff trained thereafter has significantly increased. The Trust is therefore actively working towards the target of 85% compliance. On-line training will also be made available".

The Hillingdon Hospital

"Trust Safeguarding Arrangements: The Executive Lead for Safeguarding Adults is the Executive Director of Patient Experience and Nursing, who is supported by the Deputy Nurse Director. There is a Head of Safeguarding Adults in post (RN), who is supported by the Safeguarding Administrator and Clinical Lead for Safeguarding (Elderly Care Consultant who performs this task as part of his role). The Trust works collaboratively with LBH to safeguard adults, actively engaging in the raft of strategic and operational meetings to address issues and improve services".

The Hillingdon Hospital

"MCA and DoLS: There is a continuous drive to robustly implement and improve the understanding of MCA and DoLS throughout the trust. This includes:

- Regular enhanced (Level 2) training for MCA and DoLS for identified trust staff.
- Monthly Nurse Induction sessions on MCA and DoLS and processes.
- Regular ward visits to assist staff in the application of MCA and DoLS in practice.
- The recent introduction of DoLS logs across all wards to ensure consistent approach.
- Strengthening of central database to track DoLS applications and authorisations.
- DoLS care plans to support nursing staff in practicing safe patient care in relation to DoLS".

The Hillingdon Hospital

Hillingdon SAB & Partner Agencies Summary of Achievement

Domestic Abuse Steering Executive

- In Hillingdon we are all too aware of the devastating consequences of domestic abuse and other forms of violence and abuse on victims and their children. On average there are in excess of 5000 domestic abuse crime and incidents recorded by the police in Hillingdon. Many more go un-reported. Tragically, the domestic abuse crime statistics also relate to 16/17 year olds who are in intimate partner abusive relationship too.
- The number of high risk domestic abuse cases being managed by the Domestic Abuse Multi-Agency Risk Assessment Conference (DA MARAC) has been increasing. In the last 12 months 329 cases (and increasing) have been referred to DA MARAC and at least 484 children have been part of those abusive households.
- A re-juvenated and re-focused Domestic Abuse Steering Executive is providing the governance, direction and leadership to preventing and tackling the many crimes and abuses associated with Violence Against Women and Girls including Domestic Abuse, Modern Day Slavery, Honour Based Abuse, Forced Marriage, Female Genital Mutilation, Sexual Violence and Stalking. This strategic group is supported by 5 operational delivery groups made up of a diverse range of local professionals who will soon be supported by independent members from the local community.

Hillingdon SAB & Partner Agencies Summary of Achievements

Domestic Abuse Steering Executive

The Steering Executive has developed an inclusive Domestic Abuse Strategy 2018 - 2021, which incorporates Violence Against Women and Girls. The DA Steering Executive has set out its Vision as;

'To preventing and eradicating all forms of violence and abuse against women, children and men in Hillingdon Borough and support those so victimised to achieve their full potential in life'

The work towards achieving this vision is underpinned by the 4 key priorities of;

1. Prevention and Early Intervention
2. Service Provision
3. Pursuing Perpetrators
4. Partnership Working

We have worked hard to listen to victims and survivors of domestic abuse and local statutory and voluntary sector professionals. This has allowed us to better shape:

- Our responses to domestic abuse
- Our understanding of the whole range of organisations and agencies providing support to victims/survivors and their children
- Our services to prevent domestic abuse and ensure early intervention to prevent the abuse worsening
- Our training provision to local multi-agency statutory and voluntary sector professionals
 - In the last years we have had 7 multi-agency training events focussed on domestic abuse and the wider subject of Violence Against Women and Girls, which has seen in excess of 430 professionals trained.
 - It is great to see that this cycle of regular training will continue.

London Borough of Hillingdon Adult Social Care Feedback

Making Safeguarding Personal is a key area of focus within Adult Social Care and the feedback from Service Users, Carers and staff alike is that it has been vital in capturing the voice of the adult and his/her representative.

One example is that of 35 year old Mr A, who was referred to Social Services upon disclosing threatening behaviour from an associate he had met through friends. The associate had begun to involve Mr A in taking cocaine and drinking, had begun to take over his flat and invite other drug users over the property. He restricted access in and out of the flat and became threatening when asked to leave by Mr A and his sister. Due to fear, Mr A was not able to return to this flat or the area.

Mr A was housed on an urgent basis in a Social Care commissioned step down flat. Through multi agency working with the Police and Housing colleagues, Mr A was successfully granted a management transfer by the Housing panel. Mr A was supported to bid for properties and was successful in quickly securing an ideal property which was ground floor and fully adapted. Mr A now lives nearer his sister. His overall mood significantly improved during the course of the enquiry and this was noted by all professionals and family members. Mr A and his sister were extremely happy with the outcome of the safeguarding enquiry and are optimistic about the future.

Another example is the case of a lady in her late 70s suffering with advanced dementia. She had a physical altercation with another dementia Service User that caused for her to sustain a broken hip. On investigation it was found that the service provider was unable to meet her needs any longer, but they had failed to review her needs and seek appropriate help. In relation to their experience of the Safeguarding process, the family were very grateful that somebody took the time to listen to what they had to say.

Safeguarding Adults Review

Section 44 of the Care Act 2014 places a duty on Safeguarding Adults Boards to arrange a Safeguarding Adults Review (SAR) in cases where an adult has died or experienced significant harm or neglect. In Hillingdon there is currently 1 SAR in the process of being conducted.

The Purpose of the SAR is to:

- Establish what lessons are to be learnt from a particular case in which professionals and organisations work together to safeguard and promote the welfare of adults at risk.
- Identify what is expected to change as a result, to improve practice.
- Improve intra-agency working to better safeguard adults at risk.
- Review the effectiveness of procedures, both multi-agency and those of individual organisations.

On conclusion of the SAR, an action plan will be drawn up to ensure that the recommendations of the findings are implemented. The Executive summary of each SAR and the full report will be available on the Safeguarding Adults Board website.

Safeguarding Adult Review (SAR)

Hillingdon Safeguarding Adults Board (SAB) commissioned the above SAR in January 2017. The report explores the care and treatment provided to two co-tenants, AB and CD, who shared a house for seven months, until CD stabbed AB to death in the house in November 2015.

AB was not receiving any services from either the local authority or the mental health trust. CD, however, had been known to the mental health trust for two and a half years, and had been admitted to psychiatric hospital twice during that time, the first admission lasting 19 months. He was subject to the Care Programme Approach (CPA) and had a care coordinator from the community mental health team throughout that time.

CD stabbed AB to death on 10 or 11 November 2015 at their accommodation, and has subsequently been detained in secure hospital care under the auspices of the Mental Health Act 1983.

Concerns arising from SAR:

- Housing allocation decision making
- Ongoing hostility between co-tenants
- Changes in staffing and handover process
- Inter-agency and inter-professional communication

Hillingdon Safeguarding Adults Board Priorities 2018 - 2019

Modern Day Slavery

Ensure professionals and public are aware of Modern day Slavery and work closely with agencies to eradicate it through guidance and robust referral mechanisms.

Domestic Abuse

Support the Domestic Abuse Executive in ensuring that the Domestic Abuse Strategy's aims and objectives are achieved. implemented.

Mental Capacity and Deprivation of Liberty

Ensure that good practice is embedded into service delivery, and refresher training is well attended.

Adult Grooming

To understand and map concerns, provide training to professionals and develop a referral pathway.

Adult Safeguarding Objectives

- Professionals to take a person centred and holistic approach to safeguarding.
- Advocacy for individuals who lack mental capacity or difficulty in decision making.
- Minimise repeat safeguarding issues.
- Robust risk assessment and management arrangements involving adults, their families and carers.
- Improving data analysis to measure outcomes.
- Increase engagement of the SAB with vulnerable adults.
- Ensure effective holding of agencies to account.

Good News Stories

Twitter - @HillingdonSAB

Our Twitter account can be found at the twitter-handle of @HillingdonSAB. From humble beginnings, we know have over 130 followers and counting! Swing by to catch important updates in adult safeguarding in Hillingdon and from other sources across the internet. Feel free to leave feedback about our website or any other function of the SAB via direct message.

Newsletter

That's right, the SAB has quietly resurrected its quarterly newsletter, bringing key information and developments around adult safeguarding to your inbox every 3 months. Previous editions can be found on the SAB website (see below), amongst the range of adult safeguarding information there. Got an important adult safeguarding event, training course or practice development that could be shared across the borough's safeguarding partnership? Send us a direct message on twitter or email zrowland@hillington.gov.uk - we will come right back to you.

SAB Website -

www.hillingdonsab.org.uk

Launched 12 months ago, the Hillingdon SAB website is being constantly updated with resources and information around adult safeguarding in the borough and wider adult safeguarding guidance. Our website has a range of helpful links and information for adults, professionals and carers around safeguarding issues, including an archive of this newsletter!

Good News Stories

Masterclass Sepsis Event

- Hillingdon SAB and Hillingdon CCG held a half-day Sepsis Awareness Event on Tuesday, 30.01.2018. This free event 'sold out' in 5 days and was an immense success, with over 120 professionals across a variety of disciplines coming to the Hillingdon Council Chamber to hear a range of expert speakers talk to the early identification, treatment and impact of Sepsis in children and older adults. Attendees included registered nurses, GP's, allied health professionals, home care providers, adult care home staff, members of the CQC Inspectorate, CNWL Deputy Director (Infection, Prevention & Control) and the Infection, Prevention & Control Lead for Hillingdon CCG, amongst many other leading figures in the field of Sepsis.
- Speakers included local GP's, paediatricians, geriatricians and updates from the National CDOP Coordinator and the NHS England Sepsis Clinical Lead. A powerful, emotive presentation was also given by Melissa Mead of the UK Sepsis Trust, who sadly lost her own 12 month old son to Sepsis in 2014.
- Sepsis has quietly overtaken the combined death toll of breast, bowel, prostate cancers and road traffic accidents combined last year - current figures suggest 44,000 people of all ages die of Sepsis each year and this is projected to rise towards 60,000 in the near future. Please be aware of Sepsis, where young children and older adults are at high risk and it can be difficult to spot amongst a range of seemingly innocuous symptoms.
- Feedback from attendees on the day was overwhelmingly positive; given the success of the event, planning is underway to repeat the process by June 2018 - keep an eye on this newsletter or www.hillingdonsab.org.uk for more information!

Feedback from the Sepsis Training:

"Great to hear a parent's view, moving, sad and inspirational. Her story really hit home and I will remember it forever."

"Would have liked the event to have been a full day."

"Fantastic explanation of the symptoms to look for."

Glossary

Acronym	Meaning
MARAC	Multi Agency Risk Assessment Conference
SAB	Safeguarding Adults Board
SAR	Serious Adult Reviews
MASH	Multi Agency Safeguarding Hub
CNWL	Central & North West London (Trust)
DoLs	Deprivation of Liberty Safeguards
LSCB	Local Safeguarding Children Board
DASH	Disablement Association Hillingdon
CCG	Clinical Commissioning Group
MAPPA	Multi Agency Public Protection arrangements
CR MARAC	Community Risk Multi Agency Risk Assessment Conference
ASC	Adult Social Care
CID	Criminal Investigation Department
DA	Domestic Abuse
ACP	Accountable Care Partnership
LeDeR	The Learning Disabilities Mortality Review
LAC	Local Area Contact
LFB	London Fire Brigade
CDOP	Child Death Overview Panel
MH	Mental Health
LBH	London Borough of Hillingdon
HCH	Hillingdon Community Health
DA	Domestic Abuse

ANNUAL COMPLAINT REPORT FOR HOUSING AND SOCIAL CARE SERVICES FOR 1 APRIL 2017 TO 31 MARCH 2018

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Ian Anderson - Business Manager, Complaints and Enquiries
Papers with report	Appendix A
Ward	All

HEADLINES

This report provides information and analysis of complaints and Members Enquiries received between 1 April 2017 and 31 March 2018 for Housing and Social Care Services and satisfies the requirements to publish annual information about complaints.

RECOMMENDATION

That the Committee notes the contents of the annual complaint report and provides any feedback as appropriate.

SUPPORTING INFORMATION

As detailed in appendix A.

Implications on related Council policies

A role of the Policy Overview Committees is to make comments and/or recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Provides assurance that complaints and Members' Enquiries are being processed in accordance with our published policies.

Financial Implications

There are no direct financial implications associated with this report.

Legal Implications

None

APPENDIX A

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

ANNUAL COMPLAINT REPORT FOR HOUSING AND SOCIAL CARE SERVICES FOR 1 APRIL 2017 TO 31 MARCH 2018

a. Housing Services (pages 6 to 16)

Informal complaints

- 47 fewer informal complaints received from 455 in 2016/17 to 408 in 2017/18.

Stage 1 complaints

- 45 more Stage 1 complaints were registered when comparing the 2017/18 figure of 170 with the same period in 2016/17 of 125. Of the 170 Stage 1 complaints, 13 were upheld, 32 partially upheld, 121 not upheld and 4 withdrawn. The average time taken to respond to a Stage 1 complaint is 7.80 working days, with 89% (152 of 170) complaints responded to within the 10 working day target.

Stage 2 complaints

- 2 fewer Stage 2 complaints when comparing the 2016/17 figure of 12 with the 2017/18 figure of 10. Of the 10 Stage 2 complaints, 4 were upheld, 2 partially upheld and 4 not upheld. The average time taken to respond to a Stage 2 complaint is 8.63 working days.

Stage 3 complaints

- 1 Stage 3 complaint was recorded during this period, it was responded to within 15 working days and upheld.

Investigation by the Local Government or Housing Ombudsman

- 20 complaints were investigated and considered by the Ombudsman, 1 was upheld, 2 partially upheld, 7 not upheld and in the other 10 the Ombudsman decided not to investigate.

Compliments

- Compliments are up from 19 for 2016/17 to 24 for 2017/18.

b. Children and Young Peoples Services (pages 17 to 24)

Informal Complaints

- 43 fewer informal complaints recorded when comparing the same period for 2016/17 of 103 with 2017/18 of 60.

Stage 1 complaints

- 20 more Stage 1 complaints were recorded when comparing the figure of 2016/17 of 33 with the 2017/18 figure of 53. The average time taken to respond to a Stage 1 complaint is 10.75 working days. 85% (45 out of 53) Stage 1 complaints were responded to within 10 working days.

Stage 2 and 3 Complaints

- Two Stage 2 complaint investigations were undertaken during this period - both were partially upheld.
- There were no Stage 3 investigations.

Local Government and Social Care Ombudsman (LGO)

- Seven complaints were considered by the LGO - 2 were upheld, 1 not upheld and they decided not to investigate in the 4 other enquiries received.

Compliments

- Compliments are up by 14 when comparing the same period in 2016/17 of 46 with 2017/18 of 60.

c. Adult Social Care (pages 25 to 31)

Informal Complaints

- 41 fewer informal complaints recorded when comparing the 2016/17 figure of 105 with the 2017/18 figure of 64.

Stage 1 complaints

- 19 more Stage 1 complaints were recorded when comparing the 2016/17 figure of 35 with the 2017/18 of 54. The average time taken to respond to a Stage 1 complaint is 10.48 working days. 81% (44 out of 54) Stage 1 complaints were responded to within 10 working days and 94% (51 out of 54) were responded to within our published target of 20 working days. 3 Stage 1 complaints were upheld, 11 partially upheld, 36 not upheld and 4 withdrawn or cancelled.

Local Government and Social care Ombudsman (LGO)

- The Ombudsman concluded 11 investigations - 2 were upheld, 3 partially upheld, 2 not upheld and 4 were not investigated.

Compliments

- 23 fewer compliments recorded when comparing the same period in 2016/17 of 79 with 2017/18 of 56.

d. **Members' Enquiries (ME)** (page 32)

- 8,502 MEs were recorded for 2017/18. This is 683 (7%) fewer than 2016/17 figure of 9,185. The service areas with the highest number of MEs is Waste (3,340), Anti-Social Behaviour (1,273) and Planning (1,227) Services.

BACKGROUND INFORMATION

1. **The Council's Vision**

The Council's vision is about 'putting our residents first'. Feedback in the form of complaints and compliments is seen as a very important source of information from residents about the quality of services and care provided by the Council. In cases where something has gone wrong, we are committed to putting it right and ensure that it does not happen again.

2. **What is a Complaint?**

In general terms a complaint can be considered as:

"an expression of dissatisfaction by telephone, personal visit or in writing, about the standard of service, actions or lack of action by the council or its staff affecting an individual or group of customers."

3. **How Can People Complain?**

Complaints can be made in person, by telephone, in writing, by fax, via our website or email, either directly to the service area, Contact Centre or to the Complaints and Enquiries Team.

4. **Remedies for redress**

The purpose of redress is to remedy the injustice or hardship suffered and where possible to return a complainant to the position they would have been before the situation went wrong. Types of redress include:

- an apology;
- providing the service that should have been received at first;
- taking action or making a decision that the Council should have done before;
- reconsidering an incorrect decision;
- improving procedures so that similar problems do not happen again; and
- if after an investigation by council staff or the Ombudsman, it is concluded that as a result of maladministration there is no practical action that would provide a full and appropriate

remedy or if the complainant has sustained loss or suffering, financial compensation may be the most appropriate approach.

5. Mediation

For some complaints it will not be appropriate, or possible, to resolve a complaint through the complaint process - particularly where there has been a breakdown in the relationship between the service provider and the service user or where emotions are running high. In such situations the Business Manager, Complaints and Enquiries will consider whether mediation is an option that should be considered. If both parties are agreeable, mediation by an independent mediator allows both parties to come together to see if they can reach a solution through dialogue.

BACKGROUND DOCUMENTS

Annex 1 – HOUSING SERVICES

Housing complaints are managed in line with the Council's Corporate complaints procedure. This procedure operates as follows:

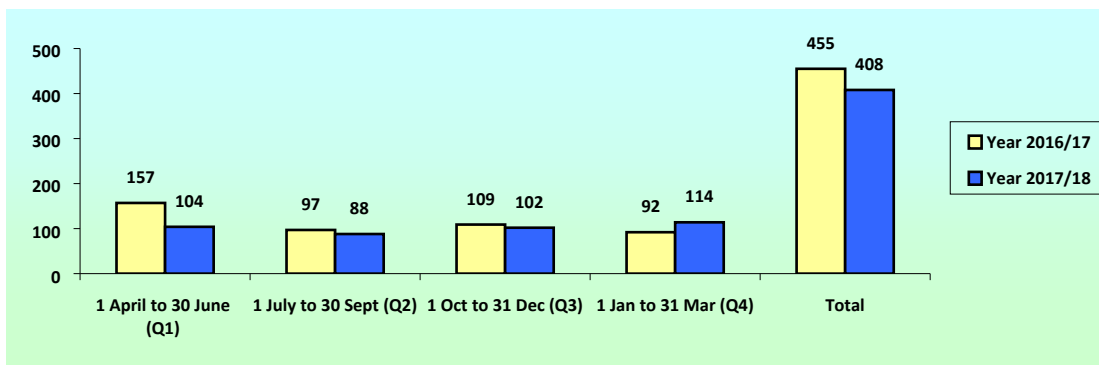
- The Informal Complaint (service request).
- Stage 1 – response from a Deputy Director or Head of Service.
- Stage 2 – response from the Deputy Chief Executive and Corporate Director of Residents Services
- Stage 3 – response from the Chief Executive of the Council
- Stage 4 - Designated Person for the Council
- Local Government or Housing Ombudsman

A more detailed explanation of how the complaint procedure operates, the main complaint themes and statistical data for each stage of the process is provided below.

1. INFORMAL COMPLAINTS

The feedback we have received from residents indicate that most want action to resolve their concerns on the spot by discussing the problem with an officer/manager rather than going through the more formal complaint route. If we can resolve a residents issue in this way we will do so, immediately. We will continue to take this approach, wherever possible.

Informal complaints (service requests)



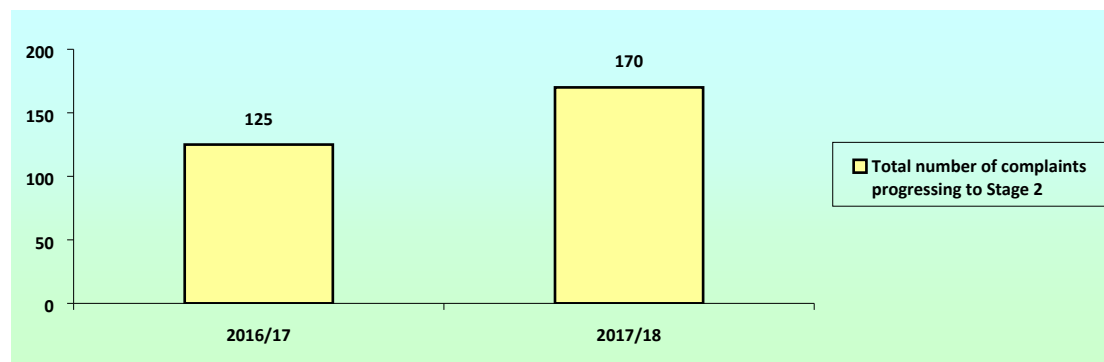
- 10% (47) fewer informal complaints received from 455 in 2016/17 to 408 in 2017/18.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

2. STAGE 1 COMPLAINTS

Total number of Stage 1 complaints



- 36% (45) more Stage 1 complaints were registered when comparing the 2017/18 figure of 170 with the same period in 2016/17 of 125.

Table 1 – Outcome of complaints

Service Area	Total number	% responded within 10 working days	Upheld	Partially upheld	Not upheld	Withdrawn
Homeless Prevention	71	97%	0	8	61	2
Repairs including Heating	65	82%	7	19	37	2
Programme and Asset Management	9	78%	2	2	5	0
Tenancy Services	25	88%	4	3	18	0
Total	170	89%	13	32	121	4

- Of the 170 Stage 1 complaints, 8% (13) were upheld, 19% (32) partially upheld and 71% (121) not upheld.
- 97% of the Homeless Prevention Stage 1 complaints were not upheld because the majority of these were challenges of the Council's Social Housing Allocation Policy.

Table 2 – Time taken to respond to a complaint at Stage 1 (working days)

	2016/17	2017/18
Average time taken to respond to a complaint	8.26	7.80
Target	10	10
Variance	-1.74	-2.2

- The average time taken to respond to a Stage 1 complaint is 7.80 working days against the target of 10 working days.

Table 3 - Number and % of complaints responded to within 10 working days

Period	Total number of complaints	Number responded to within 10 working days	% responded to within 10 working days
2016/17	125	99	79 %
2017/18	170	152	89 %

- 89% (152 out of 170) Stage 1 complaints were responded to within 10 working days.

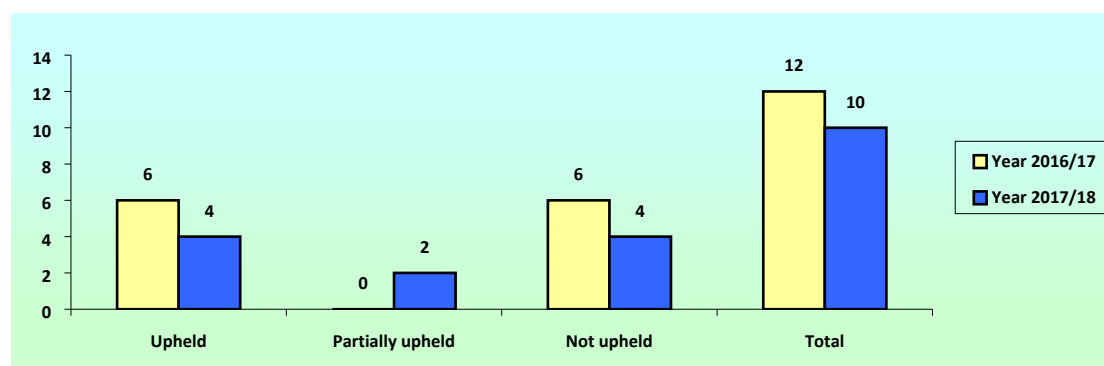
3. STAGE 2 COMPLAINTS

Table 4 - Total number of complaints progressing to Stage 2

Period	Total number
2016/17	12
2017/18	10

- The number of Stage 2 complaints remains low as officers apply the revised Corporate complaints procedure i.e. to escalate a complaint direct from Stages 1 and/or 2 to the Ombudsman where it is felt that the decision cannot be overturned through the complaint process.

Outcome of complaints



Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

The table below provides a summary of the ten Stage 2 complaints.

Complaint details	Decision at Stage 2
<p>Complaint ref: 5960020 Mr X sought compensation for heating costs and inconvenience for a poorly fitted threshold to his back door sometime between 1999 and 2017.</p>	<p>Upheld The Council accepted that the back to front threshold was the cause and agreed to renew the door set. Mr X was offered a sum of money in compensation by way of redress.</p>
<p>Complaint ref: 6111551 Mrs X was unhappy with the response she received at Stage 1, namely that her property was left unsafe, that an offer had not been made to re-decorate her hallway and that the offer of compensation was insufficient.</p>	<p>Upheld We apologised that when an Asbestos board was removed the gap was not filled in by the contractor, we agreed to re decorate part of the hallway where tape we had used had damaged the paintwork. We offered her compensation for the additional electricity Mrs X had used whilst her boiler was being replaced.</p>
<p>Complaint ref: 6399081 Mr X sought compensation because his boiler was not working from 13 December 2017 until 4 January 2018.</p>	<p>Upheld We apologised for the time taken to resolve this issue. We explained that as the part was no longer available, a new boiler was installed. No compensation was paid.</p>
<p>Complaint ref: 6399731 Miss X complained about the number of visits it took to resolve her boiler problems.</p>	<p>Partially Upheld We explained that we do not pay compensation for engineers having to attend to undertake a repair and the requirement of the tenant or someone on their behalf to give access to the property. We apologised for the time it took to complete the repair.</p>
<p>Complaint ref: 6498977 Ms X complained about the number of visits it took to resolve her boiler problems.</p>	<p>Partially Upheld We apologised for the number of visits it took to complete the repair.</p>
<p>Complaint ref: 6367489 Mr X complained that on 19 December 2017 he reported his boiler as not working and that it was not fixed until 26 January 2018. He wanted</p>	<p>No Upheld Mr X was informed that when he first reported that the boiler was not working, it was repaired and left in working order on 23 December. When on 8 January 2018 he reported that the boiler would not switch on, an appointment was</p>

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

£3,000 in compensation.	arranged on a date convenient to Mr X when the fault was identified and fixed on 26 January 2018. His claim for compensation was rejected.
Complaint ref: 6169222 Mr X complained that when he moved into the property was not redecorated as part of the void works.	Not Upheld Mr X was informed that the redecorating of properties is not part of the Minimum Lettable Standard (MLS). The current MLS has been in place since 2013 and the Voids Team is tasked to ensure that all empty properties meet this standard.
Complaint ref: 6210141 Mr X complained that the property was not ready for it to be let to him and that electrical work needed to be done two weeks after he moved in.	Not Upheld Mr X was informed that the property met the Minimal Lettable Standards and that it had passed the electrical test 2 weeks before he moved into the property. We advised that we could not wave his rental liability.
Complaint ref: 6399769 Mr X complained that the Council was not properly managing a small repair.	Not Upheld Mr X was advised that it was proving difficult to find a manufacturer to make and fit a new rodding eye for the cast iron soil pipe in the garage. Officers were progressing the work as quickly as they could and had now found a company who were prepared to do this work.
Complaint ref: 6168012 Mrs X complained about the handling of her Right to Buy application.	Not Upheld Mrs X was informed that there was no delay in processing her Right to Buy application. We confirmed that her offer had been received and in accordance with our practices, her application was going through the verification process.

Table 5 – Time taken to respond to a complaint at Stage 2 (working days)

	2016/17	2017/18
Average time taken to respond to a complaint	11.16	8.63
Target	10	10
Variance	+ 1.16	- 1.37

- The average time taken to respond to a Stage 2 complaint is 8.63 working days against the target of 10 working days.

4. STAGE 3 COMPLAINTS

The table below provides a summary of the one Stage 3 complaint dealt with during 2017/18.

Complaint details	Decision at Stage 3
--------------------------	----------------------------

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

<p>Complaint ref: 5665543 Ms X complained about damp in her property and that officers were not doing enough to address this issue.</p>	<p>Upheld Ms X was informed that the apology offered for the length of time taken to deal with the mould/damp issue and the offer to allow her to redecorate the property with the funds that would have been used by the Council to redecorate the property, is considered to be reasonable and proportionate redress.</p>
--	--

5. INVESTIGATION BY THE COUNCIL'S DESIGNATED PERSON

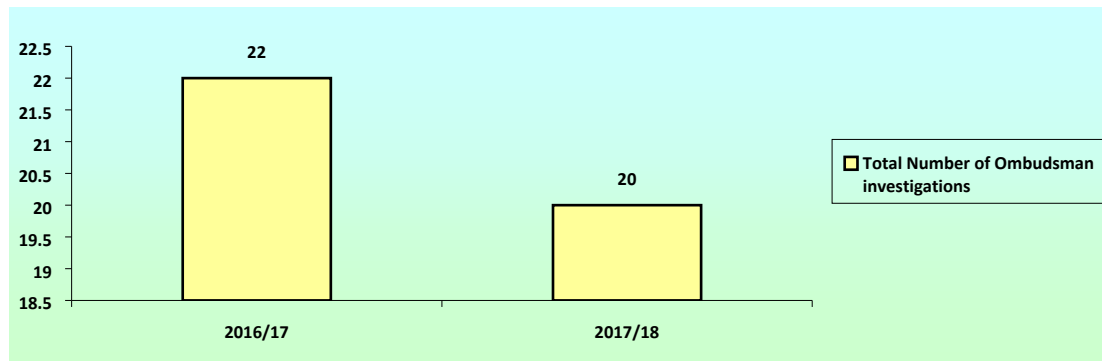
If a complaint is about a tenancy, leasehold, or other housing management issue, a complainant can refer their complaint to a 'Designated Person' to see if they can help resolve the complaint. If the 'Designated Person' cannot resolve a complaint or if 8 weeks have elapsed since the Stage 3 response, a complainant can then complain to the Housing Ombudsman.

- There were no investigations by the Council's Designated Person - Councillor Corthorne.

6. INVESTIGATIONS BY THE OMBUDSMAN

Where it appears that a Council's own investigations have not resolved the complaint, the complainant is entitled to refer their complaint to the Ombudsman and at any stage of the complaint process. However, the Ombudsman normally refers the complaint back to the Council if it has not been considered fully using local procedures first.

Total number of Ombudsman investigations



The findings and decision of the LGO are set out below.

Complaint details	Ombudsman decision
<p>Complaint ref: 5846362 Mr X complained that the Council failed to award a contract for shared ownership properties in accordance with procedure. He stated that the Council failed to achieve value for money and failed to treat all</p>	<p>Upheld The Ombudsman determined that the Council was at fault when it failed to notify Mr X that it had rejected his application from a tendering process because of a faulty poor credit score. It should have given him the opportunity</p>

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

applicants fairly and equally.	to correct it. However, even if the Council had done this, he would not have been awarded the contract.
<p>Complaint ref: 5084390</p> <p>Mr X complained about the Council's handling of his complaint about the water pressure of his shower, a damaged fence and the absence of a gate to the garden at the rear of his property.</p>	<p>Partially upheld</p> <p>The Ombudsman determined that there was no maladministration by the Council with respect to its handling of the shower complaint. However, it felt that there were instances of service failure in relation to the handling of his fencing complaint.</p>
<p>Complaint ref: 6015449</p> <p>Ms X complained that the Council cancelled her housing application despite her having been homeless for four years and her son, Mr Y, having mental health issues.</p>	<p>Partially Upheld</p> <p>The Ombudsman found that the Council was not at fault when it removed Ms X from its housing register. However, the Council was at fault when it provided confusing information to Ms W by suggesting she could not re-apply but this fault did not cause an injustice.</p>
<p>Complaint ref: 5966927</p> <p>Ms X complained that the Council refused to accept she has a local connection to the Borough, despite providing evidence to show this. She said she could not provide any further proof because she lost all her documentation in a house fire. Ms X also said that her current temporary housing is unsuitable because her child has Autism.</p>	<p>Not Upheld</p> <p>The Ombudsman determined that the Council had considered all relevant information and is not satisfied Ms X qualifies for its local connection housing priority. This is a decision the Council is entitled to take and the Council is not at fault.</p>
<p>Complaint ref: 6254534</p> <p>Mr and Mrs X complained that the Council unreasonably refused to accept their application for re-housing.</p>	<p>Not Upheld</p> <p>The Ombudsman determined that there was no fault in the way the Council applied its Social Housing Allocations policy.</p>
<p>Complaint ref: 5652970</p> <p>Ms X complained that the Council had wrongly removed her from its housing register because she had not provided sufficient evidence of having lived in the Borough for 10 years and that it wrongly temporarily removed her from the housing register when she mistakenly ticked a box to say she held savings of £30,000 or more.</p>	<p>Not Upheld</p> <p>When the Council reviewed the details of Ms X's housing register application it noticed a discrepancy in the accuracy of information relating to requirements for a 10 year local connection. The Council asked Ms S to provide additional information about this. When she did not provide this the Council removed her from its housing register. There is no fault in the Council's actions.</p>

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

<p>Complaint ref: 6205695 Mr X complained about the Council's handling of his report that the over grown trees in his neighbour's garden had caused his fence to fall down.</p>	<p>Not Upheld The tenants' handbook confirms that the Council will only carry out fencing works in very limited circumstances, none of which were met in this case. It was therefore reasonable for the Council to confirm that it would not repair or replace the fence panels.</p>
<p>Complaint ref: 6377069 Ms X complained that the Council failed to consider her circumstances when it refused to include her on the Council's housing register.</p>	<p>Not Upheld The Ombudsman found no fault in how the Council considered Ms X's housing application.</p>
<p>Complaint ref: 6305605 Mr X complained that the Council refused to provide him with accommodation under Section 17 of the Children Act.</p>	<p>Not Upheld The Ombudsman found that the Council was not at fault when it stopped providing Mr X with accommodation under section 17 of the Children Act as the Council had carried out a full assessment. There is no evidence of fault by the Council.</p>
<p>Complaint ref: 6522232 Ms X complained the Council failed to consider the circumstances when refusing to include her on the Council's housing register.</p>	<p>Not Upheld The Ombudsman found no evidence of fault in how the Council considered Ms X's housing application</p>
<p>Complaint ref: 6046205 Mrs X complained that the Council removed her from its housing register even though she had been waiting for five years and she now had three children living in a one bedroom property.</p>	<p>Did not investigate The Ombudsman advised that they would not investigate Mrs X's complaint the Council had removed her from its housing register. Further consideration of the complaint is unlikely to find fault by the Council.</p>
<p>Complaint ref: 6049896 Mr X disagreed with the Council's decision to remove him from the housing register because he had not lived continuously in the Borough for 10 years.</p>	<p>Did not investigate The Ombudsman advised that they would not investigate this complaint as there was insufficient evidence of fault by the Council.</p>
<p>Complaint ref: 6339682 Mrs X disagreed with the Council's decision not to allow her son to join the housing register.</p>	<p>Did not investigate The Ombudsman determined that there was insufficient evidence of fault by the Council.</p>
<p>Complaint ref: 5654934 Mr X complained that the Council would not let him join the housing register even though he provided all</p>	<p>Did not investigate The Ombudsman determined that there was insufficient evidence of fault by the Council.</p>

the information asked of him.	
Complaint ref: 6247810 Mr X disagreed with the Council's decision to allow him to join the housing register.	Did not investigate The Ombudsman determined that there was insufficient evidence of fault by the Council.
Complaint ref: 6050700 Mr X complained about the Council's decision to reject his homeless application in 2015 because he was considered non-priority homeless. He says he was street homeless for a month afterwards as a result.	Did not investigate The Ombudsman stated that it would not exercise his discretion to investigate this complaint. It was received outside the normal 12-month period and it was reasonable for Mr X to seek a review or court remedy at the time.
Complaint ref: 6305754 Ms X complained that the Council did not keep a proper record of her repayment of a loan in 2015, causing her distress and inconvenience.	Did not investigate The Ombudsman did not investigate this complaint because they could not achieve a worthwhile outcome for the complainant.
Complaint ref: 5850347 Ms X complained about the decision to serve a Notice to Quit.	Did not investigate The Ombudsman did not investigate this complaint as the issue of a Notice to Quit is outside her jurisdiction.
Complaint ref: 6178350 Mrs X complained that she had been left in significant arrears on her rent account with the Council because it had decided to reclaim an overpayment of Housing Benefit from her. Mrs X is also unhappy with the advice she had been given by the Council and the attitude of its staff towards her.	Did not investigate The Ombudsman's view was that it was reasonable to expect Mrs X to appeal the Housing Benefit decision at a Tribunal.
Complaint ref: 6560244 Ms X complained about the process for extending leases insofar as ' <i>two different households ... could receive vastly different costs and then make an offer and experience vastly different outcomes</i> '.	Not within jurisdiction The Ombudsman determined that the Council's handling of her application to extend her lease is not within the Ombudsman's jurisdiction to consider any further. She was advised to seek advice from the Leasehold Advisory Service.

7. LEARNING FROM COMPLAINTS

Communication

There was one instance where the complainant complained because they had sent in documentation but we did not acknowledge receipt, two instances where people complained

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

about incorrect information given, four instances where people complained about delays in responding to enquiries or the delay in beginning work, and one instance where a caller felt that their call was dealt with insensitively.

Recommendations:

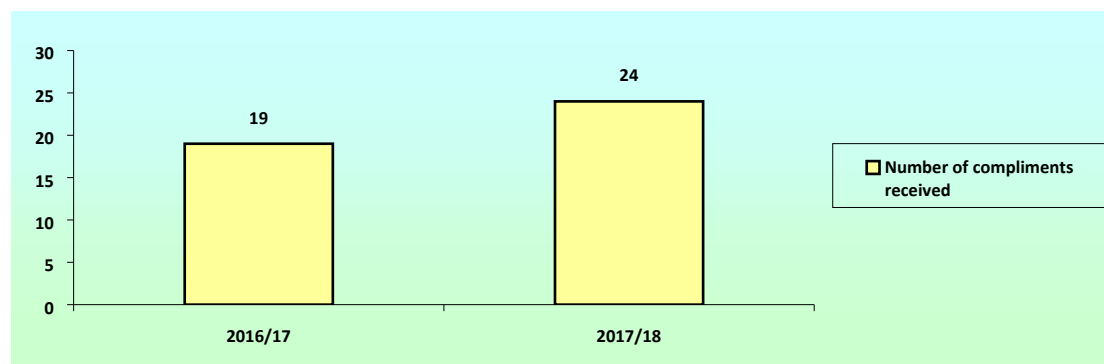
- officers were reminded of the need to keep our promises i.e. if we say we will respond by a particular date we must do so;
- the need for accuracy of information given particularly appointment dates/times and if this is not going to be met we need to be proactive and tell a client if an appointment is going to be changed or if the operative is going to be delayed; and
- the need to convey information sensitively particularly if it is a negative decision i.e. not going to allow a person to join the housing register or offer social housing.

Poor workmanship

In one instance, a complainant complained that the threshold to his back door had been installed the wrong way around between 1999 and 2009. We apologised for our error and offered a sum of money in compensation.

8. COMPLIMENTS

Number of compliments received



Here's what some people have said:

"I thank you and the officers involved, particularly Z and Y, for the help given to Mr F and ensuring that there will be a smooth transition for him from the family home to a one bedroom property".

"I was just called to HSR by a probation officer who was representing their client. The probation officer heaped nothing but praise for B, particularly emphasising that even though the outcome was a negative one for the client, the way B conducted the interview, his interactions with a very challenging client and the way he explored every possible option to assist was beyond what he would have expected. He also complimented B's problem solving skills and his professionalism throughout the process."

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

"As well as making a complaint I would like to make it known to the Head of the Housing Department how incredibly kind and helpful a young man called G in your call centre is. I spoke with G on Friday 21 April 2017 and during last week. He is the nicest member I have spoken to on the Housing Line during the last 2 months and I feel he should be complemented."

"I wish to draw your attention to some excellent work carried out by T who, over the recent period - including the Bank Holiday, dealt with a number of difficult and complex matters resulting from plumbing leaks, air-locks and mains water supplies, whereby the residents in a block of three flats in X Close, Uxbridge, were without water; in one case for almost two weeks (or perhaps more)! Suffice to say that T and the team under him were unstinting in their efforts given the problems encountered and bottled water was provided to supply drinking water. I was kept informed throughout. I received a message from T today to inform me that at last all three flats have had their normal water supplies restored."

"Can I just say how happy I am with A, the maintenance man from the Council. He knew what the problem was straight away and fixed it immediately. He was friendly, professional and his workmanship was nothing short of amazing. He could teach xxxx a thing or two. Also the apprentice H was equally as good and will be an asset to your team. They came to my home that was quite manic that day with a friend of my 8 year old and this friend has Down's Syndrome - they were both brilliant around him and tried to keep noise and disruption to a minimum and cleaned up after themselves. Amazing work and amazing staff I can't tell you enough how pleased I am."

Annex 2 – CHILDREN AND YOUNG PEOPLES SERVICES

The Complaint Procedure

Complaints made by children or on their behalf are governed by the Children's Act 1989, Representations Procedure (England) Regulations 2006 (Statutory Instrument 2006 No. 1738). This sets out the three stage complaint procedure that Local Authorities are required to follow when dealing with complaints made by for example any child or young person, any local authority foster carer, children leaving care, etc. Hillingdon's procedure operates as follows:

- The Informal Complaint (service request).
- Stage 1 – Local Resolution.
- Stage 2 – Independent Investigation by two people (Investigating Officer and Independent Person).
- Stage 3 – Review Panel.
- Local Government and Social Care Ombudsman.

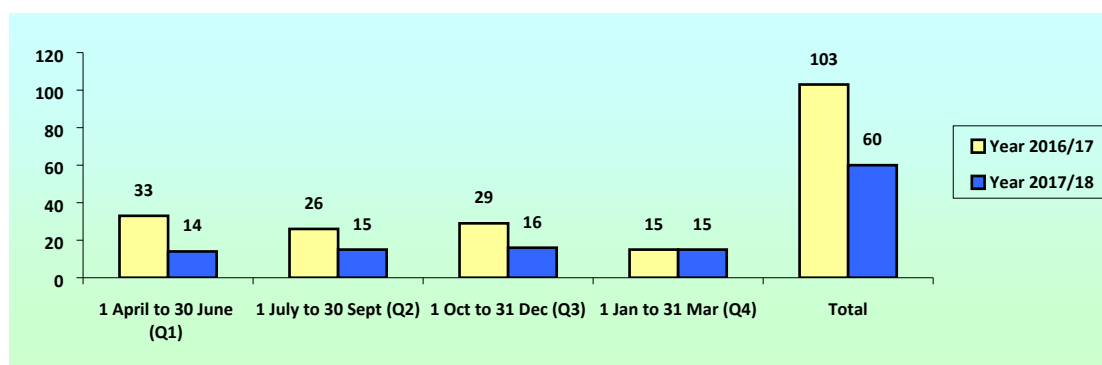
A more detailed explanation of how the complaint procedure operates, the main complaint themes and statistical data for each stage of the complaint process is provided below.

1. THE INFORMAL COMPLAINT

The feedback we have received from residents indicate that most want action to resolve their concerns on the spot by discussing the problem with an officer/manager rather than going through the more formal complaint route. If we can resolve a residents issue in this way we will do so, immediately. We will continue to take this approach, wherever possible.

1. THE INFORMAL COMPLAINT

Informal Complaints received – (service requests)



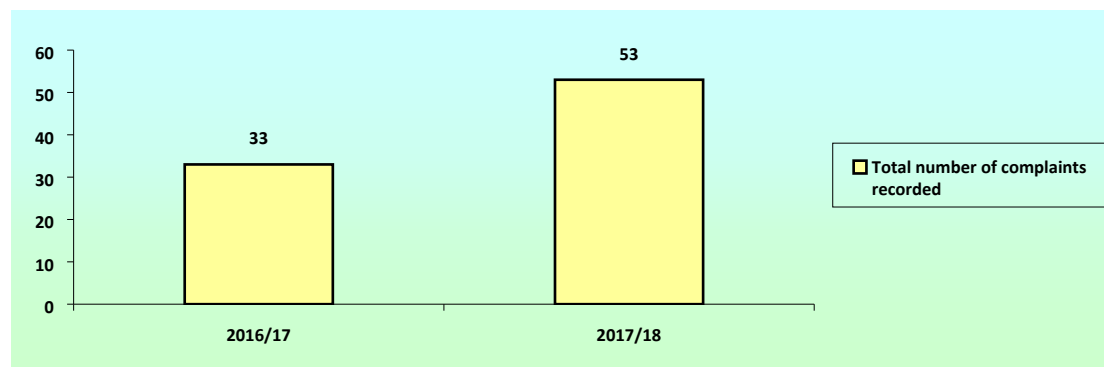
Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

42% (43) fewer complaints dealt with by way of service requests when comparing 2016/17 figure of 103 with the 2017/18 figure of 60. There is no apparent reason for this as informal complaints are still being dealt with in the same way as 2016/17.

2. STAGE 1 – LOCAL RESOLUTION

Total number of complaints recorded



Stage 1 complaints are up 61% (20) when comparing the 2016/17 figure of 33 with the 2017/18 figure of 53. Volumes of complaints remain low.

Table 6 – Complaints by service area

Service Area	Total number	% responded within 10 working days	Upheld	Partially upheld	Not upheld	Withdrawn
Adoption and Fostering	3	66 %	0	1	1	1
Early Intervention	11	73 %	0	1	9	1
Children in Care	2	100 %	1	1	0	0
Children Social Work	17	94 %	2	3	11	1
Children with Disabilities	2	50 %	0	1	1	0
Leaving Care	8	78 %	1	0	7	0
Safeguarding	2	50 %	0	0	2	0
Triage	8	83 %	0	3	5	0
Total	53	85 %	4	10	36	3

Table 7 – Time taken to respond to a Stage 1 complaint (working days)

	2016/17	2017/18
Average time taken to respond to a complaint	10.63	10.75
Target	10	10
Variance	+ 0.63	+ 0.63

The average time taken to respond to a Stage 1 complaint is 10.75 working days against our target of 10 working days. This is disappointing and an area that we are working on to improve for 2018/19.

Table 8 - Number and % of complaints responded to within 10 working days

Period	Total number of complaints	Number responded to within 10 working days	% responded to within 10 working days
2016/17	33	25	76 %
2017/18	53	45	85 %

45 (85%) of Stage 1 complaints were responded to within the 10 working day target - a slight improvement from 2016/17.

3. STAGE 2 INVESTIGATIONS

A Stage 2 investigation is conducted by an Investigating Officer (IO) and Independent Person (IP) with specialist skills and knowledge of the Children's Act. The Council has to pay the IO and IP an hourly rate for their professional services as well as travel expenses. The timescale to conclude a Stage 2 investigation is set by statute at 25 working days but this may be extended to a maximum of 65 working days.

There were two Stage 2 investigations during this period. The findings and the decisions reached are set out below.

Complaint details	LGO decision
Complaint ref: 6330652 Mr X complained about the changes of social workers, that he had not received any help with his Asylum application and that his housing situation had not been addressed.	Partially Upheld We apologised for the changes in social workers and accepted that this was not ideal. We explained to Mr X that his Personal Advisor had been liaising with the Home Office and had requested that they process his application as soon as was possible. Mr X was informed that our records had shown three properties offered to him but these had all been declined by him on the basis that the room was not big enough.
Complaint ref: 5562697 and	Partially Upheld

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

<p>5770426 Mrs X complained about delays and poor service in providing adaptations to support her son at home, that she was not being supported by social services and that her son should be placed in a residential care.</p>	<p>We apologised that officers did not employ a more robust approach with Mrs X when she failed to respond to enquiries. All the other concerns raised were not upheld.</p>
--	---

4. STAGE 3 INVESTIGATIONS

There were no Stage 3 investigations during this period.

5. INVESTIGATION BY THE LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN (LGO)

Seven complaints were considered by the Ombudsman during this period. The findings and decision of the LGO is set out below.

Complaint details	LGO decision
<p>Complaint ref: 4806464 Ms X complained of fault in the Council's handling of the care of her daughter under section 20 of the Children Act 1989.</p>	<p>Upheld The Ombudsman determined that there was fault by the Council because of a delay in undertaking a maternity test. The Council agreed to pay Ms X compensation to remedy the injustice she suffered.</p>
<p>Complaint ref: 6064222 Mrs X complained about the way the Council had dealt with her concerns for her adoptive daughter and that the Council had not carried out a proper assessment to ensure that her daughter was receiving appropriate care and treatment while she is a looked after child.</p>	<p>Did not investigate The Ombudsman determined that the complaint had been referred to her too early and asked that the Council write to Mrs X to advise her of her right to a Stage 2 complaint investigation, if she wishes.</p>
<p>Complaint ref: 5770426 Ms X complained that the Council had delayed in responding to her complaints and did not respond to her request for a Stage 2 investigation.</p>	<p>Did not investigate The Ombudsman determined that the Council had demonstrated it was considering Ms X's complaints at Stage 2 of the statutory children's complaints procedure. The Ombudsman discontinued her investigation.</p>
<p>Complaint ref: 6235966 Ms X's complained that the Council failed to provide her family with support, and wrongly</p>	<p>Did not investigate The Ombudsman did not investigate Ms X's complaint about children's services' involvement with her family, because these</p>

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

removed her children from her care and placed them with their father, so he was able to alienate them from her and the rest of her family.	are issues she could have raised in court during proceedings to decide where her children should live.
Complaint ref: 6152292 Ms X complained that the Council did not keep a proper record of her repayment of a loan in 2015, causing her distress and inconvenience.	Did not investigate The Ombudsman did not investigate this complaint because he could not achieve a worthwhile outcome for the complainant.
Complaint ref: 5803061 Mr X complained that a child protection case conference decided that his son needs a child protection plan. Mr X says the decision is flawed because he was not at the meeting and that the police fabricated evidence.	Did not investigate The Ombudsman did not investigate Mr X's complaint because he could make his disagreement with the conference decision known via the chair or the Council. The Council's social workers have not caused Mr X an injustice.
Complaint ref: 6064222 Mr X complained that the Council would not provide the information he needs from children services.	Did not investigate The Ombudsman informed Mr X that they would not investigate this complaint because he can raise the issue in court.

6. LEARNING FROM COMPLAINTS

Communication

There were some instances where people complained about the way they were spoken to (insensitive), the information given to them was misleading or that they were getting differing information, not informed of meetings and that we did not keep to our promises (calling someone on a landline when they expressly asked to be called on their mobile phone).

Recommendations:

- officers should keep written notes of contact with people; and
- consider whether it is appropriate to follow up a conversation with a written communication summarising what was said.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

Errors

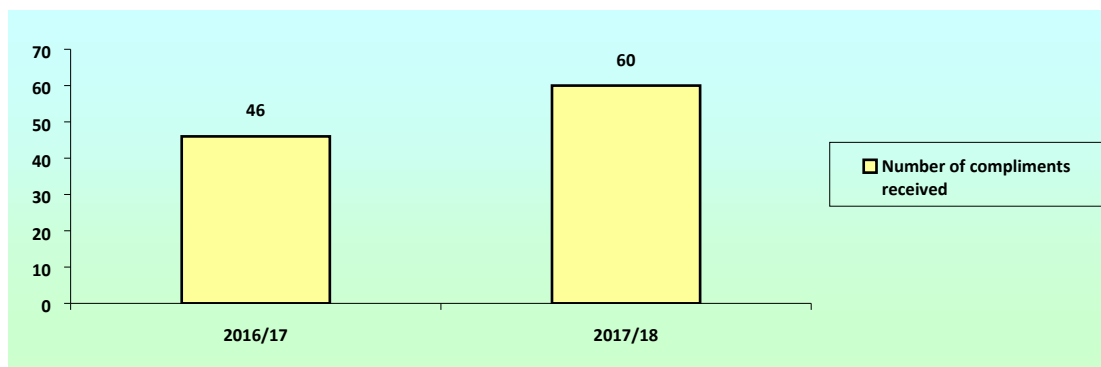
In a few of the complaints, the complaint was about factual inaccuracies contained within a report or an assessment such as omissions, incorrect names/dates, different names, etc.

Recommendations

- avoid cutting and pasting; and
- assessments and reports to be checked by a manager before it is sent.

7. COMPLIMENTS

Number of compliments received



Compliments are up 30% (14) when comparing the same period in 2016/17 of 46 with 2017/18 of 60.

Here's what some people have said.

"Just to let you know that X is doing AMAZINGLY well and is thriving! He is the most precious little being and we love him to bits Y. What a gift!!! having X in our lives is like Christmas every day for us! During the adoption process the Hillingdon adoption team went through a lot of transitions in terms of managers and social workers etc., but as soon as you came on the scene we noticed a HUGE difference in the way things were run. Everything seemed to work so much more efficiently, effectively and professionally, and most importantly, with care. Thank you Y."

"A special thank you to Y - he was our 7th social worker and the most proactive, dedicated, professional and caring of all the previous social workers before him. He too made a huge impact in terms of getting us matched in very quick time. He never gave up and remained in constant contact with us throughout the time he was our social worker and provided the most amazing support. Y is extremely responsive and very punctual and delivers on what he promises. Such dedication is rare. We will always hold a special place in our hearts for Y, and all of the Hillingdon team, including A, B and C. We will never forget what you have done for us, for our family. You have one of the most important jobs out there - the work you do matters. On the days when you are burnt out, and questioning if it does, take a few moments and think about all the children you have successfully placed in a loving, caring and nurturing home. Thank you from the bottom of our hearts. You have enriched our lives in ways you will never know."

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

"Thank you so much for sharing the photo of X. Mum sent this to you, rightly proud of the fine young man that her son has grown into with your support and involvement. I am aware that you have been integral in X's journey from a socially isolated boy who was psychologically unable to attend school at all, through to his accessing a suitable place at XXXX, now able to socialise and eat in public. Mum has shared his Prom photo, news of his Year 12 positive plans, news of a girlfriend and ambition to become a mechanic. This is truly uplifting."

*"Thank you Z. Your impact and influence with vulnerable young people in general and Y in particular through Mum's testimony never ceases to impress me. I am writing today, following the Case Conference I attended at Hillingdon Civic Centre. I am a Clinical Nurse Specialist with Hillingdon CAMHS, and have been working with a family (JM) with A as the named social worker. I mentioned in the meeting, and wanted to say again in written feedback, that Z has been an **exceptional** support and resource. I have consistently been able to reach her for consultation and feedback both via phone and email. Z has always provided her time, experience and thinking when considering the ongoing work for this family. I have been genuinely impressed each time I have spoken with her, and really do feel that the progress this family has made is such a short time is the result of her thoughtfulness, drive and persistence. I am sure you get many emails with less pleasant feedback, and I really wanted to share just how brilliant she has been."*

"My name is Z and sadly my daughter fell in love with an animal and broke the law. I was with her in court when they said it might be able to be transferred to Hillingdon yot. I rang yot as soon as we got out of court and spoke to a very helpful young man who gave my number to Z. From the moment she rang me to say that she would work with A it felt like a weight had been lifted from my heart. She helped A understand that she was in a very unhealthy relationship. She made her understand the bigger picture of what she had done. Z helped me to understand that myself and my husband were not at fault for what she had done. I never thought this would happen to one of my kids as I work for service and should have picked up the signs. A started the Princes Trust Team Programme and Z was so accommodating with A's time table and juggled her diary so that A to come to yot. Z has totally changed her life around. She has got an apprenticeship at a nursery and has met a young man who is her age and in full time work and comes from a happy close nit family. She has got rid of her so called friends. She has said sorry to my friends and family for the upset she caused. It has been a very long hard year but A is a success story. Z should take credit for this because she has been amazing. I could never thank her for all the hard work she has done. She is a credit to your team. Please feel free to pass my email onto anyone that may be interested in a Hillingdon yot success story."

"We would like to THANK YOU ever so much for all your help and support regarding our son. It means a lot to us and there is no word's to say how happy and exited we are for B to start his new school. We both strongly believe that B will make a lot of progress during his education at SSS School."

Now that the children have completed the programme I have asked them to complete the Rosenberg Self-Esteem questionnaire which I gave them prior to starting and this is what I used to identify the children. The results show that there has been an improvement from all the children with 10/12 of the children now within 'the normal range' whereas before they were below suggesting low self esteem. The two children who haven't scored 'within the normal range' are now much closer to it and have improved in the areas that were low last time. The programme was very well run and has clearly had a positive impact. The children all appear more confident

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

in themselves and the ones that attended the awards ceremony were really excited and keen to share what had happened with their friends. I'd like to thank you and everyone who led the sessions. The children have really benefited and once again it has made a real impact.

8. BENCHMARKING AGAINST OTHER LOCAL AUTHORITIES

Table 9 - Comparative benchmarking data on how Hillingdon compares against other neighbouring Local Authorities.

Local Authority	Total number of Stage 1 complaints	Total number of Stage 2 complaints	Total number of Stage 3 complaints	Total Number of Ombudsman investigations
Barnet	38	1	0	4
Brent	79	12	0	1
Ealing	90	2	0	4
Buckinghamshire	44	11	3	3
Hillingdon	32	2	0	1
Islington	80	4	0	1

In comparison with the Local Authorities near to us, the volume of formal children complaints is low. This is mainly due to the effort made by staff to bring about early resolution of a complaint at the informal stage. This approach is effective in ensuring that a complaint is resolved to the satisfaction of the complainant.

Annex 3 – ADULT SOCIAL CARE SERVICES

The procedure for dealing with Adult Social Care complaints is regulated by the 'The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009'.

This procedure is far less prescriptive and allows for early escalation to the Local Government and Social Care Ombudsman should the complainant be dissatisfied with the response from the Local Authority. The intention of this procedure is to achieve resolution at the first attempt, to remove bureaucracy and is designed to empower complainants in shaping from the outset the approach to resolving the complaint.

The complaint procedure operates as follows:

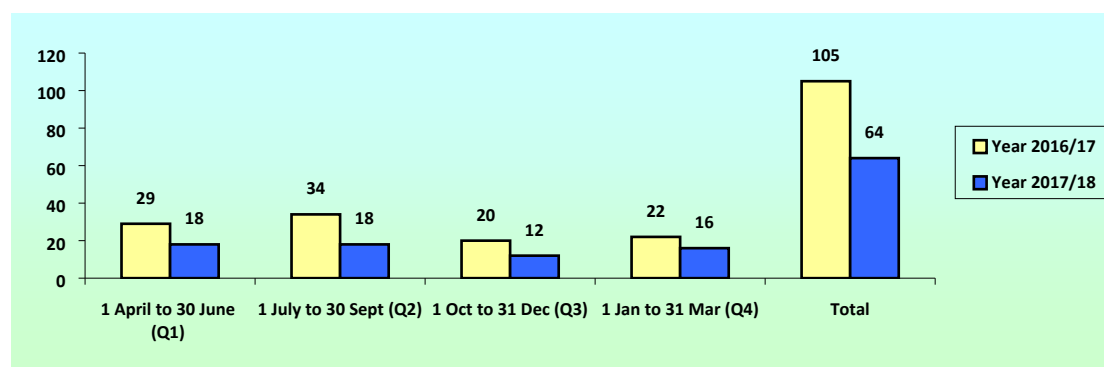
- The Informal Complaint (service request).
- Stage 1 – response from an Assistant Director or Head of Service of the area complained about.
- Local Government and Social Care Ombudsman.

A more detailed explanation of how the complaint procedure operates, the main complaint themes and statistical data for each stage of the process is provided below.

1. THE INFORMAL COMPLAINT

The feedback we have received from residents indicate that most want action to resolve their concerns on the spot by discussing the problem with an officer/manager rather than going through the more formal complaint route. If we can resolve a residents issue in this way we will do so, immediately. We will continue to take this approach, wherever possible.

Informal Complaints received – (service requests)



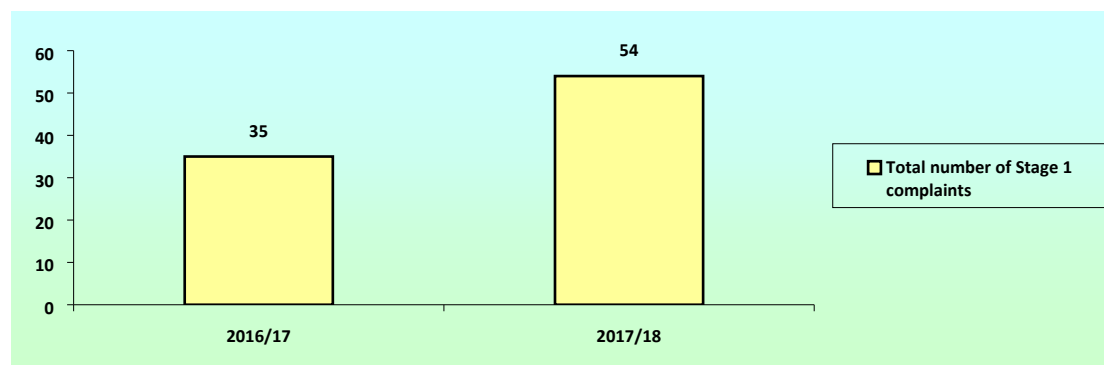
- 39% (41) fewer informal complaints recorded when comparing 2016/17 figure of 105 with the 2017/18 figure of 64.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

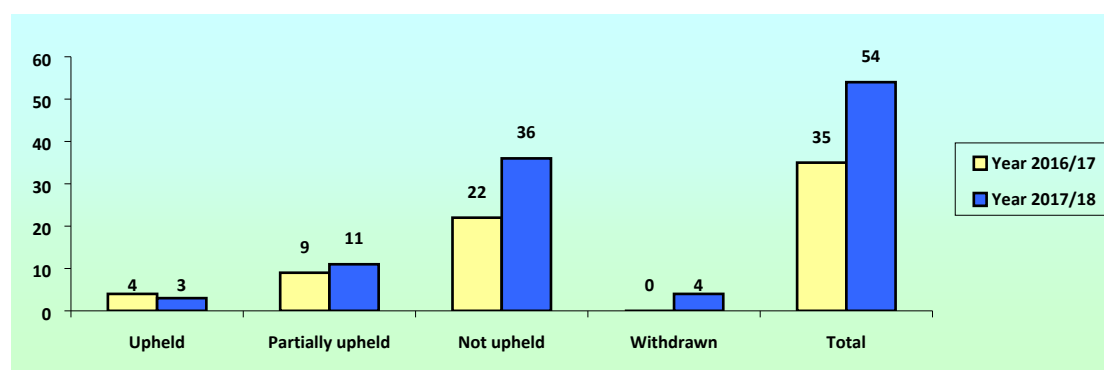
2. STAGE 1 COMPLAINT - LOCAL RESOLUTION

Total number of Stage 1 complaints



- 54% (19) more Stage 1 complaints recorded for 2017/18 than 2016/17.

Outcome of complaints



- 6% (3) of Stage 1 complaints were upheld, 20% (11) partially upheld, 67% (36) not upheld and 7% (4) withdrawn or cancelled.

Table 10 – Time taken to respond to a Stage 1 complaint (working days)

	2016/17	2017/18
Average time taken to respond to a complaint	10.47	10.48
Target	20	20
Variance	- 9:53	- 9.52

- The average time taken to respond to a Stage 1 complaint is 10.48 working days which is just outside our internal target of 10 working days and much better than our published target of 20 working days.

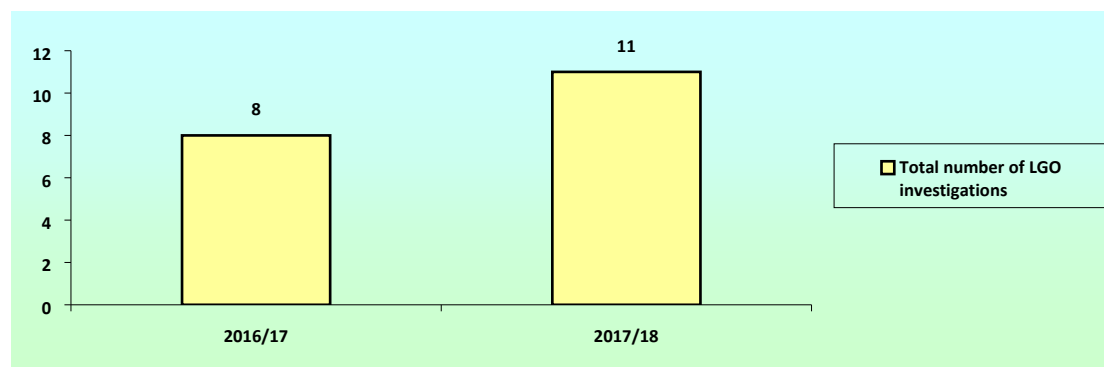
Table 11 - Number and % of responded to within 10 working days

Period	Total number of complaints	Number responded to within 10 working days	% responded to within 10 working days
2016/17	35	27	83%
2017/18	54	44	81%

- 44 (81%) of Stage 1 complaints were responded to within the 10 working day target and 51 (94%) were responded to within 20 working days. This is an area where we do need to improve on.

3. LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN INVESTIGATION (LGO)

Total number of LGO investigations



The table below shows all 11 complaints considered by the LGO and the outcome of their investigations.

Complaint details	LGO decision
<p>Complaint ref: 6007367 Mr X complained that the Council altered his disabled child's home to school transport so the length of journey each way increased to over two hours. He said that the journey had recently reverted to its original route but the change caused his child distress.</p>	<p>Upheld The Ombudsman determined that the Council was at fault when it failed to properly consider the impact of a revised home to school transport journey on Mr X's disabled child and incorrectly treated his appeal as a complaint. The Council agreed to apologise, compensate Mr X and review its procedures to ensure it considers whether a journey is reasonably stress free as well as the safety of the journey</p>
<p>Complaint ref: 5854144 Ms X complained that Council failed to deal properly with the transfer of responsibility for</p>	<p>Upheld The Ombudsman found fault. The Council agreed to apologise and waive the charges for its care agency.</p>

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

her mother's care from its Reablement team to a care agency, which put her at risk of harm.	
Complaint ref: 5227957 Ms X complained that the safeguarding investigation carried out was delayed and biased and that the community psychiatric nurse and the continuing healthcare nurse assessor were not adequately involved in the safeguarding investigation.	Partially Upheld The Ombudsmen did find some evidence of fault in the Council's record-keeping, in communicating with Ms X and delay in an investigation. As the Council apologised to Ms X this was considered a suitable remedy.
Complaint ref: 5231104 Mr X complained that the Council had failed to meet his care needs.	Partially Upheld The Ombudsman found some fault over the way the Council met Mr X's care needs but could not say that it caused Mr X an injustice. If Mr X wants the Council to go on meeting his needs he will have to co-operate with a re-assessment of his needs.
Complaint ref: 4996382 Mr X complained that he was not being allowed to use direct payments to pay for leisure activities, that nine hours per week of support had been removed from his personal budget and that he had been charged for cleaning agency visits despite this being part of his section 117 aftercare plan.	Partially Upheld The Ombudsman found that there were flaws in the May 2016 reassessment of Mr X's care needs and that he had been incorrectly charged for cleaners. The Council apologised to Mr X and agreed to refund him the costs of the cleaners and a sum of monies by way of redress in recognition of his distress. The Ombudsman found that Mr X was not entitled to use his direct payments to pay for leisure activities or entrance fees.
Complaint ref: 6054853 Mr and Mrs X complained that the Council failed to tell them that they would have to contribute towards the cost of a six-week care package.	Not Upheld The Ombudsman found no evidence of fault in the way the Council told Mr and Mrs X about the care package charges they would need to pay.
Complaint ref: 6409603 Mr X complained that the Council failed to properly consider his daughter's need for transport to school. He was unhappy with the way his appeal was dealt with.	Not Upheld The Ombudsman found no evidence of fault.
Complaint ref: 5642413	Did not investigate

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

Mrs X complained that the Council failed to provide the therapy specified in her son's Education Health and Care Plan and failed to carry out the required annual review.	The Ombudsman did not investigate Mrs X's complaint about two missed sessions of therapy specified in an Education Health and Care Plan. This is because it was unlikely an investigation would produce a significantly different outcome.
Complaint ref: 6028337 Mr X complained on behalf of his late wife that there was no Deprivation of Liberty Safeguards authorisation for his late wife while she was in hospital.	Did not investigate The Ombudsman did not investigate this complaint as it is unlikely that a further investigation by the Ombudsman would find fault or lead to a different outcome. The Ombudsman could not provide a worthwhile outcome for Mrs X as sadly she had now died.
Complaint ref: 5977892 Mr X complained that the Council had not investigated properly his concerns about the employees of a care provider. He alleged that the employees are claiming for fraudulent timesheets, and defrauding the Council.	Did not investigate The Ombudsman determined that they were unlikely to find fault in the actions of the Council and as no personal injustice had been caused to Mr X.
Complaint ref: 5855643 Mrs X complained that the Council changed her son's home to school transport arrangements, but this did not meet his needs and his condition became worse.	Investigation discontinued As the Council had reinstated the home to school transport for the complainant's son, the Ombudsman discontinued the investigation.

4. LEARNING FROM COMPLAINTS

Communication

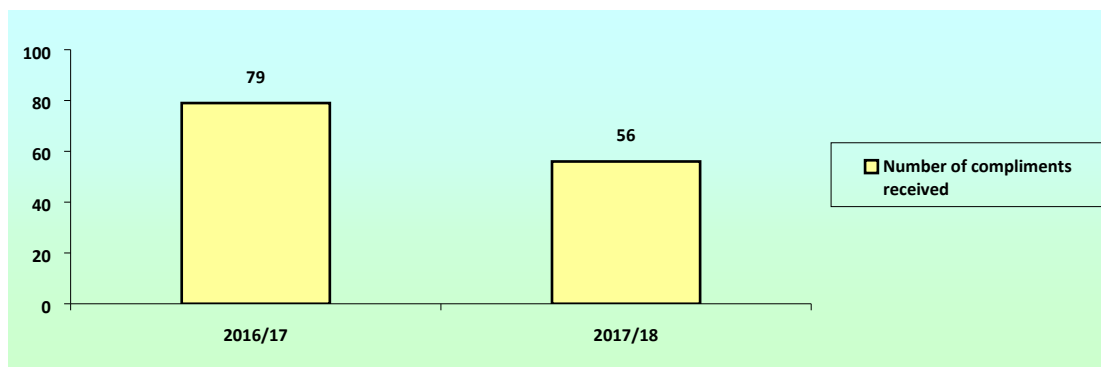
- In four complaints the main cause of the complaint was about the information that had been given, it was either incorrect or misleading or that they were getting differing information. On each occasion, we accepted that the information given should have been clearer and it was addressed with the member of staff directly through their performance review.
- There was one instance when in 2015 the Council decided to take no further action in response to a referral but the information held on file was insufficient. As a result it was difficult to know how the decision had been arrived upon. We apologised for this and advised that our procedure had since been tightened up.

Errors

- After a review, 1:1 night care was withdrawn from a client on the basis that 2 staff were on duty to assist. However, when our client's medication was reduced and his behaviour became challenging, we did not place further support in place. We apologised, agreed that with hindsight further support should have been put in place and advised that in future we would undertake a review when the medication was changed.
- In one instance we wrote to the husband and incorrectly spelt the name of his deceased wife. We apologised.
- A child was signed off to travel independently but his parents had not been told. The Passenger Assistant refused him access to the bus and he was left at the side of the road. We apologised, changed the Passenger Assistant and sought reassurance from the service provider that this would not happen again.

5. COMPLIMENTS

Number of compliments received



- Compliments are down 29% (23) when comparing the same period in 2016/17 of 79 with 2017/18 of 56.

Here's what some people have said:

"I like to take this opportunity to congratulate yourself and your staff in the work that you all have undertaken within the Carers Strategy. When I took on the post 3 years ago there was a real lack of understanding in assessments monies and deliverance. I was inundated with enquires and concerns around packages, fundings and needs. Today however I look back and can see an incredible reduction in the number of enquiries and complaints I have received this year. This is all down to the work that you have participate in, from the BiteSize sessions you attended to the training in the assessments needs and capacity and the open road shows much more. This is a huge step forward and shows the dedication and hard work you and your staff have put in to raise the profile of Social Services for the carers and their cared for person. A Social Service that understand listens and assist residents in their times of need."

"It was good to meet you today and I just wanted to say that the meeting today was very well chaired. In fact probably the best safeguarding chair (SAM) I have ever come across in my many years being in health and social care. You were fair, thorough and followed the process that

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

should be followed. We have attended a few across many boroughs over many years and today's meeting was very well led. Just wanted to pass this compliment on to you."

"We cannot thank you enough for being the person who was so understanding, considerate and who was willing to listen to what we have to say. We are so happy to hear the good news and we are so glad that we have met you. Thank you for all the help and support you have done for our son A. Now, we can move forward with joy in our hearts that our son will have the support he needs and that he will have all the help he requires at school. We greatly appreciate everything."

"In case you have not been told Mum passed away in the early hours of this morning. This was the day she was going to Franklin House. I think the move would have proved to be another frightening experience for her and so I thank God she is now at peace away from pain and so much of the unknown to her. I thank you for all your kindness, compassion and thoughtfulness you are a real blessing to the elderly and their families."

6. BENCHMARKING AGAINST OTHER LOCAL AUTHORITIES

Table 13 - provides comparative benchmarking data on how Hillingdon compares against other neighbouring Local Authorities.

Local Authority	Total number of Adult Social Care complaints received	Total Number of Ombudsman investigations
Barnet	95	4
Brent	97	9
Ealing	109	5
Buckinghamshire	156	10
Hillingdon	35	7
Westminster	106	5

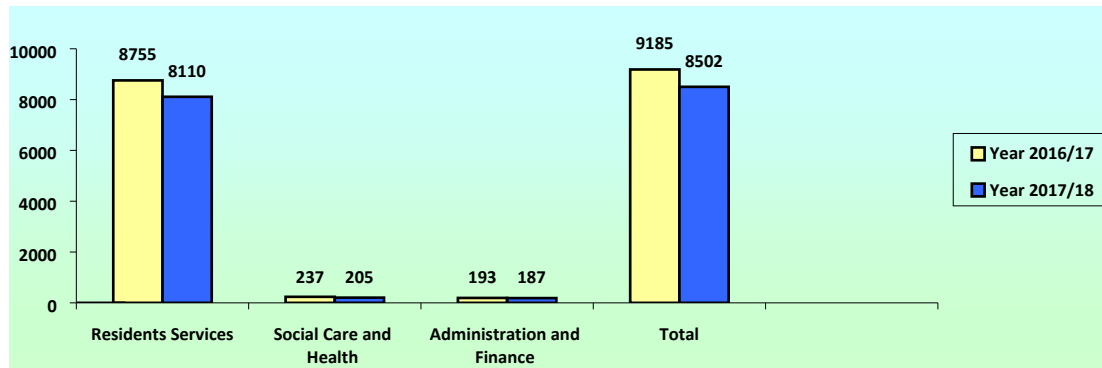
In comparison with the Local Authorities near to us, the volume of formal adult complaints is low. This is mainly due to the effort made by staff to bring about early resolution of a complaint at the informal stage and Stage 1 of the complaint procedure. This approach is effective in ensuring that a complaint is resolved to the satisfaction of the complainant and results in the vast majority of complaints not escalating to the Local Government Ombudsman.

Annex 4

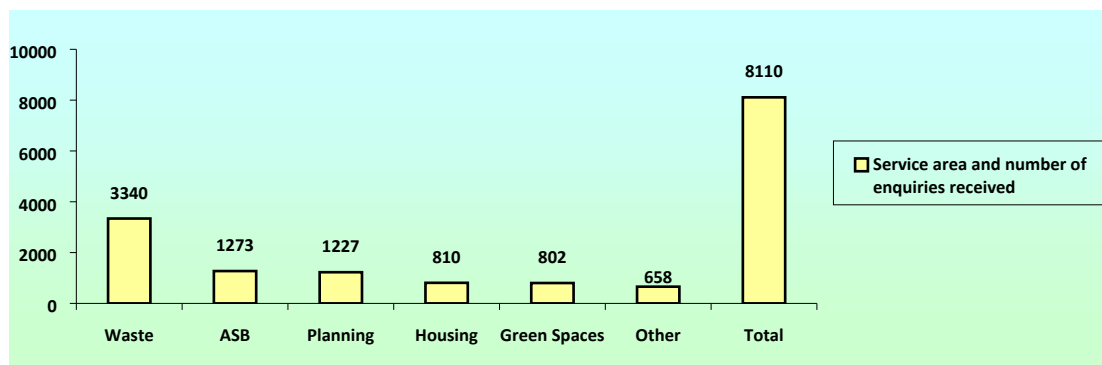
MEMBERS ENQUIRIES

Enquiries can be submitted to officers by Elected Members on behalf of their constituents.

Total number of Enquiries from Elected Members



- 7% (683) fewer (overall) enquiries from Elected Members when comparing the figure for 2016/17 of 9,185 with the figure for 2017/18 of 8,502.
- Residents Services accounts for 95% of all enquiries from Elected Members. Please see below for a breakdown of enquiries received for Residents Services.



- Social Care accounted for 3% (205) and Administration and Finance accounted for 2% (187) of all MEs recorded in 2017/18.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee - 26 September 2018

MATTERS REQUESTED TO BE RAISED BY A MEMBER UNDER COMMITTEE STANDING ORDER NO. 18

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Lloyd White, Head of Democratic Services
Papers with report	N/A
Ward	N/A

HEADLINES

In accordance with Committee Standing Order 18 in the Council's Constitution, any Member may raise a matter at a meeting of any Committee, subject to the provisions set out and advance written notice being given to the Head of Democratic Services.

Councillor Tony Eginton has requested that two matters be raised under this provision which fall under the Committee's remit. The Committee will need to then determine whether to include these matters in its multi-year work programme going forward.

RECOMMENDATION: That the Committee consider the two matters raised and decide whether to include them in the Committee's Work Programme.

SUPPORTING INFORMATION

Committee Standing Order 18, is set out below:

(1) Any member wishing to raise a matter at a meeting of any Committee shall give written notice of the matter together with written information about the matter to the Head of Democratic Services at least eight clear days before the date of the meeting.

(2) Any matter so raised shall involve an issue of policy falling under the references and delegations of the body concerned and shall not concern an individual case where there is a right of appeal to the Council's Appeals Committee.

(3) Where the subject is delegated to an officer, the Member shall raise the matter at that level provided that where the Member is dissatisfied with the decision taken he or she may raise it with the Committee in accordance with paragraphs (1) and (2) above.

(4) Notwithstanding the provisions of paragraph (1) above a member may raise a matter where less than eight clear days notice has been given if, by reason of special circumstances, which shall be specified in the minutes, the Chairman is of the opinion that the matter should be considered as one of urgency.'

On 17 September 2018, Councillor Eginton raised two matters in compliance with the above provision, as follows:

1. **‘Corporate Parenting** – I would like to propose the establishment of a working group/panel of three councillors with officer support to provide support for the oversight of this area. The change made to the Constitution in May 2018 reduced the oversight by elected councillors from the highest quality (as noted by Ofsted) to a level which does not provide the sort of oversight which children in care are due.
2. **Major Housing Works** – Under section 20, Landlord and Tenant Act 1985 (amended by section 151 of the Commonhold and Leasehold Reform Act 2002), most expensive work to maintain properties which include leasehold interests must be notified to leaseholders. It would be helpful for all leaseholders (and indeed, for tenants) to be made aware of planned works well in advance of the work being undertaken. A report by officers on this matter to Committee plus a commitment to publish details of planned works well in advance of the issue of section 20 notices would help inform our residents and leaseholders.’

The first matter raised is directly within the Committee’s remit as set out in the Constitution. On the second matter (if agreed to come forward), Members should note that the Committee has no executive decision-making powers, so any commitment to publish details of planned housing works in advance would need to be referred by the Committee to the Cabinet, Leader or relevant Cabinet Member for consideration, as appropriate.

Procedure - consideration of this is the same as a recommendation / motion tabled at a planning committee or Council meeting:

1. Under this agenda item, Councillor Eginton is invited to move and speak on the two matters he has raised above;
2. These will need to be seconded by another Member during any wider Committee discussion on them;
3. Following discussion, the Chairman will then call for a vote on whether to add these two matters to the Committee’s Work Programme for a future meeting and receive reports on them. This is required because the Policy Overview, Scrutiny and Select and Committee Procedure Rules, also set out in the Constitution, only allow business to be considered at meetings as determined either by the Committee’s Work Programme or the Chairman.

Financial Implications

None at this stage.

Legal Implications

None. This matter is in compliance with the rules set out in the Council’s Constitution.

BACKGROUND PAPERS

None.

SOCIAL CARE, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE - FORWARD PLAN

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Anisha Teji, Chief Executive's Office
Papers with report	Appendix A – Forward Plan
Ward	All

HEADLINES

The Committee is required by its Terms of Reference to consider the Forward Plan and comment as appropriate to the decision-maker on key decisions which relate to services within its remit (before they are taken by the Cabinet or by the Cabinet Member).

RECOMMENDATION

That the Social Care, Housing and Public Health Policy Overview Committee notes and comments on items going to Cabinet.

SUPPORTING INFORMATION

The latest published Forward Plan is attached.

Implications on related Council policies

A role of the Policy Overview Committees is to make recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Policy Overview Committees directly engage residents and external partners in the work they do.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

Classification: Public

Social Care, Housing and Public Health Policy Overview Committee – 26 September 2018

This page is intentionally left blank

Ref	Upcoming Decisions	Further details	Ward(s)	Final decision by Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Public or Private (with reason)
		SI = Standard Item each month	Council Departments: RS = Residents Services SC = Social Care CEO = Chief Executive's Office FD= Finance						
Cabinet - 27 September 2018									
260	Mental Health Section 75 Agreement	To seek Cabinet approval to enter into a five-year agreement with the Central and North West London NHS Foundation Trust (CNWL) under section 75 of the National Health Act, 2006. This is intended to support more integrated working arrangements between Council and NHS staff that will improve outcomes for Hillingdon residents living with mental health conditions.	All		Cllr Philip Corthorne	SC - Gary Collier		NEW	Public
Cabinet - 25 October 2018									
265	Safeguarding Adults Partnership Board Annual Report	The Annual Report of the Safeguarding Adult Partnership Board will be presented to Cabinet. The report details the partnership's activity and performance in safeguarding adults at risk and its priorities for the year. The report is set in the context of national guidance and policy.	All		Cllr Philip Corthorne	SC - Steve Ashley (Independent Chairman) / Tony Zaman	Social Care, Housing & Public Health Policy Overview Committee	NEW	Public
266	Local Safeguarding Children Board: Annual Report	Cabinet will receive the Annual Report of the Local Safeguarding Children Board (LSCB). It provides Elected Members with a view on effectiveness of children's safeguarding in Hillingdon and identifies priorities for future action and attention.	All		Cllr David Simmonds CBE	SC - Steve Ashley (Independent Chairman) / Tony Zaman	Social Care, Housing & Public Health Policy Overview Committee	NEW	Public
Cabinet - 15 November 2018									
267	Older People's Plan update	Cabinet will receive it's twice yearly update on progress on the Older People's Plan (May and November annually).	All		Cllr Ray Puddifoot MBE / Cllr Philip Corthorne	RS - Kevin Byrne	Older People, Leader's Initiative	NEW	Public
Cabinet - 13 December 2018									
272 a	The Council's Budget - Medium Term Financial Forecast 2019/20 - 2023/24 BUDGET & POLICY FRAMEWORK	This report will set out the Medium Term Financial Forecast (MTFF), which includes the draft General Fund reserve budget and capital programme for 2019/20 for consultation, along with indicative projections for the following four years. This will also include the HRA rents for consideration.	All	21-Feb-19	Cllr Ray Puddifoot MBE & Cllr Jonathan Bianco	FD - Paul Whaymand	Public consultation through the Policy Overview Committee process and statutory	NEW	Public

This page is intentionally left blank

SOCIAL CARE, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE - WORK PROGRAMME

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Anisha Teji, Chief Executive's Office
Papers with report	Appendix A – Work Programme
Ward	All

HEADLINES

To enable the Committee to track the progress of its work in 2018/2019 and forward plan its work for the current municipal year.

RECOMMENDATION

That the Social Care, Housing and Public Health Policy Overview Committee considers the report and agrees any amendments.

SUPPORTING INFORMATION

- The Committee's meetings tend to start at 7pm and the witnesses attending each of the meetings are generally representatives from external organisations, some of whom travel from outside of the Borough. The meeting dates for this municipal year are as follows:

Meetings	Room
13 June 2018, 7pm	CR 5
30 July 2018, 7pm	CR 4
17 September 2018, 7pm	CR 4
17 October 2018, 7pm	CR 4
28 November 2018, 7pm	CR 4
16 January 2019, 7pm	CR 4
7 February 2019, 7pm	CR 4
18 March 2019, 7pm	CR 4
11 April 2018, 7pm	CR 4
June 19 meeting, 7pm	TBC
July 19 meeting, 7pm	TBC
September 19 meeting, 7pm	TBC
October 19 meeting, 7pm	TBC
November 19 meeting, 7pm	TBC
December 19 meeting, 7pm	TBC

Classification: Public

Implications on related Council policies

A role of the Policy Overview Committees is to make recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Policy Overview Committees directly engage residents and external partners in the work they do.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

Multi year work programme

Social Care, Housing & Public Health		2018					2019							
		June 13	July 30	September 26	October 17	November 28	January 16	February 7	March 18	April 11	June TBC	July TBC	September TBC	October TBC
REVIEW A: Universal Credit and other welfare benefit changes														
Topic selection / scoping stage		Agree topic	Scoping report											
Witness / evidence / consultation stage				Witness Session 1	Witness Session 2	Witness Session 3	Witness Session 4							
Findings, conclusions and recommendations								Findings						
Final review report agreement									Final Report					
Target Cabinet reporting											CABINET			
Post review monitoring													TBC	
Title of Review B														
Topic selection / scoping stage														
Witness / evidence / consultation stage														
Findings, conclusions and recommendations														
Final review report agreement														
Target Cabinet reporting														
Post review monitoring														
Regular business items														
Mid year Budget Update			X											
Annual complaints & service update report				X									X	
Looked After Children Performance Data			X											
Annual LCSB (Children's Safeguarding Board report)				X									X	
Annual SAPB (Adults Safeguarding Board report)				X									X	
Quality and Capacity of the Community Mental Health Services in Hillingdon					X									
Child & Adolescent Mental Health Services update					X									X
Cabinet's budget proposals for next financial year								X						
Cabinet Forward Plan monitoring		X	X	X	X	X	X	X	X	X	X	X	X	X
Work Programme		X	X	X	X	X	X	X	X	X	X	X	X	X
One-off business items														
Introductory report on overview and scrutiny		X												
Presentation on the Council's corporate parenting role		X												
Information report on current housing policy		X												
Child Sexual Exploitation - update report			X											
Housing assessments						X								
Better Care Fund Plan						X								
Update on Telecare Line					X									
A presentation from the Children in Care Council								X						
Past review monitoring														
Early Intervention Service									X					
Hospital Discharges						X			X					
Stroke Prevention									X					
Loneliness and Social Isolation											X			
Internal use only														
Report deadline		4 June 2018	19 July 2018	14 September 2018	8 October 2018	19 November 2018	7 January 2019	29 January 2019	7 March 2019	2 April 2019	TBC	TBC	TBC	TBC
Agenda published		5 June 2018	20 July 2018	17 September 2018	9 October 2018	20 November 2018	8 January 2019	30 January 2019	8 March 2019	3 April 2019	TBC	TBC	TBC	TBC

This page is intentionally left blank