

# Public Document Pack

# **NORTH LINCOLNSHIRE COUNCIL**

# **HEALTH AND WELLBEING BOARD**

16 November 2020

**Chairman:** Councillor Robert Waltham MBE      **Venue:** Virtual Meeting Microsoft Teams

**Time:** 4.00 pm      **E-Mail Address:** Dean.gillon@northlincs.gov.uk

## AGENDA

1. Welcome and Introductions
  2. Substitutions
  3. Declarations of Disclosable Pecuniary Interests and Personal or Personal and Prejudicial interests.
  4. To approve as a correct record the minutes of the meeting of the Health and Wellbeing Board held on 14 September 2020. (Pages 1 - 4)
  5. Forward Plan and Forthcoming Actions from previous meetings.  
Update on the NHS Phase 3 Recovery Plan by the Chief Operating Officer, North Lincolnshire CCG.
  6. Questions from members of the public.

**PLEASE NOTE, ALL PAPERS WILL BE TAKEN 'AS READ' TO ENCOURAGE DISCUSSION**

7. Integrated Working – Adults. Adults Social Care Winter Plan and Strategic Commissioning Plan (Pages 5 - 30)  
Report by the Director: Adults and Community Wellbeing
  8. Integrated Working – Children. Integrated Children’s Commissioning Strategy (Pages 31 - 52)  
Report by the Director: Children and Community Resilience.
  9. Covid 19 Outbreak Management and Control (Pages 53 - 62)

Report and Presentation by the Deputy Chief Executive and the Director of Public Health.

- (a) Presentation on COVID-19 epidemiology
  - (b) Outbreak Management Plan Update
10. Multi-Agency Resilience and Safeguarding (Pages 63 - 122)  
Annual Report 2019/20. Report by the Director: Children and Community Resilience.
11. Health and Wellbeing Board Governance & Memorandum of Understanding Update. (Pages 123 - 140)  
Report by the Director: Partnerships and Governance
12. Date and time of next meeting: TBC
13. Any other items which the Chairman decides are urgent by reason of special circumstances which must be specified.

# Agenda Item 4

## NORTH LINCOLNSHIRE COUNCIL HEALTH AND WELLBEING BOARD

14 September 2020

**PRESENT:** - Councillor Waltham MBE in the Chair

Carrie Butler, Mick Gibbs, Simon Green, Helen Grimwood, Cllr Hannigan, Denise Hyde, Becky McIntyre, Karen Pavey, Cllr Reed, Alex Seale, and Penny Spring.

Dean Gillon was also in attendance.

The meeting was held virtually via MS Teams.

- 319 **WELCOME AND INTRODUCTIONS** - The Chairman welcomed all those present to the meeting and invited all attendees to introduce themselves.
- 320 **DECLARATIONS OF DISCLOSABLE PECUNIARY INTERESTS AND PERSONAL OR PERSONAL AND PREJUDICIAL INTERESTS** – There were no declarations of disclosable pecuniary interests and personal or personal and prejudicial interests.
- 321 **MINUTES - Resolved** - That the minutes of the meeting of the Health and Wellbeing Board, held on 29 June 2020, be approved as a correct record.

### 322 FORWARD PLAN AND FORTHCOMING ACTIONS

**Resolved** – That the Forward Plan and Forthcoming Actions report be noted.

- 323 **QUESTIONS FROM MEMBERS OF THE PUBLIC** – There were no questions from members of the public.
- 324 **COVID-19 OUTBREAK MANAGEMENT AND PREVENTION** - The Director of Public Health submitted a report updating the Board on progress on the seven themes within the North Lincolnshire Outbreak Prevention and Management Plan and discussing key areas for focus for the forthcoming period.

The Director explained that North Lincolnshire Council was the lead organisation for local outbreak planning, within a national framework and with the support of NHS Test and Trace, Public Health England, and other government departments. The North Lincolnshire Outbreak Prevention and Management Plan set out the local collaborative and preventive approach, which was based on the tried and tested practice of preventing and containing outbreaks in individual settings such as workplaces and care homes, enhanced with a broader range of partners, capacity, communications and governance.

The Director then gave updates on each of the seven themes, as outlined within their report, including care homes, educational settings, testing, and contact tracing.

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The Board discussed the report, including scenario planning and how care and nursing homes can be supported more efficiently, with the Director responding accordingly.

**Resolved** - That the Health and Wellbeing Board note the Outbreak Prevention and Management activity as outlined in the report.

- 325 **DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2019/20** - The Director of Public Health submitted a covering report to their 2019/20 Annual Report. As last year, this report was made in video format, primarily to increase accessibility and dissemination. The report would again be hosted on YouTube and the link to it would be made publicly available and shared through a number of means.

The report video, which covered the following areas, was viewed by the Board:

- The Director's introduction and purpose for the report
- Progress achieved by the commissioned 0-19 service provider
- An overview of the provision of influenza vaccinations for pregnant women
- The impact work to reduce the harm caused by maternal smoking
- An introduction to Baby's First Friends and Intensive Family Support
- An overview of the Young People's Ethnographic study and following work
- The contribution made to Public Health by North Lincolnshire Council's Adult Community Learning programme
- The impact of Challenge 10,000
- The work that Public Health has undertaken to embed the Five Ways to Wellbeing
- The DPH's recommendations and goals for the coming year

Following the video, the Board discussed the content, including future recommendations and goals.

**Resolved** – (a) That the Health and Wellbeing Board note and welcome the Director of Public Health's Annual Report 2019/2020; (b) that the Board consider the Director's recommendations within the report, and (c) that the board assist in disseminating the Annual Report widely, including the good practice achieved around key public health priorities across North Lincolnshire.

- 326 **HUMBER HEALTH AND CARE SYSTEM – OPERATIONAL PLAN 2020-2021.** The Chief Operating Officer, North Lincolnshire CCG, gave a detailed presentation on the Humber Health and Care Operational Plan 20/21 to the Board. This primarily covered the plan for recovery from the Covid-19 pandemic, highlighting issues such as how the system had responded, the impact on our population, an assessment of equalities, and the implementation and consequences of additional 'Phase 3' requirements set out by the Department of Health.

The Board discussed the presentation, particularly around the local implications and how the necessary developments could best be implemented.

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**Resolved** – (a) That the Health and Wellbeing Board note the presentation by the Chief Operating Officer, and (b) that further updates and proposals be provided to the Board in due course.

- 327 **HEALTHWATCH NORTH LINCOLNSHIRE: ANNUAL REPORT 2019/20.**  
The Delivery manager, Healthwatch North Lincolnshire, submitted the organisation's Annual Report, which summarised the statutory activities undertaken by Healthwatch in 2019/20.

The Delivery Manager highlighted examples of Healthwatch making a difference to the lives and wellbeing of local residents, including through empowering them to find the right answers, and outlining ways that they were improving patient and public involvement across North Lincolnshire. The work plan and priorities for 2020/21 were also discussed.

Members of the Board discussed Healthwatch's contribution to the local response to Covid-19 and it was confirmed that Healthwatch had been active throughout, helping many local people with the Telephone Buddy scheme and other initiatives.

**Resolved** – That the Health and Wellbeing Board note and welcome the Healthwatch North Lincolnshire: Annual Report 2019/20.

- 328 **PROPOSAL TO DEVELOP A NORTH LINCOLNSHIRE SYSTEM WIDE HEALTH INEQUALITIES STRATEGY.** The Director of Public Health submitted a report outlining the rationale and proposed way forward in developing a system wide Health Inequalities Strategy for North Lincolnshire, building upon the Marmot Review "10 Years On" report on life expectancy. This proposed strategy also reflected the disproportionate impact of Covid-19 on lower socio-economic and vulnerable communities. The Director explained that the strategy was intended to halt and reverse health inequalities across the whole health, care and wellbeing system.

A wide range of strategies were in place across North Lincolnshire, many led by local partnerships, which included consideration of actions aimed at reducing inequalities across the population and reducing unacceptable variations in supporting services. The aim of developing a Health Inequalities Strategy would be to further build on what was in place, working with partners across the system to ensure addressing inequalities are also at the heart of their planning and prioritisation. This reflected the Health and Wellbeing Board's role in ensuring that good health and wellbeing was the responsibility of all, in order to keep the local population healthy and well and to remove the variations that can separate communities.

The Board discussed methods of minimising duplication of effort, whilst welcoming that this approach would be across the entire system. The Chief Operating Officer highlighted that this would assist with the Phase 3 requirements set out in the previous discussion on the Humber Operation Plan (minute 326 refers).

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**Resolved** - That the Health and Wellbeing Board endorse the proposed work outlined in the report at paragraph 3.1, encompassing the complementary work on promoting equality across the health and care system.

- 329    **DATE AND TIME OF NEXT MEETING** – The Board was informed that the date of the next meeting would be on 16 November 2020 at 4pm.

# Agenda Item 7

Report of the Director of Adults  
and Community Wellbeing

Agenda Item 7  
Meeting 16 November 2020

## NORTH LINCOLNSHIRE COUNCIL

### Health and Wellbeing Board

## ADULT SOCIAL CARE WINTER PLAN

### 1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To inform Health and Wellbeing Board members of the publication of the Department for Health and Social Care policy paper 'Adult social care: Our COVID-19 winter plan 2020 to 2021'. The aim of this Winter Plan is to set out our approach to supporting the adult social care sector.
- 1.2 To provide assurance that the expectations set out in the DHSC Winter Plan have been incorporated within existing North Lincolnshire integration plans.
- 1.3 To inform Health and Wellbeing Board members that this approach has been taken in collaboration with people who need care and carers, North Lincolnshire CCG, local NHS organisations, care providers and the voluntary and community sector.

### 2. BACKGROUND INFORMATION

- 2.1 The government has published a policy paper 'Adult social care: Our COVID-19 winter plan 2020 to 2021', setting out the key elements of the national support available for the care sector for the winter of 2020/21.
- 2.2 This winter is likely to place unique pressures on the health and care system. COVID-19 will be co-circulating with seasonal flu and other viruses, and transmission may increase over the winter period. These pressures create risks to the health and wellbeing of both people who need care and support and the social care workforce, including unpaid carers and social care providers, which may impact on capacity.
- 2.3 It is essential that local partners work closely together to ensure a level of preparedness for the additional pressures that may be faced this winter,

particularly a growing resurgence of COVID-19 cases, to protect the most vulnerable and keep our residents safe and well over this coming period.

- 2.4 The policy sets out the key actions local authorities, NHS organisations and social care providers (including voluntary and community sector) are required to take to support people who receive adult social care. This includes people living in their own homes, residential care homes and nursing homes, and other community settings.
- 2.5 The priority continues to be for partners to take appropriate actions to prevent, treat and investigate cases of COVID-19. This includes hospitals continuing to test people on discharge to all care settings and Public Health England local health protection teams continuing to tackle the virus and reduce impact on the most vulnerable.
- 2.6 There are three overarching priorities within the DHSC Winter Plan for holistic support to the sector which are:
  - Ensuring everyone who needs care or support can get high-quality, timely and safe care throughout the autumn and winter period
  - Protecting people who need care, support or safeguards, the social care workforce, and carers from infections including COVID-19
  - Making sure that people who need care, support or safeguards remain connected to essential services and their loved ones, whilst protecting individuals from infections including COVID-19.
- 2.7 The DHSC Plan is framed under four themes:
  - **Preventing and controlling the spread of infection in care settings;** reinforces the need to follow the guidance on preventing, containing and managing any outbreaks, and outlines the support to care homes to protect the residents wherever possible including the movement of staff between different care settings. It addresses the use of personal protective equipment (PPE) and encourages staff involved in direct care to have the flu vaccination.
  - **Collaboration across health and care services;** outlines the support available across health and social care to deliver care in peoples own home where possible and preventing avoidable admissions to hospital and supporting discharge home again when an admission has been required. For people residing in care homes, it outlines the plan to provide additional health support from GP's, nurses and therapists to manage the health and wellbeing needs of the residents, including the use of digital technology to enable this to happen.

- **Supporting people who receive social care, carers and the workforce;** outlines guidance to support people to visit relatives or friends in care homes whilst preventing spread of infection, the role the voluntary and community sector can support in helping people to stay connected, support for carers and the use of direct payments to enable flexible and innovative use to maintain support arrangements. It also provides guidance re supporting the wellbeing of staff, including training, access to digital technology and increasing staffing levels where needed.
- **Supporting the system;** outlines the funding arrangements to support the health and care system to address the pressures caused by the pandemic, for example Infection Control Fund, market and provider sustainability and short term funding to support people to receive care and support on leaving hospital.

2.8 The council has written to the Department of Health and Social Care (DHSC) providing assurance that the recommendations set out in the policy paper have been incorporated into North Lincolnshire's plans for the winter.

### **3. OPTIONS FOR CONSIDERATION**

3.1 The Health and Wellbeing Board is asked to note:

- The requirement for local partners to work together to ensure a preparedness for the additional pressures that adult social care may face this winter, ensuring everyone who needs care or support can get high-quality, timely and safe care throughout the autumn and winter period.
- That the expectations of the winter plan policy have been incorporated within existing integration plans.
- That existing governance and assurance structures are in the process of being reinforced to ensure full compliance with all aspects of the policy.
- That the response has been coproduced with people who need care and carers, the CCG and local NHS organisations, care providers and the voluntary and community sector.

### **4. ANALYSIS OF OPTIONS**

4.1 North Lincolnshire is well placed to respond in an integrated way to the development of this policy. As partners the response has been to consider the policy, identify any gaps in existing plans and to enhance these where possible.

4.2 The [care home support plan](#) has been amended and re published with an additional focus on:

- Implementing all aspects of the Enhanced health in care homes

- framework by primary care, ensuring all care homes benefit from this enhanced support.
- Learning review process for providers, health and the council to use in the event of a care home outbreak.
  - Supporting providers, where required, to review and update their business continuity plans leading into winter, including their visiting policies.
  - Communications poised to encourage full uptake of flu vaccinations for residents and staff when made available.
- 4.3 The Strategic commissioning integration plan (appendix a) has been reprioritised to ensure the following are given highest priority.
- A focus on health equity for the most vulnerable
  - Implementation of the intermediate tier plan through the agreed executive lead for the discharge to assess process.
  - Workforce development plan, creating new types of workers than span health and care responsibilities.
  - An information sharing charter is in place with work ongoing to ensure agreement for level 2 plans are in place across the sector.
- 4.4 The Covid-19 Outbreak Management plan (covered in a separate report on this agenda) priority 6: ‘vulnerable people’ has been updated to include the preparedness to support people who are clinically extremely vulnerable. The council has completed the MHCLG Shielding Self-assessment Tool and is confident in the organisational readiness to stand up shielding if required. The voluntary sector are also supporting with coordination of volunteers to people in need.
- 5. FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**
- 5.1 The council will distribute the extra funding from the Infection Control Fund to the sector, and report on how funding is being used, in line with the grant conditions.
- 5.2 The council will ensure the distribution of the free personal protective equipment (PPE) to the providers of low level care/support not eligible for the national portal, when required until March 2021. This includes people who use direct payments to employ a personal assistant and housing providers where they carry out close contact support.
- 6. OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**
- 6.1 The existing plans highlight the importance of learning lessons and understanding the risks people face, to understand and address health equalities across North Lincolnshire and develop actions with partners, where

required, taking into account the implications of higher prevalence of Covid-19 in people who and communities that experience disadvantage and the lived experience of people with learning disabilities, autistic adults, and people with mental health difficulties.

## **7. OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

- 7.1 The existing plans will proceed with full integrated impact assessments, to ensure parity of esteem for the most vulnerable.

## **8. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

- 8.1 People with lived experience and their carers have been actively engaged in the development of these plans, they have expressed the support they received during the pandemic has been helpful and forthcoming, however they would like to see more help and consideration for digital inclusive approaches, a priority placed on easy accessible information and guidance. They also seek assurance from all parties that all vulnerable adults are enabled to access face to face health appointments and checks as entitled especially dentistry and GP.
- 8.2 Carers have expressed concern over the equitable approach to foot care and attention to falls prevention.

## **9. RECOMMENDATIONS**

- 9.1 Health and Wellbeing Board members note the requirement for local partners to work together to ensure a preparedness for the additional pressures that adult social care may face this winter, ensuring everyone who needs care or support can get high-quality, timely and safe care throughout the autumn and winter period.
- 9.2 Health and Wellbeing Board members note that the expectations set out in the national winter plan policy have been incorporated within existing North Lincolnshire integration plans.
- 9.3 Health and Wellbeing Board encourage the review of the Health and wellbeing strategy to incorporate the request of the people with lived experience and their carers.

DIRECTOR OFADULTS AND COMMUNITY WELLBEING

Church Square House  
SCUNTHORPE  
North Lincolnshire  
DN15 6NR

Author: Karen Pavey  
Date: 30 October 2020

**Background Papers used in the preparation of this report –**

Department for Health and Social Care - '[Adult social care: 'our COVID-19 winter plan 2020-21'](#)

National Health Service England – '[Enhanced Health in care homes framework'](#)

North Lincolnshire Care home support plan

North Lincolnshire Outbreak Management Delivery Plan

# North Lincolnshire Integrated Adults Partnership **STRATEGIC COMMISSIONING PLAN** **2020/24**

### SLIDE 3

Foreword: Chair and Vice Chair of the Integrated Adult's Partnership

### SLIDES 4 to 7

Strategic Framework

Organisational Model

Outcomes

Emerging Themes

### SLIDES 8 to 11

Priorities 'Shine a Light'

Priority Focus

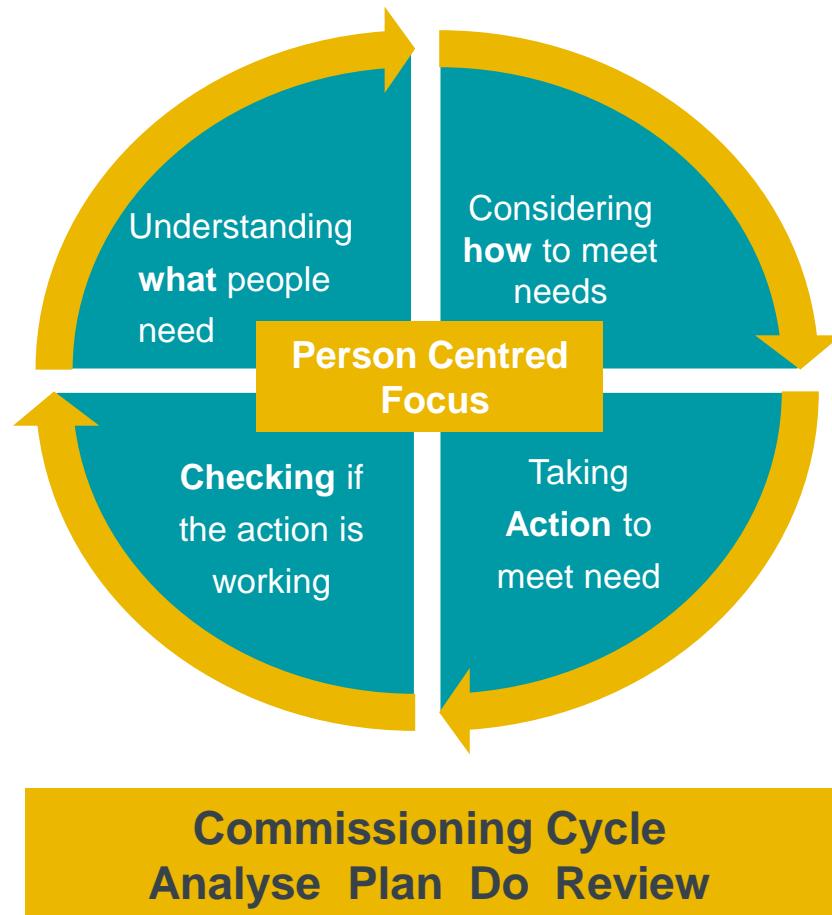
Line of Sight

**Workforce Development - 13**

**Stakeholder Engagement - 14**

**Monitoring and Oversight - 15 to 18**

**Contact Us - 19**



On behalf of the Integrated Adults Partnership, we are pleased to introduce our North Lincolnshire Integrated Commissioning Strategy for Adults 2020/24 which clarifies our integrated approach and commissioning intent in relation to health and social care for adults in North Lincolnshire.

Our ambition is for North Lincolnshire to be best place to live, work, visit and invest where people are safe, well, prosperous and connected. We will achieve this through implementation of our shared strategic priorities and these are

- Enabling Self Care;
- Care Closer to Home;
- Right Care Right Place;
- Best use of Resources.

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2

This strategy is to enable Health and Social Care Services working with Adults, Families and Carers to have a shared understanding and ambition for the people of North Lincolnshire.

- It signals an intent to work together and integrate both services and our commissioning functions where these improve outcomes and to prioritise those where they have additional need.
- The strategy will inform Adults, Families and Carers stakeholders and others of our commissioning intent, the intent being based upon national and local guidance, data and intelligence and the views of Adults, Families and Carers as well as from practice wisdom and best practice.
- The strategy will form the work of and be monitored by the Integrated Adults Partnership and provide a conduit between this, the Place Partnership and the Health and Wellbeing Board.



**Alex Seale**

Chief Operating Officer  
North Lincolnshire  
Clinical Commissioning Group  
Chair of  
Integrated Adults Partnership



**Karen Pavey**

Director of Adults & Community  
Wellbeing (DASS)  
North Lincolnshire Council  
Vice Chair of  
Integrated Adults Partnership

<b>OUR SHARED AMBITION</b>	<b>Best place to LIVE, WORK, VISIT and INVEST where people are SAFE, WELL, PROSPEROUS and CONNECTED</b>				
<b>THE ROLE OF PLACE PARTNERS</b>	<b>LEAD</b> the place of North Lincolnshire	<b>PROMOTE</b> prosperity and wellbeing	<b>PREVENT</b> harm	<b>PRIORITISE</b> the most vulnerable	
<b>OUR SHARED PRINCIPLES</b>	Enabling Self Help	Care Close to Home	Right Care Right Place	Best Use of Resources	
<b>OUR SHARED VALUES</b>	EQUALITY OF OPPORTUNITY so everyone can have a good quality of life	Strive for EXCELLENCE and high standards	Use of resources wisely and with INTEGRITY	People take SELF RESPONSIBILITY and have choice and control over their own lives	
<b>OUR SHARED PRIORITIES</b>	Growing the economy	Keeping people safe and well	Enabling communities to flourish		
<b>SHARED OUTCOMES – WHAT SUCCESS WILL LOOK LIKE</b>	SAFE – where our adult population feel safe in their homes, at work and in their communities	WELL – where our adult population, and their families, enjoy good health and emotional well being	PROSPEROUS – where adults have excellent opportunities to develop skills	CONNECTED – where our local population thrive in flourishing communities	
	Our adult population is able to achieve outstanding outcomes				
<b>OUR DRIVERS</b>	Empowering and enabling people	Building family and community capacity	Developing the workforce		
	Right Service, Right Time, Right Place				

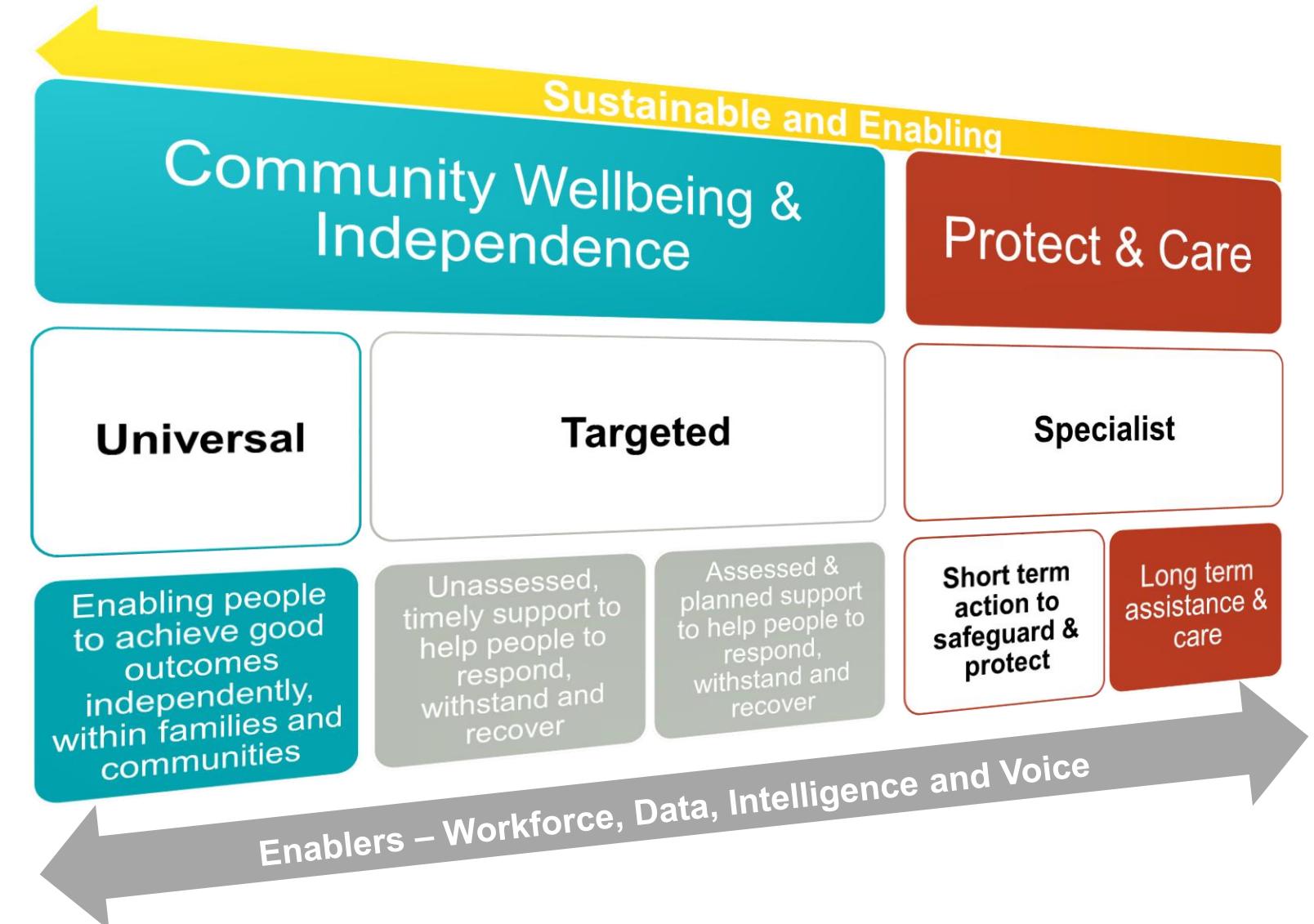
Single organisational model -  
meeting need at the lowest level

**Universal**  
Self Help and Enablement

**Targeted**  
Focused and preventative

**Specialist**  
Protection and long term

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### SAFE

- **Where people:**
- are safe in their own home, at work and in their local communities;
- are encouraged to manage their own health through community hubs and within alternative health services such as pharmacists;
- are able to access more community capacity through further development of our local assets;
- are supported to withstand adverse impacts and change behaviours;
- are empowered and supported to identify and develop their strengths and aspirations;
- are able to die in their place of choice;
- are central to the quality assurance of their services.

### WELL

- **Where people:**
- are a healthy weight and live active lives;
- enjoy positive emotional wellbeing and mental health;
- are empowered to lead a healthy lifestyle through Making Every Contact Count approach;
- receive the health care and support they need in their community where possible;
- receive end of life support that meets their needs;
- are able to access volunteering, employment and befriending services;
- are able to access assessment and care planning services, that work collaboratively across levels of need to enable consistency of practise.

### PROSPEROUS

- **Where people:**
- are empowered and enabled;
- have access to a consistent offer of health and care;
- are able to manage their health & social care needs through a personal budget;
- achieve their potential (including the most vulnerable);
- are able to access care and support in the most appropriate setting, for the right amount of time, to meet their needs;
- receive a holistic response to their needs;
- access the support and skills they need;
- Access consistent care journeys that reduce unwarranted variation in outcomes.

### CONNECTED

- **Where people:**
- are able to access information, advice and guidance easily in easy read format;
- are empowered and enabled to participate, have equality of opportunity and access to creative and flexible support at the earliest point, in the right place by the right people;
- have greater choice and control over the care and support they receive through implementation of a single assessment and support planning framework;
- benefit from engaging in positive activities;
- build resilience and find resolutions for themselves;
- are able to transport themselves around the area.

We will demonstrate our success in improving outcomes for our adult population through performance monitoring, voice and practice wisdom

## Key themes which have shaped and influenced our commissioning intents and priorities

### Our shared ambition: Our People

Our shared ambition to support people through good customer care is demonstrated through the following 'I' statements:

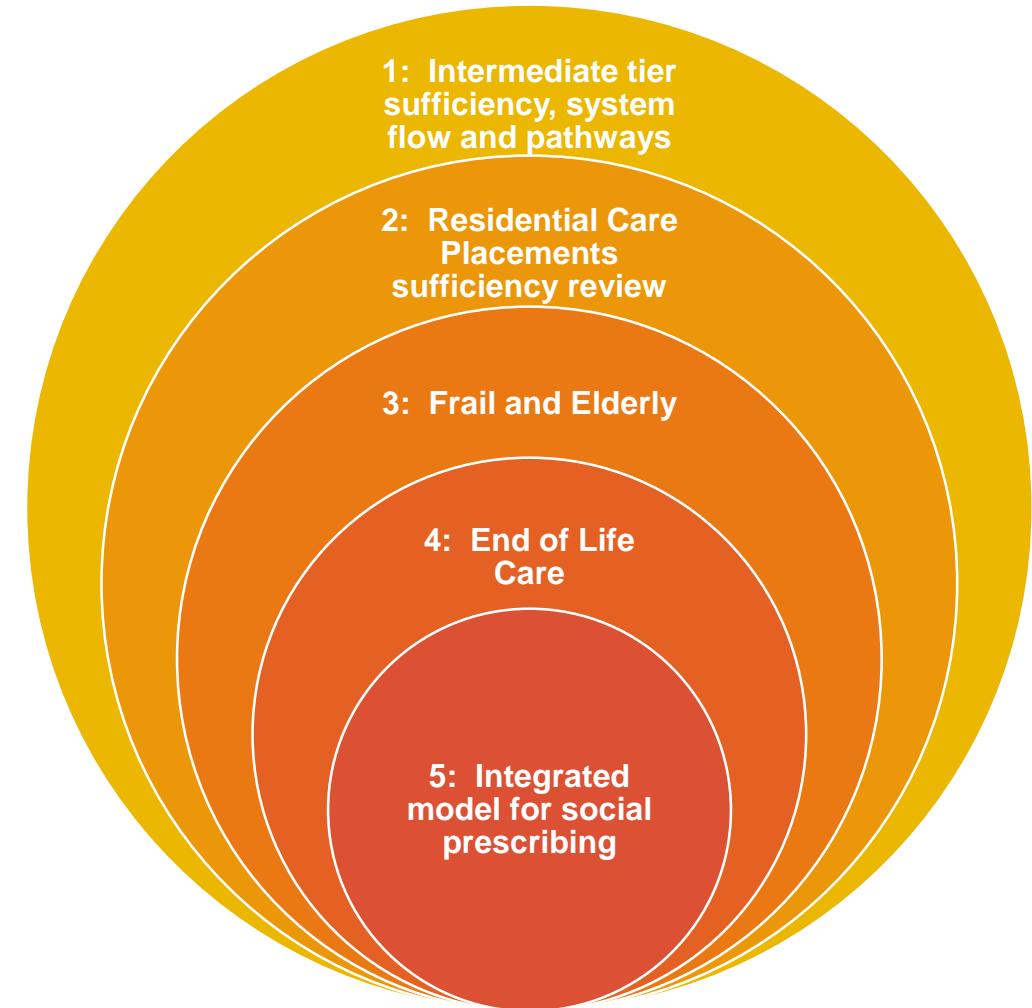
- I have access to a range of support that enables me to live the life I want and remain a contributing member of my community.
- My parents/carers say they feel supported and enabled to have a good quality of life.
- I have the information, and am enabled to use it, that I need to make decisions and choices about my care and support.
- Taken together, my care and support help me live the life I want to the best of my ability.
- I am as actively involved in discussions and decisions about my care, support and treatment as I want to be.
- When I move between services or care settings, there is a plan in place for what happens next.



We shall do this by implementing robust performance and governance frameworks, compliance and professional best practice, specifications to include corporate responsibilities and social value outcomes, investment in personal and professional development

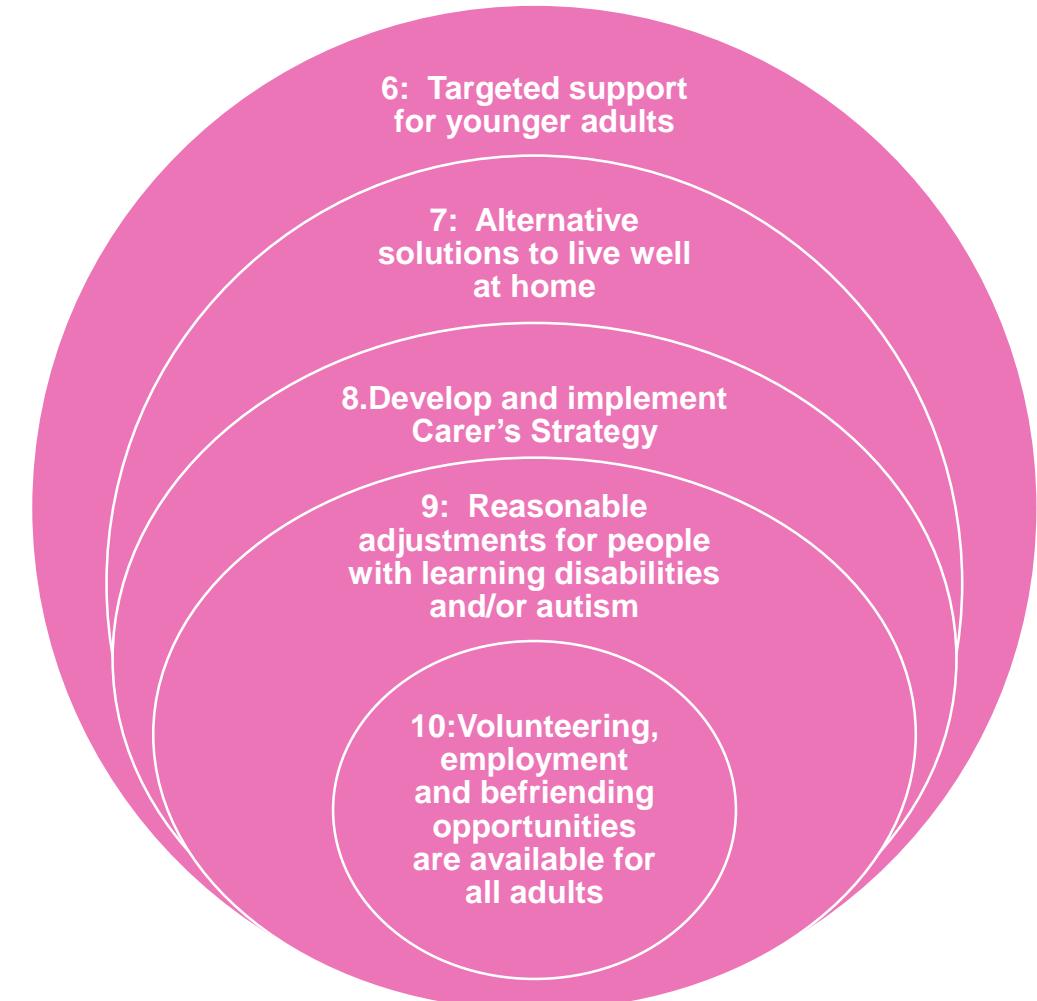
Page 18

These **COMMISSIONING INTENTS** articulate the areas of focus that the Integrated Adults Partnership will **‘SHINE A LIGHT’** on for partnership action and system change to contribute to our adult population being **SAFE, WELL, PROSPEROUS and CONNECTED**



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**Strategic monitoring and oversight** - Without evidence, we don't know what is working well and what could work better.

For areas in which we want to '**SHINE A LIGHT**' there are identified lead officers to drive forward partnership action and system change.

As part of this, lead partnerships will be responsible for identifying, monitoring and progress reporting to the IAP, underpinned by relevant **performance data and analysis, practice wisdom, voice and engagement** and **reviews/reports**.

COMMISSIONING INTENT	PARTNERSHIP ACTION AND SYSTEM CHANGE
1 – <b>Intermediate tier sufficiency, system flow and pathways</b>  Page 20	<ul style="list-style-type: none"><li>➤ Intermediate tier review including reflections on learning during Covid -19 period and changes to services required/implemented</li><li>➤ Integrated single point of access (Gateway to care)</li><li>➤ Improved system flow and integrated pathways on discharge, for those that need rehabilitation or are unable to return home at that point.</li><li>➤ Full implementation and impact measurement of Early discharge planning, pre-operative discharge planning, discharge to assess and trusted assessor.</li></ul>
2 – <b>Residential Care placements sufficiency review</b>	<ul style="list-style-type: none"><li>➤ Residential Care: Improved relationship with care home providers, acknowledging value and breaking down organisation barriers. Increased quality of care and using clinical evidence to support changes.</li><li>➤ Short Stay placements review to support assessment and enablement provision that is genuinely short-stay</li><li>➤ Improvements in how some independent sector care is commissioned for mental health service users.</li></ul>
3 – <b>Frail and Elderly</b>	<ul style="list-style-type: none"><li>➤ Align to Humber Acute Services Review Out of Hospital Programme.</li><li>➤ Development of integrated frailty strategy, proactive and reactive frailty pathways and integrated care services.</li></ul>
4 – <b>End of Life Care</b>	<ul style="list-style-type: none"><li>➤ Review of End of Life strategy. System wide action plan development across Primary Care, Community Services and Hospices.</li><li>➤ Implementation plan for RESPECT model and EPaCCs (Electronic Palliative Care Coordination System)</li></ul>
5 – <b>Integrated model for social prescribing</b>	<ul style="list-style-type: none"><li>➤ Development of Primary Care link roles and Capacity Builder to support development of voluntary sector capacity to meet Social Prescribing needs.</li></ul>

**Strategic monitoring and oversight** - Without evidence, we don't know what is working well and what could work better.

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COMMISSIONING INTENT	PARTNERSHIP ACTION AND SYSTEM CHANGE
6 – <b>Targeted support for younger adults</b>	<ul style="list-style-type: none"><li>➤ Review of commissioned services and development of communications and engagement to support younger adults to access services</li></ul>
7 – <b>Alternative solutions to live well at home</b>	<ul style="list-style-type: none"><li>➤ Implement the Independent Living Centre</li><li>➤ Development of the domiciliary care market to support people to remain in their homes</li></ul>
8 – <b>Develop and implement Carer's Strategy</b>	<ul style="list-style-type: none"><li>➤ Carer's strategy engagement review to ensure co-production</li><li>➤ Integration with support for young carers</li></ul>
9 – <b>Reasonable adjustments for people with learning disabilities and/or autism</b>	<ul style="list-style-type: none"><li>➤ Specialist care and support for people with <b>learning disability and/or autism</b>.</li><li>➤ <b>Housing needs for all disability groups</b> with a range of provisions</li><li>➤ Consideration of adjustments required across commissioned services to support all people to access them</li></ul>
10 – <b>Volunteering, employment and befriending opportunities are available for all adults</b>	<ul style="list-style-type: none"><li>➤ Establish a local volunteer hub with support to enable all people to access</li><li>➤ Review the role of the voluntary sector</li></ul>

These COMMISSIONING INTENTS articulate the areas of focus that the Integrated Adults Partnership will have a **LINE OF SIGHT** on to shape and influence partnership action and system change (and which may be the responsibility of other partnerships and planning frameworks)

### SAFE

- Commissioning services to meet the individual needs of **mental health** service users
- Manage the impact of changes to the **Liberty Protection Safeguards**
- Develop a joint approach to supporting people who are **frail**
- Implement the **Integrated Care Service**
- Development of the integrated **Home Care Framework**
- Specialist care and support for people with **learning disability and/or autism**.
- **Housing needs for all disability groups** with a range of provisions
- Implement **Multi Agency Resilience and Safeguarding (MARS)** arrangements.

### WELL

- Appropriate support for people with **dementia** and/or have had a **stroke**
- Identify alternative **housing** provision for people living with **dementia**
- Specialist support for people who are **frail and/or elderly**
- Develop an integrated model for **social prescribing**
- **Reasonable adjustments** for people with **learning disabilities and/or autism**
- **Autism diagnosis** and development of an **autism aftercare model**
- Implement the **Independent Living Service**
- Develop and implement **Carer's Strategy**

### PROSPEROUS

- Ensure sufficient **intermediate tier** capacity
- **Care home contract and framework**
- **Care home sufficiency**
- Undertake **review of intermediate tier**
- Improved **system flow** and **integrated pathways** on discharge
- Improved **system performance**
- Implement the Humber Acute Services review, including the **Out of Hospital Transformation** workstream
- **Volunteering, employment and befriending opportunities** are available for **vulnerable adults**
- Explore opportunities for **integrated commissioning** (NHS North Lincolnshire CCG & North Lincolnshire Council)
- Establish a local **volunteer hub**
- **review the role of the voluntary sector**. E.g. specialist services

### CONNECTED

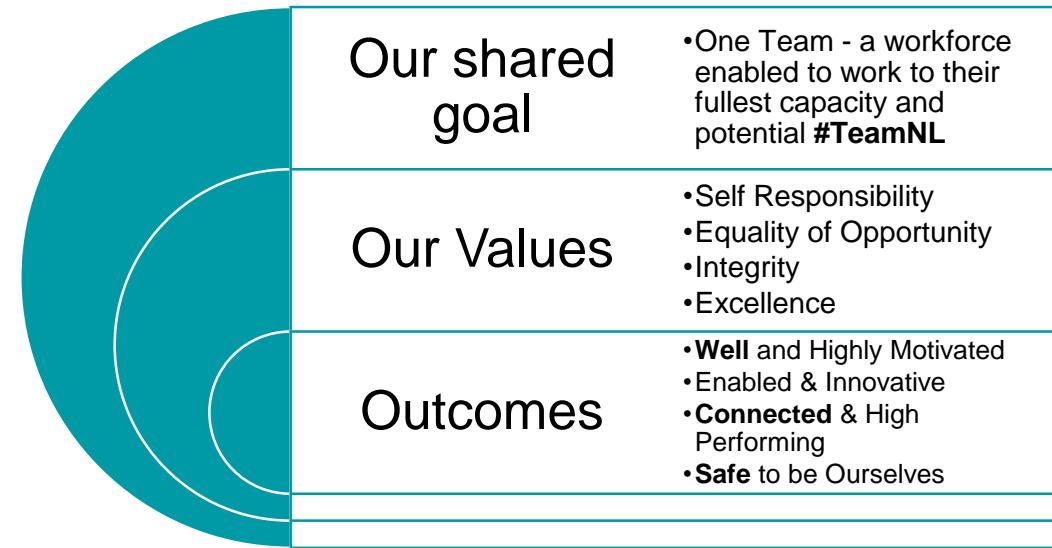
- Transform **digital solutions** to improve access to information and resources
- Develop **total transport solutions** to meet all needs
- Develop a **Joint Section 117 protocol**
- Develop an integrated single point of access (**Gateway to Care**)
- **Primary Care Networks (PCNs)** to be configured and agreed service model in place
- Identify and implement **models of care and support** to align services to PCNs. E.g. Mental Health, social care
- **Integrated case management** for complex needs
- Engage with our community through **People's Voice**
- Implement the **discharge to assess digitalisation project**

We shall do this by robust performance and governance frameworks, compliance and professional best practice, specifications to include corporate social responsibilities and social value outcomes, investment in personal and professional development

### Our shared ambition: Enablers - The Workforce

Our shared ambition to support and enable our workforce:

- We work together through the 24hr period.
- We are proactive and more options are available in the community.
- We are all enabled to work together as we have joined up protocols.
- We are all able to access joint resources to help people.
- We help people easily move between settings in a timely way.
- We are more efficient as we reduce duplication at every opportunity.
- We support people in their homes and families bringing specialist services in the community.



### WORKFORCE ENGAGEMENT STRATEGY

Will be achieved by...

Being agile in thinking  
and working practises

Enabling flexible, agile  
leadership at all levels

Involving the workforce  
at all levels in decision  
making

Valuing and recognising  
achievement

Behaving true to our  
values - valuing each  
other

We shall do this by robust performance and governance frameworks, compliance and professional best practice, specifications to include corporate social responsibilities and social value outcomes, investment in personal and professional development

## Our shared ambition: Enablers - Voice

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**People, Families, Carers and Communities** are at the heart of all we do and by making use of their strengths, assets, views and experiences and by engaging with and working together as partners and with other key stakeholders across the partnership, including the voluntary and community sector, we will co-produce local services and support which meet the needs of local people and help to achieve positive outcomes.

This will be underpinned in our stakeholder engagement which clarifies our commitment and mechanisms for engagement at all levels.

Along with People, Families, Carers and Communities themselves, key partners and stakeholders include the Council, the CCG, health providers, police and the voluntary and community sector.

**Lead Partnership** – Integrated Adults Partnership.



We shall do this by robust performance and governance frameworks, compliance and professional best practice, specifications to include corporate social responsibilities and social value outcomes, investment in personal and professional development

### Strategic monitoring and oversight

Without evidence, we don't know what is working well and what could work better. Through monitoring, oversight, challenge and resolution, led through established partnership arrangements, we are in the best position to respond proactively and ensure our commissioned services are the best they can be

## Humber Coast and Vale Integrated Care System

### Health and Wellbeing Board

### Committee in Common

Voice and Engagement Partnerships, Groups, Networks and Forums  
Stakeholder Groups

Statutory Boards, Safeguarding Adults Board, MARS Board (Children)  
Community Safety Partnership

Other key person centric partners and boards Partnership, A&E Delivery Board

Regional based partnerships and boards

### Integrated Commissioning and Quality Executive (ICQEX)

Integrated Adults Partnership (IAP)

Integrated Children's Trust (ICT)

# Monitoring and Oversight: Priorities – Shine a light

## North Lincolnshire Integrated Commissioning Plan for Adults 2020/24

COMMISSIONING INTENT	LEAD OFFICER	Implementation Timeline			
		2020/21	2021/22	2022/23	2023/24
<b>1 – Intermediate tier sufficiency, system flow and pathways</b>	Head of Adult Social Care NLC	Model review and planning based on learning during pandemic period and changes to services required/implementation planning	Full implementation and impact measurement of Early Discharge planning, pre-operative discharge planning, discharge to assess and trusted assessor	Data and outcomes review in terms of rightsizing capacity to meet rehab and reablement demand, pathway and integration updates	Impact measurement and capacity forward planning
<b>2 – Residential Care placements sufficiency review</b>	Head of Social Work and Assurance NLC	Care Home Support plan in place. Sufficiency review with new contract for 3/21 implementation. Short stay assessment and enablement provision implementation	Full implementation of Care Home Framework and contract and impact assessment of Short Stay provision	Data and outcomes review in terms of rightsizing capacity to meet demand, pathway and integration updates	Impact measurement and capacity forward planning
<b>3 – Frail and Elderly</b>	Head of Strategic Commissioning CCG	Alignment of local plans to HASR Out of Hospital Programme. Transformation of frailty pathways. Development of integrated Frailty strategy and integrated frailty pathway. Integrated Care Centre business case	Implementation of Integrated Care Centre, impact assessment of Integration	Data and outcomes review, pathway and integration updates	Impact assessment, Data and outcomes review, capacity forward planning
<b>4 – End of Life Care (EoLC)</b>	Transformation Programme Lead CCG	Map new EoLC pathways, EoLC strategy update, implementation of RESPECT model and EPaCCs (electronic Palliative Care Coordination System), ongoing impact	Implement new EoLC pathways	Impact assessment, data and outcomes review	Review and refresh EoLC pathways
<b>5 – Integrated model for social prescribing</b>	Head of Participation and Achievement NLC	Full Implementation of model	Impact assessment, Data and outcomes review	Impact assessment, Data and outcomes review	Impact assessment, Data and outcomes review, capacity forward planning

COMMISSIONING INTENT	LEAD OFFICER	Implementation Timeline			
		2020/21	2021/22	2022/23	2023/24
<b>6 – Targeted support for younger adults</b>	Head of Social Work and Assurance NLC, Principal Manager Commissioning NLC, Head of Strategic Commissioning CCG	Service review and engagement including learning during pandemic period and changes to services required and implementation planning	Full implementation and initial impact measurement	Data and outcomes review, Impact measurement and capacity forward planning	Impact measurement and capacity forward planning
<b>7 – Alternative solutions to live well at home</b>	Head of Adult Social Care and Head of Social Work and Assurance NLC	Independent Living Centre implementation, Domiciliary Care Market development support strategy and implementation plan	Full implementation and initial impact measurement	Data and outcomes review, Impact measurement and capacity forward planning	Impact measurement and capacity forward planning
<b>8 – Develop and implement Carer's Strategy</b>	Head of Adult Social Care, Principal Manager Commissioning NLC	Carer's strategy development through co-production, integration with support for young carers	Full implementation and initial impact measurement	Data and outcomes review, Impact measurement and capacity forward planning	Impact measurement and capacity forward planning
<b>9 – Reasonable adjustments for people with learning disabilities and /or autism</b>	Head of Strategic Commissioning CCG and Head of Social Work and Assurance NLC	Specialist care and support pathway development and implementation, integration across services to support access	Full implementation and initial impact measurement	Data and outcomes review, Impact measurement and capacity forward planning	Impact measurement and capacity forward planning
<b>10 – Volunteering, employment and befriending opportunities are available for all adults</b>	Head of Participation and Achievement NLC	Full Implementation of model	Impact assessment, Data and outcomes review	Impact assessment, Data and outcomes review	Impact assessment, Data and outcomes review, capacity forward planning

We have a commitment to listen, learn, review and adapt and we will demonstrate our success in improving outcomes for our residents through **performance data and analysis, practice wisdom, voice and engagement** and **reviews/reports**.

Outcomes Based Accountability principles underpin our approach and five key questions inform our monitoring, evaluation and next steps planning:

1. What is the outcome we want for residents
2. What is the curve we want to turn – what does success look like
3. What is the story behind the baseline – where have we been and where are we headed
4. How much did we do, how well did we do it and is anyone better off (performance measures)
5. Are we making a difference (indicators, voice/experiences)

Progress relating to the areas of focus, where we will '**shine a light**', will be regularly presented to the **Integrated Adults Partnership** by the relevant leads.

For areas where there is a '**line of sight**', progress reports will be presented to the Integrated Adults Partnership on an exceptions basis at the request of or by agreement with the Integrated Adults Partnership.

An annual progress review of this strategy will be developed and presented by the Integrated Adults Partnership to the **Integrated Commissioning and Quality Executive** to consider the effectiveness of the commissioning intents and to shape and influence partnership action.

## CONTACT US:

For any further information, comments or queries, please go to:

**Web:** [www.northlincs.gov.uk](http://www.northlincs.gov.uk) or <https://northlincolnshireccg.nhs.uk/>

**Email:** [Chloe.Nicholson@nhs.net](mailto:Chloe.Nicholson@nhs.net) / [Nina.torr@northlincs.gov.uk](mailto:Nina.torr@northlincs.gov.uk)

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# Agenda Item 8

Report of the  
Director of Children and Community Resilience  
North Lincolnshire Council  
And Chief Operating Officer North Lincolnshire CCG

Agenda Item No: 8  
Meeting: 16 November 2020

## NORTH LINCOLNSHIRE COUNCIL

### HEALTH AND WELLBEING BOARD

#### NORTH LINCOLNSHIRE CHILDREN'S COMMISSIONING STRATEGY 2020/24

##### 1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To note the report of the North Lincolnshire Children's Commissioning Strategy 2020/24
- 1.2 The commissioning strategy clarifies the integrated 'One Family Approach' and commissioning intent in relation to health, social care and education for children, young people and families.

##### 2. BACKGROUND INFORMATION

- 2.1 The North Lincolnshire Health and Care Plan sets the strategic vision and principles for integrated working within North Lincolnshire. The integrated care partnership arrangements that have been established for the place of North Lincolnshire includes the Integrated Children's Trust (ICT) and the Integrated Adults Partnership.
- 2.2 The Integrated Children's Trust is a partnership of organisations that commission and provide services for children, young people and their families within North Lincolnshire with a specific focus upon integration of health, social care and education provision for children, young people and families. Children, young people and families are also represented on the Integrated Children's Trust which reinforces our intent to co-produce with children, young people and families using their strengths and assets to develop services to meet their individual needs. The Integrated Children's Trust enables partner agencies to meet their statutory duty, under the Children Act 2004, to co-operate to improve the wellbeing of children.
- 2.3 The Children's Commissioning Strategy 2020/24 has been developed through the ICT to enable education, health and social care services working with children and families to have a shared understanding and ambition for children in North Lincolnshire. The strategy will form the work of and be monitored by the Integrated Children Trust and provide a conduit between the integrated care partnership arrangements and the Health and Wellbeing Board.

- 2.4 The strategy signals an intent to work together and integrate both services and our commissioning functions where these improve outcomes for children and families and to prioritise those where they have additional need.

### **3 OPTIONS FOR CONSIDERATION**

- 3.1 The Board is asked to approve the North Lincolnshire Children's Commissioning Strategy.

### **4. ANALYSIS OF OPTIONS**

- 4.1 The Children's Commissioning Strategy 2020/24 has been developed by the Integrated Children's Trust and translates the principles of the Integrated Health and Care Plan for services for children across North Lincolnshire.

- 4.2 The strategy includes how we respond to the challenges offered by our children and families and how we safeguard and protect the most vulnerable through the 'Helping Children and Families in North Lincolnshire' document.

- 4.3 The strategy will inform children and families, stakeholders and others of our commissioning intent, the intent being based upon national and local guidance, data and intelligence and the views of children, young people and their families as well as from practice wisdom and best practice

### **5. FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**

- 5.1 Resources that support delivery of the strategy are considered in another item on this agenda.

### **6. OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**

- 6.1 The strategy sets out the high level ambition and intent for future development and shaping of services for children, young people and families in the context of the relevant legal and regulatory requirements.

### **7. OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

- 7.1 An IIA has been completed. No adverse impacts were identified.

### **8. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

- 8.1 The strategy has been developed in consultation with key stakeholders across the education, health and care system.

8.2 There are no conflicts of interests to declare

**9. RECOMMENDATIONS**

9.1 That the Board note the North Lincolnshire Children's Commissioning Strategy 2020/24.

DIRECTOR OF CHILDREN AND COMMUNITY RESILIENCE  
CHIEF OPERATING OFFICER – NLCCG

Church Square House  
Scunthorpe  
DN15 6NL  
Author: Becky McIntyre  
Date: 6 November 2020

**Background Papers:**

# Children's Commissioning Strategy

*One Family Approach: A system that works for all children, young people and families*

2020/24

## SLIDES 3 to 4

Foreword

## PLAN SLIDES 5 to 9

One Family Approach – Key Drivers

One Family Approach - Strategic Framework

One Family Approach - Organisational Model

One Family Approach - Outcomes

One Family Approach - Emerging Themes

## DO / REVIEW SLIDES 10 to 13

One Family Approach - Priorities 'Shine a Light'

One Family Approach - Priority Focus

One Family Approach - Line of Sight

## Workforce Development - 14

## Stakeholder Engagement - 15

## Monitoring - 16 to 18

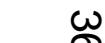
## Contact Us - 19

## Foreword

On behalf of Integrated Children's Trust partners, we are pleased to introduce our North Lincolnshire **Children's Commissioning Strategy 2020/24** which clarifies our integrated **One Family Approach** and commissioning intent in relation to health, social care and education for children, young people and families.

Children, young people, families and communities are at the heart of what we do and we are proud to acknowledge and celebrate the positive outcomes achieved to date and the strength of partnership working. We are ambitious for the future and for our children and young people, and we have high expectations of ourselves as partners, working with children, families and communities, to improve outcomes (to be safe, well, prosperous and connected). We want to build on the collective strengths of our people and place to innovate and change through integration and system redesign. In North Lincolnshire, our One Family Approach aims to create **a system that works for all children, young people and families** where we work together to provide and commission integrated services for children and young people.

Our ambition is for children to be **in their family, in their school and in their community**. As partners take a One Family Approach across North Lincolnshire, we want children, young people and families to be able to build upon their strengths and their resilience to find or be enabled to find solutions when things are not going so well. They should be able to access available information, advice, guidance and be enabled to maximise their potential and enhance their life chances. We want all children and families to have a sense of belonging and equality of opportunity and through our integrated working, we will address inequalities and enable those more in need to achieve positive outcomes. Where there are significant concerns, we want children, young people and families to be able to access swift, creative and flexible help so they can remain independent. We will protect children and young people with an aim to build resilience and help them live within their family, attend their school and be a part of their community.



The **One Family Approach - Helping Children and Families in North Lincolnshire 2020/24** sets out how services support children, young people and families to participate, find help online and in their networks and communities, to be resilient and stay independent.

We want children, young people and families to be supported by a workforce that is resilient, confident, competent and with authorisation to do what they think is the right thing to do without escalating children and families unnecessarily through a range of organisational systems and referral processes when the day to day contact with trusted professionals can make the difference. We will listen to families, work to build upon the child and family's strengths, help them find solutions and only when necessary consult with others to seek assurance, check they're doing the right thing and continue to support the child and family. We want to create equality of opportunities by acknowledging inequalities and removing barriers and we will prioritise services to our most vulnerable children and young people so they have fair and equitable opportunities to be the best they can be, irrespective of their background and circumstances. We will develop an integrated workforce, one that works with the whole family and where we reduce unnecessary duplication of professionals involved with a child and family. We will do so by implementing an agreed practice model, based in psychological approach to consultation and formulation where the initial contact both with the child and family and or professional is one of enablement.

By listening, learning, reviewing and adapting; by taking account of the performance data and intelligence, by listening to our children, young people, families and taking account of the **Children's Challenge 2020/24**, we have identified specific areas of focus on which we want to 'shine a light' for commissioning and partnership action.

## Foreword

- This strategy is to enable education, health and social care services working with children and families to have a shared understanding and ambition for children in North Lincolnshire. The Children's Commissioning Strategy adds value and supports individual agencies statutory functions
- Underpinned by our values of equality of opportunity, excellence, self-responsibility and integrity, the strategy signals an intent to work together and integrate our services and our commissioning functions where these improve outcomes for children and families; to prioritise those who have additional need; and to reduce inequalities and improve outcomes for all children and families, taking account of ethnicity, race and religion and those with certain specific additional vulnerabilities, where a child:
- is disabled and has specific additional needs
  - has special educational needs
  - is a young carer
  - is showing signs of or engaging in anti-social or criminal behaviour
  - is in a family circumstance presenting concerns for the child, such as substance abuse, adult mental health and domestic abuse
  - is showing early signs of abuse and/or neglect
  - is showing early signs of mental health issues, including self-harm
  - is vulnerable to or experiencing sexual or criminal exploitation, radicalisation, gang or organised crime activity, or other risks that are 'contextual' in nature
  - is living away from home, in care or a care leaver
  - is vulnerable to Honour Based Abuse
  - is vulnerable to Female Genital Mutilation and other forms of body mutilation
  - or family have additional vulnerabilities e.g. cultural, immigration status, language, literacy, temporary accommodation, recent trauma, social exclusion
- The strategy will include how we respond to the challenges offered by our children and families and how we safeguard and protect the most vulnerable through the 'Helping Children and Families in North Lincolnshire' document
- The strategy will inform children and families, stakeholders and others of our commissioning intent, the intent being based upon national and local guidance, data and intelligence and the views of children, young people and their families as well as from practice wisdom and best practice
- The strategy will form the work of and be monitored by the Integrated Children Trust and provide a conduit between this, the Place Partnership and the Health and Wellbeing Board, including the transition between children and adult services for 16 to 24 year olds including those impacted by recent circumstances

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**Mick Gibbs**

Director of Children and Community Resilience  
North Lincolnshire Council  
Chair of Integrated Children's Trust

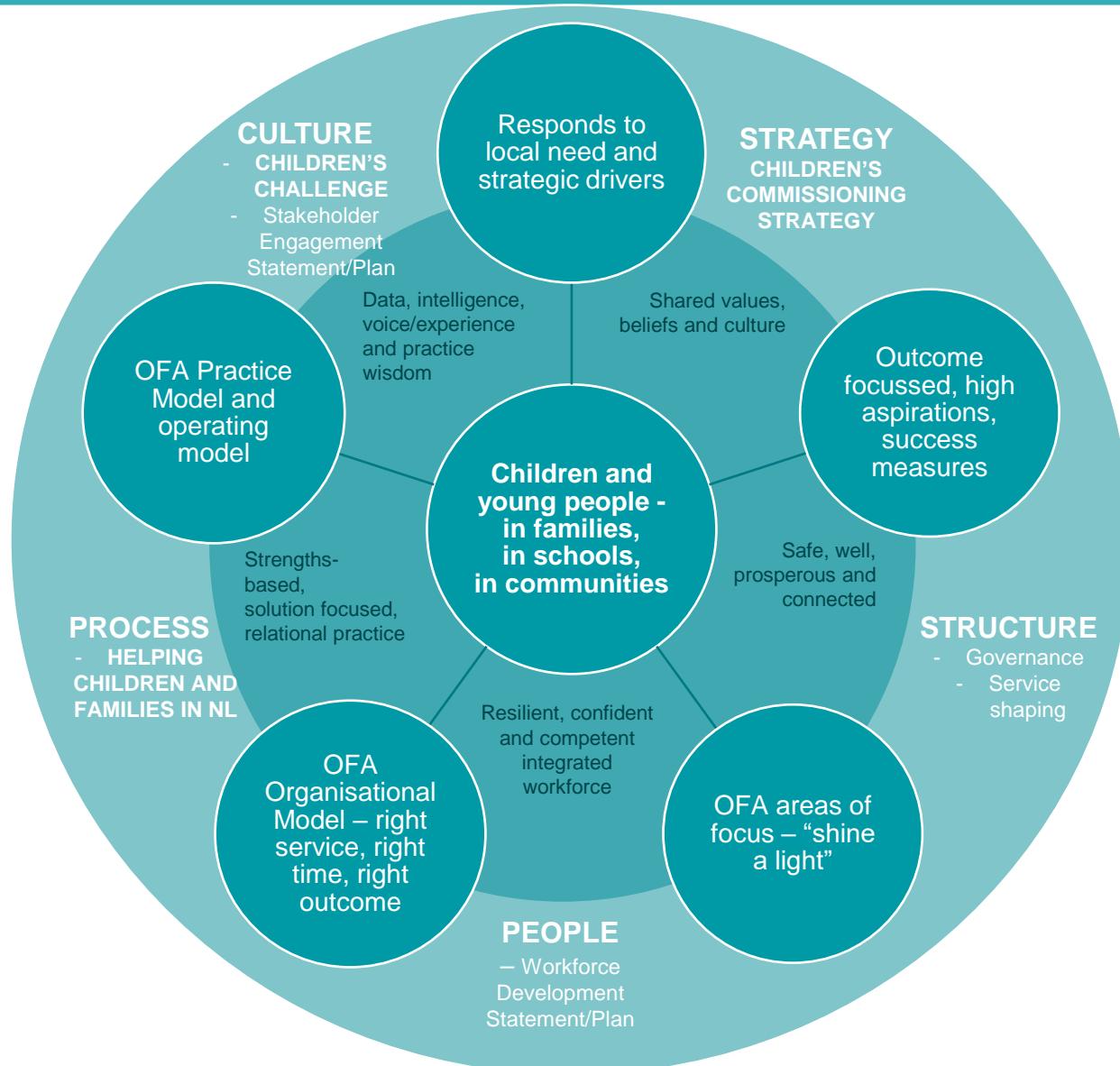
**Alex Seale**

Chief Operating Officer  
North Lincolnshire Clinical Commissioning Group  
Vice Chair of Integrated Children's Trust

<b>One Family Approach</b>	The One Family Approach is how we respond to the needs of children and families in North Lincolnshire in the context of an integrated services for children. It provides a vision for a new system that places children and families at the centre – a One Family Approach to strategy, commissioning, planning, and practice. It is founded upon our North Lincolnshire culture, values and beliefs, capturing our intent to keep children in their families, their schools and their communities and based upon anti-oppressive working across the partnership. It provides a model for innovative, integrated working which builds upon strengths, find solutions in families and communities, builds resilience and confidence, and enables independence.
<b>Children's Commissioning Strategy</b>	In the context of our Place Partnership, this document clarifies our integrated One Family Approach and commissioning intent in relation to health, social care and education for children, young people and families
<b>Children's Challenge</b>	Through surveys and feedback, young people and families have identified some areas of focus to challenge local partners to work together to take action. They have also identified challenges for themselves. These challenges are articulated in the Children's Challenge and to which the Children's Commissioning Strategy have taken account of. Young people and families are part of the solution and together, taking a One Family Approach, all stakeholders can work together to further improve the lives and experiences of children, young people and families.
<b>Helping Children and Families in North Lincolnshire document</b>	Sets out our local definitions of levels of need, in line with our organisational model Sets out guidance to professionals about providing early help and making decisions about levels of need Introduces our One Family Approach practice model, provides the framework for how the provision of help and protection should be undertaken across the partnership Sets out the principles which underpin multi agency practice in North Lincolnshire
<b>Workforce Development</b>	Children, young people and families will be supported by a workforce that is resilient, confident, competent and with the authorisation to do what they think is the right thing to do without propelling children and families through a range of systems and processes when our day to day contact can make the difference.
<b>Stakeholder Engagement</b>	Children, young people, families and communities are at the heart of all we do and by making use of their strengths, assets, views and experiences and by engaging with and working together with other key stakeholders across the partnership, we will co-produce local services and support which meets needs and helps to achieve positive outcomes.
<b>Shared Values, Beliefs and Culture</b>	Fundamentally, children, young people and families are at the centre of all we do and we want to create a system that works for all children, young people and families, where we take account of all needs and diversities (including BAME) and where we work together to provide and commission integrated services for children and young people to enable them to remain in families, in schools and in communities. This is underpinned by our shared values of equality of opportunity, excellence, integrity and self responsibility.



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**North Lincolnshire  
One Family Approach**



### One Family Approach- 'ORGANISATIONAL MODEL', right service, right time, right outcome.

#### **Universal (Self Help and Enablement)**

Within the right conditions and local offer, through taking self responsibility, children, young people and families; actively participate in and are supported by their schools and communities; access available information, amenities, settings and services that are accessible to all to help themselves to raise awareness, develop skills and resilience and enable behaviour changes that will contribute to them being safe, well, prosperous and connected, without the need for interventions; actively engage with proactive, preventative, health promoting services and receive the benefits of early intervention and support to maximise their health, wellbeing and resilience, as well as improving health outcomes and reducing inequalities.

*Within specific populations, schools, communities, community hubs and area wide*



#### **Targeted (Focused and Preventative)**

Children, young people and families are entitled to equality of opportunity and through schools, individual agency/multi agency/locality based integrated working, children, young people and families are helped, supported and empowered to enable behaviour changes that will build resilience, enable self help and contribute to them being safe, well, prosperous and connected, preventing the need for more specialist help.

*Within specific populations, schools, communities, community hubs and area wide for those who seek out and/or are identified as requiring additional help via consultation / formulation*

*Within specific populations through targeted, intensive home visiting and evidence based interventions*

#### **Specialist (Protection)**

Where there are serious concerns, through early, swift, creative, flexible and responsive agency involvement/integrated working, children, young people and families are helped, supported and empowered to protect themselves and enable behaviour changes around the whole family that will contribute to reducing harm, enabling the family to remain together and independent in their community, leading to them being safe, well, prosperous and connected.

*Within specific populations, schools, communities, community hubs and area wide for those who are identified as requiring help to protect themselves and/or others from harm*

*Within specific populations through targeted, intensive home visiting and evidence based interventions*

**Enablers – Data, Intelligence, Workforce, Voice**

In the context of our Place Partnership, through implementing our 'ONE FAMILY APPROACH', we have articulated what successful outcomes will look like

## SAFE

- Where children and families:
- have a sense of belonging and feel safe/are safe in their family, school and community
- are supported to withstand adverse impacts and change behaviours
- are empowered and supported to identify and develop their strengths and aspirations
- live in 'one family' which reflects their needs and circumstances

## WELL

- Where children and families:
- are a healthy weight and live active lives
- enjoy positive emotional wellbeing and mental health
- receive the health care and support they need in their community where possible
- learn resilience and self-regulation through effective provision in settings and schools
- receive proactive support to grow, develop and achieve their potential
- build sound brain architecture, positive attachments and healthy relationships
- receive support to establish confident and competent parenting strategies and coping mechanisms
- have access to preventative health surveillance, immunisations and health promotion

## PROSPEROUS

- Where children and families:
- benefit from family prosperity
- are enabled to have social mobility and equal access to resources in their early years and education
- have high levels of speech, language and communication skills
- have equal and fair access to a consistent, high quality education offer in schools and setting
- are empowered, enabled and supported to achieve as they transition to adulthood
- achieve their potential (including the most vulnerable)

## CONNECTED

- Where children and families:
- are empowered and enabled to participate, have equality of opportunity and access to creative, flexible support at the earliest point in the right place by the right people
- benefit from engaging in positive activities
- build resilience and find resolutions for themselves
- are able to transport themselves around the area
- have access to info and resources online and social media
- have a home, a job and a friend (including vulnerable adults)

### Key themes emerging from analysis which shaped and influenced our commissioning intents

#### SAFE

- The importance of a whole family approach to address issues and find resolutions
- Emerging challenges relating to contextual safeguarding e.g. in relation to child exploitation and knife crime
- Focus on risk management to best meet the needs of adolescents

#### WELL

- Ongoing need for high quality, timely, accessible and responsive information, support and services to support positive emotional wellbeing and mental health
- Emotional Health and Wellbeing Transformation Plan (including response to scrutiny recommendations)
- Health and Wellbeing Strategy priorities framework (best start, healthy and resilient communities, healthy lives for all)
- The impact of early1001 intervention from pre birth to 2 years and the impact of health inequalities

#### PROSPEROUS

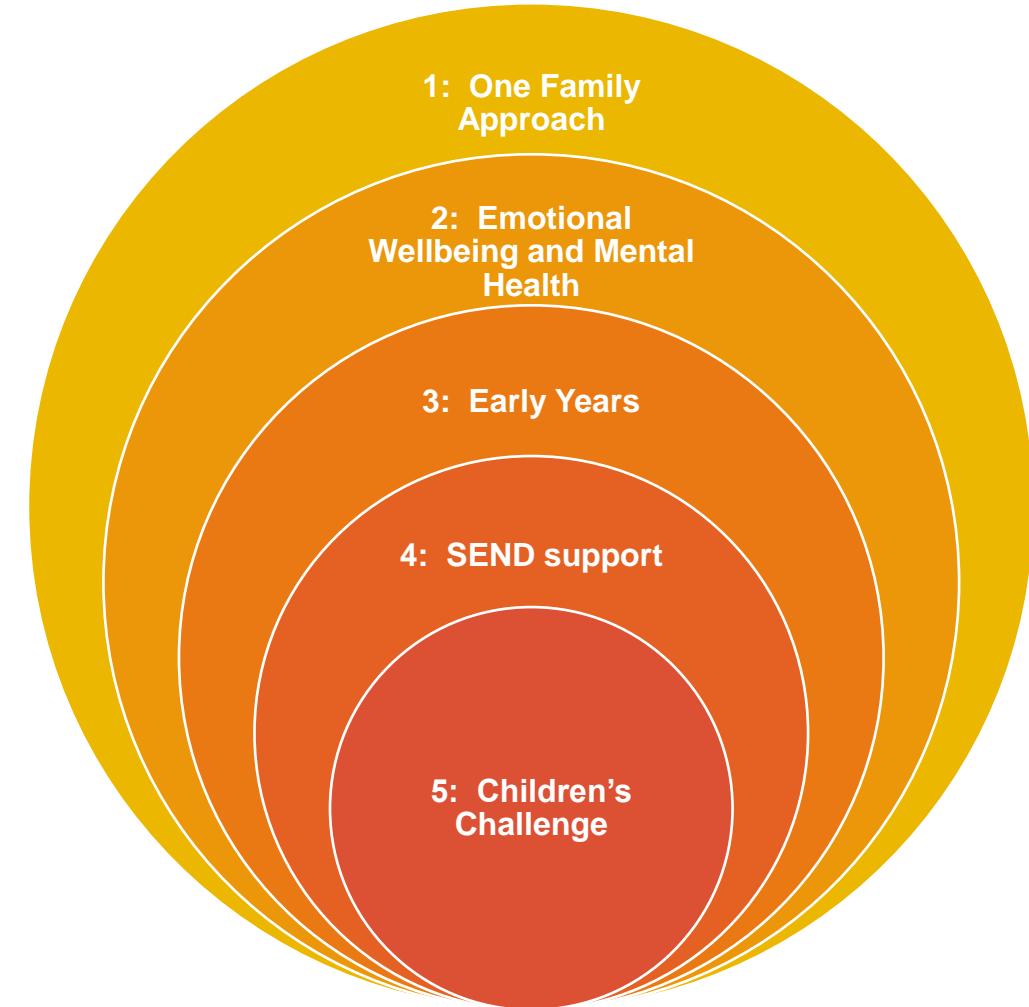
- Findings and recommendations from Early Years Peer Challenge 2019, including the need for renewed focus on targeting the most vulnerable and a focus on early years prevention so children can have the 'best start'
- Health and Wellbeing Strategy priorities framework (equality of opportunities for people's health and wellbeing)
- Need to consider educational outcomes for all, but specifically for disadvantaged and the most vulnerable children and ensuring focus on inclusion
- Need to support and upskill young people through to adulthood and employability

#### CONNECTED

- Commitment to place based system articulated through the Place Partnership and Health and Wellbeing Board
- Renewed focus on community development, including better use of community resources and self responsibility as part of revised organizational model
- Opportunities identified to develop integrated offer underpinned by good quality, accessible information resources and universal provision
- Ongoing recognition of the importance of a resilient workforce to contribute to improved outcomes

These **COMMISSIONING INTENTS** articulate the areas of focus that the Integrated Children’s Trust will **‘SHINE A LIGHT’** on for partnership action and system change to contribute to children, young people and families being **SAFE, WELL, PROSPEROUS** and **CONNECTED** and so the children live within their family, attend their school and be a part of their community.

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**Strategic monitoring and oversight** - Without evidence, we don't know what is working well and what could work better.

For areas in which we want to '**SHINE A LIGHT**' there are established partnership arrangements and identified lead officers to drive forward partnership action and system change.

As part of this, lead partnerships will be responsible for identifying, monitoring and progress reporting to the ICT, underpinned by relevant **performance data and analysis, practice wisdom, voice and engagement** and **reviews/reports**.

COMMISIONING INTENT	LEAD PARTNERSHIP
1: Develop a <b>One Family Approach</b> through transforming our integrated offer to children and families to strengthen families to maintain children in their families, in schools and in communities (across systems, procedures, policy, practice and resources) 	• One Family Approach Steering Group
2: Create a culture and system leading to positive <b>emotional wellbeing and mental health</b> and to meet the needs of all children, including those with complex needs	• Children and Young People's Social Emotional and Mental Health Steering Group
3: Transform our approach to <b>early years</b> and social mobility through early help and high quality early learning in schools and settings	• Best Start Lead Officers Group
4: Focus on equity of access and consistency of support at <b>SEND Support</b> to prevent exclusion and further improve outcomes	• SEND and Inclusion Partnership
5: Establish a partnership response to the <b>Children's Challenge</b> through implementation of this strategy and ongoing stakeholder engagement	• Children and Young People's Partnership

COMMISIONING INTENT	PARTNERSHIP ACTION AND SYSTEM CHANGE
1 – Develop a ' <b>One Family Approach</b> ' through transforming our integrated offer to children and families to strengthen families to maintain children in their families, in schools and in communities (across systems, procedures, policy, practice and resources)	<ul style="list-style-type: none"> <li>➢ Establish strategic planning and commissioning frameworks that are effectively joined up to provide a single offer to children and families</li> <li>➢ Develop high quality universal provision throughout the child and family journey leading to self help, enablement and enhanced resilience</li> <li>➢ Develop whole family working to encompass formulation, targeted early help and integrated children's offer to maintain children in their families, in schools and in their communities and expand work with vulnerable adults</li> <li>➢ Enhance targeted response to contextual safeguarding (including transitions and specific intensive/immersive programmes)</li> <li>➢ Develop a resilient, skilled and empowered integrated workforce – right person, right place, right time</li> </ul>
2 - Create a culture and system leading to positive <b>emotional wellbeing and mental health</b> and to meet the needs of all children, including those with complex needs	<ul style="list-style-type: none"> <li>➢ Support children and young people to have good social, emotional and mental health through co-ordinated strategic planning and co-ordinated delivery across the system</li> <li>➢ Provide emotional wellbeing and mental health prevention and intervention for children and young people including infant mental health and working with schools and families</li> <li>➢ Engage with children and young people, and their families, so they are key partners in coproduction and evaluation</li> <li>➢ Create opportunities for North Lincolnshire to be connected, and benefit, from national and regional developments and where possible, implement evidence-based practice / developments</li> <li>➢ Develop local connectivity to the Humber Coast and Vale Partnership</li> </ul>
3 - Transform our approach to <b>early years</b> and social mobility through early help and high quality early learning in schools and settings  Page 45	<ul style="list-style-type: none"> <li>➢ Roll out a transformed joint approach to meeting the needs of children and young people with speech, language and communication needs through specialist support and universal high-quality provision which develops children's speech and language skills</li> <li>➢ Develop skills and knowledge across the sector to improve children's outcomes through child development and pedagogically informed approaches and a strategic plan for workforce development and progression and system leadership</li> <li>➢ Target early help services at those most in need at the earliest point to enhance social mobility, including by developing parental readiness and resilience</li> <li>➢ Enhance support for children and families to focus on children's development from pre birth to 5, through childhood and preparation for adulthood</li> <li>➢ Improve children's school readiness through more children achieving a good level of development</li> <li>➢ Close the learning gap between the most and least advantaged by improving transitions and improved sharing and use of data to target support</li> <li>➢ Establish mechanisms for oversight and robust challenge of children's outcomes at five years through the Education and SEND Standards Board</li> </ul>
4 – Focus on equity of access and consistency of support at <b>SEND Support</b> to prevent exclusion and further improve outcomes	<ul style="list-style-type: none"> <li>➢ Further enhance the robustness of scrutiny and challenge to underperformance through the Education Standards Board and the SEND Standards Board</li> <li>➢ 'Re-imagine' inclusion in partnership with Headteachers and Principals including a review of targeted and specialist provision and support for specific needs (e.g., neurodiversity and attachment)</li> <li>➢ Review the SEND school improvement offer to support increased consistency and more peer to peer support and challenge</li> <li>➢ Continue to develop mechanisms for celebrating and sharing good practice – in families, in schools and in communities</li> <li>➢ Continue to work in partnership with Headteachers and Principals on system-wide solutions to enhancing quality inclusion, including the reduction of fixed term and permanent exclusions</li> <li>➢ Review and develop the skills and employability offer for 16 to 24 year olds to further support strong transitions and positive, sustainable opportunities</li> <li>➢ Continue to develop the sufficiency of the school / education estate so that all needs are appropriately identified and met (including mainstream, targeted and specialist provision)</li> </ul>
5 – Establish a partnership response to the <b>Children's Challenge</b> through implementation of this strategy and ongoing stakeholder engagement	<ul style="list-style-type: none"> <li>➢ Establish a partnership response to the Children's Challenge through implementation of all the 'shine a light' areas of focus and other issues under the auspices of the ICT's line of sight</li> <li>➢ Maintain and further develop engagement mechanisms so that the voice of children, young people, families, communities and other stakeholders are fully embedded and that they continued to shape and influence commissioning in its broadest sense</li> </ul>

In order to have a full understanding of the breadth and scope of the system, which is underpinned by statutory responsibilities, the Integrated Children's Trust will have a **LINE OF SIGHT** on key functions which impact on, shape and influence partnership action and system change (but which are the responsibility of other partnership and planning frameworks)

### SAFE

- Local arrangements to **help and protect** children and young people from harm across the **early help and safeguarding** system including emerging harm i.e. **contextual safeguarding, parental conflict and domestic abuse**
- **Sufficiency offer and housing** accommodation and support to children and families with additional needs
- Services for children involved in the **youth justice** system
- **Community safety** for the people and place of North Lincolnshire
- **Public Health response** to address key issues (including the outcomes of lifestyle surveys)

### WELL

- **Healthy lifestyles/healthy environments** to enable children's health and wellbeing
- Preventative approach relating to **health and wellbeing priorities** in line with known population needs i.e. smoking cessation and breastfeeding
- **Out of hospital community therapies and associated equipment**
- **Children's Home Care**
- Approach to meeting the needs of children with **palliative and end of life care need**
- **Sexual Health** services
- **0 to 19** services
- **Maternity** services
- **Substance Misuse** services
- **Bereavement** services for children and families

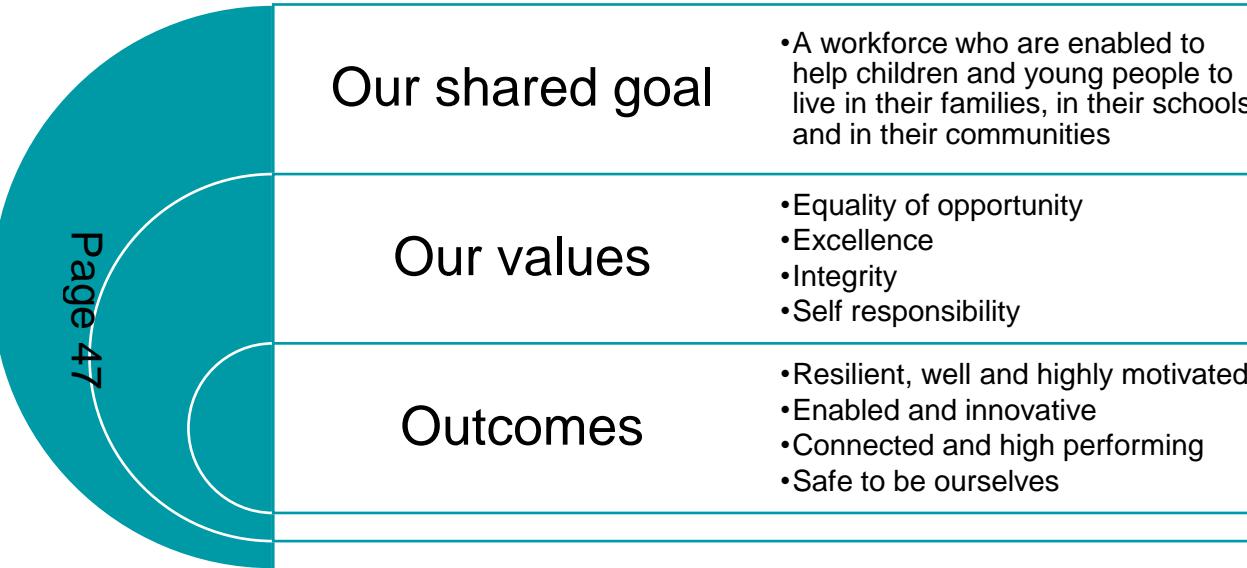
### PROSPEROUS

- Local arrangements to encourage and support **family prosperity** through understanding local need, addressing disadvantage and reducing the impact of living in poverty i.e. fuel poverty, holiday hunger, unemployment, debt/welfare rights support
- **Sufficiency programmes** for children in care and care leavers including those at the edge of care
- **Sufficiency of housing/accommodation/short breaks** for children and young people with more complex needs
- **High quality, inclusive education provision** which enable all children, with a particular focus on the most vulnerable, achieve their potential with positive progression to adulthood by accessing an enabling, inclusive curriculum offer and reducing disproportionate exclusions

### CONNECTED

- **Information, guidance and advice** available for children and families (including digital solutions)
- Sufficiency of positive activities through robust and **targeted youth participation offer**
- Corporate parenting responsibilities for **children in care and care leavers**
- A rich and robust **voluntary and community sector** to enable and support children and families through planning, commissioning and delivery (including wider stakeholders like charities, social enterprises, the private sector and children and young people themselves)
- **Total transport solutions** to meet all needs, including school transport, and promote active travel
- Overarching **recovery and renewal** following the COVID-19 pandemic across the whole system

**Enablers: Workforce Development** - to create a One Family Approach Workforce to support 'a system that works for all children, young people and families'



### A One Family Approach Workforce who:

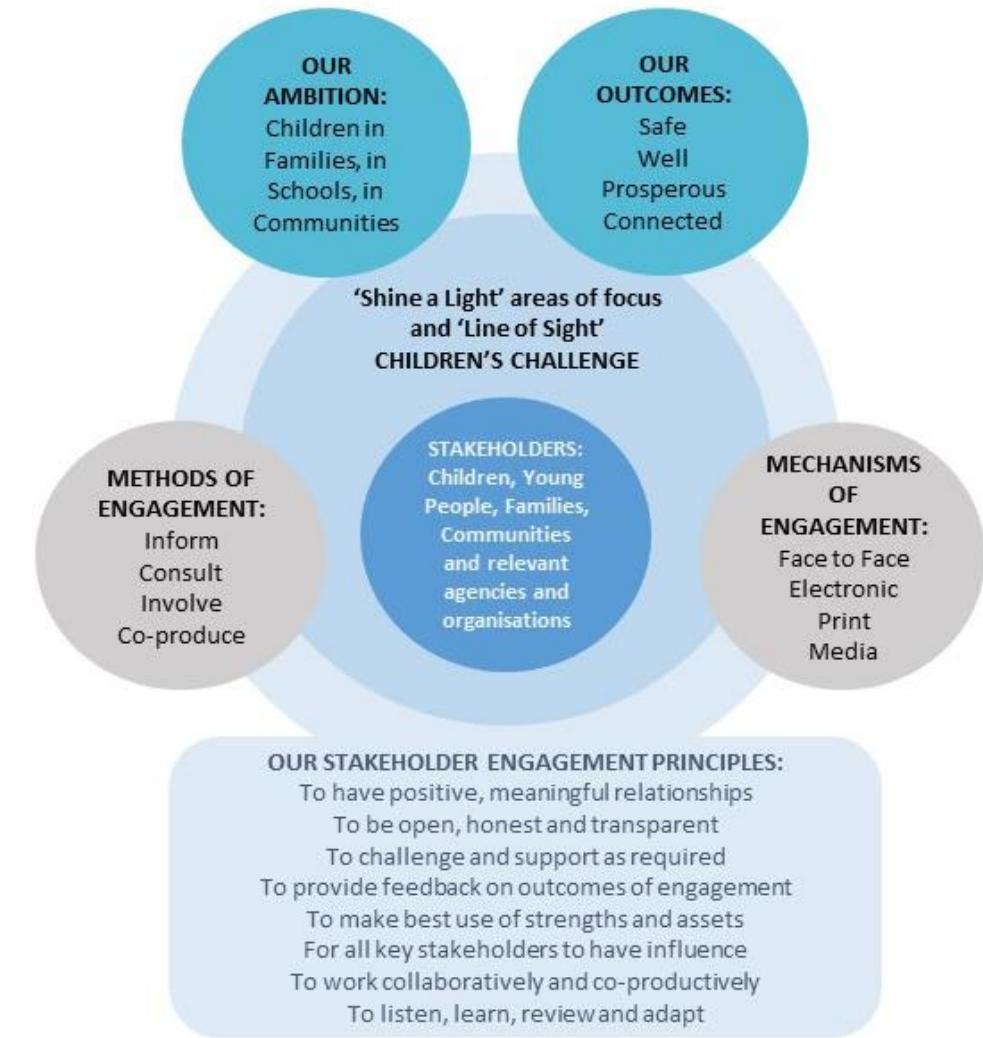
- Work together to provide and commission integrated services
- Are diverse and can recognise and work with the diverse population of North Lincolnshire
- Are strengths based and solution focused
- Do the right thing at the earliest point to meet need
- Streamline processes, reduce and overcome barriers and avoid duplication
- Address issues in inequality and demonstrates anti oppressive and anti racist practice
- Are resilient and confident
- Are skilled and competent
- Are supported and receive appropriate supervision
- Work to 'level up' children's life chances and prioritise services to our most vulnerable children and young people

### WORKFORCE ENGAGEMENT STRATEGY

Will be achieved by...	Being agile in thinking and working practises	Enabling flexible, agile leadership at all levels	Involving the workforce at all levels in decision making	Valuing and recognising achievement	Behaving true to our values - valuing each other
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**Enablers: Stakeholder Engagement** – where the views and experiences of stakeholders contribute to ‘a system that works for all children, young people and families’

- Children, young people, families and communities are at the heart of all we do and by making use of their strengths, assets, views and experiences and by engaging with and working together as partners and with other key stakeholders across the partnership, including the voluntary and community sector, we will co-produce local services and support which meets needs and helps to achieve positive outcomes.
- This will be underpinned in our stakeholder engagement statement which clarifies our commitment and mechanisms for engagement at an individual, service and strategic level.
- Along with children, young people, families and communities themselves, key partners and stakeholders include the Council, the CCG, education providers, health providers, police and the voluntary and community sector.



Without evidence, we don't know what is working well and what could work better. Through monitoring, oversight, line of sight, challenge and resolution, led through established partnership arrangements, we are in the best position to respond proactively so that our commissioned services are the best they can be

# Humber Coast and Vale Integrated Care System



## Health and Wellbeing Board Place Partnership Committee in Common

Other key children/person centric/place based partnerships and boards e.g.. Children's MARS Board, Corporate Parenting Board, Education and SEND Standards Boards, Youth Offending Management Board, Safeguarding Adults Board, Community Safety Partnership Board

Regional based partnerships and boards

## Place Partnership

## Integrated Commissioning and Quality Executive (ICQEX)

## Integrated Children's Trust (ICT)

## Integrated Adults Partnership (IAP)

COMMISSIONING INTENT	LEAD PARTNERSHIP	Implementation Timeline			
		2020/21	2021/22	2022/23	2023/24
<b>1: One Family Approach</b>	<ul style="list-style-type: none"> <li>One Family Approach Steering Group</li> </ul>	Formulate our practice model to underpin an OFA operational model, workforce development plan and stakeholder engagement – finding additional ways to work with “families”	Implement OFA operating model, workforce development plan and stakeholder engagement.	Monitor and review ongoing plan	Formally evaluate plan and develop 2024/26 plan
<b>2: Emotional Wellbeing and Mental Health</b>	<ul style="list-style-type: none"> <li>Children and Young People's Social Emotional and Mental Health Steering Group</li> </ul>	Implement the welcoming children back to school and wider recovery plan underpinned by the OFA and revised operating model	Formulate and implement a full plan for integration across the services to children offer	Monitor and review ongoing plan	Formally evaluate plan and develop 2024/26 plan
<b>3: Early Years</b>	<ul style="list-style-type: none"> <li>Best Start Lead Officers Group</li> </ul>	Implement and review progress against peer review findings and linked offer pre birth to 5.	Formulate and implement a holistic development plan for pre birth to 5	Monitor and review ongoing plan	Formally evaluate plan and develop 2024/26 plan
<b>4: SEND Support</b>	<ul style="list-style-type: none"> <li>SEND and Inclusion Partnership</li> </ul>	Evaluate the SEND Support population using the OFA operating model to formulate a plan to improve outcomes for this group.	Formulate and implement plan	Monitor and review ongoing plan	Formally evaluate plan and develop 2024/26 plan
<b>5: Children's Challenge</b>	<ul style="list-style-type: none"> <li>Children and Young People's Partnership</li> </ul>	Impact assessment, data and outcomes review/refresh	Impact assessment, data and outcomes review/refresh	Impact assessment, data and outcomes review/refresh	Impact assessment, data and outcomes review/refresh

We have a commitment to listen, learn, review and adapt and we will demonstrate our success in improving outcomes for children, young people and families through **performance data and analysis, practice wisdom, voice and engagement** and **reviews/reports**.

Outcomes Based Accountability principles underpin our approach and five key questions inform our monitoring, evaluation and next steps planning:

1. What is the outcome we want for our children, young people and families
2. What is the curve we want to turn – what does success look like
3. What is the story behind the baseline – where have we been and where are we headed
4. How much did we do, how well did we do it and is anyone better off (performance measures)
5. Are we making a difference (indicators, voice/experiences)

Progress relating to the areas of focus, where we will '**shine a light**', will be regularly presented to the Integrated Children's Trust by the relevant leads.

For areas where there is a '**line of sight**', progress reports will be presented to the Integrated Children's Trust on an exceptions basis at the request of or agreement from the Integrated Children's Trust itself.

An annual progress review of this strategy will be developed and presented to the Integrated Children's Trust to consider the effectiveness of the commissioning intents and to shape and influence partnership action.

## CONTACT US:

For any further information, comments or queries, please go to:

**Web:** [www.northlincs.gov.uk](http://www.northlincs.gov.uk) or <https://northlincolnshireccg.nhs.uk/>

**Email:** julie.poole@northlincs.gov.uk

# Agenda Item 9

Report of the: Director Public Health

Agenda Item: 9

Meeting 16 November 2020

## NORTH LINCOLNSHIRE COUNCIL

### HEALTH & WELLBEING BOARD

## COVID-19 OUTBREAK PREVENTION AND MANAGEMENT UPDATE

### 1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 Progress update against each of the 7 themes in the North Lincolnshire Outbreak Prevention & Management Plan
- 1.2 Key areas of focus for the outbreak prevention and management in North Lincolnshire for the forthcoming period
- 1.3 Outline of North Lincolnshire's position in relation to risk alert level and restrictions imposed

### 2.0 BACKGROUND INFORMATION

- 2.1 North Lincolnshire Council is committed to working with our local people to keep them safe, well, prosperous and connected. Successful prevention and management of local outbreaks is vital to break the chains of COVID- 19 transmission and enable people to return to and maintain a more normal way of life.
- 2.2 New national restrictions were introduced on 5 November 2020. These new measures will apply nationally for four weeks up to Wednesday 2 December. At the end of the period, the government will look to return to a regional approach based on the latest data. At the point of the national restrictions being introduced North Lincolnshire was in the alert level 'high' tier. Appendix 1 sets out the timeline of national/local restrictions and provides a high-level summary of each alert level.
- 2.3 North Lincolnshire Council is the lead organisation for local outbreak prevention and management, within a national framework and with the support of NHS Test and Trace, PHE and other government departments.
- 2.4 The North Lincolnshire Outbreak Prevention and Management Plan sets out our collaborative and preventive approach and we continue to monitor case data on a daily basis and target resources as appropriate to prevent and reduce transmission across the area. The plan is reviewed accordingly and appendix 2 details revised governance arrangements which reflects the changing operational practice.
- 2.5 **Progress update** - A summary of the progress made to date against each of the seven key themes in the North Lincolnshire Outbreak Prevention and Management Plan is given below  
**Page 53**

## **Care Homes**

- Cases of COVID-19 in care home settings are monitored daily, and outbreaks managed via the multi-agency Care Home Oversight Group.
- Care homes are being supported to maintain safe visiting in line with the national guidance. New national guidance for visiting arrangements in care homes for the period of national restrictions published 5 November 2020.
- Weekly email communication promoting relevant guidance and information.
- Timely distribution of the Infection Control Fund to care home providers.
- Care home providers have been supported to understand and implement the actions for providers from the winter plan for adult social care.
- The North Lincolnshire care home support plan has been updated and incorporates the additional requirements of the winter plan and published on our website [North Lincolnshire support for care homes](#).
- A North Lincolnshire Proud to Care North media and recruitment campaign launched in October 2020.

## **Education settings**

- All education settings across North Lincolnshire remain open
- An increasing number of enquiries are being received from educational settings, this has required additional resourcing to manage demand
- Briefings continue to be delivered to school leadership teams, including bespoke advice by the infection prevention & control nurse

## **High-risk workplaces, communities and locations**

- Pro-active preventative infection control advice and guidance is in place for most high-risk settings
- A number of local outbreaks have been successfully managed and a single system and process for responding to case notifications has been established
- A number of newsletters have been sent to businesses and regular communication in place

## **Local testing**

- Local testing capacity continues to improve
- A new walk-in (by appointment only) testing site has been set up in Scunthorpe (The Pods overflow car park)
- The testing site at the Humber Bridge extended until March 2021
- Additional deployment of swabs to schools has been actioned
- Mobile testing units (MTU's) have been deployed locally to support outbreaks

## **Contact tracing**

- Joint arrangement for a local Contact Tracing Service agreed with North East Lincolnshire Council. This service picks up the cases and contacts that the national Test & Trace service have been unable to contact within the first 24hrs.
- Programme board, agreed process and induction training is in place.
- Job descriptions and structure for contact tracing team has been agreed.
- Local contact tracing arrangements went live 11<sup>th</sup> November 2020.

## **Data integration**

- Soft intelligence is being collated and trend data on vulnerable groups is being analysed to inform targeted actions
- Revised data sharing agreement to secure access to CTAS/PHE has been signed off
- Case Management System is in place to manage notifications, IMTs and case management.
- Working with the public health intelligence team to add in the line list data to provide a more secure location for matching and analysis.
- Overall the CCM is providing a secure IG compliant location for Covid related data to person level.

## **Vulnerable people and diverse communities**

- Targeted communications are ongoing to promote compliance with self-isolation, social distancing and other preventative behaviours.
- A system has been launched for payment of grants for anybody required to self-isolate experiencing hardship
- Vulnerable groups have been surveyed locally regarding their experiences and barriers faced
- The MHCLG Shielding Self-assessment Tool has been completed and we are confident in the organisational readiness to stand up shielding if required
- The voluntary sector are also supporting with coordination of volunteers to help people in need

## **2.6 Next steps - Key areas of focus for the outbreak prevention and management in North Lincolnshire for the forthcoming months.**

### **Care Homes**

- Facilitate and encourage those who are eligible for a free flu vaccine to access one
- Care homes will be supported to carry out learning reviews after each outbreak
- Full implementation of Enhanced Care in Care Homes with a named clinical lead for each care home and multidisciplinary support

### **Education settings**

- Improvements are required to reporting arrangements to ensure notifications from settings to the local authority are clear, robust and accurate
- Complex care case management system to be launched providing clarity of information and level of outbreaks in settings so swift action can be taken as necessary

### **High-risk workplaces, communities and locations**

- An enhanced package of support for businesses/wider settings such as webinars, educational materials and regular communications in development
- Work has been done on a risk stratification ensuring that key workplaces, HMO's are monitored on a regular basis. Spatial analysis is being utilised to check COVID cases against mapped high-risk settings.

## **Local testing**

- Flexible swab capacity via mutual aid agreement with North Yorkshire to be utilized if required for special circumstances
- Secure an additional drive-in testing site for North Lincolnshire
- Plan implementation of mass testing using new rapid testing technologies, considering learning from Liverpool and other pilot sites, logistics, modelling impact, reviewing sensitivity and specificity of the new tests.

## **Contact tracing**

- Stop Go with PHE took place on 6 November 2020
- Go-live date 11 November 2020
- 22 staff have been trained to date.

## **Data integration**

- Continued development of the Complex Case Management System
- Dashboard to be used to identify clusters and where intervention is required will be developed
- Training is required on the system so line list analysis can be undertaken and documented

## **Vulnerable people and diverse communities**

- An integrated preventative approach is to be adopted to facilitate targeted communications and community approach to support prevention
- There will be continued consistent messaging and accessible in appropriate formats to all communities
- Free personal protective equipment (PPE) will be distributed to the providers of low level care/support not eligible for the national portal, when required until March 2021. This includes people who use direct payments to employ a personal assistant and housing providers where they carry out close contact support.

## **2.7 Update on risk alert level and restrictions**

- 2.7.1 At the end of the period of national restrictions, it is expected local authorities will return to a regional approach, based on the latest epidemiological data. In preparation for exiting this four-week period, it is essential that we continue to monitor local epidemiology to consider the impact of the new restrictions on the spread of COVID-19 across North Lincolnshire. In order to do this, we will be closely assessing a number of key measures published by Public Health England and the Joint Biosecurity Centre.
- 2.7.2 In conjunction with Public Health England and the Joint Biosecurity Centre the analysis of the data will be used to dynamically assess North Lincolnshire's epidemiological position against neighbouring authorities, regional authorities and the national comparisons. This will inform decision-making regarding the COVID alert level which North Lincolnshire would return to after the period of new national restrictions ends.

### **3.0 OPTIONS FOR CONSIDERATION**

- 3.1 The Health and Wellbeing Board is asked to consider the report and note the work undertaken to date by the Health Protection and Outbreak Management Group, and the planned next steps to ensure we prevent outbreaks of COVID-19 and respond effectively and early to emerging outbreaks.

### **4.0 ANALYSIS OF OPTIONS**

- 4.1 Successful prevention and management of local outbreaks is vital to break the chains of COVID-19 transmission and enable people to return to and maintain a more normal way of life.
- 4.2 The revised governance appendix streamlines the tiers of reporting established in June and removes duplication whilst conserving a line of sight to the lead cabinet member for health protection and establishes a more frequent reporting to and membership of the Health and Wellbeing Board.

### **5.0 FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**

- 5.1 Financial implications associated with the councils Covid-19 response and recovery are being monitored

### **6.0 OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**

- 6.1 Implications and risks associated with Covid-19 are being monitored constantly and mitigations being implemented as necessary.

### **7.0 OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

- 7.1 A council-wide approach to assessing the impact of Covid-19 has been adopted.

### **8.0 OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

- 8.1 Ongoing consultation with a range of partners and key stakeholders are integral to our local response to Covid-19.

### **9.0 RECOMMENDATIONS**

- 9.1 That the Health and Wellbeing Board notes the Outbreak Prevention and Management activity as outlined in the report.

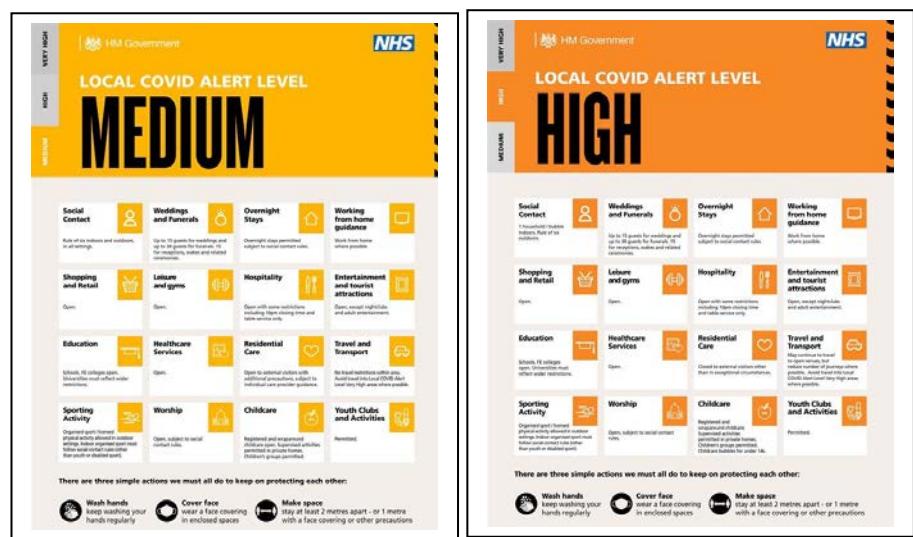
DIRECTOR OF PUBLIC HEALTH

North Lincolnshire  
DN15 6NR  
**Author:** Rachel Johnson/Jilla Burgess-Allen  
**Date:** 5 November 2020

## Appendix 1 – Timeline of National and Local Restrictions

### **12 October 2020**

- Three tiered local Covid Alert Level system introduced
- North Lincolnshire Council was initially placed into **MEDIUM** alert level



### **31 October 2020**

- North Lincolnshire Council was moved into **HIGH** alert level



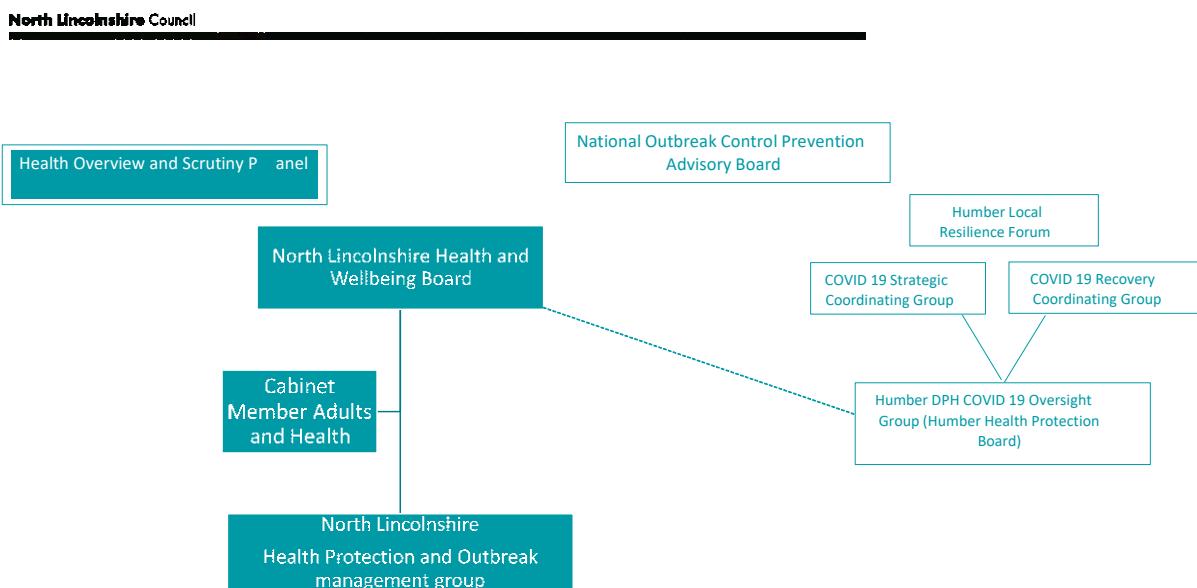
**5 November 2020**

National restrictions were introduced. These are due to expire on the 2 December 2020



## Appendix 2 – North Lincolnshire Council Local Outbreak Prevention and Control Governance Arrangements

This section describes the governance arrangements for overseeing the effective implementation and monitoring of outbreak control and prevention. The diagram below shows how North Lincolnshire works in concordat with current Humber-wide LRF. The Humber-wide COVID coordinating groups which report into North Lincolnshire's local executive arrangements. Information about the roles and responsibilities of North Lincolnshire's local executive arrangements are provided below:



## **Health and Wellbeing Board**

Health and Wellbeing Boards are a forum where leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities. Locally, the Health and Wellbeing Board is an integral part of the cycle of health protection action and has been designated as the 'LA COVID 19 Member-Led Engagement Board' as required in the Local Outbreak Plan governance structures.

The North Lincolnshire Health and Wellbeing Board is the member led, democratically accountable body, strategically placed to ensure and enable public engagement and communication in respect of the prevention of outbreaks and the response to local outbreaks. Members of the Health and Wellbeing Board include:

- Leader of the Council
- Deputy Leader of the Council
- Cabinet Member Children and Families
- Chief Executive North Lincolnshire Council
- Deputy Chief Executive North Lincolnshire Council
- Chair of NL Clinical Commissioning Group
- Accountable Officer, Clinical Commissioning Group
- Director Nursing and Quality, Clinical Commissioning Group
- Director of Public Health
- Director of Adults and Community Wellbeing
- Director of Children and Community Resilience
- Representative of NL Healthwatch
- Senior representation from: Humberside Police; Humberside Fire and Rescue; Northern Lincolnshire & Goole NHS Foundation Trust; Rotherham, Doncaster & South Humber NHS Foundation Trust; Public Health England and NHS England / NHS Improvement

## **Role of the Health and Wellbeing board in respect of COVID-19 Outbreak Management and Control**

- Provide strategic oversight of the place-based response to and ensures it is community focus and appropriately tailored to local circumstances.
- Agree a communications strategy and promote relevant community prevention messages
- To ensure that there is local interface with regional and national response through the Humber Local Resilience Forum arrangements.
- Monitor response to local outbreaks and ensure learning is taken into health protection cycle.
- Contribute to the wider system on policy work streams in respect of recovery and renewal.
- Have an overview on the allocation of resources in respect of outbreak management and control for effective implementation of the delivery plan.

The **Director of Public Health** has primary responsibility for the health of their communities, including being assured that the arrangements to protect the health of the communities they serve are robust and implemented. This is achieved through the DPH leadership in the health protection and outbreak control management group. The Director of Public Health will provide updates in respect of COVID-19 epidemiology and progress against the North Lincolnshire Outbreak Management and Control delivery plan to the Deputy Leader who has delegated responsibility for Public Health

Protection functions including outbreak planning and control (including Covid-19).

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# Agenda Item 10

Report of the Director of Children and Community Resilience

Agenda Item No: 10  
Meeting: 16 November 2020

## NORTH LINCOLNSHIRE COUNCIL

### HEALTH AND WELLBEING BOARD

#### Annual Review of Local Arrangements to safeguard and promote the welfare of children and young people 2019/20

##### 1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 Health and Wellbeing Board to note the publication of the Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2019/20 and to consider the review in relation to planning, commissioning and budget setting. The report demonstrates that the Children's Multi Agency Resilience and Safeguarding (MARS) Local Arrangements:
- effectively meets statutory obligations
  - is effective in providing help and protection to children
  - benefits from strong and consistent leadership
  - has made good progress against its areas of focus
  - listens and responds to the voices of children and young people
  - has swiftly and confidently responded to the challenges posed by COVID-19

##### 2. BACKGROUND INFORMATION

- 2.1 In North Lincolnshire, children, young people, families and communities are at the heart of what we do and across the partnership. We are aspirational and committed to improving outcomes for children, so they can achieve their potential and be in their families, in their schools and in their communities. Through our Children's MARS Local Arrangements, we want to effectively help and protect children and families across the early help and safeguarding system.
- 2.2 As early adopters of the new multi-agency safeguarding arrangements, we initially published our local arrangements in October 2018. We have continued to listen, learn, review and adapt and our local arrangements were republished in June 2019 and subsequently in September 2020.
- 2.3 As per Working Together to Safeguard Children 2018, there is a statutory requirement to publish an annual report, which sets out what has been done as a result of our local arrangements and how effective these arrangements have been in practice. The 2019/20 annual report has been endorsed by the Children's MARS Board on behalf of the three safeguarding partners from North Lincolnshire Council, North Lincolnshire Clinical Commissioning Group and Humberside Police. The annual report is then required to be distributed through relevant governance routes across the three safeguarding partner organisations and relevant partnership arrangements also to be considered in relation to planning, commissioning and budget setting.

- 2.4 The annual report provides a review of activity and impacts in respect of Children's MARS functions, including funding, performance, voice and stakeholder engagement, training, scrutiny and assurance and child safeguarding practice reviews.
- 2.5 The annual report outlines developments and progress relating to our initial intents and it also clarifies the three areas of focus and outlines activities and impacts made in order to reduce the harm from child exploitation, domestic abuse and neglect.
- 2.6 The annual report also acknowledges the Children's MARS Board line of sight and assurance pertaining COVID-19 and summarises our local response.
- 2.7 Key activities, impacts and achievements highlighted in the annual report include:
- Shared vision, culture and commitment to delivering the local arrangements underpinned by a delivery plan
  - Continued to have strong leadership through the Children's MARS Board and a good line of sight to front line multi-agency practice and the quality of services that support children, young people and families
  - Specific functions remain allocated to individual safeguarding partners as portfolio areas to drive implementation
  - Efficient board arrangements with shared chairpersonship, core membership and active, engaged discussions and decision making
  - Ongoing development and implementation of our robust scrutiny and assurance framework, including independent scrutiny, through thematic and agency specific assurance events and practice learning line of sight events leading to changes in practice
  - Strategic thinking and developmental discussions to progress the development of a joint self-assessment and assurance process across the Children's MARS Board and Safeguarding Adults Board
  - Ongoing and renewed focus on engaging with and listening to children, young people and families to understand their views and experiences
  - Significantly enhanced communications through the Children's MARS website and @SafeNorthLincs social media platforms as a means of sharing information and communication and publicising key documents and resources
  - Ongoing education and learning offer, including face to face and e-learning, and a learning event at which more than 180 staff across the partnership attended pertaining female genital mutilation, forced marriage and honour-based abuse
  - Reviewed and reconfigured partnership arrangements to ensure more cohesive oversight of the whole early help and safeguarding system
  - Recruited a small pool of Independent Scrutiny Officers with a breadth of skills, knowledge and experience and range of expertise across health, children's social care and police work and flexibility to fulfil the range of independent scrutiny functions

## 2.8 PROGRESS AGAINST PRIORITIES

There has been significant partnership action pertaining the three areas of focus which has impacted on children, young people and families. Examples of impacts include:

### 2.8.1 Reduce the harm from child exploitation

- Multi Agency Child Exploitation (MACE) meetings evidence impact on reducing levels of risk to children and young people through risk management plans that supplement statutory child in need or child protection plans

- Significant partnership disruption activity has been undertaken with suspected perpetrators and specific locations targeted which has contributed to the reduction in risk to children and young people
- Pathways of support for children who go missing include local therapeutic support from Changing Lives through Changing Minds who work closely with the partnership
- Positive feedback from children and their families includes them saying they feel safe and that they have positive, trusting relationships with their workers
- Young people's views have enhanced the understanding of the local picture of child exploitation and shaped practice and services to prevent, support and protect children
- Varied approaches including group work and immersive positive activities with young people vulnerable to, at risk from or who have experienced child sexual exploitation and child criminal exploitation has seen an increase in engagement, self-esteem and safety

#### **2.8.2 Reduce the harm from domestic abuse**

- Multi Agency Risk Assessment Conference (MARAC) Steering Group being held as part of the Domestic Abuse Strategy Group has increased shared ownership and reduced duplication
- Children's Independent Domestic Violence Advisor (IDVA) has provided help and support to young people across the early help and safeguarding pathway to enable recovery from the impact of domestic abuse
- The Harmful Sexual Behaviour panel has continued to provide a holistic change programme for young people
- Evidence of good practice and learning from the Practice Learning Line of Sight event on children living with domestic abuse
- Positive impacts on practice as a result of multi-agency training pertaining honour-based abuse, forced marriage and female genital mutilation and Reducing Parental Conflict
- Awareness raising and preventative approaches for children and young people including through schools, colleges and locally developed resources (Life Central app and Not In Our Community social media campaign)
- Multi Agency Tasking and Co-ordination (MATAC) meetings and the Re:Form non-convicted perpetrator programme have increased the likelihood of improving the safety of victims of domestic abuse and their children alongside the potential for reducing the risk of harm from domestic abuse
- Helping to prepare schools, colleges and alternative providers for the forthcoming Relationships and Sex Education and Health Education has provided opportunities for them to remain appraised of the changes, plan ahead of the statutory implementation date and schools are now implementing the new curriculum
- The domestic abuse profile has increased understanding of areas of greatest and emerging need to enable a strategic focus
- Partnership working is leading to expansion of safe accommodation options for victims of domestic abuse with complex issues and their children through intensified support

#### **2.8.3 Reduce the harm from neglect**

- Co-working on Graded Care Profile 2 (GCP2) assessments has built practitioner confidence and increased the use of the tool
- Outcomes of the GCP2 and areas of intervention are being integrated into children's plans

- Case examples have illustrated where the tool has been used effectively to enable parents to make changes resulting in both child protection planning and Public Law Outline ending
- Practitioners' feedback from the training has indicated that the tool has allowed them to consider the individual experiences of each family member and the lived experiences of the child
- Three workers from North Lincolnshire, from the Clinical Commissioning Group, FaSST targeted family support service and the Integrated Multi-Agency Partnership were nominated for an NSPCC Elephant Award for their work in promoting the GCP2 across the multi-agency partnership and attended the awards ceremony in January. At the event, two of the nominees won awards
- The use of the tool is gradually increasing and there have been some positive experiences reported from practitioners and families when the tool has been used. Both practitioners and parents have commented upon the benefit of the visual nature of the tool which has helped to identify where there are strengths in parenting and also the areas of priority to work upon

## **2.9 AREAS OF FOCUS FOR 2020/21**

- 2.9.1 Safeguarding partners and relevant agencies will continue to listen, learn, review and adapt in order to ensure the local Children's MARS arrangements best meet the needs of the children, young people and families in North Lincolnshire, so they are resilient and safeguarded.
- 2.9.2 Safeguarding partners will continue to deliver the core functions and ensure that effective safeguarding arrangements are in place. The areas of focus in which the Children's MARS Board wish to 'shine a light' on and to maintain oversight of to ensure focused partnership action, system change and robust practice are to:
- Further develop the multi-agency Contextual Safeguarding Approach and work with adolescents and their families
  - Continue to respond to COVID-19 and emerging harm across the early help and safeguarding system
- 2.9.3 In addition, there are also some areas of focus in which the Children's MARS Board will maintain a 'line of sight' of in order to seek assurance, challenge, shape and influence partnership action and system change which are the responsibility of other partnership and planning frameworks, as follows:
- Emotional Health and Wellbeing
  - Domestic Abuse

## **3. OPTIONS FOR CONSIDERATION**

- 3.1 To receive the Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2019/20.

## **4. ANALYSIS OF OPTIONS**

- 4.1 None, for information only.

## **5. FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**

- 5.1 None, for information only.

**6. OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**

6.1 None, for information only.

**7. OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

7.1 Not applicable.

**8. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

8.1 There has been a range of consultation with safeguarding partners, relevant agencies and children, young people and families as part of the development and implementation of the local arrangements. There will be further engagement opportunities as we continue to listen, learn, adapt and review.

**9. RECOMMENDATIONS**

9.1 To receive the Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2019/20 and consider this where relevant in relation to planning, commissioning and budgets setting processes.

**DIRECTOR OF CHILDREN AND COMMUNITY RESILIENCE**

Church Square House

30 to 40 High Street

Scunthorpe

DN15 6NL

Author: Julie Poole, Strategic Board Development Co-ordinator

Date: October 2020

**Background Papers used in the preparation of this report:**

[Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2019/20](#)

# Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people

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# Welcome and Introduction

Welcome to our **Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2019/20**

In North Lincolnshire, children, young people, families and communities are at the heart of what we do and we are proud to acknowledge and celebrate the positive outcomes achieved and the strength of partnership working.

Across the partnership, we are aspirational and committed to improving outcomes for children, so they can achieve their potential and be in their families, in their schools and in their communities. Through our Children's Multi-Agency Safeguarding and Resilience (MARS) Local Arrangements, we want to help and protect children and families including promoting resilience and early help which we believe are fundamental to a successful safeguarding system.

We have high expectations of ourselves as partners to deliver outcomes through integrated working and we have a culture of high challenge and high support which is indicative of our robust, longstanding and creative partnership arrangements.

To provide assurance and ensure transparency we remain committed to independently scrutinising how effectively the local arrangements are working for children and families as well as for practitioners, and how well we, the safeguarding partners, are providing strong leadership. We would like to thank Edwina Harrison as the Independent Scrutiny Officer leading on the annual scrutiny of our local arrangements and Dave Basker as Independent Scrutiny Officer for leading on case specific scrutiny activity, and for their constructive evaluations and areas for consideration on how to drive continuous improvements.

This report is an excellent opportunity to acknowledge the work across the partnership, to reflect on how we have embedded and refined our local arrangements and the critical success factors. Our strong partnerships, clear processes and robust practice across the early help and safeguarding system have enabled us to continue to safeguard and promote the welfare of children, young people and families, including in changing circumstances through our response to the COVID-19 pandemic.

This report fulfils our statutory responsibility to publish a report at least once in every 12 month period and sets out what we have done as a result of our local arrangements, including on child safeguarding practice reviews, and how effective these arrangements have been in practice.

In addition, the report also includes:

- evidence of the impact of the work of safeguarding partners and relevant agencies, including multi-agency education and training, on outcomes for children and families across the early help and safeguarding system
- an analysis of progress against our areas of focus
- reference to our responses to any local or national child safeguarding reviews
- ways in which we have engaged with children and families and how this has informed practice and local provision

This report also identifies how we have refined our local arrangements, specifically:

- reviewed our five intents which are included in this report. They are now explicit within our principles so that they act as a launchpad to drive forward the partnership for the next few years
- reconfigured our infrastructure to manage and support the Children's MARS Arrangements
- refreshed our partnership framework by combining the Early Help Strategic Leads Group and the Safeguarding Pathway Lead Officer Group
- ~~and~~ included the Lead Member for Children and Families as a participatory observer within partnership arrangements

We are committed to a culture of listening, learning, reviewing and adapting and this is reinforced through our republished arrangements, our learning and improvement culture that is welcoming of improvements and innovations and the multi-agency practice developments and service transformation that continue to evolve.

We are building on our outstanding partnerships and practice to ensure that everyone is able to recognise and fulfil their responsibilities including through anti oppressive and anti racist practice. We continue to focus on making sure that our children, young people and families are at the centre of the early help and safeguarding system. This is set within the context of our One Family Approach which aims to create a system that works for all children, young people and families. Our ambition is for children to be **in their family, in their school and in their community** and we will prioritise those who have additional need, to reduce inequalities and improve outcomes for all children and families, taking account of ethnicity, race and religion and those with specific additional vulnerabilities.



**Mick Gibbs**

Director of Children and  
Community Resilience  
North Lincolnshire  
Council



**Clare Linley**

Director of Nursing  
and Quality North  
Lincolnshire  
Clinical Commissioning  
Group



**Darren Wildbore**

Chief Superintendent  
South Bank Divisional  
Commander  
Humberside Police

## Key Highlights and Successes

Over the last year, there have been a range of key activities, impacts and achievements for example:

- Shared vision, culture and commitment to delivering the local arrangements underpinned by a delivery plan
- Continued to have strong leadership through the Children's MARS Board and a good line of sight to front line multi-agency practice and the quality of services that support children, young people and families
- Specific functions remain allocated to individual safeguarding partners as portfolio areas to drive implementation
- Efficient board arrangements with shared chairpersonship, core membership and active, engaged discussions and decision making

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Ongoing development and implementation of our robust scrutiny and assurance framework, including independent scrutiny, through thematic and agency specific assurance events and practice learning line of sight events leading to changes in practice

- Strategic thinking and developmental discussions to progress the development of a joint self assessment and assurance process across the Children's MARS Board and Safeguarding Adults Board
- Ongoing and renewed focus on engaging with and listening to children, young people and families to understand their views and experiences
- Significantly enhanced communications through the Children's MARS website and @SafeNorthLincs social media platforms as a means of sharing information and communication and publicising key documents and resources
- Ongoing education and learning offer, including face to face and e-learning, and a learning event at which more than 180 staff across the partnership attended pertaining female genital mutilation, forced marriage and honour based abuse
- Reviewed and reconfigured partnership arrangements to ensure more cohesive oversight of the whole early help and safeguarding system
- Recruited a small pool of Independent Scrutiny Officers with a breadth of skills, knowledge and experience and range of expertise across health, children's social care and police work and flexibility to fulfil the range of independent scrutiny functions

# Independent Scrutiny of the Children's MARS Local Arrangements

As part of our commitment to listen, learn, review and adapt and to ensure that we are fulfilling our responsibilities under Working Together to Safeguard Children 2018, our local arrangements have been independently scrutinised in July 2020. The Independent Scrutiny Officer indicated that the recommendations from last year have all been fully considered and implemented where appropriate. This year's independent scrutiny of our local arrangements included:

- desktop research/prior reading of Children's MARS Board, sub groups and other records
- facilitation of a multi-agency practitioner and supervisor forum
- met with key officers who manage and support the Children's MARS Board
- observation of the Children's MARS Board

Feedback from **Edwina Harrison, the Independent Scrutiny Officer** is highlighted below.

## Strengths

- Evidence of equal and joint, consistent, creative and committed leadership continues
- The recommendations from last year have all been fully considered and implemented where appropriate and the changes have been noticed by practitioners
- The Children's MARS arrangements are effective in providing help and protection to children
- As a result of the joint work on the priorities which have been agreed, children in North Lincolnshire report that they experience a positive difference in their lives
- Practitioners are well informed as a result of the priority which is given to communication and training/development
- Independent Scrutiny is strong and underpins quality assurance activities as demonstrated in the Scrutiny and Assurance Framework
- There has been a swift and confident response to the challenges posed by COVID-19

## Areas for Consideration

- Clarify the role and function of the Subject Matter Experts to ensure that they are representative of the key partners in the first instance
- Review the current Communication Strategy which includes the role of the CMARS News update
- Bring together the findings from listening to children across the agencies into one coherent document which can inform the Scrutiny and Assurance Planner
- Given that the response to COVID-19 has been so positive, ensure that the learning is referred to explicitly in planning for the future
- Develop a financial strategy for the next three years which anticipates the longer-term impact of COVID-19 and the potential risks and mitigations

## Governance

The key roles and functions for the Board, are detailed in the [Terms of Reference](#) and the responsibilities are detailed in the Children's MARS Local Arrangements and underpinning [Memorandum of Understanding](#).

There continues to be collaborative working between the three safeguarding partners to ensure an equal and robust partnership. As part of this, there is a rotating chair agreement across the three safeguarding partners and between April 2019 and March 2020, the Chief Superintendent, Humberside Police was the chair of the Children's MARS Board. The key functions are led by individual safeguarding partners through 'portfolio areas'. To monitor progress and drive forward creativity and innovation, each of the safeguarding partners have taken a lead responsibility for the portfolio areas as follows:

Chief Superintendent, Humberside Police:

- Funding
- Performance

Director of Children and Community Resilience, North Lincolnshire Council:

- Voice, engagement and stakeholder partnership
- Child safeguarding practice review process

Director of Nursing and Quality, North Lincolnshire Clinical Commissioning Group:

- Multi-agency education and training
- Scrutiny and assurance

Progress against the 2019/20 delivery plan has now been finalised.

Any remaining actions and new actions have been rationalised into the 2020/21 delivery plan.

This is a working plan and will change in year in order to be proactive and responsive to required action and drive forward innovation and creativity leading to improved outcomes.

## Performance Framework

The Children's MARS Board has a comprehensive performance management framework in place.

**A Quarterly Performance and Evaluation Report is routinely available for every Board meeting** which includes partnership information of activity, performance and trend data across:

- Early Help
- Safeguarding Pathway
- Areas of Focus – child exploitation, domestic abuse and neglect
- Other Areas for Consideration – covering exceptions or emerging issues
- Learning and Improvement activity and multi-agency education and training

A summary analysis is completed by the Chairs of the subgroups highlighting to the Board strengths, achievements, impact and outcomes also areas for learning and development.

More detailed data sets and performance reports are produced for the Children's MARS sub groups.

*Note - figures provided in this report are as accurate as possible at the time that this report is published yet it needs to be acknowledged that the figures may slightly change upon publication by the relevant government department*

# Partnerships

## Early Help Strategic Leads Group

This group specifically brings together lead officers to lead, champion, implement and oversee the Early Help offer in line with the organisational model, within the Children and Families (Threshold Document 2016/20) that covers agencies statutory functions to deliver early help

### Examples of Key Activities, Developments and Successes:

- Reviewed the governance relating to the early help and protection pathways and developed, alongside partners, a new Children's Help and Protection Pathway (CHaPP) forum for lead officers, joining together the previous Early Help Strategic Leads Group and Safeguarding pathway Lead Officer Group to ensure a more joined up oversight of the entire early help and safeguarding system.
- Integrated the FaSST (targeted family support) and children's centre offer to provide a more joined up local family support offer, using a more enabling model of help that builds upon the strong relationships and reputation of both services within local communities.
- Continued to extend the availability of digital and locality based resources which are available to children and families in their own communities and at times when they require them. This has included an increasing focus on the community hubs and children's centre offer as 'whole family' resources and development of more online and digital solutions based upon ensuring consistent high quality information, advice and guidance which is available 24 hours a day, 7 days a week.
- Working together across agencies more closely from a locality perspective has led to a more integrated approach to identifying vulnerable families needing early help, who may be less visible to services.
- A Family Solutions approach with families is embedded across services to enable families to identify support within their own networks, build their own resilience and create their own solutions within their own networks and communities. This emphasis will grow as the One Family Approach is agreed and rolled out across the partnership.
- The Families Initiative (TFI) outcomes framework has been embedded across North Lincolnshire in order to develop a whole family approach by services working with children and families. This aims to ensure that everyone within the family is able to receive the help that they need, at the lowest level of service, enabling them to achieve positive outcomes, live happy and healthy lives and access employment and training opportunities, thus building their own capacity and resilience to become independent of services.
- Continued focus upon supporting the emotional wellbeing and mental health of children, young people and their parents at a universal level. This has included the commissioning of the Kooth web based support service for young people and the further development of the Infant Mental Health Alliance between the council, NLaG and RDASH to develop an infant mental health strategy and pathway for children pre-birth to three years to support peri-natal, ante-natal and post- natal mental health for families.
- Worked with partners at a regional and local level to cascade multi-agency training, develop a web based resource for professionals and families and implement a 'Reducing Parental Conflict' pathway providing help and resources to parents to enable them to manage family conflict in a constructive way at an early stage of difficulties arising.
- Continued to strengthen the role of the Intensive Family Support Service to provide targeted support to those families requiring an intensive period of help to enable them to provide the best level of care to their children, prevent family breakdown and enable children and young people to remain, or quickly return to, living with their own family.

# Partnerships

We know how our early help system makes a difference to children, young people and families in North Lincolnshire

Based on 2019/20 figures, growing up in North Lincolnshire, children and young people:

## 1 - Have their health checks undertaken by a Health Visitor in a timely manner

- 88% of babies were seen by their health visitor between the ages of 6 and 8 weeks compared with 84% across England
- 97% of babies were seen by their health visitor for a 12 month review compared with 82% across England.
- 93% of children received a development check at the age of 2 – 2.5 years compared with 90% across England
- 88% of 2-2.5 year olds met or exceeded healthy standards in all 5 areas of their development

## 3 - Achieve positive outcomes whilst living within their own families

- During the 4 years from April 2016 to March 2020, 852 families have been supported to achieve positive outcomes against The Families Initiative criteria including improvements in their health, a reduction in crime and anti-social behaviour, improvements in parenting capacity, a reduction in incidents of domestic abuse and increased employment and access to education and training

## 5 – Remain living within their own family and community

- The number of children entering care has reduced by 59% between 2018/19 and 2019/20

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## 2 - Receive support early on if they need help and be less likely to need a statutory Social Work service

- The number of referrals to Social Work services has continued to decrease whilst those families receiving targeted help has increased
- Targeted family support from FaSST and children's centres results in effective help for families, evidenced through feedback and data showing that 91% of FaSST cases were stepped down successfully to universal services
- All registered child care providers that have been inspected in the private and voluntary sector are now rated as Good or Outstanding, giving the best start to our children's education
- More children with a special educational need or disability have their Education, Health and Care Plans issued within the 20 week assessment period. This is 68.6% in North Lincolnshire compared with 60.4% nationally

## 4 – Stay out of the youth justice system

- The number of children entering the youth justice system as 'First Time Entrants' is consistently low in North Lincolnshire demonstrating the success and effectiveness of the preventative approach. In 2018/19 this figure was 195/100,000 (31 young people). This compares with an England rate of 224
- During 2019/20 there have been 27 first time entrants, giving a rate of 170/100,000

*"Father feels that the support provided has changed his life and allowed the family to live a normal life. He says thank you for all help given to them"*

*Young person whose family experiencing early help support/services*

*"Thank you for your help with regards to my child's heightened anxiety and violence. Knowing I can speak to you on the phone for advice means so much and helps and supports my worries and frustration too"*

*Family member experiencing early help support/services*

*"Want to thank you for being on board and supporting us. You can tell when someone is being genuine and caring and we can tell that you are. We are really appreciative all of the help you are giving us. You are warm and lovely and we can tell that you care. We have really been pushed to our limits and it's so refreshing having someone like you who's willing to take the time to support us"*

*Family member experiencing early help support/services*

## **What young people and families are saying...**

# Partnerships

## Safeguarding Pathway Lead Officers Group

This Safeguarding Pathway Lead Officers Group (SPLOG) brings together lead officers with responsibilities for oversight and quality assurance of multi-agency working within the 'safeguarding pathway' for children between early help services and statutory safeguarding processes.



Specifically, the group oversees and quality assures:

- The interface between early help and the Integrated Multi-Agency Partnership (IMAP)
- multi-agency working and decision-making within IMAP
- The quality of multi-agency assessments
- The effectiveness and timeliness of multi-agency help and protection

There is a focus upon the experience, progress, and views of children, young people, and their families throughout.

## Examples of key activities, developments and successes:

- The voice of children and young people is at the centre of all we do and there is evidence of engagement at every level.
- Partnership working is strong and founded on longstanding relationships based upon trust, high challenge and high support.
- Good performance in relation to areas of practice such as multi-agency contribution to strategy discussions and attendance at child protection conferences.
- Partners have a strengthened understanding of populations, performance and practice.
- Multi-Agency Audit Group audits and quality assurance of practice demonstrates a shared understanding of thresholds and that multi-agency practice is effective and timely, and that help leads to progress for children.
- Strong partnership commitment to creative and dynamic practice and doing the right thing for children to prevent them entering care, offending, being exploited or being involved in serious violence.
- Partnership Interface meetings are now embedded to focus on multi-agency practice development to feed into the SPLOG.

# Partnerships

We know how our safeguarding pathway makes a difference to children in need of help and protection

Based on 2019/20 figures, growing up in North Lincolnshire, children and young people:

Children in North Lincolnshire who are in need of help and protection make good progress and are supported to live safely within their family networks

- The number of children entering care decreased during the year 2019/20 when compared to the previous year
- 77% of our children in care are placed in foster care which is above the latest England average of 72%
- 19% of our children in care are placed out of area compared to the latest England average of 41%

**Safeguarding issues are identified quickly and responded to robustly by agencies working together**

At the end of 2019/20:

- Repeat contacts were 16.4% compared to the England average of 22.6%
- Re-referrals were 20% compared to the England average of 22.6%
- 92% of assessments were completed and authorised within 45 days remaining consistently high compared with the latest England average of 83%
- The rate of children in need in North Lincolnshire is less than nationally at 281 per 10,000 children at the end of March 2020 compared with 334 across England
- 100% of child protection conferences were held within 15 days of the strategy discussion
- 100% of child protection review conferences were held within timescale
- There are less children on a Child Protection Plan in North Lincolnshire with a rate of 20 per 10,000 children at the end of 2020 compared with 44 per 10,000 nationally
- Very few children remained on a child protection plan for over 2 years

# Partnerships

## Safeguarding Practice Learning and Improvement Group

The Safeguarding Learning and Improvement Group (SPLIG) focuses on:

- co-ordinating the outcomes from local multi-agency scrutiny and assurance activity
- reviewing, monitoring and implementing areas for development from local multi-agency scrutiny and assurance activity to ensure the Children's MARS arrangements positively impact on the shared commitment towards continuous improvements to front line practice
- the learning from local and national child safeguarding practice reviews, other national reports and research to develop local practice
- ensuring the dissemination of learning from local scrutiny and assurance activity, and from local and national practice reviews, reports and research to enhance local practice

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## Examples of Key Activities, Developments and Successes:

- Overseen the development and implementation of the children living with domestic abuse, children living with mental ill health and child sexual and criminal exploitation Practice Learning Line of Sight action plans.
- Developed and shared 7-minute briefings in relation to Practice Learning Line of Sight Events to feedback good practice, learning and boost practitioners and supervisors to reflect on their practice and the early help and safeguarding system in which they work
- Trained key professionals across the partnership about the notification and decision-making process for undertaking rapid reviews and child safeguarding practice reviews including Designated Safeguarding Leads for schools, colleges and alternative education providers
- Developed a learning and improvement evaluation framework to provide an overall picture of activity and impact to the Children's MARS Board
- Completed an evaluation of agencies training across the partnership to underpin the revised Children's MARS Education and Training Programme for 2020/21
- Considered the key practice themes and messages from the Child Safeguarding Practice Review Panel's Annual Report 2018/19 and local implications

*Further detail regarding scrutiny and assurance activity, impact and outcomes is referenced in slides 27 to 31*

# Learning and Improvement

## Child Safeguarding Practice Reviews

The Children's MARS Board / safeguarding partners have not been notified of any serious child safeguarding incidents during the period of this annual report.

### Learning from national Child Safeguarding Practice Review Panel reports:

We have taken account of learning from review activity led by the national Child Safeguarding Review Panel, including:

- The Child Safeguarding Practice Review Panel outlined local learning points in their report '**It was hard to escape: Safeguarding children at risk from criminal exploitation**', March 2020 and the Child Exploitation and Missing Strategy Group has considered these feeding actions into the CCE and Missing Action Plan as required

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## Child Death Reviews

The child death review partners who are North Lincolnshire Council and North Lincolnshire Clinical Commissioning Group published the Northern Lincolnshire Child Death Review Arrangements in June 2019. The Child Death Review Arrangements can be found on the [North Lincolnshire CCG website](#) or the [North Lincolnshire Council website](#).

The child death review partners have established a Northern Lincolnshire Child Death Review Partners Executive Board which meets on a quarterly basis to oversee the effectiveness of the Child Death Review Arrangements in practice, agrees and monitors the funding in accordance with their statutory requirements, seeks and receives assurance on the learning and improvement activity undertaken in the locality in response to the arrangements and receives and approves the Annual Report.

The Child Death Review Arrangements are linked with the Children's MARS Board policies and procedures for notification of a serious child safeguarding incident and the process for a Child Safeguarding Practice Review. As outlined above there have been no notifications of any serious child safeguarding incidents during the period of this annual report.

There were no actual child deaths or child deaths reviewed during 2019/20 that were related to safeguarding issues.

# Learning and Improvement

## Multi-Agency Education and Training

The Children's MARS Education and Training Programme remains extensive and offers a wide range of courses associated with safeguarding at different levels using various training methods to ensure accessibility to diverse groups including professionals, carers and voluntary and community agencies (including e-learning, workbooks, face to face training and bespoke packages).

During 2019/20 there were 992 people trained through the education and training programme. Highlights include:

- over 180 professionals trained in Honour Based Abuse, Forced Marriage and Female Genital Mutilation at a large training event held in January 2020 with national keynote speakers. Attendees included a total of 28 different agencies and 21 different teams from within North Lincolnshire Council
- 138 multi-agency staff trained in Reducing Parental Conflict including additional modules for supervisors and 15 staff trained as trainers
- 84 multi-agency staff trained in the use of the Graded Care Profile 2 (GCP2) neglect assessment tool by local NSPCC accredited trainers
- almost 300 workbooks were certified by the Children's MARS Board for Safeguarding Awareness, Child Sexual Abuse and Female Genital Mutilation. A number of these were completed by 'Parent Champion' volunteers for North Lincolnshire Council and young people attending North Lindsey College

Based on feedback and evaluation, training remained of a high quality, delivered by knowledgeable and engaging trainers with examples of positive impacts on practice such as enhanced knowledge and skills to engage, assess, plan and work directly with children, young people and families.

Positive feedback included:

- 'The FGM trainer was very knowledgeable and inspiring. I felt the documentary on forced marriage and honour based abuse was very effective and really captured the issue from the perspective of a victim' (Female Genital Mutilation)
- 'Prepared me for the eventuality I get a call for service to deal with a victim and can be knowledgeable and provide reassurances' (Honour Based Abuse and Forced Marriage)
- 'It has given me an insight into how children/parents may think and made me think about my approach when doing early help assessment e.g. Creative thinking' (Neglect and Graded Care Profile 2)
- 'It was beneficial being on the course with a cross section of professionals and this helped understand and acknowledge other perspectives and viewpoints (Child Protection)
- 'The vast knowledge and experience of learning co-ordinators/trainers was invaluable' (Child Protection)

## Funding

Safeguarding partners have a shared ownership of funding responsibilities and they have agreed equitable and proportionate contributions to ensure the implementation of the Children's MARS arrangements. These consist of actual funding and in kind resources, for example representatives from safeguarding partner organisations contribute to the development and delivery of the education and training programme. In addition, each of the safeguarding partners have agreed that key subject matter experts from their organisations will lead specific pieces of work to progress the areas of focus, strategies and action plans.

In the event of a safeguarding practice review, it has been agreed that funding will be met by the three safeguarding partners and where necessary, each partner will contribute equitable and proportionate funding over and above the normal allocation in order to fulfil the costs of any review.

Funding from wider individual agencies has continued for 2019/20 and 2020/21 (including from the National Probation Service, Community Rehabilitation Company, John Leggott College and North Lindsey College).

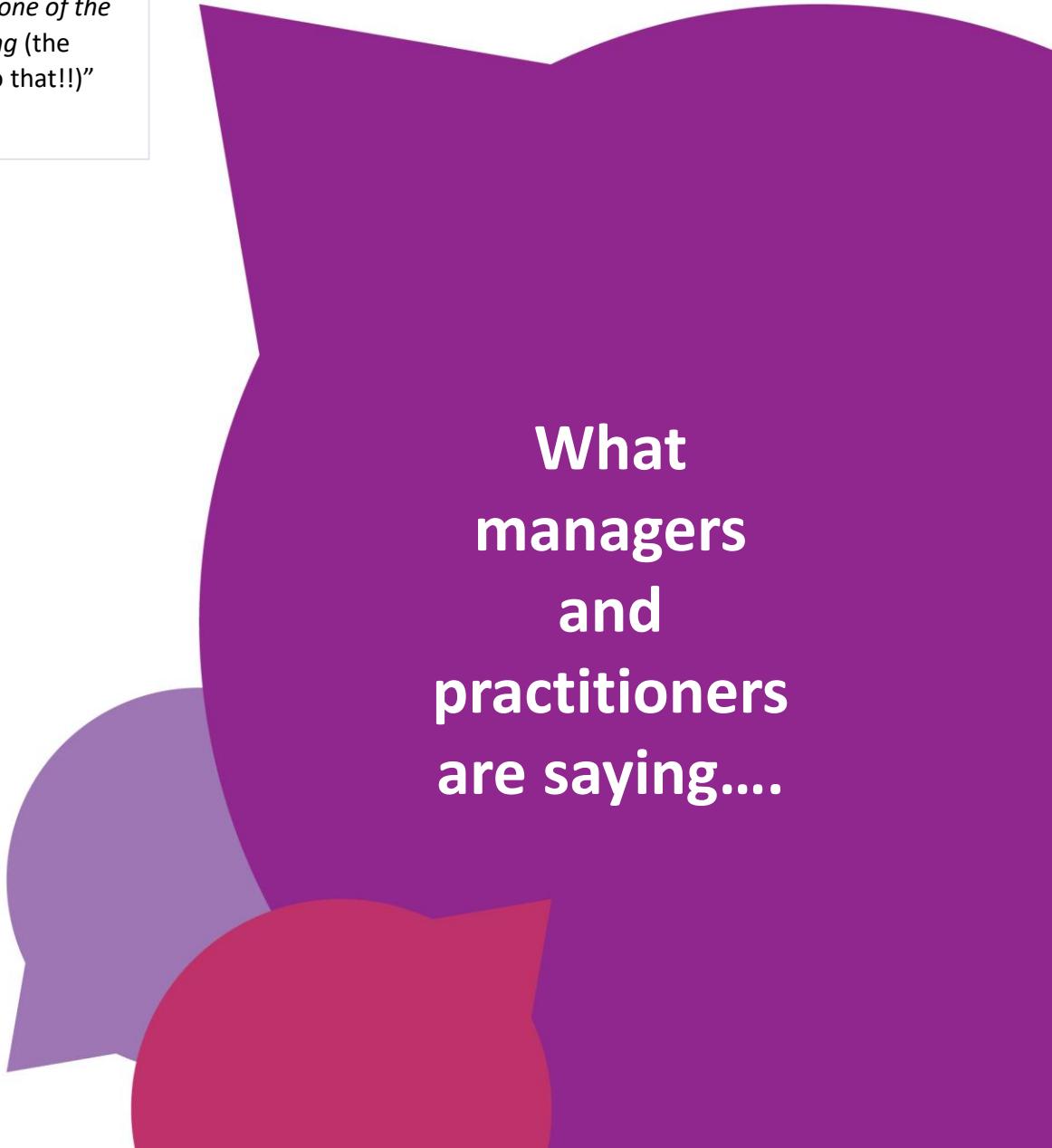
## Communication

There is a commitment to communicating across the safeguarding partner organisations and other agencies. The [Children's MARS website](#) is central to our communications approach and has been refreshed to include a bank of resources for professionals to use. Live feeds of our Facebook and Twitter accounts have been added to the website to ensure live and responsive communications are available to a wider range of professionals.

There has been a consistent presence on [Safe North Lincs](#) social media feeds which has led to an increase in the number of followers and has allowed key messages to be shared across North Lincolnshire. Links have been established with the Community Safety Partnership South Bank Communications Group which includes key communications representatives from across the partnership at a regional level. This has created opportunities to collaborate on a multi-agency basis to share messages and reach a wider and more diverse audience.

We have connected the Facebook and Twitter Feeds with the Children's MARS Board website and regular email communications alert practitioners to what is new and available. An electronic mechanism for practitioners to sign up to receive communications from the Children's MARS Board has been implemented as part of this and is utilised by practitioners on a regular basis.

[Children's MARS news updates](#) continue to be used to communicate information and messages relating to the Children's MARS arrangements to key stakeholders. Areas of multi-agency practice has been incorporated into the refreshed news updates to share good practice and learning across the partnership. The appearance and format has been refreshed to ensure the newsletter is concise and engaging to readers.



*"I've worked alongside a number of local authorities during my career and I honestly think that North Lincolnshire is one of the best in terms of safeguarding and partnership working (the number of attendees at the meetings is testament to that!!)"*

Representative from a relevant agency

*"The Practice Learning Line of Sight events are positive in that they allow practitioners and managers to have healthy conversations. Sometimes conversation can be difficult but it is beneficial to be able to see differing perspectives. North Lincolnshire has a culture where professionals can have difficult conversations to make positive steps and reflect upon the learning"*

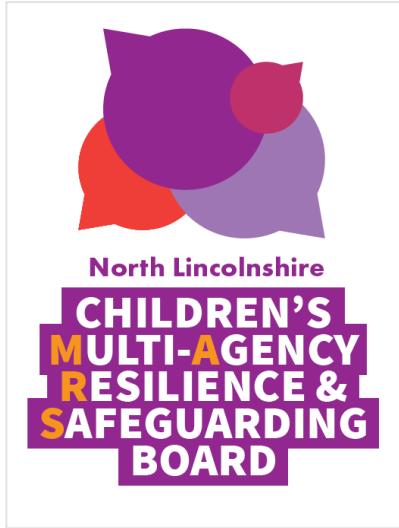
 *"By signposting staff to the Children's MARS website, it gives staff autonomy and encourages them to keep themselves updated with the latest guidance. The website is a trusted and reliable source of information to signpost to"*

*"The training for Designated Safeguarding Leads has been promoted through the Children's MARS Board and all resources and presentations are available on the website. Schools use the Early Help resources regularly and feel that it is useful as they can find out what is expected of them within the Early Help arena"*

*Multi agency representatives from multi agency practitioner forum*

**What  
managers  
and  
practitioners  
are saying....**

## Children's MARS Local Arrangements – Five Intents



### Intent

Co-produce with children, young people and families using their strengths and assets to develop services to meet their individual needs

## Co-Production

Voice and engagement activity and working collaboratively with children, young people and families to co-produce at an individual, service and strategic level is an area of strength in North Lincolnshire. Building on this strong foundation, safeguarding partners and agencies have continued to engage, listen to and co-produce with children, young people and families across the early help and safeguarding system, making use of their strengths and assets.

There is a range of examples of activity and impacts, and feedback is used to consistently shape areas of strategic focus, service development and delivery and also to individually support children, young people and families. Specific examples include:

**Primary and Secondary Staying Safe Conferences** for Children and Young People took place on 27 and 28 June 2019.

Over 60 delegates attended the secondary conference and took part in 3 workshops of choice. The keynote speaker focused on emotional health and how to stay safe which included understanding of the teenage brain. During the lunch session there was a mini summit hosted by Eskimo Soup focussing on grooming and exploitation, about which a number of students described as being powerful.

Over 155 delegates took part in the primary conference and again took part in 3 workshops of choice. Again, the keynote speaker focused on emotional health, albeit from a different, age appropriate, perspective. The workshops on both days were varied and facilitated by a range of people including Tim Pinto, Delta, Lincs First Aid, Young Voice, Street Sports, Eskimo Soup, Samaritans, #listentomyinnerbeat, NSPCC and the School Nursing Service. All workshops were well attended and received positive feedback. The disability champions workshop, which was perceived to be impressive, was developed and facilitated by the North Lincolnshire Youth Council Disability Champions.

**Electively Home Educated Event** took place on 8 November 2019.

The event was an opportunity for a range of agencies, businesses and organisations to attend to share information and consult with parents and their children and young people who are electively home educated. Staff representing Children's MARS attended the event at which 11 parents of 24 children from under 2 to 17 years old engaged in the consultation, which focused on understanding their big issues relating to them being safe, well, prosperous and connected and the wider challenges for partnership action at a community level including growing the economy, keeping people safe and well and enabling communities to flourish. As part of this, there was also consideration as to what they wanted to challenge agencies to do and how they can help. Generally parents indicated that they feel safe overall.

**Children's Challenge**

The outcomes of the Electively Home Educated Event, along with other consultation and engagement activity has helped to shape and influence the Children's Challenge 2020/24 which identifies challenges for partnership action as well as identifying challenges for children, young people themselves to improve outcomes and enable them to be in their homes, in their schools and in their communities.

## Co-Production

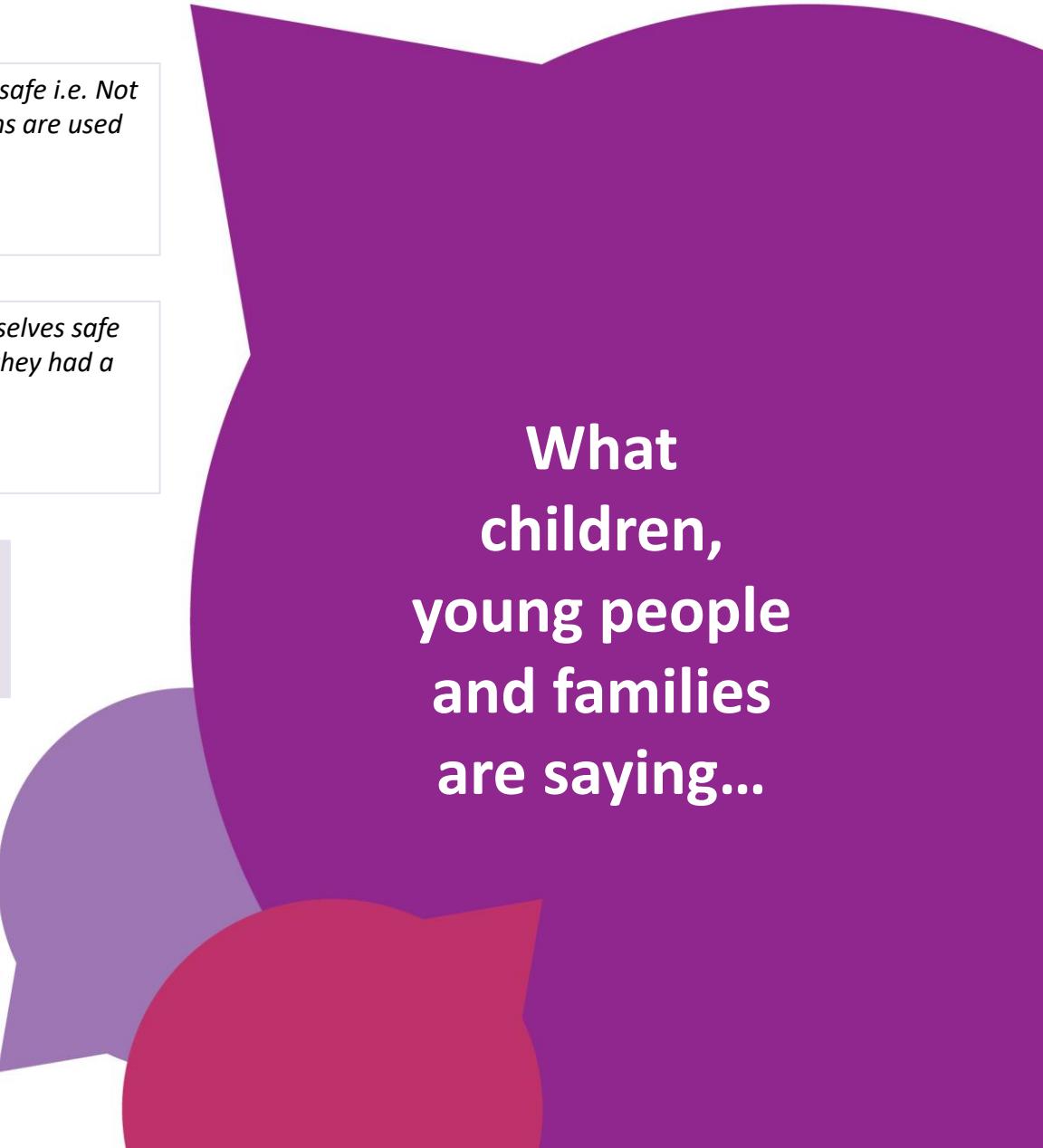
The **North Lincolnshire Youth Council** (NLYC) is a well established, representative group of young people who lead and champion opportunities for young people to have a voice, get involved and make a difference. The Children's MARS Board has positive relationships with the NLYC and its members and young people lead and contribute to projects and workstreams that shape and influence the early help and safeguarding system, the Children's MARS Board and its areas of focus. Examples include:

- Young people continue to develop 'Not In Our Community' (NIOC) resources for children, young people, parents, carers and professionals with a view to raising awareness of child sexual exploitation (CSE) and child criminal exploitation (CCE). NIOC have produced an interactive film, **Ava's story**, which was co-produced with young people, was developed to raise awareness of domestic abuse with young people. Made in Scunthorpe and released in January 2020, this film explores how domestic abuse can make a young person more vulnerable to grooming and entering into an abusive relationship. The film was featured as a news story by ITV Calendar.

In 2019, knife crime was again selected as one of the top issues in the Make Your Mark annual youth ballot in which over 8000 local young people voted. The NLYC contributed to raising awareness including inviting the police to present at the NLYC, focused discussions at the Great Debate events, young people attending the launch conference of #nomoreknives in April 2019, contributing to the Youth Select Committee inquiry into knife crime and attending the launch of the new awareness raising record and video by Beats Bus.

- Young people also co-produced a healthy environments project, which culminated in a conference in December 2019 hosted by young people, at which over 60 representatives across the partnership attended. There was a focus on what makes a healthy environment, but also on the importance of community infrastructure which contributes to young people feeling safe and well.
- The NLYC continues to embrace diversity and has most recently been involved in North Lincolnshire Pride celebrations, ongoing work through their Disability Champions and have continued to support Rainbow Youth, a young people's LGBT+ support group.

Through the NLYC, young people receive information which can help them to think differently, change their behaviours and support others. They are encouraged to have their say about young people's issues and share their lived experiences. Agency representatives who link in directly to the NLYC or make use of the information and resources available are able to use young people's views to shape and influence decision making and work alongside young people to co-design information, services and support.



# What children, young people and families are saying...

*There are resources available to help keep ourselves safe i.e. Not In Our Community. Social media and digital platforms are used to share positive messages for the greater good*

*North Lincolnshire Youth Council members*

*Having trusted relationships is crucial to keeping ourselves safe and well and overall, young people said they all felt they had a choice of people to talk to*

 *Children in Care Council members*

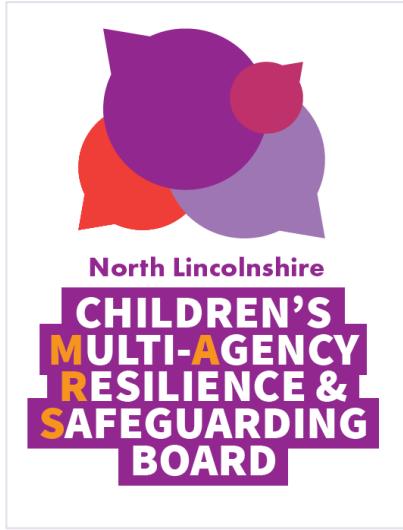


*"You help me and my family and make sure we are safe and happy"*

*Young person experiencing services*

*Children, parents, foster carers understand why services are involved, that they have the chance to have their say, that they believe the work services are doing is making them/their children feel safer and that they fully understand the child's plan*

*Children, young people and families experiencing services*



## Intent

Make children's safeguarding personal and swift so they remain in families, in school

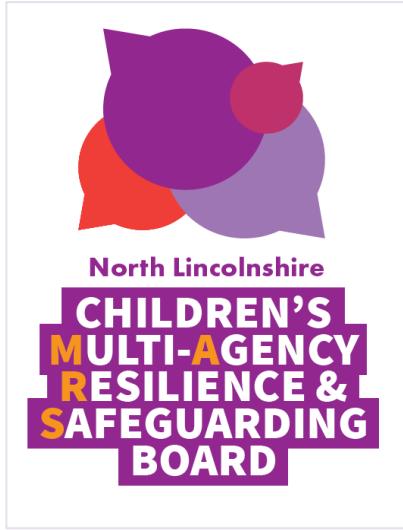
# Making Safeguarding Personal

**Creative and dynamic practice** - There continues to be a strong partnership commitment to creative and dynamic practice and doing the right thing at the right time for children, young people and families so they remain in families, in school and in communities. Examples of creative and dynamic practice include:

- **Whole family resources** have been developed through the integration of the FaSST targeted family support service and children's centre offer to provide a more joined up local family support offer, using a more enabling model of help that builds upon the strong relationships and reputation of both services within local communities. Relationships and connectivity have been strengthened with the Health Visiting and School Nursing Health and Wellbeing Service for children and young people from -9 months to 25 years. Working together more closely from a locality perspective has led to a more integrated approach to identifying vulnerable families needing early help who may be less visible to services. Availability of online and digital resources have been extended with an increased focus on the community hubs and children's centre offer as 'whole family' resources.
- **Immersive skills and aspirations project** was a planned partnership response to working with young people to engage them in diversionary activities which took into account their strengths and areas of interest, with a focus on exit strategies leading to change in behaviours. This project was shortlisted for the Howard League for Penal Reform Community Award 2019 and the North Lincolnshire Community Champions Award for community contribution for crime reduction 2019 and achieved the latter.
- **Targeted safety and prevention sessions** held in schools, colleges and other provisions by Missing Children's Advocates accompanied by others such as Humberside Police Missing Person's Co-ordinator and Early Intervention Team, Child Exploitation Intervention Team, Youth Offending Service and DELTA young people's substance misuse service. These sessions enhance children's understanding of the risks of going missing and by taking a strengths-based approach increase children and young people's skills to keep themselves and their friends safe and develop resilience.

**Understanding our people and place** - Through the development of local profiling, there is a strengthened understanding of populations, performance and practice. Partners have worked collaboratively across the Children's MARS arrangements and the Community Safety Partnership to develop vulnerability profiles relating to children who have experienced or are at risk of exploitation and missing children also domestic abuse. Work has been progressed to bring together a range of multi-agency datasets to facilitate a focused analysis at a detailed level of place (lower super output areas).

In all profiles there is an emphasis on victim, perpetrator and location/context and the information available is enabling partners to understand the interconnections and deploy resources to areas of greatest need.



## Intent

Build children, young people and families' resilience

## Building Resilience

There is a continued commitment to developing our approach to working with and building children, young people and families resilience as well as through building workforce resilience. This is underpinned by education and training opportunities which also focus on contextual and transitional safeguarding underpinned by core values.

**Teenage Kicks** group work - created from listening to teenagers' voices about how to effectively support and build the resilience of young people who have been exposed to exploitation, sexual and domestic abuse. This group is facilitated by specialist multi-agency workers.

It offers many things including:

- a safe place to talk with a safe adult
- activities away from risk facing behaviours
- access to therapeutic intervention
- supports transition from group into community based support

Impacts have included developing better family relationships, an increase in young people's confidence, self esteem and personal resilience as well as promoting positive social interaction through activities such as cooking, art and relaxation

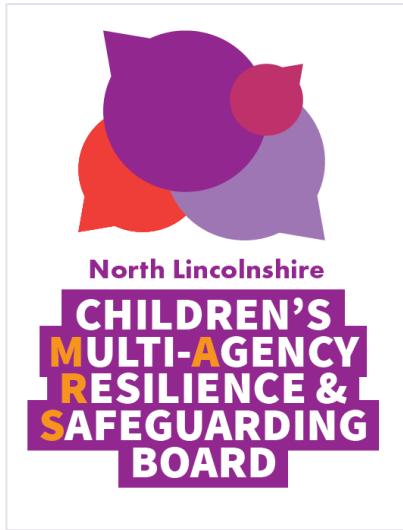
There is the continued shaping of practice and services to support young people across the early help and safeguarding pathways.

### **Scope of Children's MARS education and training activity has included:**

- early help
- safeguarding awareness
- safeguarding disabled children
- child protection
- child criminal exploitation
- neglect
- Graded Care Profile 2
- understanding trauma
- managing allegations against adults who work with children
- reducing parental conflict (including training for supervisors and train the trainer)
- honour based abuse and forced marriage
- female genital mutilation

**Edge of care offer** - There is a focus on restoration work and strengthening parenting relationships and the family's resilience where children are on the edge of care and supporting children and young people to be reunited with their families

**Holding On Approach** – There is a voluntary offer of support for mothers and fathers who have experienced children being removed from their care and / or who are at risk of repeat removals of children from their care. The approach provides an opportunity for the adults to focus on their own needs and to learn new ways to adapt to challenges and stresses. The model is based on the premise that resilience is something that can be learned and developed, if the adult is given the opportunity to discover their strengths and abilities.



## Intent

Drive an even stronger partnership with schools, colleges and local agencies

# Stronger Partnerships

There continues to be well embedded partnerships and relationships which underpin the Children's MARS arrangements.

## Building relationships with relevant agencies

As part of the Children's MARS arrangements, the list of relevant agencies and organisations is clearly identified and work is ongoing to develop and build relationships in order to enhance understanding of the local arrangements and further develop multi-agency practice. Examples of engagement and building relationships include:

- Increased engagement with wider agency representatives within the monthly Multi-Agency Audit Group (MAAG). Partners have contributed to learning and improvement and shared good practice across services
- Partnership interface meetings have been embedded and enable partner to collaborate, discuss and challenge that has strengthened partnership working and understanding of complex cases
  - The Multi-Agency Child Exploitation meetings continue to be well attended by partner agencies who contribute proactively and provide added value to children's statutory plans
  - Partners have been well engaged in the Children's MARS subgroups and specialist task and finish groups for areas of focused work
  - A networking opportunity was provided as part of the large training event in January which received positive feedback for the variety of agency representatives present

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## Stakeholder engagement

A stakeholder partnership meeting was held in June 2019 to update on progress and to focus on specific areas of focus including young voice, #nomoreknives campaign and domestic abuse. There was also a further opportunity for partners to reflect on their involvement in the local arrangements and established partnerships.

Virtual communications have been built upon and stakeholders receive regular updates on work across the partnership through the quarterly [Children's MARS News Update](#). The news update has been reconfigured to include good practice examples of multi-agency work and to communicate key themes and partnership progress on our areas of focus. Regular email communications are provided to stakeholders which includes updates on training opportunities, new policies and procedures and key messages.

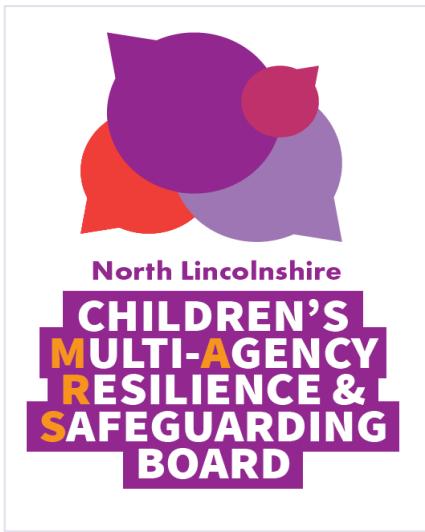
The Children's MARS website is a rich source of information and resources and practitioners have fed back that it is a 'go to place for guidance and latest policies and procedures'.

## Building relationships with schools and colleges

We have established stronger links with designated safeguarding leads through the Designated Safeguarding Leads (DSL) Forum. There are positive relationships between the Innovation Hub and other key officers including the School Improvement Officer (Safe Schools and Settings) and the Safeguarding Education Officer. Agendas and accompanying papers for the DSL Forums are developed collaboratively and information shared at the meetings are published on the Children's MARS [website](#).

Representatives from schools and colleges are included as part of the Practice Learning Line of Sight Events and the MAAG and have had opportunities to share their experiences and good practice with other partnership representatives.

Continued support for Operation Encompass has enabled schools and colleges to be aware of domestic abuse incidents and we have evaluated the impact on children and young people and the need for early help.



## Intent

Provide robust independent scrutiny and assurance to the partnership in relation to safeguarding and the welfare of children and young people in North Lincolnshire

## Scrutiny and Assurance

The Children's MARS Scrutiny and Assurance Framework was published alongside the local arrangements and there has been a range of robust scrutiny and assurance activity, including independent scrutiny, through thematic and agency specific assurance events and practice learning line of sight events leading to local learning, partnership action, changes in practice and outcomes, for example:

**Practice Learning Line of Sight Events** remain an important part of the scrutiny and assurance activity. These events bring together strategic, senior and safeguarding leaders with practitioners and supervisors to enable a line of sight on multi-agency frontline case work practice and its impact on children's lived experiences.

All events involve agencies auditing children's cases, case discussions and reflective debrief discussions chaired by either Independent Scrutiny Officers, a safeguarding partner or Children's MARS Board representative to distil the good practice, learning and development work for the Children's MARS Board to take forward.

There have been four line of sight events in June 2019, November 2019 with two in June 2020. The first two considered five cases each relating to children living with domestic abuse and children living with mental ill health. Two events were held virtually in June 2020 both on the theme of child sexual and criminal exploitation and the first one considered two cases whilst the second one was a case specific event.

Practitioners and supervisors are impressive in discussing their direct work and support for children and families during these events. Feedback from them is that these events provide an opportunity to showcase their good practice and they feel supported by strategic, senior and safeguarding leaders who better understand the challenges and good practice in frontline work.

Feedback is provided to those involved and disseminated widely through the Children's MARS News Updates and 7 Minute Briefings that are available on the website in 'Learning from practice' and 'Communications'. Following all events multi-agency action plans are developed by the Safeguarding Practice Learning and Improvement Group (SPLIG) as outlined on slide 13. These are monitored and reviewed for impact on frontline multi-agency practice by the SPLIG and signed off by the Children's MARS Board.

Line of sight events continue to generate an evidence base of effective local practice and learning which the Children's MARS Board has utilised strategically to further develop and improve multi-agency practice.

# Scrutiny and Assurance

## Children living with Domestic Abuse

### Good practice

- The importance of relationships - evidenced through strong relationships between practitioners with children and families also good multi-agency working relationships and collaborative working across agencies
- Children, young people and families are at the centre – enables a personalised approach, where work is structured around the needs of the family
- The impact of individuals - tenacious approach is making a positive difference to outcomes for children and young people
- Good use of evidence based practice and expertise

### Learning, activity and improvement

- We continue to further develop prevention work including a focus on helping children in domestic abuse households understand healthy relationships to break the cycle of inter-generational abuse
- A flexible non convicted perpetrator programme has been implemented focusing on changing the behaviours of perpetrators alongside supporting victims and children within a multi-agency context
- Education and training has taken place relating to honour based abuse also recognising the signs of coercive control

## Children living with Mental Ill Health

### Good practice

- Good partnership working across the early help and safeguarding pathway
- Child's voice was evident in all cases - children were active participants and their views were shaping their plan
- Effective communication between services including swift responses in crisis situations
- Knowledgeable and skilled practitioners – positive feedback about mental health first aid training, training and support to foster carers and practitioners extending their learning about mental ill health

### Learning, activity and improvement

- We continue to build upon practitioners knowledge and understanding of children's mental ill health and emotional distress
- Recognise the impact upon the child and family of multiple practitioners involved and adapt as necessary – this is included in the [Helping Children and Families in North Lincolnshire 2020/24 document](#)
- We continue to develop our understanding on how the system learns from responding to crisis situations and how agencies support families at these times

# Scrutiny and Assurance

## Child Sexual and Criminal Exploitation

### Good practice

- Information sharing and intelligence gathering across all agencies
- Partnership working, the child's voice and knowledgeable practitioners who understood child exploitation, contextual safeguarding and places and spaces within the community
- Consistency of practitioners involved using relational and trauma informed practice and working at a pace which is helpful and empowering for the young person
- Engagement with parents as safeguarding partners which has made a difference to their child's life
- Transitions for young people into adulthood are being considered
- Brilliant work with the young person from the time the information came through to services with sound methodology around statutory requirements
- Persistent and resilient workers who 'hold their nerve' when risks are contextual
- Strength of the partnership has enabled professionals to be honest and open and there is trust between colleagues to support and challenge each other

### Learning, activity and improvement

- We have developed refresher training on the use of appropriate professional language to describe children who are vulnerable to, at risk from or experiencing exploitation
- We have equipped practitioners to do more of 'what works' through early help and development of more resources
- Agencies continue to support parents to be protective and address the extra-familial harm of young people
- Continued strategic multi-agency locality-based work to target and further transform harmful locations, places and spaces
- Further development of the local approach to working with families as experts and supporting them to formulate a plan for their child as part of the wider work on the local approach to working with adolescents
- Ongoing contextual safeguarding development work to include the revision of practices, forms, processes and systems utilising the University of Bedfordshire's research and resources

The learning and improvement from this event has fed into the refresh of the Child Exploitation and Missing Action Plan 2020/21 and the Community Safety Partnership Plan.

## Scrutiny and Assurance

The **Section 11 process** places a duty on specific organisations and agencies to ensure they fulfil their responsibilities to safeguard and promote the welfare of children. The Children's MARS Board Section 11 safeguarding self assessment form was distributed in January 2019 and a summary of the audits was presented to the Children's MARS Board in April 2019. Actions identified within the audits are being monitored through the Children's MARS Board and further updates on agencies action plans have been received during 2019/20. This has provided assurance that most standards across agencies are in place and up to date. In some cases, the required standards are in place, but require some level of review or improvement.

The Children's MARS Board has undertaken a review of the safeguarding self-assessment audit together with the Local Safeguarding Adult's Board and a joint self-assessment audit has been developed, including a COVID- 19 section, to reduce duplication for agencies who complete it. This will be disseminated in Autumn 2020. Individual safeguarding self-assessment audits and associated action plans are taken into account as part of agency specific assurance events.

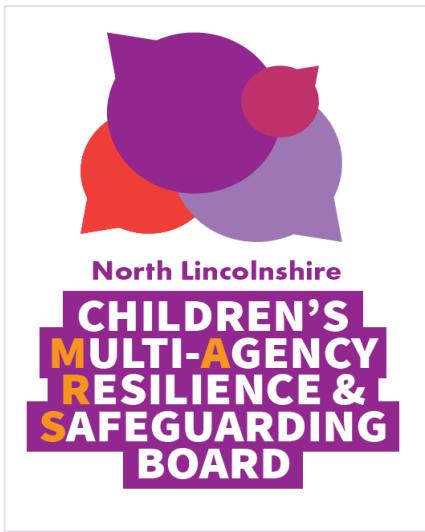
**Agency Specific Assurance Events** were a new addition to the scrutiny and assurance framework during 2019 and have provided safeguarding partners and key officers with an opportunity to visit specific agencies to 'walk the floor' and talk to practitioners and managers as well as children, young people and families. There have been three agency specific assurance events undertaken involving Northern Lincolnshire and Goole Hospitals (NLaG) NHS Foundation Trust and two events covering Rotherham, Doncaster and South Humber (RDASH) NHS Foundation Trust including the 0 -19 service (health visiting and school nursing) and Child, Adolescent Mental Health Services (CAMHS) also Great Oaks mental health services held jointly with Local Safeguarding Adult Board (LSAB) representatives.

Overall, the events provided a good level of assurance that the organisations were fulfilling their safeguarding children/adult's responsibilities. Examples of key learning were identified and where areas for improvement and further consideration are identified these are communicated to the agency. The findings have been shared with the Children's MARS Board and LSAB , where relevant, and any progress required will be monitored and challenged as appropriate.

Under section 175 of the Children Act 2004, the 2018/19 **Safeguarding Audit for schools and colleges** overseen by Governors measured compliance with the statutory guidance 'Keeping Children Safe in Education' and enabled the Children's MARS Board to receive assurance about essential safeguarding practice across all schools, colleges and settings attended by North Lincolnshire children and young people. All schools engaged in the audit, the outcomes of which highlighted consistently good practice in relation to safeguarding across schools, academies and colleges.

In addition to this all **Private, Voluntary and Independent Childcare Providers** complete the **Safeguarding Audit**. Nurseries and pre-schools complete it on an annual basis and childminders on a bi-annual basis. Analysis of the data takes place that informs the Early Years training calendar. Bespoke safeguarding training is offered to providers alongside refresher and awareness training. Good practice is shared via workshops and information updates that are communicated through a monthly e-newsletter to all providers.

Findings from the audits are analysed and shared with the Children's MARS Board and action plans are put in place to monitor further improvements.



## Area of Focus

Reduce the Harm from  
**Child Exploitation**

# Reduce Harm from Child Exploitation

## What have we done?

- The Child Exploitation Strategy Group is well attended and has robustly monitored progress and the impact of the Child Exploitation and Missing Action Plan for 2019/20 that has been completed and a new one developed for 2020/21
- An annual review of Child Exploitation and Missing Children for 2019/20 has been completed with actions feeding into the 2020/21 action plan
- Continued to develop our local partnership approach to working with adolescents and to contextual safeguarding
- Multi-Agency Child Exploitation (MACE) meetings have been held six weekly, are well embedded and enable monitoring of interventions as added value to children's individual statutory plans
- Multi-Agency Missing Children meetings have been held monthly over a number of years and provide a focused opportunity to share information, intelligence and data, identify emerging themes, and collaboratively prevent and reduce children going missing  
~~Two Practice Learning Line of Sight events on child sexual and criminal exploitation were held in June 2020 – see slide 30~~
- Targeted safety and prevention sessions held in schools, colleges and other provisions by Missing Children's Advocates  
~~Accompanied by others such as Humberside Police Missing Person's Co-ordinator and Early Intervention Team, Child Exploitation Intervention Team, Youth Offending Service and DELTA young people's substance misuse service.~~
- Young people's stories and views have been utilised within the Not In Our Community social media campaign aimed at preventing children and young people from being groomed and exploited
- Sustained investment in local services including child exploitation intervention workers, independent advocates, outreach youth workers, the police early intervention team and lead practice supervisors, who provide dedicated support for children and young people
- All children and young people who went missing during the year were offered an independent return interview and most of these were taken up
- A range of resources and approaches are available which are tailored around individual young people's experiences to heighten their trust, confidence, self-esteem, awareness and safety
- There is a local child exploitation and missing profile in place relating to victims, offenders and locations/contexts that enables key strategic leaders to understand the local picture and to target resources

# Reduce Harm from Child Exploitation

## What difference has it made?

- MACE meetings evidence impact on reducing levels of risk to children and young people through risk management plans that supplement statutory child in need or child protection plans
- Significant partnership disruption activity has been undertaken with suspected perpetrators and specific locations targeted which has contributed to the reduction in risk to children and young people. There is evidence of perpetrators being arrested, prosecuted and convicted also harmful settings being tackled including businesses, properties, other places and spaces
  - Identifies locations relating to child exploitation/missing children, perpetrators and the links – enables targeting of contexts including businesses, properties, other places and spaces, perpetrators to disrupt and prosecute
- Pathways of support for children who go missing include local therapeutic support from Changing Lives through Changing Minds who work closely with the partnership
- Positive feedback from children and their families includes them saying they feel safe and that they have positive, trusting relationships with their workers (via Missing Children's Advocates, Child Exploitation Intervention Team and Children's MARS Line of Sight events)
- Young people's views have enhanced the understanding of the local picture of child exploitation and shaped practice and services to prevent, support and protect children
- Varied approaches including group work and immersive positive activities with young people vulnerable to, at risk from or who have experienced exploitation has seen an increase in engagement, self esteem and safety

*I was really worried when we first started doing our sessions because I just had so many lightbulb moments and realised what had been happening to me. I really don't know what I would have done if you hadn't helped me see things differently. I find you funny but serious at the same time, you never tell me off but straight and honest with me I like that*

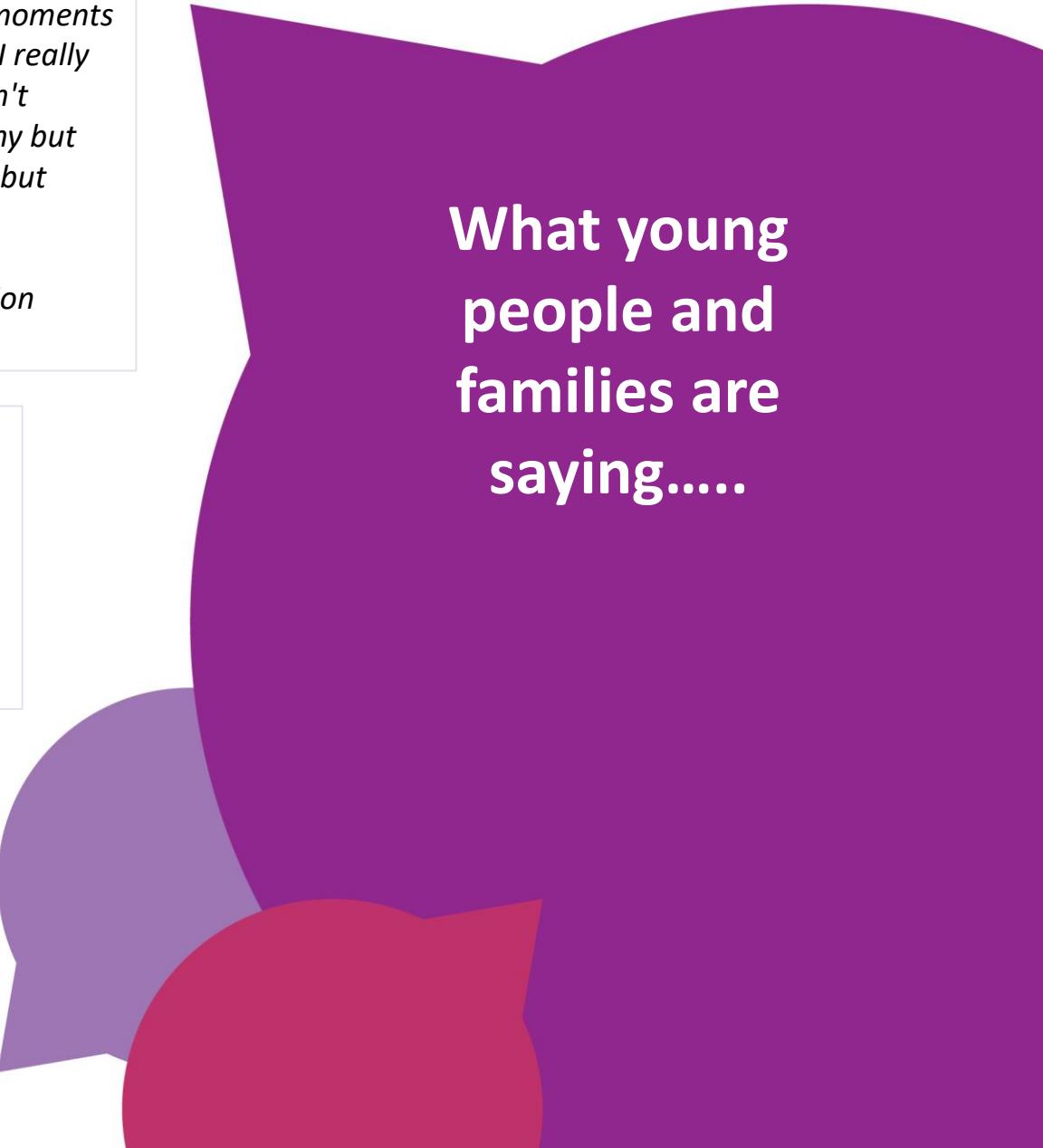
*Young person involved with the Child Exploitation Intervention Team*

*Today I am walking with joy in my stride as I have been accepted into University. I want to thank you for all you did to help me on my journey as I wouldn't be here without you*

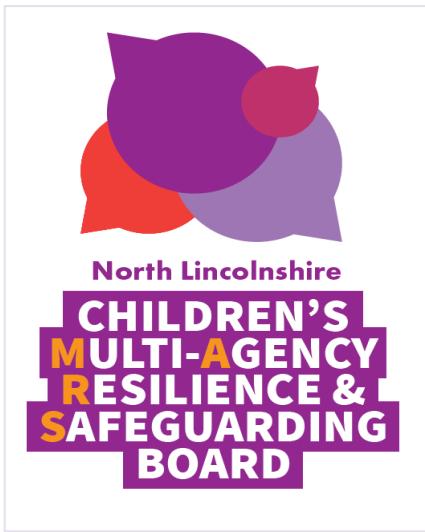
*Young person who had been involved with services over a year prior*

*We are very grateful for your support and help with (child's name), I don't know what we would have done without you, you help us to understand things*

*Extended family member involved with Social Care Services*



## **What young people and families are saying.....**



## Area of Focus

Reduce the Harm from  
**Domestic Abuse**

# Reduce Harm from Domestic Abuse

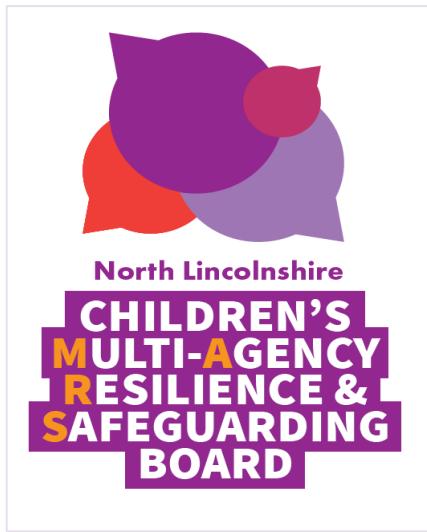
## What have we done?

- The Domestic Abuse Strategy Group is well attended and has monitored progress against the DA Action Plan for 2019/20 that has been completed and a new one has been developed for 2020/21
- Multi-Agency Risk Assessment Conference (MARAC) steering group has been subsumed into the DA Strategy Group
- A Children's Independent Domestic Abuse Advisor (IDVA) provides dedicated support to 16 and 17 years olds within the context of The Blue Door all risk based domestic abuse specialist support service for victims
- A local Harmful Sexual Behaviour panel facilitates trained practitioners to use the 'Assessment Intervention Moving on' (AIM) assessment framework model and 'Good Lives' intervention for young people where there has been harmful sexual behaviour
- A Practice Learning Line of Sight event on children living with domestic abuse was held in June 2019 – see slide 29
- Held a large multi-agency learning event in relation to honour based abuse, forced marriage and female genital mutilation
- ~~•~~ Rolled out a Reducing Parental Conflict training programme and jointly launched a Relationship Matters website across the Yorkshire and the Humber region to offer families information, tips and help
- ~~•~~ Locally the Life Central app continues to be developed by young people for young people and parents so that they can access advice on key issues such as healthy relationships
- ~~•~~ Established Multi-Agency Tasking and Co-ordination (MATAC) monthly meetings chaired by Humberside Police that provides a structured response to managing the risk posed by serial perpetrators of domestic abuse
- Developed a local non-convicted perpetrator programme Re:Form focused on changing perpetrator behaviours whilst supporting victims and their children to enable families to get safe, stay safe and become independent of services where it is safe to do so
- By disseminating national guidance, we have supported schools and colleges in their preparation for new statutory Relationships and Sex Education and Health Education, that comes into place from September 2020. This has included through termly network meetings, signposting to training by national and local organisations (e.g. PSHE Association, Big Talk, Cornerhouse), briefings for schools, colleges, alternative providers and governors and by sharing good practice from the schools accepted onto the Early Adopter programme
- There is a local domestic abuse profile in place relating to victims, offenders and children affected, also locations that enables key strategic leaders to understand the local landscape and to target resources
- Worked together with The Blue Door and across the partnership to secure national funding to expand safe accommodation options for victims of domestic abuse with complex issues and their children through intensified support

# Reduce Harm from Domestic Abuse

## What difference has it made?

- MARAC Steering Group being held as part of the Domestic Abuse Strategy Group has increased shared ownership and reduced duplication
- Children's IDVA has provided help and support to young people across the early help and safeguarding pathway to enable recovery from the impact of domestic abuse
- The Harmful Sexual Behaviour panel has continued to provide an holistic change programme for young people
- Good practice and learning from the Practice Learning Line of Sight event on children living with domestic abuse is outlined on slide 29
- Impact of training on honour based abuse, forced marriage and female genital mutilation also of Reducing Parental Conflict is outlined on slide 15
- Awareness raising and preventative approaches for children and young people including through schools, colleges and locally developed Life Central app also Not In Our Community social media campaign impact by helping them learn about healthy relationships and educate about grooming. Such self help mechanisms have been regularly raised by local young people as one of their preferred methods
- MATAc meetings and the Re:Form non-convicted perpetrator programme have increased the likelihood of improving the safety of victims of domestic abuse and their children alongside the potential for reducing the risk of harm from domestic abuse.
- Helping to prepare schools, colleges and alternative providers for the forthcoming Relationships and Sex Education and Health Education has provided opportunities for them to remain apprised of the changes, plan ahead of the statutory implementation date and schools are now implementing the new curriculum
- The domestic abuse profile has increased understanding of areas of greatest and emerging need to enable a strategic focus
- Partnership working is leading to expansion of safe accommodation options for victims of domestic abuse with complex issues and their children through intensified support



## Area of Focus

Reduce the Harm from  
**Neglect**

# Reduce Harm from Neglect

## What have we done?

- The Early Help Strategic Leads Group has developed a quarterly reporting mechanism for the completion of the Graded Care Profile 2 (GCP2) neglect assessment tool
- A team of 20 multi-agency champions continued to offer training and almost 300 practitioners have been trained and accredited in the use of the GCP2 assessment tool in the last 2 years
- Targeting of designated safeguarding and pastoral leads in schools has led to a small number of schools now having staff trained in using the GCP2 tool
- The tool has been promoted within the Early Help locality network meetings and support is provided to schools to reduce the harm from neglect
- GCP2 assessments continue to be highlighted and discussed at child protection conferences and through supervision

## What difference has it made?

- Co-working on GCP2 assessments has built practitioner confidence and increased the use of the tool
- Outcomes of the GCP2 and areas of intervention are being integrated into children's plans
- Case examples have illustrated where the tool has been used effectively to enable parents to make changes resulting in both child protection planning and Public Law Outline ending
- Practitioners' feedback from the training has indicated that the tool has allowed them to consider the individual experiences of each family member and the lived experiences of the child
- Three workers from North Lincolnshire, from the Clinical Commissioning Group, FaSST targeted family support service and the Integrated Multi-Agency Partnership were nominated for an NSPCC Elephant Award for their work in promoting the GCP2 across the multi-agency partnership and attended the awards ceremony in January. At the event, two of the nominees won awards
- The multi-agency group of champions are currently working together to undertake a full analysis of the implementation of the tool so far. Initial findings have indicated that use of the tool is gradually increasing and there has been some positive experiences reported from practitioners and families when the tool has been used. Both practitioners and parents have commented upon the benefit of the visual nature of the tool which has helped to identify where there are strengths in parenting and also the areas of priority to work upon

*Very useful it being broken down the way it is. It gave me the ability to see the condition of the environment myself and how far I had let the conditions decline*

*Parent referring to experience of GCP2*

*The numbering and colours made it easy for us to see what we are doing well and where we can make some improvements and why*

*Parent referring to experience of GCP2*

*The tool was very good to highlight to the mother who areas she was struggling in, but also highlighted what she was really good at which encouraged her to make the changes required*

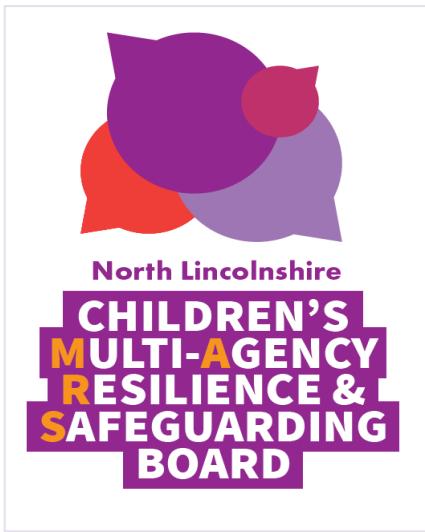
*Practitioner who had completed GCP2 with family*

*It encourages positive engagement with families as it allows them to be more part of the process*

*Practitioner who had completed GCP2 with family*

## **What parents and practitioners are telling us....**





## COVID-19 Pandemic

Children's MARS Board Line of  
Sight and Assurance

# Children's MARS Board Line of Sight and Assurance

## Summary of our Response to COVID-19

The Children's MARS Local Arrangements have continued to support the underpinning practices, processes, infrastructure and governance arrangements to ensure a high level of safeguarding across the partnership

Children's MARS Board has continued to meet virtually and we refined the arrangements at the April meeting to focus on the COVID-19 response and our ongoing focus on assurance across the early help and safeguarding pathway

Developed a COVID-19 update into CMARS Board performance reporting arrangements

Under the auspices of the Children's MARS Board, a letter about hidden harm was distributed across the partnership which included resources for children, young people, parents and professionals

Continued to meet with children and families, face to face where required, and through virtual mechanisms as a means of ongoing engagement and statutory compliance. Consulted with more than 500 children, young people and parents/carers to understand their experiences of COVID-19, the outcomes of which were fed into the CMARS Board and shared across the partnership as appropriate to inform practice

Robust partnership arrangements have continued, through virtual mechanisms, for example:

- Children's MARS Sub Groups
- Partnership Interface Meetings
- Multi-Agency Child Exploitation (MACE) Meeting and Multi-Agency Missing Children Group
- Child Protection Conferences

Generally, there has been improved attendance as a result of the accessibility of virtual meetings across the partnership, including children, young people and families

Continued to undertake scrutiny and assurance activity, for example:

- Independent Scrutiny Officer attended MACE triage and MACE meeting as a participatory observer
- Line of Sight events (in relation to child exploitation and case specific) attended/facilitated by Independent Scrutiny Officer
- Independent scrutiny of Local Arrangements (Independent Scrutiny Officer facilitated multi-agency forum, undertook a desktop review exercise and attended the July Board as a participatory observer)

Virtually engaged in regional events, meetings and webinars and shared specific information and insights for local consideration i.e. related to learning from serious incident notifications with a COVID-19 context and virtual rapid reviews

Agreed a COVID-19 specific area of focus for 2020/21 to ensure a continued oversight of our response to and impacts of COVID-19 across the early help and safeguarding pathway

Supported the workforce across the partnership, professionally and personally, in relation to the evolving situation. The workforce has been resilient, flexible, innovative, creative in caring for and meeting the needs of our children and families. Children and families themselves have, in the main, responded with resilience and determination.

# Children's MARS Board Line of Sight and Assurance

- The UK Government announced a lockdown due to the coronavirus COVID-19 pandemic on 23 March 2020.
- The COVID-19 pandemic has presented significant challenges to safeguarding and promoting the welfare of children both nationally and locally. Agencies and organisations across the Children's MARS partnership have demonstrated swift and agile responses, resource flexibility, innovation, creativity and commitment in working together to help and protect children and families.
- Across the partnership there has been exceptional leadership and management at all levels and working at pace on new and different tasks including stepping out of roles in order to safeguard and promote the welfare of children. Chief officers, safeguarding partners and leaders across the partnership have supported staff especially those on the frontline to promote their safety and wellbeing.

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## Response to Key Government Guidance

In response to key Government guidance issued relating to safeguarding and promoting the welfare of children during the COVID-19 pandemic the Children's MARS Board:

- considered the joint note issued by the Department of Education (DfE) in March on behalf of the national Child Safeguarding Review Panel, included this in the Children's MARS policies and procedures: Improving Child Protection and Safeguarding Practice and disseminated these to safeguarding partner organisations and wider relevant agencies
- established processes to be assured that local safeguarding arrangements were fit for purpose and maintained a line of sight on the partnership response to Coronavirus (COVID-19): guidance for children's social care services that was issued originally in April (with subsequent revisions) for all those delivering or with an interest in children's social care
- considered the very few local flexibilities utilised due to the Adoption and Children (Coronavirus) (Amendment) regulations 2020 that came into force in April until September e.g. revised adoption medical process agreed to ensure no delay
- acknowledged that all primary and most secondary legislation remained unchanged and that the overarching welfare and safeguarding duties in Working Together 2018 largely remained unchanged and placed an emphasis on this through the Board and sub group meetings

## Children's MARS Board Line of Sight and Assurance

## Children's MARS Board Continued Leadership Role

The Children's MARS Board has continued to support the underpinning practices, processes, systems and infrastructure through its governance arrangements and underpinning functions to ensure a high level of safeguarding practice across the partnership:

- We refined arrangements for the Children's MARS Board meeting in April 2020 to focus on the COVID-19 partnership response and maintain a focus on assurance across the early help and safeguarding pathway. This included consideration of the heightened risks for children and adults and 'hidden harm' that the COVID-19 pandemic has brought to the fore and as certain types of harm were emerging nationally as potentially more prevalent and less visible, for e.g. domestic abuse, child exploitation and online harm. A letter from the Safeguarding Partners was widely distributed which alerted agencies to hidden harm and included resources for children, young people, parents and practitioners

P  
• Specific insights for local consideration have been disseminated across the partnership due to our local safeguarding partners and their representatives being engaging at a sub-regional, regional and national level e.g. learning from serious incident notifications with a COVID-19 context

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• Evidence sought that senior leaders and managers across organisations have supported their workforce professionally and personally in relation to the evolving COVID-19 situation. This has included enabling staff to remain connected within new and fluid working arrangements through digital technology and supporting their welfare and safety

- Feedback confirmed that children and families have largely responded with resilience and determination to the COVID-19 situation. Foster carers, carers and adopters have shown immense care and collaboration through this time

- Children's MARS Hub and partners have continued to facilitate the collation, review, analysis and distribution of relevant information and briefings across the partnership relating to national guidance, legislation, policy and practice from across Government and public sector bodies to support multi-agency practice

# Children's MARS Board Line of Sight and Assurance

## Communication

There has been an increased presence on social media channels throughout the COVID-19 period. Links were established with communications teams across the partnership and multi-agency communications were coordinated. Some examples were:

- The development of leaflets for parents and carers and children and young people which signposted them to a number of self help resources including online safety and emotional wellbeing support. These were distributed across the partnership and made available on the Children's MARS website. Positive feedback was given during a recent Practice Learning Line of Sight event in which the leaflets were used effectively with a number of families who were unsure where to access online support
- Promotion of advice and guidance relating to what to do if you are worried about a child and raising awareness of hidden harm and emerging issues
- A communications campaign was developed in response to the national concerns regarding hidden harm and the increased risk to babies during the COVID-19 period. Key multi-agency resources were shared across a number of partner organisation's communication channels.

## Multi-Agency Education and Training

In light of the government advice and guidance around social distancing, the Children's MARS Board suspended all face to face training. In order to support individuals in keeping up to date with their skills and knowledge the Children's MARS Education and Training Programme recommenced with a virtual offer. This has provided greater flexibility for professionals to access training and has led to an increased demand for courses. There has been an increase in bookings from a number of rural based schools and agencies, independent providers and from across relevant agencies and wider teams who may have struggled to attend a face to face course previously.

The virtual training offer includes:

- A new e-workbook for Safeguarding Children Awareness
- 100 e-learning licences for Reducing Parental Conflict for practitioners to access whilst working from home
- The revision of the face to face training courses to allow them to take place through Microsoft Teams video platform
- Virtual local and national webinars, training events and e-learning were advertised to those staff on the Children's MARS communications list and through the Children's MARS website
- A toolkit was developed and made available on the Children's MARS website in relation to using technology when working with children and families
- Engagement with the Yorkshire and Humber Multi-Agency Safeguarding Trainers meeting to share experiences and good practice when carrying out virtual training

# Children's MARS Board Line of Sight and Assurance

## Learning Lessons, Recovery and Reset

Across the partnership how can the lessons we are learning support the ongoing recovery and reset from COVID-19?

Nationally the risks, impact and consequences of the COVID-19 pandemic add significant complexity to existing risks and their impact on children, young people and families. These risks and the reduced visibility of children and families who access services combined with the uncertainties about the future situation can result in rapidly escalating needs and risks that may go uncovered or unreported, leaving children and families without the help and protection that they need:

- The safeguarding partner organisations and wider agencies have and continue to experience differing demands, at times significant and/or complex. We will continue to build on our partnership working to overcome the challenges ahead, as changes are made to the COVID-19 measures, including continuing to support early years providers, schools, colleges and alternative education providers. An upturn in demand may be experienced from multi-agency services across the early help and safeguarding pathway. Continued working together is required to provide early help and to safeguard and promote the welfare of children and young people recognising that some may need additional help, including help to re-engage in education
- Across the local partnership different approaches to the help and protection of children have been developed. The Children's MARS Board will continue to **listen, learn, review and adapt** local multi-agency practices, processes and systems to ensure that local need and emerging areas of harm are met in the context of national guidance. This will take into account the newly established virtual working practices and further embed the availability of information, advice and guidance for children, young people, families and practitioners across the partnership
- Co-production with children, young people and families, timely information sharing and partnership working are central to timely self help, early help or statutory support and protection, good practice and lead to building children and young people's resilience and effective safeguarding. We will continue to listen to the voices of children, young people and parents / carers and reflect these in decisions, strategies and action plans also consider and promote diversity and equality of opportunity
- Support for and the well-being and safety of the workforce will be priority for the partnership

## **Feedback from 549 children, young people, parents and carers as part of consultation of views and experiences of receiving services though COVID-19**

### **Areas of good practice**

- Children and adults valued the steps taken to remain in contact and continue to provide support and intervention.
- Children and adults liked the use of technology and the different means to keep in touch – some commented that they felt ‘better’ supported as people were more available. Responsiveness was been said to have improved and that this should continue going forward.
- Families welcomed ‘checking in’ calls in-between actual visits. The notion of relationship social work is evident in the returns and families thankful and appreciative of the service they are receiving.

Those consulted fed back consistently that they value face-to-face contact and the relationships with their workers so would want a ‘balance’ of face-to-face and virtual contact.

It was consistently raised across services that there should be a choice of virtual or face to face meetings.

Children liked that the adults were using ‘their’ technology.

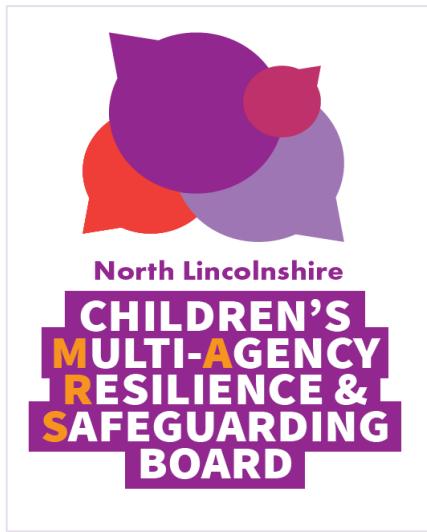
- Positive feedback was expressed in the use of virtual meetings as they were felt to be more accessible and reduced potential obstacles.
- Parents also noted that on-line meetings could be less ‘intimidating’ so they felt more comfortable.
- Improved relationships were noted with adults and children sharing teenage cultural interests.

### **Areas for consideration and development**

- Access to and the accessibility of technology was raised as an issue by a proportion of families – some did not have immediate access to equipment and technology to utilise virtual tools.
- Some reservations were raised by a small proportion of those consulted over complex sensitive meetings being held virtually as they may not always be able to maintain privacy within their own environment.
- It was expressed that within virtual meetings it was better to be able to see people’s faces during the meeting so any developments going forward should include this.
- Some adults – foster and adoptive carers in particular said that they would like the development of more virtual training.
- Further advice, training and information on the use of new virtual tools and technology would be beneficial for some carers and families.

*The findings have been shared with practitioners, managers and the Children’s MARS Board as appropriate and are being used to further develop practice*

# **What children, young people, parents and carers are saying.....**



## Children's MARS Local Arrangements

### What Next?

# Developing arrangements and proposed ‘Shine a Light’ Areas of Focus

The Children’s MARS Board held a development meeting in July 2020 with the Chairs of the sub groups focused on:

- review and adaptation of the Children’s MARS Local Arrangements based on the past year’s learning and to reflect the new and developing infrastructure, changes to governance arrangements so that our arrangements act as a launchpad to drive the partnership forward for the next few years
- ongoing dialogue and continued shared understanding of the impact of COVID-19 on safeguarding and promoting the welfare of children, young people and their families during recovery planning giving consideration to emerging themes and what is needed to restore and reset support services
- the areas of focus in which the Children’s MARS Board wish to **‘shine a light’** on and to maintain oversight of to ensure there is focused partnership action, system change and robust practice to contribute to safeguarding and promoting the welfare of children and families.

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‘Shine a Light’ Areas of Focus	Lead Partnership	Anticipated Partnership Action and System Change
Further develop the multi-agency <b>Contextual Safeguarding Approach</b> and work with adolescents and their families	CE and Missing Strategy Group	<ul style="list-style-type: none"><li>• Roll out and embed the Contextual Safeguarding Approach</li><li>• Implementation of education and training across the workforce</li><li>• Review and refresh forms, systems and processes</li><li>• Refresh Child Exploitation Strategy and underpinning group (to take account of contextual safeguarding focus)</li></ul>
<b>Continue to respond to COVID-19 and emerging harm</b> across the early help and safeguarding system	Children’s Help and Protection Pathway Group	<ul style="list-style-type: none"><li>• Partnership data development and analytics</li><li>• Identify and address emerging themes and risks from performance data, practice wisdom and voice</li><li>• Develop and embed new practices to take account of changing needs and circumstances</li><li>• Ensure early help and safeguarding pathway is responsive to need and demand in a changing environment. Specific areas of focus will include:<ul style="list-style-type: none"><li>• infants</li><li>• child sexual abuse</li></ul></li></ul>

## Line of Sight Areas of Focus and ongoing monitoring

There are some areas of focus in which the Children's MARS Board will maintain a '**line of sight**' of in order to seek assurance, challenge, shape and influence partnership action and system change which are the responsibility of other partnership and planning frameworks.

Line of Sight Areas of Focus	Lead Partnership (Governance)	Seeking Assurance of Partnership Action and System Change
<b>Emotional Health and Wellbeing</b>	Social Emotional Mental Health Strategy Group (under the Integrated Children's Trust)	<ul style="list-style-type: none"><li>• Seek assurance that the emotional wellbeing and mental health system is responsive to need and demand</li></ul>
<b>Domestic Abuse</b>	Domestic Abuse Strategy Group (under the Community Safety Partnership)	<ul style="list-style-type: none"><li>• Seek assurance that there is a focus on victims, perpetrators, places and locations to reduce the impact of domestic abuse on children and families</li><li>• Seek assurance that the Domestic Abuse Bill is implemented including the safe accommodation duty and underpinning needs assessment and Domestic Abuse partnership board</li></ul>

## Implementation and Review

As safeguarding partners and relevant agencies, we will continue to listen, learn, review and adapt in order to ensure our local Children's MARS arrangements best meet the needs of the children, young people and families in North Lincolnshire, so they are resilient and safeguarded to enable them to be in their families, in their schools and in their communities.

To do this, our arrangements are underpinned by a strategic and operational delivery plan, with an overarching intent to implement the local arrangements, in which actions pertaining to the safeguarding partner's portfolio areas and key areas of focus are captured.

We are committed to independent scrutiny of our local arrangements, which contributes to our annual report and refresh of our local arrangements.

# GLOSSARY

A	<p><b>Anti-racist practice</b> a form of action against racism and systemic racism and the oppression of marginalised groups. Being anti-racist is based on the conscious efforts and actions to provide equitable opportunities for all people on an individual and systemic level. People can act against racism by acknowledging personal privileges, confronting acts of racial discrimination, and working to change personal racial biases</p> <p><b>Anti-oppressive practice</b> focuses on ending socioeconomic oppression. Approaches aim to challenge the structure of society, and the use of power, where they are being used to maintain some groups in disadvantaged positions. This is rooted in the notions of improving the quality of life and wellbeing of individuals, groups and communities and the intrinsic value of a diverse society</p>
C	<p><b>Changing Lives through Changing Minds</b> is a local provider of therapeutic support for young people</p> <p><b>Child criminal exploitation (CCE)</b> involves exploitative situations, contexts and relationships where a child (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them completing a task on behalf of another individual or group of individuals; this is often of a criminal nature</p> <p><b>Child Safeguarding Practice Review</b> may be undertaken following identification and agreement that a case meets the criteria of a serious child safeguarding case. It is for the safeguarding partners to determine whether the criteria are met and whether a local child safeguarding practice review is appropriate taking into account that the overall purpose of a review is to identify improvements to practice. In some cases where the definition of a serious child safeguarding case is not met yet there may be issues of importance to the local area, the safeguarding partners may choose to undertake a local child safeguarding practice review</p> <p><b>Child sexual exploitation (CSE)</b> is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator</p> <p><b>Contextual Safeguarding</b> As well as risks to the welfare of children from within their families, children may be vulnerable to abuse or exploitation from outside their families. These extra-familial risks might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online. These risks can take a variety of different forms and children can be vulnerable to multiple risks, including exploitation by criminal gangs and organised crime groups such as county lines; trafficking, online abuse; sexual exploitation and the influences of extremism leading to radicalisation. Extremist groups make use of the internet to radicalise and recruit and to promote extremist materials. Any potential harmful effects to individuals identified as vulnerable to extremist ideologies or being drawn into terrorism should also be considered</p>
D	<p><b>Drug Education Liaison Treatment Agency (DELTA)</b> is the North Lincolnshire young people's drug and alcohol service who provide support to those aged 19 and below</p> <p><b>Designated Safeguarding Lead (DSL)</b> is a job role primarily used within school and educational settings whose main responsibilities are to ensure that safeguarding policies are followed and to act as the first point of contact for any safeguarding or child protection issues</p>
F	<p><b>Families are Safe, Supported, Transformed (FaSST)</b> is the targeted family support service in North Lincolnshire</p>
H	<p><b>Hidden Harm</b> can be considered as uncovered and/or unreported abuse of a person or people</p> <p><b>Harmful Sexual Behaviour (HSB) Panel</b> is a multi agency partnership group who work together to improve outcomes for children who express sexual behaviours that are developmentally inappropriate or harmful to themselves or others</p>
I	<p><b>Independent Domestic Violence Advisor (IDVA)</b> provide safety advice and support to high risk victims of domestic abuse</p> <p><b>Integrated Multi-Agency Partnership (IMAP)</b> is a partnership of co-located social work, police, health and education practitioners and supervisors who take contacts and referrals on children where there are safeguarding or protection concerns. They share and analyse information to inform decisions regarding whether a child is in need or in need of protection</p>

# GLOSSARY

K	<b>Kooth</b> is an online emotional and mental health support service that young people in North Lincolnshire aged 11 – 24 can access
L	<b>Life Central</b> is a local website providing emotional, health and wellbeing resources for young people, parents, carers and professionals in North Lincolnshire
M	<p><b>Multi-Agency Risk Assessment Conference (MARAC)</b> is a victim focused meeting where information is shared on the highest risk cases of domestic abuse between different statutory and voluntary sector agencies</p> <p><b>Multi-Agency Looked After Partnership (MALAP)</b> is a multi-agency group who work together to improve outcomes for children and young people in care and care leavers</p> <p><b>Multi-Agency Child Exploitation (MACE) Meeting</b> is a partnership group who work together to improve outcomes for children and young people who are experiencing and/or at risk of child sexual or criminal exploitation</p> <p><b>Multi-Agency Tasking and Co-ordination (MATAC) Meeting</b> is a domestic abuse, perpetrator focussed, multi-agency meeting which aims to reduce the risk of harm or repeat incidents of domestic abuse and improve the safety of those who are at risk or suffer domestic abuse</p> <p><b>Missing Children's Advocates</b> offer and complete independent return interviews with children who have been missing and share information so that children's welfare is promoted and that they are safeguarded</p>
N	<p><b>Northern Lincolnshire and Goole (NLaG) NHS Foundation Trust</b> is the provider of NHS services through Scunthorpe General Hospital and community services in North Lincolnshire and two other neighbouring local areas</p> <p><b>Not In Our Community (NIOC)</b> is a campaign developed across the Humberside Police force area that helps young people protect themselves and their friends against grooming and child exploitation</p>
O	<p><b>The One Family Approach (OFA)</b> aims to create a system that works for all children, young people and families in North Lincolnshire</p> <p><b>Operation Encompass</b> is a partnership information sharing process between police and schools which enables support to be offered to children and young people living with domestic abuse</p>
R	<p>A <b>Rapid Review</b> is undertaken when the safeguarding partners have agreed that the criteria for a serious child safeguarding case have been met. The Rapid Review enables facts to be gathered, any immediate action to ensure children's safety to be taken and considers the potential for identifying improvements to safeguard and promote the welfare of children. The Rapid Review assists the safeguarding partners to decide what steps they should take next, including whether or not to undertake a local child safeguarding practice review</p> <p><b>Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)</b> is the provider of NHS services and community services in North Lincolnshire</p>
S	<b>Section 11 (Children's Act 2004)</b> places duties on a range of organisations, agencies and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children
T	<b>The Blue Door Support Service</b> is a local Community Interest Company that provides specialist domestic abuse services for victims and children aged 16 to 17 years

**Contact and follow us:**



[mars@northlincs.gov.uk](mailto:mars@northlincs.gov.uk)

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**North  
Lincolnshire  
Council**



Report of the Director: Partnerships and Governance

Agenda Item 11  
Meeting 16 November 2020

## NORTH LINCOLNSHIRE COUNCIL

### HEALTH AND WELLBEING BOARD

#### HEALTH AND WELLBEING BOARD – GOVERNANCE ARRANGEMENTS FOR OUTBREAK MANAGEMENT

##### 1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To enable the Health and Wellbeing Board to consider possible revisions to the Memorandum of Understanding to ensure that the Board's governance arrangements are compatible with outbreak management requirements.
- 1.2 To consider further measures to ensure that local arrangements are robust, ensure suitable oversight, and minimise the risk of Covid-19 outbreak.

##### 2. BACKGROUND INFORMATION

- 2.1 The Health and Wellbeing Board operates in accordance with its Memorandum of Understanding (MoU). The MoU is intended to act as a 'living document' which changes according to local need and circumstances.
- 2.2 The Board recently considered two relevant reports: Covid-19 Outbreak Prevention and Outbreak Management Framework and Outbreak Management Delivery Plan in June 2020 (minute 315 refers) and Covid-19 Outbreak Management & Prevention in September 2020 (minute 324 refers). These set out arrangements to deal with the pandemic on a regional and local basis, and both reports were agreed by the Board.
- 2.3 The Health and Wellbeing Board acts as the local member-led and democratically accountable body for local arrangements to prevent outbreaks of Covid-19. The operational and technical implementation and delivery of the Outbreak Management arrangements is the responsibility of the Health Protection & Outbreak Management Group, which meets weekly.

2.4 The Board's MoU is attached as Appendix 1. The MoU has been amended to reflect the arrangements required for local management and prevention set out in the North Lincolnshire Outbreak Management Delivery Plan.

2.5 The Board are also asked to consider further proposed measures to strengthen local arrangements. These are set out in section 3.

### **3. OPTIONS FOR CONSIDERATION**

3.1 The proposed revisions to the MoU are highlighted in red ink in Appendix 1. The Board is asked to consider these.

3.2 The Board may also wish to consider whether it should meet more regularly during the pandemic, and whether additional stakeholders should be invited to Board meetings to contribute.

### **4. ANALYSIS OF OPTIONS**

4.1 Updating the MoU would ensure that the Board's operation reflects the ongoing local response to the pandemic.

4.2 Revising the Board's membership and temporarily meeting more regularly would ensure that the Health and Wellbeing Board's central role as the local member-led and democratically accountable body for local arrangements to prevent outbreaks of Covid-19 would be effective.

4.3 The Board may wish to consider alternative working practices or other revisions to the MoU.

### **5. FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**

5.1 There are no significant resource implications related to the above options.

### **6. OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**

6.1 There are no implications for crime and disorder or equalities related to this report.

6.2 The report proposes improvements to local arrangements which ensure good governance and the effective delivery of the priorities as set out in the Council Plan.

6.3 There are no environmental implications or identified significant risks arising from implementation of the recommendation.

**7. OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

- 7.1 An Integrated Impact Assessment is not considered relevant or proportionate to the recommendations within this report.

**8. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

- 8.1 The report is submitted to enable consultation with Board members.

**9. RECOMMENDATIONS**

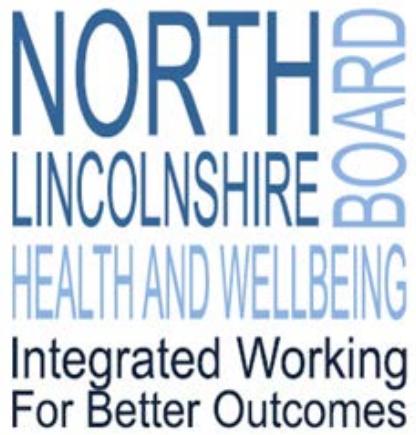
- 9.1 That the proposed amendments in the MoU at Appendix 1 are accepted and implemented.
- 9.2 That the Board consider extending the frequency of its meetings, making such arrangements as necessary.

**DIRECTOR OF GOVERNANCE AND PARTNERSHIPS**

Church Square House  
SCUNTHORPE  
North Lincolnshire  
DN15 6NL  
Author: Becky McIntyre / Dean Gillon  
Date: 29 October 2020

**Background Papers used in the preparation of this report –**

Covid-19 Outbreak Prevention and Outbreak Management Framework and Outbreak Management Delivery Plan - June 2020  
Covid-19 Outbreak Management & Prevention - September 2020



# ***HEALTH AND WELLBEING BOARD***

## ***Memorandum of Understanding***

Version	Date	Author
REVISED MEMORANDUM	11 November 2020	Dean Gillon

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## **1 PURPOSE OF MEMORANDUM OF UNDERSTANDING**

Partnership working lies at the heart of Health and Wellbeing Board arrangements, and this Memorandum of Understanding outlines the Board's commitment to working together to fulfil our key obligations and improve health and wellbeing outcomes for the people of North Lincolnshire.

In North Lincolnshire, the Health and Wellbeing Board is structured to allow the statutory and strategic functions to be undertaken by a small group of senior figures (the Health and Wellbeing Board) and a wider partnership of representatives from many organisations involved in ensuring the health and wellbeing of local residents (The Health and Wellbeing Partnership).

## **2 LEGISLATIVE BASIS FOR HEALTH AND WELLBEING BOARDS**

The Health and Social Care Act 2012, provides the statutory basis for the role and responsibilities of Health and Wellbeing Boards. This places the Health and Wellbeing Board at the heart of local plans to transform health and care and achieve better health and wellbeing outcomes for local people

Secondary legislation and guidance published in February 2013 provides further detail regarding the governance and constitutional arrangements for the Health and Wellbeing Board.

As above, any reference to North Lincolnshire's Health and Wellbeing Board refers to the Health and Wellbeing Board. This strategic group undertakes the statutory functions of the Health and Wellbeing Board. In turn, the Board is both guided by, and supported by, the wider Health and Wellbeing Partnership.

## **3 PRINCIPLES FOR THE HEALTH AND WELLBEING BOARD**

The principles which underpin the work of the Health and Wellbeing Board are:

- Shared leadership and a strategic approach to the health and wellbeing of communities that reaches across all relevant organisations,
- A commitment to identify priorities and to drive real action, genuine integration, and change to improve services and outcomes,
- Parity between Group members in terms of their opportunity to contribute to the Group's strategies and activities,
- Shared ownership of the Group by all of its members (with commitment from their nominating organisations) and accountability to the communities it serves,
- Openness and transparency in the way the Group carries out its work.

## **4 HEALTH AND WELLBEING PARTNERSHIP/BOARD MEMBERSHIP**

The Health and Wellbeing Board is comprised of a number of key partners with the ability to influence services. See Paragraph 5, appendix 2 for details.

The Health and Wellbeing Partnership is a broader stakeholder group which deals with thematic, cross-cutting or complex issues. This group is comprised of all organisations represented at the Health and Wellbeing Board, wider public sector organisations, voluntary and community sector

and business representatives, and can also invite participation in specific activities as deemed appropriate.

## 5 ROLE OF THE HEALTH AND WELLBEING BOARD

The statutory functions of North Lincolnshire's Health and Wellbeing Board are to:

- Assess local needs via the preparation of an Integrated Assessment. In North Lincolnshire, an overarching Integrated Assessment has been developed, which brings together a number of key assessments.
- Develop a shared Joint Health and Wellbeing Strategy (JHWS) to address identified need,
- Encourage integrated working between health and social care commissioners (including providing advice, assistance or other support to encourage arrangements under Section 75 of the NHS act 2006),
- Encourage close working between commissioners of health related services and the Board itself,
- Encourage close working between commissioners of health related services (such as housing and other local government services) and commissioners of health and social care services,
- Assess and publish a Pharmaceutical Needs Assessment,
- Approve the Better Care Fund.

Decision making responsibilities:

- The Health and Wellbeing Board will be able to understand, and take action to tackle inequalities in health and wellbeing, and support local partners to help improve local people's lives,
- The Health and Wellbeing Board will use the Integrated Assessment and the JHWS to set priorities locally, and to plan and implement actions to address national guidance, policy and priorities,
- The Health and Wellbeing Board will be able to consider issues relevant to any partner on the Group, and beyond, joining up the commissioning of health and social care services to improve the health and wellbeing of the community,
- The Health and Wellbeing Board will be the key local body to co-ordinate strategic decisions about how best to improve health and wellbeing, whilst noting that individual organisations represented on the Group retain autonomy for taking decisions on their statutory responsibilities.
- **The Health and Wellbeing board will consider the impact of Health Protection, Health Improvement and Healthcare Public Health in the formation and implementation of plans and strategies**
- The Health and Wellbeing Board will be able make decisions on joint commissioning intentions, where appropriate.

## 6 HEALTH AND WELLBEING BOARD RELATIONSHIPS

Both the Health and Wellbeing Board and the Health and Wellbeing Partnership lie at the heart of the arrangements for improving the health and wellbeing of the population, though its relationship with others will support, challenge and influence its activities.

The Health and Wellbeing Board:

- Has the power to appoint additional members to the Health and Wellbeing Board as appropriate and to exercise their functions jointly (with other Health and Wellbeing Boards) subject to Full Council agreement,
- Has the power to request information for the purposes of enabling or assisting its performance of functions from any Health and Wellbeing Board members or their representatives,
- Has a duty to prepare a local assessment of needs (the Integrated Assessment) in relation to the local authority area and have regard to guidance from the Secretary of State,
- Has a duty to prepare a Joint Health and Wellbeing Strategy (JHWS) for meeting needs identified in the Integrated Assessment in relation to the local authority area and to have regard to guidance from the Secretary of State,
- Has a duty to involve third parties in the preparation of the Integrated Assessment and JHWS (including local Healthwatch and people living and working in the area),
- Has a duty to have regard of the NHS Act 2006 and the NHS England mandate in developing the Integrated Assessment and the JHWS,
- Has a duty to encourage integrated working,
- Has a power to give its opinion to the local authority on whether the authority is discharging its duty to have regard to the Integrated Assessment and JHWS,
- Has a duty to be consulted on the Clinical Commissioning Group (CCG) Draft Commissioning Plan, including consideration whether the plan has taken proper account of the JHWS,
- Has a duty to provide opinion on whether the CCG commissioning plan has taken account of the JHWS and has a power to write to NHS England with that opinion (copy must also be supplied to CCG)
- Has a power to provide NHS England with an opinion on whether a published commissioning plan has taken proper account of the JHWS,
- Has a duty to review how far the CCG has contributed to the delivery of the JHWS,
- Has a duty in conducting the performance assessment, to assess how well the CCG has discharged its duty to have regard to the Integrated Assessment and the JHWS, and express a view to NHS England on the CCG contribution to the delivery of the JHWS,
- Can raise concerns about the engagement and leadership of the local NHS in respect of Safeguarding arrangements,
- Will receive a copy of the LSCB and LSAB annual reports,
- Will act as the local member-led and democratically accountable body for local arrangements to prevent outbreaks of Covid-19 and other serious threat to the health and wellbeing of residents.
- Will maintain an oversight of the COVID-19 Outbreak Management delivery plan (as per Appendix 1 of the delivery plan) and receive regular reports from any sub-committee or relevant working group.

## **7 GOVERNANCE AND ACCOUNTABILITY ARRANGEMENTS**

The Health and Wellbeing Board works within an agreed governance and accountability partnership framework which is responsible for the delivery of the JHWS and the underpinning statutory requirements and local priority actions.

### **HEALTH AND WELLBEING BOARD - GOVERNANCE**

The Health and Wellbeing Board is the key strategic body for a number of statutory responsibilities across North Lincolnshire (see paragraphs 5 and 6). The Health and Wellbeing Board is also the main accountable body to ensure progress on identified local and national priorities, to promote integrated working, and for ensuring that the JHWS is implemented across North Lincolnshire.

Whilst the Health and Wellbeing Partnership is a wide forum of representatives of key organisations, the Board has been formally established as a committee of the local authority in accordance with the Health and Social Care Act 2012. The Council's Constitution and Procedure Rules will apply in relation to the working of the Board.

The terms of reference, working arrangements, and membership for the Health and Wellbeing Group are set out in Appendices 1, and 2.

### **OVERVIEW AND SCRUTINY PROCESSES**

The local authority overview and scrutiny process will have a role in assessing the work of the Health and Wellbeing Board in undertaking the Integrated Assessments and JHWS in terms of the quality of processes and products. The relevant scrutiny panel may also wish to consult with members of the Health and Wellbeing Partnership as part of this work.

### **STRATEGIC PARTNERSHIP LINKS**

The Health and Wellbeing Board has agreed a Partnership Working Protocol setting out the strategic links between the Group and the Safer Neighbourhoods Partnership (SNP), Multi Agency Resilience and Safeguarding Board (MARS) and the Local Safeguarding Adults Board (LSAB). There is a collective responsibility for making other appropriate links, through relevant members of the Health and Wellbeing Board.

## **APPENDIX 1 – HEALTH AND WELLBEING BOARD TERMS OF REFERENCE**

- a) To prepare a Joint Strategic Assessment (Integrated Assessment) and Joint Health and Wellbeing Strategy (JHWS), which is a duty of local authorities and Clinical Commissioning Groups.
- b) **To consider the impact of Health Protection, Health Improvement and Healthcare Public Health within the scope of the Health and Wellbeing Board.**
- c) To encourage integrated working between health and social care commissioners, including providing advice, assistance or other support to encourage arrangements under Section 75 of the National Service Health Act 2006 (i.e. lead commissioning, pool budgets and/or integrated provision) in connection with the provision of health and social care services.
- d) To encourage close working between commissioners of health related services and the Group itself.
- e) To encourage close working between commissioners of health related services (such as housing and many other local government services) and commissioners of health and social care services.
- f) To consider other health related functions which are linked to the functions detailed above and to the overall objective of improving the health and wellbeing of the citizens of North Lincolnshire

*N.B. Subject to ratification of the Council's Constitution and Procedure Rules*

## **APPENDIX 2 - HEALTH AND WELLBEING BOARD AND THE HEALTH AND WELLBEING PARTNERSHIP WORKING ARRANGEMENTS**

### **1. PURPOSE**

The Health and Wellbeing Board shall be a forum where key leaders work together to improve the health and wellbeing of their local population and reduce health inequalities.

The Health and Wellbeing Partnership shall be an innovative, multi-agency working group of those who can play a role in improving the health and wellbeing of local residents. It plays a role in collaboration, consultation, joint-working, integration, and addressing complex or cross-cutting issues. Its relationship with the Health and Wellbeing Board shall be to inform, guide, challenge, seek practical solutions, and move from strategy to implementation.

Both groups may refer items to the other, for attention or action, as deemed appropriate. This recognises the different roles that the two bodies play. This will be co-ordinated via the lead officer, feeding back when the issue has been considered.

### **2. FUNCTIONS**

The duties and functions of the Health and Wellbeing Board are detailed in the Memorandum of Understanding and in the Council's Constitution and Procedure Rules.

### **3. VALUES**

Both the Health and Wellbeing Board and the Health and Wellbeing Partnership are committed to the Nolan Committee Principles of Openness; Integrity; Accountability; Selflessness; Honesty; Leadership; and Objectivity.

### **4. GOVERNANCE AND ACCOUNTABILITY**

The Health and Wellbeing Board is a fully constituted committee of the council and as such, it can make decisions regarding joint commissioning intentions.

The Memorandum of Understanding provides more detail regarding the governance, accountability and partnership arrangements.

### **5. MEMBERSHIP**

The membership of the Health and Wellbeing Board shall be comprised of the following:

- The Chair to be an elected member of, and to be appointed by, North Lincolnshire Council.
- **The Chief Executive, North Lincolnshire Council**
- **The Deputy Chief Executive, North Lincolnshire Council**
- The Director: Adults and Community Wellbeing
- The Director: Children and Community Resilience

- The Director: Public Health
- A Representative of Healthwatch North Lincolnshire
- Three representatives of North Lincolnshire CCG (the CCG Chair, the Chief Operating Officer and Director Nursing and Quality). One CCG representative will adopt the position of Vice-Chair. Only one CCG member (the Vice-Chair) is entitled to a vote (see paragraph 9).
- Two other elected members of, and to be appointed by, North Lincolnshire Council (Proportionality need not apply).
- A representative from Humberside Police (non-voting),
- A representative from Northern Lincolnshire & Goole NHS Foundation Trust (non-voting),
- A representative from Rotherham, Doncaster & South Humber NHS Foundation Trust (non-voting).
- A representative from Humberside Fire and Rescue
- A representative from Public Health England (non-voting) (TBC)
- A representative from NHS England / NHS Improvement (non-voting) (TBC)

The membership of the Health and Wellbeing Partnership shall be comprised of the members of the Health and Wellbeing Board and the following:

Locally, representatives from non-statutory partners including:

- Local authority (over and above statutory requirements)
- CCG (over and above statutory requirements)
- Voluntary and Community Sector
- Health Care Providers
- Ongo
- Further Education and Work Based Learning Sector
- Humberside, Lincolnshire and North Yorkshire Community Rehabilitation Company
- Humberside National Probation Service
- Job Centre Plus
- Service Users (adults and young people)
- Any other individual or group as deemed appropriate.

All members have equal parity of esteem. Membership of the Partnership and the Board shall be reviewed on an annual basis and in accordance with statute. However, if there is a requirement or a request to appoint further members, in year, this must be done in consultation with the Board.

Members of the Health and Wellbeing Board shall:

- Be of sufficient seniority within their organisation to be able to comment on debates at the Group and make decisions committing their organisation to taking action and providing resources through the JHWS
- Be able to answer for their organisation's delivery of their commitments in the JHWS
- Nominate a single named substitute to represent them when required (on an exceptional basis) (at these times, each substitute will be afforded the same rights on the Group as the person they are deputising for during the period in question)
- Undertake an induction programme (to clarify roles and responsibilities and include briefing regarding Code of Conduct)

(See appendix 3 for North Lincolnshire Health and Wellbeing Board membership)

## **6. CHAIR**

The Chair will:

- Be able to speak with authority on behalf of the Health and Wellbeing Board as a whole and ensure each of the members contributes fully to its work
- Have a vital role in making sure the Health and Wellbeing Board operates effectively
- Act objectively and distinguish their role as Chair from any other role.

The Chair will be an elected member, to be appointed by North Lincolnshire Council.

## **7. VICE-CHAIR**

The Vice Chair will be nominated by North Lincolnshire CCG. The Vice-Chair shall be named as Dr Faisel Baig until notified to the contrary.

The Vice Chair shall act as the Chair whenever the Chair is unavailable and take account of the responsibilities of the Chair as identified in 6. above.

## **8. QUORUM**

The Board will not go ahead until at least one third of its voting members are present in accordance with Procedure Rule 1.34 of the Council's Constitution.

## **9. VOTING**

The Board will be encouraged to make decisions based on a consensus model. All Group members, both statutory and non-statutory, shall be included in debate and decision making.

Where there is no consensus, the statutory members will each have one vote. If statutory members are substituted, the substitutes will be entitled to vote on members' behalf. If the voting process does not illicit a majority vote, the Chair (or Vice-Chair if the Chair is unavailable) will have the casting vote.

Statutory members are:

- One elected member (the Chair)
- One CCG representative (the Vice-Chair)
- The Director: Public Health
- The Director: Adults & Community Wellbeing
- The Director: Children & Community Resilience
- One Healthwatch North Lincolnshire representative

## **10. DECLARATIONS OF INTEREST**

As a committee of the Council, all voting members of the Health and Wellbeing Board will be subject to the Council's Code of Conduct for Elected Members when acting as a member of the Group and will be subject to disclosable pecuniary interests and other interests.

## **11. DIVERSITY AND EQUALITY**

Partners recognise that each have our own unique needs, skills, qualities and abilities and believe this diversity must be valued and there is a strategic intention that services meet everyone's needs. It will therefore treat everyone as an individual. It will not unfairly discriminate on any grounds, such as: ability and disability, age, appearance, background, caring responsibilities, cultural behaviour, religious belief, gender, geographic location, health status, marital status, personality, political affiliation, sexual orientation or socio-economic status.

Both the Health and Wellbeing Partnership and the Health and Wellbeing Board will comply with the Public Sector Equality Duty (April 2011) which requires public authorities to have due regard to the need to:

- eliminate discrimination, harassment, victimisation and any other conduct prohibited by or under the Equality Act;
- advance equality of opportunity between those who share a protected characteristic and those who do not; and
- foster good relations between people who share a relevant protected characteristic and those who do not

## **12. FUNDING AND RESOURCES**

The work of the Health and Wellbeing Partnership and the Health and Wellbeing Board will be managed within existing resources.

As part of this, partners have committed in kind resources to ensure both groups have sufficient support capacity to drive forward their day to day business in delivering its functions and provide administrative and partnership support across the partnership framework.

Decisions relating to the reconfiguration/reallocation of resources to ensure that both groups deliver against its priorities may be made by senior officers as appropriate.

### **13. OFFICERS TO THE BOARD**

As a committee of the Council, the organisation and management of both the Health and Wellbeing Board and the Health and Wellbeing Partnership is the responsibility of Legal and Democracy, Governance & Partnerships, North Lincolnshire Council.

### **14. FREQUENCY OF BOARD MEETINGS**

The Health and Wellbeing Board shall meet formally as a **minimum approximately** every **two** months at a publicised, accessible venue, unless the Group agrees that an additional meeting is required for any reason, or that a meeting should be cancelled or postponed.

The Chair shall decide whether more or fewer meetings are necessary in accordance with the Procedure Rule 1.33 of the Council's Constitution.

### **15. CHAIR'S AGENDA BUSINESS MEETING**

A Chairman's Agenda Business Meeting will be convened prior to each Health and Wellbeing Board.

The Chair's Agenda Business Meeting shall involve the Chair, the Vice Chair, Officers to the Board and any relevant person that the Chair sees fit to include.

### **16. DEVELOPMENT SESSIONS**

There will be opportunities for all members to contribute to development sessions which will be scheduled as required over and above the Chair's agenda business meetings and formal meetings. Typically, this will involve invitations to all members of the Health and Wellbeing Partnership (and potentially wider).

### **17. AGENDA AND REPORTS**

All stakeholders are responsible for ensuring relevant papers are considered by the Health and Wellbeing Board.

Agenda items and papers should be sent through to an appointed Officer to the Board in accordance with the agreed scheduling arrangements. Reports should follow the established democratic report template and all papers will be distributed electronically prior to the Group meeting.

As part of the requirements for openness and transparency, the papers will be published in accordance with the Access to Information Requirements of the Local Government Act 1972.

## **18. SUPPORT TO LAY MEMBERS**

Where appropriate, pre-meetings and briefings will be arranged with service user representatives before and after each Health and Wellbeing Partnership in order that they can familiarise themselves with papers and influence agenda items.

## **19. PUBLIC ACCOUNTABILITY**

As a committee of the Council, the Health and Wellbeing Board is subject to the same requirements of openness and transparency as other Council committees and the Access to Information Regulations apply in relation to making copies of agendas and report open to inspection by the public. Public engagement will be in accordance with established processes.

In addition, the Freedom of Information Act 2000 makes provision for a general right of access to information held by public bodies.

## **20. REVIEW DATE**

As part of the annual review of the MoU, these terms of reference will also be reviewed on an annual basis.



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