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Northumberland County Council

Your ref:

Our ref:

Enquiries to: Andrea Todd

Email: Andrea.Todd@northumberland.gov.uk

Tel direct: 01670 622606

Date: 26 January 2023

Dear Sir or Madam,

Your attendance is requested at a meeting of the **HEALTH & WELLBEING OVERVIEW AND SCRUTINY COMMITTEE** to be held on **TUESDAY, 7 FEBRUARY 2023 at 1.00 p.m.** in the **Council Chamber, County Hall, Morpeth, NE61 2EF.** .

Yours faithfully

Rick O'Farrell
Interim Chief Executive

To Health and Wellbeing OSC members as follows:-

K Nisbet (Vice-Chair), L Bowman, R Dodd, G Hill, C Humphrey, I Hunter, R Wilczek, V Jones (Chair), C Hardy and E Chicken



Rick O'Farrell, Interim Chief Executive
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AGENDA

PART I

It is expected that the matters included in this part of the agenda will be dealt with in public.

1. APOLOGIES FOR ABSENCE

2. MINUTES

(Pages 1
- 4)

Minutes of the meeting of the Health & Wellbeing Overview & Scrutiny Committee held on 6 December 2022, as circulated, to be confirmed as a true record and signed by the Chair.

3. DISCLOSURE OF MEMBERS' INTERESTS

Unless already entered in the Council's Register of Members' interests, members are required where a matter arises at a meeting;

a. Which **directly relates to** Disclosable Pecuniary Interest ('DPI') as set out in Appendix B, Table 1 of the Code of Conduct, to disclose the interest, not participate in any discussion or vote and not to remain in room. Where members have a DPI or if the matter concerns an executive function and is being considered by a Cabinet Member with a DPI they must notify the Monitoring Officer and arrange for somebody else to deal with the matter.

b. Which **directly relates to** the financial interest or well being of a Other Registrable Interest as set out in Appendix B, Table 2 of the Code of Conduct to disclose the interest and only speak on the matter if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain the room.

c. Which **directly relates to** their financial interest or well-being (and is not DPI) or the financial well being of a relative or close associate, to declare the interest and members may only speak on the matter if members of the public are also allowed to speak. Otherwise, the member must not take part in discussion or vote on the matter and must leave the room.

d. Which **affects** the financial well-being of the member, a relative or close associate or a body included under the Other Registrable Interests column in Table 2, to disclose the interest and apply the test set out at paragraph 9 of Appendix B before deciding whether they may remain in the meeting.

e. Where Members have or a Cabinet Member has an Other Registrable Interest or Non Registrable Interest in a matter being considered in exercise of their executive function, they must notify the Monitoring Officer and arrange for somebody else to deal with it.

NB Any member needing clarification must contact

monitoringofficer@northumberland.gov.uk. Members are referred to the Code of Conduct which contains the matters above in full. Please refer to the guidance on disclosures at the rear of this agenda letter.

- 4. FORWARD PLAN** (Pages 5 - 12)

To note the latest Forward Plan of key decisions. Any further changes to the Forward Plan will be reported at the meeting.
- 5. HEALTH AND WELLBEING BOARD** (Pages 13 - 40)

The minutes of the Health & Wellbeing Board held on 10 December 2022, 8 December 2022 and 9 January 2023 are attached for the scrutiny of any issues considered or agreed there.
- 6. REPORT OF THE DIRECTOR OF ADULT SERVICES** (Pages 41 - 86)

North Tyneside and Northumberland Safeguarding Adults Board Annual Report 2021-22

To provide an overview of the work carried out under the multi-agency arrangements for Safeguarding Adults during 2021/22.
- 7. REPORT OF THE SCRUTINY OFFICER** (Pages 87 - 94)

Health and Wellbeing OSC Work Programme

To consider the work programme/monitoring report for the Health and Wellbeing OSC for 2022/23.
- 8. URGENT BUSINESS**

To consider such other business as, in the opinion of the Chair, should, by reason of special circumstances, be considered as a matter of urgency.
- 9. DATE OF NEXT MEETING**

The date of the next meeting is scheduled for Tuesday, 7 March 2023 at 1.00 p.m.

IF YOU HAVE AN INTEREST AT THIS MEETING, PLEASE:

- Declare it and give details of its nature before the matter is discussed or as soon as it becomes apparent to you.
- Complete this sheet and pass it to the Democratic Services Officer.

Name:		Date of meeting:	
Meeting:			
Item to which your interest relates:			
Nature of Interest i.e. either disclosable pecuniary interest (as defined by Table 1 of Appendix B to the Code of Conduct, Other Registerable Interest or Non-Registerable Interest (as defined by Appendix B to Code of Conduct) (please give details):			
Are you intending to withdraw from the meeting?		Yes - <input type="checkbox"/>	No - <input type="checkbox"/>

Registering Interests

Within 28 days of becoming a member or your re-election or re-appointment to office you must register with the Monitoring Officer the interests which fall within the categories set out in **Table 1 (Disclosable Pecuniary Interests)** which are as described in "The Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012". You should also register details of your other personal interests which fall within the categories set out in **Table 2 (Other Registerable Interests)**.

"Disclosable Pecuniary Interest" means an interest of yourself, or of your partner if you are aware of your partner's interest, within the descriptions set out in Table 1 below.

"Partner" means a spouse or civil partner, or a person with whom you are living as husband or wife, or a person with whom you are living as if you are civil partners.

1. You must ensure that your register of interests is kept up-to-date and within 28 days of becoming aware of any new interest, or of any change to a registered interest, notify the Monitoring Officer.
2. A 'sensitive interest' is as an interest which, if disclosed, could lead to the councillor, or a person connected with the councillor, being subject to violence or intimidation.
3. Where you have a 'sensitive interest' you must notify the Monitoring Officer with the reasons why you believe it is a sensitive interest. If the Monitoring Officer agrees they will withhold the interest from the public register.

Non participation in case of disclosable pecuniary interest

4. Where a matter arises at a meeting which directly relates to one of your Disclosable Pecuniary Interests as set out in **Table 1**, you must disclose the interest, not participate in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest, just that you have an interest.

Dispensation may be granted in limited circumstances, to enable you to participate and vote on a matter in which you have a disclosable pecuniary interest.

5. Where you have a disclosable pecuniary interest on a matter to be considered or is being considered by you as a Cabinet member in exercise of your executive function, you must notify the Monitoring Officer of the interest and must not take any steps or further steps in the matter apart from arranging for someone else to deal with it.

Disclosure of Other Registerable Interests

6. Where a matter arises at a meeting which **directly relates** to the financial interest or wellbeing of one of your Other Registerable Interests (as set out in **Table 2**), you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest.

Disclosure of Non-Registerable Interests

7. Where a matter arises at a meeting which **directly relates** to your financial interest or well-being (and is not a Disclosable Pecuniary Interest set out in **Table 1**) or a financial interest or well-being of a relative or close associate, you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting. Otherwise you must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest.
8. Where a matter arises at a meeting which **affects** –
- a. your own financial interest or well-being;
 - b. a financial interest or well-being of a relative or close associate; or
 - c. a financial interest or wellbeing of a body included under Other Registrable Interests as set out in **Table 2** you must disclose the interest. In order to determine whether you can remain in the meeting after disclosing your interest the following test should be applied
9. Where a matter (referred to in paragraph 8 above) **affects** the financial interest or well- being:
- a. to a greater extent than it affects the financial interests of the majority of inhabitants of the ward affected by the decision and;
 - b. a reasonable member of the public knowing all the facts would believe that it would affect your view of the wider public interest

You may speak on the matter only if members of the public are also allowed to speak at the meeting. Otherwise, you must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation.

If it is a 'sensitive interest', you do not have to disclose the nature of the interest.

Where you have an Other Registerable Interest or Non-Registerable Interest on a matter to be considered or is being considered by you as a Cabinet member in exercise of your executive function, you must notify the Monitoring Officer of the interest and must not take any steps or further steps in the matter apart from arranging for someone else to deal with it.

Table 1: Disclosable Pecuniary Interests

This table sets out the explanation of Disclosable Pecuniary Interests as set out in the [Relevant Authorities \(Disclosable Pecuniary Interests\) Regulations 2012](#).

Subject	Description
Employment, office, trade, profession or vocation	Any employment, office, trade, profession or vocation carried on for profit or gain. [Any unpaid directorship.]
Sponsorship	Any payment or provision of any other financial benefit (other than from the council) made to the councillor during the previous 12-month period for expenses incurred by him/her in carrying out his/her duties as a councillor, or towards his/her election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.
Contracts	Any contract made between the councillor or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners (or a firm in which such person is a partner, or an incorporated body of which such person is a director* or a body that such person has a beneficial interest in the securities of*) and the council — (a) under which goods or services are to be provided or works are to be executed; and (b) which has not been fully discharged.
Land and Property	Any beneficial interest in land which is within the area of the council. ‘Land’ excludes an easement, servitude, interest or right in or over land which does not give the councillor or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/ civil partners (alone or jointly with another) a right to occupy or to receive income.
Licenses	Any licence (alone or jointly with others) to occupy land in the area of the council for a month or longer
Corporate tenancies	Any tenancy where (to the councillor’s knowledge)— (a) the landlord is the council; and (b) the tenant is a body that the councillor, or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/ civil partners is a partner of or a director* of or has a beneficial interest in the securities* of.
Securities	Any beneficial interest in securities* of a body

	<p>where—</p> <p>(a) that body (to the councillor’s knowledge) has a place of business or land in the area of the council; and</p> <p>(b) either—</p> <ul style="list-style-type: none"> i. the total nominal value of the securities* exceeds £25,000 or one hundredth of the total issued share capital of that body; or ii. if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which the councillor, or his/ her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners has a beneficial interest exceeds one hundredth of the total issued share capital of that class.
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* ‘director’ includes a member of the committee of management of an industrial and provident society.

* ‘securities’ means shares, debentures, debenture stock, loan stock, bonds, units of a collective investment scheme within the meaning of the Financial Services and Markets Act 2000 and other securities of any description, other than money deposited with a building society.

Table 2: Other Registrable Interests

You have a personal interest in any business of your authority where it relates to or is likely to affect:

- a) any body of which you are in general control or management and to which you are nominated or appointed by your authority
- b) any body
 - i. exercising functions of a public nature
 - ii. any body directed to charitable purposes or
 - iii. one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union)

NORTHUMBERLAND COUNTY COUNCIL

HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

At a meeting of the **Health & Wellbeing Overview and Scrutiny Committee** on Thursday, 6 December 2022 at 1.00 p.m. at County Hall, Morpeth.

PRESENT

Councillor V. Jones
(Chair, in the Chair)

MEMBERS

Dodd, R.R.
Humphrey, C.

Hill, G.
Wilczek, R.

ALSO IN ATTENDANCE

Angus, C.
Liddell, J.
Morgan, E.

Prudhoe, E.
Todd, A.

Scrutiny Officer
Senior Public Health Manager
Interim Executive Director for Public Health
and Community Services
Healthwatch Northumberland
Democratic Services Officer

1 member of the press was also in attendance

46. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors E. Chicken, C. Hardy, L. Bowman and K. Nisbet.

47. MINUTES

RESOLVED that the minutes of the meetings of the Health & Wellbeing Overview & Scrutiny Committee held on 2 November 2022, as circulated, be confirmed as a true record and signed by the Chair.

48. FORWARD PLAN

The Committee considered the Forward Plan of key decisions (a copy of the Forward Plan has been filed with the signed minutes).

RESOLVED that the report be noted.

49. HEALTH AND WELLBEING BOARD

RESOLVED that the minutes of the Health & Wellbeing Board held on 8 September 2022 and 13 October 2022 be noted.

50. REPORT OF THE INTERIM EXECUTIVE DIRECTOR OF PUBLIC HEALTH AND COMMUNITY SERVICES

Drug and Alcohol Treatment and Recovery Service for Northumberland – Permission to Tender

The purpose of the report was to outline the need to provide a drug and alcohol treatment and recovery service as part of the Council's statutory public health functions, and to seek permission to proceed with a formal tender exercise. It was noted that the report was to be considered at the Cabinet meeting of 10 January 2023.

J. Liddell, Senior Public Health Manager introduced the report (a copy of which has been filed with the signed minutes).

In response to member questions the following information was provided:

- The service had been successful in delivering safe and effective treatment for some of Northumberland's most vulnerable and marginalised residents. But people who used drugs and alcohol problematically were among those most likely to experience health and social inequality. They were also among the least likely to seek help from services.
- The service had seen fantastic results, which was evidenced by case studies, but patient needs were becoming more complex, there was higher demand for treatment services and there was a shortage of skilled staff in the sector.
- All substances had seen an increase since 2018/19. Crack cocaine and alcohol abuse were also on the increase.
- Alcohol was showing the most significant increase in recent years. Increased demand was linked to increased harmful use within communities.
- Drug and alcohol treatment was evidenced as being cost effective due to the savings created by the reduced health and social care burden and reduced criminal behaviour.
- The contract would be performance managed via formal quarterly contract meetings where the provider would be required to submit performance data, financial spend and a narrative report.
- The renewal of the contract was quite timely. This would create opportunities to update and develop service provision to ensure it could appropriately respond to new and emerging needs and demands within the local community. Work had taken place to ensure a more comprehensive service across the whole of Northumberland including the north of the county. More digital interventions, updated IT equipment and a newly funded vehicle would further enhance the service.
- Additional information could be provided to the committee on case studies to ensure members were content with the value for money aspect and could continue to monitor and scrutinise the service.

- Confirmation that all local authorities had to have a drug and alcohol treatment service.
- Local authorities had been allocated additional grant funding. The grant funding was provided on the conditions that local authorities consent to increased scrutiny and accountability via the creation of Local Combating Drugs Partnerships and that existing investment via the Public Health Grant was maintained to at least current levels.
- The cost of living crisis could potentially result in more people needing help from the treatment and recovery service. There was a financial uplift available to help those affected.
- To try and help those unwilling or unable, the drug and alcohol treatment and recovery service needed to be accessible to everyone. To try and meet the unmet need within the community there needed to be an understanding of what services were required and why some were unwilling to seek support.
- The service was part of a multi-agency response to ensure the full range of patient needs were met.
- Primary Care and GP's were well equipped to signpost those at an early stage of using drugs and alcohol problematically to light touch treatments.
- England did not have a minimum unit pricing of alcohol but the work and research being collated in Scotland about this was being closely monitored.

RESOLVED to recommend that Cabinet:

- Authorise the Interim Executive Director of Public Health and Community Services to proceed with the commissioning exercise for a value of £21,818,608 as outlined in Key Issues section below (the final paragraph).
- Request officers to bring back the outcome for Cabinet approval.
- The Health and Wellbeing Overview and Scrutiny Committee review the service within 12 months. Information to be presented should include case studies, evidence based data and random samples taken to ensure the service is delivering across the whole county.

51. REPORT OF THE SCRUTINY OFFICER

Health and Wellbeing OSC Work Programme

The Committee reviewed its work programme for the 2022/23 council year. (A copy of the work programme has been filed with the signed minutes).

Members discussed possible topics to add to the Work Programme over the next twelve months, including:

- Ambulance Service including breakdown of data by area
- Ambulance Service Waiting Times
- Strike Action across services
- Winter Pressures
- Future of Social Care
- Domestic Abuse
- Maternity
- Social Isolation and Loneliness
- Dentistry

Regarding topics for future Task and Finish Groups Members felt that addictions particularly gambling could be a good issue to do an in-depth review of.

The Scrutiny Officer advised that he would bring a scoping report to the January meeting on the proposal for the Task and Finish Group. He also advised that any other issues to be considered for the Work Programme for 2023/2024 should be forwarded to him in the first instance.

RESOLVED that the work programme and comments made be noted.

52. DATE OF NEXT MEETING

RESOLVED that the next meeting of the Health and Wellbeing Overview and Scrutiny Committee be held on Tuesday, 10 January 2023 at 1.00 p.m.

CHAIR _____

DATE _____

Forward Plan

FORTHCOMING CABINET DECISIONS FEBRUARY TO MAY 2023

DECISION	PROPOSED SCRUTINY DATE	CABINET DATE
<p>30 Year Business Plan for the Housing Revenue Account The report presents to Cabinet the 30 year Business plan for the Housing Revenue Account. (R. Wearmouth/A. Elsdon – 01670 622168)</p>	<p>CSEG OSC 13 February 2023</p>	<p>14 February 2023</p>
<p>Alternative Provision to Support Children Permanently Excluded from School The report seeks permission from Cabinet to undertake a tender process to support the provision of Alternative Education for children of statutory school age. This is a statutory service which is demand led meaning that the Council must provide full time schooling for permanently excluded pupils from the 6th school day. The request is necessary due to the approaching expiry of an existing tender and a likely change in emphasis by the Department for Education in respect of regulation which may have an impact upon levels of expenditure. (G. Renner Thompson/S. Aviston - (01670) 622281)</p>	<p>FACS OSC 2 Feb 2023</p>	<p>14 February 2023</p>
<p>Berwick Theatre Revised Outline Business Case The report is to provides an update about some important changes to the Business Case for the Berwick Theatre (New Maltings) project, including changes to the project costs, funding requirement, and value for money assessment.</p>		<p>14 February 2023</p>

<p>It subsequently seeks approval to request a further investment of £5m from the Borderlands Inclusive Growth Deal to cover rising capital costs. (G. Sanderson/ J. Rose 07500 097568)</p>		
<p>Budget 2023-24 and Medium Term Financial Plan 2023-27 The report presents the updated Budget 2023-24 and Medium Term Financial Plan 2023-27 to Cabinet following the receipt of the provisional local government settlement which is due to be announced during December 2022. The report will also include an update on the deliverability of savings. (R. Wearmouth/A. Elsdon 01670 622168)</p>	<p>Corporate Services and Economic Growth OSC 13 February 2022</p>	<p>14 February 2022 Council 22 February 2022</p>
<p>Council Response to the Independent Review of its Cultural Investment Portfolio The report summarises the findings of the independent report and seeks approval to the Council's immediate response to those findings, including the proposed budget approach to revising the Investment Portfolio. (J. Watson/J. Rose 07500 097568)</p>		<p>14 February 2023</p>
<p>Council Response to the Report of the Independent Future of Farming in Northumberland Inquiry The report summarises the findings of the independent Inquiry and seeks approval to the Council's immediate response to those findings. (G. Sanderson/ J. Rose 07500 097568)</p>		<p>14 February 2023</p>
<p>Council Tax Discretionary Discount and Council Tax Hardship Schemes 2023-24 The report proposes a Council Tax Discretionary Discount</p>	<p>CSEG OSC 13 February 2023</p>	<p>14 February 2023 Council 22 February 2023</p>

<p>Scheme and Council Tax Hardship Schemes for financial year 2023-24. (R. Wearmouth/Alison Elsdon 07796 652072)</p>		
<p>Energising Blyth: Energy Central Campus Governance Arrangements Update This report updates Cabinet and seeks approval for amendments to the officers nominated as Directors of the Energy Central Campus Company Ltd. (W. Ploszaj/R. Strettle – 07770642773)</p>	N/A	14 February 2023
<p>Northumberland Stewardship and Rural Growth Investment Programme The report summarises the Stewardship and Rural Growth Investment Programme the initial tranche of funding secured from the UK Shared Prosperity Fund, Rural Economic Prosperity Fund, and North of Tyne Investment Programme. It subsequently seeks approval to the proposed first phase of implementation. (G. Sanderson/ J. Rose 07500 097568)</p>		14 February 2023
<p>Revenues and Benefits Policies for 2023/24 The report sets out the policies that the Revenues and Benefits services operate for the administration of council tax, business rates, housing benefit and council tax support. The report is for information and approval of any updates or legislation changes that need to be made. The policies need County Council approval on 22 February 2023. (R. Wearmouth/G. Barnes 01670 624351)</p>	<p>Corporate Services and Economic Growth OSC 13 February 2022</p>	<p>14 February 2022 Council 22 February 2022</p>
<p>Director of Education Final Report</p>	FACS OSC	14 March 2023

<p>The Director of Education Annual Report presents a self-evaluation of where NCC Education are as a result of work delivered during 2021-22 and also seeks to demonstrate aspirations for the future across all areas of education and related supporting functions. (G. Renner Thompson/A. Kingham - 01670 622742)</p>	<p>2 March 2023</p>	
<p>Energising Blyth – Keel Row Shopping Centre Strategic Acquisition (Confidential report) (W.Ploszaj/ M.Turner - 07810 756551)</p>	<p>TBC</p>	<p>14 March 2023</p>
<p>Financial Performance 2022-23 - Position at the end of December 2022 The report will provide Cabinet with the revenue and capital financial performance against budget as at 31 December 2022. (B. Wearmouth/K. Harvey - 01670 624783)</p>	<p>N/A</p>	<p>14 March 2023</p>
<p>Homelessness and Rough Sleeper Strategy for Northumberland 2022 The report provides Members with the draft Homelessness and Rough Sleeper Strategy 2022-2026 for review and agreement (C. Horncastle/J. Stewart - 07771 974 112)</p>	<p>Communities and Place OSC 5 April 2023</p>	<p>14 March 2023</p>
<p>School Transport Review Outcome Options At SLT on 1st November 2022 the full range of recommendations resulting from the system wide review of home to school transport were shared. In response to this, SLT requested a further paper to provide a summary with greater detail on the range of options considered during the</p>	<p>FACS OSC 6 April 2023</p>	<p>14 March 2023</p>

<p>review on where the transport service best sits within Northumberland County Council. This report provides the options as requested for evaluation and alongside this request's approval for the specific initiative to establish NCC delivered Independent Travel Training provision using start-up funding from the Council Transformation Fund (G. Renner Thompson/N. Dorward – 07811 020 806)</p>		
<p>Service Charges in Sheltered Accommodation The report will request permission to introduce Service Charges to all tenants in 8 Sheltered Housing Schemes in line with those currently charged at Arnison Close in Allendale. The HRA is currently subsidising these tenants at a cost of approx. £200k per year. (C. Horncastle/S. Ogle – 07976851270)</p>	<p>Communities and Place OSC 5 April 2023</p>	<p>14 March 2023</p>
<p>The Link (Bridge Street Improvements) This report updates Cabinet and seeks approval of the Outline Business Case and other key decisions regarding the development and delivery of The Link project. The Link will improve the highway and public realm along Bridge Street which is one of the main vehicle and pedestrian routes into the town centre. It will improve connectivity and provide a greatly improved walking and cycling link between the town centre and the quayside. The project will support Blyth's vision to be a Connected, Vibrant and Clean Growth Town (W. Ploszaj/Lara Baker - 07919 217457)</p>		<p>14 March 2023</p>
<p>Trading Companies' Financial Performance 2022-23 - Position at the end of December 2022 The purpose of the report is to ensure that the Cabinet is informed of the current financial positions of its trading</p>	<p>Corporate Services and Economic Growth OSC 13 March 2022</p>	<p>14 March 2023</p>

<p>companies for 2022-23 (R. Wearmouth/ M. Calvert - 01670 620197) Confidential report</p>		
<p>Update of Transport Asset Management Plan Policy and Strategy To seek Cabinet approval for the updated Transport Asset Management Plan, Policy and Strategy following it's periodic review, to take account of continued developments in asset management approaches and best practice including an increasing focus on the impact of climate change and prioritisation of active travel and minor amendments to the resilient road network. (P. Riddle/D. Laux - 01670 623763)</p>	TBC	14 March 2023
<p>Leisure Programme Update To update Cabinet with progress on the Leisure programme (J. Watson/M. Donnelly 07517 553463)</p>	OSC TBC	11 April 2023
<p>Financial Performance 2022-23 – Position at the end of March 2023 (Provisional Outturn) The report will provide Cabinet with the revenue and capital financial performance against budget as at 31 March 2023 (provisional outturn) (R. Wearmouth/K. Harvey - 01670 624783)</p>	N/A	9 May 2023
<p>Outcomes of Phase 2 Consultation about Education in Berwick Partnership This report sets out the feedback received from stakeholders arising from Phase 2 of informal consultation with stakeholders in the Berwick Partnership area and other</p>	TBC	9 May 2023

relevant parties on the possible models of school organisation within both the current 3-tier system and within a 2-tier (primary/secondary) system. (G. Renner Thompson/S. Aviston - (01670) 622281)		
Leisure Programme Update To update Cabinet with progress on the Leisure programme (J. Watson/M. Donnelly 07517 553463)	TBC	12 December 2023
Leisure Programme Update To update Cabinet with progress on the Leisure programme (J. Watson/M. Donnelly 07517 553463)	TBC	9 April 2024

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NORTHUMBERLAND COUNTY COUNCIL HEALTH AND WELL-BEING BOARD

At a meeting of the **Health and Wellbeing Board** held in County Hall, Morpeth on Thursday, 10 November 2022 at 10.00 a.m.

PRESENT

Councillor P. Ezhilchelvan
(Chair, in the Chair)

BOARD MEMBERS

Binning, G.	Reiter, G.
Blair, A.	Sanderson, H.G.H.
Boyack, J.	Simpson, E.
Bradley, N.	Syers, G.
Lamb, S.	Taylor, M.
Lothian, J.	Thompson, D.
Mitcheson, R.	Travers, P.
O'Neill, G. (Substitute)	Watson, J.
Pattison, W.	

IN ATTENDANCE

L.M. Bennett	Senior Democratic Services Officer
P. Rooney	NENC ICB Northumberland

103. APOLOGIES FOR ABSENCE

Apologies for absence were received from J. Daniel, P. Mead, L. Morgan, H. Snowden, C. Wardlaw, C. Wheatley, and Councillor G. Renner-Thompson.

104. MINUTES

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on 13 October 2022, as circulated, be confirmed as a true record and signed by the Chair.

105. NORTHUMBERLAND FIRE & RESCUE SERVICE'S COLLABORATIVE APPROACH TO SAFETY AND WELLBEING

Graeme Binning, Deputy Chief Fire Officer, provided a presentation outlining the Northumberland Fire & Rescue Service's collaborative approach to safety and wellbeing. He raised the following key issues:-

- Statutory duties for Fire & Rescue Services in Fire and Rescue Framework for England 2018, including
 - targeting those individuals or households who are at greatest risk for fire in the home; those most likely to engage in arson or deliberate fire setting.....
 - identify individuals' wider vulnerabilities and exposure to 'risks beyond fire'.
 - A duty to collaborate and keeping collaboration opportunities under review and not precluding wider collaboration with other local partners, such as local authorities.....'
- Northumberland Fire & Rescue Service contributed to many elements of the Health and Wellbeing Strategy.
- General Approach to Intelligence Led. The Safe & Wellbeing Policy had been launched in July 2022. Efforts were being made to identify citizens most at risk of injury or harm. The policy had been produced in conjunction with a number of external partners. The focus was 'making every contact count'.
- A whole systems contribution. Home fire safety was still a priority along with a wider scope to look at slips, trips and falls, dementia, alcohol and smoking. An all-risk questionnaire was in place along with referral partner pathways.
- When we don't collaborate - an example was described detailing the effects of a fire death and the wider impact of that event on the local community. This may not have occurred had a number of organisations collaborated
- When we collaborate - an example was described of a case where organisations had collaborated providing an improved outcome for the person involved.
- The Fire & Rescue Service welcomed the opportunity to become a member of the Health & Wellbeing Board and to work with other organisations to give the best outcome for the residents of Northumberland.

The following responses were made to comments from Members-

- The Fire & Rescue Service had committed to its Corporate Parenting Promise which was its committed to Looked After Children and how they would fit into its priorities.
- An opportunity to work with the Harrogate NHS Trust on its Environmental Assessment Tool was welcomed.
- The collaboration with Northumberland Communities Together was much appreciated and further work going forward would be welcomed. Some officers had been identified to work on asset based community training.
- Future collaboration with CNTW was welcomed and would be discussed outside the meeting.
- It was acknowledged that there was a need to understand the needs of people who may be deaf or visually impaired. Some work had already begun in this area.

RESOLVED that the presentation and comments be noted.

106. JOINT HEALTH & WELLBEING STRATEGY THEMATIC GROUPS UPDATES

Members received verbal updates from the thematic groups as follows:-

Empowering Communities

Gill O'Neill, Deputy Director of Public Health reported as follows:-

The three priorities for this thematic group contained in the Strategy were:

- Ensure that partners, providers, practitioners and the systems they work in promote and encompass a 'more than medicine' approach.
- Provide people and communities with access to networks and activities which will support good health and resilience.
- Support people to gain knowledge, skills and confidence they need to be active partners in managing and understanding their own health and health care.

There had been significant organisational and system change since the priorities were agreed and there had still been a lot of progress on this work since the strategy was written and now there were:

- NCT and its Strategic Board
- Thriving Together and the 13 thematic networks
 - Tackling inequalities task force (operational)
- VCSE Liaison Group
- Inequalities Plan and the HWBB Steering Group
- ICS level -scoping the social prescribing offer
- Health Watch board

It had been discussed if this was about strategically creating a collaborative approach to asset based community development and doing that through our wider workforce inclusive of social prescribers, health trainers, link workers, locality coordinators etc.

It was proposed that the first steps would be:

- Chairs of the groups listed above to talk to their groups about coming together in a system workshop to scope out a gap analysis of what and how we were already working towards the priorities in the strategy and where we might wish to focus our collective attention.
- Workshop December/January to discuss and agree how to work collaboratively across existing groups and if one group could be morphed to become the Empowering People and Communities Thematic Board or if individual groups were retained but to agree to come together a few times a year to ensure cohesive practice and delivery.

- To report back to Health & Wellbeing Board in January/February pending agreement of the workshop date.

Best Start in Life

Graham Reiter, Service Director - Children's Social Care and Interim DCS, provided the following update:-

- Best quality education
- Children feeling safe and supported in all areas of life
- Support children, young people and their families to make positive lifestyle and social choices.

The Department was already looking at the range of governance arrangements in place regarding partnership work around safeguarding children and young people strategic plan, healthy families. These could be streamlined to sit under this thematic area. There were a number of activities ongoing including:-

- Wholesale review of education provision
- Continue to invest in the capital programmes to create an environment which promoted learning.
- Work with schools via school improvements to target children with free school meals who need additional support to reach their potential.
- Maximise the use of the pupil premium.
- Ensure that children and young people get the right support at the right time. First point of contact services had been looked at to try and look at and streamline these services. Try to prevent any escalation into statutory work and avoid the need for intervention.
- Family Hubs were a crucial development bringing partners together. This would include 0-19 work.
- Social work operation and the continual improvement in this area.
- Integration of children and adults Safeguarding Partnership work was being progressed.
- There was a key focus around special education needs and disabilities. There had been significant improvements in this area but remained areas for improvement.
- Emotional resilience and wellbeing of children and young people.
- Northumberland Education and Emotional Wellbeing Support Team created as part of a very innovative piece of work working alongside social work teams identifying the emotional and wellbeing support needs for vulnerable children and young people.

Whole System Approach

Alistair Blair and Rachel Mitcheson, NENC ICB, updated Members as follows:-

- This was a continuation of ongoing work. Focus on making every contact count across the health sector

- and looking with an inequalities lens identifying people from deprived communities
- looking at specific targeted interventions.
- mental health was very important within this and issues such as the cost of living would cause issues across this sector.
- The Integrated Care Board (ICB) was a very new organisation and would be looking at how to use the current System Transformation Board (STB) differently to enable more decisions to be made and link in with the statutory requirements of the ICB with regard to partnerships. A paper on governance arrangements could be submitted to a meeting of the Health & Wellbeing Board for information.

In answer to a query the following comments were made:-

- How do we demonstrate the outcomes of Making Every Contact Count? - It was possible that as a result of a single contact, a person may end up with multiple contact points. So it could, in fact, be a springboard to accessing multiple other services and it was important to ensure that there was a measurable impact on the quality of a person's life. It may be that this was harder to measure and it may be better to measure the overarching reduction in inequalities rather than reducing the number of contacts.
- There were different ways to measure and it was difficult to quantify what had been avoided. Indicators used by the Health & Wellbeing Board may need to be refreshed. The use of case studies was vital along with service user feedback. Joint performance score cards could be developed across individual services.

Wider Determinants

Gill O'Neill reported that it was hoped that there would be a more detailed update to the December meeting.

The following points were noted:-

- The priority focus was around warm homes, jobs and transport.
- The issue was similar to that for Empowering Communities regarding whether there should be one group or a number to aid a collective understanding.

RESOLVED that the updates from the thematic groups be received.

107. INEQUALITIES PLAN – COMPACT

Graham Syers reported that all member organisations had been requested to take away the essence of the Inequalities Plan and ensure that their organisations had an understanding of it and were signed up to it. Members were requested to update the Board on what stage their organisation was at. It

was suggested that organisations be requested to formally sign up at the December meeting of the Health & Wellbeing Board.

From a Primary Care perspective, it had been discussed with PCN Groups and there was a part of the Primary Care Commissioned Service which was about asking practices as part of their primary care groupings to commit to a piece of work. It had already been agreed that the primary care networks would sign up to the Compact.

Within CNTW, the Inequalities Plan fitted perfectly with what the organisation was already pulling together in its Annual Plan. It was confirmed that the Northumbria Trust was 'walking the walk' and there were already a number of inequalities conversations going on between clinicians.

RESOLVED that partner organisations be requested to formally sign up to the Inequalities Plan at the Health & Wellbeing Board meeting on 8 December 2022.

108. LIVING WITH COVID

Members received a verbal update from Gill O'Neill and an update on the Covid and flu vaccination programme from Rachel Mitcheson, NENC ICB Northumberland.

Gill O'Neill raised the following key points:-

- ONS Survey data at 4 November 2022 was showing a decline in Covid cases across England with an estimated 1:35 people testing positive.
- In Northumberland, estimated cases identified from lateral flow and PCR tests was also declining with 46.63 per 100,000 testing positive.
- The 'Hands, Face, Space' message remained the same and it was important to remain vigilant and to prioritise vaccination. In crowded spaces, masks remained an option. Now that we were moving into winter, with both Covid and flu circulating it was important to keep the airflow moving and if feeling unwell to stay at home, if possible.

Rachel Mitcheson, NENC ICB, and Alistair Blair, Northumbria Healthcare Trust updated Members on the current Covid and flu vaccination programmes and hospital situation and raised the following key points:-

- 111,000 booster jabs had been delivered in Northumberland and the uptake across all eligible cohorts was 57.3% which was above the England and North East and Cumbria averages.
- It was vital to maintain momentum, particularly with regard to the 50-64 year age group as this group appeared to be less keen to come forward. A new national campaign had been launched.
- Vaccinations were still being carried out in care homes where there had previously been outbreaks preventing the vaccination teams from entering.

- Over the last few months, the number of hospital cases with Covid had not been admitted because of Covid had decreased.
- It was important not to look at Covid in isolation but to also look at flu. Data from Australia had indicated that a high number of flu cases should be expected earlier in the season than normal, but this had not happened to date.
- It was expected that Covid cases would continue to plateau off over the next month but there was some epidemiological evidence that they may pick up again in January 2023.
- Covid was not the cause of operational pressures at the moment.

RESOLVED that the updates be received.

109. HEALTH AND WELLBEING BOARD FORWARD PLAN

Members discussed a number of items for inclusion in or removal from the Forward Plan. It was suggested that 'Living with Covid' be removed from the Forward Plan on the understanding that it could return should Covid become a concern again in the future.

RESOLVED that the Forward Plan be noted with the following additions.

- Northumbria Police Presentation
- Inequalities Plan – Compact Sign Up
- 0-19 Service Structure and Model
- Northumberland Communities Together Update to include cost of living crisis and warm hubs.
- Better Care Fund Plan
- System Pressures to include GP services and Accident & Emergency service.
- Core20Plus5

It was possible that some items may be more appropriately dealt with in informal Development Sessions in the future.

110. URGENT BUSINESS

The Chair reported that he had been made aware of the following and agreed that they be raised as items of urgent business.

The Chair reported that he was attending the next Joint OSC for the North East and North Cumbria ICS and North & Central ICPS. He was happy to raise any issues at the meeting which Members may give to him.

111. DATE OF NEXT MEETING

The next meeting will be held on Thursday, 8 December 2022, at 10.00 a.m. in County Hall, Morpeth.

Dr. Graham Syers, Vice Chair, took the Chair for the following item.

112. DRAFT ICB INTEGRATED CARE STRATEGY

Members received a presentation from Peter Rooney, Director of Strategy and Planning NENC ICB Northumberland. A copy of the presentation is filed with the signed minutes.

Mr. Rooney made the following key points:-

- The Integrated Care Strategy (ICP) was a statutory committee involving partner organisations and stakeholders and formed part of the arrangements for the Integrated Care System (ICS). It was required to develop an Integrated Care Strategy by December 2022. ICBs and local authorities were required to have regard to the strategy when making decisions and commissioning or delivering services. The strategy must use the best evidence.
- The structure, and overarching visions, goals and enablers were outlined. The vision was to create better health and wellbeing for all through longer healthier life expectancy, excellent health care services and fairer health outcomes. This could be achieved through the workforce, working together to strengthen communities, using improved technology, equipment and facilities, and making best use of resources and protecting the environment
- Assets and Case for Change – health outcomes were some of the worst in England with inequalities correlating with socio-economic deprivation. Life expectancy and healthy life expectancy for both women and men were lower than the England average.
- Draft Key Commitments were:-
 - Reduce the gap in healthy life expectancy
 - Reduce smoking prevalence from 13% of over 18s in 2020 to 5% of below in 2030.
 - Reduce inequality in life expectancy between the most deprived and least deprived deciles within ICP by 25% by 2030.
 - Reduce suicide rate to below England average in 2019/21 by 2030.
- The Core20plus5 approach was designed to support ICS to drive targeted action in healthcare inequalities improvement. Aimed at the most deprived 20% and at the following five key clinical areas; maternity, severe mental illness, chronic respiratory disease, early cancer diagnosis, hypertension case finding

- It was aimed to achieve a 'Good' or 'Outstanding' CQC rating and improve sustainability of the most challenged parts of the system. To enable personalised care and improve support to unpaid carers. The development of provider collaboration would be supported. To ensure parity of esteem between mental health, learning disability, autism services and physical health. Integration to be improved and services valued equally across sectors.
- A lot of engagement work was taking place and any feedback on the draft strategy was welcomed.
- It was hoped that the local areas would continue with the fantastic work they were already doing.
- The draft would be considered again by the ICP on 15 December 2022.

The following comments and responses were made:-

- It was possible that when targets were set for such a large geographical area such as Northumberland, some measures may disadvantage some other areas and it was important to avoid this. Improvements in all metrics, everywhere was desirable but obviously, the biggest improvement should be where it was most needed. Some difficult decisions would need to be made. Some measures had a minimum baseline which should not be reduced such as healthy life expectancy.
- Ambulance service – there were many examples of patients not getting the service that they should across a number of NHS standards and commitments. It had been decided to look at more long-term population health measures and deal with the challenge of rebalancing longer term ambitions and immediate service delivery.
- Issues relating to children needed to be addressed and was currently underdeveloped in the strategy. Any appropriate evidence would be welcomed. Most comments relating to children were in relation to their emotional and mental health.
- If society was fairer and there was less deprivation, then some of the health related issues would solve themselves. Three issues to look at were how to engage with partnerships, how we advocate and that there were things that could be done for example regarding people from deprived areas tended to present late with their symptoms.
- The strategy may mean different things for different communities, particularly in a very diverse county such as Northumberland. There needed to be focus where it was most needed. It may be possible to describe what it may mean for each local authority area.

Members were welcome to pass any further comments on to Gill O'Neil or Graham Syers, in order that a formal response could be submitted.

RESOLVED that the presentation be received.

CHAIR _____

DATE _____

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NORTHUMBERLAND COUNTY COUNCIL

HEALTH AND WELL-BEING BOARD

At a meeting of the **Health and Wellbeing Board** held in County Hall, Morpeth on Thursday, 8 December 2022 at 10.00 a.m.

PRESENT

Councillor P. Ezhilchelvan
(Chair, in the Chair)

BOARD MEMBERS

Bailey, M (substitute)	Pattison, W.
Binning, G.	Reiter, G.
Blair, A.	Sanderson, H.G.H.
Curry, A (substitute)	Syers, G.
Lamb, S.	Taylor, M.
Lothian, J.	Thompson, D.
Mitcheson, R.	Travers, P.
Morgan, L	Watson, J.
Murfin, R.	Wardlaw, C.

IN ATTENDANCE

L.M. Bennett	Senior Democratic Services Officer
K. Lynch	Senior Public Health Manager
S. Eaton	Northumbria Healthcare Foundation NHS Trust
P. Lee	Public Health Consultant
E. Richardson	Senior Manager Specialist Services

113. APOLOGIES FOR ABSENCE

Apologies for absence were received from N. Bradley, J. Daniel, P. Mead, H. Snowden, C. Wheatley, and Councillors L. Simpson and G. Renner-Thompson.

114. MINUTES

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on 10 November 2022, as circulated, be confirmed as a true record and signed by the Chair.

115. DEVELOPING NORTHUMBERLAND'S COLLABORATIVE APPROACH TO TOBACCO CONTROL

Members received a report and presentation from Kerry Lynch, Senior Public Health Manager. The report outlined action towards a collaborative approach to tackling tobacco use in Northumberland, including an update on vaping, and asking the Health & Wellbeing Board to endorse national recommendations, influence national action and provide direction for our local approach

Kerry Lynch raised the following key issues:-

- Smoking prevalence was declining nationally and significant progress had been made in the North East. In Northumberland overall adult smoking rates had dropped from 18.8% in 2012 to 11.8%.
- Smoking was closely linked with health inequalities and further work was needed to reduce smoking rates particularly amongst the most vulnerable and disadvantaged residents and communities.
- Areas of significant concern were
 - **Pregnancy** – smoking in pregnancy was five times more common in the most deprived groups compared to the least.
 - **Mental Health** – Amongst those diagnosed with serious mental health illness, smoking rates were estimated to be around 37.1% in Northumberland
 - **Illicit tobacco** – 77% of those buying illicit tobacco were from the three lowest social and economic groups in society, disproportionately affecting the poorest communities.
- The current National Tobacco Plan expired at the end of 2022, and it was hoped that the Health & Wellbeing Board would be able to influence Government policy to draw up another national statement on smoking.
- It was hoped that partner organisations would come together as a collaborative partnership and focus on areas that were not currently being worked on and sign up to relevant declarations. Declarations included the NHS Smokefree Pledge and Local Government Declaration on Tobacco Control. It was also hoped that the national picture could be influenced by writing to the Secretary of State.

The following comments were made:-

- There was a disconnect between e-cigarettes (vaping) which were either a route to coming off inhaled tobacco or a risk modification. There was no access to e-cigarettes on smoking cessation courses. The use of e-cigarettes for smoking cessation should be encouraged. It was acknowledged that switching to an e-cigarette carried a fraction of the risk of inhaled tobacco. The County Council's Community Stop Smoking Service had received a grant from the ICS to pilot vaping amongst people with serious mental illness. This work was just commencing in Wansbeck and West PCNs.
- No specific work was planned in schools. The evidence was that if the adult world was changed then this would, in turn, influence children and

young people. The percentage of young people smoking or vaping was now very low.

- Northumberland Fire & Rescue Service was aware not only of the home safety risks of smoking but also other risks relating to alcohol, dementia and deprivation.
- Trading Standards had successfully prosecuted businesses selling illicit tobacco and vapes. It was vital to ensure that e-cigarettes were compliant if smokers were to be encouraged to switch to their use.
- CNTW was working with people with serious mental health problems looking at their use of vapes that they were supplied with and noting the different quality.

RESOLVED

- (1) that Members' comments be noted.
- (2) that the Chair of the Health & Wellbeing Board write to the Secretary of State for Health and Social Care to urge government to publish a new Tobacco Control Plan which includes recommendations made in the APPG report (2021) and the independent review of tobacco policy (Khan Review 2022).
- (3) that Northumberland County Council becomes a signatory to the 2022 Local Government Declaration on Tobacco Control attached as Appendix 2 to the report.

116. THE SAFE HAVEN/ALTERNATIVES TO CRISIS NORTHUMBERLAND PROJECT

Members received a presentation from Pam Travers, Group Director North Locality CNTW.

Pam Travers raised the following points:-

- £300,000 had been identified to develop a Safe Haven/Alternatives to Crisis proposal in Northumberland. A small group had been put together to work on the proposal.
- The location was identified after looking at population level and deprivation. Suitable accommodation had been located in Ashington.
- Safe Haven would be run by a third sector provider.
- The Safe Haven would provide a welcoming and non-clinical environment to support people experiencing psychological distress. They would offer a safe place with support out of hours over evenings and weekends.
- It was aimed to get more partners involved and that anyone could get access to the support they needed.
- Trained staff would be present and promoting recovery, emotional and social support in a non medicalised environment.
- Now that a suitable building had been identified, alterations were under way prior to opening.

The following comments were made:-

- Members welcomed the Safe Haven initiative and particularly referred to its out of hours opening.
- It was acknowledged that there would be ongoing revenue costs and these were still under discussion.
- There would also be a virtual option which would be beneficial to provide some coverage over the large county. There would not be a catchment area.
- It was hoped to expand the Safe Haven service to other areas of Northumberland. There were already Safe Havens in Newcastle and North Tyneside.
- The Ashington site should be opened early in the next financial year.

The Chair thanked Pam Travers for her presentation.

RESOLVED that the presentation be received.

117. NORTHUMBRIA HEALTHCARE FOUNDATION TRUST HEADLINE PERFORMANCE DETAILS AND WINTER PLANS

Members received a report on headline performance details and winter plans from Alistair Blair and Simon Eaton of Northumbria Healthcare Foundation Trust.

Alistair Blair provided the following update:-

- Detailed figures of the Trust's performance for October 2022 were provided in the presentation including
- Ambulance handover delays – 114 cases of over one hour
- A&E attendances – 90% seen and discharged/admitted within the four hour window. The national target was 90%, however, this was the best performance in the country.
- Wait for scans and diagnostics – 96.8% waiting less than six weeks.
- Referrals within 18 weeks – 82.2% - some specialities such as Urology had massive volume and pressures and this skewed the figures. There were a variety of reasons why a small number of patients were waiting over one year.
- Cancer – 95% of suspected cases were seen within two weeks and diagnostics within 28 days. Again, there were many different reasons why treatment may be delayed.
- A&E attendances were at an all time high and this reflected pressures within the system. The national standard was 95% and Northumbria was the highest performing Trust nationally at 90.2%
- Nationally for diagnostics, Northumbria was in the top 10 with 95.2% performance.
- Nationally for referrals, Northumbria was the highest performing Trust at 82.5%.

- Although there were still some issues, Northumbria was performing very well in comparison with its peers. Performance was monitored on a weekly basis and residents were getting a much better deal than other areas.

Simon Eaton updated Members on the Winter Plan 2022/23 as follows:-

- The overall numbers of patients in the system were higher than just before Covid and there had been no dip in attendances during summer 2022. This was leading to the workforce being very overstretched.
- The plan considered all aspects of the overall system and included bed requirements, critical care capacity, elective recovery, community services, external partners, and staffing and recruitment (health & wellbeing of staff). Responsiveness and agility were key.
- Winter plans were very well rehearsed across the system and the Trust was working to address those issues.
- Covid and other winter illnesses such as flu and novovirus along with prevention and control; impact on flow; reinforcing handwashing.
- The primary aim was to continue to deliver high quality care and maintain patient safety. This included ambulance waiting times which were a concern nationally at present, overcrowding, discharge and minimisation of risk.
- Staff Wellbeing Portal – This included support to staff whilst in work but also generally.
- External Partners – There was close working with other partner organisations such as the North East Ambulance Service, PCNs and Primary Care

The following comments were raised:-

- There were a variety of reasons why a cancer patient may still be waiting for treatment outside the target timescale. This could often be due to an informed decision by the patient such as they wish to go on holiday before commencing treatment or taking time to look at all the treatment options available to them. It was not always a delay in the system.
- Regarding the comparisons with other Health Trusts in the country, the Trusts in the top 10 for various issues was fairly stable. On average NHS performance was decreasing and not performing as well as it was three years ago.
- From a Primary Care point of view, Northumberland was performing very well.
- The System Transformation Board (STB) had regular updates on the performance of the ambulance service, primary care etc. The Health & Wellbeing Board could seek assurance from the STB on performance in these services.

The Chair thanked Alistair Blair and Simon Eaton for their presentations.

RESOLVED that the presentations be received.

118. NORTHUMBERLAND COMMUNITIES TOGETHER – COST OF LIVING CRISIS

Members received a presentation from Emma Richardson, Senior Manager Specialist Services, updating them on the work of Northumberland Communities Together, its collaborative and corporate touchpoints with VCSE colleagues, and an overview of the action plan responding to the current costs of living pressures.

Emma Richardson raised the following points:-

- Refresh – There was a high level of partnership and collaboration with a number of different organisations and bodies. The opportunity for a lot of this work had increased over the last few days and was culminating in the production of the Inequalities Plan.
- Core Support – Northumberland Communities Together (NCT) aimed to provide the most appropriate and effective support to residents. Support included grants from the Household Support Fund, Welfare Assistance, hardship, fuel grants and energy efficiency advice. It was emphasised that a lot of delivery of services was through partner organisations.
- In the Community – A lot of organisations were involved with community hubs and these would tie in well with the Safe Havens. Listening to users was very important. Pop up programmes and take up campaigns were known to be important especially in areas where take up of a particular benefit payment such as pension credit may be low. This awareness raising was, again, being undertaken in collaboration with VCSE organisations. Teaching and learning opportunities were also available within the flagship Cramlington Hub. Some young people with additional needs had now found apprenticeship positions and employment as a result.
- Corporate Touchpoints with VCSE - Thriving Together was part of the Inequalities Plan commitment. VCSE Support Contract facilitated the touchpoints with the community sector and had been awarded to Northumbrian Citizens Advice. Cross sector working was important along with building relations and collaboration.
- Why Thriving Together matters – Decisions could be made within resources and avoiding duplication. Looking for new ways of working and a readiness to apply for and mobilise funding
- VCS Liaison Group – The group met bi-monthly with a co-led agenda and attendees from the County Council and Thriving Together with best fit VCSE and officer representation as required.
- Cost of Living, Poverty and Hardship - This formed part of the Inequalities Plan and recognised the need to prevent widening of inequalities during the current cost of living pressures.
 - Nominal allocations from Public Health reserves – proposals will be agreed over the 18 month course of the action plan.
 - Exploring additional funding from the Integrated Care Board to join up the approaches across the system.
 - Effective targeted hardship support and applied business intelligence
- Areas of particular attention to the Public Health funding allocation
 - Food - proposed £130,000 – work with food providers to ensure continued provision of quality food support over next few months.

120+ Warm Spaces with hot free or affordable meal in community venues. Expansion of community fridges, larders and shops.

- Fuel – proposed £230,000 – cost of living support hub and information leaflets. Targeted to residents with chronic conditions adversely affected by cold homes, home visits and prioritisation of households for energy efficiency and support intervention.
- Children and Young People – proposed £200,000 – addressing child poverty through school setting and working with education colleagues to find best approaches to support
- Access to advice and information and building resilience – proposed £240,000 – cost of living hub website containing reliable up to date information and support, warm spaces and places mapped, citizens advice to expand core offers and targeted leaflet, digital and trusted partner information sharing.

The following comments were made:

- Northumberland Communities Together had originally been created at the start of the Covid pandemic to offer support to vulnerable residents.
- It would be useful if there was a session to help all key partners on the Board fully understand what each other were there for and to have a wider peripheral vision to see how all of the services joined up.

The Chair thanked Emma Richardson for the presentation.

RESOLVED that the presentation be received.

119. INTEGRATED CARE BOARD UPDATE ON PLACE-BASED WORKING IN NORTHUMBERLAND

Members received a verbal update from Rachel Mitcheson, Director of Place and Integrated Services – Northumberland.

Rachel Mitcheson made the following comments:-

- The Integrated Care Board (ICB) was now six months old.
- There were two partnership working elements
- Integrated Care Partnership (ICP) – this was the statutory element of the ICB and had brought all 13 'Places' together. It met biannually and was responsible for ensuring that the ICB was moving in the right direction in a strategic way.
- Meetings would be held in the north and there had been discussions about it being the local group for partnership working.
- The System Transformation Board (STB) was the Place based board and, in the past, had been the consultative board but it was now moving towards becoming an ICB committee. Terms of reference and membership were being looked at. The committee would operate as a shadow committee prior to becoming operational in April 2023.

RESOLVED that the verbal report be received.

120. JOINT HEALTH & WELLBEING STRATEGY THEMATIC GROUPS

Members received a verbal progress report from the Wider Determinants Thematic Group from Rob Murfin, Interim Executive Director of Planning & Local Services.

Rob Murfin raised the following issues:-

- The wider determinants of health involved looking at the spatial patterns of inequality; where people had poorer health; where there were different elements of different layers of disadvantage.
- How health inequality played out in different places was the single most statistically clear spatial pattern of inequality. It happened in particular places and to particular groups of people.
- The issues around the wider determinants of health had been first identified in the late nineteenth century but, sadly, were still issues today.
- Weighting of issues – what importance was put on issues. For example, properly designed houses could lead to fewer trips and falls and therefore less demand on hospital services.
- Initial immediate actions - tackle fuel poverty, support for people to live independently in the right housing, make sure that people with health issues rooted in employment have them normalised compared to the general population and local transport policy with proper flexible options in all areas particularly in rural areas.
- It was important to put the right weight on all of these issues.
- The debate needed to become mainstream in the same way that climate change had become.

The following comments were made:-

- It was acknowledged that the issues were not new. The type of housing being built in Northumberland was high end and expensive and did not address the issues. It was commented that 60% of Local Authorities did not have any standards for adaptability in housing e.g. doorways wide enough for wheelchairs or level access. Going forward it was important to ensure that whenever a new strategy was being devised it must be considered through the inequalities lens.
- There was a risk of making the issue overly complicated. Place based issues were social multi variant issues and the same answer to the same problem may not be the same in different places.
- There was a risk of extending what the ICB could do as the NHS needed to concentrate on healthcare inequalities. There were things that the ICB could do around the wider determinants of health within the Trust's anchor organisations and own workforce but there was a need to avoid potential duplication of activity. Representatives on the ICB Board included the Director of Public Health, Director of Adult Social Care, Director of Children's Services etc and so they should be able to adequately represent the wider determinants when those issues arose. There was

also a significant public health input to the ICB and developing its policies and strategies.

- Spatial planning could be the greatest legacy that could be left for the future.

RESOLVED that the verbal update be received.

121. HEALTH AND WELLBEING BOARD FORWARD PLAN

RESOLVED that the Forward Plan be noted.

122. URGENT BUSINESS

The Chair announced that this meeting was the last with Liz Morgan as Director of Public Health. She had been with Northumberland County Council for six years which included the Covid pandemic during which time she had provided a tremendous service. The Chair noted that Liz had been extremely supportive to him when he took over the role Chair of the Health & Wellbeing Board. The Chair thanked Liz for all of her work and service and presented her with a bouquet of flowers on behalf of the Health & Wellbeing Board.

The Chair announced that Pam Travers from CNTW was retiring and that this was also her last meeting. The Chair presented Pam with a bouquet of flowers on behalf of the Health & Wellbeing Board.

123. DATE OF NEXT MEETING

The next meeting will be held on Thursday, 12 January 2023, at 10.00 am in County Hall, Morpeth.

CHAIR _____

DATE _____

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NORTHUMBERLAND COUNTY COUNCIL

HEALTH AND WELL-BEING BOARD

At a meeting of the **Health and Wellbeing Board** held in County Hall, Morpeth on Thursday, 12 January 2023 at 10.00 a.m.

PRESENT

Councillor P. Ezhilchelvan
(Chair, in the Chair)

BOARD MEMBERS

Binning, G.	Pattison, W.
Blair, A.	Reiter, G.
Boyack, J.	Sanderson, H.G.H.
Bradley, N.	Simpson, L.
Ice-ton, A. (substitute)	Syers, G.
McCartney, S.	Snowdon, H.
Mead, P.	Taylor, M.
Mitcheson, R.	Watson, J.
Nugent, D. (substitute)	Wardlaw, C.
O'Neill, G. (substitute)	

IN ATTENDANCE

L.M. Bennett	Senior Democratic Services Officer
A. Johnson	North East & North Cumbria Integrated Care Board
K Wright	Senior Manager – Safeguarding Adults

124. APOLOGIES FOR ABSENCE

Apologies for absence were received from M. Hall, S. Lamb, L. Morgan, and Councillor G. Renner-Thompson and D. Thompson.

125. MINUTES

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on 8 December 2022, as circulated, be confirmed as a true record and signed by the Chair.

126. CHILD DEATH OVERVIEW PANEL ANNUAL REPORT (MARCH 2021-APRIL 2022)

Members received the Child Death Overview Panel (CDOP) Annual Report and a presentation from Alison Johnson, Designated Nurse Safeguarding Children, North East & North Cumbria Integrated Care Board.

Alison Johnson raised the following key points:-

- The role of the Panel included
 - review the death of every child normally resident in the area regardless of where death occurred. The report on all children whose deaths had been reviewed in 2021/22 regardless of the year in which they died.
 - There was a statutory duty to scrutinise each case and challenge the agencies involved to enhance learning and improve service delivery and patient experience.
 - Determining the contributory and modifiable factors and make recommendations to all relevant organisations.
- The total number of death notifications for Northumberland in 2021/22 was 19 in comparison to 16 in 2020/21 with 10 being reviewed. Circumstances such as police procedures may delay the review of a death. In six cases, modifiable factors were identified.
- Modifiable factors identified included
 - Parental smoking, missed immunisations, delays in diagnosis, maternal obesity during pregnancy, unsafe sleeping arrangements, and failure to recognise vulnerability in young people.
- The Designated Nurse Safeguarding Children would be informed of any themes and modifiable factors relating to the review of the death of a Northumberland child in order to share these with appropriate organisations.

The following comments were made:-

- There appeared to be an increase in male deaths, however, it was difficult to identify any trend with such small numbers and only over a two year period.
- There was an increasing trend to include the deaths of very premature children who would not have survived as well as still births at term. It was important to consider delineating between the two, whilst it did not diminish the tragedy for families of the first.
- It was noted that the governance of the CDOP annual report formerly lay with the Safeguarding Partnership and now lay with the Health & Wellbeing Board. This was important to note in relation to the modifiable factors that these needed to be explicitly taken on by the Health & Wellbeing Board.
- The reviews undertaken by the CDOP were looked at as isolated events whereas there was a need to consider whether there were clusters in particular communities and modifiable factors such as smoking. This could be taken into family hubs.
- Health Visitors did a comprehensive assessment commencing in the ante natal period and a home environment assessment was built into this working with parents about sleep habits and risk factors. Action plans were built into the assessment process.
- The CDOP report had been shared with the Tobacco Partnership.

- The Registrar service was based within Family Hubs in Northumberland and holistic, wraparound service could be offered for bereaved families.
- Child immunisation rates in Northumberland had always been good and above the national average.
- Parents were informed that their child's case was being reviewed but not about any modifiable factors which were identified.
- It was important that all Members should take this report back to their organisations to ensure that they were working to the best of their ability regarding children and young people.

RESOLVED that the report and presentation be received.

**127. NORTHUMBERLAND CHILDREN AND ADULTS SAFEGUARDING PARTNERSHIP (NCASAP) ANNUAL REPORT SEPTEMBER 2021 – AUGUST 2022
SAFEGUARDING CHILDREN IN NORTHUMBERLAND**

Graham Reiter, Service Director Children's Social Care and Interim DCS, reported that the Children and Adult Safeguarding Partnerships were to be integrated into one Partnership from April 2023. It was felt that the Partnerships could be integrated to enhance learning, streamlining and working more efficiently.

Members received a report setting out Northumberland's multi-agency safeguarding arrangements for children and young people. The purpose of the report was to ensure transparency for children, families and practitioners about the activity agencies have undertaken and how effective these arrangements had been in practice. The report was presented by Paula Mead, NCASP Independent Safeguarding Scrutiny and Assurance Chair.

Paula Mead raised the following key issues:-

- The conclusion of the report was that Northumberland was working effectively and the Partnership was an effective Safeguarding Partnership. There was a great deal of goodwill amongst partners to be open and transparent to ensure that children and young people's welfare was at the heart of what was done.
- Improvements over the period included work around the voice of the child, particularly for vulnerable children.
- There were a number of priorities which would be reviewed over the next few months. These included:
 - The impact of Covid-19
 - Mental Health, suicide, self-harm, social media impact/bullying
 - Neglect
 - Safeguarding children under one year old including non-accidental head injuries and co-sleeping.
 - Impact of domestic violence on children including child to parent violence and abuse.

- Harmful sexual behaviour.
- Local Children Safeguarding Practice Reviews had replaced Serious Case Reviews although the purpose was the same. The process had changed as these were rapid reviews. Reviews held over the last year included child suicide, neglect and domestic homicide.
- It was believed that the Northumberland Partnership had worked well and met its statutory duties and delivered safe and effective services to safeguard children. There was also evidence of improvements over the last year.

The following comments were made:-

- Staff visiting homes in a professional capacity were trained to identify potential issue and to know how to refer the problem on to the appropriate organisation.
- Northumbria Police had been invited to comment on the report and it was noted that it had a dedicated Safeguarding Department to support the Safeguarding Boards, young children and vulnerable adults. Safeguarding 'was everybody's business', and all police officers were trained to recognise vulnerabilities and safeguarding concerns.
- It was important to note that it was a strength of the Partnership that every partner organisation was open to challenge

RESOLVED that the contents of the report be noted.

128. NORTH TYNESIDE AND NORTHUMBERLAND SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2021-22

Members received an overview of the work carried out under the multi-agency arrangements for safeguarding adults during 2021/22. The report was presented by Karen Wright, Senior Manager, Safeguarding Adults.

Karen Wright raised the following key points:-

- Northumberland had experienced a 38% increase in safeguarding concerns and a 6% rise in safeguarding enquiries in 2021/22. The main location of abuse had been within the home but there had also been an increase in reports relating to nursing and care homes.
- There had been surges in activity relating to Covid including self-neglect, isolation, domestic violence and mental health issues.
- There had been a focus on understanding the impact of the pandemic on local safeguarding activity enabling a response to changing safeguarding needs, identifying lessons learnt and informing future planning and priorities.
- The MASH (Multi-Agency Safeguarding Hub) had been extremely effective in providing a multi-agency response in Northumberland and enable quick action in responding to safeguarding concerns.

- Key strategic priorities outlined in the report would be revised with the integration of the Children and Adults' Boards, however, there would still be some focus on Children or Adults only themes.
- Much of the work done in Northumberland had been recognised as good practice nationally.
- In the previous Annual Report, the increase in domestic abuse had been of significant concern. The increase had continued this year but at a lower rate. This was a concern for both the Children and Adult Boards and it was expected to continue under the joint arrangements.
- Regarding criminal exploitation, there was a delivery plan to increase community awareness.
- It was always a priority to make safeguarding personal. Adults at risk were asked what they wanted to happen and achieving those outcomes. It was hoped to involve adults at risk more in the working of the Board going forward.
- There had been no safeguarding adult reviews in the last year under the criteria but two learning reviews had been commenced. A recent joint review with the Children's Board had resulted in significant learning.
- In addition to the integration with the Children's Safeguarding Board, it had also been decided to separate from the joint arrangements with North Tyneside and to operate with a more place-based focus.

The following comments were made:-

- It was confirmed that there was voluntary sector representation in the wider partnership. The membership of all the sub groups was being reviewed as part of the new structure to ensure that bodies were represented on the groups most relevant to them.
- There was a safeguarding adults training programme and lots of guidance documents regarding self-neglect. An animation had been recently produced aimed at the public and volunteers. These were available on the Safeguarding Adults website.
- The wider governance was being looked at to streamline and maximise the work as there were so many different governance oversight arrangements. It was aimed to keep developing and evolving, to avoid unnecessary duplication and be more effective.

RESOLVED that the contents of the report be noted.

129. BETTER CARE FUND AND THE ADULT SOCIAL CARE DISCHARGE FUND

Members received a report seeking endorsement of plans for the use of funding received through the Better Care Fund (BCF), including £2.6m of additional funding intended to support discharge from hospital during the winter months. The report was presented by Neil Bradley, Director of Adult Services and Rachel Mitcheson, Director of Place and Integrated Services – Northumberland.

Neil Bradley explained that the guidance for the submission of the plan for Better Care Fund had not been published until late July with a requirement to submit the plan by 26 September 2022. It had not been possible to seek approval by the Health & Wellbeing Board. Details of further funding, Adult Social Care Discharge Fund, had been published in November 2022. As it had not been possible to seek approval by the Health & Wellbeing Board before submitting plans, the Board was now being asked for ratification.

The BCF funding was recurrent funding whereas the Discharge Fund had to be spent within the financial year. From the Local Authority point of view much of the BCF funding went into domiciliary care services. Funding had also been put into the hospital discharge team which had been able to grow substantially. Appendix 1 of the report outlined expenditure in the BCF plan for 2022/23 and was entrenched in core services. Funding was split into three areas:-

- Core funding via the ICB
- The improved BCF which came direct to the County Council, although there was a requirement to consult with the ICB as to how this funding was used.
- ICB's own part of the BCF which was predominantly allocated to community services

Regarding the Adult Social Care Discharge Fund, time had been limited to make plans to use this funding effectively. Capacity of the workforce was currently the biggest problem within social care along with the very short timescale available to use the funding. Schemes had been identified which it was hoped would be able to make use of the funding over the next three months. The following had been identified:-

- Bringing forward the Living Wage pay award to carers working in domiciliary care and residential and nursing care. It was hoped that this would stem the flow of workers out of this sector.
- More flexible solutions for domiciliary care support which would bring together different groups of carers and residents to offer a more flexible service. Live in carers may be possible where there were transport difficulties.
- Equipment including specialist beds could be provided to help get people out of hospital, thereby freeing up beds.
- Some beds in care homes had been block booked along with some out of area dementia beds.
- Premium payments to care homes offering rapid discharge
- Short term support service – extend into overnight care for patients on discharge from hospital. There would be no new recruitment, but overtime would be offered to existing staff.

The following comments were made:-

- Northumberland Communities Together was the main interface with the voluntary sector in relation to the hospital discharge schemes and in

mainstream community provision. There was an existing problem with the provision of care with a number of packages of care which could not be met.

- Healthwatch welcomed the proposals and addressed issues which people had come to it about. Communication with patients, families and the community sector remained a big issue.
- Work was being done around virtual wards. It was aimed to get people home from hospital and into their own environments and was a clinical model.
- The impact of the wage increase was uncertain, but it was a route taken in many other areas across the country. Regarding the bulk buying of beds, there was an argument to favour bulk buying beds for intermediate care. The ICB may be asked whether the intermediate bed provision was right to deal with the scale of the problem.

RESOLVED that

- (1) the main contents of the Better Care Fund Plan for 2022/23 as set out in Section 1 of the background to the report be endorsed.
- (2) The contents of the additional plan submitted to the Department of Health and Social Care for the use of the Adult Social Care Discharge Fund during the current winter as set out in Section 2 of the background of this report be endorsed.

130. HEALTH AND WELLBEING BOARD – FORWARD PLAN

Members noted details of forthcoming agenda items at future meetings; the latest version is enclosed.

Councillor H.G.H. Sanderson requested that a report be submitted to the March meeting outlining the situation in Northumberland regarding GP appointments, waiting lists, ambulance response time etc.

131. DATE OF NEXT MEETING

The next meeting will be held on Thursday, 9 March 2023, at 10.00 am in County Hall, Morpeth.

CHAIR _____

DATE _____

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Northumberland County Council

COMMITTEE HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

DATE: 7 February 2023

TITLE OF REPORT NORTH TYNESIDE AND NORTHUMBERLAND
SAFEGUARDING ADULTS BOARD ANNUAL REPORT
2021-22

Report of Director of Adult Social Services

Cabinet Member: Councillor Wendy Pattison, Adult Wellbeing

Purpose of report

To provide an overview of the work carried out under the multi-agency arrangements for Safeguarding Adults during 2021/22.

Recommendations

Members to note the content of the North Tyneside and Northumberland Safeguarding Adults Annual report 2021/22.

Link to Corporate Plan

This report is relevant to the 'Living and Learning' priority included in the Northumberland County Council Corporate Plan 2021-24, and the commitment to supporting the most vulnerable in our society and helping people to live healthy lives.

Key issues

1. The attached Annual report describes the work of the North Tyneside and Northumberland Safeguarding Adults Board (SAB) during 2021/22, and provides information about operational safeguarding activity during the year. The report describes a range of improvements in safeguarding arrangements and details the work carried out during 2021-22 across all partner organisations, working together to improve safeguarding arrangements for vulnerable people.
2. Following on from the significant increases in safeguarding activity reported last year, in 2020/21 Northumberland continued to experience increases in safeguarding demand. Northumberland data shows a 38% increase in safeguarding concerns, and a 6% rise in safeguarding enquiries, compared to last year. The main location of abuse has again been within people's own homes, though there has been an increase in safeguarding reports related to Nursing or Care homes. In terms of local trends there has been a continued rise in domestic abuse, physical

abuse, and self-neglect.

3. A key focus for the SAB this year has been understanding the impact of the pandemic on local safeguarding activity. This has enabled the SAB to respond to changing safeguarding needs, identify lessons learnt, and has directly informed future planning and priorities. An example of this can be seen in some specific targeted work undertaken in response to the noted increase in self-neglect, as an impact of the pandemic. It is evident that some people have delayed requesting help or support and this means that their presenting needs are now at a higher level or are more acute. It is also clear that the pandemic has created additional layers of complexity for safeguarding practice, particularly in relation mental health, social isolation, and substance misuse. MASH (Multi-Agency Safeguarding Hub) arrangements have continued to provide effective multi-agency responses and holistic assessments of risk at the first point of contact, and a review of the MASH has recently been undertaken.
4. The report sets out the SAB's work in response to the 5 key strategic priorities in the SAB Annual Strategic Plan, which have been informed by local safeguarding data; experiences and feedback; partner self-assessments; and regional priorities. It also outlines some key highlights of the SAB's work during this year, which has included a focus upon a range of themes and awareness campaigns.
5. There have been no Safeguarding Adult Reviews (SARs) undertaken in Northumberland during this reporting year, however a number of new case referrals have been considered, and two learning reviews have commenced. Learning from previously completed local SARs and Learning Reviews have continued to be monitored, alongside findings from regional and national reviews.
6. This will be the final Annual report of the North Tyneside and Northumberland Safeguarding Adults Board. Following an independent review of the Board arrangements and subsequent consultation, a decision was reached that the time was right to separate the joint Board and develop place-based SABs in each Local Authority area. This will allow each area to align arrangements with other strategic boards, and to fully understand the holistic view of safeguarding and safety in their communities. In Northumberland, the Safeguarding Adult and Children's Boards became an integrated Partnership from April 2022. This builds upon examples of successful collaboration on some key areas of work, and further develops the 'Think family' model and approach to safeguarding across the life course.

Background

The County Council has strategic responsibility for overseeing multi-agency arrangements in its area for safeguarding adults at risk. This includes making enquiries and arrangements for investigating and where necessary acting on referrals alleging that 'adults at risk' are being abused or neglected. It also includes wider arrangements for ensuring that the safety, independence, and dignity of 'adults at risk' are protected.

In accordance with the Care Act the SAB has a statutory duty to publish an Annual Report detailing how effective their work has been in safeguarding and promoting the welfare of adults at risk. The SAB also has a statutory responsibility to develop and publish a strategic plan setting out how they will meet their objectives and how their member and partner agencies will contribute.

The attached Annual Report describes the strategic activity undertaken by the North Tyneside and Northumberland Safeguarding Adults Board, and the most significant specific issues dealt with during 2021/22 under the Safeguarding Adults policy and procedures. It also provides statistical information about operational safeguarding activity.

Implications

Policy	This Annual Report meets the SAB statutory requirements set out in the Care Act 2014.
Finance and value for money	No direct implications
Legal	The Annual Report 2021-22 evidences how the Safeguarding Adults Board (SAB) arrangements meet the statutory duty to prepare and publish an Annual Report demonstrating how partners safeguard 'adults at risk'. In accordance with the statutory functions set out in the Care Act (2014).
Procurement	No direct implications
Human Resources	Safeguarding investigations can in some circumstances lead to disciplinary action against staff. Safeguarding training is mandatory for all staff working in Adult Social Care.
Property	No direct implications
Equalities (Impact Assessment attached) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	This is an information report so does not require an EIA. Referral statistics suggest that the gender and ethnic balance of safeguarding referrals broadly match those of the care management caseload.
Risk Assessment	Management of risks in individual cases is a core element of safeguarding. Management of risks in commissioned services is a core role of contracting work. There are various multi-agency risk assessment groups in place including Multi Agency Risk Assessment Conferences (MARAC) and Multi-Agency Public Protection Arrangements (MAPPA).
Crime Disorder &	Northumbria Police are members of the Safeguarding Adults Board, and there is close joint working to ensure that prompt and appropriate action is taken where it is suspected that a crime may have been committed.

Customer Consideration	There is a continuing need to keep under review the balance between maximising the control 'adults at risk' have over their support arrangements and ensuring that they are adequately protected from the risk of abuse or exploitation – although greater individual control can often also in itself be a means of reducing people's vulnerability.
Carbon reduction	No direct implications
Health and Wellbeing	Promoting the safety, welfare, health and wellbeing is a primary function of the SAB and its work.
Wards	All

Background papers:

North Tyneside and Northumberland Safeguarding Adults Board Annual Report 2021-22

Report sign off.

Authors must ensure that officers and members have agreed the content of the report:

	initials
Monitoring Officer/Legal	SB
Executive Director of Finance & S151 Officer	JW
Relevant Executive Director	NB
Chief Executive	RW
Portfolio Holder(s)	WP

Author and Contact Details

On behalf of Paula Mead - NCASP Independent Safeguarding Scrutiny and Assurance Chair
 Karen Wright – Senior Manager, Safeguarding Adults
Karen.wright01@northumberland.gov.uk
 07779983138



North Tyneside and Northumberland Safeguarding Adults Annual Report 2021-2022



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Foreword

by the North Tyneside & Northumberland Safeguarding Adults Board Independent Chair

This will be the final annual report of the North Tyneside and Northumberland Safeguarding Adults Board. It details the work carried out during 2021-22 across all partner organisations working together to improve safeguarding arrangements for vulnerable people.

Following consultation with partners, it was agreed that adopting a place-based model for safeguarding adults at risk from April 2022, would present both areas with opportunities for focussed, joined-up working of local partnerships. This report therefore clarifies our vision for the future.

The Safeguarding Adults Board has a core duty in accordance with the Care Act (2014) to publish an annual report detailing how effective work has been. Over the past year, the impact of Covid-19 on our community has continued to be significant. The evidence in this report demonstrates that partners have continued, despite increasing demand, to deliver safe services and have managed the associated risks. The partnership has continued its focus on the impact from the pandemic and the consequences of social isolation on safeguarding.

It is within this context that the partnership continued to focus on driving quality of frontline practice around protection, prevention, exploitation and safeguarding adults at risk. Independent challenge and scrutiny of data, audit and intelligence, including an ongoing focus on Making Safeguarding Personal, is analysed in this report, identifying the achievements but also the challenges.

I want to extend my gratitude to our partners who have provided the information collated within this report. The service pressures experienced by agencies, and particularly front-line workers, are not underestimated. I would like to express my appreciation and sincere thanks for the

commitment and innovation all partners have shown over this last year.



Paula Mead, Independent Chair

'As the Northumberland County Council Portfolio Member responsible for Safeguarding, I believe that looking after the welfare of children and vulnerable adults is absolutely vital.

As a Council we need to ensure everyone receives the best outcomes and are provided with safe and effective care. We need to ensure that our residents are supported and are provided with appropriate support and empowerment.'

Wendy Pattinson - County Councillor, Lead member for Adult Well-being, Northumberland County Council

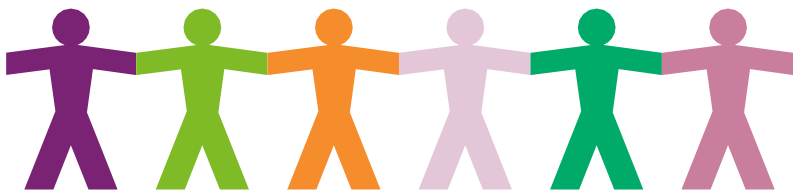
'As the Lead Member for Adult Social Care in North Tyneside I am delighted to contribute to the work of the Safeguarding Adults Board. There can be nothing more important than ensuring that people with care and support needs receive appropriate, safe and effective care services. By working together robustly with our partners, we are ensuring that people are achieving their best outcomes'.

Anthony McMullen - Lead Member for Adult Social Care, North Tyneside Council

1. About the Board

The North Tyneside and Northumberland Safeguarding Adults Board (SAB) is a statutory and multi-agency partnership that leads the strategic development of safeguarding adults work across both areas.

"Our vision is to promote the individual's human rights, their capacity for independence, ensuring each person is treated with dignity and respect and able to enjoy a sustained quality of life and improved wellbeing. That at all times people are afforded protection from abuse, neglect, discrimination, or poor treatment and that their carers whether paid or unpaid, are safe".



In addition, we adhere to the Care Act principles which underpin all adult safeguarding work:

Empowerment

Prevention

Proportionality

Protection

Partnership

Accountability

The **purpose** of the SAB is to help safeguard people with care and support needs. Its main **objective** is to improve local safeguarding arrangements to ensure partners act to help and protect adults experiencing, or at risk of neglect and abuse.

As specified in the Care Act, the SAB includes three core members: the Local Authority, Clinical Commissioning Group, and the Police. However, our membership includes a wide range of partner agencies that actively contribute to the work of the Board.

The SAB has **three core duties**, in accordance with the Care Act (2014):



Develop and publish a strategic plan setting out how they will meet their objectives and how their member and partner agencies will contribute.



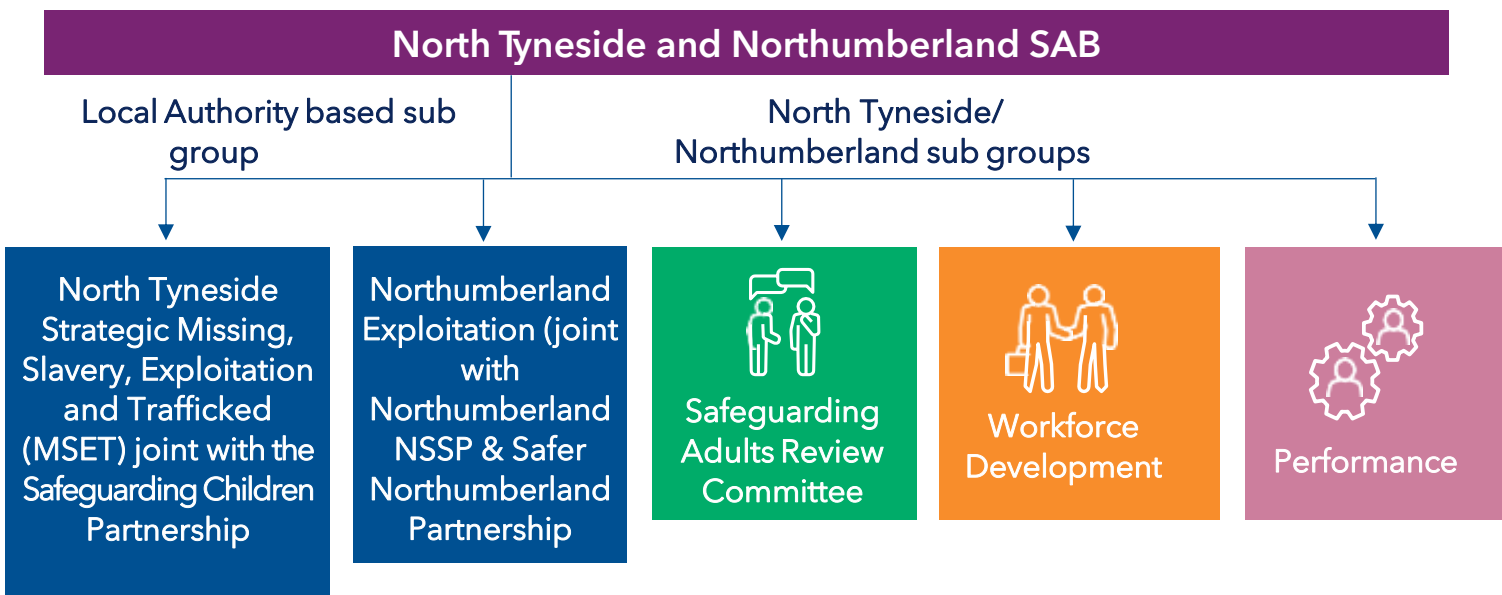
Publish an annual report detailing how effective their work has been.



Commission safeguarding adults reviews (SARs) for any cases which meet the criteria for these.

SAB Structure

The SAB is supported by a number of sub-groups that contribute to the work of the Board. Three of the sub-groups are partnerships between Northumberland and North Tyneside and have representation from both areas. Currently there is a separate Northumberland Exploitation sub-group which is a joint arrangement with the Safeguarding Children and Community Safety Partnerships.



2. What the Board has achieved at a glance



3. What does our data tell us?

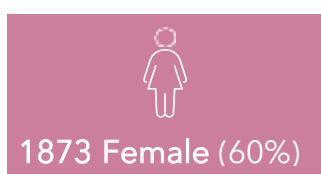
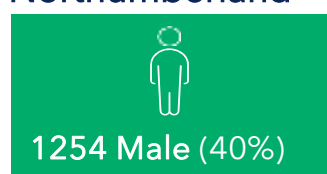
Throughout 2021-22 the SAB Performance subgroup have continued to monitor and analyse key trends and themes across partner agencies. This enables the SAB to understand any changes in demand, the impact of these changes, and the assurances required from partner agencies to ensure adults with care and support needs are safeguarded across the Partnership.

The role and work of the multi-agency Performance subgroup remains crucial to understanding changing demands and trends across the Partnership, and to informing future priorities. Following on from the significant increases in safeguarding activity reported last year, in 2020/21 North Tyneside and Northumberland continued to experience increases in safeguarding demand. North Tyneside has seen an 13% increase in safeguarding concerns being reported, and a 20% increase in Section 42 safeguarding enquiries undertaken. Similarly, Northumberland data shows a 38% increase in safeguarding concerns, and a 6% rise in enquiries, compared to last year.

The main location of abuse for both areas has again been within people’s own homes, though there has been an increase in safeguarding reports related to Nursing or Care homes. In terms of local trends both areas have continued to see rises in domestic abuse, physical abuse and self-neglect. North Tyneside have also seen noted increases in ‘neglect and acts of omission’.

During this year, some key Association of Directors of Adult Social Services/Local Government Association (ADASS/LGA) frameworks relating to safeguarding concerns and section 42 enquiries have been published.

Northumberland



Age

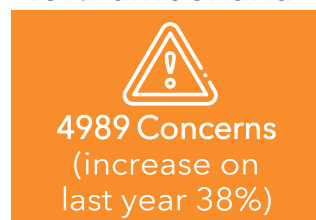
	18-64	65-74	75-84	85-94	95+
Northumberland	1418 (45%)	371 (12%)	593 (19%)	637 (20%)	108 (3%)
North Tyneside	905 (40%)	294 (13%)	477 (21%)	478 (21%)	102 (5%)

The purpose of these guidance documents was to support partner agencies to make appropriate safeguarding referrals; promote a consistent understanding of what constitutes a safeguarding concern; and ensure a consistent response is provided by Adult Social Care.

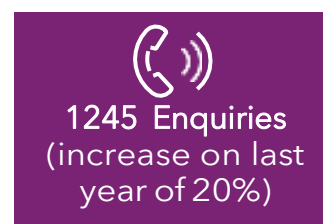
The SAB promoted awareness of these frameworks across partner agencies, and sought assurances about local guidelines defining and referring concerns against the core messages in the frameworks. The guidance has also prompted local analysis of safeguarding systems and recording.

Concerns/Enquiries:

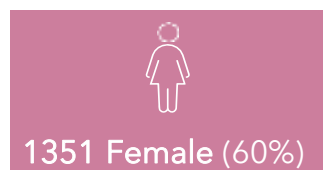
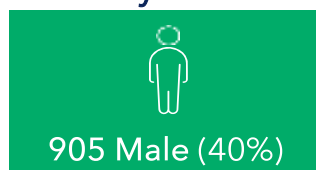
Northumberland



North Tyneside

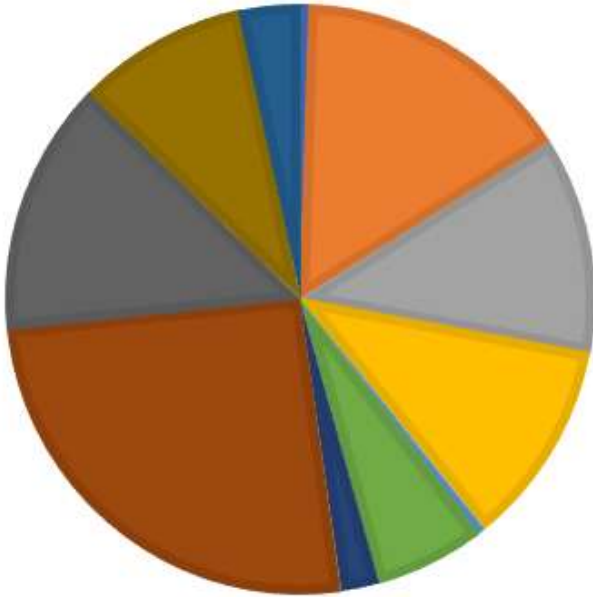


North Tyneside



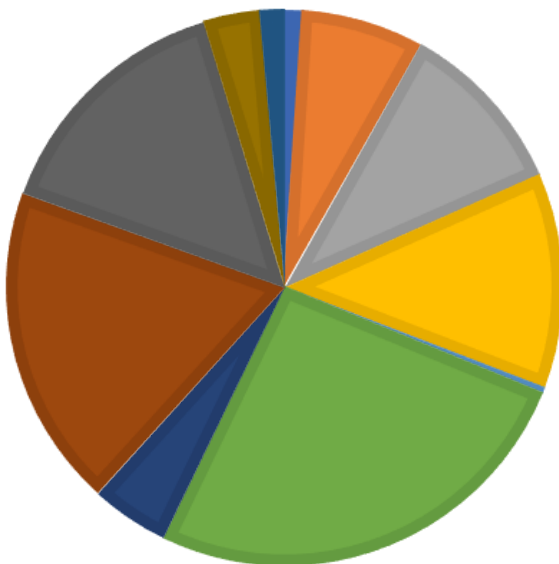
Types of Abuse:

Northumberland Percentage of total enquiries 2021/22



- Discriminatory 0.5%,
(50.0% change)
- Domestic 15.6%,
(36.1% change)
- Emotional/Psychological 11.9%
(-7.4% change)
- Financial 11.3%,
(18.3% change)
- Modern Slavery 0.5%,
(50.0% change)
- Neglect 6.0%
(-35.6% change)
- Organisational 2.1%
(-27.8% change)
- Physical 25.6%,
(-3.6% change)
- Self Neglect 14.0%,
(76% change)
- Sexual 9.4%,
(20.4% change)
- Sexual Exploitation 3.3%,
(-34.4% change)

North Tyneside Percentage of total enquiries 2021/22



- Discriminatory 1.03%,
(6.25% change)
- Domestic 7.08%,
(-8.66% change)
- Emotional/Psychological 10.26%
(-9.18% change)
- Financial 12.46%,
(-17.40% change)
- Modern Slavery 0.36%,
(-25.00% change)
- Neglect 25.96%
(55.10% change)
- Organisational 4.52%
(146.67% change)
- Physical 18.81%,
(17.11% change)
- Self Neglect 14.78%,
(39.88% change)
- Sexual 3.29%,
(3.84% change)
- Sexual Exploitation 1.40%,
(-54.00% change)

Location of abuse:

Northumberland



69% of concluded enquiries were about abuse in people's own home



11% of concluded enquiries were about abuse in Nursing or Care homes

North Tyneside



52% of concluded enquiries were about abuse in people's own home



30% of concluded enquiries were about abuse in Nursing or Care homes

Risk identified/ceased at individuals request:

Northumberland



91% of enquiries had risk identified and action taken



3% of enquiries ceased at individual's request

North Tyneside



78% of enquiries had risk identified and action taken



4% of enquiries ceased at individual's request

Source of risk:

Northumberland



85% of enquiries involved a source of risk known to the individual (97% including service providers)

North Tyneside



58% of enquiries involved a source of risk known to the individual (88% including service providers)



Covid Insights

During this reporting year, the Performance subgroup have continued to benchmark and analyse National and local Covid Insights reports, which have assisted in understanding the impact of the pandemic on local safeguarding activity. This has enabled the SAB to respond to changing safeguarding needs, identify lessons learnt, and has directly informed future planning and priorities. An example of this can be seen in some specific targeted work undertaken in response to the noted increase in self-neglect, as an impact of the pandemic.

Regional Self-Neglect Campaign

Locally and regionally Covid-19 and the associated restrictions have been seen to impact upon the increasing number and complexity of safeguarding concerns reported involving self-neglect. Reduced face-to-face contact with people (and access to their homes), as well as an increased reluctance for people to access support and services, are thought to be contributory factors to this. Increases in the volume of safeguarding concerns, has also been accompanied by a high number of referrals relating to self-neglect considered by Safeguarding Adults Review (SAR) subgroups across the region.

Research and local experience highlight that many aspects of self-neglect work are particularly challenging for front-line workers as a result of: divergent agency thresholds for triggering concern and involvement; competing value perspectives; care management workflow arrangements; and unclear legal frameworks. The same research highlights those managers and practitioners have emphasised the need for increased knowledge about self-neglect and the skills for effective intervention. Each local SAB area has guidance in place on identifying and responding to self-neglect, but recent local SARs have highlighted that this guidance is not always used by staff and in some cases, there is a lack of awareness of it.



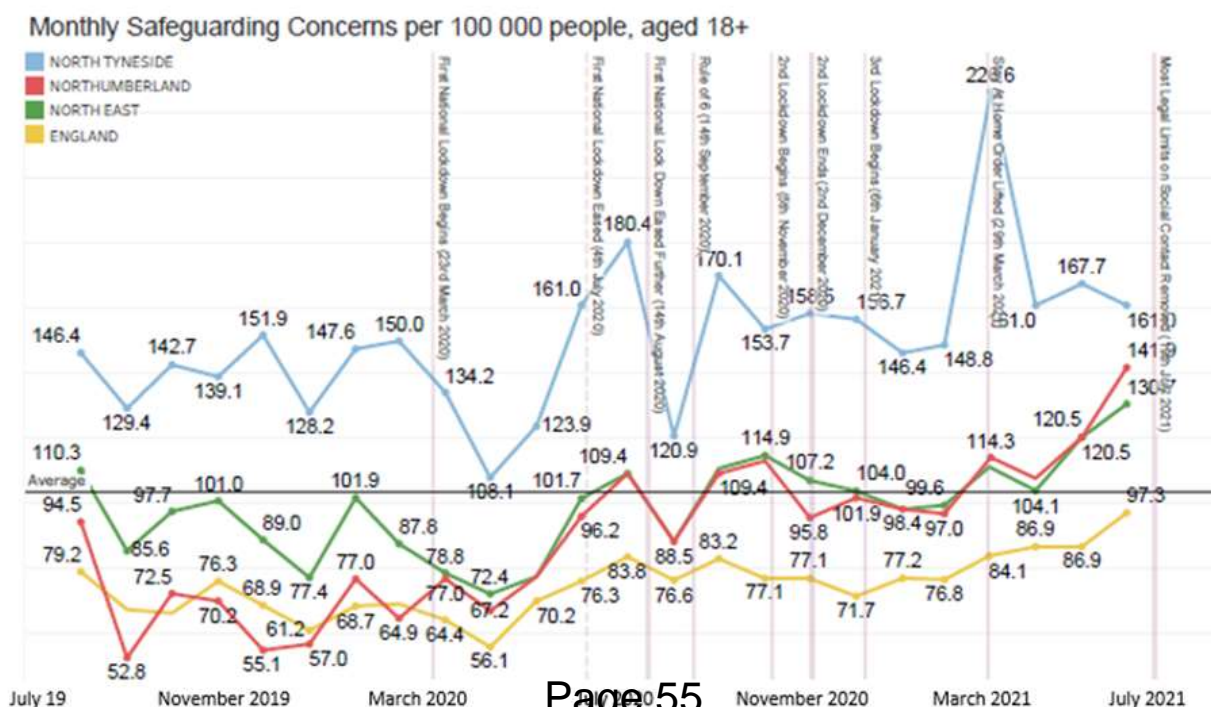
In response, members of the North East Safeguarding Adults Leads network have developed a series of seven 7-minute briefings aimed at professionals outlining all aspects of self-neglect, which will form part of toolkit to support and enhance local self-neglect guidance. These 7-minute guides have been launched and promoted across the SAB during this year. To support a regional campaign to raise awareness of self-neglect amongst the general public, a self-neglect animation has also been produced which will be launched next year at a regional awareness raising event.



In December 2021, a highlight report was presented to the SAB providing a summary of the key messages gained from the National Covid Insight Project. Generally local safeguarding concerns have continued to show a long-term upward trend, tending to decrease during periods of Covid restrictions followed by a sharp increase once those restrictions were lifted. This activity is in line with national trends, demonstrated in the **graph below**. Of note, benchmarking data has highlighted that Northumberland reports a lower level of Section 42 Safeguarding enquiries, compared to other Local Authorities in the North-East and also nationally. Both the regional and national data show variation between local authorities on a scale which is unlikely to reflect differences in the actual level of risks of abuse or neglect, and more probably indicates that the statutory framework is being interpreted in differing ways.

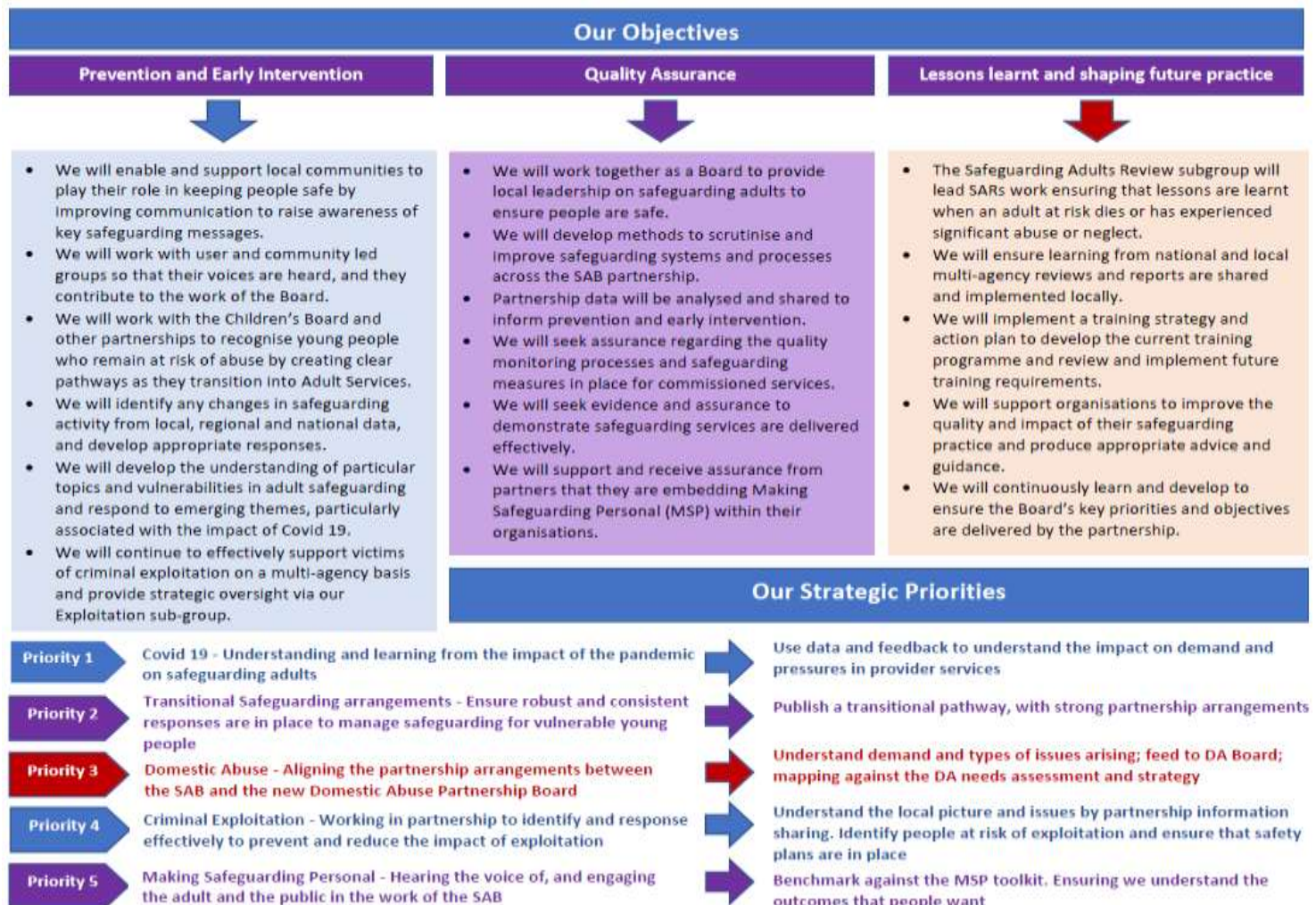
The relatively low rate at which concerns raised have become recorded as Section 42 enquiries in Northumberland is not new, and continues the pattern before the pandemic. Further analysis of this data has been undertaken, and a report has been provided to the SAB detailing the findings. No issues related to safeguarding decisions and practice have been highlighted in quarterly audits, however there is a need to review current recording systems and processes, to ensure that the reasons for differences from other areas are fully understood, and that recording is in line with best practice. Moving forward, Northumberland will continue to undertake quarterly audits of safeguarding concerns and conversion rates, monitored by the Performance subgroup, and will implement any required recording and system changes. The impact of any changes will be examined in future performance data reports.

COVID-19 Adult Safeguarding Insight Project



4. Strategic Priorities 2021-22

The SAB has produced a 3-year strategic plan for 2021-24, which has been informed by local Safeguarding data and themes, partner assessments and assurances, and local and national learning. This is underpinned by a work plan which is updated annually.



The full Strategic plan can be found on the Safeguarding Adults pages at;

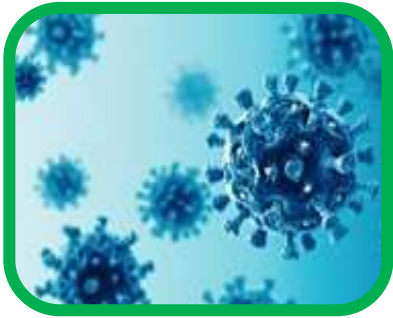
Northumberland Safeguarding Adults -

<https://www.northumberland.gov.uk/Care/Support/Safeguarding.aspx>

North Tyneside Safeguarding Adults -

<https://my.northtyneside.gov.uk/category/1033/safeguarding-adults>

The SAB agreed to focus on 5 key strategic priorities:



Covid-19

Understanding the learning from the impact of the global pandemic on Safeguarding Adults



Transitional Safeguarding Arrangements

Ensure robust and consistent responses are in place to manage safeguarding for vulnerable young people. This continues to be a local and national theme.



Domestic Abuse

Aligning the partnership arrangements between the SAB and the new Domestic Abuse Partnership Boards



Criminal Exploitation

Including County Lines, Sexual Exploitation, Cuckooing, Hate Crime and Criminal Gangs. This continues to be a local and national theme



Making Safeguarding Personal

Focus upon hearing the voice of, and engaging the adult and the public in the work of the SAB.

Priority 1 Impact of Covid-19

All services have been impacted by the Covid-19 pandemic and safeguarding adults is no exception. During the last two years it is evident that some people have delayed requesting help or support and this means that their presenting needs are now at a higher level or are more acute. We have seen significant increases in self-neglect in both areas, impacted by the effects of social isolation, inability to access routine appointments, and reduction in face-to-face contact from professionals.

Services have also seen an increase in domestic abuse and issues in provider services. Provider services have experienced recruitment difficulties which alongside the need for staff to take time off for covid related illness and self-isolation has led to critical staffing levels. Consequently, there has been an over-reliance on agency staff in the context of increased demand, as hospitals were pressured to achieve high levels of discharges.

As evidenced in the performance data already outlined, both areas have experienced surges in safeguarding demand and activity directly linked to Covid restrictions, in the context of a general upward trend in safeguarding concerns. It is also evident that the pandemic has created additional layers of complexity for safeguarding practice, particularly in relation to mental health and substance misuse issues.

These additional challenges to services have required both areas to develop innovative and responsive services to manage the increase in volume and complexity, and ensure adults with care and support needs are appropriately safeguarded. In Northumberland, staffing has been increased, and Police notifications are dealt with twice daily to manage the volume of activity. Further work with

partners in relation to access to the MASH system has led to better recording of research, therefore saving valuable time. Concerns relating to organisational safeguarding have increased, and weekly meetings are being held to proactively work with care homes. In North Tyneside the increase in activity has continued to be managed across Social Work Teams with the support of the Safeguarding Adults team, chairing complex, and organisational safeguarding meetings. North Tyneside have noted the need to ensure they are capturing the individual's voice and demonstrating that their safeguarding experience is person-centred, and intend to use Healthwatch to support this work.

MASH (Multi-Agency Safeguarding Hub) arrangements in both areas have continued to provide effective multi-agency responses and holistic assessments of risk at the first point of contact. In Northumberland, a review of the MASH has recently been undertaken. A number of areas for improvement were identified for both Adult and Children's Services, in particular focusing on the use of strategy discussions within the MASH. This is now in place within the MASH timescales, and prevents any delay in safeguarding actions and responses. Partner agencies have been returning into the MASH throughout 2021-22, though Police, Adult Safeguarding, Children's Services and CNTW have sustained a continued presence. Referrals into the MASH continue to increase and there has been a noted change in complexity since Covid restrictions were lifted. In North Tyneside it is a similar picture with an increase in referrals and in the number of cases with co-morbidity issues including mental health and substance abuse. Adult Social Care remained office based during Covid and the majority of the MASH discussions took place with partners via teams. Since the restrictions were lifted, partners have returned to the office.



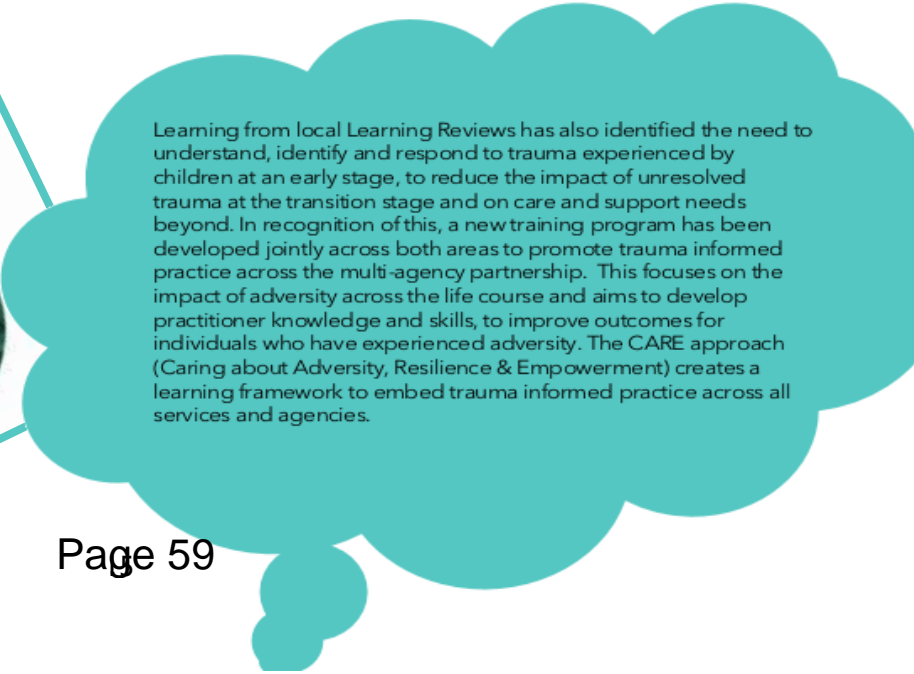
Priority 2 Transitional Safeguarding arrangements

Ensure robust and consistent responses are in place to manage safeguarding for vulnerable young people.

Transitional Safeguarding continues to be a priority for the Board who recognise that harm is likely to continue post 18, and that victims are targeted due to their vulnerability irrespective of age. Learning from national reviews, and also some local Learning Reviews in Northumberland, have highlighted the importance of early transitional planning to avoid young adults facing a 'cliff edge' and often significant harms, at the point of transition from children to adult services and agencies.

Last year we reported the SAB valuable input from Steve Baguley (National Working Group network) who presented the key principles of transitional safeguarding to the SAB, including national examples of good practice.

This presentation was instrumental in driving forward this work in both areas at a strategic and practice level. This year saw the national publication of 'Bridging the Gap', which explored the role of social work with adults in Transitional Safeguarding, drawing on good practice, research and knowledge from other areas. The key messages from this guidance have been presented to the SAB who considered the implications in the context of local needs, challenges and good practice. and oversight of Strategic leadership and oversight of Transitional Safeguarding activity continues to be a key priority for the SAB, which includes a focus upon local multi-agency safeguarding systems across services for children's and adults.



Learning from local Learning Reviews has also identified the need to understand, identify and respond to trauma experienced by children at an early stage, to reduce the impact of unresolved trauma at the transition stage and on care and support needs beyond. In recognition of this, a new training program has been developed jointly across both areas to promote trauma informed practice across the multi-agency partnership. This focuses on the impact of adversity across the life course and aims to develop practitioner knowledge and skills, to improve outcomes for individuals who have experienced adversity. The CARE approach (Caring about Adversity, Resilience & Empowerment) creates a learning framework to embed trauma informed practice across all services and agencies.

North Tyneside:

Within North Tyneside work has been ongoing looking at improving transitions from children to adults' services. This work has included a review prompted by the identification of a gap in transition planning for children and young people who do not meet criteria for the Whole Life Disability Service. Both children and adult services agreed that improvements are required for all young people moving into adulthood and adult care services, as such a transition improvement review has been established. The purpose of the review is to ensure that the experience of young people and their families in transition from children to adult services is positive and seamless, and that service delivery is value for money and compliant with legislation and guidance. Several areas for improvement were identified Following the review, a Transition Advisory Group (TAG) was developed. The purpose of the TAG is to provide assurance that a co-ordinated and integrated approach is in place across children and adult services for transition planning for children and young people as they move into adulthood. The group brings together professionals with responsibility for commissioning / procuring, delivering services and care planning for young people who require statutory service in adulthood. The TAG is in early stages of development and will be reviewed in November 2022.

Alongside the work of the TAG, a Transitional Safeguarding Pathway is in development with plans to establish a multiagency panel for complex and high-risk cases which do not have traditional care and support needs. Children's and adult services have shared training opportunities throughout the year undertaking Caring about Adversity, Resilience & Empowerment training (CARE), CPVA Training, and communications and a 7-minute guide have been shared regarding the 'Think Family' Approach.



Northumberland:

In Northumberland there has been continued progress and learning in relation to transitions, building on the Transitions policy and panels introduced last year. This operational framework provides early opportunities to identify the most appropriate pathway for a young person, facilitate joint working, ensure appropriate referrals and signposting take place in a timely manner, and reduce safeguarding risks.

The Transitional Safeguarding Protocol also introduced last year, has been recently reviewed, and work continues to ensure this is embedded across all teams. Collaborative approaches and joint working initiatives between the Northumberland Adolescent Service and Adult Social Care have continued to develop, which has been evidenced in some improved outcomes for individual young people. This work has been recognised and showcased at the National Leaving Care Benchmarking forum.

Shared culture, vision, common language and understanding of roles and responsibilities	Prevention and person centred approach focusing on positive outcomes	Professional curiosity, MSP, family approach, strengths based, ACES and trauma informed	Clear understanding and application of MCA for people 16+ and positive risk taking
Exploring non engagement and repeating patterns	Understanding person's history - impact of trauma and adverse experiences	Legal literacy to ensure all legal options and remedies explored	Effective and collaborative and multi-disciplinary team around the person
Timely and appropriate information sharing - referrals clearly stating what requested	Multi-agency training and learning from serious cases	Collaborative and multi-agency needs and risk assessment and planning	Understanding communication and language of the young person

Building upon existing joint training opportunities relating to exploitation, adversity awareness, child to parent violence and abuse, and mental capacity, this year Transitional Safeguarding workshops have been introduced for children's and adult staff across all agencies. These workshops explore both the local and national learning context, the respective roles and responsibilities of children's and adults' practitioners, and a model of good practice for transitions.

To support and evidence the importance of this work, a local audit has been undertaken of safeguarding referrals for individuals aged 18-25. Research and learning from reviews have indicated that unresolved trauma can increase risks later in adulthood, and not responding appropriately in early adulthood can mean young people experience more difficulties and increased risks later in life.

This was supported by the audit outcomes which found that a high proportion of individuals aged 18-24, who had been subject to a Section 42 enquiry had previous children services involvement. Further exploration of a sample of these referrals, identified the importance of co-working and considering trauma in both children and adult assessments, and also the challenges associated with consent, and different information systems.

The findings from this audit have directly informed the development of the transitions workshops to promote greater understanding and working arrangements across Children's and Adults workforces. Moving forward, there will be a focus upon promoting these workshops across all agencies, and continuing to embed the Transitional Safeguarding protocol locally.



Priority 3 Domestic Abuse

Domestic Abuse Partnership Boards

In the Spring of 2021 both Northumberland and North Tyneside reviewed their partnership arrangements for domestic abuse and established new strategic Domestic Abuse Partnership Boards, chaired by the Service Director for Children's Social Care in Northumberland and the Director for Public Health in North Tyneside.

The Boards are responsible for supporting their Local Authority in meeting its duties under the new Domestic Abuse Act 2021 and ensuring victims of domestic abuse have access to adequate and appropriate support to improve outcomes for victim/survivors, including their children, through a strategic approach to identifying and addressing gaps in support.

Following a refresh of the DA needs assessment in both areas the DA Boards published their Domestic Abuse (DA) Strategies 2021-2024 informing the recommissioning of domestic abuse services in both areas from 1 April 2022, to ensure support is available when needed for victims, survivors, their children and those causing harm who are acknowledging the need to change their behaviour.

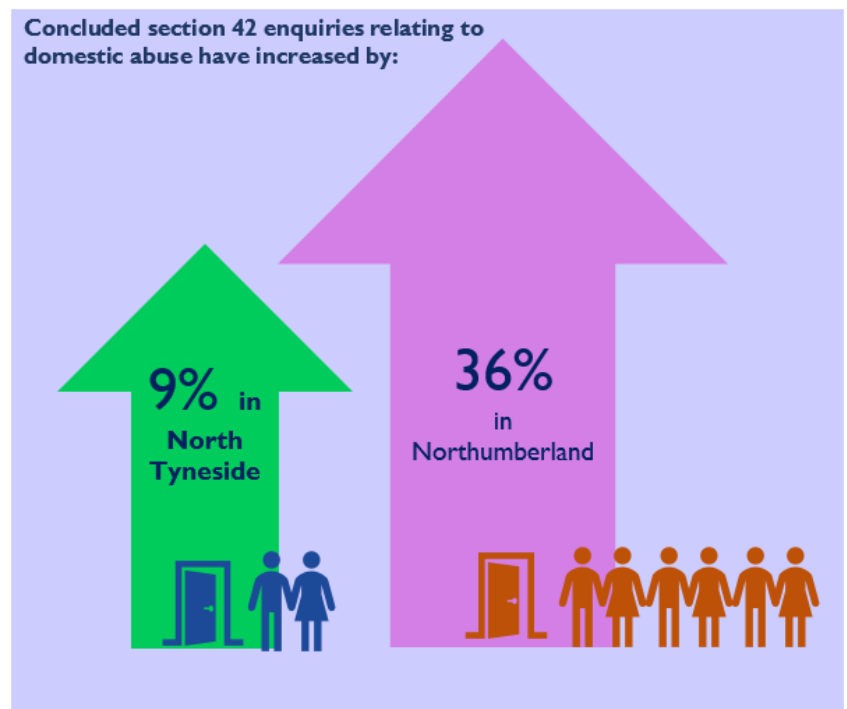
Impact of Covid 19

As reflected in the Performance data, the DA service providers have noted that 2021-22 has presented ongoing challenges as they continued to deal with the consequences of the Covid-19 pandemic. However, they have also identified that there have been opportunities to build on the learning from the pandemic, to offer individuals more options for how they interact with services.

DA service providers report that individuals are presenting with ever more complex needs, perhaps due to strained capacity across other services, which results in

challenges with engagement, service user retention and successful outcomes. Working with the DA Leads, Commissioning teams and the DA Boards in each of the areas they are reviewing approaches in response to this.

In last year's Annual report (2020-21) our local data evidenced significant increases in domestic abuse across both authorities, a 46% increase in section 42 enquiries in North Tyneside and 128% in Northumberland (2020-2021). This year we have continued to see increases, but not to the same extent.



Northumbria Police have also reported a 1.2% force wide decrease in all domestic abuse incidents when comparing 2020/21 and 2021/22. Incidents are lower than last year but remain higher than 2019 (+3%). The proportion of incidents that involve a partner/ex-partner remains at 77% force wide for 2021/22.

White Ribbon Day

Building on the success of our regional approach to Domestic Abuse training, in November 2021 both Northumberland County Council and North Tyneside Council were successful in their applications for White Ribbon accreditation, and a joint workshop was held for Champions and Ambassadors. Both areas have agreed their own three-year action plan aiming to end violence against women that includes a communication strategy in both areas to raise awareness across the areas of the support available. With Newcastle also achieving White Ribbon accreditation in November 2021 the three local authorities have worked together on several North of Tyne initiatives to achieve greater impact with awareness raising.

In October and November 2022, the White Ribbon Steering groups will review the progress made in the first year and priorities for the year ahead.

Child to Parent Violence and Abuse

As reported in last year's report both North Tyneside and Northumberland have developed a Child to Parent Violence and Abuse (CPVA) pathway agreed jointly by Children's and Adults Social Care, and supported by a CPVA training strategy. The steering groups in both areas continue to meet quarterly, and the partnership remains committed to raising awareness and embedding a coordinated approach in response to CPVA.



Priority 4 Criminal Exploitation

During this reporting year Northumbria Police coordinated a review of the regional Multi-agency Exploitation hub, and a revised model was launched in November 2021.

The purpose of the hub is to provide a multi-agency response to victims of exploitation, with agencies working collaboratively and innovatively to prevent sexual and criminal exploitation and protect those at risk. Both North Tyneside and Northumberland Local Authorities contribute to and support the work of the regional hub, which oversees, reviews and coordinates activity across statutory and non-statutory partners to safeguard victims of all forms of exploitation.

This regional approach to tackling exploitation is strengthened further by Northumbria Police providing consistent chairing arrangements for all 6 Strategic Exploitation subgroups which focus on all age exploitation, learning from practice and improving collaboration across partnerships.

Following on from the Missing Adults protocol feature in last year's Annual report, a regional and collaborative approach to missing adults with Northumbria Police, has continued across the region. The Northumbria Missing Adults protocol has also been updated to ensure that it is reflective of the National Missing Adults framework.

This work has been further extended by Police Missing from Home Coordinators sharing information locally with Adult Social Care, about the adults that most frequently go missing. This ensures appropriate care and support is in place, supports a preventative and holistic view of their missing needs, and addresses any underlying vulnerabilities which are linked to missing episodes.

Gaining a multi-agency view of exploitation across both areas is a key priority for the SAB. This year the Performance group has continued to work with partner agencies to identify relevant data to inform a local understanding of exploitation.

Both LAs are linked to the regional multi-agency exploitation hub, which provides opportunities to cross reference police and LA data, to better understand the wider exploitation profile.

According to current data, concluded section 42 enquiries involving criminal exploitation fell by 50% in North Tyneside compared to the previous year, and fell by 29% in Northumberland.

The relevant abuse types currently monitored and reported on include Modern Slavery, Sexual Exploitation, and Human Trafficking, and developing this data continues to be a focus for both LA's.

Northumberland have adopted a new way of recording types of abuse against Adult Concern Notifications (Safeguarding Concerns) providing a deeper understanding of patterns and themes.

North Tyneside have also reviewed how this type of abuse is recorded and more information about how is being developed will be available in 2022-23.

Capturing multi-agency data to inform local profiling continues to be a priority for both areas moving forward. In line with Board priorities, a multi-agency Adult Safeguarding training programme has continued to be offered across both areas.

This year, this has included the development of extended Criminal Exploitation workshops and a Countywide event in Northumberland for the retail, hospitality and voluntary services sector.

This was delivered in collaboration with Changing Lives and the Gangmasters Labour Abuse Authority to raise awareness of criminal exploitation in the wider community.

North Tyneside:

In order to better understand the picture of exploitation in North Tyneside, a subgroup of the SAB was set up this year. Strategic Missing, Slavery, Exploited, Trafficked (MSET) was originally set up in North Tyneside as a subgroup of the Children's Partnership to oversee at a strategic level, concerns related to children who were missing and at risk of slavery, trafficking and exploitation. It was recognised that the Strategic MSET should also cover adults and the subgroup became a joint group which reports into both the adults and children's safeguarding Partnerships.

The key areas of focus for the Strategic MSET delivery plan are:

- Preventing Exploitation- This work includes developing a multi-agency understanding of data and intelligence held within agencies which would contribute to the picture of exploitation within North Tyneside, ensuring front line practitioners are effectively trained to understand their response to exploitation, raising levels of community engagement and awareness.
- Protecting Victims of Exploitation - This work includes ensuring specialist services and pathways are in place to support exploited victims, working with families of exploited victims
- Pursuing Perpetrators of Exploitation- By developing pathways for sharing of intelligence around locations and perpetrators of harm, focussing on disruption and prosecution opportunities.

Over the first year of this joint group, we have increased representation across adults and community safety members to ensure a whole systems approach to exploitation, we have shared regional and national learning about good practice and areas for improvement from inspections and statutory safeguarding reviews and we have had guest speakers from other areas and third sectors sharing their expertise with the group



Northumberland:

The Strategic Exploitation subgroup has continued to drive the exploitation agenda and all-age response in Northumberland, and is a joint subgroup with the Children's Safeguarding and Community Safety Partnerships. During this year, membership of the group, the Exploitation Strategy and the multi-agency delivery plan have all been reviewed and updated.

The delivery plan continues to focus upon community engagement and awareness support and responses to victims, training, and wider disruption activity.

There is a continued focus also on data sharing across agencies, to assist with identifying emerging threats and areas of concern in the locality.

Learning from previous reviews has highlighted a number of exploitation themes which have also been incorporated in the delivery plan, such as Transitional Safeguarding and the impact of adversity on the health and wellbeing of both children and adults.

Last year we reported on the multi-agency and collaborative response to Operation Eclipse, a Police operation undertaken to tackle County Lines activity in a community in Northumberland.

Since this time, there has been increased awareness raising of criminal exploitation and the associated risks to vulnerable adults. To support this, learning from the success of Operation Eclipse in Northumberland, has been shared with all Strategic Exploitation groups across the Northumbria Police footprint.

Some highlights from the work undertaken by the Exploitation subgroup this year include awareness raising of the NRM, Transitional Safeguarding briefings and further promotion of the Northumbria Missing Adults protocol.

A number of local deep dives have been undertaken in relation to missing data, to identify any themes and to maximise the safeguarding response. There has also been a presentation in relation to the Exploitation hub, and the use of the vulnerability tracker to map exploitation. Introducing Exploitation champions in all agencies is being considered, and this is being taken forward as part of the delivery plan. The group has continued to develop their links with the Violence Reduction Unit (VRU), and has also supported Changing Lives in the implementation of their Stage toolkit for adult victims of sexual exploitation.

Of particular note, Northumberland has continued to receive consistent support from the Changing Lives Liberty Project, both operationally and strategically.

The project has provided not only valuable support and safeguarding to individual victims, but also a range of support and resources to partners to identify modern day slavery (MDS), and a regional insight into (MDS) activity.



Priority 5 Making Safeguarding Personal

Making Safeguarding Personal (MSP) continues to be a key priority for the SAB and is central to the strategic planning and subgroup activity. The SAB recognises the important role it plays in developing a safeguarding culture that puts individuals at the heart of operational and strategic decision making.

There is a continued commitment to work together to achieve person-led and strengths based frontline practice, across all agencies. All partners are expected to report their work and to provide evidence and assurance of their progress.

As a SAB we continually review how we capture MSP and engage individuals in conversations about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life. Our data tells us that in Northumberland **85%** of adults or their representatives were asked for their desired outcomes, and of those who expressed their outcomes, **98%** were fully or partially met.

In North Tyneside, **77%** were asked for their desired outcomes, and of those outcomes expressed, **94%** were met fully or partially. These are the highest rates recorded across the region. The principles of MSP continue to be embedded across our range of safeguarding training programmes.

During this year, a SAB development session was held which focused upon showcasing the LGA/ADASS MSP toolkit and resources, to support partner agencies to embed MSP and improve safeguarding practice. The range of tools and practice-based case examples have also been used to develop local training resources for staff.

In Northumberland a webinar for Adults Social Care staff has been produced to signpost practitioners to the resources, and is available to access at any time. MSP briefings have also been delivered at Social Work and Care Manager forums.

One area that requires further development in the next year, as identified by the previous review of our SAB arrangements, is a focus upon involving and hearing the voices of people who use services in the work of the Boards.

There is a need to ensure both new Partnership arrangements understand the reality for those with lived experience and frontline staff, and focus upon qualitative reporting on outcomes as well as quantitative measures.

Within North Tyneside Adult Social Care, plans are in place to seek direct feedback following safeguarding interventions via Health Watch. This will be reported on next year, including any actions taken based on the feedback

In 2021/22:

Clients involved in safeguarding enquiries who lacked capacity:

Northumberland



North Tyneside



Individuals involved in enquiries who were asked what their desired outcomes:

Northumberland



North Tyneside





Individuals who had their outcomes fully or partially met (where outcomes were expressed)

Northumberland



North Tyneside



5. SAB Highlights 2021-2022

June 2021

- Transitional Safeguarding/Bridging the gap presentation
- Endorsement of Northumberland Transitional Safeguarding protocol
- NICE Guidelines 'Safeguarding in Care Homes' – CCG Assurances presented
- Closed Cultures Assurances
- Covid SAB Risk Register signed off presentation
- North Tyneside launched Falls Safeguarding Policy



October 2021

- Launch of 'Tricky Friends' animation

November 2021

- National Safeguarding Week promotions and activities



March 2022

- Northumberland S42 Safeguarding Data Audit findings and report
- New Board models outlined
- LGA Carers & Safeguarding: A briefing for people who work with carers presented
- Northumberland Falls Guidance launched for Care Providers
- Northumberland Revised Safeguarding Adults Policy & Procedures launch



April 2021 – SAB Development Session

- Safeguarding Vulnerable Dependent Drinkers briefing
- MSP toolkit / resources explored in detail
- LGA/ADASS Safeguarding Concerns and S42 Enquiries frameworks and local implications considered



September 2021

- Northumbria Police – Diversity, Equality, and Inclusivity Strategy
- National SAR Analysis - SARC benchmarking/assurance findings and action plan
- North East SAR Quality Markers quick guide launch
- NHCFT/CCG Diabetes Management plan/pathway launch
- Regional Public Health update – Mental Health post Covid
- Northumberland 7-minute briefings published - Language, CPVA, Professional Curiosity
- Safeguarding Vulnerable Drinkers Project – Final guidance/report presented



December 2021

- Domestic Abuse Partnership Boards updates
- Local Mental Health Post Covid updates
- Future Board models proposals
- Northumbria Police – Multi-Agency Victim Hub update
- Local Covid Insights report analysis
- LGA/ADASS updated Adult Safeguarding and Homelessness Briefing

Some Key Highlights 2021-2022

Organisational Safeguarding - Impact of Covid

Clearly the impact of Covid-19 on all of our partners agencies and services has been significant, particularly for our residential and nursing care homes. As a SAB we were very mindful about creating a supportive environment for all of our partners, and the staff who work with and support vulnerable individuals within our communities. This is balanced with an awareness of the risks associated with closed environments, i.e., those settings which have been closed to visitors and professionals during the pandemic.

During this reporting year ADASS published guidance identifying the risks associated with the pandemic and closed environments, as did CQC for care providers, and it highlighted the need for SABs to seek assurance in relation to the monitoring of care settings. The SAB recognised that there were already a number of systems and forums in place to facilitate information sharing between professionals and agencies but took the opportunity to assure itself of local safeguarding arrangements and identify any additional measures that may be required. The SAB sought assurance from Commissioners (social care and health) and CQC that there was a robust awareness of issues that relate to closed environments, and the potential indicators and warning signs, including awareness of recently published NICE guidelines '*Safeguarding Adults in Care Homes*'.

In addition, regional benchmarking identified variation in practice, thresholds and decision making relating to organisational abuse and the need for national guidance has been highlighted to the national safeguarding network to improve consistency. To support this work a regional task and finish group has been established to undertake some regional benchmarking related to organisational abuse and both Northumberland and North Tyneside are involved in progressing this work.



Awareness Campaigns - National Safeguarding Week

In November, in collaboration with the Ann Craft Trust, North Tyneside and Northumberland joined a national conversation in raising awareness of National Safeguarding Adults Week. The aim of Safeguarding Adults Week is to work together in raising awareness, increase community confidence in reporting concerns, and support the workforce in developing their understanding of complex safeguarding issues.



In support of this week, the SAB developed a padlet platform to raise public awareness of a range of information including Safeguarding Adults week; What is Safeguarding; the work of the SAB; and Domestic Abuse.

SAB Safeguarding Adults week 2021 padlet



The SAB also produced, shared and promoted a 'Partner resource pack' which included a variety of resources, factsheets, communications and social media links relating to the local themes of the week: Domestic abuse; Self-neglect; Financial abuse and Scams; Criminal Exploitation; and Transitional Safeguarding.

A number of SAB partners also undertook activities and events to promote key safeguarding messages across both areas. Northumbria Healthcare Foundation Trust (NHCFT) delivered a number of awareness sessions relating to key safeguarding themes including Transitional Safeguarding, Learning Disabilities, Domestic abuse and Self-neglect.



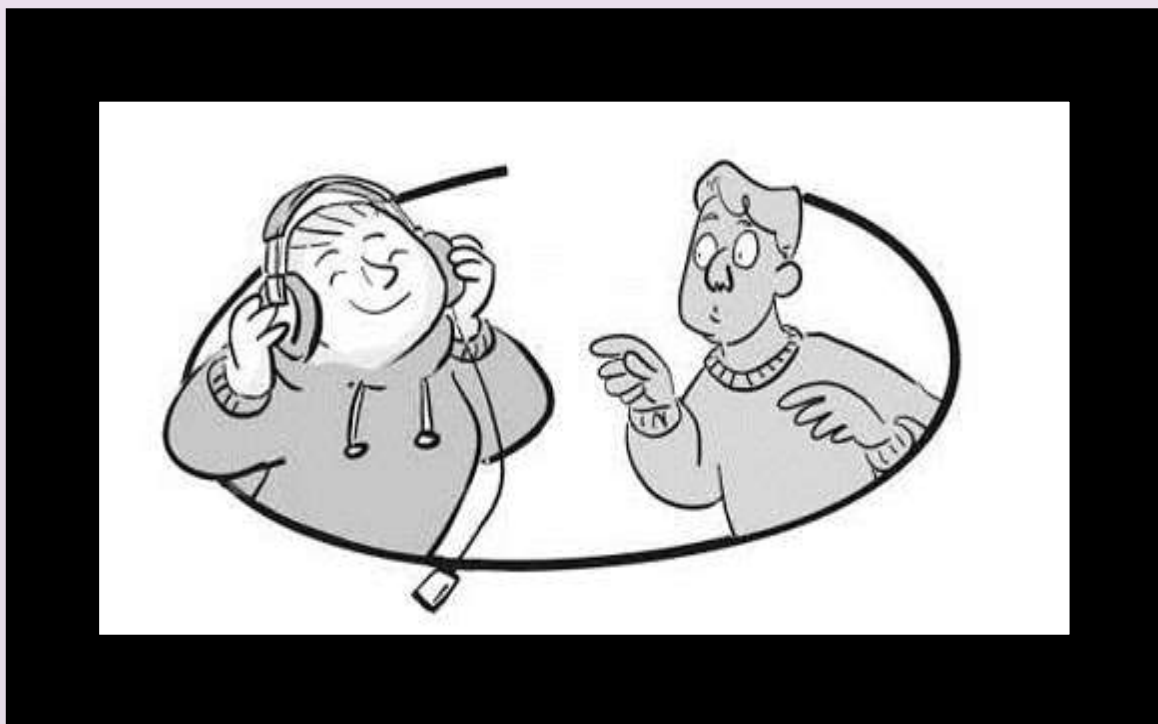
Northumbria Police also supported Safeguarding Adults week across the regional footprint, in particular promoting the Missing Adults Protocol and associated Winnie and Herbert protocols. A range of National County Lines Coordination Centre (NCLCC) resources were also circulation relating to Modern Slavery, Cuckooing and the NRM.

Awareness Campaigns - Tricky Friends Animation

In October 2021 the SAB launched their 'Tricky Friends' animation across both areas. This is a short animation originally developed by Norfolk Safeguarding Adults Board, with the aim of supporting people with learning disabilities and autism, to understand what good friendships are, when they might be harmful, and what they can do to seek help. As a SAB, we know there are some people who may be more vulnerable to exploitation, and may be less able to recognise the intentions of others. The animation can be used by carers, family, professionals and organisations, to help raise awareness, start conversations, and keep people safe whilst maintaining positive relationships. This has been promoted widely across the Partnership, included in training, and is available on both websites:

['Tricky Friends' - Northumberland Safeguarding Adults](#)

['Tricky Friends' - North Tyneside Safeguarding Adults](#)



6. Safeguarding Adults Review Committee - Lessons Learnt

In accordance with the Care Act 2014 Safeguarding Adult Boards have a statutory duty to carry out Safeguarding Adults Reviews. The SAB is required to undertake reviews when an adult in its area has died as a result of abuse or neglect, and there is a concern about how the partner agencies have worked together to safeguard the adult.

Learning and Reviews

There have been no SARs undertaken by North Tyneside and Northumberland SAB during 2021-22. However, the SARC considered 5 new case referrals and has continued to monitor action plans and learning from previously completed SARs and Learning Reviews. These learning reviews had not met the statutory criteria for a SAR, but partners agreed that there were lessons to be learned about multi-agency collaboration.

Two learning reviews have commenced in this period in Northumberland and these

will be reported in next year's report.

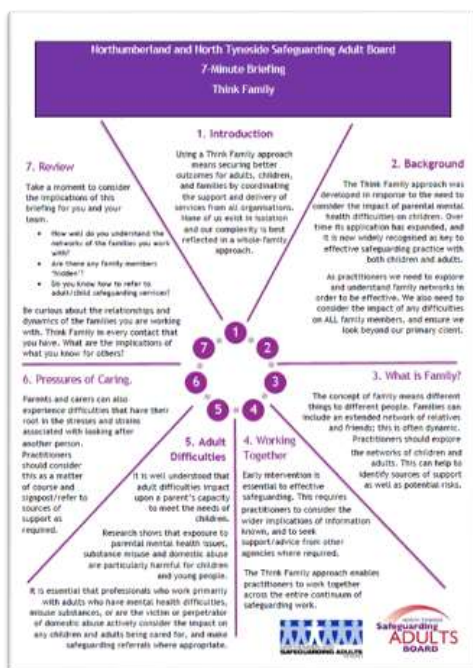
For Northumberland, action plans from the joint 'Bobby' Learning Review, and Leanne SAR, have been completed and signed off by the SAB this year. Another joint learning review was also concluded for Adult AB, where there was clear learning in relation to the importance of person centred and timely transition planning.

The diabetes pathway highlighted in last year's report has been re-launched and its efficacy is currently being audited





A number of 7-minute guides and recorded webinars have been developed to support learning, and a wide range of themed guides relating to Exploitation and Language, Professional Curiosity, Think Family, Child to Parent Violence and Abuse (CPVA), Mate and hate crime, and Caring about Adversity Resilience and Empowerment (CARE). Learning from SARs has also led to the roll out of various briefings, including Leigh, Missing Persons Protocol and criminal exploitation.

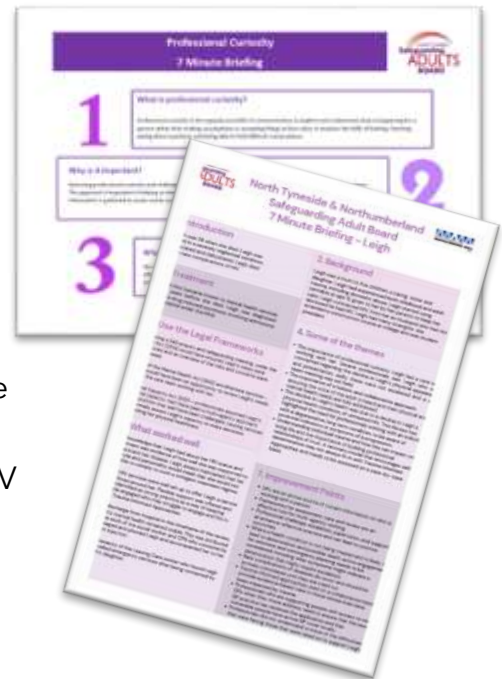


Learning from Leigh:

In March 2021 we published the Leigh Safeguarding Adults Review. This was featured in our last annual report - [add link](#)

Since then, we have undertaken the following actions:

- Produced a briefing to summarise the review and delivered briefing sessions across our partners
- Produced 7-minute guides about Professional curiosity, Think Family and self-neglect ([add links](#))
- Delivered training on Caring about Adversity, Resilience and Empowerment (CARE)
- Recorded a webinar to brief staff about the effects of HIV and long-term conditions - [see here](#)



Safeguarding and Housing group:

In our 2019/20 Annual Report we provided information following the Board's publication of the Leanne SAR undertaken in Northumberland. One of the key areas of learning from this SAR highlighted the need for a multi-agency approach to identify the interplay of risks between individuals with entrenched problems, when housed together.

Since this time, significant work has been undertaken to address all the review recommendations, including temporary accommodation providers being asked to provide assurance and evidence to the SAB in relation their

risk assessment tools and their consideration of wider vulnerability. The Northumberland Safeguarding and Housing Multi-Agency Partnership Group has also been set up aligned with national guidance (Adult Safeguarding and Homelessness) to support preventative work with the growing numbers of people experiencing homelessness, who also increasingly experience abuse, exploitation and neglect, escalating health and care needs, and premature mortality.



North East SAR Champions:

Throughout this year, both North Tyneside and Northumberland have continued to be active members of the North-East SAR Champions network, which was established to share and improve learning from SARs and other reviews, across the region. A SAR library, developed and hosted by Gateshead SAB is now live and accessible across the region. The content of the library continues to expand, and now includes both local and national reviews alongside a range of learning resources and tools. The group has also published a North East Quality Markers checklist, an easy read reference and benchmarking guide to the National Quality Markers, to support the SAR process at every stage. This work has been recognised nationally, and the SAR Champions were asked to present a national webinar in October 2021 for the Care and Health Improvement Programme (CHIP), showcasing the good practice and outputs from the group.



National SAR Analysis benchmarking:

In November 2020 the findings of the National SAR Analysis were published, which identified a range of priorities for sector led improvements. In response to this national work, an assurance framework was developed to provide the SAB with local assurances, and benchmark current SARC practice against the recommendations from the analysis. An action/improvement plan was then produced setting out some key priorities and tasks over the next year. This included the need to review the both the SAB's Quality Assurance Framework and SAR Policy and Procedure, to ensure the learning and the challenge from the national review was reflected. Also identified, was the need for a number of briefings, and an Appreciative Inquiry/Learning Review toolkit to be developed to support SARC decisions. The SARC were also asked to consider in detail, how learning from previous SARs can be revisited, to ensure this learning continues to be

embedded. Much of this assurance work is underway, and will be the focus of a SARC Development session.

Learning from Regional and National Safeguarding Adult Reviews:

The SARC continues to consider and benchmark against other reviews, both locally and nationally, and have developed a learning brief template which summarises the key findings and identifies the implications for practice locally. Partner agencies are then encouraged to disseminate this learning across their own agencies. The SARC also held a development session for members this year, where the findings from two large national reviews were considered in detail. In 2021/22 the SARC considered the learning and local implications from one local Domestic Homicide Review and Safeguarding Practice Review, and 8 national SARs and Learning Reviews.



7. Looking ahead to next year

Following a review of the Board arrangements and subsequent consultation, a decision was reached that the time was right to separate the joint Board and develop place-based SABs in each Local Authority area.

This will allow each area to align arrangements with other strategic boards, and to fully understand the holistic view of safeguarding and safety in their communities. As an interim arrangement, to allow each area to develop their partnership models and subgroup arrangements fully, the Safeguarding Adults Review Committee and Performance subgroup will continue joint arrangements until April 2023. These will be reported on fully in next year's Annual report.

Working with our Partners

The SAB has continued to be supported by our Lay Members through a number of changes, including a review of our partnership arrangements, and adapting to new ways of working. Our Lay members continue to promote safeguarding locally and provide valuable insight into our communities. They remain key members of our Partnership, strengthening the work of the Board, and providing an essential community perspective to scrutiny and assurance.

'We have continued to work with the board, to promote greater awareness that every member of our borough and wider community is entitled to feel safe and be protected from abuse and neglect. It is imperative that we continue to have local representatives (as lay members), that add an independent voice to an exclusively professional committee.'

North Tyneside Lay member

Partner Spotlight

CHANGING LIVES

Liberty Project

The Liberty Project, a Changing Lives project, was initially funded by the Police and Crime Commissioner (PCC) and has funding from the National Lottery Community Fund (NLCF) until December 2022.

The project supports individuals subjected to all forms of exploitation under the Modern Slavery umbrella. The project was established in 2018 and initially supported men who had been victims of a large-scale exploitation case in Northumberland.

Since January 2020, the Liberty Project has supported 51 individuals across Northumberland. This support is person-centred, taking into account the causes of the exploitation, the trauma experienced by victims and overall well-being.

Short-term support focuses on physical and mental health, accommodation, re-connecting victims with services and income. As trust develops, disclosures are often made and plans for medium and long-term recovery are then possible. There have been instances when victims have been re-located away from immediate risk, ensuring their safety and a chance to escape exploitation.

Liberty has assisted with [Operation Momentum](#) and [Operation Lionheart](#), working closely with other agencies, including Safeguarding Adults and Northumbria Police. A proactive method of joint working has been adopted, identifying and approaching those at risk of exploitation based on relevant intelligence shared.

Without exception, everyone approached by the Safeguarding Adults Manager and the Project lead accepted support.

The Liberty Project also coordinates a Strategic Group, advising and informing regional partners of local, regional, and national developments in the field of modern slavery. This includes updates on legislation, trends, research and various initiatives. The Project also directly informs, and is represented on the Exploitation sub groups in both North Tyneside and Northumberland.

Partner case studies – Multi-Agency Safeguarding

Northumbria Police

Northumbria Police's Missing from Home Coordinators have played an active role in multi-agency safeguarding over the last 12 months in respect of young adults missing, through Criminal Exploitation and County Lines. One such example involved a young male who had been the victim of a serious assault in a southern county after becoming involved in criminal exploitation. Close and intensive partnership working took place with him to support his needs including being a teenage parent, substance misuse and mental ill health. This enabled accommodation, harm reduction and appropriate care and support to be provided.

This example highlights the benefits of Adult Safeguarding being involved in the Missing, Slavery, Exploited Trafficked process, and the effectiveness of early Transitional planning and involvement across agencies. In this case information was shared between services in a proportionate and timely way to respond to the young person's changing needs and reduce the risks of harm.





Northumbria Healthcare Foundation Trust

Patient B first attended hospital in late 2020 where they presented with social ideation. Attendance escalated, with 139 attendances (one of the most frequently attending patients) predominantly around self-harm, suicidal ideation, and use of drugs and alcohol as a coping mechanism. Patient B was often brought to hospital unresponsive after a ligature attempt. Patient B would also attempt to end their life whilst in hospital with the use of ligatures.

Patient B had a complex history and has been a mental health inpatient for short stays on more than one occasion. Patient B reported to suffer from PTSD linked to service in the armed forces, but was later diagnosed with Emotionally Unstable Personality Disorder. Due to the presenting risks of death by misadventure, a number of agencies were involved, but engagement from Patient B was inconsistent.

A coordinated response was managed via MDT meetings with all involved agencies, including the use of safeguarding when indicated. A detailed management plan for the attendances at the Emergency Department was implemented to not only support Patient B, but also the staff involved in Patient B's care, and was shared with all agencies. The plan was successful with attendances reducing, and staff and agencies feeling supported in providing care for Patient B when attending hospital, and providing a safe controlled environment.

This example demonstrates the effectiveness of multiagency collaboration to manage complex risk. All agencies involved felt that the approach was extremely beneficial, as risks were communicated and shared. This approach allowed Patient B to receive joined up care, and reduced the risk of death by misadventure.

National Probation Service

Mr A was allocated to a Probation Practitioner (PP) in Northumberland following an offence that was not related to domestic abuse. The PP undertook a thorough investigation of Mr A's home circumstances and discovered, after various enquiries, that he was living with an adult at risk of harm. This person was a victim of domestic abuse from Mr A, but no conviction had been brought, even though there were over 80 police call outs of concern. The PP liaised with staff from both Northumberland and North Tyneside Local Authorities to share information, and develop and implement a safeguarding plan.

This joined up working allowed the PP to recall Mr A to prison for a period to allow services to work with the victim prior to his later re-release. Once released, regular professionals' meetings continued in order to share information. Although Mr A is assessed as being a serious risk to his partner, they continue to reside together by choice. All appropriate actions were taken by both Probation and the Local Authorities to reduce the risk, and a Making Safeguarding Personal approach was central to this. There are ongoing MAPPA meetings and services are currently working together to produce a case for a Closure Order, to prevent Mr A from going to the victim's home once she is ready to engage with support services.

This example demonstrates the impact of working with other professionals to safeguard, whilst ensuring the views and wishes of individuals are central to any safeguarding plans and multi-agency responses. This tenacious and continued approach to safeguarding has resulted in the level of risk being reduced whilst ensuring the opportunities for engagement are maximised.



8. Some highlights from our Partners



Northumbria Police

- Protecting Vulnerable People is a force priority, supported by the launch of a Force wide Vulnerability Strategy this year focusing on four key pillars: Working Together, Our People, Leadership and Early Intervention and Prevention. The aim is to achieve a safe environment for people, their families and wider communities to thrive without fear of harm, to ensure perpetrators are identified and targeted, and the opportunity for them to cause further harm is removed or minimised. Working collaboratively with multi-agency Safeguarding and Community Safety Partnerships is key to this response. It is acknowledged that adopting an Early Intervention and Preventative Approach which will have greater longer-term benefits in preventing harm and exploitation.
- Harm Reduction Teams are now embedded across the force and will play a key role in tackling emerging issues identified with vulnerability, working with partners to adopt a problem-solving approach. New teams have been set up which include a Harm Reduction and Communities Team and also a court disposal team (TREAD team) who are looking at pathways to divert adult offenders from the criminal justice system.
- To ensure that Protecting Vulnerable People is front and centre of the force response, "Vulnerability Matters" training is being rolled out to all front-line officers and staff. This will support officers to take a trauma informed approach when dealing with vulnerability and seek preventative early intervention to community harms. Bespoke training sessions are also being delivered to force control room call takers to enable them to recognise and respond to vulnerability at the first point of contact. In support of the Vulnerability Matters training a 15- month force campaign from May 2022 will focus on vulnerability, and ensure that protecting the vulnerable is integral to the force response.



- The learning from the Leigh SAR has continued to be further embedded within primary care with discussions at the Lead GP Peer Network meetings for safeguarding Adults, a briefing for GPs, and the developed resources being shared via the GP bulletin and placed on GP TeamNet.
- To support better oversight of issues affecting children and adults, the Safeguarding Lead GPs Peer Network groups for children and adults combined for a number of meetings. It was agreed that this approach supported families, children in care, and transitions, and as a result a number of combined meetings will be included in following years schedule for peer networks.
- Work has been undertaken to ensure that domestic abuse is identified currently within primary care, and that templates are used effectively. Guidance has been put in place for the Named GP for safeguarding, practice managers, safeguarding admin staff and individual GP practices. Training sessions were facilitated by the NTCCG Safeguarding Team, North Tyneside Domestic Abuse and Sexual Violence coordinator, Local Authority safeguarding team, NECS template designer, Domestic Abuse champions and NHCFT Safeguarding Team. GP practice visits from the NHCFT Safeguarding Team took place to embed the MARAC process, provide guidance and obtain feedback about the pathway and process. The templates were designed with read codes to enable their use within practices to be measured. The results were very positive, showing an increase in the number of Multi Agency Risk Assessment Conference (MARAC) compared to the previous years. Whilst this is an excellent achievement what the results also showed was that the DASH Risk indicator checklist (RIC), which is a measure of risk, was only being used in clear high-risk cases and not as a tool to monitor lower-level cases where risk may be seen to be escalating. This is an issue which will be further explored with GP safeguarding leads throughout 22-23.

- Multi-agency working in Northumberland has always historically been very strong. This continues with the CCG having close relationships with partners working across Northumberland and beyond. The safeguarding team represents the CCG on numerous committees and subgroups across the SAB and SNP (Safer Northumberland Partnership), contributing to all priorities. The team provides reports on behalf of primary care for MARAC, MAPPA, MATAC, MSET and Prevent.
- In relation to transitional safeguarding arrangements, NCCG are continually working with providers and partners to ensure robust and consistent responses are in place to manage safeguarding for vulnerable young people. Specific work is ongoing with care leavers to ensure smooth transitions take place. Likewise, in relation to criminal exploitation NCCG are working in partnership to identify and respond effectively to prevent and reduce the impact of exploitation. Training and briefings have been shared with Primary Care colleagues

- The trust safeguarding service continue to have a specialist practitioner on site at the Northumbria Specialist Emergency Hospital daily, and works across all of the other hospital sites to ensure our most vulnerable are immediately safeguarded.
- The trust Safeguarding 9th annual safeguarding conference “What a Difference a year makes” was held virtually and successfully attended by over 150 staff. Speakers included topics around self-harm and suicide, Mental Capacity Act/ Deprivation of Liberty, transitional safeguarding and a survivors account of domestic abuse.
- Health Cards were developed and launched in collaboration with Learning Disability North East and Northumbria Healthcare Trust. These are a colour coded easy read document to support patients with a learning disability in the hospital trust to understand their medical and healthcare needs during their hospital stay.
- The safeguarding service have worked jointly with the Anaesthetists/Surgery Business Unit and Primary Care to implement an anaesthetics pathway for patients with a learning disability and/or autism. This is now embedded and ensures early reasonable adjustments for patients coming in for surgery.
- In the Northumbria Staff Awards 2021 - the trust safeguarding service were finalists in Team of the Year Award



Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)

- The Trust has continued to support the PREVENT agenda via a dedicated worker in the team who supports this work Trust wide, attending Channel meetings and sharing information as required. The MASH worker is also now fully embedded and integral to the safeguarding assessments completed by One Call in Northumberland. This worker supports safeguarding meetings in cases requiring specialist mental health advice for individuals who may not be active to CNTW at the time concerns have been raised.
- Local Domestic Homicide Reviews have highlighted the need to strengthen the response to domestic abuse incidents within Addictions services. This has resulted in the development of a bespoke Domestic Abuse awareness session for this service, which is currently being delivered in Northumberland. Early evidence is that this is increasing incident reporting in this pathway.
- Learning from a local learning review identified the need to develop expectations of Trust staff guidance for attending and/or invited to Safeguarding Adults at Risk meetings. This will be developed to support information in the Trust policy.
- Incident reporting continues to increase alongside referrals submitted to the Local Authority using a Think Family approach. This is evident in the access pathway who report the highest volume of safeguarding activity. Access services provide CNTW Psychiatric Liaison, Initial Response Team and Addictions pathway Individuals accessing these pathways are often the most vulnerable so it is reassuring that staff are identifying concerns when they arise.

National Probation Service (NPS)

- Northumbria CRC and The National Probation Service combined to form the Probation Service in June 2021.
- The Probation Service is a partner in all MASH, MARAC, MATAC and MAPPA arrangements to ensure and maximise Adult Safeguarding arrangements. The Probation Service is also a key partner on the Domestic Abuse Partnership Board and operates in all aspects of domestic violence reduction across the partnership. This is to ensure that perpetrators are managed effectively, and that further victimisation is reduced.
- The Probation Service is committed to reducing exploitation and all staff undergo compulsory training on criminal and sexual exploitation, this also forms part of the risk assessment process for all People on Probation.
- A key priority for the Probation Service in 2022 is to develop and fully embed the new National Neighbourhood Crime Integrated Offender Strategy with Northumbria Police. This will seek to tackle and prevent offences which impact upon the most vulnerable in Northumberland and North Tyneside and reduce repeat victimisation.
- The North East Region now have in place a Continuous Improvement Strategy which outlines our 3-year approach to improving our sentence management delivery. Our vision over the next 3 years is to strive to create a culture of continuous improvement within the NE Region that is sustainable, innovative and empowers others, as well as defining what good probation supervision looks like in the region.
- Commencing in July 2022 there will be a focus on Suicide Prevention and Self Harm Awareness Training for all frontline Probation Staff



Appendix A

SAB members - As specified in the Care Act, the SAB includes three core members; the Local Authority, Clinical Commissioning Group, and the Police. However, our membership is also made up of nominated lead representatives from a wide range of partner agencies who are core or co-opted members.

Core members:

Independent Chairperson

Northumbria Police

North Tyneside Local Authority:

Adult Social Care

Housing

Elected member

Northumberland Local Authority:

Adult Social Care

Housing

Elected member

**North Tyneside Clinical
Commissioning Group**

**Northumberland Clinical
Commissioning Group**

**Northumbria Healthcare NHS
Foundation Trust**

**Cumbria, Northumberland,
Tyne and Wear NHS Foundation Trust**

National Probation Service

Children's Partnership Board Manager

Lay members

Co-opted members:

Tyne and Wear Fire & Rescue Service

Northumberland Fire & Rescue Service

Public Health

Community Safety

Northumberland

VCS Assembly

North Tyneside carers

**Northumberland Self-Directed support,
Prevention and Carers**

HMP

Northumberland

Care Quality Commission (CQC)

Legal Services

Healthwatch

Contact us

Northumberland County Council
County Hall
Morpeth
NE61 2EF



www.northumberland.gov.uk

NorthTyneside Council
Quadrant East
Silverlink
North Cobalt Business Park
North Tyneside
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www.northtyneside.gov.uk

Northumberland County Council

Health and Wellbeing Overview and Scrutiny Committee

Work Programme and Monitoring Report 2022 - 2023

Page 87

Chris Angus, Scrutiny Officer
01670 622604 - Chris.Angus@Northumberland.gov.uk

26 January 2023 - CA

Agenda Item 7

TERMS OF REFERENCE

- (a) To promote well-being and reduce health inequality, particularly in supporting those people who feel more vulnerable or are at risk.
- (b) To discharge the functions conferred by the Local Government Act 2000 of reviewing and scrutinising matters relating to the planning, provision, and operation of health services in Northumberland.
- (c) To take a holistic view of health in promoting the social, environmental, and economic well-being of local people.
- (d) To act as a consultee as required by the relevant regulations in respect of those matters on which local NHS bodies must consult the Committee.
- (e) To monitor, review and make recommendations about:
 - Adult Care and Social Services
 - Adults Safeguarding
 - Welfare of Vulnerable People
 - Independent Living and Supported Housing
 - Carers Well Being
 - Mental Health and Emotional Well Being
 - Financial Inclusion and Fuel Poverty
 - Adult Health Services
 - Healthy Eating and Physical Activity
 - Smoking Cessation
 - Alcohol and Drugs Misuse
 - Community Engagement and Empowerment
 - Social Inclusion
 - Equalities, Diversity and Community Cohesion.

ISSUES TO BE SCHEDULED/CONSIDERED

Regular updates: Updates on implications of legislation: As required / Minutes of Health and Wellbeing Board / notes of the Primary Care Applications Working Party
Care Quality Accounts/ Ambulance response times

To be listed: Vaping/E-Cigarettes

Themed scrutiny:
Other scrutiny:

**Northumberland County Council
Health and Wellbeing Overview and Scrutiny Committee
Work Programme 2022 - 2023**

7 February 2023

Northumberland Safeguarding Adults Annual Reports 2021-22

To provide an overview of the work carried out under the multiagency arrangements for Safeguarding Adults.

7 March 2023

Provision of Dental Services in Northumberland

An update from NHS England on dental support in Berwick and on dental service provisions in Northumberland.

Director of Public Health Annual Report

Annual report from the Director of Public Health setting out the priorities for the coming year and reflecting on the previous 12 months.

4 April 2023

NHCT Quality Accounts

Annual report on the quality of service. The Committee is requested to receive and comment on the presentations from each Trust, and also agree to submit a formal response to each Trust.

NEAS Quality Accounts

Annual report on the quality of service. The Committee is requested to receive and comment on the presentations from each Trust, and also agree to submit a formal response to each Trust.

2 May 2023

	CNTW Quality Accounts	Annual report on the quality of service. The Committee is requested to receive and comment on the presentations from each Trust, and also agree to submit a formal response to each Trust.
	NUTH Quality Accounts	Annual report on the quality of service. The Committee is requested to receive and comment on the presentations from each Trust, and also agree to submit a formal response to each Trust.

Northumberland County Council
Health and Wellbeing Overview and Scrutiny Committee Monitoring Report 2022-2023

Ref	Date	Report	Decision	Outcome
1	31 May 2022	Progress Report 0- 19 S75 Partnership Agreement with Harrogate and District NHS Foundation Trust	RESOLVED that: a) the contents of this report, be considered, and b) comments on the delivery of 0-19 Public Health Services to children and young people in Northumberland and outcomes being achieved be noted.	Further update to be given at a future date.
Page 92	31 May 2022	Adult Social Care Self-Assessment following the dissolution of the Partnership with NHCT	RESOLVED that the report be noted	Further update to be given at a future date.
3	31 May 2022	Restructure of Adult Social Care	RESOLVED that the report be noted	No further action at this time.
4	5 July 2022	Delivering on the Extra Care and Supported Housing Strategy	RESOLVED that the progress to date and future plans of the Strategy be noted.	No further action at this time.
5	5 July 2022	Improving Access Project Feedback – GP Access	RESOLVED that the: a) presentation and comments made be noted. b) the Scrutiny Officer contact Members of the Health and Wellbeing Overview and Scrutiny	Cllr Kath Nisbet was appointed as the representative on the GP Access Working Group.

			Committee to seek nominations to sit on the GP Access Working Group.	
6	6 September 2022	Provision of Dental Services in Northumberland	<p>RESOLVED that:</p> <ul style="list-style-type: none"> a) the presentation and information detailed be noted, and b) an update on the provision of NHS dental services be provided in six months' time. 	An update on the provision of NHS dental services be provided in six months' time.
7	6 September 2022	Northumberland Inequalities Plan 2022 - 2032	RESOLVED that the recommendations detailed within the report to be considered by the Health and Wellbeing Board at its meeting on 8 September 2022 be supported.	No further action at this time.
Page 93	6 September 2022	Proposals for the allocation of the Public Health ringfenced grant reserve.	<p>RESOLVED to recommended that Cabinet:</p> <ul style="list-style-type: none"> a) Approve the allocation of funding from the Public Health reserve as proposed in this report. b) Delegate to the Director of Public Health the precise expenditure of the funding set aside to address issues around poverty. 	No further action at this time.
9	6 September 2022	HealthWatch Northumberland Annual Report	RESOLVED that Healthwatch Northumberland Annual Report for 2021-22 be received.	No further action at this time.
10	1 November 2022	Adult Market Position Statement	RESOLVED to recommend that Cabinet agree to publish the Market Position Statement.	Cabinet considered the Committees comments at its meeting on 17 th November 2022

<p>11</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 94</p>	<p>6 December 2022</p>	<p>Recommissioning of an Integrated Drug and Alcohol Service for Adults in Northumberland</p>	<p>RESOLVED to recommend that Cabinet:</p> <ul style="list-style-type: none"> a) Authorise the Interim Executive Director of Public Health and Community Services to proceed with the commissioning exercise for a value of £21,818,608 as outlined in Key Issues section below (the final paragraph). b) Request officers to bring back the outcome for Cabinet approval. c) The Health and Wellbeing Overview and Scrutiny Committee review the service within 12 months. Information to be presented should include case studies, evidence based data and random samples taken to ensure the service is delivering across the whole county. 	<p>The Committees comments will be shared with Cabinet at their meeting on 17th January 2023</p>
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