



HILLINGDON
LONDON



Families, Health & Wellbeing Select Committee

Date: TUESDAY, 27 JULY 2021

Time: 7.00 PM

Venue: COMMITTEE ROOM 6 - CIVIC CENTRE, HIGH STREET, UXBRIDGE

Meeting Details: Members of the Public and Media are welcome to attend. This meeting may also be broadcast live.

You can view the agenda at www.hillingdon.gov.uk or use a smart phone camera and scan the code below:



Councillors on the Committee

Philip Corthorne (Chairman)
Heena Makwana (Vice-Chairman)
Judith Cooper
Becky Haggar
Kerri Prince (Opposition Lead)
Paula Rodrigues
Jan Sweeting

Co-Opted Member

Tony Little, Roman Catholic Representative

Published: Monday 19 July 2021

Contact: Anisha Teji

Tel: 01895 277655

Email: ateji@hillington.gov.uk

Putting our residents first

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

Terms of Reference

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolios	<ul style="list-style-type: none">• Cabinet Member for Families, Education & Wellbeing• Cabinet Member for Health & Social Care
Relevant service areas	<ol style="list-style-type: none">1. Children's Services (including corporate parenting)2. Adult Social Work3. Safeguarding4. Provider & Commissioned Care5. SEND6. Public Health7. Health integration / Voluntary Sector8. Education9. Children and Families Development (including Early Years and Children's Centres)10. Green Spaces, Sport & Culture (only young people universal services, adult education, music hub, sport, libraries, culture and heritage)

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topic:

- Domestic Abuse services and support

This Select Committee may establish a Panel to support strong oversight of the Council's corporate parenting responsibilities. The Committee may appoint 3 Members to this Panel based on political balance. Membership may include non-Cabinet Members not on the Committee. The Committee may also appoint relevant Council officers and other external stakeholders to the Panel and agree its chairmanship and operation. In agreeing its operation, the Committee will provide for the Panel not to be able to establish any other sub-group or body to carry out its responsibilities.

Specific portfolio responsibilities of the Cabinet Member for Families, Education, & Wellbeing – Cllr Susan O'Brien

1. To oversee and report to the Cabinet on the Council's responsibilities and initiatives in respect of:-

- School attendance,
- Grants and awards schemes,
- Home and hospital tuition,
- Transport and travel concessions for school pupils,
- School places,
- Raising standards of education.
- All other education services to children.
- Youth services and youth centres
- Early years centres and children's centres
- Wellbeing of residents and Wellbeing strategies
- Careers service,
- Adult and Community Learning and skills development (including the Hillingdon Music Service)
- Libraries
- Sports Strategy
- Leisure services
- Cultural Services & activities
- Development of the Arts
- Theatres, Museums, Heritage Education Centres
- Maintenance of Heritage Assets

Specific portfolio responsibilities of the Cabinet Member for Health & Social Care – Cllr Jane Palmer

1. To oversee and report to the Cabinet on the Council's responsibilities and initiatives in respect of:-

- Care services for children and adults
- Services for children and adult clients in need with disabilities
- Safeguarding of children and adults
- Mental health services
- Juvenile Justice
- The Council's Domestic Abuse services and support
- Services to asylum seekers
- Corporate parenting
- Public Health services
- Partnerships with the Health and Voluntary sector to deliver better social care and health outcomes for residents
- Health Control Unit, Heathrow

Useful information for petitioners attending

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 via main reception and visit the security desk to sign-in and collect a visitor's pass. You will then 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.

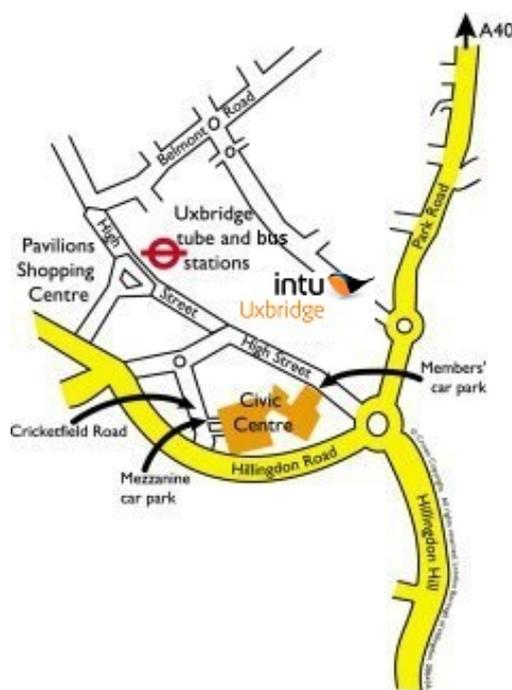
Attending, reporting and filming of meetings

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.



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 - 6
- 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 School Place Planning - Quarterly Update - July 2021 7 - 16
- 6 Hillingdon Safeguarding Partnership Annual Report 2020-2021 17 - 68
- 7 Review of Assistive Living Technology 69 - 80
- 8 2022/23 Budget Planning Report For Services Within The Remit Of Families, Health And Wellbeing Select Committee 81 - 86
- 9 Terms of Reference and Membership of the Corporate Parenting Panel 87 - 92
- 10 Corporate Parenting Panel Minutes 93 - 98
- 11 Cabinet Forward Plan 99 - 104
- 12 Work Programme 105 - 108

This page is intentionally left blank

Minutes



FAMILIES, HEALTH AND WELLBEING SELECT COMMITTEE

3 June 2021

Meeting held at Committee Room 5 - Civic Centre, High Street, Uxbridge

	<p>Committee Members Present: Councillors Philip Corthorne (Chairman), Heena Makwana (Vice-Chairman), Judith Cooper, Becky Haggart, Kerri Prince (Opposition Lead), Paula Rodrigues, Jan Sweeting</p> <p>Co - Opted Member: Tony Little</p> <p>LBH Officers Present: Kate Kelly-Talbot (Assistant Director - Adult Social Work), Gary Collier (Health and Social Care Integration Manager), Darren Thorpe (Head of Business Delivery & Support), Sasha Jefferies (Community Development Manager), Anisha Teji (Democratic Services Officer)</p>
4.	<p>APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS (Agenda Item 1)</p> <p>There were no apologies for absence.</p>
5.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (Agenda Item 2)</p> <p>None.</p>
6.	<p>TO RECEIVE THE MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)</p> <p>RESOLVED: That the minutes from the meeting on 20 May 2021 be approved as an accurate record.</p>
7.	<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 (Agenda Item 4)</p> <p>It was confirmed that there were no Part II items and that all business would therefore be conducted in public.</p>
8.	<p>SCRUTINY CALL-IN PROCEDURE (Agenda Item 5)</p> <p>Further to correspondence issued by Democratic Services on the new scrutiny call – in procedure following the Council’s decision to transfer this responsibility to Members of the relevant Select Committee, Members received a verbal update on the procedure change. The Committee was informed that the correspondence explained the</p>

procedure, provided detailed guidance, along with a guide on how to download or use the new Scrutiny App to do this.

A report on the new scrutiny call – in procedure communicated would have been preferential to enable Members to properly scrutinise the changes. It was requested that reports rather than verbal updates be provided going forward save for exceptional circumstances.

RESOLVED: That the verbal update on the Scrutiny Call – in Procedure be noted.

9. **CARERS STRATEGY 2018/21: 2020/21 DELIVERY PLAN UPDATE (Agenda Item 6)**

The Assistant Director of Adult Social Work and the Health and Social Care Integration Manager presented the report on the Carers Strategy 2020/21 and provided an overview of the achievements and the contribution the Council had made to the delivery of the strategy. The report detailed what the Council and its partners had been doing to support carers in Hillingdon and supported the 2018 – 2022 Joint Health and Wellbeing Strategy priority of developing integrated, high quality social care and health services within the community of at home.

The Committee was informed that Cabinet received an annual update on the delivery of the strategy and this report enabled the Committee to consider the update before it went to Cabinet and provide comments.

The Committee heard that the importance of supporting the needs of carers to the sustainability of the local health and care system was recognised by health and care partners, particularly considering the pandemic. The report identified progress on the specific actions identified for 2020/21 and also how the Council and partners had responded to the pressures resulting from the pandemic. In this context proposed priorities for 2021/22 included:

- Restoring face to face services, especially so that Carers could have ‘*time out*’ away from where they provided care.
- Exploring with Carer Leads in GP practices and Carers Trust Hillingdon how to identify and support Carers who may be reluctant to attend practices.
- Refining the process for identifying and recording Carers with multiple caring responsibilities within Social Care.
- Delivering the guide for people who suddenly became Carers.
- Reviewing the role of the Carers’ Strategy Group. This group previously had responsibility for overseeing the development and delivery of the Carers’ Strategy, but, as mentioned in paragraph 10, Covid-19 restrictions prevented it from meeting during 2020/21.

It was reported that Carers Trust Hillingdon led the Hillingdon Carers Trust Partnership (HCP) and held the Carer Support Services contract with the Council on behalf of HCP. It was reported that the HCP had been successful in meeting the needs of carers and that the partnership model had enabled additional resources to be secured to provide a range of services without the need for carers having to undergo a carer’s assessment. The Committee requested that any comparative performance information be shared.

Following Member questions, it was confirmed that baseline estimates for the number of carers in the Borough was based on the 2011 Census, an approach also used by Carers Trust UK. It was noted that data from the 2021 Census that had just been completed would provide more up to date information, including reflecting the impact of

the pandemic on the number of people undertaking a caring role. The Committee was reminded a review of the Carers' Strategy had been deferred pending the availability of the data from the census.

There had been ongoing work on the guidance for people who suddenly became carers however there needed to be partner and carer consultation before this could be delivered. It was highlighted that there still was information, advice and support was available for people in these circumstances. It was noted that Carers' Trust Hillingdon was fully embedded within the health and care integration programme in the Borough, which had helped to promote an understanding of the needs of carers. Health and care partners therefore understood the need to make referrals to the Carers Trust of residents identified as undertaking a caring role.

In response to Members questions regarding the suitability of guides for young carers, it was clarified that there were two documents being considered, as the current guide was unsuitable for young carers. The Council was keen to avoid having a document that was too long.

It was noted that further information would be provided on what work was being done to support young carers and how effective the interventions were. The Committee asked if there were any specific metrics related to young carers. The Committee also asked if there was a minimum age for a young person to be undertaking caring responsibilities below which the Council would need to intervene. It was also queried whether schools are required to inform the Council if a young person is undertaking caring responsibilities.

Following Member queries, it was noted that standardised packs and information were available for carers in GP waiting rooms however it was important to ensure that these were tailored to all audiences. It was recognised that one approach did not work for all however, there was a balance to be struck with the practicalities involved in maintaining supplies of up to date information across 45 practices. This was an issue that would be considered by the Carers Strategy Group.

Members queried why there were only 63 participants in the online carers forum meetings and it was noted that this represented an increase on numbers attending previous face to face meetings. The Committee was advised that no single mechanism for engaging carers would work for all people, which is why HCP applied different approaches

The Committee queried the basis for the 2021/22 increase in funding for Hillingdon MIND. The Committee was advised that this was based on a request from MIND and the decision was made by Cabinet at its December 2020 meeting.

It was highlighted that 457 counselling sessions had been delivered by Hillingdon Mind to 42 carers, which represented a 45% increase in demand on 2019/20. It was confirmed that in response to pandemic-related infection control measures many services had adapted to providing virtual rather than face to face support.

Concerns were raised about how GP practices would be able to deliver the carer lead role when taking consideration the many pressures they were under. It was reiterated that 44 out of 45 practices had identified carer leads, which demonstrated a recognition of the importance of supporting carers. It was noted that reinvigorating this role as part of Covid recovery was an identified priority for 2021/22 and HCP would be supporting practices. Officers advised the Committee that it was unlikely that establishing a

consistent approach across the Borough in 2021/22 would be achievable.

The Committee stated that it would welcome data being displayed in charts in future reports. More information about challenges faced as well as the achievements would also be welcomed. The Committee expressed a particular interest in carers with multiple caring responsibilities and also the support that is being provided to young carers.

The Committee commended officers and the HCP for their joint work. Members welcomed the report and supporting illustrative case studies, and the priorities for 2021/22 were noted. Although the pandemic had presented significant challenges for carers and the HCP, it was evident that many of the points raised were already being addressed and there had been a vast improvement in partnership working. Members were particularly pleased with progress in developing mental health support provision for carers, the need for which had grown considerably over the last year during the pandemic.

RESOLVED:

That the Committee:

- 1. Noted progress against the Carers' Strategy delivery plan activity for 2020/21.**
- 2. Noted the proposed priorities for 2021/22.**
- 3. Delegated to the Chairman and Labour Lead to agree a summary of comments on the Carers Strategy for Cabinet.**

10. **TELECARE SERVICE UPDATE** (*Agenda Item 7*)

The Community Development Manager introduced the report on Telecare and provided a summary of the key highlights. An update was provided on the service and performance levels of the TeleCare Line and Out of Hours Service delivered by Hanover/Anchor Trust. The Council retained responsibility for the delivery of some front facing resident support functions, including home visits from responders in the event of alarm alerts and responsibility for installation and maintenance of TeleCare Line equipment.

It was reported that as per the service level agreement, the expectation was for the contractor to answer 97.5% of all TeleCare Line alarm calls within 60 seconds and 90% of all out of hours calls within 60 seconds. Performance had remained consistent and above target each month. It was highlighted that there had been a drop in the target levels for out of hours calls, however this was addressed directly with Anchor and a changes to working practices were made. Target levels now remained consistent.

The contract with Anchor was due to end December 2021 and market testing was currently being undertaken. TeleCare Line was still an important service with many residents taking up the service

In future reporting, the Committee agreed that it would be useful to hear comments and customer satisfaction information from residents on ways the service could be improved, additional information regarding clients under 65 (the disability sector), information on how the 6812 users of the service were spread geographically within the Borough.

Although the TeleCare Line was linked to the Committee's major review, it was noted that the review considered the Telecare area as a whole and this was a small aspect of the service.

Following Member questions, it was confirmed that vulnerable callers were identified by the social care team and, if required, further interventions and signposting was required for service users. The different tier mobile responders was clarified for the Committee and it was noted that at tiers 2 and 4, the Council provided a mobile response service as these service users had no named responders unlike services users in tiers 1 and 3.

The Committee commended the services and considered it positive to see the progress made. The service was key in prevention and keeping people independent and Members recognised the enormous benefit it made to the health and social care economy.

RESOLVED: That the update report on TeleCare Line be noted.

11. **COMMITTEE REVIEW: ASSISTED LIVING TECHNOLOGIES SCOPING REPORT**
(Agenda Item 8)

The Committee considered the scoping report on Assisted Living Technologies.

It was confirmed that the terms of reference outlined the process for understanding the current offer, exploring examples of better practice, understanding the market, exploring demand and care provisions and considering opportunities available to improve the service. The review was considered to be timely in light of the pandemic.

It was agreed that of the terms of reference be amended to reflect the inclusion of managing long term conditions and Members were keen to investigate the limitations people faced in accessing services. It was decided that the terms of reference be expanded to include wider market engagement. The Committee would also have an opportunity to have sight of the apps used by services users and a demonstration would be provided.

It was noted that topic of review had been proposed from the previous Social Care, Housing and Public Health Committee.

In order to explore the topic in depth and make meaningful and practical recommendations, the Committee decided to expand the variety of witnesses to include Brunel University, advocacy groups such as AGE UK and local service users and their carers (both in person and surveys). Members were keen to meet with service users to hear their thoughts and were open to exploring this as witness sessions outside of the usual Committee meetings to create a more comfortable environment.

RESOLVED: That the feedback and suggestions be considered, and the scoping report be updated and noted.

12. **UPDATE ON THE CORPORATE PARENTING PANEL** (Agenda Item 9)

Subject to the Families, Health & Wellbeing Select Committee's approval, the Corporate Parenting Panel agreed to amend its terms of reference to hold quarterly

	<p>meetings rather than six meetings a year.</p> <p>The Committee approved the terms of reference to include quarterly meetings.</p> <p>It was agreed that Democratic Services would provide further information on the Corporate Parenting Panel's membership confirmation.</p> <p>Members present at the Corporate Parenting Panel meeting on 27 May 2021, provided an overview of the meeting noting that key priorities identified were explored and the Independent Review Officer's report was considered. It was also reported that the Panel heard insight from care leavers and overall it was a good meeting.</p> <p>It was noted that had been discussions with Member development regarding corporate parenting training.</p> <p>RESOLVED: That the verbal update on the Corporate Parenting Panel be noted.</p>
13.	<p>FORWARD PLAN (<i>Agenda Item 10</i>)</p> <p>Members questioned why reports such as the Older People's Plan Update and the Schools Capital Programme had been scheduled for Cabinet prior to them being scrutinised by the Select Committee. It was also questioned why the schools places planning update was quarterly and what had happened to the adult education review considered by the previous education committee. It was agreed that Democratic Services would consider the points raised and feedback to the Committee.</p> <p>RESOLVED: That the forward plan be noted.</p>
14.	<p>WORK PROGRAMME (<i>Agenda Item 11</i>)</p> <p>At the request of the Committee, Democratic Services would liaise with officers to agree dates for information reports on Youth Service update and Early Years Provision Update.</p> <p>RESOLVED: That the work programme be noted.</p>
	<p>The meeting, which commenced at 7.00 pm, closed at 8.26 pm.</p>

These are the minutes of the above meeting. For more information on any of the resolutions please contact Anisha Teji on Tel: 01895 277655 Email: ateji@hillingdon.gov.uk. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

The public part of this meeting was filmed live on the Council's YouTube Channel to increase transparency in decision-making, however these minutes remain the official and definitive record of proceedings.

SCHOOL PLACE PLANNING - QUARTERLY UPDATE - July 2021

Committee name	Families, Health and Wellbeing Select Committee
Officer reporting	Dan Kennedy, Sarah Phillips – Education, Schools Place Planning
Papers with report	Map of schools in Hillingdon and Primary Planning Areas
Ward	All

HEADLINES

1. The Committee are scheduled to receive quarterly school place planning updates as this is a key statutory function of the Council as a local education authority (LA) and involves liaison with all schools and Trusts in the borough, and with neighbouring LAs. The duty is to have a sufficiency of school places to meet parent demand. School place planning sets a strategic framework in which the LA and every school can operate, requiring annual review and decisions to be agreed with individual schools and trusts to adjust supply, and to inform timely capital investment and building decisions and negotiations with the DfE.
2. Covid-19 has had a local and national impact on school planning and individual school rolls of unprecedented volatility. Hillingdon school rolls remain the seventh highest (of 33) in London with 52,350 total pupils on roll on the January 2021 schools census from nursery to sixth form. There has not been the steep decline in pupil numbers seen in Inner London where the combination of Brexit and Covid-19 led many European families to leave London with a serious impact on schools.
3. Most Hillingdon schools are experiencing varying levels of continuous mobility of pupils, in and out, with uncertainty that will continue into the autumn term. Across Hillingdon there has been a small decline in rolls and also in new admission applications over the past 18 months. However there have also been new housing and new movements into the borough. The May 2021 census is still being completed.
4. The LA place planning duty to ensure sufficient places to meet demand covers all schools; Community, Foundation, Voluntary Aided and Academy. Most secondary schools and half of all primary schools are still absolutely full, so the cumulative impact of a slight decline has been a larger decline in rolls in a small number of schools, but spread across the borough. All special schools and Special Resourced Places (SRPs) in mainstream have filled up given the rise in EHCPs over the past year. Overall, nursery numbers have declined but sixth form numbers have risen.

RECOMMENDATIONS:

That the Committee:

- 1. notes the update and actions underway to support parents and schools.**
- 2. questions officers about the update.**

SUPPORTING INFORMATION

Strategic Context

5. The national and local impact of Covid-19 on schools and on families has led to volatility in school rolls and changes that may be temporary, or may signify new trends. A few schools face challenging decisions to manage budgets and staffing and class sizes.
6. A map of all schools is appended which also shows the 14 Primary Planning areas. There are two secondary planning areas, north and south of the A40.
7. Demand is estimated by the number of pupils living in each planning area of the borough and by the patterns of parental choice in their preferences for admissions and of new housing and cross-borough movements, with our seven neighbouring LAs and beyond. Around 80% of all pupils attend a school within two miles of their home, but it may be in a different LA. Some of our schools are very close to the borough boundary and individual school intakes vary from 0% to 55% of out-borough pupils. The borough has a wide range of different schools. 32 are community schools with the LA setting admissions criteria but most set their own admissions criteria, and can decide to consult on changes. For all, distance between home and school is the key determinant if places are oversubscribed. There are some other differences which impact on parent choice including faith criteria for 3 of the 8 secondary schools (one each of Sikh, Church of England and Roman Catholic) and 12 of the 70 primary schools (five each of Church of England and Roman Catholic and two Sikh).

Primary Schools

8. Total rolls in January 2021 were lower in all year groups than in 2020 – but still nearly half of all schools are completely full and have waiting lists. Admissions offers were lower than last year on National Offer Day for Reception (in 46 primary and 12 infant schools) and Year 3 (in 12 Junior schools), but there has been a steady rise in applications through the summer months.
9. The level of vacancies is too high, despite reductions in Reception Published Admission Numbers (PAN) in recent years. Ideally, we would have an 8% operating margin of vacancies in the 4,551 total Reception Published Admission Numbers (PAN). On National Offer day, 20% of places were unfilled. This is now 16%, a 2% rise on last year, partly due to the re-opening of Nanaksar before its new building is finished, now due in January 2022.

10. Pupil numbers are still moving but around 30 schools have some vacancies in Reception and other years. About another 12 schools have higher levels of vacancies – over 30 in Reception and in other year groups. Parental preferences have sharpened – there is very high demand for some schools but a far less for others. There are no plans to expand any more primary schools. The admissions process is designed for the computer to match pupils to the highest available of their preferences and they are notified if a higher preference place later becomes available– hence some movement continues as parents choose to take up new offers. Parents without any of their preferences being met are made an offer that is a reasonable distance from their home, but they cannot be forced to accept it, though they must secure education for their child. Some choose to travel a distance for a school or to home educate. The table below summarises:

11. **Table 1 Hillingdon Primary January Census 2021 compared to 2020**

Hillingdon Primary Census of school rolls	R	1	2	3	4	5	6	TOTAL
Jan. 2020	4,018	4,031	3,974	4,105	4,129	3,980	3,939	28,176
Jan. 2021	3,878	3,899	3,912	3,826	3,958	3,957	3,841	27,271
change in 2021	-140	-132	-62	-279	-171	-23	-98	-905
% of 2020	-3%	-3%	-2%	-7%	-4%	-1%	-2%	-3%
cohort loss (e.g. Y1 from previous year R)		-119	-119	-148	-147	-172	-139	
Projection for 2020/21	3,957							27,709
actual Jan21 compared to projection	-79	-2% lower than projection						-438

12. The School Place Planning team is meeting with relevant schools to support and help their staff and budget planning, and co-ordinating with Education Advisors and SEN colleagues as relevant. Where the evidence will support it – in up to seven schools – the legal Published Admissions Number (PAN) can be reduced following consultation in the Autumn of 2021, for a lower number – 30 less in each case - to be published in 2022 for those applying to start in September 2023. The law promotes parental choice above all. Therefore, an admissions authority can agree a temporary higher figure for a year at a time if demand rises with no need to consult, so with immediate effect. This will help manage future rising demand. No actual physical capacity will be removed. As demand may alter in the next few years there will be the flexibility to respond across the borough. There will be changes in the pattern of family movements after Covid-19 due to changes in housing availability and costs (and relative to other areas) and employment patterns. Some parents choose to move to access good or outstanding schools.

Secondary Schools

13. Secondary rolls are high, and many schools are full in every year group or have exceeded their PAN. Year 7 intakes and total secondary rolls have grown since 2018 as higher numbers moved up from primary. Secondary schools have expanded far less than the ten plus years of primary expansions. The total of the secondary Year 7 PAN is 3,767 which is 784 pupils lower than the Primary total PAN. So, the secondary PAN is lower than each of the year groups currently in primary. The table below summarises:

14. **Table 2 - Hillingdon Secondary Rolls - January Census 2020 and 2021**

Year Group:	7	8	9	10	11	12	13	Total Sec	UTC & Studio	TOTAL Y7-Y13
Jan. 2020	3,701	3,387	3,196	3,203	3,077	1,798	1,668	20,030	722	20,752
Jan. 2021	3,606	3,658	3,361	3,229	3,175	1,861	1,586	20,476	819	21,295
Cohort loss		-43	-26	33	-28			446	97	543

15. On National Offer Day for September 2021, as for the previous two years 15/18 schools were immediately full. There are overlapping metrics:

- **Offers to Hillingdon residents: 3,607** (including 505 to schools in other LAs) Hillingdon remains the top west London borough with 94% of pupils gaining one of their preferred secondary school places, 67% their first.
- **Places offered in Hillingdon Schools: 3,647** (including 409 from other LAs and 73 resident pupils with EHCPs through the separate SEND process, which considers parent preferences and pupil needs.)

16. The offers left a margin of 120 empty places in the schools (3.2%). However, for the past decade there have been at least 100 total places empty (2.6% of PAN) across up to four schools as they did not receive enough parent preferences. These can be offered (if a reasonable distance) to those 6% of parents who did not get offered any of their preferences, but many parents then decline them. This figure is not unusual and DfE suggest LAs add a 5% - 10% operating margin in order to cope with faith school variations, distances between schools, cross-borough movement and fluctuations in parent preferences. Hillingdon has not had a margin over 3% for some years, so in practice the margin is currently zero, even though for the past few years some temporary places have been added above PAN on Offer Day in a few schools in order to make offers that are a reasonable distance to parents who failed to secure any of their preferences.

17. Secondary rolls are far less linked to locality and more to perceived education experience, high standards and faith. The LA does projections of numbers looking at actual primary pupils, new housing and cross-borough movements but these

assume each school will be equally full and popular, hence the need to add a margin.

18. The LA must review cross-borough flows. Until 2018 these were equal overall or a slight net 'importer'. Since then, 'imports' have decreased to 12% as most schools in the borough have been popular and recruit from smaller distances, and 'exports' of resident pupils to schools in other LAs have increased to 14% of residents, so the LA is a net exporter. This year, neighbouring LAs have warned they too have rising numbers and their schools are under increasing pressures so distance criteria will mean fewer Hillingdon Pupils will secure places in 2022 onwards. Parental Preferences are still low for a few schools, adding pressure on actual places and parent choice in some areas of the Borough.
19. Currently there are two projects to add permanent secondary places to meet demand being progressed that were bids in 2015-16 and are funded and managed by DfE:
 - Expanding Harlington School by 1.5 forms of entry – 45 places each year from 2023. This is part of the complete rebuilding of the school and library.
 - Reviewing the need for the new Bishop Arden Free school +6FE – 180 places each year (if feasibility and planning permission agreed next year, will open in 2023 or 2024). It will have no faith admissions criteria, distance will be the main criteria, though it is to be part of a Church of England Trust – their aim is to 'bring together pupils of all faiths and of none'.
 - Both of these new build schools will also have new units for secondary aged pupils with ASD who would have some integration into mainstream and also specialist teaching and support.
20. The year group moving up from primary to start in Year 7 in September 2022 is the largest yet (116 more than for September 2021) and further checking is underway with neighbouring boroughs on their capacity changes. In September 2021 discussions will take place with our secondary schools to identify where potential temporary extra places could be added to meet likely high demand in 2022 and 2023.

Special Schools

21. Special schools are under pressure from rising demand from pupils with EHCPs who require a special place. Currently all seven special schools in the LA are full as demand has been continuous throughout the year, not just at the normal ages of transfer. The largest growth is in pupils with autism conditions, many with other complex needs. Temporary extra places have been added to meet demand in most schools. In January there were 893 total pupils on roll, 82% were Hillingdon residents. A special school must be designated to meet the needs of the pupil as set out on the EHCP and some residents are in other LA schools and some in independent placements. The process includes parental preference as well as LA consideration of the best placement to meet each individual pupil's need. Parents

have a right to request a placement in mainstream with adaptations to meet the pupils needs.

22. Since January, after the normal planning for September 2021 entry was completed, over 30 more pupils aged 4 and 5 have been assessed as needing a special school place from September 2021, who were unknown and undiagnosed previously. They have been referred by nurseries, schools and parents, but had not been seen by settings through 2020 so this demand had built up over lockdown. Most have autism and other complex needs.
23. Closer planning is underway between officers in place planning and SEN with schools and Trusts and DfE. Three special schools have permanent expansions underway funded by DfE projects which will add 135 places in 2022 and 2023. There are now plans to use the DfE SEN capital grant to expand two more schools in order to meet demand locally and to reduce the cost pressures of out of borough placements. This is all crucial to securing the Schools Forum Deficit Recovery Plan with the DfE and officers are in regular meetings.
24. Officers are reviewing options to 'repurpose' unused mainstream education places for SEN and will bring those forward in the autumn to the Lead Member. It is neither easy nor quick to match supply and demand to meet the needs. For example, many primary schools have only 3 empty classrooms which is not enough to create a viable satellite of a special school. The nine primary SRPs and four secondary SRPs are also near full and officers are considering the ongoing demand and where expansions may be possible for September 2022 and future years.

Implications on related Council policies

A role of the Select 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

None at this stage, pending any findings by the Committee and any recommendations forwarded to Cabinet.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

Nil.

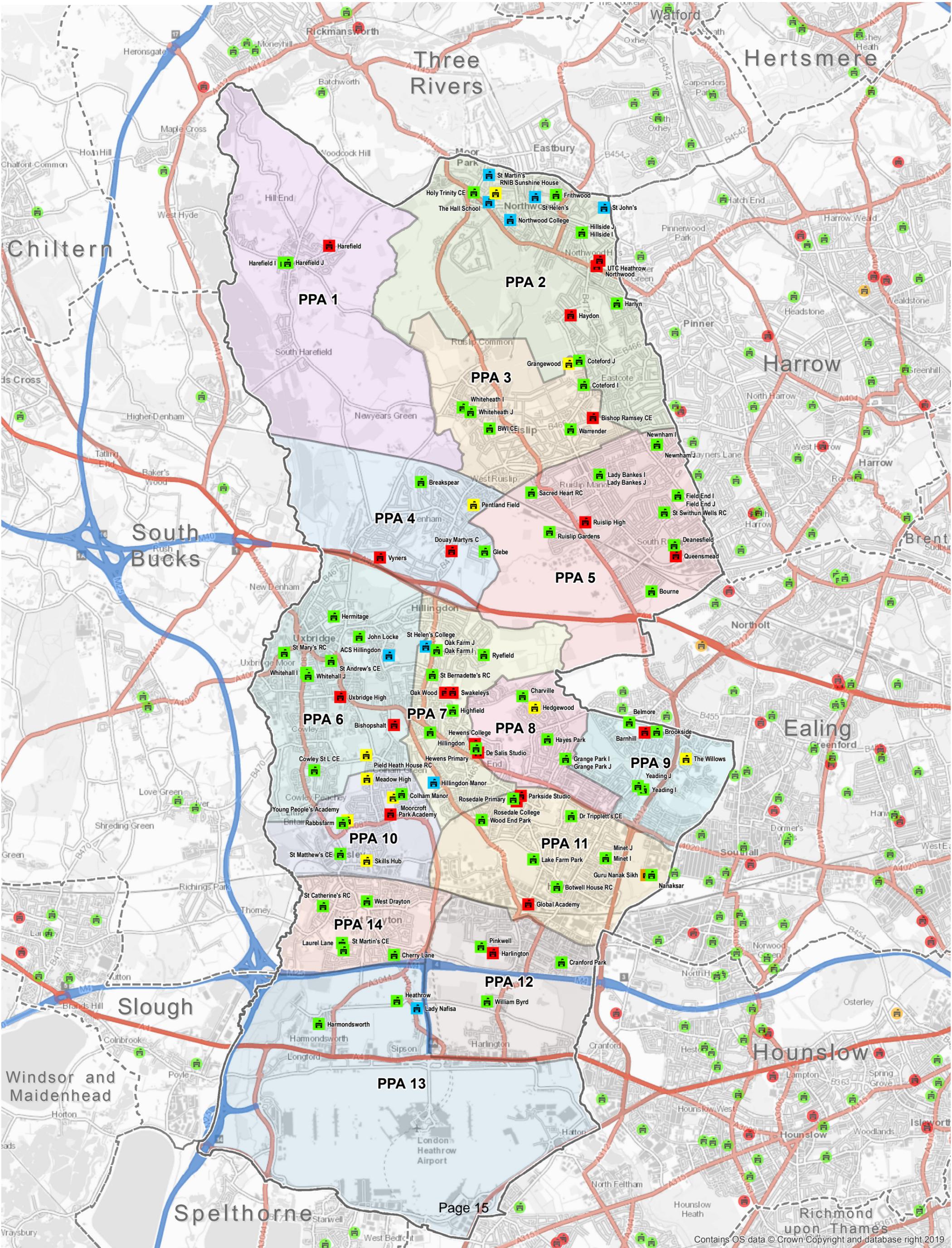
This page is intentionally left blank

- Hillingdon Schools**
-  Primary School
 -  Secondary School
 -  All Through
 -  Special Educational Needs
 -  Independent School
- Other Authority Schools**
-  Primary
 -  Secondary
 -  All Through

London Borough of Hillingdon Schools



Robert Clark, London Borough of Hillingdon - 23/12/2019
Contains OS data © Crown Copyright and database right 2019



This page is intentionally left blank

Hillingdon Safeguarding Partnership Annual Report 2020-2021

Committee name	Family, Health and Wellbeing Select Committee
Officer reporting	Alex Coman, Chair of the Children Safeguarding Partnership Board
Papers with report	Hillingdon Safeguarding Partnership Annual Report 2020-2021
Ward	All

HEADLINES

- The Safeguarding Annual Report summarises the work undertaken by Hillingdon Safeguarding Partnership to support and safeguard Hillingdon's residents: adults with support and care needs and vulnerable children and their families.
- The report provides reassurance that the actions taken across the local partnership to prevent abuse, neglect and self-neglect have been effective in continuing to keep resident safe during a challenging year in which all partners and residents have had to respond to the COVID 19 pandemic and its impact.
- The residents have remained safe during this period and a mature and effective safeguarding partnership has facilitated a continuation of effective joint working. This allowed the focus to be kept on the priorities identified at the beginning the year and at the same time, to respond swiftly and proportionately to the new needs and pressures created by the pandemic.
- The joint approach to safeguarding children and adults has been further embedded during this year. The effective working together across all ages and all agencies has been evident in the fact that majority of 'core business' continued to be progressed throughout the lockdown periods, in the context of key members of the partnership being redeployed to meet the need in frontline services.
- All agencies have seen increased levels of mental health impact of the pandemic, Domestic Abuse and impact of isolation. It is credit to this partnership, its maturity and professionalism that it has come together to respond to these challenges and continued to keep residents safe.
- This report evidences that the learning and development work has not stopped during the pandemic and it shows that positive lessons have been learned from during this time and new methods of delivery will be carried forward and embedded in practice. For instance, the use of technology and the "hybrid" delivery where it is safe and appropriate to do so has proved to be effective and efficient and all partners are committed to maintaining this going forward.
- In line with the legislative changes of 2018, CCG, Police and Local Authority remained partners with equal responsibility for safeguarding vulnerable children and adults and the arrangements are overseen by the Executive Leadership Group who, this year, have commissioned an independent scrutiny of the safeguarding arrangements in place for children and adults.
- The scrutiny has found that: *"There is strong leadership from the ELG and a clear sense of joint and equal responsibility from the three safeguarding partners. The partnership is one that is built on high support, high challenge and where difficult conversations are encouraged."* and *"There is excellent engagement from leaders across the partnership who set a culture*

Classification: Public

Families, Health & Wellbeing Select Committee – 27 July 2021

which drives improvement activity. There is a clear structure and good links between the children's and adult's partnership arrangements"

- The scrutineer concluded: *"I have found a strong partnership that is open to scrutiny and challenge and one that strives to continually learn and improve practice"*.

RECOMMENDATIONS:

That the Committee:

- 1. is reassured that Hillingdon residents remained safe during the year.**
- 2. is updated regarding the way in which the partnership has responded to the challenges posed to Safeguarding by the Covid 19 Pandemic.**
- 3. is informed of the strategic priorities for safeguarding for 2021-22.**

SUPPORTING INFORMATION

1. In September 2019 the Hillingdon Safeguarding Partnership arrangements were launched in line with the statutory requirements set out in the Children and Social Work Act 2017 and Working Together to Safeguard Children 2018. The Local Authority now shares equal responsibility with our statutory partners, the NHS Hillingdon Clinical Commissioning Group and Metropolitan Police, to safeguard children and young people.
2. The Care Act 2014 placed a statutory duty on each Safeguarding Adults Board to produce an Annual Report, outlining the work undertaken to achieve its strategic objectives, the work of each member to implement the Safeguarding Adults Boards' strategy and detailing the findings of any Safeguarding Adult Reviews and subsequent required actions.
3. In promoting this join approach, both boards are now scrutinised and held to account through the multiagency Executive Leadership Group. The group is chaired by the Local Authority's Chief Executive and attended by the senior representatives of the safeguarding partners (Police and Clinical Commissioning Group).

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

Hillingdon, adults with support and care needs and vulnerable children and their families. remain safe and the safeguarding partnership continue to respond effectively and efficiently to the needs of residents.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

The Care and Support Statutory Guidance, Department of Health and Social Care, October 2018 <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

The Care Act 2014 - <http://www.legislation.gov.uk/ukpga/2014/23/section/43/enacted>

Working together to safeguard children, Department of Education, 2018
<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

The Children and Social Work Act 2017
<https://www.legislation.gov.uk/ukpga/2017/16/contents/enacted>

This page is intentionally left blank

Hillingdon Safeguarding Partnership Annual Report 2020-2021



Table of Contents

1. Executive Summary	3
2. Independent Scrutiny	5
3. Hillingdon Safeguarding Partnership: Safeguarding Arrangements	7
4. Progress against Safeguarding Priorities	9
4.1. Safeguarding Children Partnership Priorities.....	10
4.2. Safeguarding Adults Priorities	12
4.3. Shared Priorities	13
5. Learning from Practice.....	14
5.1. Serious Cases: Children.....	14
5.2. Serious Cases: Adults	16
6. Safeguarding Training Programme	18
7. London Borough of Hillingdon – Children's Services	20
8. London Borough of Hillingdon Adult’s Services.....	26
8.1. Adult Social Safeguarding Data.....	30
9. Hillingdon Clinical Commissioning Group (CCG).....	32
10. Metropolitan Police Service.....	34
11. Safeguarding Partnership Agency Contributions.....	39
11.1. Central and North West London NHS Foundation Trust (CNWL)	39
11.2. London Fire Brigade.....	42
11.3. Local Authority's Designated Officer (LADO) and Education Safeguarding	43
11.4. Uxbridge College.....	45
11.5. The Hillingdon Hospital.....	46
11.6. London Borough of Hillingdon: Tenancy Management	47
12. Priorities for 2021-22.....	47

1. Executive Summary

“I have found a strong partnership that is open to scrutiny and challenge and one that strives to continually learn and improve practice.”

Alan Caton OBE, Independent Scrutineer, 2021

This report provides an overview of the activity of Hillingdon’s Safeguarding Children Partnership and Safeguarding Adults Board. The report provides assurance around the effectiveness of our local safeguarding arrangements and evidences the impact of these arrangements in ensuring the safety of Hillingdon residents irrespective of age.

The annual report 2020-21 covers a period of unprecedented challenge for residents and those agencies that provide support and safeguarding services throughout the coronavirus pandemic. Inevitably there has been the need to adapt and refocus services to ensure that the immediate needs of children, adults, their families, and carers were prioritised and met. It is to the credit of Hillingdon Safeguarding Partners that the children and adults remained safe and supported in having their needs met and being safe. An overwhelming majority of ‘core business’ continued to be progressed throughout the lockdown periods, in the context of key members of the partnership being redeployed to meet the need in frontline services. The capacity of partners to be dynamic in response to challenge and to develop innovative solutions reflects positively on the effective implementation of our Safeguarding Arrangements and the underpinning principle of shared and equal responsibility for safeguarding.

Between January and April 2021, our safeguarding arrangements were the subject of scrutiny by an independent expert with experience of both adult and child services. The Independent Scrutineer found that the local partnerships are meeting the statutory responsibilities and did not identify any areas of poor practice or weakness in the safeguarding arrangements, noting key strengths in partnership working and that ‘the partnership is one that is built on high support, high challenge and where difficult conversations are encouraged’.

The Safeguarding Partnership has continued to make progress against all priority areas, focussing on those with greatest impact for residents. The Safeguarding Partnership has evidenced the capacity to adapt in all areas of service delivery, from frontline services to training, strategic planning and coordination of services. All agencies have risen to the

challenges of the last year, and the commitment of frontline staff across the Partnership is to be commended.

A key duty of both the Safeguarding Children Partnership and Safeguarding Adults Board is to consider any serious cases against the statutory criteria for review set out in legislation. In 2020-21 there were no statutory reviews commissioned by the Safeguarding Partnership.

In the next year the Partnership will continue to embed the use of data in the analysis of practice, and for the purpose of strategic planning. We will continue to ensure that the voices of children, adults, their families and carers are heard and prioritised and that this is well evidenced across all aspects of partnership work.

In response to local and national learning we have identified new areas of priority and will be developing our response to these through the creation of targeted subgroups addressing child sexual abuse, mental health and safeguarding and self-neglect. In addition, supporting the effective implementation of Hillingdon Council's innovative model of early help, Stronger Families, will be a key focus for the Safeguarding Children Partnership.

2. Independent Scrutiny

In January 2021 Hillingdon Executive Leadership Group commissioned Independent Scrutiny and Review of the Adult and Child Safeguarding Arrangements. This task was fulfilled by Alan Caton OBE, an experienced independent safeguarding professional and retired senior police officer. The terms of reference for scrutiny were developed in line with the 'Six Steps to Independent Scrutiny' model developed by the University of Bedfordshire. The review took place over 7 days and focused on systemic safeguarding arrangements. To inform the process meetings were arranged with representatives across the adult and child safeguarding networks. The Outcome letter is published in full on the Safeguarding Partnership Website, and the Safeguarding Adults Board website, a summary is provided below.

'The Hillingdon Multi-Agency Safeguarding Arrangements for both children and adults comply with their statutory responsibilities. The arrangements for both children and adults are clear and have been published in accordance with statutory guidance.

I found that good relationships have been built between partners, both statutory and non-statutory, and that there is a real willingness for the safeguarding partners to work together to seek out vulnerable children and adults and to provide them with the best possible services. It is apparent that there is a strong sense of partnership across Hillingdon and a desire to continually improve services. There is a clear meeting structure and delivery model which is supported by multi-agency subgroups.

During the review I found a number of areas of good practice. Communication links between the partnership is good with the regular distribution of the PSW Practice Briefing Newsletter which highlights key safeguarding issues and operational updates. In addition, I also found the 7-minute briefing tools which are available to provide practical and accessible information to practitioners to be an excellent resource. A number of these briefings are available on the Hillingdon SCP website and cover key issues around particular themes that are important and relevant to safeguarding children and adults, including briefings to highlight the learning from serious case reviews.

Areas for consideration:

- Chairing arrangements for the Safeguarding Adults Board
- The publication of a local threshold document for Hillingdon Safeguarding Children Partnership
- To consider how best to ensure all relevant partners provide clearly analysed data as requested by the Children's and Adult's Partnerships
- To consider developing a formal process to ensure the voices, views and needs of children, families and vulnerable adults are captured
- To consider how best to build strategic relationships across the safeguarding system

There is strong leadership from the ELG and a clear sense of joint and equal responsibility from the three safeguarding partners. The partnership is one that is built on high support, high challenge and where difficult conversations are encouraged.

Attendance at both the children's and adult's partnership Boards and associated subgroups is good and has good representation from the wider partnership. There is excellent engagement from leaders across the partnership who set a culture which drives improvement activity. There is a clear structure and good links between the children's and adult's partnership arrangements, however improved links with other strategic boards would enhance effectiveness.

In conclusion there are, in my view, many strengths to the safeguarding arrangements for both children and adults across Hillingdon. I have found a strong partnership that is open to scrutiny and challenge and one that strives to continually learn and improve practice. I have not come across any areas of poor practice or weaknesses in the safeguarding arrangements. The areas I have outlined for the partnership to further consider, are there to help the partnership on its journey to improve collaboration and coordination and therefore consequently, to improve outcomes for children, families, and adults in Hillingdon.'

Alan Caton OBE

Independent Scrutineer

3. Hillingdon Safeguarding Partnership: Safeguarding Arrangements

This report provides an overview of the activity of Hillingdon's Safeguarding Children Partnership and Safeguarding Adults Board. The report seeks to provide assurance around the effectiveness of our local safeguarding arrangements, and to evidence the impact of these arrangements in ensuring the safety of Hillingdon residents irrespective of age.

The annual report 2020-21 covers a period of unprecedented challenge for residents and partner agencies that provide support and safeguarding services due to the coronavirus pandemic. Inevitably, there has been the need to adapt, and refocus, services to ensure that the immediate needs of children, adults, their families and carers were prioritised and met. It is to the credit of Hillingdon Safeguarding Partners that the overwhelming majority of 'core business' continued to be progressed throughout the lockdown periods. The capacity of partners to be dynamic in response to challenge and to develop innovative solutions reflects positively on the effective implementation of our Safeguarding Arrangements and the underpinning principle of shared and equal responsibility for safeguarding.

In September 2019 the Hillingdon Safeguarding Children Partnership was launched in line with the statutory requirements set out in the Children and Social Work Act 2017 and Working Together to Safeguard Children 2018. Under these arrangements the Local Authority shares responsibility with our statutory partners, the NHS North West London Clinical Commissioning Group (CCG) and Metropolitan Police, to safeguard children and young people in Hillingdon.

The vision of the Safeguarding Children Partnership is for every child and young person to be and feel safe, enjoy good physical, emotional and mental health, have pride in their unique identities, feel that they belong and have opportunities to thrive. The three statutory partners work alongside other relevant agencies in achieving this goal.

The Safeguarding Adult arrangements set out how the Safeguarding Adult Board will discharge the council's duty to work collaboratively to optimise the safety, wellbeing, and quality of life of adults with care and support needs, their carers and families. In order to achieve this the Board must raise awareness, minimise the risk of abuse, neglect or self-neglect occurring, and ensure our response is timely, proportionate, effective, and

underpinned by the key principles of safeguarding adults when it does occur. The Safeguarding Adult Board's vision is for Hillingdon citizens, irrespective of age, race, gender, culture, religion, disability or sexual orientation to be able to live with their rights protected, in safety, free from abuse and the fear of abuse.

To ensure the success of the shared arrangements we have a joint Executive Leadership Group (ELG) that provides governance, leadership, oversight and challenge to both Boards. The ELG consists of the Local Authority's Chief Executive, the Chief Nurse of Hillingdon NHS Clinical Commissioning Group and the Metropolitan Police Service Borough Commander. This group has joint and equal responsibility for safeguarding in Hillingdon. Each partner is subject to internal scrutiny in accordance with their internal governance structures. In addition to this, the ELG has commissioned independent scrutiny of the Hillingdon Safeguarding Partnership arrangements for both children and adults to provide independent critical challenge and appraisal that will support future developments.

The main engine of the safeguarding arrangements for children is the Safeguarding Children Partnership Board and, for adults, the Safeguarding Adults Board. The Boards have oversight of safeguarding practice and performance, resolving issues as they arise. Where this is not possible, the issue will be escalated to the relevant organisation(s) via the Implementation Unit and if the individual organisation(s) still cannot resolve the matter, it is escalated to the Executive Leadership Group to resolve. To reflect the vision of joint and equal responsibility the Boards are chaired on a yearly rotating basis by a representative of the three statutory partners. In the second year of the arrangements the Children's Partnership Board has been chaired by a representative of the Local Authority, and the chairing arrangements for the Safeguarding Adults Board remained unchanged, this decision was made due to the need for consistency and in recognition of the pressure faced by partner agencies in response to the pandemic. The Boards steer learning and development for the safeguarding environment across the London Borough of Hillingdon, and are informed by subgroups, as well as task and finish groups, as required.

The Safeguarding Partnership Implementation Unit provides support and drive to both the Adult and Children's Partnerships. The unit consists of a Quality and Implementation Manager, a Project Support Officer and three Advanced Social Work Practitioners. A key focus of the team is to facilitate, develop and reinforce links between the Safeguarding Children

Partnership and The Safeguarding Adults Board. The team also seeks to develop links and coordinate activity and delivery with the other strategic boards across the council and in the Pan-London Safeguarding context.

4. Progress against Safeguarding Priorities

Over the year 2020-2021 Hillingdon Safeguarding Partnership has focussed work on the key priority areas agreed by the Safeguarding Children Partnership Board and Safeguarding Adult Board. As might be anticipated, at times, it has been necessary to be flexible in response to the demands placed on key partners particularly those with frontline health responsibilities. It is to the credit of the partnership that in the face of extraordinary pressure progress has been made against all priority areas.

The Safeguarding Partnership has been responsive to developments within the local, national, and international context. Senior Leaders across the three statutory partners met regularly to identify, address, and respond to any issues as they arose.

Throughout the pandemic agencies have been alert to the impact of isolation on children, families, adults, and their carers. Awareness raising activity has been undertaken in recognition of the increased risk of abuse and neglect on children, and the impact of isolation on mental health and domestic abuse. Parallel working with other strategic groups including the Community Safety Partnership and Health and Wellbeing Board has further supported the effective coordination of safeguarding across a wide range of services and need.

Central to the work of the Partnership is to ensure that we seek out, listen to and respond to the voices of Hillingdon residents. In 2020-21 this has been made more complex due to the limitations placed on face to face contact. To mitigate this the Partnership has sought feedback and input from our Children's Participation Service and is contributing to the Pan-London Voice of the Adult Programme. The importance of the voice of the individual is reflected in the focus of partnership quality assurance activities, both single and multiagency, and is threaded through the work of all subgroups. In the next phase of the partnership this will be formalised into an overarching engagement strategy.

To reflect our ethos of shared and equal responsibility for safeguarding the children's subgroups are chaired by a diverse range of partner agencies, with support provided by the implementation unit. This approach carries the additional benefit of ensuring that each subgroup is chaired by a strategic safeguarding lead with the most applicable professional expertise. Subgroups are well attended across all aspects of partnership work, statutory partners are represented in all, with relevant agencies attending according to the focus of the subgroup. It is recognised that there is an opportunity for more diverse chairing arrangements for the subgroups focussed on safeguarding adults.

Safeguarding Children Partnership Priorities:

- working with young people at high risk of exploitation,
- neglect,
- children with complex needs and disabilities,
- safeguarding in education,
- early help.

Safeguarding Adults Board Priorities:

- financial abuse and exploitation,
- domestic abuse,
- making safeguarding personal.

Shared Priorities

- modern slavery,
- Joint strategic safeguarding and trafficking.

4.1. [Safeguarding Children Partnership Priorities](#)

The Strategic High-Risk Panel is co-chaired by the Metropolitan Police and Children's Social Care, the Panel focuses upon the risks faced by young people in consequence of extra-familial harm through the adopting a contextual safeguarding approach. The tasks of the Panel are developed from data provided by the Operational High-risk Panel, and any themes or developing issues identified through the analysis of data across all agencies. The focus of the subgroup is to coordinate action across the partnership in reducing the risks that children and

young people could suffer harm due to criminal and/or sexual exploitation or involvement in serious youth violence.

Neglect has continued to be a focussed area of practice for the Safeguarding Partnership, the neglect subgroup is chaired by one of our Named Nurses for Safeguarding. In 2020-21 the subgroup coordinated the relaunch and delivery of Graded Care Profile 2 training to a multiagency group; over 4 sessions 80 practitioners across social care, health, early years and education service became licensed to undertake Graded Care Profile assessments. The Partnership also made a successful application to participate in an NSPCC led pilot for the development of Graded Care Profile 2 Antenatal (GCP2a). Training will be provided for midwives and social workers in completing GCP2a pre-birth. The GCP2a pilot was due to start in January 2021 however this has been rescheduled due to the pandemic. The neglect subgroup has achieved all stated aims for 2020-21. A baseline audit of the use of GCP2 within child protection plans was completed in December 2020, this will be repeated towards the end of the financial year to allow us to measure the impact of focussed work around Graded Care Profile.

In 2020-21 work has continued to refine the partnership offer around early help services, with the development of the Hillingdon's Stronger Families approach. The Stronger Families model is based on the principle that children and their families receive support at the earliest stage, to reduce the impact of any difficulties, promote familial wellbeing and ensure that children are supported to thrive and meet their full potential. The Stronger Families model is locality based, with three geographical hubs, each supporting their local community. The new model will be launched in the summer of 2021.

The Safeguarding Children with Complex Needs and Disabilities subgroup formed in the summer of 2020 with a remit to understand, influence and develop the partnership response to safeguarding children with additional needs. It is recognised that children with disabilities are more vulnerable to abuse and neglect and, often, less able to seek help and support where needed. The group is chaired by the Designated Nurse for Safeguarding at the North West London Clinical Commissioning Group. Since its inception, this group has led on the identification and dissemination of communication tools and strategies to support practitioners in listening to the communication of children with additional needs. The group

has drafted multiagency practice guidance and commenced a multiagency audit. These tasks will conclude in the next financial year.

In recognition of the additional risks faced by children who were not able to attend school during the lockdown periods an Education Safeguarding Task & Finish Group was developed. This group is jointly chaired by the Child Protection for Schools Advisor, and the Head of Access to Education. During the reporting period the group has reviewed and updated key policies and procedures in respect of children who are missing from education, and unregulated provision. This work has successfully built links with health services to improve the tracking and safeguarding of children who are not attending school.

4.2. Safeguarding Adults Priorities

The Making Safeguarding Personal (MSP) subgroup is chaired by Adult Social Care as the lead agency with responsibility for adult safeguarding. Progress against the stated aims of the subgroup has been mixed, in large part due to the impact of the pandemic on frontline services. A practitioner briefing was produced and circulated, and assurances sought around single agency training and the inclusion of MSP principles within agency policies, procedures, and practices. Following discussion at the Safeguarding Adults Board in November 2020 the Implementation Unit reviewed and refreshed the action plan to ensure a sharper focus with measurable outcomes. The principles of Making Safeguarding Personal are woven through the approach of all adult subgroups, this is demonstrated in the creation and dissemination of easy read guides to domestic abuse, and information about staying safe during the pandemic. The Making Safeguarding Personal multiagency audit has started and will conclude in the first quarter of 2021.

The Financial and Material Abuse subgroup is chaired by the Implementation Unit. This subgroup first met in January 2021. The group has a diverse representation to reflect the complexity of Financial and Material abuse and has developed a comprehensive plan to raise awareness of issues, prevent abuse from taking place where possible, develop a framework for individuals to seek support, and to ensure that services respond appropriately where abuse is taking place.

The SAB's Domestic Abuse priority has been progressed by the Implementation Unit in conjunction with the Hillingdon Community Safety Partnership. To reduce duplication and ensure coordination of services for those affected by domestic abuse, the work around adult safeguarding was incorporated into the existing Domestic Abuse Steering Executive. This included a review of recommendations highlighted in the London Domestic Homicide Review and Case Analysis published in September 2020. The recommendations within this report were used as a framework to understand local practice in Hillingdon and will be incorporated into the updated Hillingdon Domestic Abuse Strategy. In recognition of the additional risks victims of domestic abuse faced due to the pandemic the Violence Against Women and Girls (VAWG) lead produced monthly briefings for professionals, these were widely circulated. The Implementation Unit also identified and circulated easy read guidance to seeking help and support and developed an easy read guide to local support services. This joined up strategic approach will be further developed in the next year with a joint subgroup across the Community Safety Partnership, Safeguarding Adults Board and Safeguarding Children Partnership.

4.3. Shared Priorities

The Joint Strategic Safeguarding and Trafficking Subgroup (JSSAT) is unique to Hillingdon and reflects our specific needs as a 'port' authority due to the location of Heathrow Airport in our Borough. The subgroup coordinates the multiagency response to the risk of children and adults arriving in the borough and being victims of trafficking and exploitation. The group spans across the two partnership boards, it is chaired by a senior officer of the UK Border Agency and member of the Safeguarding Partnership Implementation Unit and works closely with the wider partnership to provide proactive and reactive responses to safeguarding matters related to the airport.

During the pandemic there was a huge reduction in air traffic, and consequently a reduction in the number of people accessing the airport and presentation of acute need. As lockdown eased and air travel restarted there was an increase in presentation of unaccompanied asylum-seeking children. The subgroup has identified the need for improved coordination of the various safeguarding processes that are in place, these are manifold due to both the scale of the airport, and the wide range of individuals that use it with a variety of needs. The subgroup has worked with Border Force to develop information for airlines to support in the

early identification of trafficking and exploitation. This is sensitive work due to the potential to inadvertently increase risk to individuals in their country of origin. Training has also been made available to all airport staff.

The shared Modern Slavery Subgroup is chaired by the Implementation Unit. The subgroup has a remit to promote awareness of issues of modern slavery across all partners in Hillingdon, to develop a referral pathway that is consistent and applicable across the partnership and to identify resources and supports available for potential adult and/or child victims. In 2020-21 the subgroup has driven practice in this area and a consistent referral pathway has now been finalised. In addition, the group linked with national centres of expertise to develop briefings, an eLearning module, resource guide and local multiagency practice guidance. The modern slavery subgroup has achieved all agreed aims for 2020-2021.

5. Learning from Practice

Learning and embedding change into practice is one of the key principles of the two partnerships. We acknowledge that learning can be gained from recognising good practice but also from those circumstances where we, as a partnership, could have responded differently to a child or adult's circumstances. Systemic learning and practice improvement is not only based on local experience but includes that which stems from regional and national research, policy and practice. This approach seeks to ensure that safeguarding practice in Hillingdon is research informed and evidence based and that our residents receive services that are of a high standard delivered by a partnership that strives to continuously improve.

A fundamental duty of both the Safeguarding Children Partnership and Safeguarding Adults Board is to review those cases that may meet the criteria for a statutory review of practice. This review process is undertaken in line with the statutory guidance set out in Working Together to Safeguard Children 2018, and the Care and Support Statutory Guidance 2014.

5.1. Serious Cases: Children

A notification to the notification to the Child Safeguarding Practice Review Panel (the National Panel) is made when a child has suffered serious harm, and that abuse or neglect is known or suspected. For each serious incident notification, a multiagency Rapid Review is

convened to bring together and consider information known about the child by all agencies involved and to identify any areas of learning. The Rapid Review is held within 15 working days of the notification, with a report detailing the circumstances of the child, the actions of involved agencies, any learning identified and a decision around Local or National Child Safeguarding Practice Review. The full information about the case, the notes of the meeting and the Rapid Review decisions are shared with the National Panel which has the function to review and scrutinise and ratify the decisions made by the Rapid Review.

During 2020-21 there have been five cases that have met the criteria for a serious incident notification to the Child Safeguarding Practice Review Panel. The number of notifications made by Hillingdon is in line with the national picture, where Local Authorities have most commonly made between five and seven serious incident notifications. Of the Rapid Reviews convened by Hillingdon Safeguarding Partnership 100% occurred within timescale with 100% of recommendations ratified by the Child Safeguarding Practice Review Panel. This is dissimilar to the national statistics which show that overall, only 29% of the Rapid Reviews happen in time and only 69% of the decisions are ratified by the National Panel. The successful implementation of the Rapid Review process reflects the widespread commitment across our partnership to reflect, learn and improve practice where needed. This shows strong professional relationships in a partnership which, as described by the independent scrutineer, is “built on high support, high challenge and where difficult conversations are encouraged.”

In four of the five cases the criteria for a child safeguarding practice review were not met. Where areas of learning have been identified through the rapid review process these are progressed by the most appropriate subgroup of the Safeguarding Children Partnership. The Rapid Review process also highlights areas of good practice, both within individual agencies and in respect to multiagency working.

One case was assessed as meeting the criteria set out in Working Together to Safeguard Children 2018. In this circumstance the Partnership considers the benefit of undertaking a local child safeguarding practice review. For this case, comprehensive information had been gathered and analysed at the Rapid Review stage. This meant that the areas of learning were identified quickly, and action could be taken to implement the recommendations. An action plan is in place to implement the recommendations of the Rapid Review. It is anticipated that this will conclude in the first quarter of 2021-22.

5.2. Serious Cases: Adults

The Hillingdon Serious Case Panel is chaired by a Metropolitan Police Detective Superintendent with responsibility for safeguarding. It has a core membership of senior representatives from key agencies, with others mandated to attend according to the specific requirement of the case. The purpose of the Panel is to review those serious cases that may meet the criteria for a Safeguarding Adult Review as specified in the Care Act 2014.

Where the criteria are met for a statutory review, the Serious Case Panel will set the terms of reference, monitor the progress of the review and quality assure the final report. The decision to undertake a Safeguarding Adult Review is agreed by the Executive Leadership Group. Where it is identified that a learning review would be of benefit this task is passed to the Practice Development Forum. Depending on the specific circumstances of the case learning reviews can be undertaken locally, or with the appointment of an independent chair.

The Serious Case Panel has considered 15 cases during 2020-21. It is important to note that during this period several “legacy” cases have been progressed, alongside those that reflect current practice. Of those 15 cases, 1 is a Safeguarding Adult Review lead by another local authority that members of Hillingdon Safeguarding Adults Board are contributing to. 6 cases have progressed to a form of learning review, 3 cases have required learning identified at panel to be disseminated across the partnership. 4 cases have been assessed as not meeting the criteria for further review and 1 case requires additional information to progress.

Of the cases considered by the Serious Case Panel 66% were adults who had significant mental health issues. 40% of cases featured self-neglect/neglect as a contributory factor. For this reason, a recommendation was made to the SAB that Mental Health & Safeguarding and Self-Neglect are focussed areas of work in 2021-22. A review of the Serious Case Panel process is currently being completed, with the aim of refining our local system and supporting our colleagues in Public Health to develop and implement a process for identifying learning from cases of suspected suicide.

5.3. Practice Development Forum

The focus of the Practice Development Forum is to ensure that learning from any statutory or non-statutory review, local or national, is disseminated across the safeguarding partnerships as required. The Practice Development Forum also considers learning from audits and other statutory reviews. The group has a core membership across both partnerships, in recognition that learning from serious cases usually has applicability across both sectors. There are two affiliated Task & Finish groups, one for child focussed cases, and one for adults. These groups complete learning reviews, and ensure the implementation of recommendations, and progression of actions arising from Rapid Reviews and the Serious Case Panel.

In the last year the children's group has developed the Hillingdon Paediatric Strategy Discussion Protocol. This protocol provides guidance to practitioners and managers around the inclusion of relevant health professionals, and other involved agencies, in strategy discussions. The development of the protocol included negotiating the availability of paediatricians to attend strategy discussions in specific circumstances. The group also complete a learning review in respect of the partnership response to neglect, and a learning review regarding child sexual abuse in the family environment.

The adult focussed Task and Finish group has concluded two learning reviews in the same period and revisited the recommendations made in the AA BB SAR that was published in 2018 to provide assurance that these had been both implemented and sustained. Our Task and Finish Group also considers the transferable nature of learning arising from single agency reviews. We have one learning review ongoing in respect of this.

The Implementation Unit has adopted the use of "7-minute Briefing" documents to share key information, learning and research with busy frontline practitioners. These briefings are designed to provide a high-level overview of the key issues, and to promote conversation, reflection, and practice improvement across the partnership. Safeguarding Leads are asked to disseminate these within their agency, and they are made available on the SAB and Safeguarding Partnership websites.

6. Safeguarding Training Programme

The purpose of the Safeguarding Partnership training programme is to ensure that practitioners have the most relevant and up to date opportunities for ongoing professional development.

Training courses are offered in the following areas:

- Initial Working Together to Safeguard Children (and Refresher)
- Adult Safeguarding
- Core Groups and Child Protection Plans
- Trauma Informed Practice
- True Honour: Female Genital Mutilation
- True Honour: Modern Slavery
- True Honour: Forced Marriage
- Reducing Parental Conflict – for practitioners and ‘train the trainer’
- Domestic Abuse: Awareness and Impact on Children and Young People
- Domestic Abuse: Intimate Partner Violence
- Child Sexual Exploitation: A Trauma Focussed Approach
- Child Sexual Exploitation: Boys and Young Men
- Traffic Light Tool: Harmful Sexual Behaviour
- Preparing for Mandatory Relationship and Sex Education
- Sex Pressures and Social Media
- Walking in Our Shoes Training
- Neglect
- Graded Care Profile

All face-to-face training sessions booked for the first quarter of 2020 were postponed in consequence of the need to ensure the safe and effective transition to remote learning. The Quality and Implementation Unit worked with training facilitators to modify and redevelop their offer. By the second quarter of the year all training was provided remotely, and this timely and efficient shift to a new delivery model led to a total of 1,139 practitioners attending safeguarding training during the year a number that is only 7% lower compared with the pre-covid year

The Quality and Implementation Unit also completed a review of all training provided by the Safeguarding Partnership, quality assuring content and implementing a feedback system for ongoing assurance. An analysis of training evaluation shows that the training had the right content, was relevant to people's roles, was accessible, and clear. Some of the feedback analysed indicated that:

- 97% of delegates rated their understanding of the topic after training as very good to excellent
- 92% rated the quality of the training as very good to excellent
- 94% of delegates agreed or strongly agreed that they could apply learning from the training to their practice area

7. London Borough of Hillingdon – Children's Services

In response to COVID-19, we had to rethink how to operate and continue to provide services for those most in need of care and support. Children and young people who have an allocated social worker remained one of the most vulnerable groups before and during the pandemic. Whilst our statutory functions remained the same, we needed to, very quickly, adapt our service delivery and find ways to fulfil our duties in very different circumstances. Our response commenced in early March 2020, initially operating with many unknowns whilst waiting for national and sector guidance.

Our response focussed on safeguarding our vulnerable children and discharging our duty of care to our staff and colleagues. Risk assessments considered the potential of a decreasing workforce due to Covid infection. Cover and duty arrangements were put in place at all levels as well as the reviewing of the operational procedures by practice leaders and the principal social worker.

Social Workers and Managers in Children's Social Care have experience of working in a flexible way, as a lot of the work undertaken occurs in the community, therefore the shift to working from home was not as problematic as it potentially could have been. Safe working practices were addressed both on individual and service basis (for instance guidance on safely completing video meetings with families and children).

All children were risk assessed by the people who knew them best (Team Managers and allocated workers) and the type and frequency of contact was decided for each child. Most children subject to a Child Protection plan continued to be visited face to face. 92% of the Child Protection visits were carried out in time during this time.

COVID-19 risk assessments were conducted by social workers prior to the visit to determine if anyone in the family was symptomatic or shielding and actions were taken as required except for those instances where it would be inappropriate to contact a family in advance (Safeguarding Investigations). Some of the visits were completed in open spaces (front door, gardens) and PPE was issued as it became available alongside clear guidance developed by the service on how and when to utilise it.

During the lockdown period we kept in contact with all children who have an allocated social worker and/or key worker. Most children subject to CP Plans continued to be seen in person

alongside some other children subject to both CIN and LAC Plans based on assessment of risk and need. Other children where risks assessment indicated that visits could be scaled back for a period were contacted via video and telephone calls, many as often as once per week.

The feedback from our children was positive regarding engagement and they appreciated being in touch with their Social Worker and their Independent Reviewing Officer. Increased concerns were acknowledged for some of our care leavers who were living independently on their own and with reduced family networks were struggling with social isolation more than others. Increased contact with their Personal Advisors was put in place via phone and video call.

Child in Need meetings, Child Protection Conferences and Looked after Reviews were moved to virtual platforms. Feedback from families, children, partners, and our staff has been positive. 98% of the Child Protection Reviews took place in time as well as 97% of the LAC reviews. The engagement of other agencies increased due to the virtual nature of the meetings, many families and young people were more engaged as they were not in the sometimes-intimidating environment of a formal meeting with the professionals in the room.

As part of the recovery planning, it is acknowledged that virtual meetings work well but at the same time there are clear benefits for the Social Worker and/or the chair of the meeting to meet with young people, carers and parents and therefore moving forward we will be adopting a blended approach that will allow for some participants to be present in the room and others to join in virtually.

Our Looked After Children who have direct contact with their families either in the community or in our Contact Centre had contact moved to virtual platforms during lockdown periods. Covid Secure risk assessments of our contact venues were undertaken to ensure face to faced contact where that was appropriate. One of our Children's Homes for children with disabilities promoted contact with parents in a specifically developed place in the garden of the unit whilst ensuring both social distance and the use of PPE as required. We found and following feedback from children themselves, that virtual platforms to have contact often fits better into the children's routines and gives them more control and therefore the use of virtual contact going forward will continue alongside the use of face-to-face contact.

Courts have operated a system of virtual and hybrid hearings and the social workers and managers worked closely with our legal colleagues to ensure effective hearings took place. It is a positive that the hearings during this period were effective and orders continued to be granted. However, as a result of Court capacity there is a backlog of hearings awaiting to be concluded.

Our Children in Care Council continued to meet during this time using Zoom and they kept in contact with one another and with the Children's Rights and Participation Team. Amongst some of the things that were provided by the team, were fortnightly newsletters in which the young people would interview senior managers in Children's Services on their experiences of lockdown, would run various competitions for our young people and provide very helpful information about activities and resources available during the lockdown.

Supervising Social Workers and children's Social Workers provided support to Foster Carers and residential units during this time in the form of advice, guidance and visits to support placements. Increased focus was placed on weekly identification of those placements which were at risk of breaking down. Three Heads of Service met every week with relevant managers and practitioners, Foster Carers and providers, to identify bespoke solutions to vulnerable placements and to ensure that our children remain stable in placements and both them and our foster carers are safe and well supported.

The service proactively reached out to all the children in LBH who were shielding to ensure they had access to food, medication, etc. staff members were redeployed from other parts of the service to support this work and the children contacted included those who were not opened to any services. Support, advice and signposting was provided as needed to the families.

Social workers and managers identified all the children who needed a laptop or access to internet to study and they received the support offered by DfE in form of Laptops and/or wireless internet. More than 800 children benefited from these so far and in majority of cases the Social Workers have delivered these to our children themselves.

In order to provide support to children and families and to reach out to those families who were supported by universal and targeted services which were not available during the summer, our Adolescents Development Service launched the #DoSomethingThisSummer

programme. This was offered over the four weeks in August. A range of programmes were developed to offer vulnerable young people positive recreational and educational activities that support personal development, offer the chance to gain new skills and learning.

There was a total of 110 individual programmes with 848 individual spaces on offer, split between online sessions and face to face open air activities. These programmes were divided into sessions for young people in school years 4-6, 7-9 and 10+. A variety of activities were offered including arts, crafts, sports, cookery and targeted issue-based sessions. Alongside these we offered a number of targeted online sessions in order to provide more intense support on a range of issues affecting young people such as trauma and bereavement, stress and anxiety, county lines, and CSE.

100% of the parents that provided feedback said that they would recommend the programme and advised that they were very or somewhat happy with the activities on offer. Parents found that the activities had a positive impact on young people's confidence and self-esteem as well as developing new skills and knowledge *"Do something this summer was a great activity that helped give my son something new and challenging but also helped as a confidence boost for him"*. One young person found that *"I was learning as well as improving my social skills"*. Feedback from young people was very positive with all who responded stating that they were very or somewhat happy with the programme offer and over 80% saying that they would definitely recommend the programme to others. One young person noted that *"I love it so much and I didn't want it to end seriously. I hope I can join again in the future. I was more than happy doing my session and sad when it came to the end"*.

During the lockdown periods, extra attention was paid to the young people who were living independently and did not have access to support networks during the lockdown. For our Care Leavers, Personal Advisors continued to keep in touch with them and for a minority of care leavers who had to shield we arranged delivery of food and medicines.

Extra staff were redeployed from other areas of service to contact all the families whose children were shielding. A specific questionnaire was applied to ensure the children were safe and the families had the support and the means of ensuring a good level of care during the period. A pathway was developed for referring any situations where safeguarding concerns have been identified

In April the Metropolitan police launched Operation Pan Pan. This was work previously undertaken but reinvigorated as a key piece of work during Covid. This operation ensured that the relevant Safer Neighbourhood Officers were aware of children on CP plans within their wards. Police Conference Liaison Officers (PCLOS) create briefings on the police system that cover Reasons, Outcomes, Admin and Risks (ROAR). This is then flagged to the relevant Neighbourhood Officer. The expectations of neighbourhood officers, were to be aware of the most vulnerable children in their communities, observe whilst on patrol, intervene as appropriate and report any concerns or issues to children's social care via the usual provision of Merlins via MASH.

In summary, the pandemic has been the biggest leadership challenge many of us faced. The service has risen to the challenge and crucial services have been delivered during the lockdown periods and beyond. Important lessons and new ways of working have been developed, implemented and now ready to be taken forward.

We saw a significant increase in number of referrals in relation to Neglect and Physical abuse and an increase in the impact of families living with Domestic Abuse, isolation, poverty and mental health. In the next financial year these continue to be priority areas of activity

Our aim is to continue to keep our children and their experiences at the centre of our work and our service development. We are asking and we are listening, and the words of our young people remind us of the distance travelled by us all during these unprecedented times.

Contextual Safeguarding

Work has continued throughout the year, we have further invested in our Axis service provision, both in analytics and in Early Help offer by doubling the size of the team. Adolescent Development Services have been reviewed and new practice models implemented to enable us to meet emerging needs of Young People. We have continued to use Axis intelligence to deploy our Mobile and detached team to areas of greatest need and to support multi-agency response to risk.

In 2019 a young adult (HS) was killed in a knife crime incident within Hillingdon Civic Centre whilst attending an intervention. Over the last year we commissioned a bespoke review to the review the circumstances and consider any learning for the Council and/or partners. This

was completed March 2021 with publication and action plan monitoring taking place in the year ahead.

We have strengthened our response to children in custody and their safe resettlement, ensuring community based multi agency response to emerging hot spot risk areas

We provided a virtual masterclass on safeguarding adolescents and the Hillingdon approach to over 100 social workers across West London neighbouring authorities.

Commissioned Brilliant Parents to deliver bespoke support to parents whose children are at risk of contextual harm, this has include the recruitment and training of parent champions in our local communities

Neglect

We participated in the multi agency neglect audit and as a result have commissioned and delivered refresher GCP2 training for all frontline staff. We are also partnering with NSPCC to pilot GCP – Antenatal assessment tool.

Safeguarding Children with Complex Needs and Disabilities

We have updated and published our short breaks offer, which includes commissioning for Mencap as a provider. We have and published our personal budgets policy and aim to deliver flexible help to families at point of need that increase choice and empowerment.

We have undertaken prototyping with CAMHS/CCG to strengthen early help offer to children and young people with mental health needs.

We are actively engaged in the Learning Disability risk register process to support children and young people most at risk of entering care as a result of their complex needs.

Early Help

We have spent this year transforming and laying the foundations of our early help offer which will go live in 2021/22. This includes, but is not limited to, moving to a 24/7 Stronger Families hub, locality based key working, doubling the provision of Axis and redesigning adolescent development services.

Whilst the transformation launch will take place in 2021/22 the early help offer has been essential in supporting families throughout 2020/21. Key workers have provided support for vulnerable families including the provision of practical and emotional support. Adolescent Development Services continued to deliver a range of support to young people virtually and within our communities, covering but not limited to counselling, sexual health, substance misuse, emotional and mental wellbeing, activities and personal development.

Brilliant Parents continued behalf of the Council to offer virtual parenting support to parents throughout the pandemic period.

Axis early help and mobile and detached team continued to reach out to young people at risk of exploitation and violence, providing effective diversionary services to safeguard.

8. London Borough of Hillingdon Adult's Services

There has been a significant increase in the number of Safeguarding Adult referrals, including Police Merlins, sent to Adult Social Care during the pandemic. From April 2020 to April 2021, the number of referrals sent to Adult MASH increased by 93% (to 1418 referrals in April 2021). During the same timeframe, the total number of referrals that progressed to a Safeguarding Adult Concern increased by 91% (to 485 referrals in April 2021).

There has been an increase in referrals related to Domestic Abuse, Self-Neglect, Mental Health problems, Self-Harm and Suicidal Ideation. Adult MASH activity, including a daily multiagency high-risk meeting, enabled partners to focus on risks, to minimise the risk of abuse occurring and ensure our responses to concerns were timely, robust and effective. To support the staff during the pandemic specific guidance was shared relating to Domestic Abuse and Self Neglect.

While the lockdown and Covid 19 restrictions required us to adapt practice related to Safeguarding Adults activity, essential visits continued throughout the pandemic in accordance with Covid 19 guidance. The guidance was developed to support staff in relation to undertaking home visits safely, having multi-agency meetings via video calls, and, where appropriate, meetings with residents via video calls. It is recognised that there are positive and negative aspects to using video calls and going forward this is an area of practice we will

retain as an option as it facilitates collaboration and enabled participants to convene quickly to share information and agree actions.

The pandemic also reinforced the dedication of our skilled and caring workforce, showing flexibility and resilience during the year to optimise the safety, wellbeing, and quality of life of our residents.

Lockdown and Covid 19 restrictions had a significant impact on care and support at home and in the community as it increased the time individuals remained at home many times on their own. Staff were reminded to review safeguarding plans and were creative and flexible in minimising the risk of abuse, neglect and self-neglect to respond to this unique situation

Domestic Abuse

Minimising the risks associated with Domestic Abuse is a key priority for Adult Social Care. Adult MASH review high risk referrals at daily high-risk multi-agency meetings and this includes referrals related to Domestic Abuse. Adult MASH has strengthened collaborative working and information sharing pathways with our local Independent Domestic Violence Advocates. Adult Social Care are core members of the Domestic Abuse MARAC and have embedded in the operational practice the need to share information with relevant agencies, consider others who may be at risk, and complete a DASH risk assessment and refer to MARAC as required.

Adult Social Care continue to be dedicated to working collaboratively with The Metropolitan Police, The Children's MASH and The Safer Hillingdon Partnership to explore the creation of a Domestic Abuse One Front Door - the vision is for the creation of a single point of contact for all concerns related to Domestic Abuse in Hillingdon which would sit alongside our Adult MASH.

Adult Social Care are core members of the Domestic Abuse Steering Executive and the MARAC Steering Risk and Review subgroup.

As outlined above, guidance on Domestic Abuse during the pandemic and shared with staff to support practice in these areas and staff were reminded to review safeguarding plans in place due to the increased time individuals were at home together during the pandemic.

Making Safeguarding Personal (MSP)

Adult Social Care are the lead agency in relation to ensuring the outcome(s) the adult wishes to achieve are established/recorded and achieved (where possible). In 2020-21 83% of adults were asked what they wanted to achieve. When the individual's view was established, 95% of outcomes were either fully achieved or partially achieved. The updating of our Adult Social Care case recording system was delayed due to the pandemic; however, this work is near completion and the key principles related to MSP are enhanced throughout. An Adult Social Care member of staff is the chair of the MSP sub group and Adult Social Care have been instrumental in supporting the completion of a multi-agency audit related to MSP, due to take place imminently. The vision is for Adult Social Care to embed MSP guidance, policies and procedures into the safeguarding adults framework and case recording system. This will see the safeguarding referrals reflecting the key principles of MSP as well as embedding MSP best practice guide into each stage of the work recorded in a resident's file. In addition to recording the work undertaken we aim to provide guides to help residents understand meeting agendas and minutes and to feel supported to attend safeguarding meetings. Other guides will provide information on what happens when a crime is reported to the Police (to optimise access to justice) and how to access advocacy. Also, the group are considering a way in which the views of the adults can be captured through questionnaires and other methods.

The principles of MSP are central to the work we undertake, and they are also reflected in our Safeguarding Adult Quality Assurance Framework and the regular audits undertaken.

Feedback has been sought independently by the Implementation Unit as part of the multiagency audit. Below are some of the comments received from adults:

- *"The safeguarding team were very good and told us exactly the process they would follow."*
- *The mental health nurse eventually referred to adult social services. This started a safeguarding enquiry and then I got held. I wanted space and a safe place for my children. The SW asked me lots of times what help I wanted and what I wanted to achieve"*

- *“I knew that the police and SW were trying to help. I got so many calls and text messages offering me support I didn't know it was called a safeguarding enquiry but I knew that people wanted to help.”*
- *“It [the safeguarding help] changed my environment and the atmosphere. I was helping my mum but felt trapped because I felt I had to be in the flat the whole time with my mum. I've now got a sense of freedom now that I've got my own flat.”*

Financial and Material Abuse

Adult Social Care have been central to the development of the Financial Abuse subgroup action plan, enabling the work of the subgroup to be underpinned by areas identified through practice experience.

Establishing how an adult manages their finances and minimising the risk of financial or material abuse occurring in the first place will always be a key priority for Adult Social Care.

Wherever possible we support adults to manage their finances independently, however, where this is not possible, due to the risk of abuse and/or due to physical and/or mental health issues, we ensure the adult's view are central to any action taken to ensure finances are safeguarded/managed appropriately.

We will continue to be a core member of the financial and material abuse subgroup and embed the outcomes of the group into our operational procedures.

Think Family

Adult MASH is now co-located with Children's MASH, and this has strengthened our collaborative approach to safeguarding and “think family”. Children's MASH attends the Adult MASH daily high-risk meeting to ensure an “whole family” consideration and planning as required.

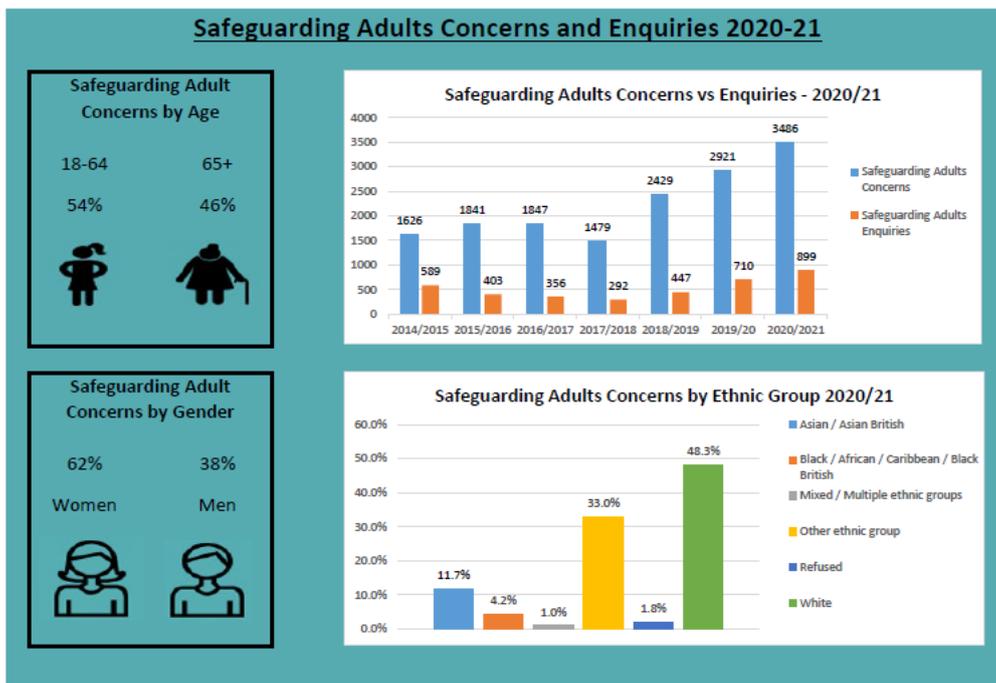
We have developed our response to transitional safeguarding and the need to apply our safeguarding adult framework where children have experienced abuse or neglect but are now 18 years of age or older. This is to enable continuity in care, support and protection plans and a seamless transition from Children's Services to Adult Social Care where this is required.

Adult Social Care work in partnership with Children’s Services in relation to children with disabilities and their families to ensure that care and support for the child, their parents and/or carers is seamless, therefore minimising the risks of harm occurring.

Modern Slavery and Human Trafficking

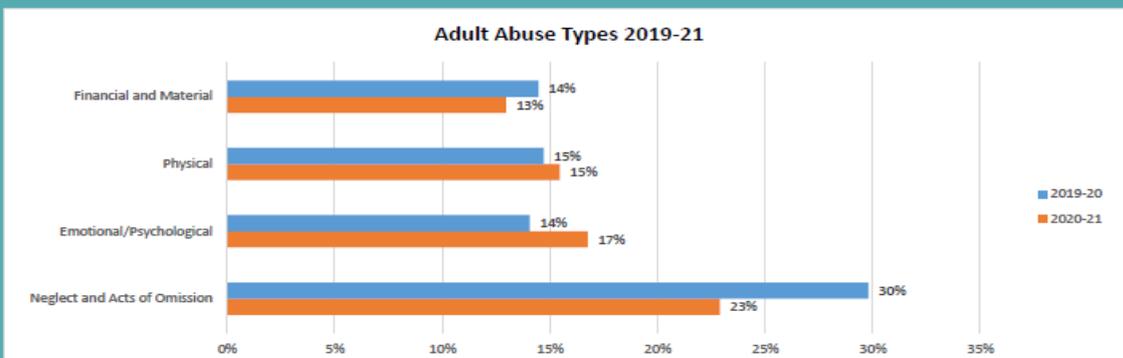
We have a designated lead for Modern Slavery and Human Trafficking within our Adult MASH Team and have embedded local operational procedures in accordance with our statutory duties to ensure appropriate action is taken to safeguard individuals when concerns related to Modern Slavery and Human Trafficking are received.

8.1. Adult Social Safeguarding Data



Reported Safeguarding Adult Concerns

The graph below outlines the four most common types of abuse reported to Adult Services in both 2019-20 and 2020-21. There has been an increase in Emotional and Psychological abuse 2020/21. Safeguarding concerns with a recorded abuse type of Neglect and Acts of Omission has fallen to 23% in 2020/21.

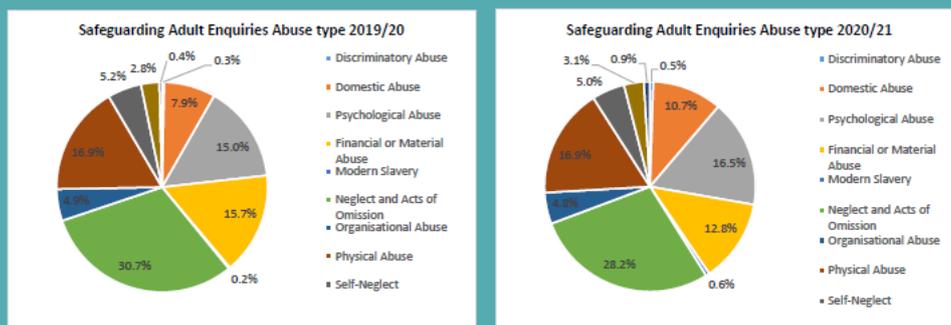


Safeguarding Adult Enquiries

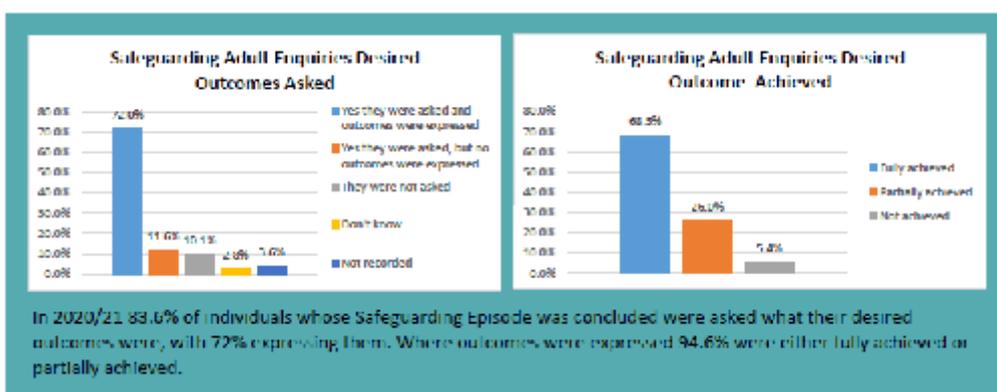
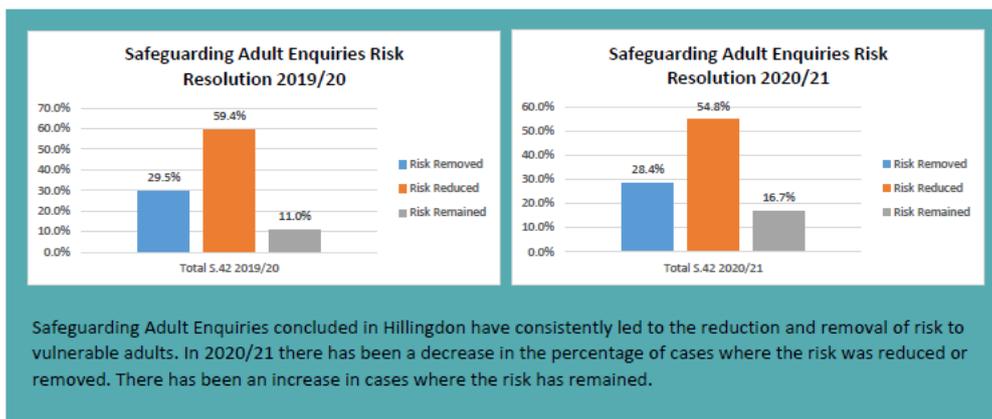
Section 42 of the Care Act 2014 places a duty on Local Authorities to carry out a Safeguarding Adult Enquiry when it has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there)

- has needs for care and support (whether or not the Local Authority is meeting those needs)
- is experiencing, or is at risk of, abuse or neglect;

- as a result of those care and support needs the adult is unable to protect themselves from either the risk of, or the experience of abuse or neglect.



The largest proportion has remained as neglect or acts of omission. This has decreased slightly by 2.5% from 30.7% to 28.2% in 2020/21. Conversely there has been a 2.8% increase in the percentage of cases where the abuse type is recorded as domestic abuse, 7.9% to 10.7%. A 1.5% increase can be seen in cases where the abuse type is recorded as Psychological abuse. These increases are likely linked with COVID-19.



9. Hillingdon Clinical Commissioning Group (CCG)

Across the Health Economy, a sharp increase in mental health difficulty, resulting in self-harm and suicidal ideation in Children and Young People, has been noted. The situation is compounded by the scarcity of Tier 4 mental health beds which is a well-documented national and, consequently, local issue. An increase in parental mental health and substance misuse presentation to health services has also been demonstrated across health providers. A rise in inflicted injury for babies under 1 year was seen nationally during the early part of the Pandemic and remains a fluctuating situation.

Due to national lockdown measures, Hillingdon has also been subject to national trends in adults safeguarding such as increased levels of concern relating to domestic abuse, financial and online exploitation, etc. In addition to adult related concerns children services have also seen an increase in criminal and sexual exploitation, on-line grooming and domestic abuse has been apparent among older children and young people. Together there remains great

concern for the past and current experience of children and young people and vulnerable adults in the family home.

NHSE London region safeguarding sub-cell meetings (set up at the commencement of the coronavirus pandemic) ensured the collation of information relating to safeguarding risk management across North West London, consequently supporting local systems for planning for any predicted change in virus status. Learning from the pandemic has been instrumental in informing safeguarding support required for commissioned services, the Safeguarding Partnership and multi-agency partners. Engagement with regional and national safeguarding networks has ensured timely dissemination of pertinent information. The adaption of training and support programmes toward virtual platforms has been vital in maintaining links with Primary Care and related health partners.

To ensure continuation of health assessments for Looked After Children a blended approach of face to face and virtual contact, guided by a risk assessment/triage document, was employed by the Looked After Children's team. This method of assessment proved popular for some children and young people, especially those of teenage years. Additional support for those children transitioning to adult services has been evident throughout this reporting period and has resulted in a number of initiatives to support children during this period, led by the health provider's Looked After Children's Transition Nurse.

The CCG is a panel member of the Partnership and as such sits on the LSCP and SAB Board(s), representing the Accountable Officer or Chief Nurse, informing the health aspect of policy and procedure.

In Hillingdon, Designated Professionals attend and contribute to all sub-groups, compliment multi-agency training, auditing, reviews and identify emerging themes or needs assessments to inform service and practice.

The Designated Nurses have been closely involved in the establishment and development of improvements to local safeguarding systems including the introduction of the new Adult Multi Agency Safeguarding Hub (MASH), the Safeguarding Children with Complex Needs and Disabilities Group, associated multi-agency audit, review of local practice guidance and future plans for dissemination of related learning. In addition, there has been robust collaborative working practice in the roll out of the Early Help Model.

Over the past year the Designated Lead for Safeguarding Adults also partnered with adult colleagues from across North West London to deliver an online training series (accessed across NWL) to hundreds of GPs aimed at improving knowledge and visibility of safeguarding adult issues and Mental Capacity Act related functions.

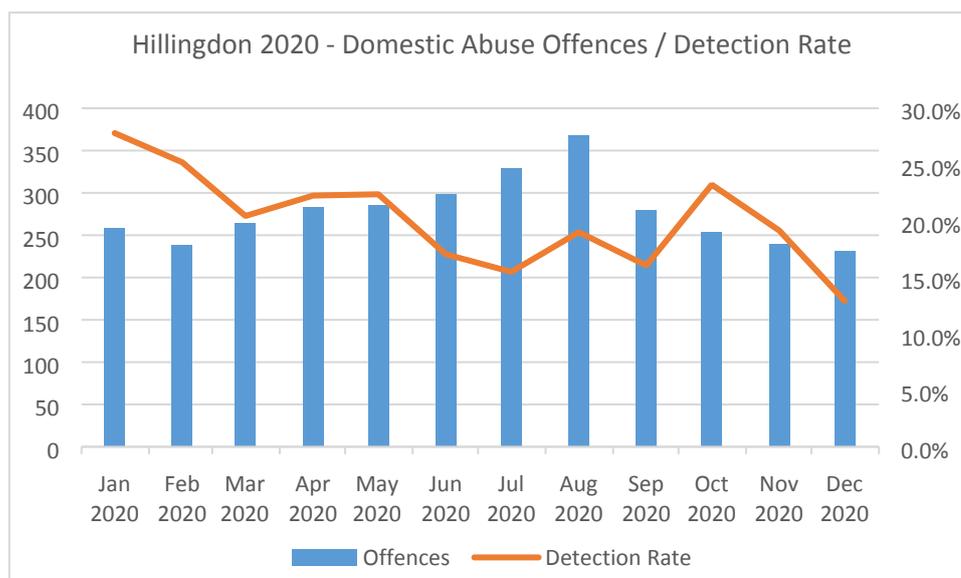
10. Metropolitan Police Service

The police service has risen to significant challenges over the past year, not least Covid 19, which has meant that we have had to use our resources creatively and effectively to meet the safeguarding needs of Hillingdon residents and adapt how we work with our partners. The use of technology has ensured that the essential services and meetings have been able to continue in a positive way with no detriment to the vulnerable adults and children we work with. Our specialist units continue to investigate incidents and offences of domestic abuse, child abuse, child exploitation and crimes and incidents involving vulnerable adults.

Domestic Abuse

In 2020, the three Boroughs that make up West Area BCU had the highest recorded offences of domestic abuse across the Met, with 10,509 offences investigated, accounting for 11.2% of MPS domestic abuse offences. Hillingdon borough has 31.7% of the offences (3332) within West Area. West Area also manages the highest number of domestic incidents across the MPS, 18,034 recorded in 2020, accounting for 11.5% of total MPS domestic incidents.

Bearing in mind the large demand on the Community Safety Unit, West Area manages to achieve the second highest positive outcome rate in the Met at 17.3%. This compares to a Met average of 14.3%. Hillingdon performs particularly strongly in this area, with an overall positive outcome rate of 18.9% which is underpinned by the strong partnership working arrangements that continue to flourish between our Community Safety Unit and partners.



Child Sexual Exploitation (CSE)

During 2020, West Area BCU's CSE has continued to focus activities on working with hotels, guest houses and bed and breakfasts, with a bespoke training package to help those working within the sector to be able to identify suspicious behaviour relating to child sexual and other criminal exploitation and how to report those concerns. A number of exercises have been undertaken to 'test' the safeguarding response under Operation Makesafe.

The CSE team have also made sure that the details of any accommodation provider who does not have appropriate mechanisms in place to recognise and report safeguarding concerns are brought to the attention of partners to ensure they are not used to accommodate vulnerable families or adults.

The Met have significantly improved around response to CSE and this has led to an increase in reporting to Children's Services.

October 2019 saw the inception of our Online Child Sexual Abuse and Exploitation Team (OCSAE) team, which comprises of 1 Detective Sergeant and 8 officers. The team proactively target those who exploit children on-line and have completed over 170 investigations since they were set up, the majority of which were undertaken in 2020.

Child Criminal Exploitation (CCE)

This area of public protection is currently managed by our CSE team and they are responsible for investigating incidents where a child is believed to have been exploited by people involved in criminal activity. This could involve organised criminal networks and gangs who groom and exploit children to hold and transport commodities, such as weapons and drugs.

Our Safer Schools officers have worked really hard to promote awareness around child criminal exploitation within Hillingdon schools. They are also working in partnership with Trading Standards, testing the due diligence of knives being sold to children from commercial premises.

Predatory Offender Unit (POU)

November 2020 saw the launch of our new POU. These units have been introduced across the Met in order to reduce the safeguarding risk & harm to adults and children posed from high harm offenders by adopting an enforcement approach. This unit has been created through an uplift in officer numbers. Their main work includes supporting our Community Safety Unit, Sapphire team, Child Abuse Investigation team, CSE team with a view to arrest high harm offenders who are outstanding suspects or wanted.

They also prevent and disrupt offending by developing intelligence and conducting proactive operations against high harm offenders. In addition, they enforce breaches of judicial & non-judicial restrictions for high harm offenders and ensure there are consequences for non-compliance, pursue high-harm offenders by reviewing undetected cases and exploring whether arrests/prosecutions can take place and also disrupt high harm offenders by working in collaboration with other agencies.

Since the POU started they have arrested 142 offenders and conducted a number of search warrants in relation to online child abuse investigations. They have been particularly effective in high risk manhunts ensuring timely arrest of a number of individuals wanted for stalking, rape, attempted murder and assisting suicide.

Missing Persons Unit (MPU)

Our Missing Persons Unit work closely with our local authority Children's Homes to act swiftly when children go missing. Relationships with Children's Services remain strong and the police provide daily updates to our children's social care colleagues. Officers are trained to conduct return interviews and these are shared with social workers to ensure appropriate safeguards are put in place where necessary and any concerns acted upon in a timely manner.

The team also work very closely with the CSE team due to many of the children who do go missing are also at risk of or have been subjected to CSE/CCE.

The MPU managed 3,236 missing people investigations in 2020, involving 2,428 people. 95% or those that go missing are found within seven days. West Area account for the third largest volume of missing people within the MPS.

Child Abuse Investigation Team (CAIT), Sapphire

We continue to see the benefits of a more integrated approach to public protection investigations following the move of CAIT and Sapphire teams back in to the Basic Command Unit (BCU) of West Area. This has worked well, and this alignment continues to ensure expertise and knowledge in specific areas is shared across the different strands, which ultimately enhances the quality of the investigation and promotes more effective and cohesive safeguarding.

Mental Health

Our dedicated mental health team continue to work hard to support those most vulnerable, who are in mental health crisis and need support and intervention. Since 2019, across West Area BCU as a whole, we have seen a 5% increase in the number of people who have been subject of S136 Mental Health Act. Between the same time parameter, we have seen a 4% decrease in the number of people in Hillingdon, where police have invoked S136 Mental Health Act.

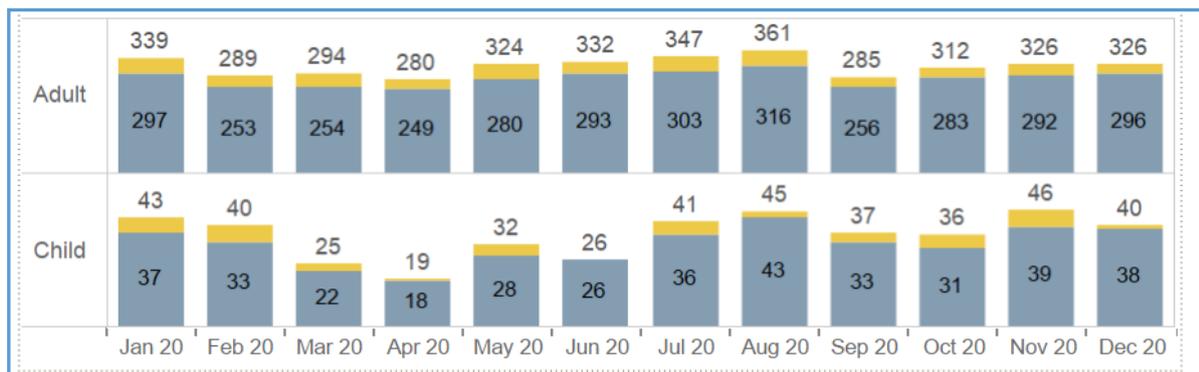
For Hillingdon, 11% (1,700/year) of all emergency calls to the police are to someone experiencing a mental health crisis. 8% (4,600/year) of all non-emergency deployments are to an incident that has a significant mental health element.

Based on those numbers the demand on policing is very significant and the Mental Health team take a pro-active approach in identifying risk and repeat demands, with close partner liaison with Approved Mental Health Professionals, Mental Health Trust, Local Authority and the London Ambulance Service.

The team continue to work with police colleagues and external partners to focus on risk management and reduction. They have developed an excellent Mental Health toolkit which has been promoted across West Area BCU and is available to every officer.

Breakdown of Adult/Child involvement in all Mental Health incidents during 2020 on WA BCU

(Blue is unique individuals, yellow is repeats)



Safeguarding Hub

The co-location of our CAIT referrals desk and Police Conference Liaison Officers (PCLO) in the MASH has really improved the effectiveness and timeliness of joint working. Due to the global pandemic, we have seen a move to remote working where possible, in order to protect our colleagues and the public. Every MERLIN notification continues to be assessed by the MASH team. Hillingdon MASH were dealing with on average, 1000 notifications per month which has increased over the year and continues to present challenges.

Looking forward

Training - Like many organisations, the Met has experienced a delay to training programmes due to Covid 19. However, the public protection courses have been refreshed and are now being rolled out again in a Covid compliant format. The challenge going forward will be to ensure that all staff are trained to required standards on an initial safeguarding course which will provides valuable inputs around some of the fundamental safeguarding principles, including the referral process, strategy discussions and meetings.

Increase disruption activity around high harm offenders – the Predatory Offender Unit was expanded in March with a further two Detective Constables to ensure there are more resources targeted towards our highest harm offenders who pose a safeguarding risk to both adults and children. The POU provides our Public Protection teams a much need proactive capability to focus on such an important area.

Increase provision for repeat victims of domestic abuse - we are looking to bring together a team to focus on DVPN / DVPO's, Stalking Prevention Orders, injunctions and restraining orders, working closely with our MARAC team with the overall aim to reduce risk for our most vulnerable residents. The team will work closely with the Predatory Offender Unit and our Community Safety Unit teams.

Historic Sexual Offences/Child Abuse – we hope to create two additional teams starting in the coming months to focus on historic reports of sexual offences and child abuse. This will ensure that these lengthy and complex investigations have the focus and resource they require whilst freeing up the current teams to investigate the recent cases which often hold more immediate risk.

11. Safeguarding Partnership Agency Contributions

11.1. Central and North West London NHS Foundation Trust (CNWL)

CNWL provides a range of services to both adults and children in Hillingdon. In the first wave of the pandemic staff from health visitors, school nursing, paediatric therapies and one member of the safeguarding children team were redeployed to ward settings as they were

registered nurses, with the priority to save lives. The Named Nurses for Safeguarding Children were not redeployed and, with their team, continued to provide advice and support for staff on protecting children.

In the second wave of the pandemic all these staff remained in their post in children's services. The impact of lockdown and school closures led to an increased risk for some children. Children became hidden during covid, as some families were isolating and, in the lockdowns, they were not attending school. This was demonstrated through the identification of safeguarding concerns within CNWL services and consequently increased referrals to Children's Social Care.

To ensure our staff were vigilant in identifying risks the Safeguarding Children Team raised awareness about these areas through supervision, briefings, and training. Safeguarding Supervision for our staff continued to be offered during Covid. This was invaluable in ensuring that concerns were discussed, and support was given to staff. Our Safeguarding supervision offer (depending upon staff role) is delivered through groups or 1:1 session. In order to adapt to Covid restrictions this has been delivered through virtual sessions.

The development of the virtual world has meant that our staff have been able to easily access case conferences and other meetings. There have been positive improvements to health representation at strategy meetings and the development of the health pathway. CNWL services have adapted to providing virtual contacts for families and children where accessing the home has been difficult. Health visitors continued to offer face to face contacts where possible. The school nursing team adapted their services and used video or phone contact to maintain contact with children when the schools were closed.

Child and Adolescent Mental Health Services have been extremely busy in recent months – specifically the Urgent Care team who have been utilising extra resources to support the crisis pathway and offer brief intervention work to divert away from A and E attendance where possible and relapse prevention work to manage crises. ACTs (Assertive Community Team) have continued to operate across all of the boroughs to provide intensive treatment at home as an alternative to an inpatient admission. Earlier on in lockdown the majority of crisis presentation were by those young people who were already known to CAMHS but in the final quarter of 2020-21 there has been a twofold increase across all CAMHS urgent presentations

– young people who are both previously known and unknown. CAMHS continue to receive high numbers of referrals needing ‘urgent’ assessment (as opposed to routine), reflecting a higher acuity of presentations – increased self-harm and suicidality – in the last few months.

Throughout the Covid-19 pandemic, the CNWL Hillingdon Safeguarding Adults and Mental Capacity Act (SA and MCA) Specialist has remained working from Beaufort House. Their role has remained the same and they continued to provide support to staff. However, one change is that the annual visits they normally made to each team were put on hold but have recommenced virtually in 2021. In addition, all face-to-face training sessions were discontinued, and all training was provided by e-learning. From March 2021, virtual SA training sessions were provided.

Learning from the Pandemic:

CNWL Hillingdon reported more Safeguarding Adult concerns in comparison to other Boroughs where CNWL provide services. Throughout and after the pandemic, CNWL have noted an increase in SA concerns. This is in line with other areas and has been recognised as being one of the impacts of poor mental health on the general population. CNWL recognises the importance of communication and information sharing across all aspects of practice, and particularly in respect of domestic abuse concerns. Virtual meetings were held to maintain contact with clinical services, and for the purpose of staff supervision and training. Weekly covid meetings were held for managers and staff to ensure that the latest information was shared.

Where patients had declined access to their homes virtual methods of maintaining contact were implemented, along with the promotion of self-care and training family members to deliver care where appropriate.

CNWL has maintained its position as a core member of both SAB and SCP, including representation from the Director of Quality, and contributions to the Independent Scrutiny Process. All CNWL staff are required to complete mandatory safeguarding adult training every three years, this training includes the priority areas highlighted by the SAB.

CNWL has a Trust-wife Domestic Abuse Lead. In addition, a Domestic Abuse (DA) Co-ordinator started in the service in August 2020. There is a dedicated DA page on our intranet, which staff can easily access for information and advice. Domestic abuse is included in generic SA training, which is mandatory for all staff to complete every 3 years. The Trust's third DA annual conference was held virtually on 26 November 2020, during the White Ribbon period. This was the best attended DA conference so far, with over 340 staff signing up.

CNWL have a DA Ambassador role, which staff volunteer for and over 82 staff have signed up so far. DA Ambassadors are expected to attend a 3-hour induction session and 4 forums a year as part of the role, which involves providing advice and support for staff in their services in relation to DA. DA Ambassadors also provide Train the Trainer sessions, so that staff can then provide DA training in their own services. CNWL are in the process of putting together guidance for staff impacted personally by DA and HR and Occupational Health are involved in this process.

Our SA & MCA Specialist visits each of the CNWL services in Hillingdon annually, to refresh staff regarding SA and MSP is discussed. Whenever staff contact the SA & MCA Specialist for SA advice, they are asked to confirm if they have gained consent from the service user to raise a SA concern with LBH. Even though MSP should always be considered before making a SA referral, there are certain circumstances that staff will need to raise a SA concern without a patient's consent e.g., public and vital interest.

11.2. London Fire Brigade

As LFB's service delivery was largely uninterrupted by the pandemic, we were still interacting with Hillingdon's community with safeguarding concerns identified and raised in the same manner. Home Fire Safety Visits were restricted to those most at risk/vulnerable, however new ways of delivering these remotely are being developed as a result of the pandemic. LFB has continued to play a key role in the Safeguarding Partnership, attending Boards and contributing to the multiagency audit.

Organisational learning from the pandemic is being captured centrally, to deliver pan-London improvements where required.

11.3. Local Authority's Designated Officer (LADO) and Education Safeguarding

The LADO, CP lead and DA lead offer advice, guidance and share resources to all schools in Hillingdon (including independent schools) relating to safeguarding and LADO queries. This includes the creation of specific guidance and resources when need is identified for example the creation of a separated parents and domestic abuse guidance for schools and a PowerPoint, staff briefing and KCSIE quiz highlighting peer on peer abuse.

Due to the impact of Covid, the LADO Team responded by developing new ways of working, including carrying out LADO Allegations against Staff & Volunteers Meetings, staff training and cluster meetings online.

The LADO Team also redeployed its staff to support frontline services – the Domestic Abuse Lead supported the IDVA Team, and the Child Protection Lead supported the Placements Team, both of which saw an increase in demand. This agile way of working demonstrates the commitment and supportiveness of the team to ensure children and families were prioritised.

LADO

The LADO service saw a decrease in the amount of referrals received this year, mainly due to schools offering on-line learning with only a limited number of students receiving face to face lessons. This offered less opportunity for inappropriate actions to be undertaken, although new allegations relating on-line issues have been made. This has resulted in fewer referrals being received from school but an increase in referrals relating to people, in their private lives, who work or volunteer with children and young people. This is against trend as our referral rate has steadily increased for the past three years. Referral statistics for the past four years:

- 2017-18 – 157
- 2018-19 – 188
- 2019-20 – 190
- 2020-21 – 147

Whilst Education staff remained the largest cohort of staff referred, there were significant increases in referrals relating to Health staff and Foster Carers. Of the 147 referrals received, 33% (44 referrals) were substantiated.

Complaints – Any complaints/Concerns, raised by the public, Ofsted, NSPCC or the Education Skills & Funding Agency are triaged by the LADO and Child Protection Lead, who, if a safeguarding concern is identified, lead on responding to these complaints.

Child Protection Lead for Education

The LADO and Child Protection Lead for Education continue to provide training to school staff, and other services including foster carers, voluntary settings, faith settings and other establishments, around issues of LADO processes and level 1 safeguarding training. Training is updated yearly in line with changes to guidance and procedure, and best practice. The Level 1 Safeguarding Training slides are circulated to all Designated Safeguarding Leads to enable them to deliver to staff within schools.

Services offered

Safeguarding Cluster Meetings – significant increased attendance due to meetings being held on-line. Moving forward, a hybrid method will be explored of on-line and face to face meetings.

This year, safeguarding training was delivered to School Governors over three sessions, resulting in 160 Governors receiving Safeguarding Level 1 training.

S175 & 157 Safeguarding Audit has been completed with 92 returns, 100% return rate from Local Authority Schools. The audit has been used to identify any themes across the borough where schools may require additional support from the team. One of which – Safer Recruitment Training has been devised and will be rolled out from June 2021. This course is fully booked with 60 attendees.

Domestic Abuse Lead for Education

The Domestic Abuse (DA) Lead for Education has embedded Project Encompass with access made available to all schools. Project Encompass is an information sharing system that enables police to notify schools securely and directly that a child has been present in the home when there has been a domestic abuse incident. 78 schools are part of this project.

The DA Lead has an agreement with Hillingdon Women's Centre workplace safespace to work collaboratively and for schools to be directed to the DA Lead as the single point of contact for DA related issues and to attend their conference as a guest speaker regarding DA and schools.

The DA lead works with faith organisations including creating an advert on the Sikh channel, to reach the Sikh community.

The DA lead provides DA awareness training to schools, social care, Youth Offending, Stronger Families, as well as providing workshops directly to young people about Health Relationships and impact of DA.

11.4. Uxbridge College

Uxbridge College provides further education mainly for 16-18's but also provides services to adults. The designated safeguarding lead for the College is a member of Safeguarding Children Partnership Board and the Strategic High-Risk Panel.

In February 2021, the college commissioned an external audit for its safeguarding practices. This was conducted by Dr Dan Grant an HMI safeguarding inspector who is respected in inspecting safeguarding in schools, colleges, and local authorities. The report was incredibly positive and stated the following:

'The college safeguarding arrangements are fully compliant with all statutory requirements.'

'The college has clear comprehensive and effective safeguarding policies and procedures which all staff understand.'

'Uxbridge College (HCUC) has very well-established and effective arrangements to ensure all decision-making processes relating to safeguarding matters remain independent from wider-college or other interests. The DSL and safeguarding officers operate within a clearly defined structure which is transparent and open to scrutiny.'

The College experienced high levels of safeguarding needs during lockdown. Increased levels of domestic violence and mental health were witnessed. Positives that arose were the use of online platforms to get professionals together and continue to effectively support young people.

The College has retained its kitemark 'Leaders in Safeguarding' in 2021 which recognises the quality of the work it does to safeguard its young people.

11.5. The Hillingdon Hospital

Hillingdon Hospitals NHS Foundation Trust provides services from both Hillingdon Hospital and Mount Vernon Hospital. The trust has a turnover of around £222 million and employs over 3,300 staff. They deliver healthcare to the residents of the London Borough of Hillingdon, and increasingly to those living in the surrounding areas of Ealing, Harrow, Buckinghamshire and Hertfordshire, giving them a total catchment population of over 350,000 people.

Hillingdon Hospital is an acute and specialist services provider in North West London, close to Heathrow Airport for which it is the nearest hospital for those receiving emergency treatment. Providing the majority of services from the trust, Hillingdon Hospital is the only acute hospital in Hillingdon with a busy Accident and Emergency, inpatients, day surgery, and outpatient clinics. The trust also provides some services at Mount Vernon Hospital, in co-operation with a neighbouring NHS Trust.

A strengthened safeguarding structure was implemented as a pilot from October 2020, with the development of our Safeguarding Families Team. The focus of this team is for safeguarding to be at the forefront of our clinical care. This includes engagement of frontline staff, provision of training and engagement and representation across local, national, and strategic partnerships. The Trust is a fully engaged member of the Hillingdon Safeguarding Partnership, attending all subgroups, Boards and contributing to learning and practice improvement locally. The Trust has seen a notable increase in presentation of young people with mental health needs during the pandemic. We have increased the frequency of Trust led multiagency meetings to ensure that a broad spectrum of professional expertise is available to consider individual cases, and we access the Partnership escalation procedures as required.

The Trust submitted a paper entitled 'Safeguarding Families in an Acute Health Trust during a Pandemic and Beyond' to demonstrate the impact of Covid-19 and how the service adapted in response. We are finalists for the HSJ patient safety 'NHS Safeguarding Award 2021.

11.6. London Borough of Hillingdon: Tenancy Management

Our service forms part of the Tenancy Management Service, we work with tenants and leaseholders who cause Anti-Social Behaviour, or who may be experiencing Domestic Abuse where there are underlying issues including mental health and substance misuse. Our role is to address, support and change behaviours to sustain a person's tenancy and prevent homelessness. On occasion where ASB is so serious we will also look to take Enforcement Action alongside support. We also support victims of Anti-Social Behaviour and Domestic Abuse and take the relevant action to risk assess, safeguard the victim, and implement support and safety measures.

During 2020-21 the service received an increase in domestic abuse referrals and an increase in the number of referrals regarding vulnerable adults being subjected to 'cuckooing'. All referrals are risk assessed and prioritised accordingly. Staff have worked throughout the pandemic from the civic centre and have continued to carry out visits to people's homes where necessary.

12. Priorities for 2021-22

The last year has seen considerable progress in the implementation of Hillingdon's Adult and Child Safeguarding Arrangements.

It is acknowledged that all safeguarding partners have faced a period of exceptionally high demand and pressure caused by the global coronavirus pandemic. The focus of all has now turned to recovery planning and both the Safeguarding Adult Board and Safeguarding Children Partnership have met to consider the multi-agency response needed and to identify safeguarding priorities for the coming year. The pandemic response has served to highlight the importance of effective multi-agency work, at all levels and across all services. The support of partner agencies, and residents, in our continued recovery from the pandemic will be intrinsic to the work of the Safeguarding Partnership in the next year, and beyond.

1. The Safeguarding Children Partnership has identified the following priority areas for 2021-22:
 - a. Neglect
 - b. Contextual Safeguarding

- c. Children with Complex Needs and Disabilities
 - d. Early Help Services
 - e. Child Sexual Abuse
2. The Safeguarding Adult Board has identified the following priority areas:
- a. Making Safeguarding Personal
 - b. Domestic Abuse
 - c. Financial Abuse and Exploitation
 - d. Mental Health and Safeguarding
 - e. Self-Neglect
3. To continue with shared strategic priorities across the adult and child safeguarding partnership where appropriate, The Safeguarding Children Partnership and Safeguarding Adult Board will have 3 shared subgroups:
- a. Practice Development Forum,
 - b. Joint Strategic Safeguarding and Trafficking
 - c. Domestic Abuse

Review of Assistive Living Technology

Committee name	Families, Health & Wellbeing Select Committee
Officer reporting	Darren Thorpe, Head of Business Delivery & Market Management
Papers with report	None
Ward	All

HEADLINES

This review takes stock of the Council's current offer of assisted living technologies for the benefit of residents and looks at what further development and strategy the Council will use going forward to ensure the promotion of self-management, independence and for the Council and the wider health system, the management of demand on Social Care budgets.

Hillingdon has a solid core offer of Telecare and associated products for the remote monitoring of resident well-being. Alongside this the Council provides a responder service 24 hours per day, 7 days a week for those who do not have a suitable contact if they need assistance. This core offer includes pendants/call buttons, sensors for movement, gas & fire sensors and GPS tracking technology.

As part of the accommodation plan for older people, the Council has invested in Extra Care Services at Grassy Meadow Court and Parkview Court, where the properties are designed with assistive technology at the forefront of the support offered to residents and an example of this is that the housing manager is able to run a daily check on each person if they choose this, by talking to them via their telecare installations. Assistive technology is considered against any purpose built accommodation, but it is important to note that when contracting care provision be it in a care home or and in an individuals own home that a full range of kit is available to support that person.

Going forward, the significant rise in available technology to promote self help gives a range of opportunities now to support lifelong care planning from children through to adulthood.

The range of equipment is not limited to those with landlines or internet access with the introduction and availability of 5G hubs, therefore the reach for Assistive Technology has significantly increased and the Covid imposed use of remote working, monitoring and communication has given a refreshed impetus to continue with expansion.

The range of equipment being used by the general population for commercial use such as smart hubs, with voice activated light bulbs, door bells with video, text activated or time activated options on kitchen equipment, heating etc now make it significantly easier for those with additional needs to be supported to self-care.

This report establishes a definition of Assisted Living Technologies, sets out the current position

Classification: Public

Families, Health Wellbeing Select Committee 27 July 2021

in Hillingdon and opportunities within the wider marketplace. It seeks the Committee's approval to proceed with the on-going development and implementation of an ALT Strategy as part of the Council's wider digitisation agenda.

RECOMMENDATIONS:

That the Committee:

- 1. Notes the current position regarding the local ALT offer**
- 2. Agrees the action plan and future aims**

SUPPORTING INFORMATION

What is ALT?

It is important to establish what we mean by the terms "Assistive Technology" and "Assistive Living Technology".

Skills for Care offer a definition of Assistive Technology as a broad term to describe equipment that helps people to live independently and have greater control over their health and wellbeing, improving the quality of life for both users and their carers. It can include both simple and more complex systems and equipment.

They further define Assisted Living Technology as follows:

Telecare: the use of technology, including monitors and sensors, to promote independent living and support to people in need of care to live longer at home, in homely environments and in their communities. This may include returning home after a period of illness.

Digital Participation Services: to educate, entertain and stimulate social interaction to enrich the lives of people in need of social support.

Wellness Services: to encourage people to adopt and maintain a healthy lifestyle, to prevent or delay the need for support.

The Alzheimer's Society refer to Assistive Technology as devices or systems that help maintain or improve a person's ability to do things in everyday life. These can assist with a range of difficulties, including problems with memory and mobility.

Telehealth & Telemedicine is the use of video technology and health related remote monitoring to enable GP's, specialists and consultants to support patients and other professionals remotely by making a diagnosis, flexing treatment plans and medications and recommending treatments.

[\(\[Connecting Services, Transforming Lives - The Benefits of Technology-Enabled Care Services \\(tunstall.co.uk\\)\]\(https://www.tunstall.co.uk\)\)](https://www.tunstall.co.uk)

Hillingdon Demographics

The current population of Hillingdon is 309,300 and was estimated to increase by 2.2% (6,720) over the next 5 years (ONS Sub-National Population Projections, 2018-based). Like all local authorities in England & Wales, Hillingdon's population projections were retrospectively revised in 2018 and along with 39% of LAs show a decrease in expected growth. In the 2014 data release, our population was expected to be 323,000 in 2020; the current population is 4.2% lower than what was predicted.

The current population is split into the following age bands:

Age	2020 estimate	%
0-4	21,541	7.0
5-9	22,334	7.2
10-14	19,946	6.4
15-19	18,023	5.8
20-24	20,346	6.6
25-29	22,072	7.1
30-34	23,675	7.7
35-39	24,216	7.8
40-44	22,763	7.4
45-49	19,995	6.5
50-54	19,426	6.3
55-59	18,027	5.8
60-64	14,824	4.8
65-69	11,500	3.7
70-74	10,625	3.4
75-79	7,635	2.5
80-84	6,220	2.0
85+	6,142	2.0
Total	309,310	100%

(Source – [Joint Strategic Needs Assessment \[JNSA\] Populations Statistics 2020](#)) published by LBH BPT in April 2020)

There has been an increase of 56,300 (22.3%) in the population of Hillingdon since 2010/11.

Currently there are 42,102 people over the age of 65 and 6,142 people over the age of 85 in the borough. This increase over the past 5 years is broadly in line with the expected numbers.

(Source – [ALT Review 2010/11](#))

The number of people aged 18-24 predicted to have a long-standing health condition caused by a stroke, by age and gender, projected to 2040 is as follows:

Year	2020	2025	2030	2035	2040
People aged 18-44 predicted to have a long-standing health condition	59	57	56	55	55
People aged 45-64 predicted to have a long-standing health condition	469	500	516	522	518
Total population aged 18-64 predicted to have a long-standing health condition	528	557	572	578	573

Notes:

Rates for men and women reporting strokes are as follows:

Age Range	% males	% females
16-44	0	0.1
45-64	0.8	0.5

Source: Projecting Adult Needs & Service Information (PANSI) - Institute of Public Care & Oxford Brookes University

People with Dementia in Hillingdon

The number of people aged 65 and over predicted to have dementia, by age and gender, projected to 2040:

Year	2020	2025	2030	2035	2040
People aged 65-69 predicted to have dementia	190	223	256	263	262
People aged 70-74 predicted to have dementia	323	317	372	427	439
People aged 75-79 predicted to have dementia	456	558	557	653	748
People aged 80-84 predicted to have dementia	686	708	864	862	1,028
People aged 85-89 predicted to have dementia	706	792	812	1,009	1,039
People aged 90 and over predicted to have dementia	672	790	931	1,049	1,261
Total population aged 65 and over predicted to have dementia	3,033	3,388	3,791	4,262	4,777

Source: Projecting Older People Population Information System (POPPI) - Institute of Public Care & Oxford Brookes University

In the UK, the population of people over 85 years old is expected to double over the next 20 years (Officer of National Statistics 2017); and with four in five people over 85 having two or more serious health conditions (Barnet K et al 2012), the increase in people using ALT means that employers and staff need to be more aware of what types of ALT is available and how it can be used. Just as technology has become part of everyday life, the use of ALT has also become more acceptable and established. By embracing this sort of technology, we can empower people to

Classification: Public

Families, Health Wellbeing Select Committee 27 July 2021

own their own care and transform the way that services can be delivered.

Current offering - Telecare

The Hillingdon Telecareline service for residents to have access to remote monitoring that enables people to get the right support at the right time and give family members peace of mind that help is on hand.

Telecare is the core offer to any resident being assessed for social care needs on discharge from hospital. In some of the Councils properties this is hard wired and part of the core offer of the service.

The current number of Telecareline users is 6,835 as at 31 May 2021 and the breakdown of levels is as follows:

Level 1	2,885
Level 2	3,291
Level 3	153
Level 4	105

New users have increased by an average of 61 per month between April 2020 to March 2021. The number of new Level 1 clients aged 65+ for this period is an average of 18 per month.

The Telecareline emergency call alarm system and answering system is outsourced to a provider named Anchor OnCall, who provide 24/7 support and answer calls within the standards set out by the current TSA Telecare standards. Anchor OnCall will provide assurance and escalate calls to either a named responder, the council's own Mobile Response team or the relevant emergency services.

During April 2020 to March 2021, there were a total of 86,230 inbound calls/alerts to the monitoring centre for Telecareline customers. 76,731 of these were from customers and 9,499 from communal areas within sheltered or extra care schemes. A large majority of these will not have been emergencies but would have provided reassurance to those using. On average 98.4% of telecare alarm calls are answered with 60 seconds, these are then triaged as appropriate for a response.

The installation, maintenance and repair of equipment is provided by the Council and referrals are handled via the Hillingdon Social Care Direct team.

The service is currently offered free of charge to residents aged 75 and over. The 4 levels are broken down as follows:

- **Level 1** - is the standard service comprising of a lifeline unit and pendant, smoke detector and bogus caller alarm, the resident must have 2 named responders who hold a key and agree to respond to an emergency any time (£1.13 per week)

Classification: Public

Families, Health Wellbeing Select Committee 27 July 2021

- **Level 2** - In addition to Level 1 support this also includes access to a mobile response service for those residents who do not have named responders (£5.00 per week)
- **Level 3** - In addition to the Level 1 service, the resident would also have access to a range of additional detectors and/or sensors appropriate to their assessed need (£8.50 per week)
- **Level 4** - This level of service would include access to the full range of TeleCareLine sensors and detectors to address needs, including safer wandering equipment and also the Mobile Response Service (£12.00 per week)

A further range of enhanced equipment is available to support people with memory loss and can be adapted to meet individual needs. Additional equipment can include a carbon monoxide detector, a heat sensor, a bed monitor, a falls detector, and a property exit sensor.

Social Care:

Extra Care

Extra Care housing is designed specifically for people aged 55+ with additional care needs, that enables people to live independently, whilst providing reassurance to friends and family peace of mind. It provides the security and privacy of a home of your own, a range of on-site facilities and staff are available day and night to provide care as required.

Grassy Meadow, Park View Court, Triscott House and Cottesmore House have a range of Assisted Living Technologies in place. All flats and communal areas have Tunstall alarms available should a resident require support. Door sensors are fitted as well as smoke alarms to ensure residents are safe. Park View Court and Grassy Meadow Court have interactive bathrooms available set up with special lighting and Bluetooth connectivity so music can be played whilst using.

Both schemes have a Tovertafel (Magic Table) situated in the communal lounge to encourage interaction, reminiscence and relaxation for people with dementia. The combination of light and sound provides physical and mental stimulation and encourages movement, eye contact, focus and social engagement.

Care Homes, supported living schemes and day care settings

Care homes have not historically been big users of ALT as they have 24 hour staffing in place, however, some of the Council's Learning disability services have used sensors for the monitoring of individuals with epilepsy for some time and this is a significant area for development and promotion and in particular those younger children, whose parents are caring for them at home. During the Covid Pandemic, restrictions on visiting in care homes has promoted the use of devices for communication with both relatives and GP's and community matrons. Virtual ward rounds of the care homes have taken place with the use of ipads and facetime. These are practices that will be developed further and improved upon.

The use of communication tools for those with LD/mental health and autism are fully accessible via apps and create interaction and remove bars to being independent for these people.

Classification: Public

Families, Health Wellbeing Select Committee 27 July 2021

One supported living provider for people with LD contracted by the Council has developed their own range of monitoring equipment to assist in the compliance and quality monitoring services and this includes the monitoring of time and place of care delivery within 15 minutes of the allocated time, the administration of medication, completion of care tasks and the remote monitoring of the environment, for example, the usual sensors, but also fridge temperatures to ensure that the food people are choosing in their own homes is kept safely. In addition, the technology is used by this provider in home care and is also used to promote safety for their staff and enables them to remotely monitor those that are lone working, by giving them access to a call/help function on their device.

Current offering - Digital Participation Services & Wellbeing Services

Good examples of encouraging and enabling social interaction are the Magic tables in 7 of the borough's libraries, including Botwell Green, Uxbridge, Ruislip Manor and Northwood Hills, as well as Grassy Meadow Court, Park View Court and Queens Walk Resource centre.

Other examples of Digital Participation Services and Wellbeing Services include:

We Care UK/Alexa Echo Devices

Throughout the pandemic, there have been various projects undertaken to support residents. In December 2020, the Sport and Physical Activity Team began working with WeCareUK (an independent charitable organisation) to supply Alexa Echo devices to residents living with dementia for a 6-9 month trial. The aim was to study the usefulness of such devices in supporting a person living with dementia. Each Alexa Echo device has an 8 inch screen and a total of 10 devices were distributed to 6 residents and 4 professionals working in dementia support in the borough. Success so far includes the use of video calling both by professionals and family members. This proved very helpful in assisting the person living with dementia to recognise who they are speaking to which is difficult in a traditional phone call. Family members reported the benefits of the 'drop in' call functionality, which allows them to check on their loved ones without them needing to answer the call. Vocal reminders can also be set which are relevant to the person, including things such as 'time to take your medicine', 'it's time to drink some water', 'why don't you take a walk'. It was also used as a reminder for other dates or appointments such as doctors or phoning the hairdresser. Photos can also be uploaded to the screen so it can be used as a frame, setting reminders for favourite music or TV shows to be played at set times throughout the day. This was found to be especially useful with 'sundowning' to help distract a person.

GPS Watches

Everon GPS watches are being used which allows people with dementia or other cognitive impairment to live a more active, safer and freer life. 'Safe' zones can be configured on the watch and position alerts are sent on a regular basis which makes it easy for family members, carers or emergency services to follow or locate the wearer via computer, smartphone or tablet. This technology encourages independence whilst also providing peace of mind. We currently have 24 units issued to residents, of which 7 have a learning disability and 17 are older people.

Classification: Public

Families, Health Wellbeing Select Committee 27 July 2021

These watches/devices can be used for travel training purposes and also for those who are at risk of leaving an area without the required support so a GEO fencing function allows parameters to be set and if these are breached, notifications are sent to the designated responder.

Just Checking Technology

Just Checking technology consists of small wireless movement sensors which can be discreetly placed around the home, which gather data on the activity of the person living there. It can identify which rooms have been visited and for how long. It includes door sensors on internal and external doors to see when they are opened and for how long. In combination with the movement sensors, you can tell when visits have been received and when an individual leaves or enters the property and how long they are out. This technology provides full activity reports which can help care professional's complete objective, evidence-based assessments and create appropriate care plans allowing the right support at the right time to be put in place.

A good example of when this can be used is when a person reports that they are self-caring, eating and drinking etc, when it appears evident that this is not the case. The system is purely movement based and the discreet monitoring will tell the care team if that person is moving from the chair to the kitchen for example, spending time in the kitchen making drinks and food etc and if they are sleeping in the chair as opposed to going to bed. It helps to understand the patterns of behaviour that allow care to be tailored.

Virtual Reality Technology

The Council recently purchased 24 virtual reality headsets from The Cornerstone Partnership (in association with Antser). The headsets provide the user with immersive experiences in a range of situations including childhood trauma, domestic violence, drug and alcohol abuse, child criminal & sexual exploitation, as well as autism and dementia.

Staff within social care teams are being accredited to use the technology and roll out across the different teams, and also with care providers, voluntary organisations and the public.

The training is intended to enable staff to be able to have an empathetic view from the service users perspective on why they behave in certain ways and how they can make changes to their approaches and practice that improve services to residents. The Council will work with the provider to increase the topic content included and Children's social care are looking at using the headsets for virtual team or social worker engagement and virtual contact with children and young people. We are also looking at developing staff profiles within the headsets so children can choose their own social worker based on their interests.

Barriers to using ALT

The 2019 Sector Pulse Check by Hft investigated social care providers appetite for, and understanding of assistive living technologies. It found that 76% of social care providers use assistive technologies, although only 19% use them as a core part of their service provision.

When asked about barriers to greater use, funding was the most mentioned obstacle, along with limited understanding of technology.

Classification: Public

Families, Health Wellbeing Select Committee 27 July 2021

Barrier	%
Providers cannot fund assistive technologies	75
Local authorities are unwilling to fund it	71
Lack of awareness of assistive technology	59
Staff are unsure how to use the technology	59
Providers do not know/understand how to access the technology	58
Providers are unsure what technology is available	47
Lack of available training in assistive technology	42
Family members have concerns over support being provided by technology	39
People we support are unsure how to use technology	34
Providers are unsure where to source technology	31
Technology companies do a poor job of promoting which services and products are actually available	29
No solution to meet their needs	12

During the pandemic, providers reported that the main barriers to using assistive technology was lack of available equipment, some staff did not have the necessary skills to support residents, residents were not used to using this type of communication tool or the setting did not have adequate internet or wifi connections.

The Council is currently working on the available infrastructure to ensure that the availability of adequate Wifi is not a barrier to using assistive technology to support an individual to remain independent. The availability of 4/5G home hubs allow for these circumstances.

Safeguarding – a range of questions in relation to the capacity and consent of individuals can pose a barrier to using technology, although this can be well managed through the appropriate MCA assessments and in the individual’s best interests. In addition, the use of Alexa type of hubs has raised questions about how people are safeguarded from financial abuse if some is able to ask Alexa to order something for example. This can be alleviated via the control settings within the kit being limited.

Summary

It is clear that residents of all ages desire being able to be as independent as possible and that this is conducive with the need to manage demand on social care budgets going forward. As the integration with health and social care begins to form, work with partners from these sectors as well as voluntary organisations to gain a rounded approach to using technology to support residents is vital. The learning from enforced virtual ways of working, communicating and providing greater access to health support in some cases needs to be retained and built on and the timeliness of this report will focus the work to establish an ALT strategy for the Council that extends beyond the Telecare offer.

Vision for Adult Social Care

The development of an overall strategy for ALT within the borough will support the vision for Adult

Classification: Public

Families, Health Wellbeing Select Committee 27 July 2021

Social Care including that:

- Care and support will be personalised and will prevent, delay and reduce the need for long term care.
- Residents will be enabled to live independent and fulfilled lives, supported within and by their local networks wherever possible.

Action Plan

- Officers will review the 'core' kit available from the Telecare offer, identify any cost implications to any additions to the kit
- Research what is provided by contracted providers through the provider forums
- Address any barriers to using technology where it is needed
- Develop a strategy for the modernisation of the ALT offer, which includes a core offer to all residents in need, the integration of the health and care partners approach to remote monitoring and the expectations of providers via the procurement and contracting route in relation to the use of ALT to support residents and deliver reductions in unnecessary contact time.
- Research the use of DHSC and NHSE innovation grants for improvement or pilots
- Create a plan for the maximisation of uptake and monitor the impact on well being and social care demand.

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

None at this stage, pending any findings by the Committee and any recommendations forwarded to Cabinet.

Financial Implications

None at this stage, pending any findings by the Committee and any recommendations forwarded to Cabinet.

However, as the review progresses, the Committee should seek to ensure any recommendations are feasible, cost-effective or indeed can save the Council money. Any early findings or recommendations by the Committee which may result in a call on Council budgets should be discussed at the earliest opportunity by the Chairman, with the relevant Cabinet Member, Cabinet Member for Finance and the Leader of the Council to assess viability.

This is in accordance with the approved Protocol on Overview & Scrutiny and Cabinet Relations approved by full Council on 12 September 2019.

Legal Implications

None at this stage.

BACKGROUND PAPERS

None

This page is intentionally left blank

2022/23 BUDGET PLANNING REPORT FOR SERVICES WITHIN THE REMIT OF FAMILIES, HEALTH AND WELLBEING SELECT COMMITTEE

Committee name	Families, Health and Wellbeing Select Committee
Officer reporting	Iain Watters
Papers with report	N/A
Ward	All

HEADLINES

This is the first opportunity for the Select Committee to discuss the current stage of development of budget planning work with regard to services within the remit of Families, Health and Wellbeing committee. This paper gives a strategic context in which the detailed proposals to be discussed at Select Committee meetings in January 2022 will need to be considered.

RECOMMENDATIONS

1. **That the Committee notes the financial context in which the 2022/23 budget setting process will take place in advance of detailed savings proposals being developed and approved at Cabinet in December 2021.**

SUPPORTING INFORMATION

2. This is the first of two opportunities within the planning cycle for the Select Committee to consider issues relating to budget planning for 2022/23 and beyond. The focus of this report is the broader financial position of the Council, with the report to be considered in January 2022 setting out the detailed budget proposals for relevant services, those proposals having been included in the report to Cabinet on the Medium Term Financial Forecast (MTFF) in December 2021.

Corporate Overview – General Fund

2021/22 General Fund Revenue Monitoring & COVID-19 Impact

3. The ongoing impact of COVID-19 on the Council's finances during 2021/22 is projected to generate pressures totalling £14,478k, bringing the total pandemic related pressures since March 2020 to £47,553k. To date, sufficient funding has been received from Government to meet these costs without recourse to local resources, however the Council has set aside £10,126k in a dedicated Earmarked Reserve to manage any costs over and above funding received from the Government.

Classification: Public

Families, Health and Wellbeing Select Committee – 27 July 2021

4. With the COVID-19 pressure being managed within external funding, an underspend of £351k is reported on the General Fund at Month 2 (May), with the underspend being driven by a combination of lower borrowing costs linked to reductions in capital spending and a favourable outlook on demand-led budgets. General Balances are projected to total £26,452k at 31 March 2021 in line with the Council's recommended range for unallocated reserves between £15,000k and £35,000k.

2022/23 to 2025/26 General Fund Savings Requirement

5. While the focus of the discussion for the Select Committee should be the specific services within its remit, it is important that this discussion is conducted in the context of the overall corporate financial position. The following paragraphs outline the medium term financial position presented in the 2021/22 Budget Setting Report approved by Cabinet and Council in February 2021.
6. At the time of budget setting, the gross savings requirement for the Council's General Fund over the period 2022/23 to 2025/26 was projected to total £44,332k which was primarily driven by inflationary cost pressures, growing demand for services and the cost of servicing and repaying borrowing incurred in delivery of the capital programme which are expanded upon below. For 2022/23, the gross savings requirement was forecast to total £10,302k.

Table 1: Projected Budget Gap detail

	2022/23 £'000	2023/24 £'000	2024/25 £'000	2025/26 £'000	Total £'000
Changes in Funding	(868)	(2,613)	(1,462)	(2,534)	(7,477)
Inflation	6,342	6,497	6,654	6,816	26,309
Contingency / Service Pressures	3,330	3,406	3,442	3,442	13,620
Corporate Items (incl. capital financing costs)	1,498	5,938	2,406	(383)	9,459
Underlying Savings Requirement	10,302	13,228	11,040	7,341	41,911

7. An uplift of £7,477k in recurrent funding is projected over the four-year MTF period, primarily driven by the favourable movement within the taxbase as new homes are delivered across the borough – a growth rate of circa 6% on the 2021/22 baseline.
8. Inflation represents the single largest element of the underlying savings requirement, reflecting the growing cost of maintaining current service provision, with a headline pressure of £26,309k over the MTF period. Workforce inflation through anticipated annual 2% pay awards and an expected 0.5% per annum increase in employers' pension contributions accounts for £13,297k of this growth, with £10,396k increases on the cost of care provision where annual pay inflation of around 4% is expected to keep pace with growth in the London Living Wage. The remaining £2,616k inflation reflects other contracted expenditure, energy costs and other expenses.
9. Increasing demand for services linked to a growing and changing population accounts for £13,620k of the projected savings requirement, which reflects a continuation of current trends

across Waste disposal, Adult Social Care, SEN Transport and Children’s Social Care. Annual growth in the cost of waste disposal due to a combination of population growth and price increases is expected to require £3,600k growth, with £4,454k increase in demand for Adult Social Care reflecting growing demand across the full range of care provision. Provision of £3,322k is included to manage growing demand across Children’s Services, with £2,244k uplifts on SEN Transport partially driven by the ongoing impact of the 2014 Children’s and Families Act.

10. Corporate Items, which primarily relate to the ongoing costs of financing capital investment, represent the remainder of the budget gap with £9,459k growth required over the MTFF period. Budgeted capital investment in the current programme is the key driver of a £6,535k growth in debt financing and repayment costs over the medium term. The remaining balance of Corporate Items relate to the unwinding of COVID-19 related reductions in the TfL Concessionary Fare Levy and use of capital receipts to finance transformation activity, alongside moving the Council Tax Older People’s Discount to being funded from base budget rather than Earmarked Reserves.
11. The position presented would result in a net increase of £41,911k in the cost of delivering services to residents, which alongside unwinding the use of £2,421k balances to support spending in the 2021/22 financial year results in a gross savings requirement of £44,332k over the four year period to 2025/26. The following table sets out the outline budget strategy presented in February 2021 to manage this savings requirement.

Table 2: Savings Requirement (February 2020) 2021/22-2022/23

	2022/23	2023/24	2024/25	2025/26	Total
	£'000	£'000	£'000	£'000	£'000
Underlying Savings Requirement	10,302	13,228	11,040	7,341	41,911
Unwind Prior Use of Balances	2,421	1,000	0	0	3,421
Proposed Use of General Balances	(1,000)	0	0	0	(1,000)
Gross Savings Requirement	11,723	14,228	11,040	7,341	44,332
3.8% Council Tax Increase	(5,054)	(5,290)	(5,606)	(5,936)	(21,886)
Current Savings Proposals	(2,797)	0	0	0	(2,797)
Savings to be identified	3,872	8,938	5,434	1,405	19,649
Closing General Balances	25,452	25,452	25,452	25,452	N/A

12. The assumed continuation of the Social Care Precept at 2.0% per annum plus a 1.8% inflationary uplift in the core Council Tax would deliver £21,886k towards the saving requirement, alongside existing savings proposals of £2,797k leaves £19,649k of savings to be identified over the four year period. This budget strategy is predicated on ongoing use of balances to support service budgets and therefore General Balances are expected to stabilise at £25,452k, in line with the recommended range for reserves.

Strategy to deal with the Budget Gap

Classification: Public

Families, Health and Wellbeing Select Committee – 27 July 2021

13. The Council continues to be well placed to manage the ongoing financial challenge, with a solid track record of delivering balanced budgets for the forthcoming financial year and securing an underspend position by outturn. This has been achieved through delivery of savings under a range of themes, including:
- a. Service Transformation represents the single largest category of savings, with items presented in this category primarily linked to implementation of the BID Programme;
 - b. Savings proposals from Zero Based Reviews represent budgets which have been identified as being surplus to requirements through the line-by-line review of outturn and similar exercises being undertaken by Finance;
 - c. Effective Procurement savings capture the benefits secured from efficiency savings from contracted services and reviews of delivery models in a number of areas;
 - d. Preventing Demand - initiatives such as the Supported Living Programme where investment in early intervention and other support can avoid more costly intervention at a later date, and;
 - e. Income Generation & Commercialisation proposals primarily relate to amendments to Fees and Charges.
14. While this successful approach is to be maintained for this year's budget setting cycle, savings proposals are being developed on a multi-year basis with the intention of delivering a more strategic presentation of activity to manage the budget gap in the medium term. Proposals will be developed over the coming months and subject to approval by Cabinet in December 2021, will be presented to Select Committees in January 2022 alongside the public consultation on the budget for the forthcoming year.

Corporate Overview - Other Funds

15. The Housing Revenue Account (HRA) is subject to a statutory ring-fence, with £58,944k of rental income from the Council's social housing provision being reinvested in maintenance, improvement and expansion of housing stock. The approved capital programme includes funding to acquire 419 new dwellings over the period to 2025/26, providing a mechanism to replace an expected 230 sales of properties to sitting tenants through the Right to Buy scheme. The financial standing of the HRA remains sound, with the 30 Year Business Plan demonstrating sustainability of the current operation over the longer-term. The next iteration of the HRA MTF and Business Plan will incorporate the estate regenerations schemes recently endorsed through the ballot process.
16. The Council receives funding for Schools' Budgeted Expenditure through the Dedicated Schools Grant (DSG), which is a ringfenced grant. The DSG funds both the delegated individual schools budget and items that the School and Early Years Finance (England)

Regulations allow to be retained centrally by the Council, including Special Educational Needs, Alternative Education provision and Early Years provision.

17. As highlighted in the monthly budget monitoring reports to Cabinet, funding provided by the Department for Education through the DSG has failed to keep pace with growing demand on High Needs following the introduction of the 2014 Children’s and Families Act. As of the latest budget monitoring position, the cumulative deficit on the DSG is projected to reach £34,294k by 31 March 2022. As with all authorities reporting such a deficit, the Council is currently working on development of a recovery plan for the management of this deficit, with support from the Department for Education.

MTFF Process Update and Timetable

18. The timetable for the budget process has been refreshed and the first MTFF sessions with Groups took place during July to review the detailed budget proposals developed by each group. Progress on the development and delivery of these proposals will be monitored monthly by the Corporate Management Team and Cabinet Members throughout the remainder of the year.

Table 3: MTFF Timetable

March to June	Review of Budget Assumptions and initial development of Savings Proposals
July	Summer Challenge Sessions
	Summer Budget Report to Cabinet (not published)
	Budget Scoping Reports to Select Committees
August to September	Refresh of Budget Assumptions and refinement of Savings Proposals
October	Autumn Challenge Sessions
November	Autumn Budget Report to Leader/Cabinet (not published)
December	Provisional Local Government Finance Settlement
	Consultation Budget Report to Cabinet
January	Public Budget Consultation
	Following year Budget Proposals to January POCs
February	Final Local Government Finance Settlement
	Final Budget to Cabinet and Council

Next Steps

19. The Medium Term Financial Forecast setting out the draft revenue budget and capital programme will be considered by Cabinet in December 2021 and issued for consultation during the remainder of December 2021 and January 2022. This will include detailed consideration by each of the Select Committees of the proposals relating to their respective services.

20. Key issues within the remit of Families, Health and Wellbeing Select Committee will continue to be tracked through the Council's budget monitoring process, with monthly reports to Cabinet detailing the latest position and outlook for 2020/21.

Implications on related Council policies

Select Committees are at the heart of how the Council shapes policy at Member level.

How this report benefits Hillingdon residents

Select Committees directly engage residents in shaping policy and recommendations from the Committees seek to improve the way the Council provides services to residents.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

The Council's Budget: General Fund Revenue Budget and Capital Programme 2021/22 – reports to Cabinet 18 February 2021 and Council 25 February 2021.

The Council's Budget: 2021/22 Revenue and Capital Month 2 Budget Monitoring – report to Cabinet 8 July 2021

TERMS OF REFERENCE AND MEMBERSHIP OF THE CORPORATE PARENTING PANEL

Committee name	Families, Health & Wellbeing Select Committee
Officer reporting	Anisha Teji - Democratic Services
Papers with report	Appendix A – Updated Terms of Reference
Ward	N/A

HEADLINES

The purpose of this report is to enable the Committee to update the Terms of Reference for the Corporate Parenting Panel with reference to the meeting schedule and membership.

RECOMMENDATIONS:

That the Committee:

- 1. Agrees to amend the Terms of Reference to enable the Corporate Parenting Panel to hold meetings quarterly (as set out in Appendix A);**
- 2. Appoint Councillors Nick Denys, Heena Makwana & Kerri Prince to be the Elected Members on the Panel on the basis of political balance (2 Con: 1 Lab);**
- 3. Appoint Councillors Judith Cooper, Becky Haggar and Jan Sweeting to be named substitutes; and**
- 4. Upon the recommendation of the Chairman of this Committee, to confirm Councillor Nicky Denys as the Chairman of the Corporate Parenting Panel and Councillor Heena Makwana as the Vice-Chairman.**

SUPPORTING INFORMATION

Meeting schedule

Following a recommendation from the Chairman, it is requested the Committee agree to amend the Panel's Terms of Reference so it reverts back to meeting quarterly rather than 6 times a year. This is set out in Appendix A. This Committee will continue to receive the minutes of the Panel as part of its own agenda, which will provide for regular updates on the Panel's work, where the Panel's Chairman and young people may also attend to present any findings.

Membership

The Committee, under the Constitution, is required to appoint Councillors to be the Elected Members on the Panel on the basis of political balance (2 Con: 1 Lab). The Committee is asked to confirm Councillors Nick Denys, Heena Makwana & Kerri Prince to be the Elected Members on the Panel. Furthermore, to agree Councillors Judith Cooper, Becky Haggar and Jan Sweeting to be the named substitutes.

Implications on related Council policies

The Panel strengthens our consultation and engagement with young people and children in care / care leavers.

How this report benefits Hillingdon residents

The Panel gives young people in Hillingdon a valued role within our democratic process and enables Councillors to work directly with them and hear their views.

Financial Implications

There are no financial implications with the establishment of the Panel.

Legal Implications

There are no legal implications arising from this report.

BACKGROUND PAPERS

NIL

Version: 27 July 2021

Terms of Reference of the Corporate Parenting Panel

The purpose of the Panel is to support the Families, Education and Wellbeing Select Committee in championing corporate parenting across the Council, directly engaging children in the Council's care and care leavers in the democratic and decision-making process, working with them and partners to monitor relevant service and improve outcomes and life chances.

Membership will comprise of:

Voting Members

- a) 3 Elected Members, who be appointed by the Families, Education and Wellbeing Select Committee based upon political balance, one of whom to be appointed as Chairman. A Vice-Chairman may also be appointed. Elected Members do not need to be Members of the parent Committee but cannot be Cabinet Members. 3 named substitutes, appointed by the Families, Education and Wellbeing Select Committee may attend in the absence of the appointed Members of the Panel and that they be from any of the Five Select Committees based on political balance.

Non-voting Members

- b) Up to 5 Children in Care Council Members (one of whom the Chairman or Vice-Chairman may ask to assist them informally in chairing a specific meeting).*
- c) Senior Officer from Children's Services
- d) Corporate Parenting Manager
- e) The Virtual School Head Teacher
- f) The Local Authority's designated LAC Nurse or Doctor
- g) 1 x Foster Carer representative

Advisors

Relevant Council officers, e.g. from Social Care, Early Intervention and Prevention, Housing Service, along with external representatives, e.g. Department for Work and Pensions, may attend relevant Panel meetings as advisors. Council officers should attend the Panel to present any reports to the Panel regarding their service area.

**This gives Children in Care Council representatives, in an informal capacity, a unique opportunity to get experience of assisting the Chairman or Vice-Chairman in the running of the meeting.*

Meetings and Operation

The Panel will meet four times a year and in private*

- a) The Panel will have in place a work programme for its activity.
- b) The Chairman of the Panel, in conjunction with other members, shall agree the dates of the Panel for the ensuing year, where possible.
- c) The Chairman of the Families, Education and Wellbeing Select Committee should authorise any additional meetings that may be required or requested by the Chairman of the Panel.
- d) The Panel will allow themes and agenda topics to be brought to them from the Children in Care Council (CiCC), with themes identified at each meeting.
- e) The Chairman of the Panel will agree agenda items in advance of the meeting.
- f) The Panel cannot establish any other sub-groups or bodies to carry out its responsibilities.

**Unlike the parent Select Committee, the Panel is not required to operate under statutory procedures outlined in the Local Government Act 1972 and access to information rules do not apply. This allows the Panel to be conducted in a flexible way to suit the requirements of the Members and young people participating in it.*

Terms of Reference

- a) To champion the seven corporate parenting principles introduced by the Children and Social Work Act 2017.
- b) To support the work of the Families, Education and Wellbeing Select Committee overseeing the Council's corporate parenting responsibilities by providing a strategic overview and monitoring of the statutory services for Looked After Children (LAC) and care leavers across the Borough, reporting back to the Committee on any findings, as appropriate.
- c) To actively engage young people who are looked after by the Council, along with care leavers, in order to ensure they have an opportunity to influence the development of services, participate in the decision-making and democratic process.
- d) To receive annual reports of the work of the Independent Reviewing Officers, LAC Health Team, LAC & Leaving Care Service, Virtual School and Fostering and Adoption Service.
- e) To consider the impact on outcomes for children on other relevant activities linked to LAC and care leavers lived experiences, e.g. emotional wellbeing.
- f) To undertake any associated activity, review or task as requested by the Families, Education and Wellbeing Select Committee, reporting back to the Committee if directed.
- g) That through the Chairman of the Panel, to advise the Families, Education and Wellbeing Select Committee and Cabinet Member for Families, Education and Wellbeing on matters relating to corporate parenting.
- h) To present the minutes of the Panel to a subsequent meeting of the Families, Education and Wellbeing Select Committee, where the Chairman of the Panel, along with any Children in Care Council Members, may attend to update the Committee on the Panel's work.

Extract from the Council's Constitution on the establishment of a Panel [approved 20 May 2021]: '(d) The Families, Health & Wellbeing Select Committee may establish a Panel to oversee the corporate parenting responsibilities of the Council.... The Committee may appoint 3 Members to this Panel based on political balance. Membership may include non-Cabinet Members not on the Committee. The Committee may also appoint relevant Council officers and other external stakeholders to the Panel and agree its chairmanship and operation. In agreeing its operation, the Committee will provide for the Panel not to be able to establish any other sub-group or body to carry out its responsibilities.'

This page is intentionally left blank

FAMILIES, HEALTH & WELLBEING SELECT COMMITTEE - CORPORATE PARENTING PANEL MINUTES

Committee name	Families, Health & Wellbeing Select Committee
Officer reporting	Anisha Teji, Chief Executive's Office
Papers with report	Appendix A – Draft Corporate Parenting Panel Minutes
Ward	All

HEADLINES

The Corporate Parenting Panel met on Tuesday 27 May 2021.

RECOMMENDATION

That the Families, Health & Wellbeing Select Committee notes the Corporate Parenting Panel minutes.

SUPPORTING INFORMATION

The draft minutes from the Corporate Parenting Panel from the meeting on Tuesday 27 May 2021 are included as Appendix A. For the Select Committee's purposes, these minutes are for noting and will be approved by the panel at the next meeting on 26 July 2021.

Implications on related Council policies

The Panel will provide an important voice for children in care and care leavers, ensuring their views are heard as part of the council's policy making and decision-making processes

How this report benefits Hillingdon residents

The Panel gives young people in Hillingdon a valued role within our democratic process and enables Councillors to work directly with them and hear their views.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

This page is intentionally left blank

Minutes

CORPORATE PARENTING PANEL

27 May 2021



Meeting held at Committee Room 5 - Civic Centre,
High Street, Uxbridge

	<p>Voting Panel Members Present: Councillors Nick Denys (Chairman), Heena Makwana (Vice-Chairman), and Tony Eginton</p> <p>Non-Voting Panel Members Present: Children in Care Council Members x3, Helen Smith (Principal Social Worker and Corporate Parenting Manager), Kathryn Angelini (Virtual School Head Teacher),</p> <p>LBH Officers Present: Tehseen Kauser (Head of Service for Looked After Children and Leaving Care), Michelle Thomas (safeguarding Manager), (Neil Fraser (Democratic Services Officer)</p> <p>Councillors Present: Councillors Philip Corthorne and Kerri Prince</p>
27.	<p>APOLOGIES FOR ABSENCE (<i>Agenda Item 1</i>)</p> <p>Apologies were received from Alex Coman – Assistant Director, Safeguarding, Partnership and Quality Assurance).</p>
28.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (<i>Agenda Item 2</i>)</p> <p>None.</p>
29.	<p>MINUTES OF THE MEETING ON 22 APRIL 2021 (<i>Agenda Item 3</i>)</p> <p>RESOLVED: That the minutes of the meeting held on 22 April 2021 be approved as a correct record.</p>
30.	<p>PRESENTATION BY YOUNG PEOPLE - OUR PRIORITIES FOR 2021/2022 (<i>Agenda Item 4</i>)</p> <p>Consideration was given to a presentation detailing the priorities for the Council as Corporate Parent, as identified by the young people (YP) attending the various Children in Care Councils (CiCC) across the Borough. Priorities included:</p> <p>Step Up:</p> <ul style="list-style-type: none">• Continue to host events where YP's experiences and views can be shared (i.e. Skills to Foster & Brilliant Parenting events);• Focus on positive handovers when a social worker leaves or a YP moves teams;• The ability to pick your social worker – having all teams use the social worker profiles;• Finding a way for YP to be able to raise issues with social workers that they

might not feel comfortable raising, whether that's because they're unhappy with social worker, or because they don't want to upset or add stress to the social worker;

- Keep YP informed on how to keep themselves safe - what to look out for and signs to avoid, and what to do should they find themselves in a dangerous situation.

Stepping Out:

- Greater support for Mental Health;
- Greater support with education & finding a job post-18;
- Greater support and information regarding housing options;
- Increased contact with Social worker's and PA's (this was greatly appreciated during the pandemic);
- Social events;
- Providing work experience and/or paid work placements/jobs within the Council;
- Review the local offer in respect of wider financial and community support;
- PA's to have a stronger voice in being advocates (especially with housing);
- Focus on preparing YP for independence from a younger age;
- Managing expectations & being honest;
- Greater awareness of corporate parenting across the Council.

General priorities also identified:

- More youth services, places to play and hangout, drop in centres, etc.
- Greater YP involvement in interviews with PAs/social workers, meeting with senior Council officers, etc.

When asked that they felt was the most important of the priorities listed, the YP present at the meeting advised:

- The relationship between YP and their social workers/PA
- Retain the ability for direct contact with support professionals, as seen throughout the pandemic;
- Faster responses to issues highlighted to social Workers/PAs.

Feedback from some YP was that their voice was not always being heard. Officers advised that the views expressed by the YP had been shared with senior managers, and the Council's local offer to its YP was currently under review to better meet the needs of the YP.

Members sought additional detail and asked a number of questions. In response, officers advised that the priorities as outlined had been obtained from a representative subset of the Borough's YP through their CiCC meetings, though additional feedback was obtained from social workers and PA's. All feedback was being incorporated into the revised local offer.

Regarding feedback from Coram Voice (CV), officers confirmed that while YP had a network of professionals to contact in the event of an issue, CV was available as an external provider for the YP, should they feel dissatisfied by the Council's actions to resolve their issue. Officers met with CV quarterly to receive feedback and discuss issues, though there remained regular contact between meetings. YP present at the meeting advised that more could be done to reinforce the availability of CV at CiCC meetings and this was being actioned.

On the matter of quality assurance, officers confirmed that a robust process was in place that included regular internal meetings to discuss feedback and actions, with an independent auditor then reviewing said actions. In addition, Ofsted provided independent quality assurance through their reviews, and the Council also conducted its own internal auditing. Officers confirmed that, should a YP feel unhappy with the Council as Corporate Parent, a complaints procedure, with escalation to Heads of Service, Assistant Directors and Directors, was available.

Members thanked the YP for their presentation, and noted the points raised.

31. **CPP - IRO ANNUAL REPORT 20-21 (003) (Agenda Item 5)**

Michelle Thomas, Safeguarding Manager, Child Protection and Review, introduced the Independent Reviewing Officer (IRO) annual report for 2020-21. Key highlights from the report included:

- At the time of the report, the Borough looked after 347 children, which was a slight decrease versus the previous year.
- Staffing numbers and IRO caseload remained stable.
- Unaccompanied Asylum Seekers totalled 73, and support continued to improve following the allocation of a named IRO.
- Timeliness of reviews and participation of young people continued to be strong.

The pandemic had resulted in a challenging year for the service, though the service had adapted quickly and effectively to the use of technology to provide virtual reviews and additional contact with young people (YP). Feedback from the YP to the virtual meetings was mixed, with some preferring face to face meetings. Moving forward, use of technology would continue, with the service providing a hybrid contact model, with processes flexibly aligned to the needs of the YP. Bespoke conference rooms had been outfitted with new technology to allow for hybrid in person/virtual meetings. Participation of YP in the process would continue to increase, with YP to co-chair reviews.

Some IROs managed YP with language or learning difficulties. In such instances, engagement with the YP was through the use of technology/tools, or advocates acting on behalf of the YP (i.e. carer, school staff, etc.)

Where possible, siblings were allocated the same IRO, though exceptions were possible (e.g. should a YP come back into care, etc.)

On the matter of 'drift and delay', as referred to within the report, Officers advised on the process by which this was addressed. In the first instance, contact would be made with the social worker. Ongoing reviews and actions would then be instigated to address the issue, escalated where necessary. It was highlighted that there were very good outcomes from escalation to Head of Service level, often precluding the need for further escalation.

Members noted that that the report did not provide a comparison of data for Q3 and Q4 versus the previous year. Officers advised that the report included the data that had been made available by the Council's performance data team, and that further detail would be included in a future report.

Regarding the number of return interviews offered to missing children, officers advised

that the report detailed the number offered within the Council's target timescale (24-48hrs from the YP's return). Officers advised that not all YP were offered an interview within that timescale, as many would go missing again, or would refuse to engage with officers. Members requested that further detail on this subject be provided following the meeting. Members also requested that data on the number of YP on remand be provided.

RESOLVED: That the report be noted.

32. **WORK PROGRAMME** (*Agenda Item 6*)

Consideration was given to the Panel's Work Programme for the year ahead.

Members highlighted that the themed meetings worked well and agreed that this should continue moving forward.

Suggestions for additional items and actions were agreed as follows:

- That detail on the Care Pledge to the Borough's YP to be brought to a future meeting of the CPP;
- That a verbal update on the EU Settlement Scheme be presented at the next meeting;
- That Member visits to Care Homes be scheduled;
- That representatives from Coram Voice be invited to present to the Panel at a future meeting;
- That training for Panel Members be scheduled;
- That officers provide a glossary of terms relating to CPP.

It was further suggested that an annual report be provided to Council, to raise the profile of Corporate Parenting across the Council. It was agreed that the feasibility of this would be reviewed by the parent Select Committee.

Officers suggested that the number of meetings be reduced to four a year, with quarterly meetings aligned to the end of each quarter and that quarter's data. This was agreed, with authority delegated to the clerk, in consultation with the Chairman and lead officers, to draft a proposal to be ratified at the parent Select Committee.

RESOLVED: That the Work Programme be noted, together with the actions as set out above.

The meeting, which commenced at 5.30 pm, closed at 6.50 pm.

These are the minutes of the above meeting. For more information on any of the resolutions please contact Neil Fraser on 01895 250692. Circulation of these minutes is to Councillors and officers.

CABINET FORWARD PLAN

Committee name	Families, Health & Wellbeing Select Committee
Officer reporting	Anisha Teji, Democratic Services Officer
Papers with report	Appendix A – Forward Plan
Ward	All

HEADLINES

The Committee is required by its Terms of Reference to consider the Cabinet 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).

RECOMMENDATIONS

That the Families, Health & Wellbeing Select Committee notes and comments on items going to Cabinet.

SUPPORTING INFORMATION

The latest published Forward Plan is attached.

Implications on related Council policies

The role of the Select 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

Select Committees directly engage residents in shaping policy and recommendations and the Committees seek to improve the way the Council provides services to residents.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

This page is intentionally left blank

Ref **Upcoming Decisions**

Further details

Ward(s)

Final decision by Full Council	Cabinet Member(s) Responsible	Relevant Select Committee	Directorate / Lead Officer	Consultation related to the decision	NEW ITEM	Public or Private (with reason)
--------------------------------	-------------------------------	---------------------------	----------------------------	--------------------------------------	-----------------	---------------------------------

SI = Standard Item each month Council Departments: PE =Planning, Environment, Education & Community Services IT - Infrastructure, Transport & Building Services SH = Social Care & Health CS&T = Corporate Services & Transformation FD= Finance

NO CABINET IN AUGUST 2021

Cabinet meeting - 14 October 2021 (report deadline 29 September)

54	Contract Awards for spot provision of Home Care and Outreach	Cabinet will consider future procurement arrangements with respect to the spot provision of Home Care and Outreach services Borough-wide.	All		Cllr Jane Palmer - Health & Social Care	Families, Health & Wellbeing	SH / FD - Darren Thorpe / Sally Offin		Private (3)
072	Consultation on changes to school admissions arrangements	As an education authority the Borough must plan for a sufficiency of places and efficient use of resources. There has been a slight decline in demand across the primary sector, with some fluctuations, but it is clear that the level of primary surplus places continues to be too high, pooling in a few schools. There is the opportunity to review the number of primary places and potentially reduce Published Admission Numbers (PAN) in some schools to ensure schools and the authority best meet the needs of all pupils across the Borough, and make effective use of resources in schools and between them. Therefore, the Council is proposing to reduce the Published Admission Number for a number of Hillingdon primary schools. This will be consulted on before a final decision is made by Cabinet.	Various		Cllr Susan O'Brien - Families, Education & Wellbeing	Families, Health & Wellbeing	PE - Dan Kennedy / Haley Murphy	Public consultation and Families, Health & Wellbeing Select Committee	Public
038	The Annual Report Of Adult and Child Safeguarding Arrangements	This report provides the Cabinet with a summary of the activity undertaken by the Safeguarding Children Partnership Board and the Safeguarding Adults Board to address the identified local priorities. The Cabinet will consider this report and approve the activity and the local priorities for the two boards.	All		Cllr Jane Palmer - Health & Social Care	Families, Health & Wellbeing	SH - Alex Coman, Claire Solley, Suzi Gladish	Families, Health & Wellbeing Select Committee	Public

Cabinet meeting - 16 December 2021 (report deadline 1 December)

038 (a)	The Council's Budget Medium Term Financial Forecast 2022/23 - 2026/27 (BUDGET FRAMEWORK)	This report will set out the Medium Term Financial Forecast (MTFF), which includes the draft General Fund reserve budget and capital programme for 2022/23 for consultation, along with indicative projections for the following four years. This will also include the HRA rents for consideration.	All	Proposed Full Council adoption - 24 February 2022	Cllr Ian Edwards - Leader of the Council / Cllr Martin Goddard - Finance	All	FD - Paul Whaymand	Public consultation through the Select Committee process and statutory consultation with businesses & ratepayers	Public
040	2021/22 Better Care Fund Section 75 Agreement	A report to Cabinet regarding the agreement under section 75 of the National Health Service Act, 2006, that will give legal effect to the 2020/21 Better Care Fund plan, including financial arrangements.	All		Cllr Jane Palmer - Health & Social Care	Families, Health & Wellbeing	SH - Gary Collier		Public

Cabinet meeting - 17 February 2022 (report deadline 2 February)

--	--	--	--	--	--	--	--	--	--

Upcoming Decisions

Further details

Ref

Ward(s)

				Final decision by Full Council	Cabinet Member(s) Responsible	Relevant Select Committee	Directorate / Lead Officer	Consultation related to the decision	NEW ITEM	Public or Private (with reason)
SI = Standard Item each month Council Departments: PE =Planning, Environment, Education & Community Services IT - Infrastructure, Transport & Building Services SH = Social Care & Health CS&T = Corporate Services & Transformation FD= Finance										
038 (b)	The Council's Budget Medium Term Financial Forecast 2022/23 - 2026/27 (BUDGET FRAMEWORK)	Following consultation, this report will set out the Medium Term Financial Forecast (MTFF), which includes the draft General Fund reserve budget and capital programme for 2022/23 for consultation, along with indicative projections for the following four years. This will also include the HRA rents for consideration.	All	Proposed Full Council adoption - 24 February 2022	Cllr Ian Edwards - Leader of the Council / Cllr Martin Goddard - Finance	All	FD - Paul Whaymand	Public consultation through the Select Committee process and statutory consultation with businesses & ratepayers		Public
073	Approval of school admissions arrangements	As an education authority the Borough must plan for a sufficiency of places and efficient use of resources. There has been a slight decline in demand across the primary sector, with some fluctuations, but it is clear that the level of primary surplus places continues to be too high, pooling in a few schools. There is the opportunity to review the number of primary places and potentially reduce Published Admission Numbers (PAN) in some schools to ensure schools and the authority best meet the needs of all pupils across the Borough, and make effective use of resources in schools and between them. Therefore, the Council is proposing to reduce the Published Admission Number for a number of Hillingdon primary schools. Cabinet will make a decision on this following consideration of the consultation responses.	Various		Cllr Susan O'Brien - Families, Education & Wellbeing	Families, Health & Wellbeing	PE - Dan Kennedy / Haley Murphy	Public consultation and Families, Health & Wellbeing Select Committee		Public
Cabinet meeting - Thursday 21 April 2022 (report deadline 6 April)										
58	Standards and quality of education in Hillingdon during 2020/21	The Annual Report to Cabinet regarding children and young people's educational performance across Hillingdon schools.	All		Cllr Susan O'Brien - Families, Education & Wellbeing	Families, Health & Wellbeing	PE - Daniel Kennedy / Rani Dady	Select Committee		Public
Cabinet meeting - June 2022 (date to be confirmed)										
SI	Carers Strategy Update	Cabinet will receive a progress report on the Carers Strategy and Delivery Plan.	All		Cllr Jane Palmer	Families, Health & Wellbeing	SH - Kate Kelly-Talbot		NEW ITEM	Public
Cabinet Member Decisions: Standard Items (SI) that may be considered each month										
SI	School Governing Bodies and Governors / Authorising Academy Appointments	To approve appointments, nominate appointments and make reappointments of local authority governors and to approve any changes to school governing body constitutions. To also authorise any Member to be a Governor or Director of an Academy.	N/A		Cllr Susan O'Brien - Families, Education & Wellbeing	Families, Health & Wellbeing	CS&T - Democratic Services			Public

Ref **Upcoming Decisions**

Further details

Ward(s)

			Final decision by Full Council	Cabinet Member(s) Responsible	Relevant Select Committee	Directorate / Lead Officer	Consultation related to the decision	NEW ITEM	Public or Private (with reason)
<small>SI = Standard Item each month Council Departments: PE =Planning, Environment, Education & Community Services IT - Infrastructure, Transport & Building Services SH = Social Care & Health CS&T = Corporate Services & Transformation FD= Finance</small>									
SI	Release of Capital Funds	The release of all capital monies requires formal Member approval, unless otherwise determined either by the Cabinet or the Leader. Batches of monthly reports (as well as occasional individual reports) to determine the release of capital for any schemes already agreed in the capital budget and previously approved by Cabinet or Cabinet Members	TBC		Cllr Martin Goddard - Finance (in conjunction with relevant Cabinet Member)	All - TBC by decision made	various	Corporate Finance	Public but some Private (1,2,3)
SI	School Redundancy Payments	To consider requests for School Redundancy Payments and decide whether to approve them on behalf of the Local Authority	TBC		Cllr Susan O'Brien - Families, Education & Wellbeing	Families, Health & Wellbeing	PE - Daniel Kennedy		Private (1,2,3)

This page is intentionally left blank

FAMILIES, HEALTH & WELLBEING SELECT COMMITTEE - WORK PROGRAMME

Committee name	Families, Health & Wellbeing Select Committee
Officer reporting	Anisha Teji, Chief Executive's Office
Papers with report	Appendix A – Work Programme
Ward	All

HEADLINES

To enable the Committee to note future meeting dates and to forward plan its work for the current municipal year.

RECOMMENDATIONS

That the Families, Health & Wellbeing Select Committee considers the report and agrees any amendments.

SUPPORTING INFORMATION

- The Committee's meetings will 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. Forthcoming meeting dates are as follows:

2021/22 Municipal Year Meetings	Room
03 June 2021, 7pm	CR5
27 July 2021, 7pm	CR6
08 September 2021, 7pm	CR6
26 October 2021, 7pm	CR6
30 November 2021, 7pm	CR6
05 January 2022, 7pm	CR6
02 February 2022, 7pm	CR5
31 March 2022, 7pm	TBC
20 April 2022, 7pm	TBC

Implications on related Council policies

The role of the Select 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

Select Committees directly engage residents in shaping policy and recommendations and the Committees seek to improve the way the Council provides services to residents.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

Multi year work programme

May 2021- May 2022

2022

Families, Health & Wellbeing Select Committee	June 3	July 27	August No meeting	September 8	October 26	November 30	December No meeting	January 5	February 2	March 3	April 20	May CABINET
REVIEW : Assisted Living Technologies												
Topic selection / scoping stage	Scoping Report											
Witness / evidence / consultation stage		Witness Session 1		Witness Session 2	Witness Session 3							
Findings, conclusions and recommendations						Findings						
Final review report agreement									Final report			
Target Cabinet reporting										CABINET		
Regular service & performance monitoring												
Mid year Budget Update		X										
Annual Complaints & service report update				X					X			
Cabinet's budget proposals for next financial year								X				
Children's Safeguarding Partnership (formerly the LSCB)		X										
Annual SAB (Adults Safeguarding Board report)		X										
Quality and Capacity of the Community Mental Health Services in Hillingdon					X							
Child & Adolescent Mental Health Services update						X						
Standards and Quality in Education in Hillingdon 20/21										X		
Quarterly School Places Planning Update		X						X				
Standards Attainment report (incl. School Improvements & Outcomes of Discussions on Performance)										X		
Looked After Children Performance Data				X						X		
Report / minutes from the Corporate Parenting Panel		X		X	X			X	X	X	X	
Cabinet Forward Plan Monthly Monitoring	X	X		X	X	X		X	X	X	X	
One-off service monitoring												
Update on Telecare Line	X											
Semi-Independent Living for Young People		X								X		
Carers Strategy Delivery Update		X										
Update on the new SEN Strategy, and the new Additional Needs Strategy						X						
Better Care Fund - Learning Disabilities/Autism Workstream						X						
A review of Hillingdon Adult and Community Learning Service on behalf of the previous Residents, Education & Environmental Services Policy Overview Committee				X								
Promoting Healthy Lifestyles (Sport and Physical Activity)				X								
Public Health Update on Initiatives brought in as a result of the Covid-19 pandemic					X							
Public Health Integrated Service Contracts						X						
Overview of Corporate Parenting Responsibilities								X				
Changes to our admissions criteria								X				
Access to EHCPs for Children with SEND				X								
Elective Home Education policy - update on new policy implementation (TBC)									X			
Youth Services update									X			
Early Years Provision Update						X						
Past review delivery												
Making the Council more autism-friendly (1 year on)											X	
Internal use only												
Report deadline		14 Jul 21		25-Aug-21	13-Oct-21	17-Nov-21		17-Dec-21	20-Jan-22	16-Feb-22	07-Apr-22	
Agenda published		19 Jul 21		31-Aug-21	18-Oct-21	22-Nov-21		24-Dec-21	25-Jan-22	23-Feb-22	12-Apr-22	

This page is intentionally left blank