

# SOMERSET HEALTH AND WELLBEING BOARD



**Monday 17 January 2022**

**11.00 am Virtual via Microsoft Teams**

**THIS IS AN ADVISORY MEETING ONLY**

To: The members of the Somerset Health and Wellbeing Board

Cllr C Paul (Chair), Cllr F Nicholson (Vice-Chair), Ed Ford (Vice-Chair), Cllr D Huxtable, Cllr R Wyke, Cllr C Booth, Cllr J Keen, Cllr B Hamilton, Judith Goodchild, Trudi Grant, Julian Wooster, Alex Murray, James Rimmer, Mel Lock, Cllr M Best, Sup. Dickon Turner and Richard Schofield

All Somerset County Council Members are invited to attend.

Issued By Scott Wooldridge, Strategic Manager - Governance and Democratic Services - 7 January 2022

For further information about the meeting, please contact Terrie Brazier - [tbrazier@somerset.gov.uk](mailto:tbrazier@somerset.gov.uk) or Julia Jones - [jjones@somerset.gov.uk](mailto:jjones@somerset.gov.uk) or 01823 357628

Guidance about procedures at the meeting follows the printed agenda and is available at [\(LINK\)](#)

This meeting will be open to the public and press, subject to the passing of any resolution under Regulation 4 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

This agenda and the attached reports and background papers are available on request prior to the meeting in large print, Braille, audio tape & disc and can be translated into different languages. They can also be accessed via the council's website on [www.somerset.gov.uk/agendasandpapers](http://www.somerset.gov.uk/agendasandpapers)

**Are you considering how your conversation today and the actions you propose to take contribute towards making Somerset Carbon Neutral by 2030?**



**RNID typetalk**

# AGENDA

Item Somerset Health and Wellbeing Board - 11.00 am Monday 17 January 2022

**\* Public Guidance notes contained in agenda annexe \***

**1 Apologies for Absence**

To receive Board Members' apologies.

**2 Declarations of Interest**

Details of all Members' interests in District, Town and Parish Councils can be viewed on the Council Website at [County Councillors membership of Town, City, Parish or District Councils](#) and this will be displayed in the meeting room (Where relevant).

The Statutory Register of Member's Interests can be inspected via request to the Democratic Service Team.

**3 Minutes from the meeting held on 11 November 2021** (Pages 9 - 18)

The Board is asked to confirm that the minutes are accurate.

**4 Public Question Time**

The Chair will allow members of the public to ask a question or make a statement about any matter on the agenda for this meeting.

**5 Somerset Safeguarding Adults Board - Annual Report** (Pages 19 - 28)

To receive the report.

**6 Safeguarding Children Partnership Twelve Monthly Report 2020-21** (Pages 29 - 46)

To receive the report and presentation.

**7 Integrated Care Services - Verbal Update**

To receive the verbal update.

**8 Annual Public Health Report (APHR)** (Pages 47 - 50)

To receive the report.

**9 Somerset Health and Wellbeing Board Work Programme** (Pages 51 - 54)

Item Somerset Health and Wellbeing Board - 11.00 am Monday 17 January 2022

To discuss any items for the work programme. To assist the discussion, attached is the Board's current work programme.

10 **Any Other Urgent Items of Business**

The Chair may raise any items of urgent business.

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## **General Guidance notes for Somerset County Council virtual committee meetings**

### **1. Virtual Council Public Meetings**

Please be advised that this an Advisory Board meeting and as a consultative meeting without any decisions to be made is not subject to the 1972 Local Government Act and therefore can take place virtually.

### **2. Inspection of Papers**

Any person wishing to inspect minutes, reports, or the background papers for any item on the agenda should contact Democratic Services at [democraticservices@somerset.gov.uk](mailto:democraticservices@somerset.gov.uk) or telephone 01823 357628. They can also be accessed via the council's website on [www.somerset.gov.uk/agendasandpapers](http://www.somerset.gov.uk/agendasandpapers).

### **3. Members' Code of Conduct requirements**

When considering the declaration of interests and their actions as a councillor, Members are reminded of the requirements of the Members' Code of Conduct and the underpinning Principles of Public Life: Honesty; Integrity; Selflessness; Objectivity; Accountability; Openness; Leadership. The Code of Conduct can be viewed on the council website at [Code of Conduct](#).

### **4. Minutes of the Meeting**

Details of the issues discussed, and recommendations made at the meeting will be set out in the minutes, which the Committee will be asked to approve as a correct record at its next meeting.

### **5. Public Question Time**

If you wish to speak, please contact Democratic Services by 5pm 3 clear working days before the meeting. Email [democraticservices@somerset.gov.uk](mailto:democraticservices@somerset.gov.uk) or telephone 01823 357628.

A slot for Public Question Time is set aside near the beginning of the meeting, after the minutes of the previous meeting have been agreed. However, questions or statements about any matter on the agenda for this meeting may be taken at the time when each matter is considered.

At the Chair's invitation you may ask questions and/or make statements or comments about any matter on the Committee's agenda – providing you have given the required notice. You may also present a petition on any matter within the Committee's remit. The length of public question time will be no more than 20 minutes in total.

You must direct your questions and comments through the Chair. You may not take a direct part in the debate. The Chair will decide when public participation is to finish.

If there are many people present at the meeting for one particular item, the Chair may adjourn the meeting to allow views to be expressed more freely. If an item on the agenda is contentious, with a large number of people attending the meeting, a representative should be nominated to present the views of a group.

An issue will not be deferred just because you cannot be present for the meeting. Remember that the amount of time you speak will be restricted, to three minutes only.

In line with the council's procedural rules, if any member of the public interrupts a meeting the Chair will warn them accordingly.

If that person continues to interrupt or disrupt proceedings the Chair can ask the Democratic Services Officer to remove them as a participant from the meeting.

## 6. **Meeting Etiquette**

- Mute your microphone when you are not talking.
- Switch off video if you are not speaking.
- Only speak when invited to do so by the Chair.
- Speak clearly (if you are not using video then please state your name)
- If you're referring to a specific page, mention the page number.
- Switch off your video and microphone after you have spoken.
- There is a facility in Microsoft Teams under the ellipsis button called turn on live captions which provides subtitles on the screen.

## 7. **Recording of meetings**

The Council supports the principles of openness and transparency. It allows filming, recording and taking photographs at its meetings that are open to the public - providing this is done in a non-disruptive manner. Members of the public may use Facebook and Twitter or other forms of social media to report on proceedings. No filming or recording may take place when the press and public are excluded for that part of the meeting. As a matter of courtesy to the public, anyone wishing to film or record proceedings is asked to provide reasonable notice to the Committee Administrator so that the relevant Chair can inform those present at the start of the meeting.

We would ask that, as far as possible, members of the public aren't

filmed unless they are playing an active role such as speaking within a meeting and there may be occasions when speaking members of the public request not to be filmed.

A copy of the Council's Recording of Meetings Protocol is available from the Committee Administrator for the meeting.

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**SOMERSET HEALTH AND WELLBEING BOARD****Minutes of a Meeting of the Somerset Health and Wellbeing Board  
held in the Luttrell Room, County Hall, Taunton, on Monday 22 November 2021  
at 11.00 am**

**Present:** Cllr C Paul (Chair), Cllr F Nicholson (Vice Chair), Trudi Grant, James Rimmer, Mel Lock, Julian Wooster, Cllr Mike Best, Judith Goodchild

**Present Virtually:** Cllr D Huxtable, Cllr C Booth, Cllr J Keen, Cllr R Wyke

**Other Members present:** Cllr T Munt, Cllr Bill Revans, Cllr A Kendall, Cllr L Redman

**Apologies for absence:** Dr Ed Ford, Cllr B Hamilton

**Declarations of Interest** - Agenda Item 2

There were no new declarations.

**Minutes from the meeting held on 27 September 2021** - Agenda Item 3

The minutes were agreed without alteration.

**Public Question Time** - Agenda Item 4

There were no public questions.

**JSNA – Verbal Update** - Agenda Item 5

The verbal update and presentation were made by Public Health Specialist Pip Tucker. He noted that the report is a statutory requirement for the Health and Wellbeing Board and enables them to understand the health and care needs in Somerset.

It was noted that health and care needs are now very different after the onset of the pandemic. The first focus was on the highest 10% of deprived areas of Somerset, which are located in the major towns across the county. Interestingly, there was more Covid in these areas but not by much, showing a low level of inequality in that respect. During the pandemic, some things changed quickly, such as a fall in A&E attendance of 50% in the first month and a steep rise in unemployment claims. Also interestingly, these claims rose by 60% in two months for poorer communities but by 120% in two

months for the county as a whole. Other changes occurred more slowly, including a slight reduction in domestic abuse and anti-social behaviour, which may reflect either the community pulling together or a lack of contact by agencies who record these incidents.

With regard to a focus group on Sedgemoor, voluntary groups reported significant hunger in the area, as well as concerns about the impact of the pandemic on people who were just getting by, the impact of stress and anxiety, and the ability to seek help and information digitally. SCC also commissioned Hidden Voices to conduct five focus groups in Bridgwater, who held 14 street interviews and spoke to 56 people; the mental health of residents of the poorer communities was significantly impacted by Covid and lockdowns, which may have accelerated current mental issues or brought to light unknown issues. Fortunately, there was considerable informal support from neighbours and the community, as opposed to low levels of formal volunteering. Interviewees did not often mention low income, due possibly to social taboos around discussing money, or to the positive effects of the furlough and the £20 universal credit uplift.

To summarise, significant need in the poorer communities of Somerset was reported, and the impact of covid on the welfare, wellbeing, and mental health of residents has also been significant, albeit slow to develop. On the positive side, the pandemic generated stronger community interaction, but the emerging needs may be very different than in the past. It was proposed that there be a development session on these issues before their final report is produced.

The Board then posed questions and comments; it was put forth that more scrutiny is needed regarding the links between unemployment and need, given that there are many positions open but apparently not enough young people training for them. The reasons for this need to be analysed before proposals for improvement can be made. Mr Tucker agreed that more research will be needed over the next 10 years; he noted that the analysis presented today was at the community level and was not about individuals. The statistics don't distinguish between age groups nor inform on why young people behave as they do, although anecdotally he has heard that while many are attracted to training, they have worries about the uncertainty of employment. Another Member stated that the rental housing market needs discussion with respect to quickly increasing rents and potential homelessness, which contribute to lack of wellbeing and anxiety.

It was asked during which time period the data used in the report arose; it was responded that it covered the first two waves of Covid and that there are now new figures to be used in the upcoming development session. With respect to a question about equitable recovery from physical rather than mental issues, it was noted that there is more evidence of cancer amongst poorer communities, although overall

mortality is slightly lower. Another question regarded the rise in unemployment and asked if there was a reason for the correlation of low wages with areas where many key workers lived; the reply was that when looking at the structure, many workers were in the retail and hospitality industries.

The Director of Public Health Trudi Grant stated that the report was a fantastic start, but the effects of the pandemic will span years. As regards the deprivation issues not appearing to be as severe in Somerset as in other areas of the country, perhaps this is due to the more rural aspect of poorer areas, and she would like to see the Health and Wellbeing Board challenge the issue of inequality more. It was replied that unemployment has actually gone up more in rural areas, but it is true that rural poverty needs are often the hardest to determine, with an increase in those areas of feelings of isolation, both physically and digitally. On the other hand, urban deprived areas can appear to be more deprived. Up until the third wave, Somerset saw concentrations amongst students and large families, particularly Asian, but the figures and effects are constantly evolving.

The Board thanked the presenters for the report, noted the information, and looked forward to the development session in January which will be very useful, particularly regarding the mental health aspects.

**The Somerset Health and Wellbeing Board received and discussed the presentation and supported holding a development session in January 2022.**

### **Children and Young People Mental Health Presentation - Agenda Item 6**

The Deputy Director of Commissioning-Mental Health, Autism, and Learning Disabilities of Somerset Clinical Commissioning Group Andrew Keefe presented a report on "Somerset's Children and Young People's Mental Health and Emotional Wellbeing", which follows his report at the last Board meeting regarding Adult Mental Health. The report focuses on the last two years and specifically on where they were, where they are now, and where they hope to be in the future. It examines how they have responded as a system while placing children and their families at the centre of all they do. He was assisted on the report, and joined during the presentation, by the Commissioning Manager for Children and Young People's Mental Health-Somerset CCG, the Deputy Director of Children's Services and Social Care-SCC, the Head of CAMHS-Somerset NHS Foundation Trust, the Assistant Director of Children's Commissioning-SCC, and the Chief Executive of Young Somerset/Somerset Big Tent Programme Lead.

Where they were: The NHS Long-Term Plan made a commitment that funding for Children and Young People's (CYP's) mental health services will grow faster, although

challenges remain in Somerset due to financial pressures and increasing demands on CAMHS, social care, acute hospitals, and schools. As far as the impact of the pandemic, Somerset's statutory and VCSE providers continued to operate throughout; there was an increase in stress and anxiety amongst service users, and an increase in online bullying, but there was no uniform reaction, as some families had positive experiences with spending more time together in the home, while others had detrimental situations. The system's response to the pandemic included extending the hours of Somerset Mindline to 24/7, offering online and virtual appointments where appropriate, and increased joint working between SCCG, SCC, SFT and VCSE sector, which has now become the preferred way of working going forward. Investment into CYPMH services has also increased year on year since 2018/19 and is now exceeding the 1% standard for investment set out by the Children's Commissioner. This will continue to increase until the end of 2023/24, with focus areas being eating disorders, crisis, and expansion of support teams.

Where they are: The Board watched a video called "My Pandemic Story" discussing the challenges for young people living in Somerset; the progress that has been made was then discussed, including Somerset Big Tent, mental health support teams in schools, the CAMHS 2+ team, and the Jigsaw Project. Rather than thinking of single services, there has been a move to system solutions involving the recruitment and retention of skilled clinicians and practitioners to confront the expected increase in demand for emotional wellbeing services and CYP development, education and employment which have been impacted by the pandemic. Another challenge specific to Somerset is a shortage of suitable intensive support for CYP with complex needs; a number of them have had to be admitted to paediatric wards or placed in distant, high-cost facilities. In response, SCC has made a significant investment for the most vulnerable, including Homes2inspire which will deliver children's homes, high-need fostering, and therapeutic education while aligning with CAMHS crisis provision. Further, Somerset CCG are working with providers across health, social care, education, youth justice and the VCSE sector to develop a local transformation plan for CYP mental health, as well as working directly with CYP and their families. This plan will set out how resources will be invested to improve CYP mental health across Somerset, and it is expected to be published by the end of 2021.

The Board thanked each presenter for the report and noted the important work being done.

**The Somerset Health and Wellbeing Board received and noted the presentation.**

**Healthwatch Update** - Agenda Item 7

Representatives from Healthwatch Somerset presented their update and noted that Healthwatch exists to speak up for local people on issues of health and social care.

First up was the Young Listeners project, which aims to give young people a chance to speak up about services that they use. The project was involved in recruiting up until March this year and in training up until July; afterwards they consulted on mental health issues, eating disorders, GP access, and cancer support. They then attended external events and conducted online surveys to get feedback from young people all over Somerset, receiving 65 responses in total from August through September. These responses reflected the beliefs that there is a lack of communication between the different services provided with respect to young people's health and wellbeing, that the services are not communicating effectively with young people, that there is not enough information or education about health and social care in schools, and that many of the services do not promote or advertise themselves in a way that is easily accessible to young people. Therefore, it is recommended that:

- More training be provided for all school staff about mental health and wellbeing and the support that is available locally
- That health and social care services should examine how they communicate with patients and with other services, and perhaps have a centralised system to share patients' information
- That services make more frequent contact with patients
- That services promote themselves in ways that reach young people more easily
- That schools and services encourage young people to seek answers and assistance, which will reduce the stigma around health and social care issues
- That services involve young people more in planning and decision-making

The report then turned to main areas of work for Healthwatch in general, including gathering feedback and providing information, influencing and reporting change, and "enter and view" visits to service providers (sometimes unannounced) followed by a report. It was noted that they publish an annual report every year outlining the work done and the impact made. Their projects have included:

- Determining how people access primary care through GP surgeries
- Evaluating the NHS 111 service
- Community care and care homes
- District nursing service

Currently, one of their projects is focused on referrals to treatment; they have found that 48 out of 72 of the respondents had been waiting for more than 40 weeks for surgery, that suffered a lack of communication from their specialists during that time, and that a large number of them experienced a reduction in mobility and deterioration of their condition while waiting. Another project deals with emergency departments

and the increased pressure on them; Healthwatch Somerset, NHS Somerset Clinical Commissioning Group and local hospital trusts all worked together to gather information on the reasons for A&E visits and whether the patients had accessed other services beforehand. Additionally, Healthwatch is following up on the NHS 111 service in coordination with Devon and Plymouth, is working on a programme for access to primary care, and in the first quarter of 2022 will be involved with the supported discharge from hospitals to care homes or care at home.

The Board then discussed the presentation; the Director of Public Health praised the report and the work of Healthwatch, especially regarding tangible coordination, which can be examined along with the school survey work regarding young people. The Director of Children's Services stated that the report was very timely and that it would be helpful to build some of the recommendations in the report into the Children and Young People Services Plan.

The Board thanked Healthwatch for the presentation and noted that they had considered and commented on the report.

**The Somerset Health and Wellbeing Board received, discussed and noted the presentation.**

### **Better Care Fund Report** - Agenda Item 8

The Chair noted the two additional papers for this item published as a supplementary agenda and invited the Deputy Director of Adults and Health Commissioning, along with colleagues from Sedgemoor District Council and Somerset CCG, to make the presentation.

The presentation on "Better Joined Up Commissioning & The Better Care Fund" began with The Better Care Fund, which is focused on collaboration; and it was noted that the future way of working of the BCF could be similar to that of the Integrated Care System (ICS). The BCF has been focused on joined-up working and joined-up funding, although the latter has come from already existing funding (no new monies). There is a current opportunity insofar as Section 75 Agreements allow statutory bodies to pool funding and resources. The BCF budgetary areas for 2021/22 cover the Disabled Facilities Grant, the iBCF, and the NHS Somerset CCG (a mandated contribution), totalling £70,825,643. This includes NHS funding towards social care and for out-of-hospital care and support. The national BCF metrics involve reductions in unplanned admissions to hospital, delays in people going home after hospital stays, people 65 and over who can remain in their homes for more than 91 days, and the rate at which people go into long-term care.

“Good Homes for All – Flexible Approaches to Using S.75 Funding” was then presented; this involves the flexible use of the BCF to support Healthy Neighbourhoods/Healthy Housing. This system entails sourcing accommodation and bed space creation, securing accommodation, supporting tenants, supporting landlords, securing a return to accommodation after hospital/care stays, and budgeting support. The BCF can be used for grants, repairs, preventative measures, early delivery schemes, heating, help for homelessness, and housing affordability for the elderly, families, singles, and rural inhabitants.

The Good Homes Enquiry was touched on next; this involves Somerset Independence Plus, which has NHS England, local authorities, and ICS working with the BCF on housing and health matters. Examples of flexible funding include prevention grants for independent living, assistive technology, work with hoarders, building independent assessment centres, helping young families with children who have behavioural issues, and energy efficiency (with respect to the last two issues, it was noted that there could be 100,000 children in care by 2025, while they have assisted over 8000 households to improve their energy efficiency and have also expanded the advice line and instituted decarbonisation training for local contractors). These are a key part of delivering the Memorandum of Understanding on improving health and care through the home, and there is also a joint commissioning board working on these issues.

As regards the BCF moving forward, it was noted that the BCF is a very complicated endeavour; it is a big ask to have the Health and Wellbeing Board sign off retroactively on its very complex framework involving the collaboration of many different services. The BCF is building on a strong reputation with a large number of joined up services and commissioning, but the focus going forward will be on out-of-hospital care and keeping people in their own homes (there are 7000 hospital discharges per month), so collaboration needs to be improved and other areas of integration and mutual interest could be included. The question as regards the Health and Wellbeing Board and BCF is: Should they engage with the HWB about the BCF and make this the main discussion point, or should they engage in a more meaningful way with the HWB about the areas of health and care that need to be brought together more as they move into the ICS, which could be of more value? There are areas of care which are already jointly approached that are not allowed to be included in the BCF despite being very important, while there are other areas that are partly within the BCF but partly not for historical reasons; so they would like to move towards a larger, more comprehensive schedule of health and care that is jointly managed via engagement with the HWB.

The Director of Public Health stated that the presentation had been very helpful; she noted that there had not been massive growth in the BCF itself, but in the future she would like to see more of a “Better Prevention Fund”, as there is a real need for the Health and Wellbeing Board to challenge inequality also through the BCF. She stated

that what we really need is people happily living independent lives, not needing care, so she would like to see a far greater focus on prevention and particularly on keeping people out of care. She added that it as the Health and Wellbeing Board, it was necessary to challenge the use of all resources, including the BCF, around tackling inequalities, which appears to be missing in the national metrics at the moment. Therefore, it needs to be built in at a local level. It was replied that the way the schedule has now been constructed will help in having that conversation, as there will be a better understanding of where the funds are being spent and being able to shift them in that direction. There are already quite a few preventative measures in the BCF, but there could be more, although the necessity of working with national metrics make that more of a challenge. Hopefully, as a more vibrant ICS is formed, such conversations can be held.

The Chair thanked the presenters, although she noted that as a Board they would not be able to actually approve this as requested, due to not being quorate.

**The Somerset Health and Wellbeing Board received and noted the report and the information.**

**Integrated Care Services – Verbal Update - Agenda Item 9**

The Chief Executive of NHS Somerset CCG began the update on the ICS, noting that the rationale for working together has been evident throughout today's meeting. ICS has taken the key next steps of appointing a new Chair and new CEO effective from April of next year, and they will work with partners to formulate a plan, including working with the Health and Wellbeing Board.

The Director of Public Health then discussed that partnership, noting that there is a requirement to put in place an Integrated Care Partnership (ICP) underneath the ICS. The two boards (ICS and HWB) have some overlap. A workshop was held in October and a good discussion was held; now it will need to be decided how to go forward. It provides an opportunity in Somerset to start to blur some of the boundaries between health and care services and the wider determinants of health, and to determine a clearer connection between health and care and those things that influence them. She pointed to Section 3.7 in the covering report, which identifies four main points discussed at the workshop that need to be considered as part of the next phase:

- Clarity between the two boards and understanding their remit
- The need to keep the structure simple in order for members of the community to interact with both boards (possibly having joint public question times)
- Size of board membership - not too large and possibly common membership (at least to some extent)



- Desire to maintain the Improving Lives agenda

The recommendations from the workshop for the Health and Wellbeing Board are threefold:

- Establish a close working relationship between the HWB and the ICP following its establishment
- Align HWB and ICP agendas and work programmes
- Have committees in common on both boards

After the informal workshop, the discussion needs to be formal and satisfy all of the legal requirements of both boards going forward. Although the new arrangements must be in place by 22 April 2022, there will probably be a period of development over the next year or so, as the ICS develops and the new Council develops, things may morph.

**The Somerset Health and Wellbeing Board received the report and noted the recommendations.**

#### **Somerset Health and Wellbeing Board Work Programme – Agenda Item 10**

Members were advised that if they wish to add any items to the Work Programme, they can email the Deputy Director of Public Health.

**The Somerset Health and Wellbeing Board noted the Work Programme.**

#### **Any Other Items of Business - Agenda Item 11**

There were no other items of business.

**The meeting ended at 13:18 pm**

**CHAIR**

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## Somerset Safeguarding Adults Board: Strategic Plan (2021/2022) Refresh and Annual report (2020/21)

Lead Officer: Keith Perkin, Independent Chair, Somerset Safeguarding Adults Board

Author: Stephen Miles, Service Manager, Somerset Safeguarding Adults Board

Contact Details: smiles2@somerset.gov.uk / 01823 359157

<p><b>Summary:</b></p>	<ol style="list-style-type: none"> <li>1. The Somerset Safeguarding Adults Board (SSAB or the Board) operates as an independently chaired, multi-agency body under The Care Act 2014. It became statutory from April 2015.</li> <li>2. The SSAB's role is to have an oversight of safeguarding arrangements within the County, not to deliver services or become involved in the day-to-day operations of individual organisations, including those of Somerset County Council. Any questions from committee members regarding operational matters, including individual safeguarding enquiries, should therefore be directed to the representative of the organisation that has the lead for this work.</li> <li>3. The Board is required by The Care Act 2014 to produce and publish an Annual Plan and Report each year. The plan is normally considered by the Somerset Health and Wellbeing Board in the spring (this did not happen in 2020 or 2021 due to the Coronavirus Public Health Crisis) and the Annual Report in the autumn.</li> <li>4. The purpose of this report is to present both the SSAB's refreshed Annual Plan for 2021/22 (<a href="#">Appendix A</a>) and Annual Report for the 2020/21 financial year (<a href="#">Appendix B</a>) to the Somerset Health and Wellbeing Board</li> </ol>
<p><b>Recommendations:</b></p>	<ol style="list-style-type: none"> <li><b>1. That the Somerset Health and Wellbeing Board receives and considers the Somerset Safeguarding Adults Board's 2021/22 Annual Plan and 2020/21 Annual Report (Appendices A and B).</b></li> <li><b>2. That the Somerset Health and Wellbeing Board notes progress highlights during 2021/22 to date</b></li> <li><b>3. That the Somerset Health and Wellbeing Board continues to promote adult safeguarding across the County Council and in the services that are commissioned</b></li> </ol>
<p><b>Reasons for recommendations:</b></p>	<p>Reason for recommendations: The purpose of this report is to present the Board's Annual Plan for 2021/22 and Annual Report for the 2020/21 financial year to the Somerset Health and Wellbeing Board.</p>

<p><b>Links to The Improving Lives Strategy</b></p>	<p><b>Please tick the Improving Lives priorities influenced by the delivery of this work</b></p> <table border="1" data-bbox="544 224 1474 685"> <tr> <td data-bbox="544 224 1291 349"> <p><b>A County infrastructure that drives productivity, supports economic prosperity and sustainable public services</b></p> </td> <td data-bbox="1291 224 1474 349"></td> </tr> <tr> <td data-bbox="544 349 1291 474"> <p><b>Safe, vibrant and well-balanced communities able to enjoy and benefit from the natural environment</b></p> </td> <td data-bbox="1291 349 1474 474" style="text-align: center;">  </td> </tr> <tr> <td data-bbox="544 474 1291 560"> <p><b>Fairer life chances and opportunity for all</b></p> </td> <td data-bbox="1291 474 1474 560"></td> </tr> <tr> <td data-bbox="544 560 1291 685"> <p><b>Improved health and wellbeing and more people living healthy and independent lives for longer</b></p> </td> <td data-bbox="1291 560 1474 685"></td> </tr> </table>	<p><b>A County infrastructure that drives productivity, supports economic prosperity and sustainable public services</b></p>		<p><b>Safe, vibrant and well-balanced communities able to enjoy and benefit from the natural environment</b></p>		<p><b>Fairer life chances and opportunity for all</b></p>		<p><b>Improved health and wellbeing and more people living healthy and independent lives for longer</b></p>	
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<p><b>Fairer life chances and opportunity for all</b></p>									
<p><b>Improved health and wellbeing and more people living healthy and independent lives for longer</b></p>									
<p><b>Financial, Legal, HR, Social value and partnership Implications:</b></p>	<p><b>Financial implications:</b> The majority of the SSAB’s funding is provided by Somerset County Council, with contributions from Avon &amp; Somerset Constabulary and NHS Somerset Clinical Commissioning Group. Safeguarding Adults Reviews (SARs) are resourced by the partnership as and when required and an agreement is now in place between the three statutory partners to resource all SARs from outside the SSAB’s core budget. A new approach that we developed, before the Coronavirus Public Health Crisis, of asking a senior representative from a partner organisation that had not had involvement in a case to chair a locally led approach has not yet reduced the proportion of instances when an Independent Reviewer needs to be commissioned due to the ongoing pressure on the local system. The SSAB continues with its decision not to professionally print the Annual Plan or Report to save on costs and environment impact. All reports are publicly available on the website <a href="http://www.ssab.safeguardingsomerset.org.uk">www.ssab.safeguardingsomerset.org.uk</a>, including both appendices to this Report.</p> <p><b>Legal implications:</b> The Care Act 2014 represented the most significant change to adult social care in more than 60 years, putting people and their carers in control of their care and support. For the first time the Act placed Safeguarding Adults, and the role and functions of a Safeguarding Adults Board, onto a statutory framework from 1st April 2015.</p> <p><b>Partner organisations:</b> Somerset Safeguarding Adults Board benefits from strong partnership commitment. Organisations represented on the Board had the opportunity to detail their achievements and contributions in 2020/21 and all Board members are encouraged to take the Annual Report through their own internal governance routes.</p>								
<p><b>Equalities Implications:</b></p>	<p><b>Equalities Implications:</b> None. This report does not relate to a decision and has therefore not been impact assessed.</p>								
<p><b>Risk Assessment:</b></p>	<p><b>Risk Assessment:</b> Safeguarding activity by its nature is an</p>								

	<p>inherently risky area and has the potential to bring a Council's reputation, and the wider safeguarding system, into question, when failings are identified. The Annual Plan and Report, both a legal requirement by the Care Act 2014, provide partner organisations and the public with assurances that adult safeguarding is being monitored and scrutinised in Somerset. The Board also has a robust risk register in place which identifies and tracks risk.</p>
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## 1. Background

- 1.1.** The main objective of the Somerset Safeguarding Adults Board (SSAB) is to seek assurance that local safeguarding arrangements and partner organisations act to help and protect people aged 18 and over who:
- have needs for care and support; *and*
  - are experiencing, or at risk of, abuse, neglect or exploitation; *and*
  - are unable to protect themselves from the risk of, or experience of, abuse or neglect as a result of their care and support needs
- 1.2.** The SSAB is required by The Care Act 2014 to produce and publish an Annual Plan and an Annual Report for each financial year.
- 1.3.** The Annual Plan must set out what the Safeguarding Adults Board intends to do over the next year to help and protect adults at risk of abuse and neglect in Somerset during that timeframe. In common with many other Safeguarding Adults Boards (SABs), the Board chose to develop a three-year plan in 2019 that is refreshed annually. The 2021/22 refresh is the last refresh of the current cycle.
- 1.4.** The Annual Report must set out what has been done to help and protect adults at risk of abuse and neglect in Somerset during that timeframe. It provides an opportunity to both reflect on achievements over the past year and to formally identify priorities for the year ahead. It also offers a chance to demonstrate the SSAB's fulfilment of its role and ongoing commitment to safeguard vulnerable adults in the county.
- 1.5.** Safeguarding is everybody's business, and the SSAB has a strategic role that is greater than the sum of the operational duties of the core partners. It means protecting an adult's right to live in safety, free from abuse and neglect.

## 2. Improving Lives Priorities and Outcomes

### 2.1. The SSAB's Annual Plan

The SSAB developed a new 3-year strategic plan for 2019-2022 in early 2019, incorporating comments from Somerset Health and Wellbeing Board, and this has been refreshed for 2021-22. As part of the refresh the plan has been amended to reflect the competing demands on partners during the Coronavirus

## Public Health Crisis.

By its very nature a strategic plan will be high-level and contain objectives that will be updated as work progresses. Our plan also does not reference specific groups of adults, other than in one specific case, in recognition that while the general level of risk may vary, safeguarding work is rarely group specific. Our overarching priorities for 2021-22 are:

- a) Listening and learning:
  - Safeguarding is person-led, outcome-focused, enhances involvement, choice and control, and improves quality of life, wellbeing and safety
  - We use learning from within Somerset and elsewhere to enhance practice across the system in Somerset.
  - Identified best practice will be embedded throughout the partnership
  - We will be open to constructive criticism, and take appropriate action to reduce risk and improve safeguarding practice.
- b) Enabling people to keep themselves safe:
  - People are aware of what abuse is and how to keep themselves and those that they care for safe
  - People know what to do if they think that they or others are experiencing abuse or neglect
- c) Working together to safeguard people who can't keep themselves safe:
  - Organisations, including the third sector, work together to ensure that multi-agency arrangements are effective, and that people who are unable to keep themselves safe are supported in the least invasive way
  - Policy and guidance reflects best practice and takes a positive approach to risk
  - There is effective working across local, regional and national partnerships on areas of mutual interest
  - The number of inappropriate referrals is reduced through people raising other types of concern in an appropriate way
- d) Board Governance:
  - Somerset has an effective Safeguarding Adults Board which fulfils its statutory responsibilities, has strong leadership and governance arrangements, and promotes a culture of collective accountability, respectful challenge and continuous learning

The Board uses data appropriately to understand where risk exists within the system

**2.2.** Further information on the work that it is proposed will underpin these priorities can be found in Appendix A.

### **2.3. Assurance in relation to Adult Safeguarding Arrangements in Somerset**

In common with many other SABs in England, SSAB did not complete its usual annual self-audit process in 2020/21 due to the ongoing impact of the Coronavirus Public Health Crisis on partners capacity to participate in the process. In the absence of this audit the Board and its Executive Group regularly monitored the response of the system, with no significant concerns or additional

priorities for the Board emerging during the year. This monitoring has included the Board's Independent Chair observing meetings, for example The Vulnerable People's and Care Providers meetings in order to gain assurance that partners were working together to effectively support people with care and support needs.

The Board has also supported work by the Local Government Association and Association of Directors of Adult Social Services to gain additional insight in to safeguarding data during the Coronavirus Public Health Crisis nationally, and the Board wishes to thank Somerset County Council's safeguarding service for its support with this work. This work has resulted in comparative data being made available to the Board which has supported monitoring during the year.

Those areas where development was identified in previous audit process have resulted in work being completed during the year, for example the publication of new information for the public and people with care and support needs for all partners and the public to use.

An exception remains where services are commissioned by commissioners external to Somerset, which was highlighted in our previous two reports the Committee. As stated in our previous report, we have reached the point locally where further progress requires action to be taken on a national level to address the broader concerns about the practices of some commissioners when they place adults into services outside of their local area.

#### **2.4. South West Audit Partnership (SWAP) Audit of the SSAB**

During the spring of 2020 the SSAB was independently audited by the South West Audit Partnership, and also conducted an effectiveness survey of members. While the audit highlighted a number of areas for improvement the overall finding was that the Board has satisfactory arrangements across key areas to ensure that it operates as an effective partnership, and at the Board meeting on 12/06/2020 members agreed actions to take work forward to address the findings.

The recommendations include:

1. A review of the Terms of Reference for the Board and all of its Subgroups, and the expectations on its members
2. The inclusion of a standing agenda item for the Executive Group to ensure that all strategic actions are equally owned and resourced by the Board partner
3. For any subgroup meetings that are cancelled or postponed to be reported to the Board each time it meets
4. For self-referral data to be considered by the Quality Assurance Subgroup
5. For the Quality Assurance Subgroup to progress Somerset County Council's implementation of the feedback process proposed by Healthwatch Somerset in 2019.
6. For the Board to consider the results of the effectiveness survey with a view to improving confidence levels in the identified areas of lower confidence

The implementation of the recommendations has been monitored by the Board's

Executive Group and reported to the Board each time it met during the year. All recommendations have now been completed.

## 2.5. Key Progress, 2020/21

As a result of the demands that were placed on key partners in relation to responding to the Coronavirus Public Health Crisis, in common with the approach taken by many other SABs nationally, the SSAB took the difficult decision to suspend all of its subgroups at the start of the financial year and also to cancel its annual conference. Once restarted subgroups had a focus on the system's recovery and learning from the crisis. Highlights during the year include:

- a) The SSAB has supported the local system during the public health crisis by hosting, and maintaining on a daily basis, information to support organisations providing care and support to adults in Somerset on its [website](#). It has also supported work in relation to Personal Protective Equipment and Infection Prevention in the local system, and the development of Somerset's Adults Social Care Winter Plan.
- b) Each of the SSAB's subgroups has looked to identify learning from the system from the crisis. The vast majority of this learning was that, during 2012/21, the local system performed well, with good examples of partners working together effectively. However, this will continue to be monitored given the significant pressure that the local system is currently under.
- c) The SSAB Executive Group and the Quality Assurance subgroup monitored the levels and types of safeguarding concerns for adults at risk throughout the year, including working to understand any variations compared to the previous two years. While there were some variations in the types of abuse being reported the Subgroup was satisfied that the system in Somerset was responding to referrals appropriately. The Quality Assurance Subgroup has also taken a decision to move to a biennial audit cycle, with the next audit planned for 2021.
- d) [Safeguarding Adults Reviews into the deaths of 'Luke' and 'Damien'](#) were published in August 2020 and March 2021 respectively and the Safeguarding Adults Review (SAR) Subgroup has continued to consider referrals for SARs when they are received. Appendix B includes a summary of the progress that has been made so far to address the recommendations from 'Luke', and further update will follow in our next report alongside a summary of the progress in relation to 'Damien' and any Reviews published during 2021/22.
- e) The Policy and Procedures subgroup has continued to review existing guidance, and develop new guidance in areas where it is identified that it would be beneficial. Documents published during 2020/21 include "[Medication Management Guidance for Providers](#)" and a regional [Organisational Abuse Policy](#) that the SSAB took the lead in developing. New public facing materials have also been developed by the Policy and Procedures Subgroup which have been promoted with partners and via social media. These include:



- [What is Abuse and Neglect](#)
  - [What happens after abuse or neglect is reported](#)
  - [What is a Planning Meeting](#)
  - [What is a Safeguarding Adult Enquiry](#)
  - [What is a Review Meeting](#)
  - [Preparing for a safeguarding meeting](#)
  - [Mental Capacity](#)
- f) As in previous years each Safeguarding Adult Board in the Avon and Somerset Constabulary area undertook to promote adult safeguarding through the annual 'Stop Adult Abuse Week'. The focus in 2020/21 was "Looking after your community".

Due to the coronavirus pandemic, during 2020/21 we were not able to arrange for anyone who had direct experience of safeguarding in Somerset to talk to the Board in person due to the on-going restrictions, however we hope to be able to resume inviting people during 2021/22. However, to ensure an effective link between senior leaders on the Board and those who provide a direct safeguarding service, practitioners have presented to the Board on the challenges they have faced over the last 12-18 months.

## **2.6. Key Progress, 2021/22**

Our work during 2021/22 has once again been impacted by the need of our partners to prioritise their response to the Coronavirus Public Health Crisis and associated system pressures. Highlights during the year include:

- a) The SSAB continued to support the local system by hosting, and maintaining on a daily basis until August 2021, information to support organisations providing care and support to adults in Somerset on its [website](#). It also continues to support work on Infection Prevention and Control and Rapid Testing grant funding for care providers.
- b) The, now merged, Learning & Development and Policy & Procedures Subgroup has continued developing guidance for staff working with adults who may make disclosures regarding alleged non-recent incidents involving children following the publication of the 'Luke' Safeguarding Adults review, and had also published new public facing materials in relation to Mate Crime, which it intends to add further to during the year.
- c) The, now renamed, Performance and Quality Assurance Subgroup has developed a new performance scorecard. This is expected to have additional measures added from partners over the coming months. It has also been monitoring feedback received through a new feedback process that was agreed following a report by Healthwatch Somerset.
- d) The Performance and Quality Assurance Subgroup led on the development of a new audit tool, for use by the five SABs that operate within the Avon & Somerset Constabulary footprint on a biennial basis. The submission date for audit returns was 01/10/2021 and the Board was pleased to receive the highest number of returns to date. Analysis of local themes will take place during the autumn of 2021 and will be included in our next Annual Report.

- e) The Board has reviewed the finding and recommendations from a National Analysis of Safeguarding Adult Reviews from April 2017 to March 2019. It has conducted a gap analysis of to identify those that apply to SABs where work is required, and this will be led by the Safeguarding Adults Review Subgroup in the first instance. The Board is also actively contributing to work to take forward national recommendations made in the report.
- f) The SSAB worked with other Boards within the Avon & Somerset Constabulary footprint to provide a series of webinars and other promotional material during the National Safeguarding Adults week from 15/11/2021 to 19/11/2021 having not been able to arrange a conference once again in 2021. As part of the week of webinars the SSAB presented a webinar alongside colleagues from Somerset County Council, NHS Somerset CCG, Somerset NHS Foundation Trust and the Care Quality Commission on "Promoting Safer Cultures" on 19/11/2021.

The Safeguarding Adults Review Subgroup has commissioned three Safeguarding Adults Reviews that are expected to be completed during the first half of 2022, with at least one further review expected to be completed during 2021/22. In line with other SAB's, there is a growth in the number of SAR referrals. We are working locally, regionally and nationally to ensure we are reviewing such cases in a timely manner enabling learning from such reviews to be embedded promptly.

**2.7.** The Annual Report can be read in full in Appendix B.

### **3. Consultations undertaken**

**3.1.** As part of refreshing the Strategic Plan and developing its Annual Report the SSAB sought feedback from all of its partners. This includes seeking feedback from representatives of people who use services, carers and the third sector, and Healthwatch. Partners were also invited to contribute content to the Annual Report, and this can be found in section 9 of Appendix B..

### **4. Request of the Board and Board members**

- 4.1.** 1. That the Somerset Health and Wellbeing Board receives and considers the Somerset Safeguarding Adults Board's 2021/22 Annual Plan and 2020/21 Annual Report (Appendices A and B).
- 2. That the Somerset Health and Wellbeing Board notes progress highlights during 2021/22 to date
- 3. That the Somerset Health and Wellbeing Board continues to promote adult safeguarding across the County Council and in the services that are commissioned

### **5. Background papers**

- 5.1.** • [Appendix A, SSAB Strategic Plan, 2021/22](#)

- [Appendix B, SSAB Annual Report, 2020/21](#)
- [Appendix C, SSAB Annual Report summary, 2020/21](#)

## 6. **Report Sign-Off**

### 6.1

	<b>Seen by:</b>	<b>Name</b>	<b>Date</b>
<b>Report Sign off</b>	Relevant Senior Manager / Lead Officer (Director Level)	Trudi Grant	01/12/21
	Cabinet Member / Portfolio Holder (if applicable)	Cllr C Paul	01/12/21
	Monitoring Officer (Somerset County Council)	Scott Wooldridge	26/11/21

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# SOMERSET SAFEGUARDING CHILDREN PARTNERSHIP

Twelve Monthly Report  
2020-21

# Foreword

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**Welcome** to the Somerset Safeguarding Children Partnership's **Twelve-Monthly Report 2020 to 2021**.

The **Somerset Youth Forum** is proud to be part of the Somerset Safeguarding Children Partnership. We meet termly via Zoom to discuss the important issues for all children and young people across Somerset.

Our role is to influence and challenge the Partnership to think about what children and young people are telling them about their experiences – whether it's at school, at home, in our communities or while we are out and about being kids and having fun.

We do this by producing resources, making films, meeting people who will champion our voice whilst also having fun and developing skills and confidence.

## [GP Safeguarding Film](#)

## [LADO Film](#)

One of our biggest tasks this year has been to support the consultation for the next Children & Young People's Plan – over 2,500 children and young people in Somerset have contributed – which wasn't easy during the pandemic.



In this report you will see some of the topics we have covered over the past twelve months, and we hope you think they are as important as we think they are. We met the Executive Partners – Val, Dickon and Julian - recently to show them all our achievements and we made this Word Cloud (see right) for them to see what it means to be a member of the Somerset Youth Forum.

There's loads more really good information about the development of the Partnership and the difference its making – so we hope you really enjoy reading it!

**Best wishes from the young people of the**



Things I am proud to have contributed to Youth Forum this year:





# Introduction

Welcome to the second report of the **Somerset Safeguarding Children Partnership (SSCP)** which sets out the key areas of work undertaken in 2020-2021, the first full year of new safeguarding arrangements in Somerset.

The safeguarding lead responsibility is shared between the three statutory partners of **Somerset County Council, Avon and Somerset Constabulary**, and **Somerset Clinical Commissioning Group** with a commitment to shared and equitable leadership of the safeguarding children arrangements, as set out in 'Working Together to Safeguard Children' (2018).

We recognise the impact of the COVID-19 pandemic and celebrate the work of the partners under extremely challenging conditions. We acknowledge that there remains work to be done to ensure that Somerset children thrive and grow, from pre-birth to adulthood, stay safe and free from abuse in all its forms, and wish to restate our commitment here to working across agency boundaries.

We welcome the continued work of our Independent Scrutineer, Mark Peel, and the value the accountability he brings.

This report details activity for the financial year 2020-2021 and covers much of the pandemic lockdown period.



Val Janson

**Director of Quality and Nursing**  
Somerset Clinical Commissioning Group



Dickon Turner

**Superintendent**  
Avon & Somerset Constabulary



Julian Wooster

**Director of Children's Services**  
Somerset County Council



# Governance & Leadership

The structure chart for the SSCP is shown [here](#). This chart also details subgroups and associated functions which are the delivery arm of the SSCP.

## Key developments

This year the Somerset Safeguarding Children Partnership has:

- ❑ Welcomed a new Executive member from the CCG and one from Avon & Somerset Constabulary.
- ❑ Invested in capacity to collect and analyse partnership data.
- ❑ Supported a successful bid to the Department for Education to recruit an additional health professional to support MASH arrangements in 2021.
- ❑ Promoted relevant agency engagement through Safeguarding Forum event weeks in [December 2020](#) and [June 2021](#).
- ❑ [LADO \(Local Authority Designated Officer\) Annual Report 2020-2021](#)

- ❑ Worked with Research in Practice to refresh the strategic approach to tackling Child Exploitation and to complete a Child Exploitation needs assessment to inform a future Child Exploitation strategy.
- ❑ Published a new [SSCP Early Help Strategy](#).
- ❑ Completed multi-agency audits with recommendations and actions.
- ❑ Commissioned two local Child Safeguarding Practice Reviews to be published in the summer of 2021.
- ❑ Supported the development of the Effective Support for Children and Families in Somerset (Special Educational Needs and Disabilities) guidance.
- ❑ Strengthened the governance structures between the SSCP, Safer Somerset Partnership and the Violence Reduction Unit.
- ❑ Devised a number of initiatives during lockdown to maintain support to vulnerable families, such as pre-birth tracking and a linked professional initiative.
- ❑ Begun a consultation on the next plan for Children, Young People and their Families in Somerset to take effect in April 2022.

# Rapid Reviews

The SSCP completed two rapid reviews during the financial year 2020-2021, which did not progress to Local Child Safeguarding Practice Reviews. All agencies have shown a significant commitment to ensure rapid reviews are completed within the 15-day timescale, and that the need to identify the learning and act swiftly on it has been a priority.

In addition, members of the SSCP have participated in two further rapid reviews in neighbouring authorities, centring on the needs of complex adolescents.

The SSCP recognises the need to continue to refine the rapid review process.

These reviews have identified some key areas for consideration, learning and action for the local safeguarding system as set out below:

- ❑ Effectiveness of early help assessments, plans and support.
- ❑ Fathers/male carers could be better included and offered help.
- ❑ Impact of mental health, substance misuse or mental health needs of parents on children, and understanding of addiction by practitioners.
- ❑ Domestic abuse, both current and historic, and its impact on a mother's ability to make safe decisions for children, and the expectation that only women should do so.
- ❑ The importance of keeping close relationships with children placed out of area and ensuring that all their needs are met, with a focus on education.
- ❑ The importance of recognising and acting on neglect early.



# Partnership Learning

Partnership learning has been disseminated in the following ways:

- ❑ The commissioning of two local Child Safeguarding Practice Reviews, with learning briefings produced and published on each case and disseminated to partners before publication.
- ❑ Review and launch of revised multi-agency guidance on the effective functioning of strategy discussions, including an animation.
- ❑ Multi-agency safeguarding training courses with key messages from local learning continually updated.
- ❑ Multi-agency modular training on identifying barriers to effective early support and overcoming them.
- ❑ Multi-agency practitioner information events with a focus on protecting babies and very young children.
- ❑ SSCP Safeguarding Forum event weeks, addressing key learning and partnership interaction, in [December 2020](#) and [June 2021](#)

Learning has also been supported by the national panel's review into sudden unexpected death in infancy [Out of routine: A review of sudden unexpected death in infancy \(SUDI\) in families where the children are considered at risk of significant harm.](#)



# Multi-Agency Training

During 2020-2021, 1,051 members of staff from across the workforce accessed the multi-agency training provided by the SSCP. Despite moving to online delivery as a result of restrictions imposed by the pandemic, the training continues to be well-attended and rated highly by delegates, with learning from LCSPRs bringing the content up-to-date.

Participants returned a 96% confidence level that the training would impact positively on their practice, as well as reporting improved understanding of inter-agency working to promote safeguarding (79%) and their own professional responsibilities (85%).

***“Excellent presentation, communicated well, and stimulating and prompting reflection of my practice”***

Training also provides income to the partnership, which supports further skills-based course delivery, and allows for flexibility as training needs across the system arise.



## Impact of SSCP activity

- ❑ Local Child Safeguarding Practice Reviews have led to the development of training and resources for identifying and supporting needs in the pre-birth period, including revision of the South-West Child Protection Protocols relating to pre-birth assessment.
- ❑ The Resolving Professional Differences escalation policy has been refreshed with a focus on resolution at the earliest stage to support families and enhance partnership working, leading to fewer escalations at a formal level.
- ❑ The effective functioning of strategy discussions has been identified as an area of focus, so the multi-agency guidance has been refreshed, and an animation produced for inclusion with invitations to all strategy discussions.
- ❑ Development of a multi-agency linked professional initiative to ensure families were seen and supported during the lockdown.
- ❑ 96.4% of care leavers are in suitable accommodation.

## Future activity

- ❑ Revision of the Effective Support for Children and Families in Somerset (threshold document) to ensure a focus on needs not level descriptors.
- ❑ The SSCP recognises that there is more to do in regional work to ensure a consistent, multi-agency response across the Avon & Somerset force area to police notifications of domestic abuse where children are involved.
- ❑ A review of the Family Front Door to ensure multi-agency involvement and effective response at the earliest stage to family needs.



# Young People's Involvement

The **Somerset Youth Forum** consists of young people aged 10 -18 years from across Somerset who want to make a difference for all children and young people by holding the three key safeguarding partners to account against the safeguarding priorities owned by the partnership.

The first conversation with the Executive group took place in October 2020 where young people clearly expressed their views around support for mental health and well-being, physical health, safe educational settings (knife crime and exploitation), transport links and the challenge of returning to a post-COVID world.

The statutory safeguarding partners committed to working more closely with schools to create safe environments and addressing mental health and well-being support.

Young people were key to the Somerset 'Safeguarding week' in December 2020, co-presenting a session called '[Learning & Good Practice: Hearing the Voices of Young People](#)'.

In addition, under the new safeguarding arrangements, the SSCP takes oversight of the priorities identified by children and young people in the [Somerset Plan for Children, Young People and Families 2019-2022](#).

The plan will be refreshed, taking into account the views of the Youth Forum, to take effect in April 2022.

To view the achievements of the Youth Forum please [click here](#).

Two Local Child Safeguarding Practice Reviews, to be published summer 2021, have sought to involve families, with some success. This can be partially attributed to remote working during the pandemic, and partially to complex family circumstances. These factors will contribute to future learning in conducting LCSPR's.





## Independent Scrutiny

The Independent Scrutineer took up post in January 2020. This role provides assurance to the three statutory safeguarding partners in the form of an annual report. In addition, the Youth Forum provides the opportunity for young people to scrutinise the work of the partnership and hold the Executive members to account.

An independent author, commissioned to carry out the two local Child Safeguarding Practice Reviews, has also contributed to an independent view of the performance of the SSCP.

In 2021-2022, the commitment is to ensure further scrutiny, whether from another area, an expert individual, or a national body.

## Section 11 Audit

Twenty-one agencies participated in the Section 11 audit in 2020-2021.

Areas of success identified include effective information sharing between agencies, and safeguarding supervision generally of a good standard. Some agencies, particularly the voluntary sector, felt that there was scope for greater engagement with the new partnership arrangements. The impact of the pandemic also contributed to this, despite the online SSCP Safeguarding Forum weeks. Conversely and positively, many agencies also reported that use of technology during the pandemic made multi-agency engagement and responsiveness much improved, including greater involvement of parents in child protection conferences. Findings will be tested through a series of 'walk-about' activities in winter 2021.

There is more to do to revise and embed the Effective Support for Children and Families in Somerset (threshold document) and associated guidance for children and young people with SEND, both of which are a focus for 2021-2022.



# Strategic Priorities:

## Early Help

As a result of findings from ongoing local Child Safeguarding Partnership Reviews (LCSPRs), early help remains a priority to ensure early identification of need, particularly for very young children. This year, the SSCP refreshed the Early Help strategy which is owned by the Early Help Strategic Commissioning Board as a subgroup of the Somerset Safeguarding Children Partnership.

Introduction of modular Early Help training has been particularly welcomed by frontline colleagues, and it remains an entrenched issue.

***“Knowing where to find advice and how other professionals interact with each other for the best outcome for children and families are great starting points for helping families”***

LCSPR learning also confirms that fathers, male carers and extended family need to be included better in assessments and in planning activity, particularly at the early help level.

Guidance around early help ways of working was strengthened by new materials for Team Around the Family activity.

### **Team Around the Family One Minute Guide.**

Evidencing the impact of early help remains a challenge and will also be addressed through the development of the next Somerset Plan for Children, Young People and their Families.

### **Focus for next year:**

The Effective Support for Children and Families in Somerset where there are special educational needs and disabilities (SEND) was launched at the end of 2020.

In 2021, the Effective Support guidance will be refreshed to ensure a stronger common understanding of child and family needs and appropriate responses.





## Multi-Agency Safeguarding

Multi-agency safeguarding in 2020-221 had a key focus on the quality of strategy discussions, following learning from LCSPRs and audit activity.

The SSCP developed new multi-agency guidance for strategy discussions, including an animation for training purposes and to be sent to all attendees of strategy discussions to outline role and responsibilities.

### [SSCP Guide to Strategy Discussions](#)

Further audit work in winter 2021 will evidence the effectiveness of improvements to strategy discussions and decision-making to keep children safe.

#### **Focus for next year:**

The effective functioning of multi-agency strategy discussions will remain a key priority for the partnership.

Involvement of fathers/male carers will form the basis of the December 2021 SSCP Safeguarding Forum week and will include the promotion of healthy relationships, following the Ofsted review into *Sexual Abuse in Schools and Colleges* (July 2021) in which the SSCP participated.

## Neglect

Neglect continues to feature in the rapid reviews conducted in 2020-2021. The Neglect Toolkit is promoted across the workforce to support the identification of neglect and was relaunched in electronic version as a result of feedback from frontline staff during the pandemic. However, it remains unclear how far this is used and specifically how it supports the impact of neglect on children, despite large numbers of downloads, and this is something which the SSCP needs to address in future.

#### **Focus for next year:**

The partnership is committed to refreshing the neglect toolkit to support practitioners to identify neglect, and help parents to make changes where required.



## Child Exploitation

Local responses to child exploitation continue to change as new practices for exploiting children emerge. This has remained a priority for the SSCP, given that a number of communities in Somerset are known to have increased exploitation activity, as well as adopted new methods of exploitation during the pandemic.

Following a successful partnership bid to Research in Practice, the Somerset response to child exploitation has been reconsidered and refreshed with a greater emphasis on transitions for young people. To that end, the remit of the Child Exploitation strategic subgroup has widened to include young people with additional vulnerabilities up to the age of 25, and therefore includes the Somerset Safeguarding Adult Board and Adult Social Care.

### Focus for next year:

Complete a needs assessment on Child Exploitation in Somerset and develop a new partnership Child Exploitation strategy.



## Child Death Overview Panel

In 2020-2021, there were 16 child deaths from Somerset and 25 child deaths from Dorset considered at the Child Death Overview Panel. Somerset has merged its Child Death Overview Panel function with that of Dorset to ensure a wider pool from which to learn.

## Future training developments include:

Ensuring a diverse range of face-to-face and virtual training opportunities, with good take-up across the partnership, including multi-agency practitioner information groups, conferences, and lunchtime learning opportunities. eLearning packages and cascade packs for single agency delivery will be kept up-to-date and available 'on demand'.

Developing opportunities to use **webinars** and **shared online learning**. This will build upon areas of improvement identified by the workforce where training is delivered virtually, such as better management of break-out rooms for activities.

Development of the Training and Development subgroup into a wider **Workforce Development Group** with an associated strategy, which should include quality assurance of single agency training.

Close liaison between the Avon and Somerset Strategic Safeguarding Partnership to standardise training offers and increase transferability of training across the area. Work is underway to develop a **region-wide skills-based training offer** from early 2021.



## Current developments:

This report was completed during the COVID-19 pandemic, to which the SSCP has responded with a number of initiatives:

Safeguarding **training and supervision** have been offered in virtual environments, using webinars and video conferencing. For some agencies, there has been an enhanced level of safeguarding supervision whilst the COVID-19 restrictions have been in place, as a result of not needing to travel, and blended solutions will be used in the future. Similarly, online multi-agency training was maintained during lockdown to ensure continued compliance across the workforce, as well as sharing of local learning, reaching over 200 frontline practitioners.

**Early help** ways of working have been strengthened by the **multi-agency linked professionals arrangements** which have promoted stronger inter-agency working and the role of the lead practitioner.

Likewise, tracking of **vulnerabilities in the pre-birth** period have been addressed by enhanced multi-agency planning and intervention.

**Child protection conferences** have been well-attended in the virtual world, as have **SSCP subgroups**.

Practitioners and families have been offered '**walking support**' to ensure that face-to-face contact can be maintained outside.

Educational establishments have **reported effective pastoral support** across the partnership, including work with a residential centre to offer breaks for children in residential units or living in vulnerable families and provide outdoor activities for them.





**The SSCP would like to thank our partners, frontline practitioners, and the children, young people and families in Somerset who have engaged with our training, events and consultations throughout 2020-21**

**Thank You**





**Annual Report of the Director of Public Health 2021 – Young People in the Second Wave of COVID-19**

Lead Officer: Trudi Grant – Director of Public Health

Author: Pip Tucker – Public Health Specialist

Contact Details: [pztucker@somerset.gov.uk](mailto:pztucker@somerset.gov.uk); 01823 359449

<p><b>Summary:</b></p>	<p>The production of an annual report is a statutory obligation for Directors of Public Health. It is an opportunity for the DPH to give an independent view of health and wellbeing priorities in the county.</p> <p>This report describes the impact of the ‘second wave’ of COVID-19, in the period from August 2020 to May 2021, on the Somerset population and explores what it has meant to our older children and young people.</p>
<p><b>Recommendations:</b></p>	<p><b>That member bodies of the Somerset Health and Wellbeing Board, and the Board as a whole:</b></p> <ol style="list-style-type: none"> <li><b>1. Support and promote continued vigilance of COVID-19 in the local population and the importance of testing and vaccination, including against ‘flu</b></li> <li><b>2. Commit to the improvement of digital access in education for all children and young people in Somerset</b></li> <li><b>3. Support the ongoing efforts to nurture and strengthen children and young people’s mental health.</b></li> <li><b>4. Use the evidence here – including evidence of gaps in our knowledge - to inform our plans for the continuing pandemic, and our ultimate recovery.</b></li> </ol>
<p><b>Reasons for recommendations:</b></p>	<p>Evidence in this report illustrates the ongoing need for response and recovery initiatives, working in partnership with stakeholders and the voluntary sector to ensure the county can mitigate the impact of the pandemic.</p>
<p><b>Links to The Improving</b></p>	<p><b>Please tick the Improving Lives priorities influenced by the</b></p>

<b>Lives Strategy</b>	<b>delivery of this work</b>	
	<b>A County infrastructure that drives productivity, supports economic prosperity and sustainable public services</b>	
	<b>Safe, vibrant and well-balanced communities able to enjoy and benefit from the natural environment</b>	<b>x</b>
	<b>Fairer life chances and opportunity for all</b>	<b>x</b>
	<b>Improved health and wellbeing and more people living healthy and independent lives for longer</b>	<b>x</b>
	This report promotes 'improved lives' and 'reduced inequalities': these themes appear again strongly throughout.	
<b>Financial, Legal, HR, Social value and partnership Implications:</b>	There are no direct financial implications.  There are no direct legal or HR implications.	
<b>Equalities Implications:</b>	The report does not require an Equalities Impact Assessment.  The report considers the impact of the second wave of COVID-19 on our population and on our children and young people.	
<b>Risk Assessment:</b>	The direct and indirect impacts of Covid19 are considerable and a focus on the findings within this report can help to mitigate them. Not doing so can impact negatively on children and young people	

## 1. Background

- 1.1.** The production of an Annual Report is a statutory requirement for all Directors of Public Health (DPH). It is the personal responsibility of the DPH, and an opportunity to give an independent view of the range of factors affecting health and wellbeing in the county.
- 1.2.** Public health in 2021, and indeed life in general, has been dominated by the continuing COVID-19 pandemic and measures that have been taken to reduce its effects. In Somerset, by the end of wave 2 (22<sup>nd</sup> May 2021) there had been 22,455 infections and 680 deaths. Only 35 deaths were of people under 60, and the number of deaths of children and young people is too small to be disclosed.



**1.3.** The report uses quantitative data from the school census of 2021, and the qualitative 'voice' of children and young people as recorded by Somerset Youth Parliament, Young Somerset and Public Health Nursing teams to describe the impact.

**1.4.** There are few generalizations that can be made about the circumstances of these children and young people, their reactions and the support that they found. The considerable resources in Somerset devoted to helping this generation are described in the report, and the findings here should strengthen their focus on a child-centred, individual approach to their care.

**1.5** The nature of the pandemic in Somerset has been transformed by a highly successful vaccination programme, with 79.5% of the population having received two doses by November 2021. At the time of writing, this programme has been extended to 12-18 year-olds, particularly helping to reduce the impact on their schooling.

## **2. Improving Lives Priorities and Outcomes**

**2.1.** This report promotes 'improved lives' and 'reduced inequalities': these themes appear again strongly throughout.

## **3. Consultations undertaken**

**3.1.** This report is a statutory, individual responsibility of the Director of Public Health. However, it draws upon joint working 'across the system' and reflects the cooperative approach adopted. The voice of older children and young people appears in the report from focus group work with Young Somerset, Youth Parliament and Public Health Nurses.

## **4. Request of the Board and Board members**

**4.1.** To support and promote the key findings of the report within their own and partner organisations

## **5. Background papers**

**5.1.** Previous reports, along with the statistical annexes, are published at <https://www.somerset.gov.uk/social-care-and-health/public-health/> (downloads).

The current Joint Strategic Needs Assessment (in production) focuses on the

impact of COVID-19 in deprived areas of Somerset.

## 6. Report Sign-Off

### 6.1

	<b>Seen by:</b>	<b>Name</b>	<b>Date</b>
<b>Report Sign off</b>	Relevant Senior Manager / Lead Officer (Director Level)	Trudi Grant	02/12/21
	Cabinet Member / Portfolio Holder (if applicable)	Claire Paul	02/12/21
	Monitoring Officer (Somerset County Council)	Scott Wooldridge	02/12/21

**Somerset Health and Wellbeing Board – WORK PROGRAMME 2022**

Agenda Item	Date of Meeting	Details and Lead Officer
	17 January 2022	
Somerset Safeguarding Adults Board Annual Report		Stephen Miles/SSAB Chair
Safeguarding Children Report		Julian Wooster
Annual Public Health Report		Trudi Grant
ICS Verbal Update		Trudi Grant/James Rimmer
	24 January 2022	
Development Session on JSNA		
	21 March 2022	
Homelessness Reduction Board		Mark Leeman
Health Protection (HPF) Annual Report		Jessica Bishop & Alison Bell

ICS Verbal Update including Workforce Development		Jane Graham
	30 May 2022	
PNA - Pharmaceutical Needs Assessment		Pip Tucker (15 min)
ICS Verbal Update		
	25 July 2022	
ICS Verbal Update		
	26 September 2022	
ICS Verbal Update		
	28 November 2022	
ICS Verbal Update		
	<b>Member Information Sheets</b>	
Community Care		TBC

Somerset Activities and Sport (SASP) Out of Hours 111 Service		Clare Paul - TBC Devon Doctors
	<b>To Add Later</b>	
Neighbourhoods & Communities		Mel Lock / Tim Baverstock
Economic Update – Covid-Related		James Gilchrist
Learning from Covid / Community Support After Covid / Prevention Agenda		Trudi Grant

- Reports should generally be no longer than 6 sides of A4 with detail being contained in appendices or available via contact officer.
- If reports are not received by the deadlines indicated, they will be taken off the agenda for that meeting unless there are exceptional circumstances.
- Draft / final reports and appendices to be sent to Julia Jones via email wherever possible.
- None of the above replaces the need for report authors to consult relevant senior officers on the contents of the draft reports during their preparation.
- **All H&WB meetings – 11am via Microsoft Teams.**

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