

Public Document Pack

NORTH LINCOLNSHIRE COUNCIL HEALTH AND WELLBEING BOARD

21 MARCH 2022 – 2PM
CHURCH SQUARE HOUSE, 30-40 HIGH STREET, SCUNTHORPE

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 19 November 2022 (Pages 1 - 6)
5. Forward Plan and 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. COVID-19 - Outbreak Management and Control - Report by the Deputy Chief Executive and the Director of Public Health (Pages 7 - 12)
8. COVID-19 - general update by the Director of Public Health

Integrated Working

9. Integrated Care System Update - Report by the Chief Operating Officer, NLCCG (Pages 13 - 18)
10. SEND Annual Report and Inclusion – Report by the Director of Children and Families (Pages 19 - 44)
11. Joint Health & Wellbeing Strategy – delivery and progress – Report by the Director of Public Health (Pages 45 - 50)

Statutory documents, strategies etc. required to be considered or signed off by the Board

12. CMARS Annual Report - Report by the Director of Children & Families (Pages 51 - 100)

13. Local Safeguarding Adults Board Annual Report 2020/21 - Report by the Safeguarding Adults Board Independent Chair. (Pages 101 - 138)

Non-Statutory Business

14. Update on the Health and Wellbeing Board's Memorandum of Understanding - Report by the Director of Public Health (Pages 139 - 154)
15. Date and time of next meeting.
16. Any other items which the Chairman decides are urgent by reason of special circumstances which must be specified.

Public Document Pack Agenda Item 4

NORTH LINCOLNSHIRE COUNCIL HEALTH AND WELLBEING BOARD

19 November 2021

- Present -

Cllr R Waltham MBE (Chairman), F Ajayi, AM Brierley, H Davis, S Green, Cllr R Hannigan, T Lindfield, K Pavey, A Seale and P Thorpe

The Council met at Conference Room, Church Square House, 30-40 High Street, Scunthorpe.

409 **WELCOME AND INTRODUCTIONS**

The Chairman welcomed all those present to the meeting and invited all attendees to introduce themselves.

410 **SUBSTITUTIONS**

There were no substitutions noted.

411 **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.

412 **TO APPROVE AS A CORRECT RECORD THE MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 27 SEPTEMBER 2021**

Resolved - That the minutes of the meeting of the Health and Wellbeing Board, held on 27 September 2021, be approved as a correct record.

413 **FORWARD PLAN AND ACTIONS FROM PREVIOUS MEETINGS**

The Director: Governance and Partnerships confirmed that the Forward Plan was up to date, and that all forthcoming actions were timetabled.

Resolved – That the situation be noted.

414 **QUESTIONS FROM MEMBERS OF THE PUBLIC**

There were no questions from members of the public.

415 **COVID-19 - OUTBREAK MANAGEMENT AND CONTROL**

The Deputy Chief Executive and Executive Director: Commercial, and the Director of Public Health submitted a report to the board on North

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Lincolnshire's Outbreak Prevention and Management Plan (LOMP). This plan had been written to demonstrate to the public the processes by which Covid 19 outbreaks are being prevented and managed.

The Deputy Chief Executive explained that surveillance takes place daily, and published on an updated Covid dashboard, available to the public.

It was confirmed that the LOMP's key themes were based on the desired outcomes, the measures by which success will be recognised, the actions required, and the issues and risks. Progress against the actions was indicated for each theme.

Resolved - That the Health and Wellbeing Board note the Local Outbreak Management Plan, as outlined in the report.

416 COVID-19 - VACCINATION PROGRAMME UPDATE

The Chief Operating Officer, North Lincolnshire CCG, gave a detailed presentation, updating the Health and Wellbeing Board on the latest position of the Covid-19 Vaccination Programme. The report highlighted the sources of data that had informed the briefing.

The Chief Operating Officer described the uptake rate for the age cohorts, including full vaccination percentages, and those who had also received a booster. The rates in Care Homes were also outlined, along with a description of how Phase 3 of the Vaccination Programme was being planned and delivered in communities.

The Chief Operating Officer explained how those aged 12-15 were also being offered a vaccination, and described current take-up rates and plans to improve these. An overview of how communications were being delivered to residents was given.

The Board discussed the report further, highlighting the excellent ongoing work to prioritise Children in Care, and considering how the vaccination efficacy could be improved when delivered alongside public health measures to improve people's general health and wellbeing.

Resolved - That the Health and Wellbeing Board note the contents of the Vaccination Programme presentation.

417 COVID-19 EPIDEMIOLOGY

The Director of Public Health delivered a detailed presentation on the COVID-19 epidemiological situation in North Lincolnshire. This included the total number of recorded cases, the current R Value for Yorkshire & the Humber, the rolling 7-Day Case Rate, and case rates by demographics.

The Board discussed the presentations further, highlighting the need to continue supplying information to local residents.

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Resolved - That the Health and Wellbeing Board note the contents of the Epidemiology presentation.

418 JOINT HEALTH AND WELLBEING STRATEGY

The Director of Public Health submitted a report which set out a summary of the Joint Health and Wellbeing Strategy (2021-26), and updated the Board on progress in delivering the strategic direction and principles.

The Director noted that a key asset in North Lincolnshire was the strong network of partnership groups with established relationships and programmes of work. These groups were well placed and motivated to embed delivery of the JHWS within their work programmes. Discussions with lead officers had been positive, and a strong foundation for the approach to delivery across a range of strategic partnerships had been put in place.

An explanation of which groups would help deliver which priority themes was given, alongside a discussion of opportunities to embed this work.

The Board discussed this approach further, highlighting the need to incorporate the aims of the Strategy in everything that each partner does. A number of questions were asked, including on the gathering and use of intelligence, links to new Integrated Care System (ICS) governance, and how improvements will be measured and overseen.

Resolved – (a) That the Health and Wellbeing Board note the report, and support the proposed delivery and monitoring arrangements, and (b) that a further report be brought to a future Board meeting, clarifying how work will be measured, timescales for implementation, and how the approach will be embedded across all partners, including the ICS.

419 INTEGRATED CARE SYSTEM - PLACE DEVELOPMENT PLAN.

The Chief Operating Officer, North Lincolnshire CCG, submitted a report updating the Board on progress of development of the Place Based Partnership within the developing ICS arrangements and the output of the self-assessment that had been undertaken to identify areas of strength and further development in the Partnership.

The Chief Operating Officer confirmed that an ICS Chair had been announced, and the process for the appointment of the ICS Chief Executive had been concluded and passed to the Secretary of State for a decision. Other senior appointments would then be made, and all other staff TUPE'd over to the new organisation.

A detailed explanation of the established and emerging governance structures was given, and it was confirmed that a local 'place based' partnership would be established in shadow form in the coming weeks and

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months.

The Chairman led a discussion on relevant issues, including how new structures would work alongside existing partnerships, membership of the Place Based Partnership, and how it could be ensured that services would be planned and delivered holistically, instead of with a strict clinical model. Members highlighted the need to move to a preventative and supportive model of wellbeing, and the required focus on ensuring equality of access and service.

Resolved – (a) That the report be noted, (b) that action be taken to ensure the maintenance of all current or planned partnerships in order to ensure that effective joint work can continue seamlessly, and (c) that a Board Development Session be arranged with the ICS Chair and senior colleagues at the earliest possible date.

420 INTEGRATED WORKING - ADULTS. BETTER CARE FUND.

The Director: Adults and Community Wellbeing, and the Chief Operating Officer, submitted a joint report requesting that the Health and Wellbeing Board formally agree and sign-off the North Lincolnshire Better Care Fund Plan 2021/22.

The report described that the Better Care Fund (BCF) was a national programme which covered both the NHS and Local Government and encouraged integrated, joined up working between health and social care to improve the health and wellbeing of local residents. CCG's and Local Authorities were required to enter into a pooled budget arrangement and agree an integrated spending plan for the Better Care Fund.

The report set out the national conditions, and described how plans were required on how grant funding would be spent in order to meet adult social care needs, reduce pressure on the NHS, support hospital discharge, and support the local care provider sector.

Resolved – That the Health and Wellbeing Board formally agree and sign off the 2021-22 Better Care Fund Plan.

421 PHARMACEUTICAL SUPPLEMENTARY STATEMENTS

The Director of Public Health submitted a report seeking approval from the Health and Wellbeing Board to delegate authority to consider, approve and publish pharmaceutical needs assessment supplementary statements to the Director of Public Health (DPH).

It was proposed that the Director would escalate any supplementary statement to the Board where this was deemed appropriate.

Resolved - (a) That the Board grant the Director of Public Health (DPH)

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delegated authority to consider, approve and publish pharmaceutical needs assessment supplementary statements, in consultation with the Chairman and relevant Cabinet member, and (b) that the DPH update the Health and Wellbeing Board on outcomes of any decisions relating to supplementary statements, where appropriate.

422 DATE AND TIME OF NEXT MEETING - 17 JANUARY 2022, 2PM.

It was confirmed that the next meeting of the Health and Wellbeing Board would be at 2pm on 17 January 2022.

423 ANY OTHER ITEMS WHICH THE CHAIRMAN DECIDES ARE URGENT BY REASON OF SPECIAL CIRCUMSTANCES WHICH MUST BE SPECIFIED.

There was no additional or urgent business.

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NORTH LINCOLNSHIRE COUNCIL

HEALTH & WELLBEING BOARD

OUTBREAK MANAGEMENT AND CONTROL UPDATE

1.0 OBJECT AND KEY POINTS IN THIS REPORT

1.1 The purpose of this report is to update the Health and Wellbeing Board on:

- The implications of the government's living with Covid plan.
- Development of Greater Lincolnshire public health's living safely with Covid-19 plan.
- Progress report against the six key themes from the Local Outbreak Prevention and Management plan (LOMP).

2.0 BACKGROUND INFORMATION

- 2.1 On 21 February the government published their living with Covid-19 plan for removing the remaining legal restrictions while protecting people most vulnerable to Covid-19 and maintaining resilience. This report summaries the key impactions of the government's plan.
- 2.2 North Lincolnshire's Local Outbreak Management Plan (LOMP) is based on six key themes which are essential to preventing outbreaks, breaking viral transmission and reducing prevalence of Covid-19. The implementation of LOMP is overseen by the Health Protection and Outbreak Management Group (HPOM). This report provides a 'position statement' on progress against each of the key themes, based on the latest HPOM meeting of 4 March.
- 2.3 Following the recent inception of Greater Lincolnshire public health team, work has now commenced on developing a collective approach to health protection. The Greater Lincolnshire model provides more opportunity to improve capacity, resilience and use of specialist resources across the combined authorities. This report updates members on the key features of the Greater Lincolnshire plan.

3.0 THE GOVERNMENT'S LIVING WITH COVID-19 PLAN

- 3.1.1 The government published the 'Living with Covid Plan' on 21 February. The plan outlines when the remaining legal restrictions will be removed.

3.1.2 The strategy marks a shift in approach to how England responds to the pandemic away from legal restrictions to one based on personal responsibility to enable the country to return to some form of normality. The Government's plan recognises that the Covid-19 virus has not gone away therefore surveillance systems and plans for contingency measures will remain in place.

3.1.3 The Government's objectives in the next phase of the Covid-19 response are to enable the country to:

- Manage Covid-19 like other respiratory illnesses.
- Minimise mortality and retain the ability to respond if a new variant emerges
- Ensure the health and social care system does not become overwhelmed

3.1.4 To meet these objectives, the Government will structure its ongoing response around four key principles:

1. **Living with Covid-19:** removing domestic restrictions while encouraging safer behaviours.
2. **Protecting people most vulnerable to Covid-19:** including deploying targeted testing.
3. **Maintaining resilience:** ongoing surveillance, contingency planning, and the ability to reintroduce key capabilities such as mass vaccination and testing in an emergency.
4. **Securing innovations and opportunities:**

3.2 Key changes and implementation dates:

- **From 21 February:**
 - Removing the guidance for staff and students in most education and childcare settings to undertake twice weekly asymptomatic testing.
- **From 24 February:**
 - Remove the legal requirement to self-isolate following a positive test; people testing positive will be advised to isolate.
 - Fully vaccinated close contacts and people aged under 18-year-old will no longer be required to test or isolate.
 - End of self-isolation support; end routine contact tracing.
 - End legal requirement for employees to inform their employers about positive tests.
- **From 24 March:**
 - Remove Covid provisions within statutory sick pay.
- **From 1 April**
 - No provision for free universal symptomatic and asymptomatic testing for the general public in England (testing will still be available for high-risk groups and social care staff).
 - Remove the current guidance on voluntary Covid-status certification and Covid-19 passports.
 - The Government will update guidance setting out the ongoing steps that

people with Covid-19 should take to minimise contact with other people.

- **From 1st April (workplace specific)**
 - Guidance to the public and to businesses will be consolidated in line with public health advice.
 - Removal of the health and safety requirement for every employer to explicitly consider Covid-19 in their risk assessments (employers should continue to consider the needs of vulnerable employees).
 - The existing set of 'working safely' guidance will be replaced with new public health guidance.

4.0 GREATER LINCOLNSHIRE PHUBLIC HEALTH RESPONSE TO LIVING WITH COVID

4.1 In response to the government's strategy, Greater Lincolnshire Public Health have drafted a 'Living Safely with Covid-19' Plan. The plan recognises that, while COVID-19 rates have fallen considerably, the disease has not gone away. There is still a risk of further waves of transmission because of waning immunity and/or the emergence of new variants and mutations. The plan builds on valuable lessons learnt over the pandemic and formalises arrangements for identifying and preventing diseases, controlling diseases, providing resources and providing specialist expertise to meet current and future demands.

5.0 PROGRESS AGAINST LOMP THEMES (based on HPOM meeting 4 March)

5.1 Care Homes

Whilst around half of all care homes in North Lincolnshire are affected by at least one Covid case, the majority of cases relate to staff members. The most important measure is the risk of harm to residents and link to hospitals. Currently, the vast majority of care homes do not have any COVID positive residents which suggests that infection prevention control measures, are working effectively. We are waiting national guidance to be updated on visiting and testing within care homes

5.2 Educational Settings

The number of pupils and staff members testing positive has significantly decreased since January and we have not experienced a spike in cases following schools reopening after half term. In terms of prevention, 61% of 12-15 year-olds have received their first Covid vaccine, this is above the average for Humber, Coast & Vale. The public health team continues to work with schools around infection prevention control, but demand for support has decreases with reduction in cases.

5.3 Local Community Testing and Contact Tracing

Nationally, from 24 February, routine contact tracing will end. Contacts will no longer be required to self-isolate or advised to take daily tests. In view of this local contact tracing provision has been stood-down, but can be reactivated if required. Collection of LFD test kit levels remain for a period of time in 17 venues. LFT test will no longer be free, except for certain vulnerable groups of people.

5.4 Community Update

Community engagement is still active, especially in terms of testing and vaccinations. However, as cases have decreased, there has been less demand for volunteer support and volunteers have started to support other non-Covid priorities.

5.6 Vaccination Program

Over 100,500 booster vaccinations have been administered across North Lincolnshire. The Scunthorpe Vaccination Centres continues to offer booked and walk-in appointments and outreach sessions continue to take place 2 days a week. Clinics continue within PCN sites for vaccination to the clinically at risk 5-11 age cohort, and children within this age group who reside within a household where someone is immunosuppressed. We are continuing to plan for the next steps for the vaccination programme.

5.7 High Risk Settings

The test and trace data sources used to proactively respond to outbreaks in workplaces have ceased due to that element of work being discontinued. However, we continue to receive reports from some businesses directly. In line with falling Covid rates, cases within businesses have also continued to decline. We continuing to liaise with UKHSA to monitor possible local outbreaks. The statutory responsibility and funding are now with UKHSA.

6.0 OPTIONS FOR CONSIDERATION

6.1 The Health and Wellbeing Board is asked to consider this report and note:

- The government's strategy to remove the remaining Covid-19 restrictions.
- The work undertaken by Greater Lincolnshire Public Health's team to develop a 'living with Covid-19' plan.
- Progress by HPOM to deliver the themes within the local outbreak management plan.

7.0 ANALYSIS OF OPTIONS

7.1 The work undertaken by HPOM ensures that effective arrangements are in place to help reduce the impact of Covid-19 on our communities and, in particular, vulnerable people. A clear focus on protecting the most vulnerable means that we are reducing harm and reducing impact on the healthcare system.

7.2 The development of a Greater Lincolnshire living safely with covid plan will create effective economies of scale by combining the skills, knowledge and resources from across all there local authorities. This will improve the resilience of each authority and provide a more robust approach to business continuity and outbreak and prevention.

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

8.1 None

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

9.1 None

10.0 OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)

10.1 Not relevant at this stage.

11.0 OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

11.1 Not relevant for this report

12.0 RECOMMENDATIONS

12.1 That the Health and Wellbeing Board notes:

- Implication of the government's strategy to remove the remaining Covid-19 restrictions
- The work undertaken by Greater Lincolnshire Public Health's team to write a 'living with Covid-19' plan
- Progress by HPOM to deliver the themes within the local outbreak management plan

DEPUTY CHIEF EXECUTIVE
DIRECTOR OF PUBLIC HEALTH

Church Square House SCUNTHORPE
North Lincolnshire
DN15 6NR

Authors: Steve Piper

Date:- 09 March 2022

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Report of the **Chief Operating Officer, North Lincolnshire CCG, Alex Seale**

Agenda Item

Meeting 21 March 2022

NORTH LINCOLNSHIRE COUNCIL

Health and Wellbeing Board

Integrated Care System Update

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 The report provides an update on the establishment of the ICS and recent appointments to the Integrated Care Board ICB and the progress of the Health and Care Bill through Parliament
- 1.2 The report also provides an update on the wider ICS architecture including the establishment of the Integrated Care Partnership (ICP), Provider Collaboratives and Place based arrangements.
- 1.3 An update is also included on the development the North Lincolnshire Place Partnership as a sub-committee of the ICB and the good progress that has been made continuing to develop integrated arrangements at Place.

2. BACKGROUND INFORMATION

2.1 Integrated Care Systems (ICSs) are a partnership between the organisations that provide health and care needs across an area, coordinate services and plan in a way that improves population health and reduce inequalities between different groups. The NHS Humber Coast and Vale Integrated Care System was established in 2016 and comprises 28 organisations from the NHS, local councils, health and care providers and voluntary, community and social enterprise (VCSE) organisations.

2.2 The Health and Care Bill currently going through Parliament sets out plans to put ICSs on a statutory footing. The proposals within this Bill mean that each ICS will be led by an NHS Integrated Care Board (ICB), an organisation with responsibility for NHS functions and budgets, and an Integrated Care Partnership (ICP), a statutory committee bringing together all system partners to produce a health and care

strategy. When ICBs are legally established, Clinical Commissioning Groups (CCGs) will be dissolved.

2.3 It was originally expected that these changes would come in to effect in April 2022. However, to allow sufficient time for the remaining parliamentary stages, a new target date of 1 July 2022 has been agreed for new statutory arrangements to take effect and Integrated Care Boards (ICBs) to be legally and operationally established. The ICS will be known as the Humber and North Yorkshire Health and Care Partnership as the once ICB shadow arrangements are implemented from 1st April 2022.

2.4 Subject to the passing of the Health and Care Bill, ICBs will be directly accountable for NHS spend and performance within each ICS. They will take on the NHS planning functions currently held by Clinical Commissioning Groups (CCGs), as well as some held by NHS England. Ahead of its establishment, the ICS has appointed Sue Symington as Designate Chair and Stephen Eames CBE as Designate Chief Executive. Board appointments have now also been made to the following roles: Designate Chief Operating Officer - Amanda Bloor, Designate Executive Director of People – Jayne Adamson, Designate Executive Director of Finance – Jane Hazelgrave, Designate Executive Director of Nursing & Quality - Teresa Fenech, Designate Executive Director of Clinical and Professional Services – Nigel Wells. Designate Executive Director of Corporate Affairs - Karina Ellis and Designate Executive Director of Communications, Marketing and Public Relations – postholder to be announced

In addition to the executive team, two independent non-executive directors have been appointed – Stuart Watson (Non-Exec Director and Chair for Audit) and Mark Chamberlain (Non-Exec Director and Chair of the Remuneration Committee). Both will start immediately and will help shape a long-term viable plan for the delivery of functions, duties and objectives of the ICB and for the stewardship of public money

Integrated Care Partnership (ICP)

ICPs will be responsible for developing an integrated care strategy to set out how the wider health and wellbeing needs of the local population will be met. The responsibilities of the Humber and North Yorkshire ICP will be extended to reflect the core aims of the ICS, including improving our population's health, address inequalities, and contribute to the wider socioeconomic challenges we face, such as unemployment and securing inward investment. It is anticipated that Humber and North Yorkshire ICP will commence operating during the first quarter of 2022/23. This timescale will ensure there is sufficient input from partners and local stakeholders in its development.

Provider collaboratives

Provider collaboratives are arrangements where providers come together to work across the ICS, with a shared purpose, set of priorities and effective decision-making arrangements. These collaboratives are an important part of ICS, working across a range of programmes and assist providers to work together to plan, deliver and transform services. There are four fully established provider collaboratives within the

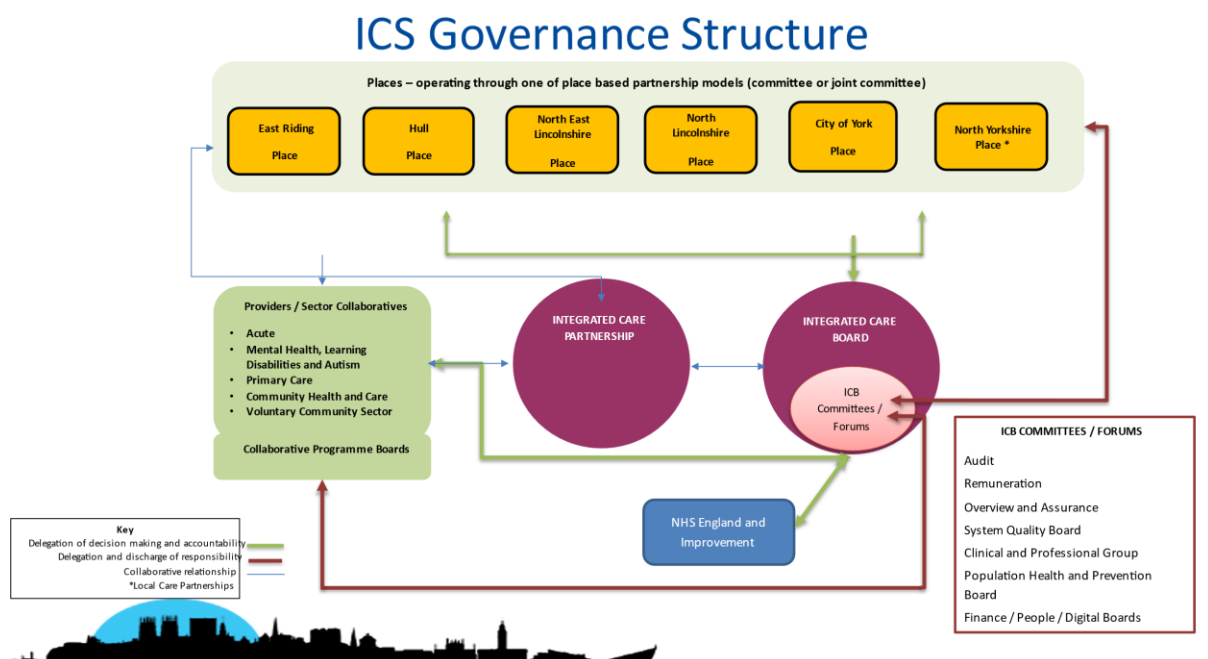
ICS: primary care, community health and care, mental health, learning disability and autism, and acute services. Each of our collaboratives have established CEO leadership and associated support arrangements. There is a development programme underway which is defining the future governance and operating models for the collaboratives.

Place based arrangements

Place Partnership Committees of the ICB are being established for all six places (East Riding of Yorkshire, Hull, North East Lincolnshire, North Lincolnshire, North Yorkshire, and City of York) to enable increased autonomy and delegation of local decision-making to a formal Joint Committee. It is anticipated that these Place Committees will receive delegated duties and resources from the ICB to make decisions about resourcing and services. They will also undertake joint decision-making at a Place level with Local Authority, providers, VCSE and other bodies to improve local services and outcomes, using evidence such as practice/ward level population profiles. Each Place Committee will appoint an overall Place Lead. This will be decided by local leaders.

An NHS Place Director will also be appointed for all six places. This person will be a core member of the Place Partnership will support the delivery of Place and ICB ambitions, manage staff locally and also have delegated financial responsibilities

The Governance Arrangement of the ICS are illustrated in the attached diagram



Progress with Development of Place Arrangements in North Lincolnshire

As previously updated, the Place Partnership (Committee of the ICB) for North Lincolnshire has been established, operating in shadow form. The Place Partnership has had two meeting in workshop format to date which have both been very positive and well attended by partners.

The first meeting provided an update to members on development across the ICS and also the considerable local progress that has already been made to support integration including the roles of the Integrated Adults Partnership, Integrated Children's Partnership and the newly established Population Health Management and Prevention Collaborative. The meeting also considered the progress made with our Place Maturity assessments and discussed membership and terms of reference of the Partnership and discussed values, behaviours and principles for the Partnership. The Partnership also outlined an aspiration to move to legally binding joint committee arrangements by July 22.

The second meeting considered values, principles and aspirations and objectives and benefits of the Partnership in more detail and received a presentation from Hill Dickinson and Partners who have been supporting the Humber Partnership on potential legal models for the establishment of the Partnership.

Next Steps

The Partnership will continue to meet in shadow form ahead of the anticipated move to formal arrangements in July 22. Further work will be undertaken to establish the supporting governance models to support future operation of the Partnership. In conjunction with this is a strong focus on delivery of integrated models of working across the place through the Integrated Adults Partnership, Integrated Children's Partnership and Population Health Management and Prevention Collaborative including as just a few examples:

- A successful away day for Place partners has been held to explore collaborative opportunities in terms of estates and infrastructure development
- Development of a shared intelligence-based approach to population health management and discussions on priority areas supporting the recently refreshed Joint Health and Wellbeing Strategy
- The development of the NL Care & Health Workforce Strategy and associated action Plan
- Integrated approach to management of system pressures through the Pandemic including integrated discharge approaches
- A very successful Covid vaccination programme
- A successful collaborative approach to the recent SEND (Special Educational Needs and Disabilities) inspection

3. OPTIONS FOR CONSIDERATION

3.1 N/A

4. **ANALYSIS OF OPTIONS**

4.1 N/A

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

5.1 N/A

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

6.1 N/A

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

7.1 N/A

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

8.1 No specific conflicts of interest have been declared.

9. **RECOMMENDATIONS**

9.1 The Health and Wellbeing Board is requested to note the update provided on the development of the ICS and the development of Place Partnership Arrangements.

Chief Operating Officer, North Lincolnshire CCG, Alex Seale

Civic Centre/
Church Square House
SCUNTHORPE
North Lincolnshire
Post Code

Author: **Alex Seale**

Date: **7 March 2022**

Background Papers used in the preparation of this report – slides attached

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SEND INCLUSION PLAN ANNUAL REPORT

2019/2020



Foreword

Welcome to our Special Education Needs and Disabilities (SEND) Inclusion Plan Annual Report for 2019-20.

This annual report provides an opportunity to summarise the work we have undertaken to implement our SEND Inclusion Plan 2017-20 and it is also an opportunity to celebrate our shared successes.

The academic year 2019-20 came to be dominated by the sudden and unexpected rise of the Covid-19 pandemic, and this report will show how well placed we were to be able to respond to the radical changes that the pandemic required and enable children, young people and families to achieve good outcomes.

During this year we have been working with our partners to create a new SEND and Inclusion Plan for 2021 to 2024, which you can find by visiting our [SEND local offer](#).



Councillor Julie Reed
Cabinet Member for Children
and Families



Everyone is focused on making a real difference to children, young people and families' lives:

- We have passionate and committed staff who are clear about their purpose and the people they serve.
- We have high quality accessible education and childcare, close to home which meets children's and their families' needs and circumstances, so that parents can go to work knowing their children are safe, cared for and having their emotional and learning needs met.
- We want to ensure the most vulnerable get the support they need so they can thrive.

Children (and their families) are more likely to:

- Be educated in highly inclusive mainstream early years settings, schools or colleges
- Be educated in early years settings, schools or colleges which are judged good or better by Ofsted
- Experience excellent childcare – Ofsted has judged our early years settings as being some of the best in the country
- Feel included in their community

We have strong systems leadership:

- A single strategic plan
- Strength in the system to develop, evaluate and improve practice, provision and outcomes
- Collaborative approaches with a common understanding of how everyone contributes
- Strong effective settings/practitioners support others to improve practice; peer to peer support

We have well-managed transitions:

- Well understood principles which ensure positive transitions
- Intelligence informed approaches. Agreed transition documentation; settings and schools meet to share information pre and post transitions
- Joint work is implicit; settings, schools, colleges, community groups and children's centres share information, strategies, models of support
- Early identification right from the start, midwives who are integral to families accessing early help
- Specific tracking of individual children and vulnerable groups to ensure better transition
- Agreed expectations on focus for 'School Readiness'

We have universal high quality provision:

- Tiered comprehensive training programme with progression routes which reaches across the sector pedagogy; practice; SEND; child development
- Joined up planning and delivery linked to community approaches
- One Family Approach to support for vulnerable families
- Overarching statutory universal provision i.e. sufficiency, health visitors and midwifery services

We have effective integrated working:

- 0-19 practitioners deliver integrated services to families
- Community offer which meets the needs of parents and children
- Phone in/drop ins – SALT (Speech & Language Therapy), Behaviour, Child development
- Staff with high levels of expertise across all services
- Partnership planning and working with voluntary sector to understand and reach families who don't access mainstream services

Our previous SEND and Inclusion Plan for 2017-2020 set out our commissioning intentions for children and young people with SEND. Much has been achieved to improve outcomes for families across a range of education, health and care measures during this time. We have:

- Successfully bid to the DfE for a new SEND Free School for students over the age of 16 who have severe learning disability, profound and multiple learning disability, speech and language communication needs, Autism Spectrum Disorder and/or potentially challenging and complex behaviours
- Developed our Key Stage 2 primary provision to support children with more complex needs in relation to Social, Emotional and Mental Health (SEMH) needs (open January 2021)
- Opened a new secondary phase SEMH inclusion support provision – ‘Headway’ – at Baysgarth School in Barton-upon-Humber (SEND Capital Grant) with plans for two further provisions
- Identified Mental Health Champions in all of our schools as part of the Emotional Health and Well-being Plans and Child and Adolescent Mental Health Services (CAMHS) transformation
- Coordinated a streamlined service between health and education to ensure standardised delivery of the Integrated Health Check
- Launched our new and integrated neuro-diversity diagnostic pathway in relation to Autism, Attention Deficit Hyper-Activity Disorder (ADHD) and/or Learning Disabilities – involving professionals across a spectrum of expertise
- Worked with parents and professionals across education, health and care to implement a Sensory Needs Framework which builds upon the existing multi-disciplinary/multi-agency approach to sensory needs assessment and intervention in North Lincolnshire
- Developed a learning disabilities 'health check register' of young people aged 14 and over with learning disabilities

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We have also:

- Re-commissioned the Children’s Domiciliary Care Framework
 - Re-commissioned and embedded Health Visiting and School Nursing to create one service delivering the Healthy Child Programme for children and young people aged 0-19 (0-25 SEND)
 - Reviewed the Sensory Needs Framework based on evaluation, experience and need
 - Transformed and agreed a new jointly commissioned approach and specification to meeting the needs of children and young people with Speech, Language and Communication Needs (SLCN) – with school/setting delivery model
 - Reviewed and enhanced our approach to meeting the needs of children and young people with palliative and end of life care needs
- Refreshed the North Lincolnshire Children and Young People’s Emotional Health and Well-Being Transformation Plan 2015 - 2022
- Continued to commission education, health and care provision for children and young people with complex needs as close to home as possible so that they can remain within their family and community setting
- Worked with Headteachers and Principals to review delivery approaches in relation to the re-commissioning of Alternative Learning Provision (ALP) for young people at Key Stages 3 and 4 and introduced various initiatives (including provision development and Early Help Networks) to support quality inclusion
 - Introduced and co-produced a digital/web-based real-time solution to SEND statutory functions – the ‘EHCP (Education, Health and Care Plan) Hub’ with direct young person, parent/carer and professional access with plans to roll-out Annual Review modules in 2021
 - Explored the sufficiency of North Lincolnshire’s special school estate and delivery options for the future



And we have:

- Transformed Group-Based Short Break Services with North Lincolnshire Council providing an in-house service
- Published a children’s version of the Short Breaks Information Statement
- Jointly commissioned an All-Age Carers’ Service which will help create seamless support as young people prepare for adulthood
- Reviewed and developed the Special Educational Needs and Disability Information and Advice Support Service (SENDIASS) in line with changes in national guidance
- Continued to develop a range of independent living and supported housing provision and options for young adults with more complex needs
- Expanded the number of post-16/19 Supported Internships so that more young people with SEND can access learning and training opportunities in the workplace
- Re-commissioned the Complex Care Play Scheme and developed this in accordance with future demand and need (Easter and summer)
- Continued to develop the ‘Good to Great’ training and support model for Special Educational Needs Co-ordinators (SENCOs) to support appropriate identification of need, equity of access and consistency of support (including guidance on appropriate time allocation)
- Continued to provide a training offer to settings, schools and wider professionals in relation SEND
- Reviewed and completely updated the SEND Local Offer website including key co-produced policies and protocols (e.g. the North Lincolnshire Preparing for Adulthood Protocol 2020).



Independence within the Foundation Department covers skills needed from making a hot drink, snack or meal, to learning to use the washing machine, ironing, travel training and budgeting, to move towards independent living (John Leggott College)

Due to the outbreak of Covid-19 and subsequent school shutdown and cancellation of examinations in the summer term, the usual analysis concerning end of Key Stage attainment for 2020 could not take place. Our **key performance highlights**, based on the most recent official published data available for each benchmark, are set out below.

Children and young people in North Lincolnshire ranked within the **top 25% of performance in the country** in the following measures

- Children with an EHC Plan achieving the expected levels in each of reading, writing and maths at the end of key stage 1 (2019)
- Progress made by children with an EHC Plan between key stages 1 and 2 in each of reading, writing and maths (2019)
- Overall absence and persistent absence rates in special schools (2019) and overall absence and persistent absence rates for children with an EHC Plan (2019)
- Fixed term and permanent exclusion rates in special schools (2019) and permanent exclusion rates for children at SEND Support (2019)
- Young people with an EHC Plan (at age 19) qualified to level 2 including English and maths (2019) and young people with an EHC Plan (at age 19) qualified to level 3 (2019)
- Young people with SEND who are in Education, Employment or Training at age 17 (2018), young people at SEND Support who are in Education, Employment or Training (2018) and young people with an EHC Plan who are in Education, Employment or Training (2018)

In addition, performance of our children and young people was **above the national average** in the following measures

- Children at SEND Support achieving a good level of development in the Early Years Foundation Stage (2019)
- Children at SEND Support and children with an EHC Plan achieving the expected standard in the year 1 phonics screening test (2019)
- Progress made by children at SEND Support between key stages 1 and 2 in writing (2019)
- Progress 8 score for young people at SEND Support at the end of key stage 4 (2019)
- Young people at SEND Support and those with an EHC Plan achieving a GCSE grade 5 or above in both English and maths (2019)
- Overall absence rates for children at SEND Support (2019)
- Proportion of 16-17 years olds with SEND in education and training at 31st December (2018)



During Covid-19 our mainstream and independent schools remained open and our most vulnerable children and young people have been supported to attend education.

We worked to ensure the outcomes and provision identified in the EHC Plan could continue to be delivered in the home and education settings. We made contact with families to ensure they understood how the EHC Plan would be delivered and whether services would be delivered remotely or face to face.

We also used our [Local Offer](#) as a platform to keep in touch with families and professionals and produced a wealth of helpful information and resources to support parents and carers. We also used remote group chats such as WhatsApp and face-to-face where this was appropriate.

We dropped off resources to family homes and worked with families to develop transition plans for those children and young people returning to school or college, moving placement or key stage. 'First steps to get ready for transition' included a workbook and a worksheet 'My Lockdown Experience' which captured student voice.

We worked to identify new and emerging needs and how best to support children, young people and their families through the pandemic.

What was it like for our children?

- The vast majority of children and young people have transitioned back into schools, settings and colleges successfully.
- Children have adapted well to their bubbles and have responded well to changes in the structure of the school day.
- Schools' workforce resilience has remained high – 98% staff availability.
- Online learning provision has strengthened.
- There has been a sharp focus on children and young people's emotional health and wellbeing, including:
 - working with the Youth Council on the Well-being for Education Return roll out, with local adaptations for early years settings and for Children's Centres.
 - emotional literacy training for support assistants
 - the Mentoring School for pastoral leads, focusing on social and emotional development
 - bereavement support training for mental health champions
 - hosting an emotional health and well-being conference.

Working with partners we have developed our new [Preparing for Adulthood policy](#).

Preparing for Adulthood was the focus of both our Annual SEND Conferences for schools and colleges and also our SEND Conference for parents and carers.

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Employment and Careers	Friends, Relationships and Community	Good Health	Independent Lives
<p style="text-align: center;">We have</p> <p>Supported and challenged schools to provide access to excellent careers education, information, advice and guidance (CEIAG). Included a special school as one of the 6 North Lincolnshire schools in the Humber Careers Hub. Achieved the Matrix Standard for their delivery of CEIAG. Continued to drive the confidence and capability of businesses to recruit and retain people with additional needs. Agreed a framework for a 5 Day Local Offer in North Lincolnshire. Begun the development of a new adult service provision at a local college to enable young people to progress from education to adult based activities in a familiar setting. Continued to offer supported internships to young people as a pathway into employment - one young person was placed at a council recycling facility and has secured permanent employment.</p>	<p style="text-align: center;">We have</p> <p>Introduced activities to the Short Break programme through a range of identified topics - using public transport, shopping, preparing meals. Worked with other providers who can offer additional experiences such as creative music and leisure activities. Developed a volunteer scheme to enable young people who have left short breaks to support and mentor those still accessing activities.</p>	<p style="text-align: center;">We have</p> <p>Supported young people to manage their own health as they move into adulthood. Continued to develop opportunities for young people to participate in physical activity and make healthier lifestyle choices that will improve their long-term health and well-being. Developed a learning disabilities 'health check register' of patients aged 14 and over with learning disabilities. All 19 GP practices have signed up to deliver the Learning Disabilities Annual Health Check.</p>	<p style="text-align: center;">We have</p> <p>Developed a supporting housing scheme incorporating assistive technology for people with a learning disability/autism. Linked a local Community Hub with a new supported housing scheme to ensure young adults with learning disabilities/autism are involved in their local communities. Worked with schools, colleges, post-16 and independent providers to promote housing advice about specialist schemes and ensure independent living is explored during EHCP reviews. Co-produced transport guidance with the Learning Disability Partnership and the Youth Council.</p>

During this period we have been busy developing new ways to support children and young people with SEND.

We are pleased to announce the addition of a new Key Stage 2 provision within Coritani Academy, for children with social emotional and mental health needs.

Headway is an inclusion support provision at **Baysgarth School** funded by **Department For Education (DfE) SEND Capital Funding**. Headway includes a new two-classroom extension and a refurbishment of the Skills Centre on the site, to make the facility more practical and adapted to pupils' needs.

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Further funding has been allocated to develop two new inclusion support provisions in Frederick Gough School and Winterton Community Academy. These will support young people with Social, Emotional and Mental Health (SEMH) needs to successfully access mainstream school provision.



Beauty Room at the Headway Centre, Baysgarth School

In partnership with the **DfE, Wellspring Academy Trust and Morgan Sindall Construction** we are proud to be building a **new Free School** for students over the age of 16 who have:

- Severe learning disability
- Profound and multiple learning disability
- Speech and language communication needs
- Autism Spectrum Disorder
- Potentially challenging and complex behaviours

The new school will have a vocational focus and provide skills and employability opportunities for all its young people.

Subject to planning permission, construction will be started on site in October 2021. We are aiming to complete the new building by September 2022.

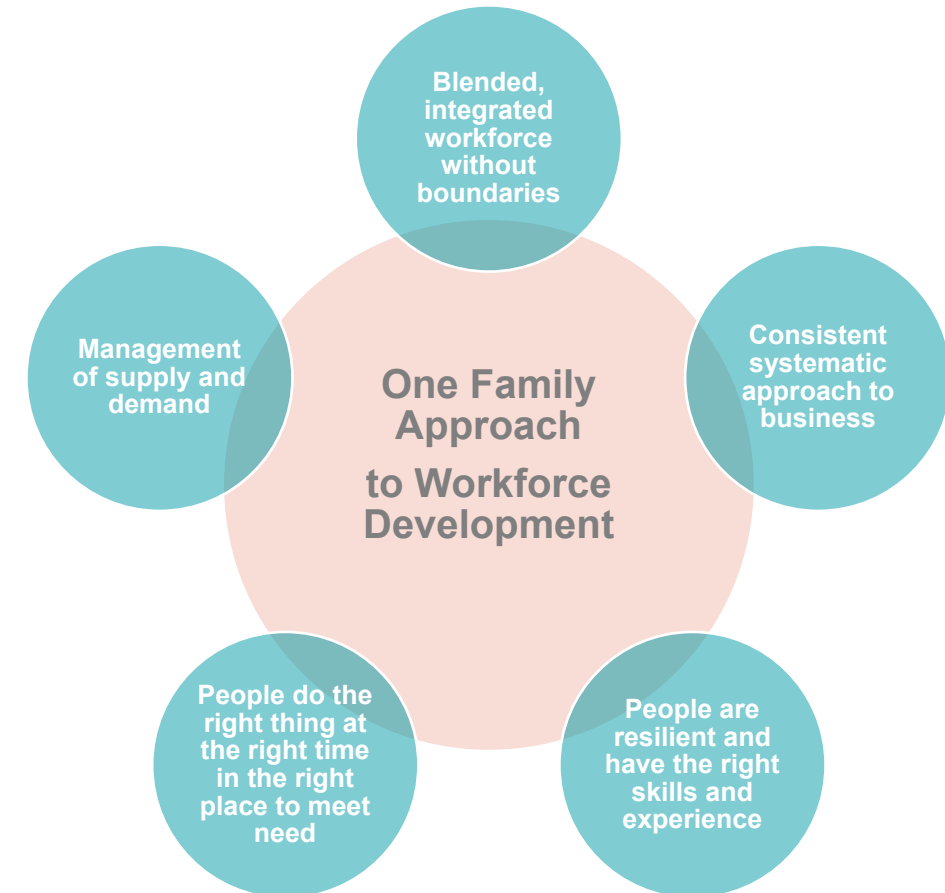


A key factor to ensuring improved outcomes for our SEND children and young people is that we have a workforce that is equipped with the appropriate skills, knowledge, experience and qualifications to meet the needs of our children and young people with SEND

Our Good to Great for SEND tool has supported SENCOs to analyse and judge the **progress and attainment** of pupils with SEND and **make decisions** about **future provision**.

We have:

- continued to develop the 'Good to Great' training and support model for Special Educational Needs Co-ordinators (SENCOs) to support appropriate identification of need, equity of access and consistency of support (including guidance on appropriate time allocation)
- continued to provide a training offer to settings, schools, governors and wider professionals in relation SEND
- reviewed and completely updated the SEND Local Offer website including key co-produced policies and protocols (e.g. the North Lincolnshire Preparing for Adulthood Protocol 2020).
- introduced and co-produced a digital/web-based real-time solution to SEND statutory functions – the 'EHCP Hub' with direct young person, parent/carer and professional access.
- worked with key partners to provide training and support to schools and professionals in readiness for the next stage of the EHCP Hub roll out of Annual Review in 2021
- used a variety of communication platforms - Keeping in Touch events and SENCO Networks - to continue delivering an effective local SEND offer to children, young people and families throughout the Covid-19 pandemic.



We are committed to engaging with children, young people, parents and carers at an individual, service and strategic level

We recognise that using a **multimedia** approach can create a better platform for sharing information and experiences and impact upon shared outcomes and involvement in decision-making.

Our **EHC Hub** is a new online area for families, professionals and education settings **to work together and contribute** on EHC assessments, plans and reviews. **The EHC Hub puts children and their families at the heart** of these processes and provides secure access to anyone who needs to be able to contribute and view information. It has been designed to support local processes and to work alongside existing systems. It offers:

- **Children, young people and families a voice** so they can contribute, view information and track their case.
- **The statutory assessment team** a secure platform to coordinate assessment, planning and reviews.
- **Professionals** who are involved, a simple way to contribute advice easily and securely.
- **Education settings** an intuitive hub for managing all EHC assessment and review cases.
- Our digital-first platform will **transform the way we work** with partners and is the key to driving meaningful engagement and providing the best outcomes for children and young people with special educational needs and disabilities.

Children, young people and their families have also contributed to and been involved with:

- The SEND Standards Board
- The SEND Partnership
- Local Offer and Needs Assessments
- Re-commissioning and commissioning of service provision
- Recruitment and selection



Engagement activities co-produced with our Parents Forum include:

- Developing and implementing the Sensory Needs Toolkit
- Developing the Local Offer
- Commissioning the digital EHC Hub

The 'lived experiences' of children, young people and families are reflected in what they and their families tell us. These help to create the right type of support:

This young person is 18 years old and attends a local post-16 college. He recently engaged in an Annual Review of his Education, Health and Care Plan and told us about his experiences.

He said that everything had been going well at college and he had been enjoying his course, although he found English difficult. He had found it challenging without a teaching assistant with him in college, but it was important to him that he worked well and tried his best. He would like to pass his English GCSE.

Currently, he is a student advocate within college and is also completing his Duke of Edinburgh Award. This young person was pleased with his progress in Information Technology in college. He said that he would like to improve his English skills. He is considering a career in Information Technology and would like to find an apprenticeship in the future. His mum said that she would like him to have a laptop wherever possible and be given extra time in lessons to complete tasks. She would like him to do well and follow the courses that he would like to do.

In response to these comments by this young person and his mum, he will be given opportunities to participate in employability workshops and sessions through the curriculum to support in developing employability skills. He will be provided with access to independent and impartial careers guidance. He will also be provided with a range of resources, blended learning opportunities and revision materials to support with independent study. To reduce note taking, he will be allowed to access his phone to use as a means of recording key concepts and ideas, and he will also have access to a named adult for support to help ease his anxiety and support with motivation.



We will:

- Continue the further development of integrated commissioning and service provision in line with the One Family Approach (OFA).
- Continue to improve outcomes particularly in the context of Preparing for Adulthood.
- Continue to improve education outcomes (e.g. SEND Support 'shine a light' focus across all key stages of learning).
- Continue to ensure equity of expectation, access and support across all providers (e.g. What should ordinarily be available in settings, schools and colleges) and to continue to support/challenge in relation to specific areas of practice (e.g. secondary schools where fixed term exclusion rates are high).
- Further strengthen the Local Offer in certain areas of provision to ensure that there is stability in school and the community and for specific needs (e.g. SEMH, Post-16 specialist provision/5-day offer, next stage of neuro-diversity pathway and Personal Budget/market-place review).

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3 March 2022

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Darren Chaplin, Local Area Nominated Officer, North Lincolnshire Council
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Dear Ms Brierley

Joint local area SEND inspection in North Lincolnshire

Between 6 December 2021 and 10 December 2021, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of North Lincolnshire to judge the effectiveness of the area in implementing the special educational needs and/or disabilities (SEND) reforms as set out in the Children and Families Act 2014.

The inspection was led by one of Her Majesty's Inspectors from Ofsted, with a team of inspectors, including an Ofsted Inspector and two children's services inspectors from the CQC.

Inspectors spoke with children and young people with SEND, parents and carers, and local authority and NHS officers. They visited a range of providers and spoke to leaders, staff and governors about how they are implementing the special educational needs reforms. Inspectors looked at a range of information about the performance of the local area, including the local area's self-evaluation. Inspectors met with leaders from the local area for health, social care and education. They reviewed performance data and evidence about the local offer and joint commissioning.

In reaching their judgements, inspectors took account of the impact of the COVID-19 pandemic on SEND arrangements in the area. Inspectors considered a range of information about the impact of the pandemic and explored how the area's plans and actions had been adapted as a result.

This letter outlines our findings from the inspection, including some strengths and areas for further improvement.

Main findings

- Leaders in the local area demonstrate a commitment to the principles of the 2014 special educational needs code of practice. Commissioners use the SEND joint needs assessment, alongside consultation with providers, parents and carers, and young people, to identify needs and plan support. Strong systems of governance and quality assurance are in place to check that the service meets the needs of children and young people.
- Leaders in the local area take the idea of co-production seriously. Co-production is a way of working where children and young people, families and those who provide the services work together to create a decision or a service that works for them all. Members of the parents' forum sit on a number of steering groups to advise and evaluate aspects of SEND provision. They organise annual conferences, coffee mornings and virtual support to help parents and carers. The clinical commissioning group (CCG) has regular meetings with the highly effective special educational needs and/or disabilities information, advice and support service (SENDIASS). Leaders use feedback from parents and carers well to explore how the local area can better respond to the needs of children and families.
- In recent years, leaders have worked closely with schools to enhance provision for children and young people with SEND. Further enhanced provision is being provided in mainstream schools for pupils with SEND, including pupils with autism spectrum disorder and social, emotional and mental health (SEMH) needs. The recent commissioning of a new post-16 free school for young people with complex needs reflects a determination to better prepare young people with SEND for adulthood.
- Leaders ensure that new education, health and care (EHC) plans are completed in a timely manner and to an appropriate standard. Leaders are less effective in ensuring that amended plans are returned on time after annual review meetings. This leaves parents uncertain as to whether actions discussed at reviews are considered by the professionals who are supporting their children.
- Health visiting and school nursing offer a fully integrated 0–19 service. In some cases, health visitors keep children and young people with SEND on their caseloads for up to seven years to provide continuity of care. In addition, school nurses continue to work with young people aged over 19 years. This is helping children and young people to access a consistent service.
- The voices of children and young people with SEND in North Lincolnshire are important in influencing the services that support them. For example, young people sit on interview panels for school nursing, children's centres and

community interest companies, such as Changing Lives. The views of young people who use the child and adolescent mental health service (CAMHS) are being used to inform the redesign of the CAMHS building.

- The local area team coordinates actions that enhance wider outcomes for children and young people with SEND effectively. Community children's nurses help children with complex needs move on to their next steps in education and training. They start the transition process early to achieve the best outcome for the young person. Leaders take effective action to support independent living through a series of managed actions that help young people into housing and employment.
- There are areas where effective provision for children and young people with SEND is helping them to achieve better outcomes. In primary schools, children with an EHC plan are achieving good outcomes in reading, writing and mathematics. In the post-16 phase, higher proportions of young people with SEND progress to employment and training than are seen nationally. In secondary schools, the picture is more variable. Pupils at SEND support achieve lower outcomes than their peers nationally.
- The vast majority of children and young people with SEND benefit from good mainstream school provision in the local area. This is complemented by highly effective special school provision in the maintained and independent sector. The use of enhanced provision in mainstream schools is increasing the local area's provision for pupils with SEND. In some cases, staff from special schools work with staff across the local area to build expertise in mainstream settings. Despite this, there are insufficient places for children and young people with SEMH needs. This gap has contributed to high rates of school suspension for pupils with SEND.
- Although local leaders are taking action to improve communication, some parents are concerned that the local area fails to respond to their requests for help. They express frustration that referral processes are too slow and that excessive barriers are put in place that prevent them getting support. Over time, many parents and carers feel that they have had to battle to get the provision and support their child needs.
- In some places, capacity to meet the needs of children and young people with SEND is stretched. For example, in occupational therapy, children's needs are not met in a sufficiently timely way. In addition, some families face considerable challenge while awaiting diagnosis on the neurodiversity pathway. Leaders are mindful of this and have put new strategies in place. Currently, these strategies are providing extra support as families await a diagnosis.
- Over time, pupils with an EHC plan and pupils at SEND support have been more likely than their peers nationally to be suspended from school. Leaders are working with schools to address this issue. Their actions include support for

additionally resourced provision within school settings. This stronger partnership working is contributing to a recent reduction in suspension figures.

The effectiveness of the local area in identifying children and young people's special educational needs and/or disabilities

Strengths

- The local area SEND team provides training to help staff in schools identify the needs of children and young people accurately. The underlying needs of children and young people with SEND are now identified more accurately than they were previously. This is enabling better support to be put in place.
- Health teams use an information technology system that supports information-sharing. This system is used by health visitors, school nurses, therapy teams, general practitioners and CAMHS. It provides multiple agencies with access to the information they need to identify the needs of children and young people with SEND effectively.
- Health visitors work collaboratively with other agencies, such as children's centres and nurseries, to jointly identify any emerging needs of children and to refer appropriately. This collaboration helps children's needs to be identified and met promptly.
- Local area special educational needs coordinators (SENCOs) provide effective support and guidance. The local authority SEND team supports the ongoing oversight of children identified as 'borderline' in its two-year-old checks. Where necessary, this close monitoring supports prompt referral to early help services.
- The early years triage panel works effectively to identify the right support by the right person at the right time for children under the age of five. The team has recently introduced a speech and language therapist to identify the needs of children under three. On occasion, this has led to referral to other services, including ear, nose and throat specialists. As a result, children's needs are more precisely identified and met.
- Systems are in place for families and parents and carers who live or are educated in the local area to self-refer into therapy and CAMHS. When referrals take place, children and young people receive appropriate assessments that support their care.
- Children and young people who are engaged with the youth justice programme can be referred to CAMHS. Multi-agency practitioners in the youth justice programme benefit from the attendance of a CAMHS practitioner at their weekly panel. As a result, practitioners are able to identify any previously unrecognised emotional or mental health needs.

- Children and young people with an emerging eating disorder can quickly access support and treatment through the eating disorders multi-disciplinary team approach. This is helping to avoid unnecessary hospital admissions.

Areas for development

- Some children and young people are waiting too long for a neurodiversity assessment and diagnosis. This waiting time can be up to 18 months. Local area leaders have a plan in place to improve waiting times and to provide extra support for those awaiting diagnosis. Despite this, some families continue to experience a lack of support, resulting in stress and anxiety for those affected.
- The local area is yet to return to full capacity in carrying out integrated two-year reviews following the disruption caused by COVID-19. Parents expressed concern that poor communication between professionals is hindering support for their children. This is leading to gaps in some aspects of early identification.
- In some instances, children's needs are not being identified fully in the primary phase. This is leading to increased pressure on the system at the secondary phase, and further delays in children and young people receiving the right support.

The effectiveness of the local area in meeting the needs of children and young people with special educational needs and/or disabilities

Strengths

- The local area has introduced a range of strategies to meet the needs of young people. In special school settings, staff work closely with health and social care to meet the complex needs of children and young people. Area SENCos work with school staff to build their expertise in identifying and addressing needs. The SEND team monitors outcomes for children with SEND. It provides appropriate support and challenge to settings to check that the needs of children and young people are being met.
- The local area takes purposeful action to address the needs of children with SEND at an early stage. The early years panel provides funding to support a child's needs in advance of statutory assessment. Children's needs are therefore met at the earliest opportunity. Leaders take action to support children with complex needs by providing staff with the necessary training. This enables children and young people with SEND to be admitted to appropriate settings as quickly as possible.
- The designated clinical officer (DCO) has developed and oversees the jointly commissioned nurse educator role. This has supported training in SEND for domiciliary care agencies, ambulance staff, other health professionals and

mainstream schools. Those carrying out this role also provide guidance to the residential children's home that is used for short breaks. Such support is helping children and young people to remain in their settings.

- The overwhelming majority of children and young people with SEND who talked to inspectors were highly appreciative of the support they receive. They described how the adults they work with build their confidence and support their emotional well-being. Many benefit from an ambitious and broad curriculum in school, and receive guidance that helps them to plan their next steps in education, employment or training well.
- Many parents value the support they receive from school SENCOs and other school staff. In a number of cases, this support had a transformative effect on the well-being of pupils and families. Parents appreciate the personal help they receive from the highly effective SENDIASS. Leaders in the local area secure the views of parents and carers in joint commissioning and evaluation of services. Local area leaders are using parental feedback effectively to inform provision for children and young people with SEND.
- Mental health training has been made available across schools and early years settings for parents and carers and professionals. CAMHS has offered schools consultation appointments to discuss any concerns they may have related to the behaviour of children and young people on their rolls.
- On occasion, leaders use bespoke commissioning for children with specific high-level needs. This has included action to support children and young people with highly complex medical needs. Such commissioning has also been used to provide families with specialist mental health support at home. This has reduced the use of more intensive intervention, such as hospitalisation.

Areas for development

- While the availability of enhanced provision in mainstream settings for children and young people with SEND is increasing, shortfalls remain. The weaker attainment of young people at SEND support in secondary schools, coupled with historically high rates of suspension, show that gaps in provision have hindered outcomes for young people with SEND over time.
- Some parents and carers express concern at the delays experienced in receiving support for their children. For a small number of families, this has caused distress. Some parents and carers continue to feel that they are passed from one professional to another. For these parents and carers, their experience of the cooperation between education, health and social care has been negative.
- The majority of EHC plans are reviewed annually as a matter of course. However, annual review paperwork is not completed and returned promptly. On occasion, these reviews are not returned before the next annual review is due to take

place. This creates uncertainty for parents and carers, who worry that professionals may not be acting on the most up-to-date advice.

- There are areas where waiting lists cause delays in how well the needs of children and young people with SEND are met. These delays are evident for those accessing the neurodiversity pathway and occupational therapy. They prevent some children and young people from getting the help they need in a timely manner.

The effectiveness of the local area in improving outcomes for children and young people with special educational needs and/or disabilities

Strengths

- Children and young people with SEND achieve many positive outcomes. They attend school more regularly than their peers nationally. They get off to a good start in their early reading. Pupils with an EHC plan secure higher attainment scores than their peers nationally and are more likely to remain in employment, education and training. This enhances their life choices.
- The local area has effective support for early years. This includes good rates of two-year-old funding, portage work across services and input from health visitors. Young children are given timely early input to help them to catch up with their peers before entry to statutory education.
- Transition arrangements are co-produced with college staff and parents and carers to ensure that information is available to all partners on what to expect as young people transfer to the next stage of education, employment or training. These arrangements address the key themes of preparation for adulthood, including independence and community inclusion. Young people are reviewed from 14 years old at the preparation for adulthood group to ensure that robust planning for their future is in place. This means that all partners have clear plans in place to consider young people's future needs to support positive outcomes.
- There are good examples of effective support for young people to live independently. For example, one college has a flatlet, which enables pupils to develop practical life skills. The local area has begun to build new accommodation that offers some young people supported living arrangements. This process is managed carefully and well, with clear steps in place to build independence in an incremental manner.
- The offer of up to five days of post-16 provision for children and young people with SEND has been co-produced. One college recently launched an 'active8' scheme that is helping students to come together for social activities. This is promoting friendships in preparation for life after college well.

- The palliative care nurse works across all of health to provide education around palliative and end-of-life care. The nursing team works closely with the hospice, with plans in place to extend support to a round-the-clock-model of care in the community. As a result, children, young people and families receive a holistic package of care.
- Leaders identified a lack of employment opportunities for young people with SEND. In response, they have appointed job coaches and improved staff training to give young people with SEND increased access to the world of work.

Areas for development

- The academic outcomes achieved by pupils at SEND support in North Lincolnshire are lower than for pupils at SEND support nationally. Despite improvements, these pupils remain more likely to be suspended from school than other pupils nationally.
- Although post-16 providers help students to learn to travel independently, travel training schemes are not sufficiently in place to support children and young people at an earlier age. This limits opportunities to develop independence and confidence for school-age pupils with SEND.
- Many children, young people and their families do not believe that leisure breaks are effective. Many families feel that activities do not match the age or meet the needs of their children. While school provision is valued, wider local area support is felt to be limited. This is inhibiting the development of social skills that will help children and young people with SEND prepare for adulthood.
- Across health services, many practitioners are not trained in how to write effective outcomes for their contributions to EHC plans. In some cases, this is reflected in gaps in health input into EHC plans. This means that important areas of development for some children and young people with SEND may be missed.

Yours sincerely

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NORTH LINCOLNSHIRE COUNCIL

HEALTH & WELLBEING BOARD

JOINT HEALTH AND WELLBEING BOARD STRATEGY DELIVERY AND PROGRESS

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To update the Health and Wellbeing Board Members on progress achieved to deliver the Joint Health and Wellbeing Board Strategy's themes and priorities.

2.0 BACKGROUND INFORMATION

- 2.1 The Joint Health and Wellbeing Board Strategy 2021-2026 (JHWBS) was approved on 19th November 2021, which set out 6 health and wellbeing themes to focus on over the next five years. These themes are:

1. Keeping North Lincolnshire safe and well.
2. Babies and young people have the best start in life.
3. People enjoy healthy lives.
4. People experience equity of access to support their health and wellbeing.
5. Communities are enabled to be healthy and resilient.
6. To have the best systems and enablers to effect change.

- 2.2 In addition to these themes the HWB required a new approach to be developed based on population health management (PHM) principles. PHM is an approach that uses data and evidence to inform the design of interventions and services to improve health and make better use of public resources. The aim of PHM is about improving the health and wellbeing of all North Lincolnshire residents, with a specific focus on prevention, improving health equity and 'closing the gap'.

3.0 PROGRESS AGAINST THE JSHWB THEME AND PRIORITIES

3.1 Developing the Population Health Management and Preventative Partnership (PHMPP)

- 3.1.1 The partnership is seen as the 'engine room' for prioritising and sponsoring key workstreams. The partnership has senior representatives from key organisations including NLCCG, PCN directors, fire and rescue service, police, housing voluntary and community sector and council services.

We will use existing strategic partnerships to sponsor projects, develop task and finish workstreams and provide governance oversight. This will ensure duplication is eliminated and provides a 'readymade' infrastructure for the themes to be progress at the earliest opportunity. Appendix 1 shows how the PHMPP interacts with existing groups and the HWB.

- 3.1.2 The prevention partnership has met twice and is starting to develop a cohesive approach to using PHM. The following workstreams have been identified from, the first two meetings:
- a. Reducing the rates of teenage conceptions by increasing resilience of young people.
 - b. Develop data packs for PCNs to help understand local populations' (unmet) needs and priorities.
 - c. Targeted supported self-management: work on helping individuals to support themselves and delay the need for community, primary or acute services.
 - d. Prioritise work on frailty and prevention.

Work has commenced on items a, b and c which are discussed below.

3.2 Reducing rates of teenage conception (relates to theme 2)

3.2.1 The governance and oversight for this theme is being provided by the Integrated Children's Trust (ICT). The ICT has recommended that a task and finish group be put in place to look at reducing the number of teenage conceptions in North Lincolnshire. Full years data for 2019 showed the rate of teenage conceptions per 1,000 was significantly worse than the England average, although rolling average data in for 2020 shows a decreasing trend. This work is important as teenage conceptions are associated with poorer outcomes for both young parents and their children. Teenage mothers are less likely to finish their education, are more likely to bring up their child alone and in poverty and have a higher risk of mental health problems than older mothers¹.

3.2.2 A multiagency task and finish group has been convened to look at:

- Upstream primary prevention to explore the actions that will make a difference to young people's resilience to unintended under 18yr conceptions.
- Identify whole system leadership for teenage pregnancy reduction.
- Link to personal, social, health and economic education (PHSE) leads in schools – how can we add value?
- A PHM approach that will identify our target cohort.
- Coproduce with young people and building on what good looks like, evidence and best practice.

3.3 Developing packs from PCNS (relates to themes 6)

3.3.1 A task and finish group has been convened to look at publishing data pack for PCNs which will provide information around health priorities, unmet need and wider determinants of health. Driven by CCG analytical support, an initial data-pack has been drafted for one NL PCN which provided a detailed picture of the PCN's population's health along with benchmarking information. The next stage is to:

- Develop a standardised template for other PCNs and populated.
- Deliver the data packs (eg presentation) in a way that suits PCN directors.
- Develop an 'analytics offer' to PCNs (eg support with data analysis, impact tools, case finding and online resources eg RAIDR).

3.4 Supported Self-Management: (related to theme 4)

3.4.1 A task and finish group has been convened to explore how we can best identify and support people experiencing the greatest disparities in not having the knowledge skills and confidence to manage their health, wellbeing and care and stay out of unplanned care. The objectives will be:

- To identify the cohort of people who experience the greatest risk of experiencing poor health and wellbeing and unplanned care.
- To identify the factors that impact on increasing the risk of unplanned care for this group
- To coproduce with this cohort of people what would have a positive impact on their knowledge skills and confidence to manage their health care and wellbeing to avoid unplanned care and stay out of services.
- Make recommendations, identify service quality improvements, identify resource to take action to improve health and wellbeing.

3.5 Keeping North Lincolnshire safe and well (relates to theme 1)

3.5.1 This theme focuses on enabling residents to remain safe and minimize their risk of harm from COVID-19. The work is being undertaken by the Health Protection and Outbreak Management Group (HPOM). Clearly the group has prioritised protecting the most vulnerable people and has maximised opportunity for vaccine uptake. As COVID infections rates have started to fall, the work of infection prevention controls teams has been geared towards helping business and settings become self-sufficient in dealing with smaller numbers of cases.

3.5.2 Since the JHWB strategy was approved, North Lincolnshire Public Health has now become part of the Greater Lincolnshire Public Health. This has now presented opportunities which are being explored about how health protection and resilience can be improved by utilising skills and capacity from across the three local authorities.

4.0 OPTIONS FOR CONSIDERATION

- 4.1 The Health and Wellbeing Board is asked to consider this report and note the work undertaken on the JHWBS priority themes.

5.0 ANALYSIS OF OPTIONS

- 5.1 Successful completion of the work streams will have a positive impact of the quality of people's health, wellbeing, quality of life and life chances. Using PHM and prevention principles will benefit resident in two ways: Firstly, it can keep people healthier for longer and delay the need for health and/or social care and secondary it can reduce the demand for services meaning greater efficiency and improved opportunities for those most in need of health and social care services.

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

- 6.1 None

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

- 7.1 None

8.1 OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)

- 8.1 Not relevant at this stage. Relevant policy or service changes proposed as a result of JHWBS work will be subject impact assessments

9.0 OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

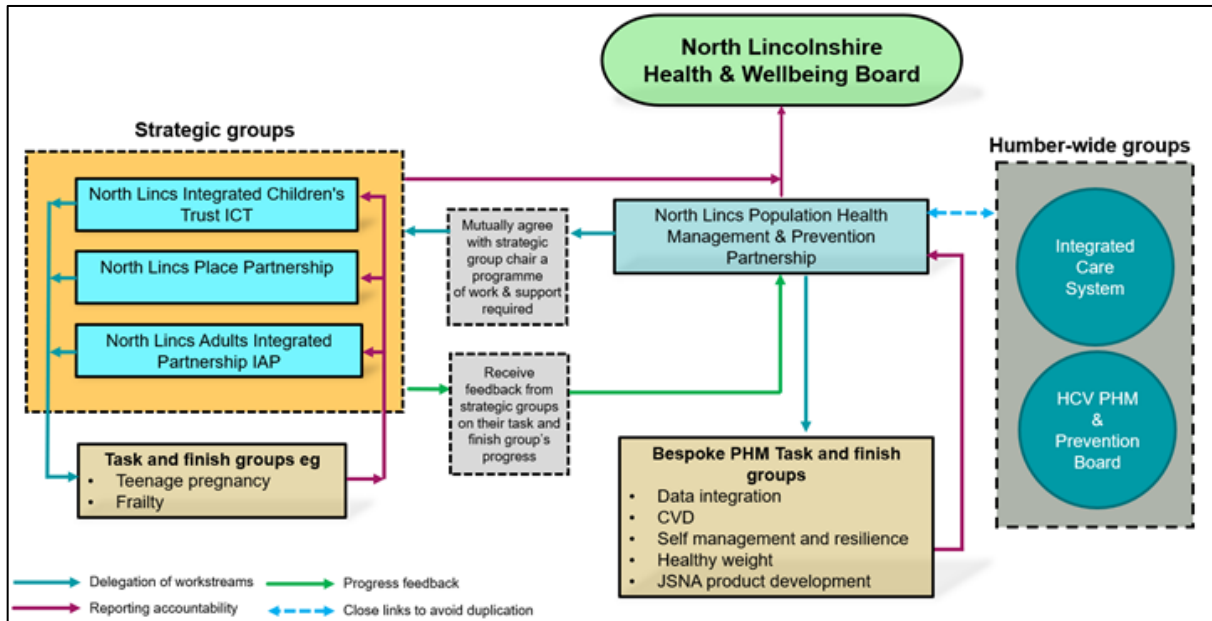
- 9.1 Not relevant for this report

10.0 RECOMMENDATIONS

- 10.1 That the Health and Wellbeing Board notes the work undertaken in delivering the themes set out in the JHWBS

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Date:- 05 March



Appendix 1

Accountability and Linkages Population Health Management and Preventative Partnership

ⁱ [Teenage pregnancy | The Nuffield Trust](#)

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NORTH LINCOLNSHIRE COUNCIL

HEALTH AND WELLBEING BOARD

Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2020/21

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 2020/21, and to consider the review in relation to planning, commissioning and budget setting.
- 1.2 The review demonstrates that the Children's Multi Agency Resilience and Safeguarding (MARS) Board:
- effectively meets its statutory obligations
 - benefits from strong and consistent leadership
 - has made good progress against its 'shine a light' areas of focus
 - listens to and takes account of the voices of children, young people and families

2. BACKGROUND INFORMATION

- 2.1 North Lincolnshire is aspirational for children, young people and families in this area and there is a long history of working together to improve outcomes. As early adopters of multi-agency safeguarding arrangements, the North Lincolnshire Children's MARS arrangements, were originally published on 31 October 2018. We have continued to listen, learn, review and adapt and our Local Arrangements have been reviewed on an annual basis thereafter.
- 2.2 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 the Local Arrangements and how effective these arrangements have been in practice. The Annual Report of Local Arrangements to safeguarding and promote the welfare of children and young people 2020/21 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, to be considered in relation to planning, commissioning and budget setting.

- 2.3 We have continued to respond to the needs of individuals and diverse communities, prioritising the most in need, to help and protect children, young people and families, while we support and protect our workforce. Under the auspices of our Local Arrangements and our One Family Approach to create a system that works for all children, young people and families, we have contributed to achieving our ambition for children to be in their families, in their schools and in their communities.
- 2.4 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.
- 2.5 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 (including independent scrutiny) and child safeguarding practice reviews.
- 2.6 The Annual Report also clarifies our two 'shine a light' areas of focus and outlines activities and impacts made in order to reduce the harm from risk outside the home and to respond to COVID-19 and emerging harm. The Annual Report also outlines activities and impacts relating to specific 'line of sight' areas for focus in relation to domestic abuse and emotional wellbeing and mental health.
- 2.7 Key highlights in relation to performance and populations which indicate our system is working and making a difference to children, young people and families include:
- The vast majority of performance and activity information relating to the early help and protection system continue to show sustained high performance, compliance with local practice standards and statutory timescales
 - Enquiries, contacts, referrals, repeat referrals and assessments by Children's Services have remained consistent evidencing the continued drive to ensure children and families are supported at the right level and at the earliest opportunity
 - Children in North Lincolnshire who are in need of help and protection make good progress, and are supported to live safely within their family network
 - The children in care population is at its lowest level since before the end of 2015/16, which reinforces our ambition for children to be in their families, in their schools and in their communities
 - We have reduced the number of children in external foster care and residential provision enabling them to remain connected to their local support networks and community
 - The number of children entering the youth justice system as first-time entrants continues to reduce demonstrating the success and effectiveness of the preventative approach

2.8 Key activities, impacts and achievements in 2020/21 include:

- Increased oversight of helping and protecting children in care and care leavers
- 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
- Ongoing development and implementation of our robust scrutiny and assurance framework, including independent scrutiny, through thematic and agency specific assurance events and multi-agency case audit practice learning line of sight events leading to changes in practice
- Strategic thinking and developmental discussions to progress the development of a joint safeguarding self-assessment across the Children's MARS Board and Safeguarding Adults Board, which meets the requirements of Section 11 of the Children Act 2004
- Ongoing and renewed focus on engaging with and listening to children, young people and families to understand their views and experiences that influence service improvement leading to better outcomes
- Amplified focus on communications through the Children's MARS website and @SafeNorthLincs social media platforms, with a focus on the impacts of COVID-19 i.e. in relation to hidden harm, as a means of sharing information and communication and publishing key documents and resources on our Children's MARS website
- Rich and robust education and learning offer, to include more e-learning and virtual opportunities for learning and to respond to key drivers and thematic areas of focus

2.9 Examples of key developments also include:

- One Family Approach and One Family Approach Practice Model
- Targeted Family Support
- Relationships with schools and focus on vulnerable children in education
- Partnership Integrated Triage (PIT Stop)
- You Say Who reunification model
- Care Leaver Services and Support
- Holding On model

2.10 There has been significant partnership action pertaining the two 'shine a light' areas of focus which has impacted on children, young people and families. Examples of impacts include:

Reduce the harm from risk outside the home

- Professionals retained empathy and persistence in working with the young people to build meaningful and purposeful relationships
- Competent and confident risk management and decision-making which resisted relocating or removing the young person from the family, neighbourhood and community they grew up in
- Approach continued to further strengthen the all-round support and work to remove those who sought to harm and sexually abuse the young person

- The investment in relational working helped to create trust and enable a young person to retain a level of control which helped them to disclose the abuse

Respond to COVID-19 and emerging harm (focussing on 0 to 2 years and child sexual abuse)

- Increased management oversight at the front door and strengthened pre-birth to 2 year old pathway and integrated working across the partnership
- Refined and enhanced joint working between paediatricians, Children's Services and police in relation to the child protection medical process
- Dissemination of a multi-language poster to promote access to help and support across diverse local communities
- Increased awareness and understanding of access to services for adults, e.g. mental health, domestic abuse and substance misuse through hidden harm workshops and dissemination of resources and tools for practitioners to utilise
- Strengthened the engagement and participation of adult based services through the bespoke CHaPP meetings
- 26 parents completed an evaluation/feedback form on completion of the virtual ante-natal programme. All 26 parents reported an increase in their knowledge and confidence regarding parenting as a result of the programme
- A development session will be held to consolidate the current position regarding Child Sexual Abuse in the Family Environment toolkit and agree next steps
- The toolkit provides information for all agencies to identify and respond to children who are at risk of, or subject to, child sexual abuse in the family environment. It also:
 - outlines how agencies can help children if they are beginning to identify concerns and refer to statutory services
 - outlines the support and services that such children and their parents can access support and recovery
 - gives contact details for both local and national support agencies that can be accessed by children and families independently

2.11 In 2021/22, 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. Safeguarding partners will continue to deliver the core functions, ensure that effective safeguarding arrangements are in place and continue to seek assurance that further work is progressing in relation to the 'shine a light' areas of focus identified in the Annual Report, as follows:

- Further develop the multi-agency approach to risk outside the home with a focus on harmful sexual behaviour
- Further develop the multi-agency approach to child sexual abuse in the family environment

As well as our specific 'shine a light' areas of focus, the Children's MARS Board adopts a 'right to roam' approach and as such, will maintain a line of sight across the early help and safeguarding pathway in order to seek assurance, challenge, shape and influence partnership action and system change, some of which are the responsibility of other partnership and planning frameworks. As part of this, to orientate 'line of sight' activity, the Children's MARS Board will take account of performance, practice wisdom and voice and experiences on wider emerging need and harm

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 2020/21.

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 Children's MARS arrangements. There will be further engagement opportunities as we continue to listen, learn, adapt and review.

9. RECOMMENDATIONS

- 9.1 Health and Wellbeing Board to receive the Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2020/21 and consider this where relevant in relation to planning, commissioning and budgets setting processes.

DIRECTOR OF CHILDREN AND FAMILIES

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Date: December 2021

Background Papers used in the preparation of this report:

[Annual Review of Local Arrangements to safeguard and promote the welfare of children and young people 2020/21](#)

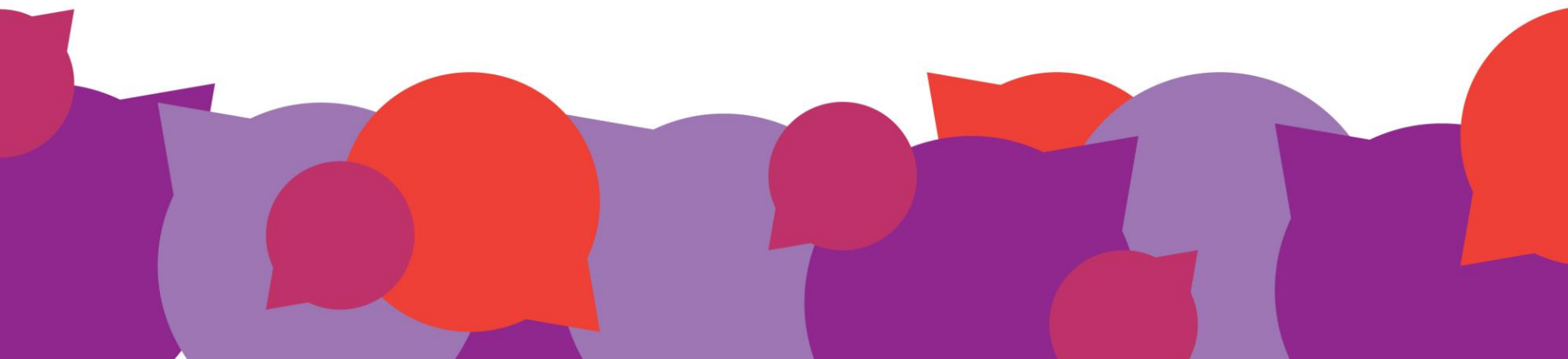
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North Lincolnshire

**CHILDREN'S
MULTI-AGENCY
RESILIENCE &
SAFEGUARDING
BOARD**



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Alongside our Children's MARS Local Arrangements and other key documents, all policies, procedures and tools referenced in this document are published on the Children's MARS website.

Welcome and Introduction

Welcome to our **Annual Report of Local Arrangements to safeguard and promote the welfare of children and young people 2020/21**

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.

The COVID-19 pandemic has created unprecedented challenges, developments and opportunities to the services we provide to children, young people families and communities. The ongoing progress made in developing services that help and work with vulnerable children, their families and communities placed North Lincolnshire in a strong position to respond to the COVID-19 pandemic through creative, innovative and flexible practices.

Business has continued across all functions of our Local Arrangements, whilst simultaneously adapting and supporting the overall COVID-19 response. In line with Government guidance, and as deemed appropriate, there has continued to be face to face contact with children and families in need of help and protection, children in care and care leavers. This has been underpinned by local visiting guidance which is regularly updated to reflect the current position.

We have continued to respond to the needs of individuals and diverse communities, prioritising the most in need, to help and protect children, young people and families, while we support and protect our workforce. It has enabled us to continue the excellent progress in achieving our ambition for children to be **in their families, in their schools and in their communities**.

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.

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 families, in their schools and in their communities** 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.

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.

The Supporting Families Programme, which closely aligns with the ambitions and values of our One Family Approach and our Local Arrangements, has a renewed focus on the importance of bringing services together around families to delivery whole family working and it emphasises the importance of early help in reducing the likelihood of poor outcomes for children and families.

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.

We would like to thank our Independent Scrutiny Officers for leading on a range of scrutiny and assurance activity and for their constructive challenge, evaluation and areas for consideration on how to drive continuous improvements.

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 the safeguarding partners and relevant agencies, including training, on outcomes for children and families from early help to looked-after children and care leavers
- analysis of any areas where there has been little or no evidence of progress on agreed priorities
- record of decisions and actions taken by the partners in the report's period (or planned to be taken) to implement the recommendations of any local and national child safeguarding practice reviews, including any resulting improvements
- ways in which the partners have sought and utilised feedback from children and families to inform their work and influence service provision

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.



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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

Key highlights in relation to performance and populations which indicate our system is working and making a difference to children and families include:

- The vast majority of performance and activity information relating to the early help and protection system continue to show sustained high performance, compliance with local practice standards and statutory timescales
- Enquiries, contacts, referrals, repeat referrals and assessments by Children's Services have remained consistent evidencing the continued drive to ensure children and families are supported at the right level and at the earliest opportunity
- Children in North Lincolnshire who are in need of help and protection make good progress, and are supported to live safely within their family network
- The children in care population is at its lowest level since before the end of 2015/16, which reinforces our ambition for children to be in their families, in their schools and in their communities
- We have reduced the number of children in external foster care and residential provision enabling them to remain connected to their local support networks and community
- The number of children entering the youth justice system as first-time entrants continues to reduce demonstrating the success and effectiveness of the preventative approach

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

- Increased the oversight of helping and protecting children in care and care leavers
- 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
- Ongoing development and implementation of our robust scrutiny and assurance framework, including independent scrutiny, through thematic and agency specific assurance events and multi-agency case audit practice learning line of sight events leading to changes in practice
- Strategic thinking and developmental discussions to progress the development of a joint safeguarding self-assessment across the Children's MARS Board and Safeguarding Adults Board, which meets the requirements of Section 11 of the Children Act 2004
- Ongoing and renewed focus on engaging with and listening to children, young people and families to understand their views and experiences that influence service improvement leading to better outcomes
- Amplified focus on communications through the Children's MARS website and @SafeNorthLincs social media platforms, with a focus on the impacts of COVID-19 i.e. in relation to hidden harm, as a means of sharing information and communication and publishing key documents and resources on our Children's MARS website
- Rich and robust education and learning offer, to include more e-learning and virtual opportunities for learning and to respond to key drivers and thematic areas of focus

Key Highlights and Successes

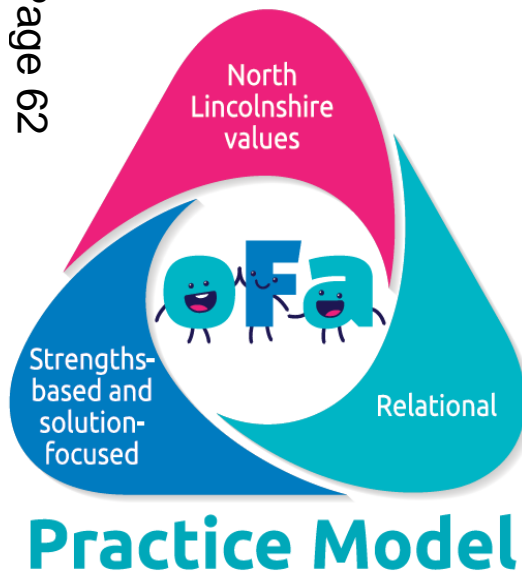
Specific key developments also include:

One Family Approach and One Family Approach Practice Model

In September 2020, three strategic documents were signed off across the partnership, to set the foundations for driving forward partnership action and system change in the future. These include the [North Lincolnshire Children's Commissioning Strategy](#) which clarifies the One Family Approach and commissioning intent in relation to health, social care and education for children, young people and families; the [Helping Children and Families in North Lincolnshire document](#) which sets out our local definitions of levels of need, in line with our organisational model; and the [Children's Challenge](#) which articulates challenges from children, young people and families for partnership action and for themselves.

The One Family Approach is underpinned by our One Family Approach Practice Model, which is articulated as follows:

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We have embraced our One Family Approach which is based upon our children, young people and families being able to build upon their strengths and resilience to find or be enabled to find solutions. Through workforce development and our ongoing commitment to working towards our ambition for children to be **in their families, in their schools and in their communities**, the One Family Approach, underpinned by the One Family Approach Practice Model is permeating through systems and processes. Staff are more confident about articulating the One Family Approach Practice Model and it is embedding in their behaviours and practice.

RELATIONAL PRACTICE: Mum of young person who was previously on a child protection plan as a result of risk outside the home fed back to the Independent Reviewing Officer, 8 months after the plan had ended: *Mum said her daughter is doing really well and she wanted to say thank you for the help and support they received. All the workers involved were 'like family' and she would love to help other parents who are experiencing and going through what she has as a parent. Mum spoke really fondly of the social worker, FaSST targeted family support worker and others who helped them through the difficult and challenging journey and she was extremely proud to share her daughter's progress, including going to college. She also talked about her own experiences as a parent and how she felt supported by everyone involved during the past few years.*

Key Highlights and Successes

Targeted Family Support

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. The 0 to 19 health and wellbeing service, FaSST targeted family support service, children's centres and education inclusion have worked closely and frequently together. They have shared RAG rating processes and are increasingly using a tasking approach to maximise resource, share information and understand local need to best target the families that need help and to identify the most vulnerable and who could become invisible. This model of working, alongside the creation of a strong online offer of information, advice and more enabling family help and support, aligns well with the One Family Approach.

A targeted parent training offer has been delivered virtually both on a group work and individual basis to those parents identified as requiring extra help with aspects of family life and caring for children of all ages. The suite of training includes Expecting and Arrival of Baby, The Growing Baby, Child Development and Home Visits. This has been implemented to strengthen knowledge and develop skills specifically in relation to the most vulnerable children with whom we work to enhance practice, increase awareness and take into account child development and increased risk factors highlighted as a result of the pandemic.

A family solutions approach with families continues to be used across services, and across the pathway, 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.

Key Highlights and Successes

Relationships with schools and focus on vulnerable children in education

Throughout the pandemic there has been an amplified commitment to maintaining and further developing relationships and support to schools to respond to and mitigate issues, and to provide learning opportunities for all children, particularly the most vulnerable, and to support their emotional health and wellbeing. Safeguarding partners have communicated to schools to thank them for their continued commitment, to reiterate core responsibilities and share sources of information and access to resources.

We have continued to maintain a focus on vulnerable children in education including those with SEND and children open to a social worker. Opportunities were identified to work together to enhance practice and improve outcomes and a One Family Approach daily tasking meeting was established, focusing on individual cases within a high challenge/high support model. Working collaboratively together, it takes a shared perspective, identifies specific actions, and leads and enables consistent messages and communications to schools and families. Where vulnerabilities were identified for those in need or at risk of harm, specific actions to reduce risk were identified to lower risk and increase resilience. Individual circumstances have continued to be reviewed and help provided and reviewed. Work to date has demonstrated swift agile responses, resource flexibility, innovation and shared commitment. The daily tasking meetings, which were established in May 2020 in response to COVID-19, are now embedded into practice and they are continually reviewed to reflect the changing context maintaining a one team approach to supporting more vulnerable children to access education as appropriate.

Early Help Locality Meetings have continued to take place with robust partnership representation, for example schools, early years, children's centres, FaSST targeted family support service and Ongo. The meetings are a regular opportunity to reflect on current and emerging themes, share best practice, identify and address issues and support early help activity. There has been an increase in the number of early help assessments undertaken by schools and a plethora of examples of schools leading on early help activity leading to better outcomes.

We have continued to facilitate Operation Encompass where the police update schools regarding domestic abuse incidents, issues and concerns in order that they can be additionally vigilant to support the needs of individuals. Some families that appear more than once have been captured at the Domestic Abuse Triage. Analysis was undertaken to ascertain whether more children have special educational and/or additional needs due to living in a domestic abuse environment, though there is no evidence to suggest this. However, we are mindful that living in an environment where domestic abuse is a feature will have an impact on children, and schools, along with other partners are responsive to this. Schools have reported they find Operation Encompass notifications extremely useful to be able to offer relevant support to their students and families and there are reflective accounts from schools where they are helping adults recognise their behaviours and have healthier relationships with each other and their children.

Key Highlights and Successes

Partnership Integrated Triage (PIT)STOP

PITSTOP was piloted in March 2021 with a view to providing a more streamlined and robust offer of help to children and families and to ensure needs are met at the earliest point. Due to the success of the pilot, it is proposed that the PITSTOP be mainstreamed into practice, that the Domestic Abuse Triage function be captured within it, and that it is likely to be rolled out across the Humber region. The overall aims and purpose of the PITSTOP is to jointly consider police information (that has already been through police decision making processes and determined that partnership triage is required) with a view to identification of potential levels of need and appropriate responses in line with North Lincolnshire's Helping Children and Families document 2020/24.

The PITSTOP ensures that the values and principles of the One Family Approach permeate throughout practice across the partnership by effectively identifying risk, needs, harm and vulnerability. This is to ensure that children and families receive the help they need, by the most appropriate person at the lowest level and the earliest stage of a problem arising and protecting our most vulnerable. The PITSTOP has also resulted in:

- an increased partnership link to consider needs and vulnerability, which has enhanced locality-based problem solving
- ensuring holistic information is shared to inform effective decision making without delay
- improved quality of information, with consistent analysis of need
- identifying themes and emerging trends within communities to enable proactive targeting of resources and build resilience
- a long-term approach to reduce future risk, needs and vulnerability which in turn builds resilience and reduces demand and cost
- sharing the relevant information to identify the most appropriate person to provide the right help at the lowest level

The Youth Justice Partnership (YJP) is engaged in the PITSTOP which has enabled the partnership to identify opportunities for preventative work with children at an earlier stage.

Impact:

The PITSTOP has assisted in understanding emerging risks in particular locality areas resulting in the proactive targeting of resources and interventions, including with key businesses, faith groups and neighbourhood watch groups to build community resilience and intervention within schools to prevent need escalating in particular around issues of bullying, peer abuse and online abuse.

PITSTOP meetings has ensured a greater understanding of each others' roles, responsibilities and models of intervention. This understanding has enhanced children's experiences, for example, diverting from arrest where there are concerns of child to parent abuse/violence by utilising restorative practices in targeted early help work and the Non-Violent Resistance pathway.

Through the use of the vulnerability tracker and mapping of emerging risks alongside higher-level risks, the partnership has been able to understand the connectivity and precursors to high risk (for example bullying as a precursor to exploitation) and proactively target and build the resilience of the community.

Within meetings, the appropriate and proportionate information is shared to ensure informed and holistic decision making, for example, where the police received a call regarding parental conflict between separated parents, the health visitor was able to undertake a piece of restorative intervention with both parents regarding conflict resolution and effective co-parenting drawing upon family solutions, ensuring need was met at the lowest level by the most appropriate person.

Key Highlights and Successes

You Say Who

Relationships matter in North Lincolnshire and where children do enter care, our aim is wherever possible to reunite them with their families or extended families in a timely and supportive way. Where it is not possible for children to remain within or return to their own family networks, we want children who enter care to experience stability, experience positive relationships with trusted adults and achieve to their potential. A key focus is therefore placed upon actively building and maintaining important connections and relationships, whether this be with parents, family members, friends, or other significant relationships. To achieve this, we have fully embedded the multi-agency 'You Say Who' practice framework to place sustainable relationships at the heart of planning for children. This has included building on the strengthened practice in relation to reunification of children in long term care to their family utilising the NSPCC Reunification Framework highlighted in the Care Crisis Review. Staff across the workforce challenge themselves with regards to the young people they are working with, and objectively consider whether reunification is an option for these children. This is identifying more cases on a regular basis whereby reunification/rehabilitation could be a possibility, despite not being considered previously.

Underpinned by the ethos of 'You Say Who', we believe that family time is vitally important and has a number of benefits for children and their families. It is acknowledged that continuing family time throughout the pandemic was critical, albeit more challenging, but we have continued to enable children to maintain relationships with their parents and/or return home, addressing issues of loss and separation, identity for children, which in turn can have a positive effect on children's well-being. The model has enabled social workers to work holistically with children and parents and to support, monitor the parental changes, and assess risk. The impact of the model of intervention continues to enable children to return to live within their birth family and be supported to return to their community, furthermore the children and their parents no longer require social work intervention. By using the You Say Who/reunification assessment framework, it has strengthened the child's and parents' relationships. For all children in care, at each review junction, there is an update on parental changes and reflection on the reunification process.

Care Leaver Services and Support

In response to an increase in the overall population of care leavers, the complexity of the issues (including work with young people who face risk outside the home) and supporting unaccompanied asylum seekers, the support and services for care leavers have undergone a significant transformation resulting in an improved offer and integrated delivery model. Care leavers are encouraged and well supported to transition to adulthood and independence with a network of help and support based on relationships and ensuring the help each young person needs is in place. Increased capacity has been developed to support this e.g. a dedicated education officer to support children in care and care leavers into education, employment and training and the financial policy has also been enhanced with a clear focus on raising aspirations and supporting young people to achieve their goals. Young people have access to suitable accommodation and receive support to ensure their health needs are met (including health passports). There is also an open door policy and care leavers continue to be able to access information and support throughout their lives.

Our highlights and developments mean that North Lincolnshire is well positioned to continue our journey of developing our services for our care leavers to ensure we drive forward ambitious practice and ensure that our young people achieve their goals and aspirations and become active participants within their communities.

Key Highlights and Successes

Holding On

The 'Holding On' multi-agency practice approach is ongoing and has continued to adapt and develop. The Holding On Approach 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.

This approach provides an opportunity for the adults to focus on their own needs and to learn new ways to adapt to challenges and stresses. It is recognised that stress can come in the shape of family or relationship problems, health problems, or workplace and financial worries, among others. The approach wants to help adults develop 'resilience' and the ability to bounce back from a negative experience. 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.

The North Lincolnshire model is inclusive and sustainable, whereby a 'support offer' can be made to both mothers and fathers. The model is based upon pulling together existing resources and services to provide an offer of support to the individual. Key to this is the individual identifying the areas of support they feel are most important to them. For example, to date for some individuals it has been around helping them to understand their life journey and how they came to be where they are and helping them work towards a better future by accessing support in the community.

There are currently 9 Holding On Practitioners who are linked with 15 adults, across the practitioners. The support provided is varied and includes:

- Life journey work
- Supporting through grief and loss
- Support around housing, finances and health.

An annual celebration event was held on the 7 May 2020 and this provided the opportunity to consider the achievements of the project, which included that 2 parents that the project had worked with had gone on to be future parents and the children were being successfully parented by them. The other adults that the project had worked with had not gone on to be parents and had instead made other choices for themselves. The project is now taking the next steps to further develop and this includes the launch of a Holding On Café and the development of peer buddies.

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 for 2020/21 have been independently scrutinised. 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 strategic leaders and practitioners forums
- met with key officers who manage and support the Children's MARS Board
- engagement with safeguarding partners and system leaders

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

Strengths

- The three statutory partners expressed the intention to continue with "business as usual" during the pandemic. This has been achieved with many aspects of partnership working having been strengthened. The work of the Children's MARS Board has continued and ownership at strategic level is being shared as planned
- There are also numerous opportunities for the broader safeguarding partners to be involved. Specifically, the Helping Children and Families in North Lincolnshire document is well understood and is making a tangible difference to partnership working across the safeguarding system in giving confidence to all partners about how to influence decision making
- The reach of the safeguarding arrangements to the front line has been maintained and enhanced through relevant, stimulating and high quality training and development
- Following on from improvements in previous years as a result of these events communication has been given a high priority and the website is seen as a valuable resource
- Practitioners describe the environment in North Lincolnshire as one of "high support and high challenge" with a focus on children and families rather than on agencies
- The culture within the Local Arrangements is one of continuous review and improvement where feedback is welcome. It is used to constantly refine the processes which provide the information to the Children's MARS Board
- Priorities for the work programme are set through active awareness of national research and also informed by local information which is gathered through the partnership arrangements at operational level

Areas for Consideration

- There are many examples of how the partnership has been strengthened during the pandemic. As people return to their offices and teams it will be important to understand what worked so well and ensure that it is incorporated into the new working practices

Governance and Partnerships

The key roles and functions of the board, are detailed in the [Terms of Reference](#) and the responsibilities are detailed in the Local Arrangements and underpinning [Memorandum of Understanding](#).

As part of our commitment to listen, learn, review and adapt, in July 2020 the board agreed to combine the Safeguarding Pathway Lead Officers Group and the Early Help Strategic Leads Group to form a new lead officer group. The group would provide leadership and oversight and take assurance about the whole help and protection pathway from the interface between informal and formal early help through to statutory child protection planning. As part of the review of the subgroup arrangements, there has been a strengthened focus on impact via performance management and quality assurance. Reporting responsibilities are now more equally shared between the safeguarding partner agencies and there is a strengthened oversight of early help and hidden harm.

Efficient board arrangements with shared chairpersonship, core membership and active, engaged discussions and decision making continues. The officers attending the board have been expanded to reflect an increase focus on vulnerable children in education. The Lead Member for Children and Families has been included as a participatory observer within partnership arrangements.

North Lincolnshire has an embedded, responsive partnership system and approach. Reporting to the Children's MARS Board, the Children's Help and Protection Pathway (CHaPP) group is our established assurance mechanism which oversees good practice as well as emerging practice and performance issues. There have been bespoke CHaPP meetings to 'deep dive' into specific areas of practice to ensure high challenge and high support leading to partnership action, improved practice and improved outcomes. Examples of bespoke meetings include:

- Two bespoke meetings held pertaining 'hidden' harm' including representation from services to children and services to adults to fully explore the offer provided and identify any gaps in provision
- A bespoke meeting held on the theme of emotional wellbeing and mental health to respond to an increase in A&E attendances relating to self-harm

Further information about our partnership structures can be found in the Local Arrangements which have been updated in year to reflect the changes in our partnership arrangements.

Overall, the Local Arrangements are serving us well and continue to have a positive impact on outcomes for children and families.

Performance

We know how our system from early help to children in care and care leavers makes a difference so that children are in their schools, in their families and their communities

Key performance updates

- **The number of formal early help assessments recorded has increased in recent months:** It is evident from audit activity, scrutiny of multi-agency practice and feedback from children, families, and professionals that a large amount of informal help is being provided to children and families within their own communities and schools. There has been a strong focus on early help within schools and the data reflects this in terms of the increase in early help assessments undertaken by schools and settings.
- **Enquiries, contacts, referrals, repeat referrals and assessment are lower this year:** This indicates that the work to further embed the Helping Children and Families in North Lincolnshire document across the partnership is having an impact, ensuring children's needs are being met at the lowest level; and that partner agencies are aware of how to seek guidance and support outside of the Single Point of Contact (SPOC) where appropriate
- **The number of strategy discussions has increased in the last few months:** This reflects the complexity of work across the service. Dip sampling and audits identify that strategy discussions are held appropriately, and outcomes are aligned to the child's needs and presenting risk
- **The numbers and rates of children subject to child protection plans remains below national and statistical neighbours:** Timeliness of child protection conferences remains at 100% compared to a national average of 78% and statistical neighbours at 80%. The numbers and rates of children subject to child protection plans remain below national and statistical neighbours
- **There has been a reduction in the use of fixed terms and permanent exclusions:** There has been an amplified focus across the Local Authority and education settings to co-produce system-wide solutions which has resulted in a significant reduction in both fixed term exclusions and permanent exclusions across the majority of schools
- **Alternative learning provision figures have reduced:** The numbers of children accessing alternative learning provision have reduced significantly and the focus has shifted to the use of in-school inclusive space and support and managed transfer where a new environment is beneficial
- **There has been a decrease in the number of children reported missing:** Overall, the number of missing incidents and missing children for 2020/21 was lower than 2019/20 by 52% and 26% respectively

Performance

More key performance highlights

- **The number of children identified to be at risk of exploitation has decreased for CSE, however increased for CCE during the year:** There has been an enhanced overview of risk outside the home and management oversight of this cohort of children continues through regular case audits and within case supervision. Alongside this, cases discussed within the Multi-Agency Child Exploitation (MACE) meetings have an additional layer of oversight from across the partnership. MACE Triage continues to assist partners to draw out themes and connections that can be proactively targeted within MACE meetings over and above the child's plan
- **Selectively home educated (EHE) figures started to go down prior to COVID-19 but have increased in recent months:** At the highest point in 2019 the EHE figure for North Lincolnshire was 168 but following the introduction of a new 12-week case managing approach North Lincolnshire's trajectory in relation to EHE started to go down, the lowest figure being 132. Since the end of September 2020, there has been a steady increase in numbers requesting EHE (linked to COVID-19 anxieties) and we continue to take a case managing approach to each request with an education inclusion officer assigned to each case. The case managing approach identifies need at a much earlier opportunity, alongside early indications of parents not providing a suitable education. This has resulted in a speedier return to formal education in a number of cases. Work continues in relation to liaison between families and schools through daily tasking meetings
- **The number of cases discussed at Domestic Abuse Triage meetings has increased this year:** There was a higher number of cases discussed at Domestic Abuse Triage meetings during this year compared to last year. The triage meeting discusses children whose parents/carers have been classed as low/medium risk
- **There was an 31% increase in the number of cases heard at Multi-Agency Risk Assessment Conference (MARAC) in 2020/21, though the proportion of repeat cases has not significantly increased:** This is despite MARAC being held weekly during the early lockdown period, moving to fortnightly and back to weekly from January 2021. The number of 16 and 17 year olds discussed at MARAC increased although numbers remain small
- **The number of Graded Care Profile 2 assessments completed has decreased:** The Graded Care Profile 2 (GCP2) assessment figures are collated from Children's Services SPOC enquires, assessments, plans and child protection conferences, and verified so that children are not counted more than once. It is of note that there may be additional GCP2 assessments completed at different stages in the child's journey across the early help and safeguarding system. This data is still under development



Shine a Light Area of Focus

Risk Outside The Home

We said we would further develop the multi-agency approach to risk outside the home and work with adolescents and their families

Risk outside the Home

There is much to commend about the arrangements in place to safeguard and promote the welfare of children and young people suffering, or at risk of suffering, from exploitation and harm outside their families.

Through multi-agency case audit practice learning line of sight events on the theme of exploitation, there is evidence of quality of practice, e.g.

- Professionals retained empathy and persistence in working with the young people to build meaningful and purposeful relationships
- Competent and confident risk management and decision-making which resisted relocating or removing the young person from the family, neighbourhood and community they grew up in
- Approach continued to further strengthen the all-round support and work to remove those who sought to harm and sexually abuse the young person
- The investment in relational working helped to create trust and enable a young person to retain a level of control which helped them to disclose the abuse

Following an evaluation of the MACE meeting by **Dave Basker, Independent Scrutiny Officer**, it was determined that it is highly effective in the way information and intelligence is shared between the partner agencies.

The Independent Scrutiny report states that:

There was much to celebrate in the multi-agency case audit practice learning event in terms of the quality of practice. Despite many challenges and much uncertainty, professionals retained empathy and persistence in working with the young people to build meaningful and purposeful relationships.

The focus on the context in which harm was happening and the systematic approach to enhancing the already existing statutory plans through detailed analysis of the people, places, spaces and locations, was outstanding and effective in responding to criminal and sexual exploitation.

The issue of the use of victim blaming language identified in the learning events was speedily responded to in the MACE meeting and through training events and guidance issued to managers and practitioners via the Children's MARS Board.

Risk outside the Home

Area for further consideration and development from independent scrutiny	Response
<p>Further enhance the excellent systems in place and the high calibre of practice that already exists in North Lincolnshire through putting in place a collective and consistent approach to transform the places, spaces and locations where the criminal and sexual exploitation of children and young people is known to take place</p>	<p>Partnership action taken to transform harmful places and spaces with successful reduction of crime and vulnerability in these areas. A model has been developed into practice and will be replicated across other key hotspot locations</p>
<p>Continue to evaluate the impact of the recent work to address language and terminology which can at times be 'victim blaming' by implying that children and young people are making choices. All agencies and bodies within the children's partnership should ensure, as far as is possible, that their staff are aware of this and that they have access to, and understand, the recent guidance and learning tools disseminated through the Children MARS Board</p>	<p>Change the Narrative: Appropriate Language relating to child exploitation toolkit developed and disseminated across the partnership (and via the Children's MARS website)</p> <p>Training was commissioned through the Children's MARS Board relating to appropriate language. The training had overwhelmingly positive feedback including one practitioner who shared that <i>'this is training that every professional should attend - we need to keep at the front of our minds the language that we use, the power of it and it impacts on our practice and engagement with families'</i></p> <p>Ongoing focus on language as a mechanism for changing behaviour and monitored through scrutiny, assurance and audit activity i.e. in relation to children's case records</p>
<p>Consider how best to develop a consistent stance across the partnership on when and in what circumstances the use of secure accommodation and police powers of protection may have a role in safeguarding adolescents from exploitation and significant harm</p>	<p>A bespoke senior leads meeting was chaired by an Independent Scrutiny Officer to consider the use of police powers of protection and the use of secure accommodation</p> <p>The meeting facilitated greater understanding of the legislative basis, appropriate applicability and drawbacks of these powers</p>



Shine a Light Area of Focus

Respond to COVID-19 and emerging harm

We said we would continue to respond to COVID-19 and emerging harm across the early help and safeguarding system

Respond to COVID-19 and emerging harm: 0 to 2

What have we done?

- Under the Children's MARS local arrangements, there have been three multi-agency case audit learning events on children's cases relating to babies and young children. These events were led by **Dave Basker and Linda Williams, Independent Scrutiny Officers and the Designated Nurse for Safeguarding, NL CCG**. 7-minute briefings on the learning from the events have been circulated to practitioners and managers across the partnership and made available on the Children's MARS website
- NL CCG have led a programme to introduce and disseminate the ICON programme across the partnership. All materials are available on the Children's MARS website and have been communicated through @SafeNorthLincs. The Children's MARS joint safer sleeping policy and procedures are in place and have been circulated across the partnership including to foster carers
- A helping and protecting babies and young children briefing has been developed and disseminated across the partnership
- Focused development sessions have been held for practitioners who work with children, families and adults on hidden harm including Adult Mental Health, Child Exploitation, Domestic Abuse, Adult Substance Misuse and Children's Mental Health
- A hidden harm info-sheet containing multi-agency resources and tools has been developed and disseminated
- The virtual antenatal offer has been developed in partnership between midwifery services, 0-19 health and wellbeing service, FaSST targeted family support service and Adult Community Learning, and has received positive feedback from some parents
- A letter about hidden harm was distributed across the partnership on behalf of the safeguarding partners which included resources for children, young people, parents and professionals
- Children's social care and health services across the partnership reviewed the circumstances of families with babies and young children during 2020, wider than those at risk of significant harm, in the context of national concern of increased risks to certain groups of children and a rise in serious incident notifications to the national panel for babies. Proactive partnership work included the setting up of One Family Approach integrated service meetings (midwifery, health visiting service, FaSST targeted family support service) to develop packages of support for children receiving early help or close to such. This led to the strengthening of our local multi-agency pre-birth to 2 pathway for children/families with additional vulnerabilities and the development of the Multi-Agency Pre-Birth Liaison and Consultation (MAPLAC) meeting.

MAPLAC: Building on the benefits of a more integrated targeted family support offer, 2020/21 saw a number of early help and prevention partnership developments. The MAPLAC meeting has been established as a partnership forum with colleagues from across midwifery services, the 0 to 19 health and wellbeing service and Children's Services including the FaSST targeted family support service. This forum is a liaison and consultation panel with oversight of cases of pregnancy with identified additional vulnerabilities where the family would be likely to benefit from targeted early help at the earliest stage possible, to enable them to meet the needs of their unborn baby.

Respond to COVID-19 and emerging harm: 0 to 2

Outcomes and Impact:

- Increased management oversight at the front door and strengthened pre-birth to 2 year old pathway and integrated working across the partnership
- Refined and enhanced joint working between paediatricians, Children's Services and police in relation to the child protection medical process
- Dissemination of a multi-language poster to promote access to help and support across diverse local communities
- Increased awareness and understanding of access to services for adults, e.g. mental health, domestic abuse and substance misuse through hidden harm workshops and dissemination of resources and tools for practitioners to utilise
- Strengthened the engagement and participation of adult based services through the bespoke CHaPP meetings
- 26 parents completed an evaluation/feedback form on completion of the virtual ante-natal programme. All 26 parents reported an increase in their knowledge and confidence regarding parenting as a result of the programme

MAPLAC strengths:

- The process has shown a number of benefits in respect of facilitating early partnership planning and has ensured that all key agencies are aware of the pregnancy at an early stage and enabled ante-natal support and help to be quickly picked up alongside any other assessment or plan, for example during a statutory children's services assessment
- Universal and targeted ante-natal packages of support and intervention were routinely and effectively implemented alongside other assessments and plans as appropriate
- Early intervention alongside statutory children's services assessment enables families to be 'stepped-out' to universal and early help services on completion of an assessment rather than needing statutory social work planning.
- Evidence of effective relational work by all partners including specialist midwives

Next steps

- Hold a multi-agency case audit practice learning line of sight event on children's cases relating to babies and young children to provide further assurance of local practice in preparation for the publication of the national Child Safeguarding Practice Review Panel's review on non-accidental injury in children under one

Respond to COVID-19 and emerging harm: Child Sexual Abuse

What have we done?

- Through the SPLIG, we have acknowledged the Joint Targeted Area Inspection 'The multi-agency response to child sexual abuse in the family environment' published in 2020 and commenced a benchmarking exercise
- We have developed a Child Sexual Abuse in the Family Environment toolkit

Outcomes and Impact:

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- A development session will be held to consolidate the current position regarding Child Sexual Abuse in the Family Environment toolkit and agree next steps
 - The toolkit provides information for all agencies to identify and respond to children who are at risk of, or subject to, child sexual abuse in the family environment. It also:
 - outlines how agencies can help children if they are beginning to identify concerns and refer to statutory services
 - outlines the support and services that such children and their parents can access support and recovery
 - gives contact details for both local and national support agencies that can be accessed by children and families independently

Next Steps:

- It is acknowledged that there remains a need to retain child sexual abuse in the family environment as one of our shine a light areas of focus for 2021/22. This will ensure that we progress our proposal to hold a development session, the outcomes of which will help to shape and drive partnership action. As part of this, there will be a focus on better understanding our local profile and levels of need. We also propose to hold a multi-agency case audit practice learning line of sight event.



Line of Sight Area of Focus

Domestic Abuse

Reduce Harm from Domestic Abuse

There has been an increase in the intensity of multi-agency activity to monitor, analyse, evaluate and action plan to support and protect victims of domestic abuse and their children and address the behaviour of perpetrators both locally and sub regionally across the Humber area.

Through a review of the Multi-Agency Risk Assessment Conference (MARAC) process and meetings, a progress report on the impact of the Re:Form non-convicted perpetrator programme and an audit of referrals made to Children's Services, practice highlights include:

- There are strong arrangements in place around the MARAC including consistent attendance by core agencies and skilled and knowledgeable chairs and members
- Strong multi-agency action plans are agreed at MARAC to reduce the risk to victims and children with include that DVAs attend child protection conferences and appropriate referrals are made to local perpetrator programmes and the activity of offenders is disrupted
- The Re:Form programme has changed behaviours resulting positive impacts, for example, where children have returned home to their parents' care following father's completion of the programme and where children's statutory plans have stepped down to early help
- From progress reporting on the impact of the Re:Form programme one participant said *'I realise now what I was doing to my kids, behaving how I did...I can now reflect on my behaviour and see that it is wrong'*
- Referrals to Children's Services detailed specific information relating to domestic abuse incident contexts and impact on children including good summaries of relevant historical information encompassing such from other local authority areas where victims had fled to North Lincolnshire
- Good analysis of father's/partner's personal issues and any involvement with, for example substance misuse, services were taken into consideration in decision making and referral outcomes

The Relationship Matters website was created in collaboration with local authorities across the region in order to support families and professionals in reducing the impact of parental conflict upon children. This website provides a range of resources and materials that can be accessed by families or can be utilised by professionals in their work with families. Initial feedback regarding the benefits of this website have been positive. A pathway of support for families experiencing parental conflict has been developed that can be accessed by agencies through the FaSST targeted family support service.

Regular communications have been promoted through @SafeNorthLincs relating to domestic abuse including the Home Office #YouAreNotAlone campaign, posters created by the Humberside Office of the Police and Crime Commissioner, the Ask for Ani scheme and the Boots Pharmacy safe spaces for victims of domestic abuse.

A Children's MARS Domestic Abuse toolkit was published which provides information for all agencies to identify and respond to domestic abuse. The toolkit also contains a wide range tools, resources and details of support services for practitioners to use when working with children and families.

We have worked collaboratively to ensure preparedness for the upcoming Domestic Abuse Act. As part of this, we have commenced work on a needs assessment capturing widespread information and progressed strategy development. This provides a sound basis for ensuring compliance with forthcoming statutory responsibilities and helps us to begin to formulate our intended shine a light areas of focus to drive forward partnership action and system change, including intervening at the earliest point. In preparing for the establishment of a Domestic Abuse Local Partnership Board and the governance arrangements we will build on the existing Domestic Abuse Strategy Group that has been in place for a number of years. Through the development and implementation of the strategy, we will focus our partnership action on our shine a light areas of focus to improve outcomes for victims, children and perpetrators.



Line of Sight Area of Focus

**Emotional Wellbeing and
Mental Health**

Emotional Wellbeing and Mental Health

Through the Children's MARS Board, underpinning and associated partnership and governance arrangements, there has been a 'line of sight' focus on seeking assurance regarding emotional wellbeing

- We have held hidden harm workshops for practitioners that included adults and children's mental health. Accompanying resources, tools and leaflets were collated and shared widely after the events
- To respond to and mitigate issues pertaining emotional wellbeing, including as a result of the pandemic, there has been a 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 ongoing 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 NHS Foundation Trusts 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
- There has been a clear drive and commitment towards ensuring our young people are digitally connected and so that they do not experience digital poverty. This is evidenced by the procurement of MIFI devices for all care leavers in the community and support for them to access the internet. This helped to reduce social isolation for our young people and enabled them to remain connected to their support networks and their wider community, leading to more positive emotional wellbeing
- Hints and tips leaflets for parents and carers and for children and young people regarding staying safe and well during COVID-19 were developed and disseminated during the lockdown periods. Feedback was provided during a multi-agency case audit practice learning line of sight event in which practitioners had used the leaflets with children and families to signpost them to support and start a conversation around their emotional wellbeing



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.

Independent scrutiny of the identification and notification process that was implemented as a result of our Local Arrangements took place. This included independent scrutiny of cases considered by North Lincolnshire Children's Services as potentially meeting the criteria for serious child safeguarding incidents.

The Independent Scrutiny report highlights: *Clear processes are in place in Children's Social Work Services for the identification of cases which might meet the criteria for referral to the Children's MARS Board. Comprehensive procedures which reflect national guidance are in place and are on the Children's MARS website if a case is felt to meet the criteria. On the basis of the past experience North Lincolnshire can be confident in its decision making about identification and notification.*

As part of the Safeguarding Practice Learning and Improvement Group (SPLIG), partner agencies and key relevant agencies were asked to provide assurance around serious child safeguarding cases. This was completed to assure ourselves that there had been no serious cases that were not notified to the safeguarding partners. This was also completed in the context we have been an area where there is a low prevalence of notifications over the past few years. Agencies provided assurance that they

- have internal processes in place for identifying potential serious child safeguarding cases
- are aware of the criteria for a serious child safeguarding case and how to notify the safeguarding partners for them to consider whether the criteria are met and whether a rapid review is undertaken to determine if a child safeguarding practice review is required
- have internal processes in place and are aware of/know how to request that the safeguarding partners or their representatives consider undertaking a child safeguarding practice review if the criteria are not met, yet the case may raise issues of importance to the local area and there has been the identification of good practice, poor practice or 'near miss' events
- have or have not discussed and considered one or more potential serious child safeguarding cases yet concluded that they do not meet the criteria for notification

Key staff were knowledgeable about the process and Children's MARS policies and procedures. The Children's MARS Board were subsequently assured that agencies know how to identify and notify the safeguarding partners of a serious child safeguarding case.

Child Safeguarding Practice Review Panel: National Reviews

We have taken account of learning from review activity led by the national Child Safeguarding Practice Review Panel including the learning points in their first 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 Child Exploitation and Missing Action Plan as required. 22 questions were set against 4 domains in relation to problem identification; supporting your staff; service design and practice development; and quality assurance. Through a collaborative benchmarking exercise, North Lincolnshire partners agreed that the necessary arrangements are in place, up to date, and meet the required standard in relation to 16 questions, demonstrating a strong partnership approach and positive local practice. For the remaining 6, it was agreed that some measures are in place but others require review or improvement. These related to the following areas of focus:

Question	North Lincolnshire position	Actions and decisions	Impact of actions taken to date
Are your services flexible enough to respond to the critical moments in children's lives?	<p>There is evidence of good practice across the partnership, though critical moments are often responded to by chance or anecdotally.</p> <p>Staff may not consciously think about critical/reachable moments when carrying out routine business</p>	<p>Children's MARS child protection and child exploitation training as well as other single agency's safeguarding training/staff development to be updated to include how to respond to critical moments</p> <p>To develop a special edition news update on lessons learned to include critical moments and disseminate across the partnership</p> <p>Incorporate critical/reachable moments into the Children's MARS child exploitation policies and procedures</p>	<p>Through training and the special edition news update, practitioners' have more awareness of pro-actively identifying and responding during critical moments.</p> <p>Our One Family Approach practice model gives permission for staff who come into contact with children during such moments to take advantage of these opportunities in children's lives to make a difference to their outcomes</p>
How well are families being engaged in the joint protection of their children?	<p>Work has been completed to strengthen and change the way professionals respond to parents as safeguarding partners. There are positive examples of parents being empowered</p>	<p>Further work to be done across agencies to strengthen and change the way practitioners engage with parents as safeguarding partners</p>	<p>Through independent scrutiny and multi-agency case audit, positive examples of parents being empowered and supported have been identified.</p> <p>Positive feedback has been received from parents about how they feel:</p> <ul style="list-style-type: none"> they have been helped through difficult and challenging times by practitioners across the partnership support has strengthened parent-child relationships and has developed family resilience has improved social, emotional and educational outcomes for their children

Child Safeguarding Practice Review Panel: National Reviews

Question	North Lincolnshire position	Actions and decisions	Impact of actions taken to date
Are adult and children's services working together where needed?	Through our established partnership and governance arrangements there are a range of opportunities for adults and children's services to work together to address concerns relating to exploitation. As part of the developing arrangements for the ROTH strategy group there have been further opportunities to strengthen and refine the membership of the group to ensure connectivity between services to children and services to adults	Strengthen joint working between adult and children services through the MACE meetings. Further develop and embed transitional support	A transitions MACE process/meetings led by adult social care has been developed. There is now a strengthened focus on young adults at risk of exploitation and a multi-agency focus on transitions
What is the pattern and trend in school exclusions? What is the nature of alternative provision available?	The education daily tasking meetings consider all children of school age and ensures appropriate provision is in place. When children are excluded, professionals work with the providers to ensure that they are aware of the potential risk of exploitation	Further work is required to look at 16 and 17 year olds who are in transition	Through the MACE process education partners are included as part of transitions planning. Further work is to be done to strengthen transitions for those children who are not discussed at MACE meetings
Is there a sufficient focus on disruption of criminal activity as well as support for victims?	Disruption is considered and implemented as part of the MACE process and there have been positive examples of disruption within hotspot locations	Implement location-based action plans in relation to local hotspot areas to address crime, anti-social behaviour, exploitation and vulnerability of children and adults to reduce harm to children Further work to be done around including the 'eyes and ears' of the community within disruption activity	The location-based action plans have led to an increase in early identification and intervention with young people in the area vulnerable to exploitation. There has been strengthened partnership working across Children's Services, including between the Youth Offending Service, Child Exploitation Intervention Team and Neighbourhood Policing which has led to an increase in the submission of partnership intelligence forms
Review current arrangements for recovering children from outside the local authority area in order to satisfy itself there are comprehensive arrangements that can reach any part of the UK	Under the auspices of the One Family Approach practice model and our commitment to a relational approach we would identify a person with a positive relationship with the child to transport them in the event that they needed recovering from another area in line with their needs and circumstances	No further action required	Not applicable

Child Safeguarding Practice Review Panel: National Reviews

We have also taken account of learning from the second national review commissioned by the Child Safeguarding Practice Review Panel ‘**Out of Routine: A review of sudden unexpected death in infancy (SUDI) in families where the children are considered at risk of significant harm**’ published in July 2020. The key learning points and key features of a 'prevent and practice' model for reducing the risk of SUDI outlined in this report have been considered to improve the way we work across the partnership with families where children are at risk of significant harm to reduce the risks of SUDI, and as suggested by the national Panel, to address a much wider range of risks to their children’s health, safety and development through embedding the practice within respectful and authoritative relationship-based safeguarding practice.

The matrix below covers the 5 reflective questions.

Question	North Lincolnshire position	Actions and decisions	Impact of actions taken to date
<p>How well do we understand the views of parents about safer sleep information: format, accessibility, timing, key messages and 'conversations' with practitioners? How is this integrated with messages around normal infant care and safety?</p>	<p>We have some understanding of parental feedback on safer sleeping methodologies taken from planned consultation via surveys such as the RDaSH NHS Foundation Trust’s 'Your opinion counts' survey, through satisfaction reports, feedback from practitioners across health and children's social care, evaluations after antenatal and parenting courses and specific audits completed across the 0 to 19 health and wellbeing service</p> <p>Consideration is given by health and social care staff to observe the space/equipment where the child will be sleeping to ensure that the environment is safe and equipment is in line with the safest practice. This provides evidence of whether parents have put advice into practice and of their understanding</p> <p>Key messages are delivered at significant times prenatally and postnatally and as part of the five key face to face contacts made by health visitors. Further work required with parents around safer sleeping is identified within key partnership forums such as the MAPLAC meeting and at key points across the wider pre-birth pathway. Public health campaigns have taken place at key times such as during hot weather to remind the public about safer sleeping and increased temperature risks</p>	<p>Seek further assurance from key services across health and children’s social care about the ways that safer sleeping and other infant care and safety messages are delivered in line with parents' views</p> <p>To deliver joint training around the ICON programme and safer sleeping</p>	<p>Parents and other household members are included in the delivery of safer sleeping advice and the messages are reinforced through literature and available in different formats tailored to need, circumstances and risk. The language that is used by professionals is consistent to aid the reinforcement of messages</p> <p>Joint training has been completed across the 0 to 19 health and wellbeing service and children's social care in relation to the ICON programme</p> <p>Ante-natal and parenting training has also been updated to share ICON information with parents</p>

Child Safeguarding Practice Review Panel: National Reviews

Question	North Lincolnshire position	Actions and decisions	Impact of actions taken to date
How far do practitioners in our workforces have the knowledge and understanding appropriate to their role to promote safer sleeping?	<p>Partners who work directly with children in their early years including maternity, neo-natal, health visiting and children's centres are accredited to silver standard through the Baby Friendly Initiative. As part of the process, practitioners must demonstrate a level of understanding around safer sleeping and safe infant care</p> <p>The delivery of advice and relevant resources around safer sleeping is a core skill within health. Key children's social care staff are also trained to provide advice to parents and to recognise and respond to safer sleeping issues</p>	<p>Complete further training around safer sleeping with additional key staff across children's social care and the wider workforce</p> <p>Seek re-accreditation from the Baby Friendly Initiative</p>	<p>As part of the Baby Friendly Initiative re-accreditation process, assessments took place across the service and evidenced that agencies continue to maintain excellent practice for mothers, babies and their families and that the standards are embedded within practice</p> <p>Staff have access to up to date training and refresher information to deliver advice to parents and to consider during assessment and intervention work</p>
How is the recognition of unsafe sleep arrangements and risk of SUDI incorporated into multi-agency safeguarding procedures and practice tools for responding to neglect, domestic violence and abuse, children of alcohol and substance-misusing parents, and children at risk where a parent has a mental health problem?	<p>North and North East Lincolnshire have joint safer sleeping guidance which provides specific advice for a range of professionals including substance misuse workers, mental health professionals and housing teams</p> <p>The NSPCC Graded Care Profile 2 is used in North Lincolnshire to assess the quality of care provided to a child and identify potential concerns around neglect. Within the tool there are considerations around sleeping arrangements for babies and young children and the guidance references the risks of co-sleeping encouraging practitioners have the conversation about safer sleeping</p> <p>There is a commitment across the partnership to use the Lullaby Trust tools and resources when working with children and families where concerns have been identified around safer sleeping</p>	<p>Promote practice tools around safer sleeping and the risk of SUDI through Children's MARS communications and include them on the Children's MARS website</p>	<p>Safer sleeping guidance, tools and resources were included as part of the hidden harm resource info-sheet that was disseminated across the partnership following the hidden harm workshops</p> <p>Information from the Lullaby Trust and Little Lullaby for young parents is available on the Children's MARS website and has been promoted widely on social media, through toolkits and news updates</p>

Child Safeguarding Practice Review Panel: National Reviews

Question	North Lincolnshire position	Actions and decisions	Impact of actions taken to date
<p>Is there sufficient workforce capacity to develop and maintain support for parenting (including safer sleep advice) with families with additional needs and for highly vulnerable families? If not, what initiatives have been taken to address this or work within the constraints?</p>	<p>There is sufficient capacity within the multi-agency workforce to provide advice to all families at a universal level</p> <p>There is also sufficient capacity through the enhanced health visiting programme and children's centres to provide intensive support and advice where required. Also, there is sufficient capacity across children's services for social workers and other practitioners to provide parenting support and safer sleep advice</p>	<p>No further action required</p>	<p>Not applicable</p>
<p>How is the partnership assured about the effectiveness of its work to promote safer sleeping and reduce the risk of SUDI?</p>	<p>Specific assurance relating to safer sleeping has been provided across the partnership through the CHaPP meeting. Safer sleeping and the promotion of the ICON programme was a specific focus of the bespoke CHaPP meeting relating to hidden harm</p> <p>Independent scrutiny has taken place in respect of 0-2s across children's social care and the 0 to 19 health and wellbeing service. This work provided further assurance that the work that takes place relating to safer sleeping is robust</p>	<p>Further promote safer sleeping advice and the ICON programme as part of the Children's MARS communication and engagement strategy</p>	<p>There has been an enhanced focus on communications to professionals and members of the public through @SafeNorthLincs social media and through partner's social media and communications channels</p>

Scrutiny and Assurance

The Children's MARS Scrutiny and Assurance Framework was published alongside the Local Arrangements. In addition to scrutiny and assurance activity already referenced, there has been additional activity, including independent scrutiny, through thematic and multi-agency case audit practice learning line of sight events leading to local learning, partnership action, changes in practice and outcomes.

Following the Ofsted focussed visit in March 2019, the quality of partnership contributions to strategy discussions was identified as an area for development. Although, this action was remedied at the time, independent scrutiny of strategy discussions took place in November 2020 to seek assurance that contributions continue to be effective and are of high quality. Safeguarding partner representatives also sought assurance that the outcomes of strategy discussions are proportionate and consistent. It is anticipated that this event will be repeated in 2021/22 in order to assure lead officers that the areas for development have been implemented and embedded and that strategy discussions remain of high quality.

Multi-agency case audit practice learning 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. A summary of learning and key themes are provided to those involved and disseminated widely through the Children's MARS news updates and 7 minute briefings that are available on the Children's MARS website.

Multi-agency case audit practice learning line of sight events that have taken place within 2020/21 have highlighted a number of key themes relating to areas of good practice and assurance:

- Practitioners are skilled and knowledgeable and there is evidence of relational, strengths-based, child centred and trauma informed practice
- There are many examples of effective joint working and communication between professionals across the partnership and creative solutions have been implemented as a result of COVID-19
- The values and principals of the One Family Approach are being demonstrated within practice
- There are positive examples of professional debate and challenge when dealing with complex cases and willingness to learn across agencies

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 has undertaken a review of the Section 11 safeguarding self-assessment audit together with the Local Safeguarding Adults Board and a joint safeguarding self-assessment audit has been developed to reduce duplication for agencies who complete it. The joint safeguarding self-assessment was disseminated to agencies to complete in December 2020 and submitted early 2021. Overall, the self-assessments provided assurance that the agencies subject to Section 11 are fulfilling their responsibilities to safeguard and promote the welfare of children. It is anticipated that updates will be requested in 2021 for agencies to address any identified areas for development. As per the Children's MARS Scrutiny and Assurance Framework, the outcomes of individual agencies self-assessments will be used as a basis of any subsequent agency specific assurance events in year.

Under Section 175 of the Children Act 2004, the 2020/21 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. The outcomes of the audit highlighted consistently good practice in relation to safeguarding across schools, academies and colleges and strong partnership working.

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. The PVI and Independent Childcare providers safeguarding audit for 2020 demonstrates a recognition by the early years sector of the importance of auditing their safeguarding policies, procedures and practice as the audit continues to be written more in depth year on year. This provides assurance that there is a sound understanding of how children are being safeguarded and identified some areas of good practice.

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.

Multi-Agency Education and Training

Taking account of government advice and guidance regarding COVID-19, all face-to-face training was postponed in March 2020. Child Protection training has continued to be offered as a priority course throughout the year via Microsoft Teams and has continued to be well attended and in high demand. The Child Protection Masterclass has been a key mechanism to embed the One Family Approach and to raise awareness of the Helping Children and Families in North Lincolnshire document with new staff across the partnership.

The Children's MARS workbooks were refreshed and reconfigured into e-workbooks for staff to complete virtually. Over the year, this has led to an increase in the number of workbooks completed across the partnership as they are easier to access and complete.

Key highlights include:

- 109 practitioners trained in Child Protection
- 65 practitioners trained in Mind Your Language: Appropriate language within the context of safeguarding and child exploitation
- 139 e-workbooks completed across a range of awareness topics including safeguarding, child criminal and child sexual exploitation and female genital mutilation
- 19 senior leaders attended bespoke training around learning from inquiries, serious case reviews and inspections
- Almost 200 Designated Safeguarding Leads (DSL) and school pastoral staff have attended the quarterly DSL briefings and have been trained in child exploitation, prevent and managing allegations. Presentations have been given on a range of local services such as the Re:Form programme and Who's In Charge programme

Due to the cessation of face to face training, there has been a focus on activity to communicate learning and key messages from national reports, local independent scrutiny work and national training opportunities to enhance practice. Some of these examples include:

- 5 toolkits for practitioners have been published and disseminated. These included practical information to support practitioners during the lockdown period such as using technology to support children and families and thematic toolkits such as protecting babies and young children
- 7 minute briefings and special edition newsletters have been used to communicate learning to frontline practitioners
- National and regional online webinars and training courses have been promoted through the Children's MARS communications channels on a range of subjects including domestic abuse, child trafficking, suicide prevention and sharing of intelligence

Multi-Agency Education and Training

In her review of the Local Arrangements, Edwina Harrison, Independent Scrutiny Officer highlighted that:

There is a culture within North Lincolnshire that there is an emphasis on individual responsibility for developing skills and that the combination of communications including those on the Children's MARS website, cascaded through newsletters and online events and training are an effective route to increasing consistency and understanding across agencies by impacting on the skills of the front line workforce.

One agency which works across geographical boundaries commented that "Email comms are shared out regularly and there are opportunities to dial into training.

We use a multitude of training across the region and share it out but more opportunities and resources are received from North Lincolnshire than the other areas in the region".

The Children's MARS annual training activity and evaluation report for 2020/21 highlighted that there has been an overall improvement on practitioners' confidence in the subject matter after all Children's MARS training courses. 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.

Since 2019, 185 multi-agency staff were trained in Reducing Parental Conflict including additional modules for supervisors and regional workshops for middle managers. Building on from this, work has continued this year to embed the Reducing Parental Conflict programme within practice. Feedback has been gathered from families who were supported by FaSST targeted family support service:

- 'Contact is easier the boys just get dropped off and collected'
- 'We are now talking instead of shouting'

Practitioners in FaSST targeted family support service have fed back that:

- 'parents are more in tune with one another and are working on considering the other person'
- 'parents are showing an understanding of the impact that the conflict has on the child'
- 'watching the videos had a bigger impact than the discussion-based activity and the outcome achieved was that the parent has been able to reflect on the different strategies that she can put into practice that will help reduce parental conflict'

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 is regularly refreshed to include a variety of resources, tools and learning from local and national reviews for professionals to access.

Children's MARS news updates continue to be used to communicate information and messages relating to the Local Arrangements to key stakeholders.

As a recommendation from the independent scrutiny of the Local Arrangements in 2019/20, a Children's MARS communication and stakeholder engagement strategy was developed and published. The accompanying communications and stakeholder engagement planner is monitored via the SPLIG and communications are coordinated according to local trends and emerging themes and link into relevant national campaigns.

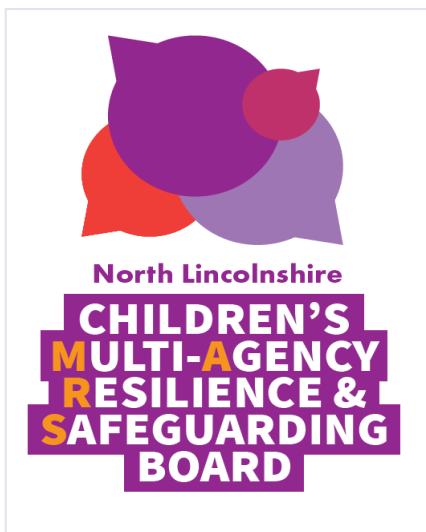
The Children's MARS annual social media activity and evaluation report for 2020/21 highlights that there has been a gradual increase in the number of followers on the @SafeNorthLincs social media feeds which has allowed key messages to be shared across North Lincolnshire. Links have been established with key communications representatives from across the partnership which has created opportunities to collaborate on a multi-agency basis to share messages and reach a wider and more diverse audience. Regular email communications via the Children's MARS communications list alert practitioners to what is new and available both locally and nationally. This has been an important mechanism to increase the reach of key messages and promote the work of the Children's MARS Board across the partnership.

Funding

Safeguarding partners have a shared ownership of funding responsibilities and they have agreed equitable and proportionate contributions to ensure the implementation of the Local 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 2020/21 (including from the National Probation Service, Community Rehabilitation Company, John Leggott College and North Lindsey College).



Children's MARS Local Arrangements

What Next?

Areas of Focus for 2021/22

In order to define our **Shine a Light** areas of focus for 2021/22, we have taken account of emerging national themes, outcomes of research, performance data and analysis, practice wisdom, voice and experiences. Key areas of influence include:

- Publication of the National Child Sexual Abuse Strategy
- The Ofsted report on Child Sexual Abuse in Schools and Colleges
- The multi-agency response to child sexual abuse in the family environment: joint targeted area inspections (JTAs) report
- We have locally trained harmful sexual behaviour practitioners, a local project and panel and there is an opportunity to further explore how this practice wisdom and expertise could be extended across our partnership, especially given the national and local attention to violence against women and girls and also peer on peer harmful sexual behaviour
- We are also investing in further awareness raising and specialist training in evidence informed harmful sexual behaviour approaches
- Child Sexual Abuse was identified as a 'shine a light' area of focus in 2020/21 and some partnership action was taken to progress our local thinking, but 'next steps' have been identified for partnership action
- It is acknowledged that child sexual abuse is a difficult form of abuse to identify and can often remain hidden, and an amplified focus is appropriate

As such, our **Shine a Light** areas of focus for 2021/22 are as follows:

'Shine a Light' Areas of Focus	Lead Partnership	Anticipated Partnership Action and System Change
Further develop the multi-agency approach to Risk Outside the Home with a focus on harmful sexual behaviour	Risk Outside The Home Strategy Group	<ul style="list-style-type: none"> • Roll out and embed the Risk Outside The Home Approach • Refresh Risk Outside the Home Strategy • Develop and implement the Risk Outside the Home action plan • Hold a multi-agency case audit practice learning line of sight event pertaining harmful sexual behaviour outside of the family home including peer on peer harmful sexual behaviour and teenage relationship abuse
Further develop the multi-agency approach to Child Sexual Abuse in the family environment	Children's Help and Protection Pathway Group	<ul style="list-style-type: none"> • Partnership data development and analytics to better understand our local profile and levels of need • Hold a development session, the outcomes of which will help to shape and drive partnership action • Hold a multi-agency case audit practice learning line of sight event pertaining child sexual abuse in the family environment

As well as our specific 'shine a light' areas of focus, the Children's MARS Board adopts a 'right to roam' approach and as such, will maintain a **line of sight** across the early help and safeguarding pathway in order to seek assurance, challenge, shape and influence partnership action and system change, some of which are the responsibility of other partnership and planning frameworks. As part of this, to orientate 'line of sight' activity, the Children's MARS Board will take account of performance, practice wisdom and voice and experiences on wider emerging need and harm

Delivery Plan, Implementation and Review

As safeguarding partners and relevant agencies, we will continue to listen, learn, review and adapt in order to ensure our Local 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 Local 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. Proposed actions for inclusion in the delivery plan have been highlighted as follows:

Portfolio Area	Delivery Plan Action	Safeguarding Partner lead
Local Arrangements	Maintain focus on the implications of the developments pertaining the Humber Coast and Vale Integrated Care System and ensure a continued focus of safeguarding in the context of North Lincolnshire	Safeguarding Partners
Scrutiny and Assurance	Explore, evaluate and develop our scrutiny and assurance framework	Director of Quality and Nursing
Scrutiny and Assurance	Repeat the multi-agency case audit learning event on children's cases relating to babies and young children to provide further assurance of local practice in preparation for the publication of the Safeguarding Practice Review Panel review on non-accidental injury (NAI) in children under one	Director of Quality and Nursing
Child Safeguarding Practice Reviews	Revisit the independent scrutiny of the identification and notification process for serious child safeguarding cases to seek assurance of our local decision making	Director of Children and Community Resilience
Stakeholder Engagement	Develop further opportunities for engagement and co-production to enhance the voice and influence of those with lived experiences	Director of Children and Community Resilience
Data Intelligence and Performance	Further develop the performance framework across the partnership to underpin our Local Arrangements	Chief Superintendent and South Bank Divisional Commander
Funding	Review funding contributions and identify future priorities for expenditure to innovate and to develop evidence informed approaches to practice in order to continue to deliver our Local Arrangements	Chief Superintendent and South Bank Divisional Commander

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

GLOSSARY

C	<p>Child criminal exploitation (CCE) 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>Child Safeguarding Practice Review 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>Child sexual exploitation (CSE) 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>
F	<p>Families are Safe, Supported, Transformed (FaSST) is the targeted family support service in North Lincolnshire</p>
H	<p>Hidden Harm can be considered as uncovered and/or unreported abuse of a person or people</p>
I	<p>ICON is a national programme which aims to support parents/carers to cope with crying babies and reduce the risk of infants sustaining physical injuries including abusive head trauma</p> <p>Independent Domestic Violence Advisor (IDVA) provide safety advice and support to high risk victims of domestic abuse</p> <p>Integrated Multi-Agency Partnership (IMAP) 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>
K	<p>Kooth is an online emotional and mental health support service that young people in North Lincolnshire aged 11 – 24 can access</p>
M	<p>Multi-Agency Risk Assessment Conference (MARAC) 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>Multi-Agency Looked After Partnership (MALAP) is a multi-agency group who work together to improve outcomes for children and young people in care and care leavers</p> <p>Multi-Agency Child Exploitation (MACE) Meeting 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>Multi-Agency Pre-Birth Liaison and Consultation (MAPLAC) Meeting is a partnership group who have oversight of cases of pregnancy where there may be identified additional vulnerabilities and the family would be likely to benefit from targeted early help at the earliest stage possible</p> <p>Missing Children’s Advocates 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>Northern Lincolnshire and Goole (NLaG) NHS Foundation Trust is the provider of NHS services through Scunthorpe General Hospital and community services in North Lincolnshire and two other neighbouring local areas</p> <p>Not In Our Community (NIOC) 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>

GLOSSARY

O	<p>The One Family Approach (OFA) aims to create a system that works for all children, young people and families in North Lincolnshire</p> <p>ONGO is the provider of social housing and community services in North Lincolnshire</p> <p>Operation Encompass 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>
P	<p>Partnership Integrated Triage (PITSTOP) Meeting is a multi-agency daily triage which considers police information and identifies and potential levels of need at the earliest level</p> <p>Prevent is a Home Office strategy which aims to safeguarding and supporting those vulnerable to radicalisation including children and young people</p>
R	<p>A Rapid Review 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>The Re:Form programme is a domestic abuse non-convicted perpetrator programme which aims to manage risk to victims and families, increase safety, and reduce incidents thereby improving outcomes around perpetrators being able to sustain non-abusive behaviour</p> <p>Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH) is the provider of NHS services and community services in North Lincolnshire</p> <p>Risk Outside the Home (ROTH) 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>
S	<p>SafeNorthLincs is a partnership social media presence joint between the Children’s MARS Board, Local Safeguarding Adults Board and the Community Safety Partnership</p> <p>Section 11 (Children’s Act 2004) 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</p> <p>Special Educational Needs and Disabilities (SEND) is used to describe a child or young person who has a learning difficulty and/or a disability that means they need special health and education support</p>
T	<p>The Blue Door Support Service is a local Community Interest Company that provides specialist domestic abuse services for victims and children aged 16 to 17 years</p>
W	<p>Who’s In Charge? is a 9 week child to parent violence programme aimed at parents whose children are being abusive or violent toward them or who appear out of parental control.</p>
O	<p>0-19 health and wellbeing service is the integrated health visiting and schools nursing service for North Lincolnshire. The team lead the Healthy Child Programme and provide a series of public health interventions from the antenatal period to age 19 and up to the age of 25 for young people with special educational needs. Locally, the service is delivered by Rotherham, Doncaster and South Humber (RDaSH) NHS Foundation Trust</p>

Contact and follow us:



North Lincolnshire

**CHILDREN'S
MULTI-AGENCY
RESILIENCE &
SAFEGUARDING
BOARD**

Page 100



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www.northlincscmars.co.uk

NHS
North Lincolnshire
Clinical Commissioning Group



**North
Lincolnshire
Council**

NORTH LINCOLNSHIRE COUNCIL

HEALTH AND WELLBEING BOARD

Local Safeguarding Adults Board Annual Report 2020/21

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To note the publication of the Local Safeguarding Adults Board (LSAB) Annual Report outlining the work of the LSAB and its members to carry out and deliver the objectives of the strategic plan.
- 1.2 The contents of the report should be considered in relation to planning, commissioning and budget setting.
- 1.2 The report demonstrates that the LSAB:
 - listens and responds to the voices of adults with care and support needs, and adults with the lived experience
 - is effective in providing help and protection to adults with care and support needs
 - effectively meets statutory obligations
 - benefits from strong and consistent leadership
 - has made good progress on delivering the strategic objectives laid out within the strategic plan

2. BACKGROUND INFORMATION

- 2.1 The Care Act 2014 places the council's duties in respect of safeguarding adults with care needs who are at risk of abuse or neglect on a statutory basis.
- 2.2 The LSAB has a statutory requirement to publish an annual report, which offers assurance that local safeguarding arrangements and partnerships help and protect adults with care and support needs in its area. The annual report details the work of the LSAB during the year to achieve its main objectives, and deliver the strategic plan priorities, as well as detailing the findings of any Safeguarding Adult Reviews (SARs) that may have been undertaken.
- 2.3 The 2020/21 annual report has been approved and will be published on the NLSAB website.

- 2.4 The annual report was presented to Cabinet on 24 January 2022.
- 2.5 The annual report is required to be distributed through relevant governance routes across safeguarding partner organisations. The contents of the report should be considered in relation to planning, commissioning and budget setting. Organisations should fully consider the contents of the annual report how they can improve their contributions to both safeguarding throughout their own organisation, and to the joint work of the LSAB.
- 2.6 The Care Act 2014 also requires the report to be submitted to the Local Police and Crime Commissioner, Chief Constable, and Healthwatch via LSAB board members.
- 2.7 The annual report provides details of progress in relation to the boards strategic plan, and the six strategic priorities, which are:
- Prevention
 - Proportionality
 - Partnership
 - Empowerment
 - Protection
 - Accountability
- 2.8 The key achievements, and the positive impacts for adults with care and support needs and their families highlighted within the report are:
- There is a clear demonstrable commitment to safeguard and support adults with care and support needs, and their families across the area, through representation at the board by senior managers of all organisations.
 - There is a strong focus on engaging with and listening to adults, and their families to understand their views and experiences. In May 2020 Adults with care and support needs and a lived experience wrote and produced a poem in recognition of the community spirit seen during the pandemic.
 - Adults with care and support needs and a lived experience were empowered to share their knowledge and expertise with the local community, partner organisations and frontline practitioners by planning and facilitating the safeguarding conference called '*Listen to me and hear my voice*'.
 - Following the conference, the adults who were involved were supported to design and produce several guidance documents. The documents were aimed at professionals, informing them how they can help adults who might be experiencing, or at risk of abuse and neglect in the future.
 - Adults and their families are empowered to help them to recognise the signs of abuse, know how to report concerns and seek help to keep themselves and others safe - as a result several easy read documents have been co-produced and are now available on the website.
 - There are strong relationships with the other key strategic partnerships – the Children's Multi-agency and Resilience Safeguarding, Adults Voice Partnership, Community Safety Partnership and Domestic Abuse Partnership Board.

- To ensure that young people and their families feel supported when transitioning from childhood to adulthood, a joint plan with children's services has been developed.
- There is ongoing development and implementation of our scrutiny and assurance framework, thematic and agency specific assurance events and practice learning line of sight events leading to changes in practice where appropriate.
- To help partners make continued improvements in keeping adults safe, key messages and learning from reviews have been shared.
- In partnership with adults who have a lived experience, communications on the LSAB website have been enhanced as a means of sharing information and publicising key documents, tools, and resources with adults and their families, as well as partner agencies.
- The safeguarding data shows the voices of the adult, and their families are being listened to, the data dashboard is regularly scrutinised by the Protection & Accountability subgroup.

Future priorities

During 2020/21 the board have made considerable progress in relation delivering the priorities and strategic objectives outlined within the Strategic Plan. The board recognise the importance of ensuring that focus continues to remain on the issues which are going to make the greatest difference to safeguarding people in North Lincolnshire.

The following key themes have been identified by board partners as areas of focus in 2021/22.

- Liberty Protection Safeguards (LPS) are due to replace the Deprivation of Liberty Safeguards (DoLS) in 2022. The board will continue to work with partners to prepare for the implementation and will support partners to keep up to date with the evolving situation regarding the timeline and publication of the statutory guidance.
- In line with the government change in legislation and the formal establishment of Integrated Care Systems (ICS), the board will focus on ensuring safeguarding arrangements continue to remain a priority locally, whilst also committing to strengthen our working arrangements with colleagues across the regional Humber Partnership and the Humber, Coast and Vale Integrated Care System.
- The board will continue to analyse safeguarding data, as well as the impact of the pandemic on adults with care and support needs and plan to address any additional safeguarding needs that emerge as a consequence.
- The board will continue ensure that appropriate training and education is offered to partner agencies, including the development of multi-agency training. We will

remain committed to supporting our community, making sure they are equipped and empowered to play their part in preventing, detecting, and reporting abuse and neglect.

- The board and Executive Leads will evaluate the priorities within the 2019 - 2022 Strategic Plan, this will include reviewing both the system-wide assurance priorities and operational priorities.

3. OPTIONS FOR CONSIDERATION

- 3.1 To note the publication of the LSAB annual report outlining what the LSAB and its members have done to carry out and deliver the objectives of the strategic plan.
- 3.2 The contents of the report should be considered in relation to planning, commissioning and budget setting.

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 wide ranging consultation with adults who have care and support needs, adults with lived experience, as well as safeguarding partners and relevant agencies in the work of the NLSAB, and implementation of the strategic plan.

There will be further engagement opportunities as we continue to listen, learn, adapt, and review.

9. RECOMMENDATIONS

- 9.1 To receive the LSAB Annual Report 2020/21 and consider this where relevant in relation to planning, commissioning and budgets setting processes.
- 9.2 To note submission of the report to the following via board members to consider the contents of the report and how they can improve their contributions to both safeguarding throughout their own organisation and to the joint work of the board -
- Leader and Chief Executive of the Council
 - Police & Crime Commissioner and Chief Constable of Humberside Police
 - Healthwatch

Church Square House
30-40 High Street
Scunthorpe
North Lincolnshire
DN15 6NL

Author: Helen Rose – Safeguarding Adults Board Manager
Date: 4 January 2022

Appendix –
Care Act 2014
LSAB Annual Report 2020/21

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North Lincolnshire Safeguarding Adults Board Annual Report



Foreword

I am very pleased to introduce the 2020/21 annual report for North Lincolnshire Safeguarding Adults Board. During the past year we have faced unprecedented challenges throughout the Covid pandemic. I would like to thank all Board members for their continuing commitment to keeping people in North Lincolnshire safe and well, while at the same time finding creative ways to maintaining the core business of the Board by moving online.

As the annual report demonstrates, we have had another busy and productive year. Each of the Board's subgroups has continued to work together to deliver the Board's strategic priorities. The report gives many examples of how these have been achieved:- updating and creating a range of information leaflets about safeguarding; a multi-agency pilot scheme aimed at preventing fraud and dealing with scam telephone calls; training and development courses; seven-minute briefings on a range of safeguarding issues; and updating the Multi Agency Safeguarding Policy and Procedures.

The Board continues to monitor safeguarding activity in North Lincolnshire, looking at how we compare regionally and with the national picture. During 2020/21 we have continued to see an increase in both the number of safeguarding concerns and safeguarding enquiries, this is thought to be due to an increase in knowledge and understanding of what constitutes a safeguarding concern, as well as an increased awareness of how to report safeguarding issues to the council. This is consistent with both regional and national trends over the last three years. Board members remain fully committed to the principle that safeguarding adults is everyone's responsibility. We aim to ensure that all the communities in North Lincolnshire are equipped to play their part in preventing, detecting, and reporting neglect and abuse.

One of the highlights of the year was the November 2020 online safeguarding conference "Listen to me and hear my voice". The conference was planned and facilitated by adults with a lived experience of safeguarding. The aim was for professionals to learn from adults who had experienced safeguarding interventions. The conference, attended by over 200 people, was thought provoking, moving and a great testament to everyone involved. Presentations from the conference are available on the SAB website and via links in this report.

This is my final foreword as Independent Chair of the Board. It has been a pleasure and privilege to contribute to safeguarding in North Lincolnshire since 2012, and to listen to the voices of people with lived experience in improving safeguarding for everyone. I know that the commitment of all partners will ensure that the Board continues to strengthen and improve over the coming years. Thank you all for your support.



Moira Wilson

Introduction

This Annual Report details the work carried out by the North Lincolnshire Safeguarding Adults Board (NLSAB), to fulfil its statutory responsibilities for strategic development and oversight of adult safeguarding across the North Lincolnshire area. The report covers the one-year period (1 April 2020 – 31 March 2021) highlighting the board's progress and achievements.

The report includes how partners have contributed to the work of the board to promote effective adult safeguarding during the Covid-19 pandemic. Covid-19 has brought significant challenges and changes to people in our communities and to the way in which services are delivered. Safeguarding Adults however, has not changed and has remained a statutory function and a priority.

During this extremely challenging year we have made good progress in delivering the priorities and objectives laid out within our Strategic Plan for 2019 – 2022.

Key achievements

- Adults with care and support needs and the lived experience were empowered to share their knowledge and expertise with the local community, partner organisations and frontline practitioners through the 'Listen to me and hear my voice' Safeguarding Conference held in November 2020.
- There is a strong focus on engaging with and listening to adults with a lived experience, and their families to understand their views and experiences. A number of guidance documents have been produced by the adults aimed at professionals, telling them how they can help adults experiencing, or at risk of abuse and neglect in the future.
- Adults and their families are empowered to help them to recognise the signs of abuse, know how to report concerns and seek help to keep themselves and others safe - as a result several easy read documents have been co-produced and are now available on the website.
- To ensure that young people and their families feel supported when transitioning from childhood to adulthood, a joint plan with children's services has been developed.
- Communications through the board website have been enhanced as a means of sharing information and communication and publicising key documents, tools, and resources with adults and their families, as well as partner agencies.
- There is a clear demonstrable commitment to safeguard and support adults with care and support needs, and their families across the area, through representation at the board by senior managers of all organisations
- The board participated in a pilot scheme in relation to the prevention of fraud and telephone scams.
- The board has effective links with a number of strategic partnerships within North Lincolnshire, including the Children's Multi-agency and Resilience Safeguarding Board, Community Safety Partnership, Adults Partnership and Health and Wellbeing Board.
- More safeguarding enquiries in North Lincolnshire than the England average, led to risks being either reduced or removed.
- Following the publication of Adult A SAR in 2020, in the absence of a forensic service nationally and locally, North Lincolnshire Clinical Commissioning Group commenced a pilot scheme with NHS England and the Faculty of Forensic and Legal Medicine to develop a programme to train health professionals to undertake forensic examinations.
- Northern Lincolnshire & Goole Hospitals NHS Trust have reviewed and enhanced the safeguarding dashboard enabling key themes and trends to be identified at an earlier stage.
- Throughout 2020/21 Healthwatch North Lincolnshire continued to facilitate the 'Telephone Buddy Scheme' with over 130 people were supported by the scheme during that period.
- In response to national increases in domestic abuse safeguarding concerns, East Midlands Ambulance Service have commissioned bespoke training and have enhanced information available to frontline staff.

About the North Lincolnshire Safeguarding Adults Board

The NLSAB brings together partner agencies to work together to on priorities to reduce the risks for adults with care and support needs in respect of abuse and neglect.

The board is a statutory partnership with specific duties and functions as set out within the Care Act 2014. The overarching purpose of the board is to ensure effective coordination of response and services to safeguard and promote the welfare of local adults who may be at risk of abuse and harm.

Page 11
It does this by:

- Assuring itself that local safeguarding arrangements are in place as defined within the Care Act 2014.
- Assuring itself that practice is person-centred and outcome focussed.
- Working collaboratively to prevent abuse and neglect where possible.
- Ensuring that agencies and practitioners give timely and proportionate responses when abuse or neglect have occurred.
- Assuring itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.

The duties of the board as set out within the Care Act 2014 include:

- The publication of a strategic plan, outlining how the board will meet its objectives and how partner agencies will support the delivery of the plan.
- The publication of an annual report, providing details of the work of the partnership to implement the strategy and achieve its objectives during the previous year.
- The commissioning of Safeguarding Adult Reviews (SARs) under section 44 of the Care Act 2014.

The NLSAB is made up of senior officers nominated by each member agency. Members have sufficient delegated authority to effectively represent their agency and make decisions on their agency's behalf, and, if they are unable to attend board meetings for any reason, they send a nominated representative of sufficient seniority.

Board membership

Core statutory members:

- North Lincolnshire Council
- North Lincolnshire Clinical Commissioning Group
- Humberside Police

Additional members:

- Regulated health and social care provider representative
- Humberside Fire and Rescue Service
- Northern Lincolnshire and Goole NHS Foundation Trust
- Rotherham, Doncaster and South Humber Mental Health Trust
- Primary care
- National Probation Service
- Public Health
- East Midlands Ambulance Service
- Ongo (housing provider)

Advisory members:

- Cabinet Member for Adults and Health
- Healthwatch North Lincolnshire
- NHS England
- Care Quality Commission

Strategic Plan

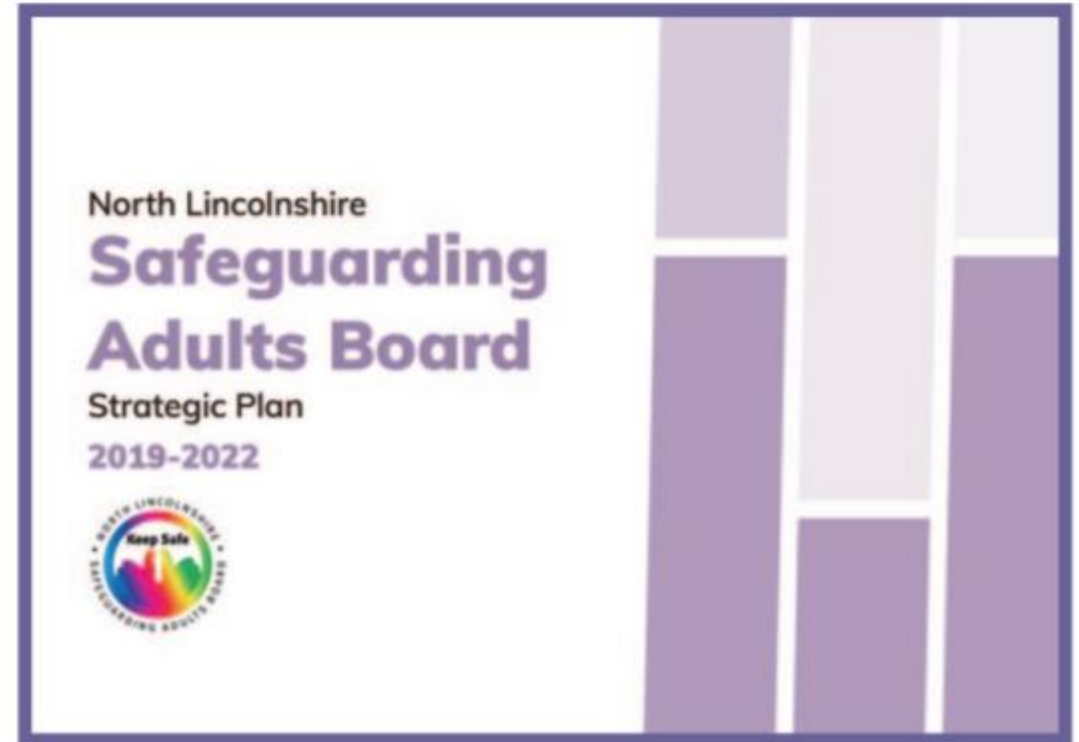
North Lincolnshire Safeguarding Adults Board seeks to empower and protect adults with care and support needs who are at risk of abuse and neglect, as defined in legislation and statutory guidance.

The NLSAB Strategic Plan 2019 - 2022 lays out the shared outcomes, goals and objectives for the board partnership.

Page 13
The plan was developed in partnership with adults who have a lived experience, their carers and board members. The plan covers how the board will focus on the prevention of abuse and neglect as well as making sure that partner agencies work together to keep people safe when abuse has occurred, giving people choice, control, and involvement.

The board's overarching strategic priorities and objectives are aligned to the six principles of safeguarding, which are underpinned by fourteen strategic objectives.

The NLSAB Executive Group (North Lincolnshire Council, North Lincolnshire Clinical Commissioning Group and Humberside police) and the full Safeguarding Adults Board monitors, and continually reviews progress made against the strategic plan.



www.northlincssab.co.uk/wp-content/uploads/2019/11/SAB-Strategic-Plan-2019-22-D.pdf

Our Board Priorities

PREVENTION

This means:

The focus will remain on the issues that are going to make the greatest difference to safeguarding people in North Lincolnshire.

We will seek assurance that our partners are securing improvement with regard to the MCA and DoLS / Liberty Protection Safeguards.

PROPORTIONALITY

This means:

We will identify and support people at risk including carers.

We will work with community services to support individuals who may be at risk.

We will identify and learn from case studies and SARs and use this to develop preventative measures.

PROTECTION

This means:

We will strengthen existing processes which support the transitions arrangements between childhood and adulthood.

People who are receiving health and social care services in North Lincolnshire are protected from abuse and harm.

ACCOUNTABILITY

This means:

Board partners are clear as to expectations.

The Board is assured that Safeguarding arrangements and partners act to help and protect adult who may be at risk in North Lincolnshire.

PARTNERSHIP

This means:

The needs and aspirations of the vulnerable adult will be fundamental to their safeguarding journey.

We will engage with vulnerable adult, groups and communities to contribute towards policy, practice and awareness raising.

EMPOWERMENT

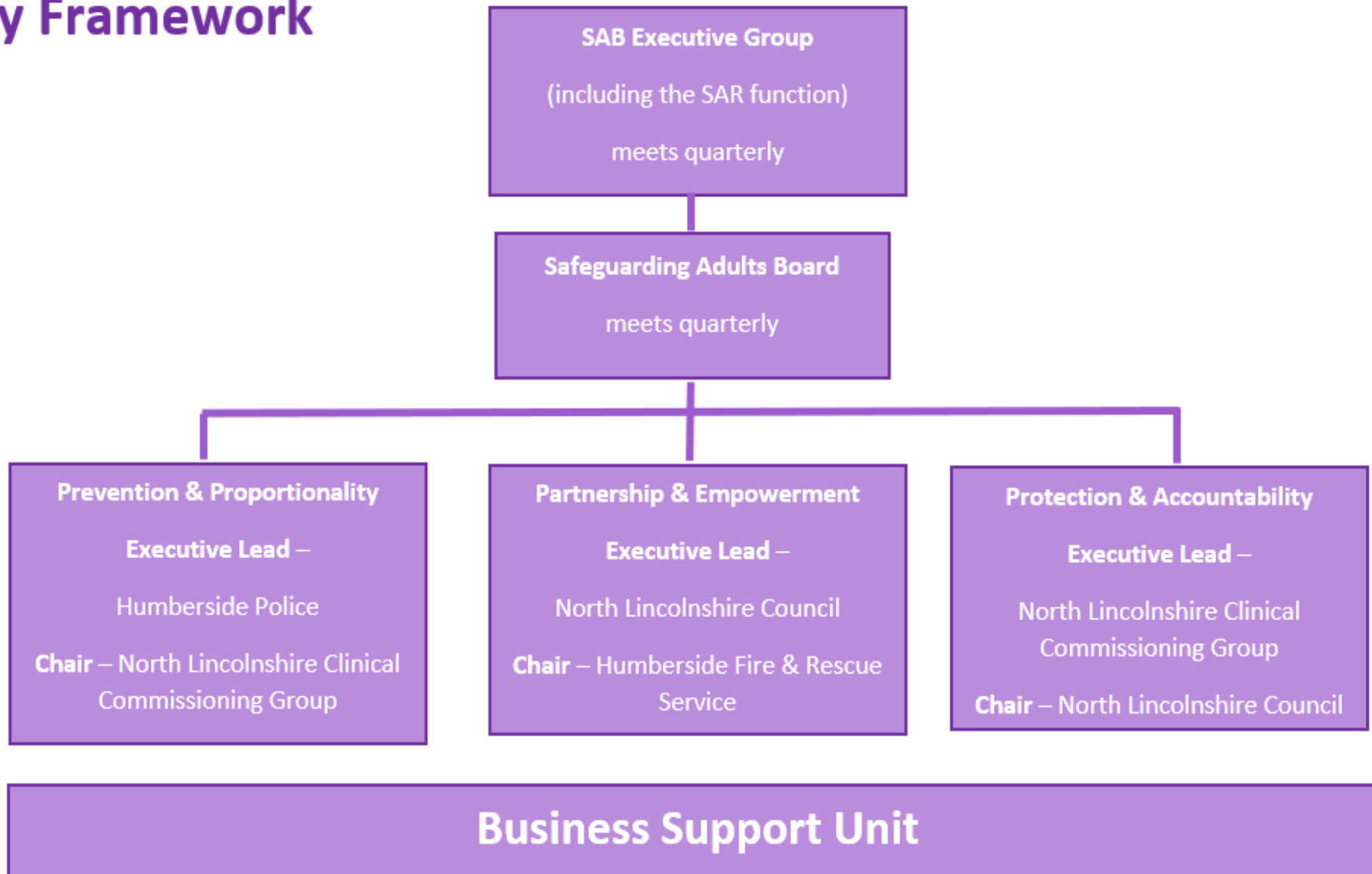
This means:

A joint and consistent approach to Safeguarding across all Boards and partnership arrangements.

We will explore a joint approach to safeguarding training and education.

Supporting the community to have an understanding of safeguarding, what support is available and how to access it.

Delivery Framework

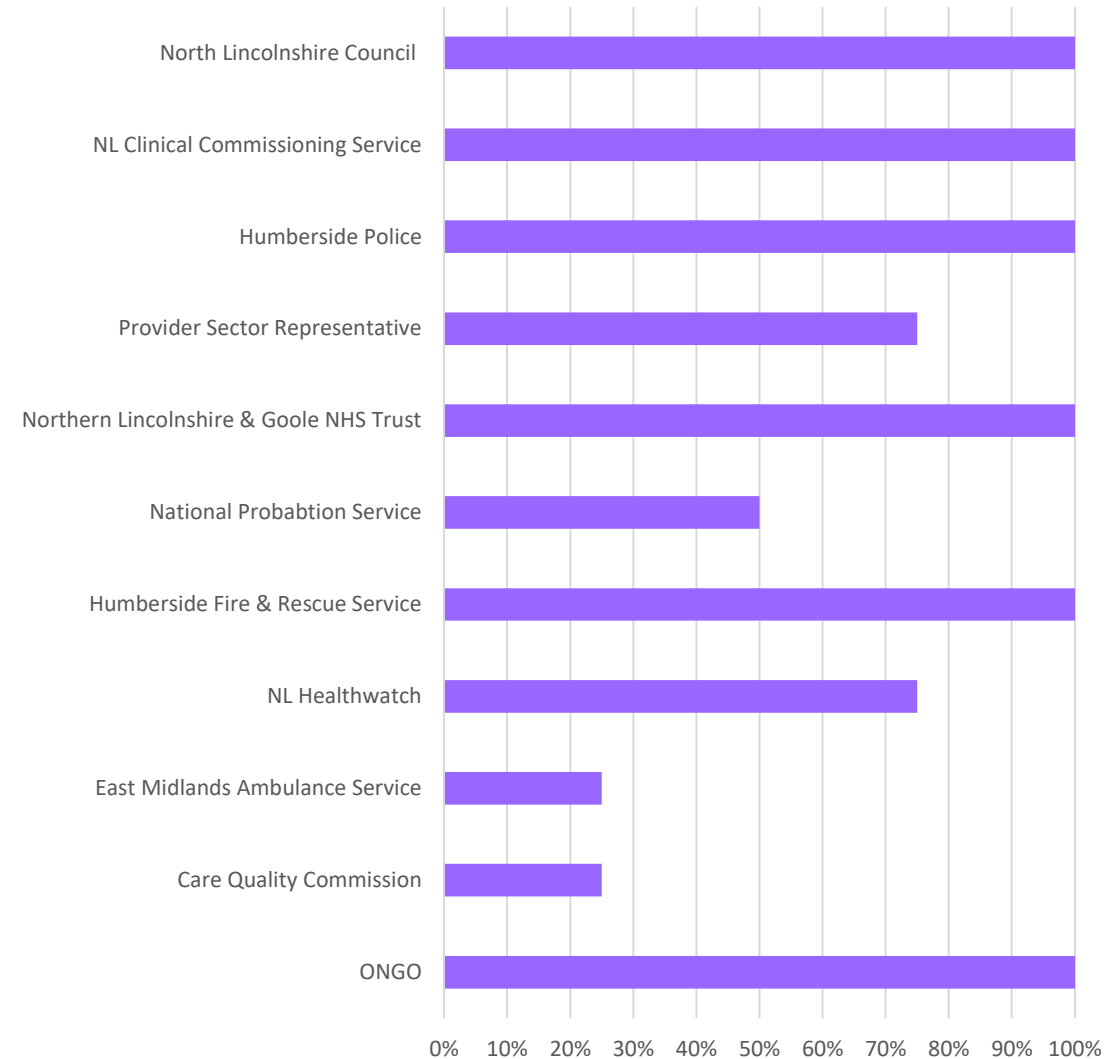


Board attendance

Throughout 2020 / 21 the Executive group and the full board met quarterly. In the intervening periods the subgroups (Protection & Accountability, Prevention & Proportionality, and the Partnership & Empowerment) regularly met and carried out safeguarding activity as outlined within the strategic plan, reporting progress and outcomes directly to both the Executive group and the board.

The NLSAB continues to demonstrate a sustained level of attendance and participation from members. There is a clear commitment to safeguard adults across the area, through representation by senior managers of all partner agencies that have an investment in good safeguarding practice.

Board Attendance



Actions completed by the subgroups to meet board objectives

Partnership & Empowerment subgroup

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The Partnership and Empowerment subgroup consists of representatives from Humberside Police, Humberside Fire and Rescue, Healthwatch, North Lincolnshire Council and Ongo, and is supported by several adults with a lived experience. The group is chaired by Jason Frary, Station Manager, Service Delivery for Humberside Fire and Rescue Services.

The group understand the value of working together with partner agencies and other professionals to get the best result for adults with care and support needs who are at risk of abuse and neglect. The group also recognise the importance of ensuring that the voice of adults who have a lived experience is heard, and that this directly informs the work of the board.



Actions completed by the subgroups to meet board objectives

Partnership & Empowerment subgroup

“Our poem – thank you to North Lincolnshire”

In May 2020 a group of adults with a lived experience wrote and produced a poem in recognition of all the hard work and the community spirit seen during the pandemic. The poem was a collaborative effort with some adults writing the poem, others contributing words which were special to them. The poem highlighted the fantastic community spirit and wonderful acts of kindness which were seen throughout North Lincolnshire.

The adults produced the poem as a short video and is something they were extremely proud of.

<https://www.youtube.com/watch?v=MQrV40eHWG4>



Safeguarding conference 2020

“Listen to me and hear my voice”

In November 2020 the NLSAB held an online safeguarding conference. The conference was planned and facilitated by adults with a lived experience of safeguarding. The aim was for professionals to learn from the adults who had experienced safeguarding interventions. The adults decided they wanted the title to be ***‘listen to me and hear my voice’***.

The emphasis on this conference was very much about the voice of the adult, empowering them and recognising that they are the ‘experts’, and professionals should not only be listening to their voice, but learning from their knowledge.

Working within Covid-19 guidelines the subgroup worked with the adults, facilitating their involvement, meeting at local parks and outside spaces to agree the content and to film presentations in their own words. Participants were empowered and supported to be involved, their expertise was central to the delivery of the conference. The adults chose to be involved in several different ways, some were part of videos and photographs, whilst other adults chose to help with the design posters and IT aspects.

All of the adults were able to watch and take part in the conference on the day. The conference was recorded and the video is available to watch on the SAB website ([link in here](#)).



A guide for professionals about loneliness

By adults with the lived experience



A guide for professionals about fraud and financial abuse

By adults with the lived experience



A guide for professionals about cuckooing

By adults with the lived experience



Safeguarding conference 2020 “Listen to me and hear my voice”

The adults chose the three key themes, based on areas which were important to them, areas which they all had their own experiences of, and which they wanted professionals to know more about.

Loneliness, fraud and cuckooing.

The adults wanted the professionals to listen to them and learn from what they were saying. They were keen to give professionals some ‘tools’ for them to use when working with adults who might be at risk in the future.

The adults produced three guidance documents written in their own words, aimed at professionals, telling them what to look out for, and what they can do to help adults who might be experiencing these types of abuse.

<https://www.northlincssab.co.uk/news-and-resources/>

Safeguarding conference 2020

“Listen to me and hear my voice”

The conference took place online and was a great success with over 200 attendees from our partner agencies being invited to take part. Hearing the stories of the adults with lived experience helped professionals think about their practice in a different way. Feedback from some of the attendees included:

Page 121

The lived experiences were impactful and thought provoking, both on a personal, and professional level – combined with professional views made for excellent learning

It was fantastic and lovely to see the vulnerable adults taking the lead. I liked that I could join online

These messages will stay with me throughout my career –

** Safeguarding is about the adult – not me!*

** The silence is deafening*

** Just because I've been a victim doesn't mean I can't look after myself!*

“Listen to me and hear my voice”

feedback from adults with the lived experience

“Taking part in the conference and offering my thoughts on loneliness filled me with a great deal of pride knowing that perhaps my words might help other people. I want to thank everyone who included me, it was an absolutely wonderful experience”

Page 122
Esme

“I really enjoyed being part of it, it was good to tell people about cuckooing and what to look out for so other people can be helped. I also learnt a lot of things about keeping myself safe too”

Lyndsey

“I was over the moon, with the conference, really over the moon. I loved being part of it. I was happy that I was able to give the professionals information and leaflets about what they can do to help vulnerable adults like me. It was very important information”

Derek

“I have really enjoyed taking part in the conference, I liked doing the presentations and the filming”

Karen

Actions completed by the subgroups to meet board objectives

Partnership & Empowerment subgroup

During the last year the group have worked with adults who have a lived experience, and their families to help them recognise the signs of abuse, know how to report concerns and seek help to keep themselves and others safe – as a result the following easy read guidance documents and leaflets have been co-produced and are now available on the SAB website.

- A safeguarding booklet designed for adults with care and support needs and their families explaining the safeguarding process.
- A leaflet explaining what mate crime is and how to seek help.
- Information in relation to the Mental Capacity Act 2005.
- Information and guidance on choosing a care home.
- Information about keeping safe online.

Easy Read Leaflet



Your safeguarding
Leaflet

Easy Read Leaflet



Mate Crime



Actions completed by the subgroups to meet board objectives

Prevention & Proportionality subgroup


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The subgroup understands that to support adults who have care and support needs, it is important that they are given clear and simple information about what abuse is, how to recognise it and seek help. It is also important that a proportionate response is given to any safeguarding concerns, and that partner agencies work in the best interests of adults who have care and support needs within North Lincolnshire.


The subgroup consists of representatives from North Lincolnshire Council, ONGO, Cloverleaf Advocacy Services, Humberside Police, independent provider sector, Northern Lincolnshire & Goole Hospitals NHS Trust, North Lincolnshire Council and is chaired by Sarah Glossop, Designated Nurse and Head of Safeguarding for North Lincolnshire Clinical Commissioning Group.


The subgroup share real life stories, experiences and information about priority areas to prevent vulnerable adults coming to harm. The group have worked with adults with a lived experience of safeguarding, together they identified the need to ensure adults who have care and support needs are able to easily seek help and report abuse.

As a result an easy read referral form has been developed so that adults at risk can be enabled and empowered to report abuse themselves. This form has been disseminated amongst our partner agencies and is now available on the SAB website.


TELL SOMEONE AND BE SAFE FORM
This form is for you to fill out if you are worried that someone is harming you, or someone else, and you would like some help with this and/or want it to stop




 Your Name


 Address


 Home number

1

Are you OK if someone comes to see you to help?
(Please circle your answer)

  
Yes No

What do you want to happen about this?


If it is someone else you are worried about:
What is their name?


3

Actions completed by the subgroups to meet board objectives

Prevention & Proportionality subgroup

The subgroup have worked in partnership with Humberside Police on a multi-agency pilot scheme in relation to the prevention of fraud and scam telephone calls. The pilot involves supplying a TrueCall device to vulnerable adults who have been the victims of nuisance telephone calls, with the aim of preventing them from becoming repeat victims.

So far a total of 32 devices have been fitted. An average of 37 calls per month are captured on the device, of which an estimated 44% were nuisance or scam calls. The Truecall device was able to block 99% of those nuisance or scam calls.



37

nuisance and scam calls received per month



44%

of all calls received were nuisance or scam calls



99%

of nuisance and scam calls were blocked by trueCall call blocking technology

Here are some of the comments from adults and their families who were protected by the call blocker



This made a huge difference and enable my mother to live in her own home for longer



My mother no longer gets anxious and agitated. I cannot impress on you the positive impact this has made.



Thanks for making my phone my friend again!

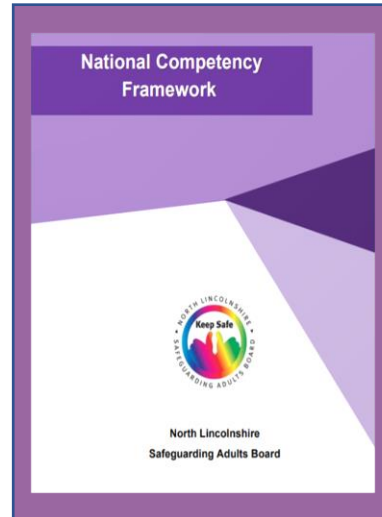
Actions completed by the subgroups to meet board objectives

Prevention & Proportionality subgroup

The subgroup regularly review the safeguarding resources available on the NLSAB website, which includes a range of eLearning training packages such as fraud awareness, forced marriage and domestic abuse, ensuring that any information is current and up to date.

The subgroup have developed a competency framework for training which is aligned to both the Bournemouth University National Competency Framework for Safeguarding Adults and the NHS Intercollegiate Guidance Document on Safeguarding Training. The document outlines key competencies within the workforce to allow staff and volunteers to ensure the safety and protection of adults at risk of or experiencing abuse and/ or neglect. It offers a clear framework of these competencies within varied roles where people may work with an adult at risk.

The framework aids partner agencies to use identifiable standards to measure the competencies of staff, record appropriate evidence and have a framework which outlines achievable outcomes for the development of staff and volunteers.



The board has been assured by its partners that their workforce in North Lincolnshire have sufficient training at the right level to discharge its safeguarding responsibilities.

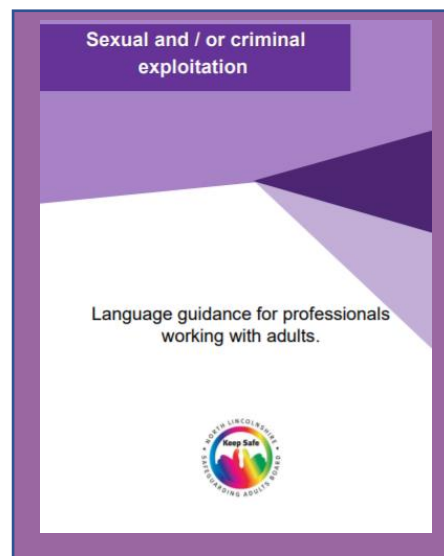
The following training courses were available to the workforce during the year:

- Safeguarding Adults Tier 1 (eLearning) – providing an overview of what is meant by abuse and neglect, the duty to safeguard adults with care and support needs, ensuring immediate safety, and how to report concerns.
- Safeguarding Children Tier 1 (eLearning) – providing an overview of what is meant by safeguarding children, the duty to protect children and how to report concerns.
- Safeguarding Adults Tier 2 – aimed at operational practitioners. Providing an overview of safeguarding concerns and enquiries, making safeguarding personal, decision making in relation to safeguarding concerns and ensuring that staff can apply their own organisational procedures and processes for reporting and documenting safeguarding adult concerns.
- Safeguarding Adults Tier 3 – aimed at operational practitioners and managers. Staff are trained in how to undertake effective safeguarding enquiries, ensuring that enquiries are person centred, and outcome focussed, in line with the Care Act 2014 and best practice.
- Mental Capacity Act & DOLs in Practice - Levels 1 and 2 – Staff are trained in the application of the Mental Capacity 2005 and have an understanding of the Deprivation of Liberty Safeguards.

Actions completed by the subgroups to meet board objectives

Prevention & Proportionality subgroup

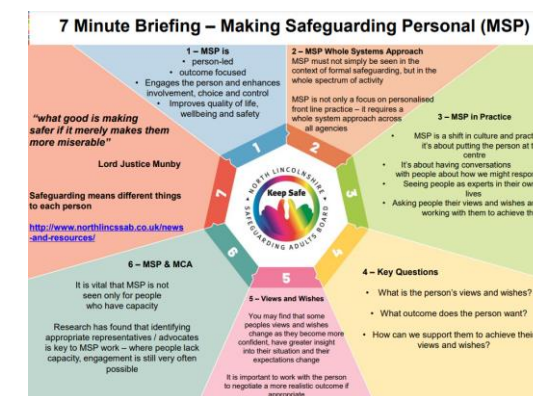
Ensuring that focus remains on the issues that are going to make the greatest difference to safeguarding people in North Lincolnshire is a priority for the subgroup. Following a 'Line of Sight to Practice' event the group developed an 'Appropriate Language' guidance document. The document was co-produced with adults who have a lived experience and is designed to be used by all professionals when talking to adults, sharing intelligence and in the delivery of training. It is crucial that practitioners understand how the tones, and the use of words and language can impact on adults and their families. The guidance details words and phrases which should not be used and offers alternative descriptors for practitioners to use.



The group continue to ensure that making safeguarding personal is embedded in practice and have worked to promote a continued focus on the making safeguarding personal (MSP) agenda, delivering bespoke training to the cross-sector provider partnership, emphasising the importance of informed decision making and person-centred practice.

The group regularly review key messages from local, regional, and national Safeguarding Adult Reviews (SARs) and investigations, ensuring that any learning relevant to North Lincolnshire is appropriately shared and implemented.

The group has produced several 7-minute briefings which have been disseminated amongst partner agencies. There are close links across all the subgroups, ensuring that information and learning from practice is shared with all partners, enabling them to make changes or improvements that will keep adults with care and support needs in North Lincolnshire safer in the future.



Actions completed by the subgroups to meet board objectives

Protection & Accountability subgroup

Page 28

The board is committed to ensuring that safeguarding arrangements, and partner agencies of the board act to help and protect adults who may be at risk in North Lincolnshire.

The Protection & Accountability subgroup consists of representatives from Humberside Police, North Lincolnshire Clinical Commissioning Group, Northern Lincolnshire & Goole NHS Trust, Humberside Fire & Rescue, independent provider sector, Rotherham, Doncaster and South Humber Mental Health Trust, Healthwatch, ONGO and is chaired by Victoria Lawrence, Head of Social Work and Assurance for North Lincolnshire Council.

The subgroup have been working in partnership with children's services and colleagues within partner agencies to develop a plan to ensure there is an improved quality of transition experience for young people. A child exploitation transition to adulthood partnership group has been implemented to strengthen the transitional safeguarding arrangements ensuring that young adults have access to, and receive support where appropriate.

The subgroup have worked in partnership with the Children's Multi-agency and Resilience Safeguarding (MARS) board to develop a joint safeguarding self-assessment process and tool. The joint tool reduces duplication and allows for a more joined up, and consistent approach to the assurance of safeguarding services across both adult and children's services. The joint self-assessment provides the NLSAB with a clear account of partner agencies' position in relation to their arrangements for safeguarding adults and children within North Lincolnshire, the assessment enables partners to identify their strengths and addresses areas for further development.

Actions completed by the subgroups to meet board objectives

Protection & Accountability subgroup

Board members completed their second joint assurance focused visit, in partnership with the Children's MARS Board to a partner agency.

The assurance events provide an opportunity for our safeguarding adults partners, and relevant agency representatives to visit specific agencies to meet and talk to practitioners. The events also provides an opportunity to meet / speak to adults who have a lived experience, and enable the agencies to showcase good practice, indicate how they listen to adults with care and support needs and to talk about plans for further developments. This gives partners, and adults with a lived experience a sense of a specific agency contribution to the safeguarding system across North Lincolnshire.

The Protection and Accountability Group act as a reference group and utilises the specialist knowledge of all partners to support with the updating of policies, procedures and guidance. During 2020 / 21 in light of our experiences as a partnership, and in order to improve and develop safeguarding practice the group refreshed and updated the Multi Agency Safeguarding Policy and Procedures.

The updated policy puts the adult at the centre of their own safeguarding experience. The policy aims to encourage the continuous development of best practice in order to better safeguard adults throughout North Lincolnshire. As a partnership committed to learning from local experience and national best practice, the group will keep the procedures under constant review, and will ensure they are updated regularly as both practice and policy develop.

The group have also updated the NLSAB Managing allegations against people who work in a position of trust (PiPoT) policy. In line with the requirements of the Care Act 2014 the purpose of the policy is to provide a framework for managing cases where allegations have been made against a person in a position of trust, and is focussed on the management of risk. The policy provides guidance to ensure appropriate actions are taken to manage allegations against people who work, either in a paid or unpaid capacity, with adults with care and support needs.

Partner agencies were requested to review their own internal safeguarding policies and practice guidance documents and were able to provide assurance that they were consistent with those of the NLSAB.

Actions completed by the subgroups to meet board objectives

Protection & Accountability subgroup

Safeguarding during Covid-19

Safeguarding adults with care and support needs has remained an integral part of the every day work of our partner agencies during the pandemic. The NLSAB recognises the concern, that during this time people may be more vulnerable to abuse or neglect. This might be because of increased social isolation, additional stress on caring relationships, reduced face to face contact with people, the potential for an increase in criminal behaviour such as scams, as well as increase in domestic abuse.

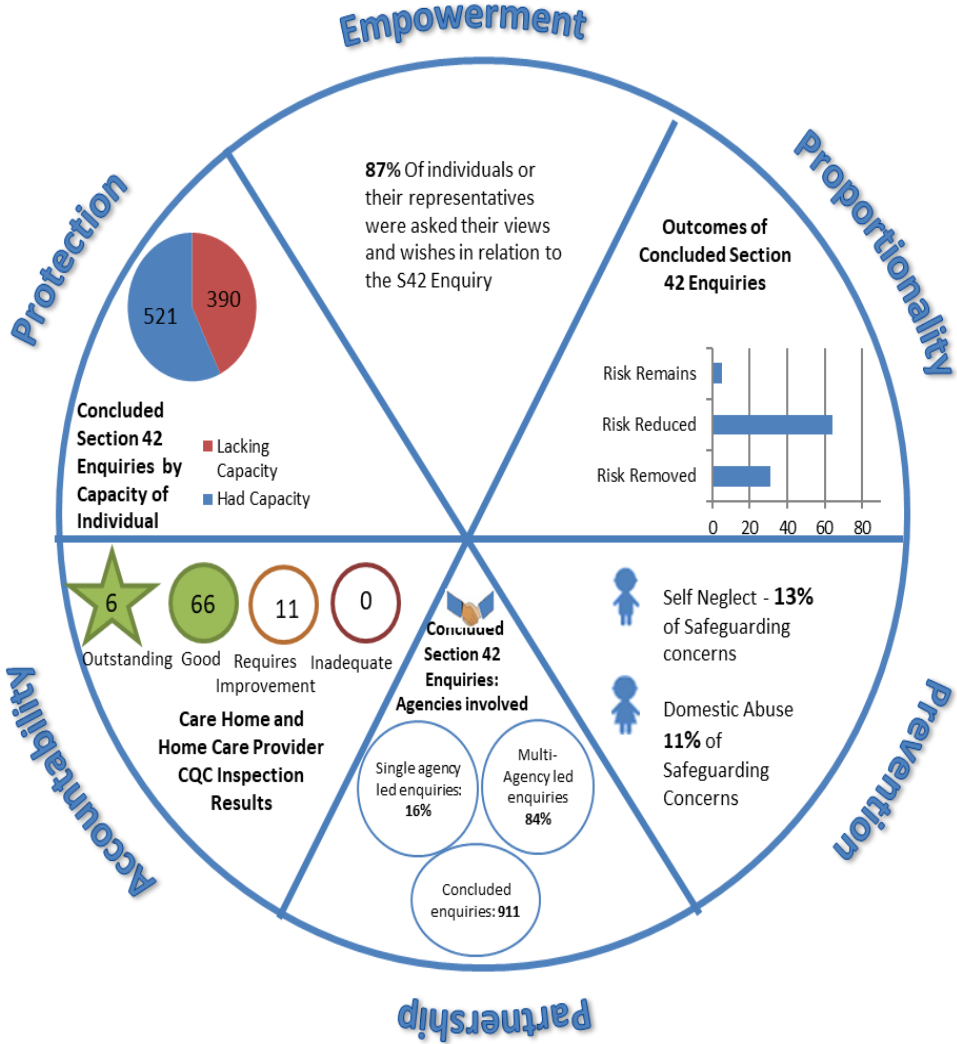
Duties and responsibilities in relation to safeguarding adults have remained a statutory duty and sections 42-45 of the Care Act 2014 have not changed or been eased.

The NLSAB and its partners have continued to work together to prevent and reduce the risk of harm to people with care and support needs. The subgroup continue to analyse safeguarding activity and available intelligence to identify themes and trends in safeguarding across North Lincolnshire, informing areas for development, innovation and improvement. The available intelligence includes:

- NLSAB data dashboard
- CQC report information including analysis of the four domain levels
- Information from reviews such as Safeguarding Adult Reviews (SARs)
- Relevant datasets from other agencies / organisations

A key priority of the NLSAB is to gain assurance from partners about how any impact of Covid-19 on local safeguarding arrangements is being managed. The NLSAB data dashboard has enabled us to monitor the extent to which Covid-19 is impacting on people with care and support needs, and specifically on the effectiveness of safeguarding arrangements.

Safeguarding adults data in 2020 / 21

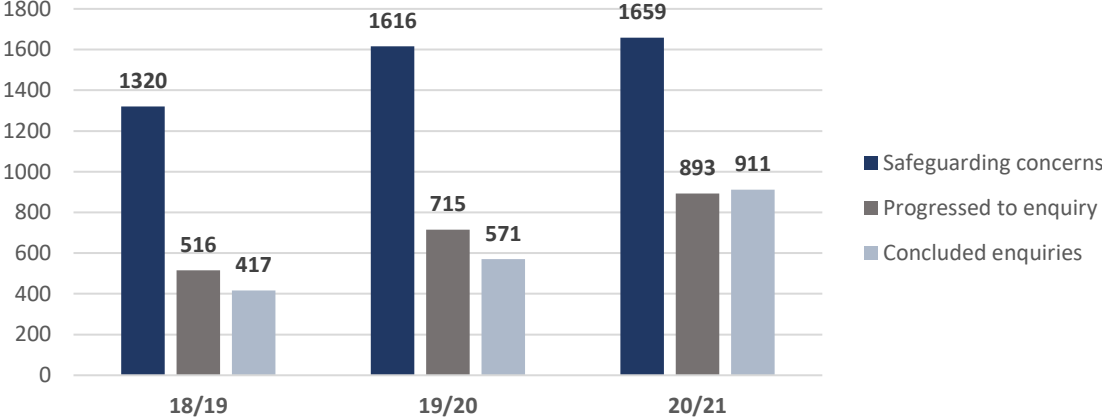


During 2020/21 a total 1659 safeguarding concerns were received, which is an increase of 3% in comparison to the previous year.

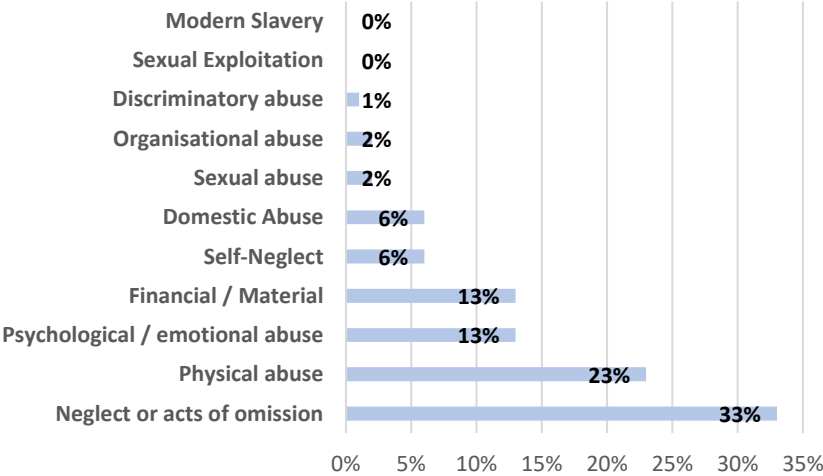
Of those 1659 safeguarding concerns, 893 became safeguarding enquiries and a total of 911 safeguarding enquiries were completed during the year.

Safeguarding adults data in 2020 / 21

Safeguarding Activity



Categories of Abuse - Concluded Enquiries

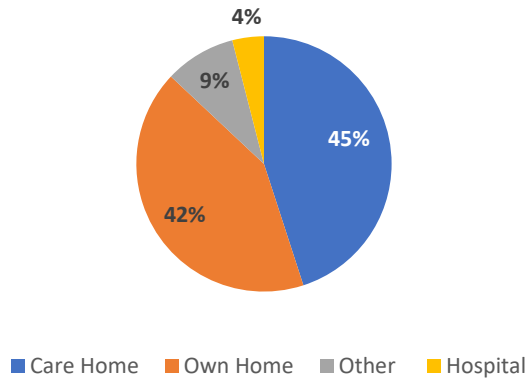


Consistent with both regional and national trends over the last three years North Lincolnshire has continued to see an increase in both the number of safeguarding concerns and safeguarding enquiries, this is thought to be due to an increase in knowledge and understanding of what constitutes a safeguarding concern, as well as an increased awareness of how to report safeguarding issues to the council.

Safeguarding adults data in 2020 / 21

Location of alleged abuse and/or neglect - concluded enquiries

Location of risk – 2020 / 21

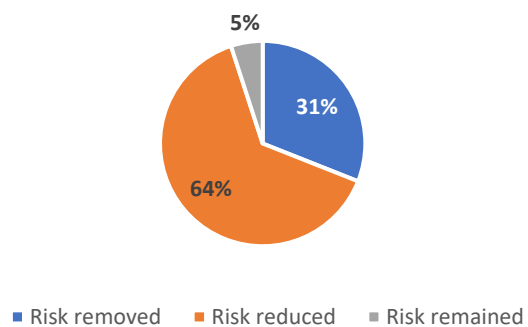


Care homes have consistently been the highest location of alleged abuse and/or neglect in concluded enquiries for the last three years. This is seen as a positive indicator of the high quality care sector within North Lincolnshire, and of providers' understanding of their safeguarding responsibilities.

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Concluded enquiries - risk outcome

Outcome of risk



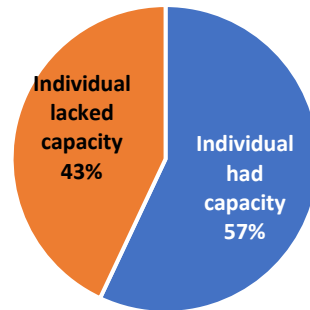
At 87% risk identified and action taken remains the highest outcome of concluded S42 enquiries, indicating that a correct threshold for S42 enquiries is in place.

In 96% of enquiries the risk identified was either removed or reduced.

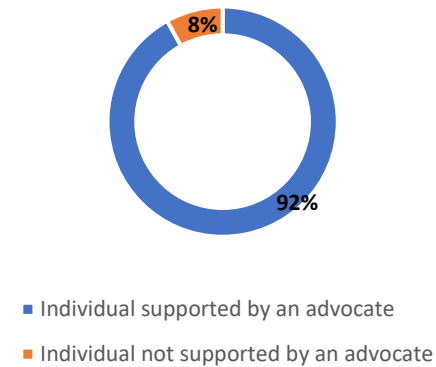
Safeguarding adults data in 2020 / 21

Mental Capacity and advocacy - concluded enquiries

Concluded enquiries - capacity



Concluded enquiries - advocacy



The number of individuals who lacked capacity in relation to the safeguarding concern and were supported by an appropriate advocate is 95%, an increase compared with the previous year when 93% of adults were supported.

Safeguarding adults data in 2020 / 21

Making Safeguarding Personal (MSP)

MSP is about having conversations with people about how to respond in safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, well-being, and safety. The Care Act 2014 advocates a person-centred, rather than a process driven approach. MSP questions comply with the standards set by NHS digital, ensuring they are comparable with all other authorities across England.



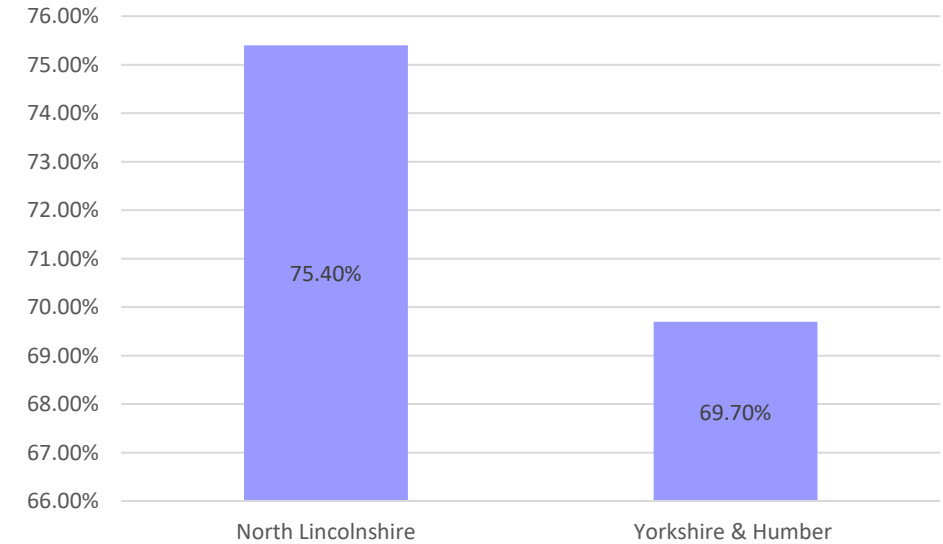
87%

of individuals and / or their representatives were asked their views and wishes in relation to the S42 enquiry

97%

of individuals and / or their representatives felt their views and wishes had either been partially or fully met.

People Who Use Services Feeling Safe

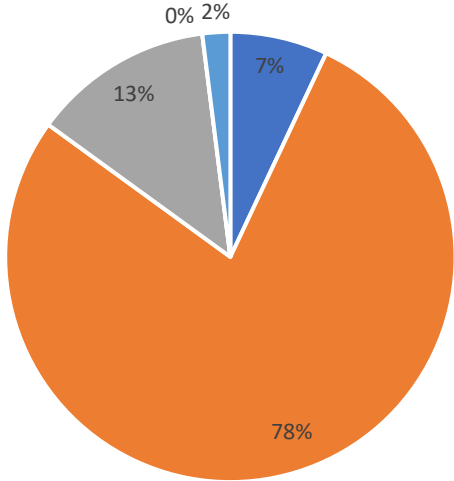


In North Lincolnshire 75.4% of people, using services reported they felt safe, this is 5.7% higher than the regional average and a 1.2% increase on the previous year. This data was drawn from section 4A of the 2019/20 ASCOF which measures how well care and support services achieve the outcomes that matter most to people.

Safeguarding adults data in 2020 / 21

Care Quality Commission ratings North Lincolnshire

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■ Outstanding ■ Good ■ Requires Improvement ■ Inadequate ■ Not yet inspected

This information relates to the quality assurance of providers quality assurance of registered care providers following Care Quality Commission following Care Quality Commission (CQC) inspections, indicating a high-quality care sector with 85% of providers being inspected as either good or outstanding, nationally this is 84% and 81% in the Yorkshire and Humber region.

Safeguarding Adult Reviews

What is a Safeguarding Adult Review (SAR)?

A Safeguarding Adult Review takes place when agencies who worked with an adult who suffered abuse or neglect, come together to find out and think about how they could have done things differently.

The aim of a SAR is to promote effective learning and improvement. SARs should be used to explore examples of good practice, as well as those not so good, and should identify learning which can be applied to future cases.

The law says Safeguarding Adults Boards must arrange a SAR when:

There is reasonable cause for concern about how NLSAB, its partners or others worked together to safeguard the adult

AND

The adult died and NLSAB suspects the death resulted from abuse or neglect

OR

The adult is alive and NLSAB suspects the adult has experienced abuse or neglect.

SARs are overseen by NLSAB Executive Safeguarding Adult Review Group, consisting of representatives from the board's statutory partners (North Lincolnshire Council, North Lincolnshire Clinical Commissioning Group and Humberside Police).

The group is chaired by Chief Superintendent Darren Wildbore of Humberside Police.

During 2020/21 the group did not receive any referrals for a SAR.

The subgroups have continued to share learning and good practice identified in regional and national SARs with practitioners and partner agencies.

7 minute briefings have been developed to help disseminate key messages from SARs amongst partner agencies.

The Executive Group reviewed the NLSAB SAR framework to ensure continuous improvement and consistency with regional and national SAR procedures.

The NLSAB has maintained links and reporting relationships with the Community Safety Partnership (CSP) who manage Domestic Homicide Reviews (where they involve adults with care and support needs).

Conclusions and areas of future focus

In 2020/21 the board have made considerable progress in relation delivering the priorities and strategic objectives outlined within the Strategic Plan. We recognise the importance of ensuring that our focus remains on the issues which are going to make the greatest difference to safeguarding people in North Lincolnshire.

The following key themes have been identified by board partners as areas of focus in 2021/22.

- Liberty Protection Safeguards (LPS) are due to replace the Deprivation of Liberty Safeguards (DoLS) in 2022. This represents a significant change in the law concerning the care and treatment of people over the age of 16, who lack capacity to consent to care and treatment that deprives them of their liberty. The board will continue to work with partners to prepare for the implementation and will support partners to keep up to date with the evolving situation regarding the timeline and publication of the statutory guidance.

- In line with the government change in legislation and the formal establishment of Integrated Care Systems (ICS), the board will focus on ensuring safeguarding arrangements continue to remain a priority locally, whilst also committing to strengthen our working arrangements with colleagues across the regional Humber Partnership and the Humber, Coast and Vale Integrated Care System.
- The board and its partners will continue to analyse safeguarding data, as well as the impact of the pandemic on adults with care and support needs and plan to address any additional safeguarding needs that emerge as a consequence. This will include reference to the following specific groups:
 - People experiencing Domestic Abuse
 - People who are homeless
 - Family carers
- The board will ensure that appropriate training and education is offered to partner agencies, including the development of multi-agency training. We will remain committed to supporting our community and making sure they are equipped and empowered to play their part in preventing, detecting, and reporting abuse and neglect.

In 2021/22 the SAB and Executive Leads will evaluate the priorities within the Strategic Plan, this will include reviewing both the system-wide assurance priorities and operational priorities.

NORTH LINCOLNSHIRE COUNCIL

HEALTH & WELLBEING BOARD

UPDATE ON THE HEALTH AND WELLBEING BOARD'S MEMORANDUM OF UNDERSTANDING

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 The purpose of this report is to update the Health and Wellbeing Board on the revised memorandum of understanding (MoU) and to recommend to full Council the amendments to the Health and Wellbeing Board's Memorandum of Understanding as detailed in appendix 1.

2.0 BACKGROUND INFORMATION

- 2.1 The Health and Wellbeing Board (HWB) is a committee of North Lincolnshire Council and, as such, is required to have a formal document confirming how the board will operate. For this purpose, the HWB uses a document referred to as a memorandum of understanding (MoU).
- 2.2 The MoU was previously updated in 2020. The new version has been revised to consider changes in the health and social care system and the new Joint Health and Wellbeing Board Strategy (JHWBS). There are proposed amendments to the membership which reflect the forthcoming changes to NHS structures
- 2.3 HWB members were sent a version of the revised MoU for consideration and comment.

3.0 OPTIONS FOR CONSIDERATION

- 5.1 **Option 1:** To approve the MoU as detailed in appendix 1
- 5.2 **Option 2:** To keep the current MoU

4.0 ANALYSIS OF OPTIONS

- 6.1 **Option 1:** The updated MoU will ensure the remit of the HWB is focused on achieving outcomes described in the JHWB, is relevant to new and emerging NHS structures and is constituted with a membership that is a well position to effect change.
- 6.1 **Option 2:** Keeping the current MoU will mean that the HWB remit is not as tightly aligned with the JHWBS and its membership may not be fully representative.

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

7.1 None

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

8.1 None

7.0 OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)

9.1 Not relevant for this report

8 OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

10.1 Members of the Health and Wellbeing Board were consulted on the revised MoU. The consultation ran from 21 February to 4 March. No feedback was received from board members.

9 RECOMMENDATIONS

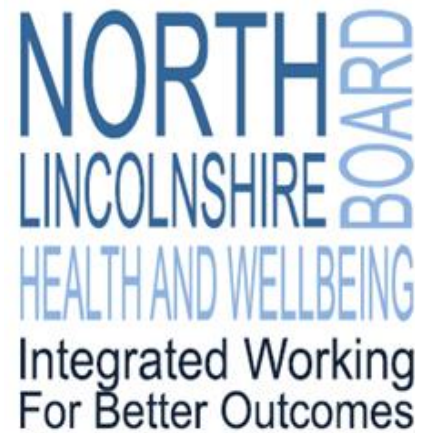
11.1 That the HWB approves option 1 of this report and recommends to full Council the amendments to the Health and Wellbeing Board's memorandum of understanding as detailed in appendix 1

DIRECTOR OF PUBLIC HEALTH

Church Square House SCUNTHORPE
North Lincolnshire
DN15 6NR

Authors: Steve Piper

Date:- 09 March



HEALTH AND WELLBEING BOARD

Memorandum of Understanding

Version	Date	Author
REVISED MEMORANDUM	11 November 2020	Dean Gillon
Revisions	03 February 2022	Tessa Lindfield
	10 February 2022	Tessa Lindfield
	18 February 2022	Tessa Lindfield

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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.

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. Health and Wellbeing Boards come together to promote integration, improve the health and wellbeing of their local population. The Health and Wellbeing Board is a forum where political, clinical, professional and community leaders from across the care and health system come together to improve the health and wellbeing of their local population and reduce health inequalities. Health & Wellbeing Boards have been in place since 2013 and are seen as a single point of continuity in a constantly shifting health and care landscape.

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

In North Lincolnshire, the Health and Wellbeing Board also fulfils the role of the Covid Local Outbreak Engagement Board, advising on the Covid response locally.

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.
- All Group members have the opportunity to contribute to the Group's strategies and activities,
- Shared ownership of the Board by all of its members (with commitment from their nominating organisations) and accountability to the communities they serve.
- Openness and transparency in the way the Board carries out its work.

4 HEALTH AND WELLBEING BOARD MEMBERSHIP

The North Lincolnshire Health & Wellbeing Board includes statutory and other members. Members are in a position to influence strategy and services that impact health and wellbeing of our population. Senior officers from local organisations and elected members work alongside each other with role parity on this Board.

Paragraph 5, appendix 2 provides details of membership.

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 publication of a Joint Strategic Needs Assessment (JSNA) to inform decision making across the system. Jointly with NHS partners to develop a Joint Health and Wellbeing Strategy (JHWS) to address identified need.
- Encourage integrated working across the health and care system.
- Encourage close working between 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.
- Oversee plans and actions to prevent and manage outbreaks of Covid-19.

Decision making responsibilities:

- The Health and Wellbeing Board will design the JSNA to inform actions to improve health and wellbeing and improve health equality in North Lincolnshire,
- The Health and Wellbeing Board will, through its JHWS, set priorities locally, and address regional and national guidance, policy and priorities,
- The Health and Wellbeing Board will support and promote integration where it makes sense to do so and can make decisions on joint commissioning intentions, where appropriate.
- The Health and Wellbeing Board will be the key local body to create overarching strategy to improve health and wellbeing. Individual organisations represented on the Group will have regard to the strategy whilst retaining autonomy for taking decisions on their statutory responsibilities.
- The Health and Wellbeing Board may consider referrals from and make referrals to the Health Scrutiny Committee.
- The Health and Wellbeing board will consider all aspects of public health including Health Protection, Health Improvement, Healthcare Public Health and the Wider Determinants of Health in the formation and implementation of plans and strategies
- The Health and Wellbeing Board will oversee and advise on Covid Outbreak Management and approve the Local Outbreak Management Plan.

6 HEALTH AND WELLBEING BOARD RELATIONSHIPS

The Health and Wellbeing Board 's work is supported by a strong network of partnership groups across North Lincolnshire which drive the delivery of the Joint Health & Wellbeing Strategy and oversee the development of the Joint Strategic Needs Assessment and Pharmaceutical Needs Assessment.

The relationships around the Board are crucial for the Board to succeed in its work. The regulations around Health & Wellbeing Boards make it clear that the Board has a responsibility to promote and support partnership working and integration for health and wellbeing but it's key products (JHWS and the JSNA) should be jointly developed with NHS and other partners. In addition, partner organisations have a duty to have regard to the strategy of the Board in their work to improve health and wellbeing and reducing health inequalities.

The Board has an interest in Safeguarding of adults and children and will receive the annual reports of the local Safeguarding Boards.

The Board will act as the local member-led and democratically accountable body for local arrangements to prevent and manage outbreaks of Covid-19 and other serious threats to the health and wellbeing of residents. The Board will also maintain an oversight of the COVID-19 Local Outbreak Management Plan.

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.

OVERVIEW AND SCRUTINY PROCESSES

The local authority overview and scrutiny process are able to assess the work of the Health and Wellbeing Board in undertaking the Integrated Assessments and JHWS in terms of the quality of processes and products.

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).

The Board is committed to a close and productive relationship with the Humber Coast & Vale Integrated Care System as a whole, the Integrated Care Board and the North Lincolnshire Place Partnership.

A number of local partnerships work to oversee the delivery of the JHWS. The Population Health and Prevention Group was set up by the Board. Other key groups are the Integrated Children's Trust and the Integrated Adults Partnership. Board Members have a collective responsibility for making links across relevant partnerships.

The Health & Wellbeing Board is an important partner within the Humber Coast & Vale Integrated Care System, particularly at the North Lincolnshire Place level. Several of the groups and partnerships that deliver the JHWS are also integrates into the ICS governance arrangements. Appendix 3 illustrates the relationships for North Lincolnshire as a Place.

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 the NHS.
- b) To include the impact of Health Protection, Health Improvement, Healthcare Public Health and the Wider Determinants of 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 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.

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

The Health and Wellbeing Board is 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 statutory and non statutory members,

- The Chair to be an elected member of, and to be appointed by, North Lincolnshire Council.
- Chief Executive, North Lincolnshire Council
- Deputy Chief Executive, North Lincolnshire Council
- Director of Adults and Health, North Lincolnshire Council
- Director of Children and Families, North Lincolnshire Council
- Director of Public Health, North Lincolnshire Council
- A Representative of Healthwatch North Lincolnshire
- Three representatives of North Lincolnshire NHS organisations (One NHS representative will adopt the position of Vice-Chair)
- Two other elected members of, and to be appointed by, North Lincolnshire Council (Proportionality need not apply)
- A representative from ONGO
- A representative from Humberside Police
- A representative from Humberside Fire and Rescue

- A representative from the Office of Health Improvement and Disparities
- A representative from NHS England

All Board members have the opportunity to contribute and shape decisions. 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 contribute to 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 partnership group or organisation's delivery of JHWS commitments
- 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 2 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 the Humber Coast & Vale Integrated Care System.

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 proceed unless 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 equally 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 NHS representative (the Vice-Chair)
- Director of Public Health
- Director of Adults & Health
- Director of Children & Families
- Representative of Healthwatch North Lincolnshire

10. DECLARATIONS OF INTEREST

As a committee of the Council, all Board members should declare interests annually and specifically at meetings.

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.

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 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, operational governance arrangements are the responsibility of North Lincolnshire Council's Director: Governance and Communities through Legal and Democratic Services. Overall strategic direction is the responsibility of the Director: Adults and Health, and the Board's membership.

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 members and partners to contribute to development sessions which will be scheduled as required over and above the Chair's agenda business meetings and formal meetings.

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. 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.

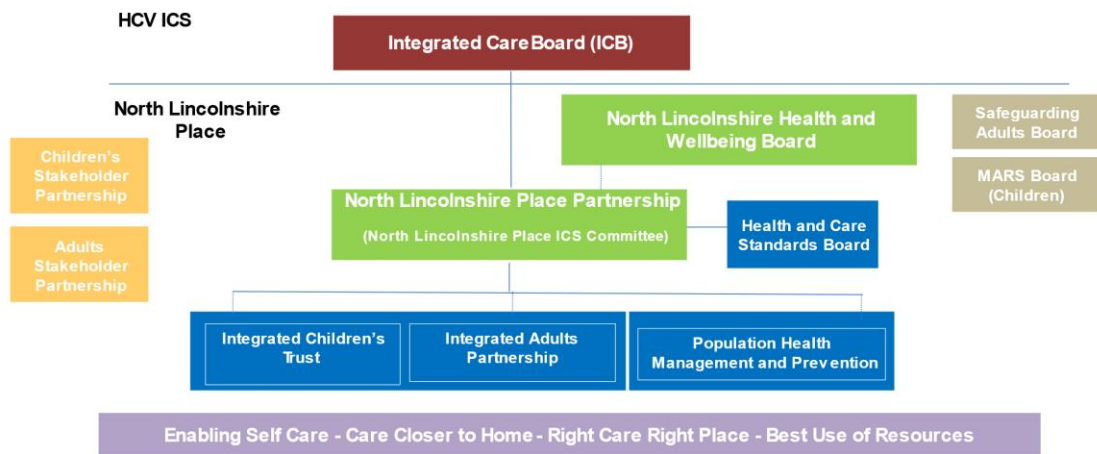
In addition, the Freedom of Information Act 2000 makes provision for a general right of access to information held by public bodies.

19. REVIEW DATE

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

APPENDIX 3 - ICS GOVERNANCE

Integrated Care System/Place Governance Arrangements



- Key:
- Formal Partnership Governance
 - Statutory Partnership Boards
 - Partnership Delivery Groups
 - Voice Groups

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