

# Public Document Pack

**Tony Kershaw**  
Director of Law and Assurance

If calling please ask for:

Erica Keegan on 033 022 26050  
Email: [erica.keegan@westsussex.gov.uk](mailto:erica.keegan@westsussex.gov.uk)

[www.westsussex.gov.uk](http://www.westsussex.gov.uk)

County Hall  
Chichester  
West Sussex  
PO19 1RQ  
Switchboard  
Tel no (01243) 777100



12 June 2019

## West Sussex Health and Wellbeing Board

A meeting of the committee will be held at **10.15 am on Thursday, 20 June 2019 at Chichester District Council, Committee Rooms, 1E Pallant House, Chichester, PO19 1TY.**

**Tony Kershaw**  
Director of Law and Assurance

### Agenda

10.15 am      1.      **Chairman's Welcome**

10.16 am      2.      **Declaration of Interests**

Members and officers must declare any pecuniary or personal interest in any business on the agenda. They should also make declarations at any stage such an interest becomes apparent during the meeting. Consideration should be given to leaving the meeting if the nature of the interest warrants it; if in doubt contact Democratic Services before the meeting.

10.18 am      3.      **Urgent Matters**

Items not on the agenda that the Chairman of the Board is of the opinion should be considered as a matter of urgency by reason of special circumstances.

10.20 am      4.      **Minutes** (Pages 5 - 8)

The Board is asked to confirm the minutes of the meeting of the Health and Wellbeing Board held on 25 April 2019.

10.22 am      5.      **OFSTED Inspection Judgement of Children's Services and the County Council's Improvement Plan** (Pages 9 - 12)

Following the Ofsted inspection of the County Council's Children's Social Care Services in February-March 2019, an 'inadequate' judgement was given in Ofsted's report published on 8 May 2019. The attached report explains the context for the creation of a Children First Practice Improvement Plan.

The Board is asked to:

- 1) note the process for the production and delivery of the Children First Practice Improvement Plan, the progress to date and the further actions in hand; and
- 2) consider how the Health and Wellbeing Board could contribute to the Children First Improvement Programme.

10.45 am      6.      **Public Forum**

The Board invites questions and comments from the public observers present at the meeting. Those with more complex issues are asked to submit their question before the meeting (ideally several days) in order to allow a substantive answer to be given. Contact Erica Keegan on Tel: 0330 22 26050 (a local call) or via e-mail: [erica.keegan@westsussex.gov.uk](mailto:erica.keegan@westsussex.gov.uk)

11.00 am      7.      **Health and Wellbeing in Chichester** (Pages 13 - 14)

A presentation will be given by Chichester District Council on the work this Council has been doing with respect to health issues relevant to the Chichester District's residents.

The Board is asked to:

- 1) note the presentation;
- 2) comment and ask questions on the information received; and
- 3) provide feedback on how the Board and Local Health and Wellbeing Partnerships could support the Health Priorities in Chichester.

Please note the presentation is not attached to this agenda but will be tabled at the meeting.

11.20 am      8.      **West Sussex Local Safeguarding Children Partnership (WSSCP) arrangements** (Pages 15 - 18)

This report concerns revisions to statutory legislation which will result in the cessation of Local Safeguarding Children Boards (LSCBs). LSCBs are required to publish arrangements by 29th June 2019 describing how they will safeguard children in their local authority area.

The Board is asked to:

- 1) promote Child Safeguarding responsibilities as described in the Children and Social Work Act 2017 and Working Together to Safeguard Children 2018 to harness a coherent and effective approach to work across West and Pan Sussex safeguarding and partnership arenas;
- 2) provide feedback on how best the WSSCP can utilise this opportunity to support the Partnership's ambition to work innovatively across its wider networks via a

- Memorandum of Understanding; and
- 3) support the WSSCP's drive to improve services for children and their families across West Sussex following the recent Ofsted inspection; and use the voice of children to inform service improvements, particularly around the identification and response to children and young people who are at risk of or experiencing neglect.

11.40 am      9.      **Safeguarding Adults Annual Report 2018/19** (Pages 19 - 54)

The Safeguarding Adults Annual Report 2018/19 has been presented to the Health and Adult Social Care Select Committee on 12 June 2019 and is now presented to the Board.

The Board is asked to:

- 1) actively support the SAB's strategic plan to improve prevention services and the experience of adults at risk;
- 2) provide feedback on how the Health and Wellbeing Board, as representative of the partner agencies and within the developing joint protocol initiative, will contribute to the SAB's priorities; and
- 3) share learning and improvement which crosses over with adult safeguarding.

12.00 pm      10.      **Collaborative Working Agreement** (To Follow)

This report (*to be circulated under separate cover*) will outline the proposed cooperative working relationship between the following West Sussex multi-agency boards and partnerships:

- West Sussex Safeguarding Children Partnership
- West Sussex Safeguarding Adults Board
- Health & Wellbeing Board
- Safer West Sussex Partnership

The Board is asked to:

- 1) provide feedback on this working agreement with comment/suggestions;
- 2) endorse the need to work collaboratively to minimise duplication; maximise value for money and deliver effective outcomes for the residents of West Sussex; and
- 3) agree the Collaborative working Agreement.

12.20 pm      11.      **Healthwatch Community Partnership Working** (Pages 55 - 60)

A report will be presented to the Board by the Chairman of Healthwatch. The Board is asked to note the report.

12.40 pm      12.      **West Sussex Health and Wellbeing Board Terms of**

### **Reference (Pages 61 - 70)**

The suggested revised terms of reference for the Health and Wellbeing Board will be presented.

The Board is asked to:

- 1) provide feedback on the suggested revisions shown as tracked changes in the appendix; and
- 2) endorse the Terms of Reference, as amended, for recommendation to the County Council's Governance Committee.

12.50 pm      13.      **West Sussex Better Care Fund Programme (Pages 71 - 76)**

A report by West Sussex Better Care Fund Coordination Team will be presented to the Board. This report details progress towards each of the four national conditions of the Better Care Fund.

The Board is asked to note the report.

1.00 pm      14.      **Date of next Meeting**

The next meeting of the Board will be held at 10.30am on 10 October 2019 at Horsham District Council.

**To all members of the West Sussex Health and Wellbeing Board**

## **West Sussex Health and Wellbeing Board**

25 April 2019 – At a meeting of the West Sussex Health and Wellbeing Board held at 1.00 pm at Committee Room 3, County Hall, Chichester, PO19 1RQ.

Present: Mrs Jupp (Chairman)

Mr Marshall	Natalie Brahma-Pearl	Philippa Thompson
Rachel North	Nigel Lynn	Miss Russell
Anna Raleigh	Dominic Wright	Mr Turner
Alex Bailey	Gill Galliano	

Apologies: Kim Curry, Dr Laura Hill, Katrina Broadhill, Peter Kottlar, John Readman and Annie Callanan.

### **Part I**

#### **1. Chairman's Welcome**

1.1 The Chairman welcomed, Board Members, Officers, Members of the Press and Public to the meeting.

#### **2. Declaration of Interests**

2.1 None.

#### **3. Urgent Matters**

3.1 There were no urgent matters to consider.

#### **4. Minutes**

4.1 Resolved that the minutes of the Health and Wellbeing Board held on 24 January 2019 were agreed and signed as a correct record by the Chairman.

#### **5. Public Forum**

5.1 There were no questions.

#### **6. Public Health Annual Report**

6.1 The Board received the Public Health Annual Report 2018 (copy appended to the agenda and available on the website), from Anna Raleigh, Director of Public Health. This report had been published in January 2019 in fulfilment of the Annual Statutory Duty of the Director of Public Health and provided an outline of the joined-up approach to health and wellbeing in West Sussex across the public, voluntary, community and private sector

to promote health and well-being and prevent ill health. The report also set out the vision for Public Health in the County.

6.2 In presenting the report, the Director of Public Health highlighted the following key points:

- the report used four case studies to describe key public health issues, in context, which illustrated the importance of working at different levels (individual, community and the population overall).
- the report was deliberately short, visual and accessible to encourage Health and Wellbeing Board Members, organisations and groups across West Sussex to use the material and adopt a whole systems approach.
- it was explained that a whole systems approach looks at solutions at different levels (Place, Family, Friends, Community and Individual) and considers how activities can influence to prevent, reduce and delay ill health or mitigate negative impact.
- the case studies centred on Air Quality, Falls and Fractures, Healthy Behaviours and Suicide/Self Harm identifying key vulnerable groups. A Geographical focus had been adopted to highlight health inequalities.

6.3 Board Members welcomed the Annual Public Health Report 2018 and praised the accessible and useful content. Key points raised were:

- an integrated approach was recognised as cost effective.
- the focus on key areas of deprivation was welcomed.
- the Board were keen that the reviews being undertaken on service themes such as Housing, Adults and Children be aligned with the Public Health Report's vision.
- the document was seen to strengthen the partnership approach and the Board were keen that building relationships and working together continued as a priority.
- the Board were keen to use the report as a catalyst for change by using the whole systems approach on resourcing as well as taking positive action on reducing health inequalities. Board Members identified that there would be no 'quick wins' but agreed that they had a responsibility to help deliver focused improvements over time.

6.4 Resolved that the Board:

- a) noted the Annual Public Health Report 2018; and
- b) agreed to disseminate further within respective organisations utilising the additional presentational materials produced.

## **7. West Sussex Better Care Fund Programme**

7.1 The Board received the regular updated report on the West Sussex Better Care Fund Programme. (Copy of the report appended to the agenda and available on the website). This report summarised Better care Fund performance at Month 10 (January) 2018/19 and provided brief update on Better Care Fund quarterly and planning for 2019/20.

## **8. Joint Health & Wellbeing Board Strategy 2019 - 2024**

8.1 The Board received the statutory West Sussex Joint Health and Wellbeing Strategy (JHWS) for 2019-2024. The Strategy set out how the Board would address the health and wellbeing needs of the local population as identified in the Joint strategic Needs Assessment (JSNA).

8.2 It was noted that throughout 2018 the Board had undertaken a review of its JHWS to replace the 2015-2018 document. The new strategy set out the Board's new vision and ways of working. The purpose of the JHWS was to guide the planning, commissioning and delivery of health and social care and related services across West Sussex. The JHWS focused on priorities identified across the different life stages as:

- Starting Well
- Living and Working Well
- Ageing Well

8.3 The Board was informed that the strategy was agreed at the Governing Board meeting of NHS Coastal West Sussex Clinical Commissioning Group on March 26 2019, and at the North Place Governing Body Committee in Common 28 March 2019 for NHS Crawley Clinical Commissioning Group and NHS Horsham and Mid Sussex Clinical Commissioning Group.

8.4 In receiving the JHWS Board Members:

- thanked the Public Health Team for their hard work in producing the strategy with particular recognition and thanks for the thorough consultation process;
- praised the content noting the outlined local needs;
- requested that focus be maintained on reducing health inequalities in the identified areas of deprivation across West Sussex;
- noted that the NHS had a statutory duty to give due regard to the JHWS in terms of its commissioning plans;
- highlighted that the Voluntary Sector was a non-statutory partner and their ability to deliver relied on funding. Investment in the Voluntary Sector was seen as important;
- welcomed the emerging themes of taking ownership and working together in an integrated way;
- agreed the Board would be action focused in its approach to the strategy; and
- asked for regular review to monitor progress and identify any challenges.

8.5 The Chairman thanked the Board for their valued feedback and the Public Health Team for their hard work in producing the JHWS 2019-2024. Those staying for the Launch of the JHWS following the formal meeting were welcomed. It was explained that the launch would help all interested parties to develop key priorities and areas of focus across the Starting Well, Living and Working Well and Ageing Well themes.

8.6 Resolved – that the Board signed off the final Joint Health and Wellbeing Strategy (JHWS) 2019-2024.

**9. Date of next Meeting**

9.1 It was noted that the next meeting of the Board would be held at Chichester District Council on 20 June 2019. The Chairman proposed a new start time of 10.30am for all future meetings.

9.2 Resolved that the Board agreed a start time of 10.30am for all future meetings.

The meeting ended at 1.45 pm

Chairman





## **Health and Wellbeing Board**

**20 June 2019**

### **Ofsted Inspection Judgement of Children's Services and the County Council's Improvement Plan**

#### **Report by Director of Children's Services**

##### **Executive Summary**

Following the Ofsted inspection of the County Council's Children's Social Care Services in February-March 2019, an 'inadequate' judgement was given in Ofsted's report published on 8 May 2019. The current report explains the context for the creation of a Children First Practice Improvement Plan ('the Improvement Plan'). The purpose of the Plan will be to demonstrate to the Department for Education that the Council has an effective and deliverable plan to address the areas that need to improve. A presentation on the preparation of the Improvement Plan will be made to the Board.

##### **The Health and Wellbeing Board is asked to:**

- 1) Note the process for the production and delivery of the Children First Practice Improvement Plan, the progress to date and the further actions in hand.
- 2) Consider how the Health and Wellbeing Board and partnership could contribute to the Children First Improvement Programme.

##### **Background and Context**

- 1 In February-March 2019, Ofsted (the Office for Standards in Education, Children's Services and Skills) undertook an inspection of the County Council's children's services. Ofsted's subsequent report published on 8 May gave an 'inadequate' judgement. A link to the Ofsted Judgement is [here](#).
- 2 The judgement listed 12 aspects of the service requiring improvement. The relevant issues can be summarised as: social worker recruitment and caseload

volumes; the quality and consistency of social work practice; management oversight; systems and processes; the timely provision of services; permanency for children looked after; care planning and recording; the involvement of partners; the corporate parenting function.

### **Responding to the Ofsted Judgement**

- 3 Arising from the judgement, a Statutory Direction from the Department of Education (DfE), dated 4 June 2019, requires the County Council to prepare an improvement plan. The purpose of the plan is to demonstrate to the Department of Education that the Council has an effective and deliverable action plan to address the areas that 'need to improve' as identified in the inspection report, and to demonstrate its ability and capacity to improve children's services to a satisfactory standard. The Improvement Plan is therefore the mechanism to describe the Council's action for recovery.
- 4 The Council's Children First Practice Improvement Plan will be submitted to the DfE and Ofsted in July. Ofsted will initially advise whether the Plan suitably reflects the findings of the inspection report.
- 5 The Secretary of State for Education has appointed, from 4 June 2019, a Commissioner for Children's Services in West Sussex to oversee the Council's response to the Statutory Direction. The Commissioner is John Coughlan, the Chief Executive of Hampshire County Council, and its former Director of Children's Services.
- 6 The Commissioner will, over the course of three months following appointment, determine whether the Council's Improvement Plan and the actions to be taken to deliver it are likely to be effective. The outcome of this process will inform the Commissioner's recommendation to the Secretary of State in relation to whether or not the County Council should retain responsibility for the direct provision of children's social care services. The Commissioner is expected to report his formal recommendations to the Secretary of State by 30 September 2019.
- 7 Should the outcome be that the County Council retains operational service control and formal adoption of the Improvement Plan can be confirmed, the service improvements will be monitored through a sequence of roughly quarterly Ofsted monitoring visits that are expected to commence in Autumn 2019, as agreed between Ofsted and the Director of Children's Services. These will culminate in a re-inspection of the service, probably during 2020/21.

### **Delivering the Improvement Plan for Children's Services**

- 8 The Practice Improvement Plan to be submitted is intended to address all the issues identified in the inspection. The County Council commits itself to raising the standards of children's services as its top priority, and this will be backed with the necessary focus and resource. The voice of the child will be central to the Improvement Plan and the programme of service transformation it represents. It is intended that the Plan will fully engage and command the confidence of service users, staff and partners, and the public.
- 9 The delivery of service improvements has already commenced, with a range of measures put in hand. These include:

- Setting up a Children's Improvement Board, with an independent chair to review and challenge the Improvement Plan;
- The appointment of a new Director of Children's Services with experience of overseeing a local authority improvement process;
- The appointment of 5 senior improvement leads;
- Strengthening the role of the Corporate Parenting Panel;
- Investment of £5m to increase the number of social workers from November 2018, with a further £5m allocated to the Improvement Plan;
- A Recruitment and Retention programme for social workers – this has already resulted, since February 2019, in over 50 permanent social workers commencing employment, or with an agreed start date; retention levels for existing staff are improving;
- A continuing programme to address the quality of practice: already in hand are measures to improve the identification of Neglect; a review to improve quality in children's residential homes; and improvements to practice standards and data quality;
- Setting out a major training and development programme for staff, to improve social work practice;
- The development of a Children First Practice Improvement Plan, with a clear vision and measures of success, which puts the voice and experiences of the child at the heart of services.
- Accordingly, the support of the Health and Wellbeing Board and partnership is requested for this vital and continuing programme of service improvement.

**Contact: John Readman**

Director of Children's Services

Tel: 0330 22 22660

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<b>Date of meeting:</b>	<b>20 June 2019</b>
<b>Item Title:</b>	<b>Health and Wellbeing in Chichester</b>
<b>Executive Summary:</b>	<p>A presentation will be given by Chichester District Council on the work this Council has been doing with respect to health issues relevant to the Chichester District's residents.</p> <p><i>Please note the presentation will be tabled at the meeting and is not attached to this Agenda.</i></p>
<b>Recommendations for the Board:</b>	<p>The Board is asked to:</p> <ol style="list-style-type: none"> <li>1) Note the report and presentation;</li> <li>2) Comment and ask questions on the information received; and</li> <li>3) Provide feedback on how the Board and Local Health and Wellbeing Partnerships could support the Health Priorities in Chichester.</li> </ol>
<b>Relevance to <a href="#">Joint Health and Wellbeing Strategy</a>:</b>	<ul style="list-style-type: none"> <li>• Promote integration, trust and joint working between the NHS, Clinical Commissioning Groups and local government, as well as influencing the commissioners and providers of all services that impact on the determinants of health.</li> <li>• To achieve more together than we can individually.</li> <li>• To take a system-wide overview and determine the shape of the health and care system.</li> <li>• By using collective influence, secure improved outcomes through the other factors that impact on the health and wellbeing of communities including housing, education, employment and the environment.</li> </ul>
<b>Financial implications (if any):</b>	<b>N/A</b>
<b>Consultation (undertaken or planned):</b>	<b>N/A</b>
<b>Item author</b>	<b>Elaine Thomas, Community and Wellbeing Manager, Chichester District Council</b>

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**Report Title:** West Sussex Local Safeguarding Children Partnership arrangements

**Date:** 20 June 2019

**Report by:** Lesley Walker Independent Chair, West Sussex Safeguarding Children Board

### **Executive Summary**

- This paper concerns revisions to statutory legislation which will result in the cessation of Local Safeguarding Children Boards (LSCBs).
- Local authority areas are required to develop a new framework to safeguard children. Every area must publish their revised arrangements no later than 29th June 2019 and implement these arrangements within 3 months of their publication date.
- Under the new legislation, the local authority is no longer the lead child safeguarding agency. There will be three lead local safeguarding partners who hold equal and joint responsibility: clinical commissioning group, police and the local authority. The LSCB will be replaced by Local Safeguarding Children Partners, with local priorities driven by the three lead partners; they must work with key agencies to form the most appropriate arrangements to meet local need in their area.

### **The Health and Wellbeing Board is asked to:**

- Promote Child Safeguarding responsibilities as described in the Children and Social Work Act 2017 and Working Together to Safeguard Children 2018 to ensure a coherent and effective approach to work across Sussex safeguarding and partnership arenas.
- Provide feedback on how best the WSSCP can utilise this opportunity to support the Partnership's ambition to work innovatively across its wider networks via a Memorandum of Understanding (MoU). The MoU will for example enable linkages such as the HWB reporting progress on its Emotional Health and Well-being delivery plan and report progress to the WSSCP's Steering Group.
- Support the WSSCP's drive to improve services for children and their families across West Sussex following the recent Ofsted inspection of West Sussex County Council's Children's Services; and use the voice of children to inform service improvements, particularly around the identification and response to children and young people who are at risk of or experiencing neglect.

## **1. Background**

The Children and Social Work Act 2017 received Royal assent on 27th April 2017, amending the Children's Act 2004 to reflect the new Local Partnership arrangements described in Working Together to Safeguard Children 2018 (WT 2018).

The Department for Education, (as central government policy lead) has made it clear that it expects local authority areas to use these revisions to statutory guidance to be a catalyst for change and innovation.

The change in legalisation arose from the Wood Report which the Department for Education published in 2016. The report looked at the role and functions of local safeguarding children boards and identified weaknesses in effective partnership working. The report recommended the abolition of LSCBs and their replacement by a stronger statutory partnership. This would enable local partnerships to move away from the highly prescribed model for delivering multi-agency arrangements and determine what worked best in their own local authority area.

## **2. Proposals**

Implementation of the new arrangements which incorporate the following key changes:

- The local authority is no longer the lead child safeguarding agency. There will be three lead local safeguarding partners who hold equal and joint responsibility: clinical commissioning group, police and the local authority. The Local Safeguarding Children Board will be replaced by Local Safeguarding Children Partners, with local priorities driven by the three lead partners; they must work with key agencies to form the most appropriate arrangements to meet local need in their area.
- Revisions to the Child Death Overview Panel (CDOP) which require West Sussex to work across an increased geographical footprint to achieve the required data analysis which will better enable a national learning landscape. A Pan Sussex steering group has been set up to deliver this.
- Changes to how the Partnership learns from incidents in which a child dies or is seriously harmed include the set-up of a new National Review Panel of experts to oversee rapid reviews of such incidents and undertake learning reviews which they deem to be of national significance.
- Independent Scrutiny: WT 2018 guidance enables development of new arrangements for ensuring robust scrutiny of local partnership work.
- Funding arrangements to cover partnership costs, including e.g. local learning reviews and the business support unit are to be agreed by the local partnership.

The new arrangements recognise the need to enable partners to optimise resources dedicated the Board activities, both locally and Pan Sussex.

## **3. Next Steps**

- Publication of our WSSCP Arrangements during week commencing 24<sup>th</sup> June 2019 on the WSSCP website. Simultaneously sharing our proposed arrangements with the Department for Education.
- Sign off of WSSCP business plan priorities in early August 2019 to inform the Partnership's work until March 2021.
- The finalisation and sign off of a memorandum of understanding between Health and Wellbeing Board, Safeguarding Adults Board, WSSCP and the Safer West Sussex Partnership to ensure effective multi-agency collaboration.

## **Director for Public Health**



**Appendices:**

(i) West Sussex Safeguarding Children Partnership Arrangements

**Contact:** Lesley Walker, Independent Chair

C/O Sally Kendal

[Sally.kendal@westsussex.gov.uk](mailto:Sally.kendal@westsussex.gov.uk)

**Mob:** 07850 945986

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**Report Title:** Safeguarding Adults Board Annual Report 2018-19

**Date:** 20/06/19

**Report by:**

Annie Callanan  
Independent Chair for West Sussex Safeguarding Adults Board (WSSAB) and

Julie Phillips  
Head of Safeguarding

### **Executive Summary**

The WSSAB Annual report 2018-19 (attached) has been presented to the Health and Adult Social Care Select Committee on 12/06/19.

### **The Health and Wellbeing Board is asked to:**

- 1) Actively support the SAB's strategic plan to improve prevention services and the experience of adults at risk.
- 2) Provide feedback on how the Health and Wellbeing Board, as representative of the partner agencies and within the developing joint protocol initiative, will contribute to the SAB's priorities.
- 3) Share learning and improvement which crosses over with adult safeguarding.

## **1. Background**

- 1.1. The report details the WSSAB's work to deliver three statutory duties including the range of initiatives provided by multi-agency partners to meet these duties. It summarises the vision, principles, key achievements and safeguarding data as well as setting out the priorities for the following year.

## **2. Proposals**

- 2.1. It is proposed that the Independent Chair of the WSSAB along with West Sussex County Council's Head of Safeguarding provide the annual update to the Health and Wellbeing Board in respect of the WSSAB's priorities, action taken and annual report for 2018/19.

### **3. Next Steps**

3.1 The WSSAB will focus on the following in 2019-2020:

- Embedding safeguarding practices and processes that are person-led and underpinned by the principles of Making Safeguarding Personal;
- Strengthening partnership practice for those who may be at risk of abuse and neglect, who are transitioning to adulthood;
- Working with partners to assist prevention and promote the wellbeing of those who are homeless and experience abuse.

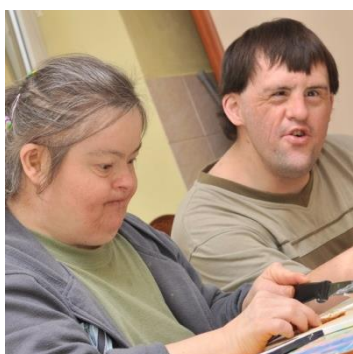
**Appendices:** WSSAB Annual Report 2018/19

**Contact:** Ru Gunawardana, Safeguarding Adults Board Manager.  
Email: [ru.gunawardana@westsussex.gov.uk](mailto:ru.gunawardana@westsussex.gov.uk)



# Annual Report

## 2018/19



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# Foreword

## Independent Chair, Annie Callanan

**I am very pleased to introduce the Annual Report of the West Sussex Safeguarding Adults Board (WSSAB) 2018/19 covering my first full year as Independent Chair.**

I appreciate and am thankful for the ongoing support of the whole partnership and specifically for all of the hard work that has supported the WSSAB during a busy and challenging year.

The Annual Report is produced as part of the WSSAB statutory duty under the Care Act 2014, and will be presented at the Health and Adult Social Care Board, Health and Wellbeing Board, Cabinet Board and the WSSAB.

In these times of increasing demand and reducing resource, attendance at the WSSAB and engagement in the subgroups, which are chaired by the statutory agencies and attended by relevant WSSAB members, is vital to our success as a partnership. I am pleased to report a high level of commitment which means that the WSSAB benefits from informed experience and expertise from busy senior operational managers.

This report reflects real progress in delivering our priorities for 2018/19, including the work to build and fully establish a stronger and more robust partnership in which all members are encouraged to provide high levels of support and constructive challenge as we continue to learn and improve.



# Foreword

## Independent Chair, Annie Callanan

### Safeguarding Adult Reviews (SAR)

WSSAB has a legal duty under the Care Act 2014 to carry out a SAR in cases where there has been serious injury or a death of a vulnerable adult and there is concern about their care. Safeguarding practice can be improved by identifying what has hindered and what has helped practice in order to tackle barriers to good practice and protect adults from harm. WSSAB works with neighbouring partnerships across the South East and in the context of national guidance and learning to undertake the most effective review to learn from events and improve services. The WSSAB published two SARS during 2018/19 and completed two learning events. The published SARS are available on the WSSAB website, through the link below, or on request a copy from the Board .

In these times of increased demand on services across the WSSAB and other partnerships, in the context of decreasing resource, I would like to thank colleagues for their engagement and commitment in improving the Board and services as a result. I would also like to thank the WSSAB team who worked hard throughout a challenging year.



**Annie Callanan**  
Independent Chair  
West Sussex Safeguarding Adults Board

#### Website:

[www.westsussexsab.org.uk](http://www.westsussexsab.org.uk)

**Post:** Post Point 0.4 Centenary House, Worthing, West Sussex, BN13 2QB

#### Email:

[safeguardingadultsboard@westsussex.gov.uk](mailto:safeguardingadultsboard@westsussex.gov.uk)



# About us

## What is the Safeguarding Adults Board (SAB)?

**Our Board was set up in 2011 and is led by the Independent Chair, Annie Callanan.**

**We have a core membership of statutory partners from West Sussex County Council (WSCC), the three NHS Clinical Commissioning Groups (CCGs) and Sussex Police. We also have a number of other partners.**

The Board meets four times a year with most of our business delivered through our subgroups.

From 1 April 2015, the Board became a statutory body with specific duties and functions. These are set out in the [Care Act 2014](#).

## How we work

The Board has the strategic lead for safeguarding adults in West Sussex with care and support needs who may be experiencing, or are at risk of, abuse or neglect. The Board does this by:

- making sure that local arrangements are in place and that the safeguarding work of all the partner agencies is effective;
- improving the way partner agencies and services work together to respond when abuse or neglect has occurred;
- aiming to prevent abuse and neglect from happening;
- making sure that people are always placed at the centre of any investigation where abuse or neglect has occurred;
- ensuring continuous improvement, development and learning which will improve our shared practice, and
- having a strategic plan to ensure we deliver on our objectives.

# Our aims

## Board aims

Sets the overall vision of the Board and the outcomes it wants to achieve for the residents of West Sussex



## Strategic aims

Establishes strategic aims and three year objectives required to achieve the Board's vision



## Annual business plan

Provides a detailed plan of specific key actions and target timescales required to achieve the Board's strategic plan



## Annual report

Reflects on the previous year's activity and reports progress towards the strategic and annual business plans

# Our vision

**Our vision is for people in West Sussex to live in safety, free from abuse and the fear of abuse.**

To realise our vision, we will continue to work with our partners and local communities to:



**Prevent abuse and neglect from happening**



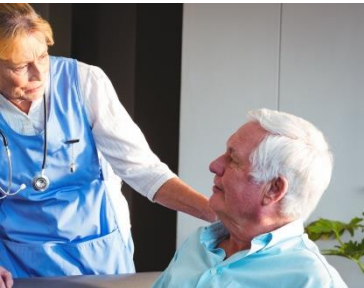
**Identify, report and remove the risk of abuse and neglect**



**Place the person and their voice at the centre at all times**

**Improve community awareness**

**Share information and intelligence**



**Learn from safeguarding cases to improve practice**

**Reassure our communities**

# Our achievements

**2018/19 has been a particularly busy year for the Board. We have put in place systems and processes to ensure that we meet our statutory duty to oversee safeguarding adults practice across West Sussex.**

To make sure our Board works well, we have reviewed who needs to be at our meetings and what the focus of meetings are, including how they will make a positive change.

We have also, created a **new subgroup** to focus on preventing abuse and neglect in care homes and care agencies.

We have developed a **new safeguarding performance dashboard**, please see page 24.

We have worked with Brighton and Hove and East Sussex Safeguarding Adult Boards to produce [self-neglect policies and procedures](#) to accompany the [Pan Sussex Safeguarding Policies and Procedures](#) which will support professionals to navigate the process of self-neglect.

We have worked to **share learning** through the production of [professional learning briefings](#) based on the safeguarding adults reviews and learning reviews. This has included presenting to West Sussex County Council social workers on their best practice days. Key themes included managing information, engaging with family participation, escalating concerns, carers as active partners and transition and cultural competence.

We conducted **multi-agency audits** on safeguarding and substance misuse which found the following:

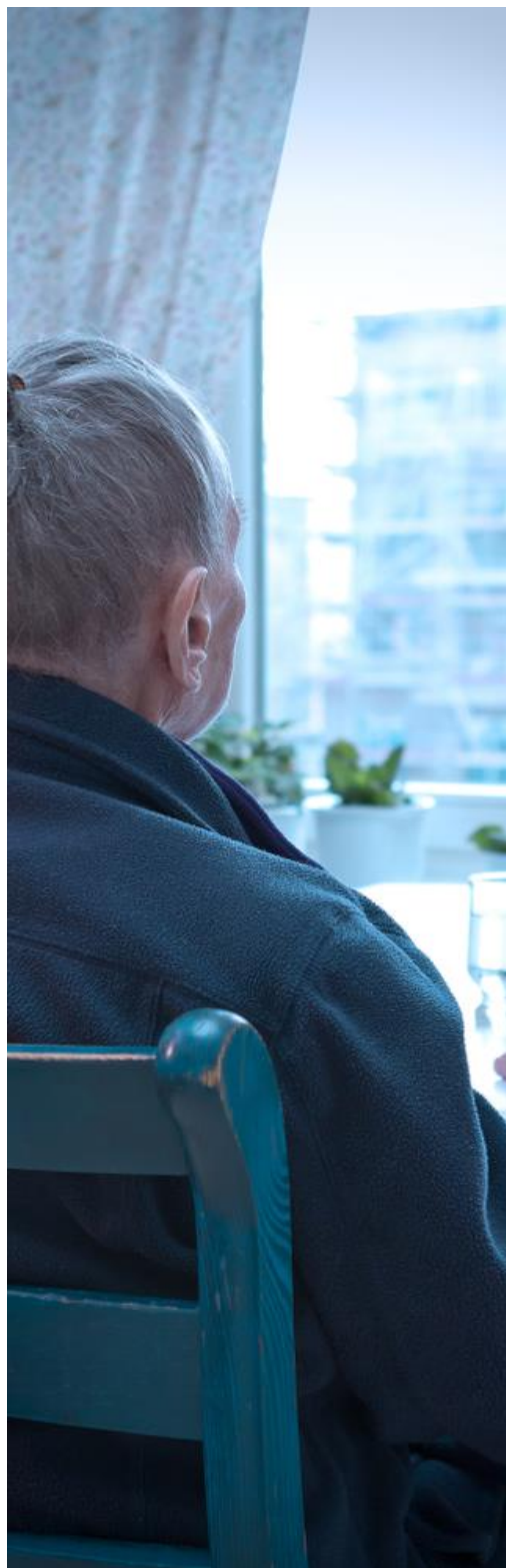
- a need for a clearer definition of “care and support needs” across agencies to ensure commonality & consistency of support and response to safeguarding concerns;
- that the multi-agency partnership as a whole has a good understanding of “cuckooing” as a category of abuse, and
- a need to ensure relevant communication between safeguarding teams and frontline workers (including Change, Grow, Live and homeless charities) to support early level conversations.

# Our achievements

The Board has adopted the principles of the [National Competency Framework](#) and NHS [Adult Safeguarding: Roles and Competencies for Health Care Staff 2018 Intercollegiate Documents](#) to support the development of staff in their safeguarding adults learning.

During **safeguarding month** in November the SAB worked with partners to embark on a month of awareness raising and learning opportunities. There were 69 publicised safeguarding events with additional in-house courses and events.

Working in partnership with West Sussex Safeguarding Children Board and West Sussex County Council's Community Safety and Wellbeing we conducted a consultation around **modern slavery** in order to gain an understanding of the current level of the workforce's knowledge of referral processes, understanding and training. This consultation ran from 26<sup>th</sup> June 2018 to 17<sup>th</sup> August 2018 and received 210 responses which will be used to develop resources.



# Our subgroups

## Chairs' subgroup

The Chairs' Subgroup meets two weeks before Board meetings to check on the progress of subgroup work and ensure necessary sign-off of decisions. The group also plans what needs to be covered at our quarterly Board meetings.

## Training subgroup

The training subgroup establishes systems for monitoring, reporting and evaluating adult safeguarding training across organisations.

The training subgroup developed the pan-Sussex Learning and Development strategy in partnership with East Sussex and Brighton and Hove training subgroups. The strategy involves the adoption of key competencies in safeguarding: the [National Competency Framework](#) and NHS [Adult Safeguarding: Roles and Competencies for Health Care Staff 2018 Intercollegiate Documents](#) and the [National Mental Capacity Act Competency Framework](#).

## Quality and safeguarding information subgroup

A new subgroup was established following learning that identified the need for better communication between partners around the provider market.

This is a multi-agency group comprising health, social care, West Sussex County Council and Healthwatch representatives. Its purpose is to develop and maintain a single view of the quality and safety of the local care market. It will seek to improve the safety of services through early information sharing and intervention within appropriate systems, for example regulation, quality monitoring, safeguarding and other governance processes. It also plays a key role in prevention.

The group held its first meeting in February 2019 and will meet on a monthly basis.

## Quality assurance and performance subgroup

The Quality Assurance and Performance subgroup has been focussing on the development of an information dashboard that can capture trends in key safeguarding areas to promote and inform the work-streams of the Board.



# Our subgroups

## Engagement subgroup

The purpose of the Engagement subgroup is to develop a strong service user and family and friend carer involvement base to work with us to improve adult safeguarding in West Sussex.

The SAB worked in partnership with the Safeguarding Children Board and West Sussex County Council's Community Safety and Wellbeing to implement a month-long campaign of awareness raising and learning opportunities in November 2018. There were 69 publicised safeguarding events with additional in-house courses. There was also a social media campaign which led to increased traffic on the Board website visits which has been sustained.

## Safeguarding adult Review (SAR) subgroup

The Safeguarding Adults Review subgroup has responsibility for monitoring and commissioning [Safeguarding Adults Reviews](#) in line with Section 44 of the Care Act 2014.

When a referral is received that does not meet the threshold for a Safeguarding Adults Review, other ways of sharing and capturing learning may be used, such as learning reviews.



# Board partners

## How our Board partners are making a difference

**Our Board partners have shared their three key achievements over the past year, and their future priorities.**

### West Sussex County Council

#### Key achievements

- Developed a quality pathway where quality concerns are raised, tracked, monitored and used to identify themes or training issues.
- Developed four safe indicators, including tracking the triage of safeguarding concerns and the Deprivation of Liberty Safeguards (DoLS). Performance has improved in both of these areas since the development of these safe indicators.
- Developed a tool to track safeguarding training for all staff in the Council. This ensures each staff member has undertaken the correct level of training required for their role.

#### Key priorities for 2019/20

- Embedding Making Safeguarding Personal within safeguarding practice and ensuring outcomes are improved for adults.
- Ensuring competent and skilled West Sussex County Council workforce in safeguarding.
- Ensuring the new provider concern framework is successfully implemented.

### Clinical Commissioning Groups

#### Key achievements

- Undertaken assurance work with Trusts and NHS Foundation Trusts using the Sussex safeguarding standards.
- Organised and delivered a domestic abuse conference for primary care and health providers in West Sussex.
- Facilitated the NHS professionals forum.

#### Key priorities for 2019/20

- Roll out of the primary care safeguarding assurance tool across general practice in West Sussex.
- Implementation of safeguarding dashboard to provide further assurance for the services we commission.
- Working with primary care to provide information to, and actions from the multi-agency risk assessment conference meetings in West Sussex.



# Board partners

## How our Board partners are making a difference

### Sussex Police

#### Priorities for 2019/20

- Engaging partners to work on shared tactical plans to tackle profiling known/suspected child sexual exploitation in West Sussex. This is done through the West Sussex Children Safeguarding Board's multi-agency children's missing and exploitation (MACE) tactical group.
- Improving Sussex Police's response to stalking.
- Improving Sussex Police's response in relation to vulnerable adults and our policing response.

### Local Safeguarding Children's Board (LSCB)

#### Key priorities for 2019/20

- Worked jointly with the Safeguarding Adults Board (SAB) on safeguarding month in November 2018.
- Identified learning across organisations for both Adults' and Children's through a specific case, coupled with the identification of work on transitions which the SAB/LSCB need to progress, and which the new West Sussex Safeguarding Children Partnership would want to support during 2019/20.

- Developed closer working through the memorandum of understanding.



# Board partners

## How our Board partners are making a difference

### Queen Victoria Hospital

#### Key achievements

- Developed support and advice for staff and patients, tools include staff safeguarding prompt cards and 'patient and family' information leaflets.
- Developed a staff learning and development strategy that includes delivery of hospital oriented adult safeguarding, the Mental Capacity Act and Prevent training for all staff.
- Developed safeguarding governance arrangements and data capture for recording purposes.

#### Key priorities for 2019/20

- Continue to strengthen safeguarding support, advice and guidance for staff, patients and their families.
- Promote a culture where staff are encouraged to raise concerns and to whistle blow without fear.
- Continue to streamline policies and training sessions whilst maintaining clear direction regarding legal requirements and maintaining staff knowledge, competence and skills.

### National Probation Service

#### Key achievements

- Our risk assessments have demonstrated an increase in quality where safeguarding has featured more clearly in risk management plans.
- Practitioners have demonstrated an increased awareness of identification and then responses to exploitation of vulnerable adults, particularly in areas of financial exploitation and cuckooing.
- Development of a new group work programme meeting the specific needs of adults with learning difficulties.

#### Key priorities for 2019/20

- Greater exploration of joint working opportunities with existing partner agencies and potential new partners in the voluntary sector, with a particular emphasis on reducing homeless/rough sleeping.
- Raise the profile of MAPPA (Multi-Agency Public Protection Arrangements) with agencies and wider community in the role these arrangements play in protecting vulnerable adults in the community.
- To continue to improve our assessments and consequent interventions with perpetrators of offences or behaviours associated with exploitation.

# Board partners

## How our Board partners are making a difference

### Independent Lives

#### Key achievements

- Applied for and won money from Skills for Care to increase training for personal care assistants in East and West Sussex including first aid and safeguarding.
- Have increased staff awareness through internal and external training and conferences.
- Have reviewed and updated internal safeguarding policies and procedures.

#### Key priorities for 2019/20

- Continue to raise awareness of safeguarding with personal care assistants, offering further funded training places and workbooks.
- Raise awareness with direct payment employers on how to keep safe and how to raise a concern.
- Review and update our internal training provision.

### Western Sussex Hospital Foundation Trust

- Held the second multi-agency safeguarding conference in May 2018. This included sessions on the role of the coroner, the Court of Protection and the role of the Independent Mental Capacity Advocate (IMCA), as well as sessions on self-neglect and modern slavery. The conference was attended by around 150 health professionals from across the local health economy.
- Hosted a number of events during safeguarding month in November. These included information and updates on safeguarding issues and a, "theme of the week".
- The work undertaken by the safeguarding adults team has continued to raise awareness of safeguarding issues and there has been an increase in the number of safeguarding concerns raised, as well as an increase in the number of Deprivation of Liberty Safeguards requests.

# Board partners

## How our Board partners are making a difference

### Fire and Rescue Service

#### Key achievements

- The safeguarding adults awareness eLearning course is a required competency for all Fire and Rescue Service staff every three years.
- A bespoke course has been finalised for the service on dementia awareness course, and includes scenarios related to operational incidents and duties.
- Many teams throughout the service contributed to the Safeguarding Adults Board, 'What safeguarding means to me' campaign during safeguarding month.

#### Priorities for 2019/20

- A new database system which will be embedding, updating and improving the quality of safeguarding data that the fire service holds – this is predominantly supporting the Safe and Well visits to the most vulnerable members of West Sussex.
- The safeguarding adults training e-learning package on learning pool for safeguarding adults is now compulsory with a refresher every three years. This year nearly 600 staff will complete this training.
- Updating and improving training for the Safe and Well visits to include safeguarding for new recruits.

### Aspire Sussex

#### Key achievements

- 100% of staff have completed safeguarding training (including front of house staff, caretaking staff, managers and trustees, all administrators and tutors and volunteers).
- Refreshed safeguarding posters.
- Continuing refreshers workshops to ensure awareness and knowledge is up-to-date.

#### Priorities for 2019/20

- Ensuring that safeguarding continues to have a high profile across all the provision and all students know about the incident flowchart and who to go to if they require support or advice.
- Updating student induction to include on Prevent duty.
- Continue doing spot visits and ensure most students know who the safeguarding compliance manager is.

# Board partners

## How our Board partners are making a difference

### Arun District Council

#### Key achievements

- Creation of a partnership intelligence form for Arun District Council staff to complete to report concerns of criminal activity to the local Police hub e.g. drug related harm, modern slavery, human trafficking and terrorism.
- Established a regular partnership meeting to identify addresses at risk of cuckooing and the victimisation of tenants from organised crime in relation to county lines drug supply.
- Established links with Adult Social Care (Bognor Team) to raise concerns and help identify vulnerable adults and action plan to reduce known risks.

#### Key priorities for 2019/20

- To reinvigorate the programme of training for designated safeguarding officers and frontline staff, to ensure that all feel equipped to respond the challenges of safeguarding.
- To ensure that the voice of adults is heard to ensure a personalised approach to safeguarding.
- To provide assertive outreach support and advice to rough sleepers using established partnerships to assist adults in to hostel or residential accommodation.

### Sussex Partnership NHS Foundation Trust

#### Key achievements

- Re-organised partnership working so there is greater support and focus on safeguarding resulting in a significant improvement in performance.
- Developed face-to-face Level 3 training programme for band 6 and 7 clinical staff – in line with requirements outlined in the intercollegiate documents for health care staff.
- Undertaken awareness raising with staff, leading to increased reporting and improved data.

#### Key priorities for 2019/20

- Improve the data we record and are able to use relating to safeguarding.
- Improve governance processes which include evidence of clear reporting lines, roles and robust scrutiny of Safeguarding Adult Reviews, Domestic Homicide Reviews, Serious Case Reviews and learning.
- Trust wide adoption and implementation of the revised training strategy to enable staff to learn through experience and broaden their knowledge and skills.

# Board partners

## How our Board partners are making a difference

### West Sussex Partners in Care

#### Key achievements

- Attended the managers' forum in January 2019 and shared guidance on raising concerns about abuse and neglect, which was later cascaded to all care providers.
- Ensured that learning and good practise from Safeguarding Adult Reviews were shared with care providers.
- Worked closely with the safeguarding team and represented the independent sector on the Safeguarding Adults Board in order to raise concerns, issues and challenges facing the sector.
- Continue to ensure that the independent care sector is represented on the Safeguarding Adults Board and the training subgroup and that its concerns are listened to.

#### Priorities for 2019/20

- Work with the principal manager of safeguarding on guidance on raising concerns about falls and any other issues pertinent to the sector.
- Ensure that the independent sector understands its responsibilities and when to report a concern and address areas of conflict that may arise with specific regard to Care Quality Commission.



# Our data

## WEST SUSSEX STATISTICS<sup>1</sup>

In **2019** it is estimated that **864,653** people live in West Sussex.  
This is predicted to increase to **997,684** by **2039**

It is estimated that **201,547** people will be over **65** in **2019**

In West Sussex **84,393** people provide unpaid care.  
This is about **1 in 10** people in West Sussex<sup>2</sup>



Almost **20 per cent** of the above unpaid family and friend carers<sup>3</sup>  
provide **over 50 hours** a week of care<sup>4</sup>

It is estimated that **3,160** people have a **moderate or severe** learning disability in West Sussex

**1,990** people with a learning disability are provided with a social care

**9058** people live in medical (e.g. hospitals) or care establishments in West Sussex.

**4494** people live in residential and nursing care home settings.

**122** supported living accommodation based services for people with learning disabilities.

**9** extra care housing services.

**100+** day care organisations and groups providing day activities for older people.

**105** specialist services for people with physical and/or learning disabilities.

<sup>1</sup> The statistics for this chapter are taken from a variety of sources, including: West Sussex Life 2017-19; NICHE (Police database); West Sussex Fire and Rescue; Performance and Insight Teams from both Sussex Police and West Sussex County Council; Hospital Episode Statistics (HES), Health and Social Care Information Centre (HSCIC) and Skills for Care.

<sup>2</sup> West Sussex Life 2017-19.

<sup>3</sup> An unpaid family or friend carer is a person who gives any help or support to their friend or family member who are, for example, living with a person with a life-limiting condition, a disability, a terminal condition or issues related to old age. Family and friend carers are critical to people in their care.

<sup>4</sup> West Sussex Life 2017-19.

<sup>5</sup> West Sussex Life 2017-19.

# Our data

## Safeguarding concerns

**West Sussex County Council is the lead agency on safeguarding and has a duty to record all safeguarding information on behalf of the West Sussex Safeguarding Adults Board. Concerns from agencies are usually raised using the online form and are screened by West Sussex Adult's CarePoint.**

This part of the data has been taken from the draft West Sussex Safeguarding Adults Collection 2019.

\*The figures provided within this report relate to the first submission sent to NHS Digital and maybe subject to change post further analysis.

## Safeguarding concerns

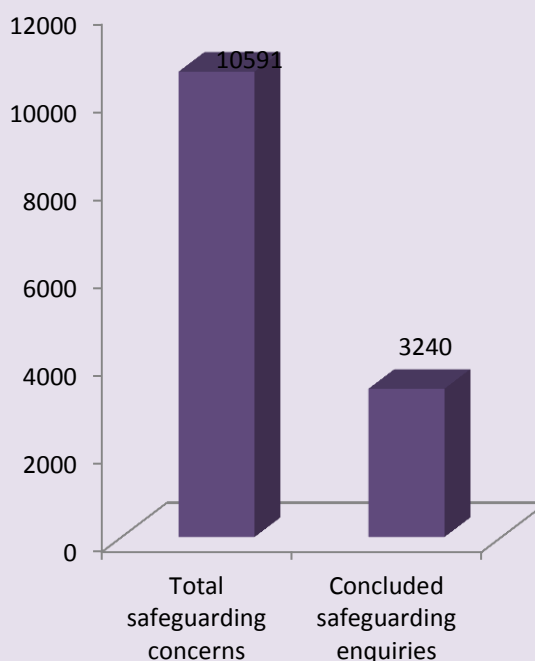
Of **10,591** concerns, there were **3430** where a fuller investigation (i.e. a Section 42 safeguarding enquiry) was required and **93** other safeguarding enquiries to be carried out.

By the end of the year **3,240** enquiries were concluded.

The **10,591** safeguarding concerns raised were about **7,388** adults. This means that some adults had multiple safeguarding concerns.

The **10,591** concerns is an increase from last year and suggests an improving awareness of safeguarding from websites, publications and media.

**Safeguarding Concerns and safeguarding enquiries 2018/19**



**Figure 1: Safeguarding concerns versus safeguarding enquiries**



# Our data

## Types of abuse and needs

### Type of alleged abuse

Of the concluded Section 42 enquiries, there were **1519** neglect and acts of omission enquiries and **829** physical abuse enquiries. Together, these two categories represent **72%** of all concluded safeguarding enquiries and therefore, account for the majority of abuse enquiries. Neglect and acts of omission along with physical abuse have been the most common forms of abuse over the past three years.

\*Please note that due to the high proportion of safeguarding concerns being recorded as neglect, further breakdown information has been requested and this will be presented to the Safeguarding Adult Board Quality Assurance Subgroup for further analysis.

Type of abuse	2018/19
Physical abuse	829
Sexual abuse	148
Psychological abuse	161
Financial or material abuse	297
Discriminatory abuse	8
Organisational abuse	108
Neglect and acts of omission	1519
Domestic abuse	51
Sexual exploitation	1
Modern slavery	3
Self-neglect	134
TOTAL*	3259

Figure 2: Nature of alleged abuse for safeguarding enquiries

### Primary support needs

Physical support is, by far, the most likely primary support need for a person undergoing a Section 42 safeguarding enquiry.

Primary Support Need	2018/19
Physical support	1103
Sensory support	75
Support with memory cognition	433
Learning disability support	318
Mental health support	248
Social support	180
No support reason	342
Not known	0
TOTAL	2699

Figure 3: Individuals involved in Section 42 Safeguarding Enquiries by primary support reason

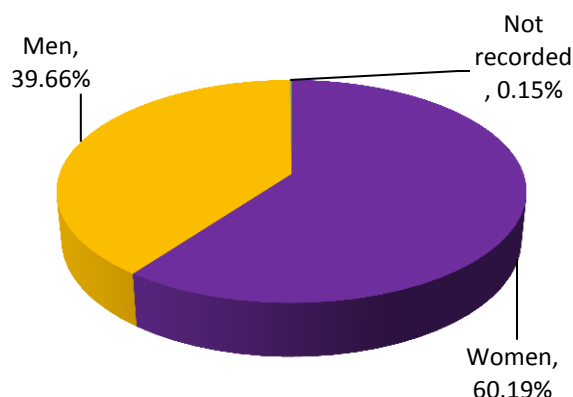
# Our data

## Demographics

### Gender

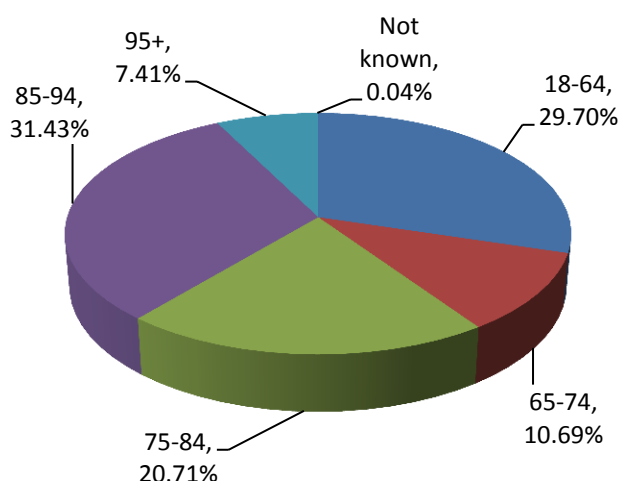
Section 42 enquiries evidenced **60.19%** were women and **39.66%** were men.

Non-recording of gender has reduced to **0.15%** and improvement of 0.06% The aim will be for this to be 0% next year.



### Age

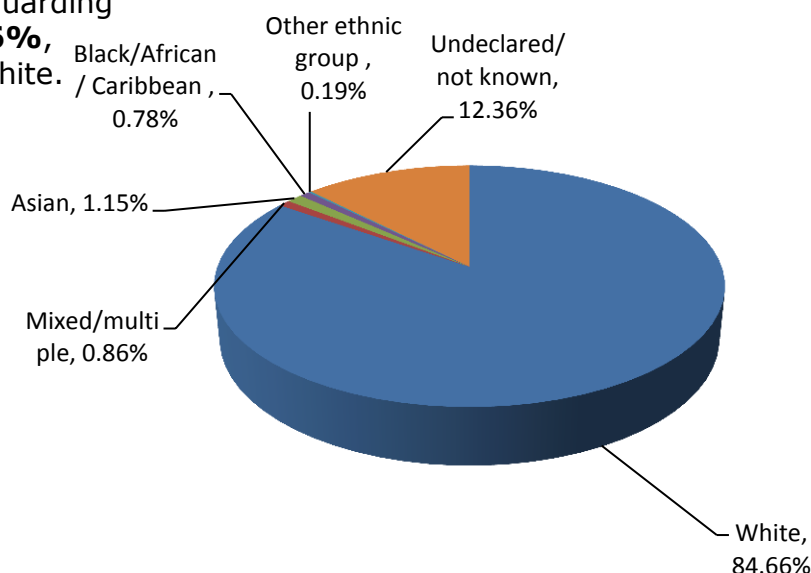
As with last year, the vast majority of adults having a Section 42 enquiry are older adults, that is, adults over 65 years old. This group accounts for a total of **62.83%** of all enquiries. Of this group and also, all groups, adults between 85-94 years old had the most enquiries, that is **38.84%**.



### Ethnicity

The vast majority of safeguarding enquiries related to **84.66%**, adults who identified as white.

Only **2.98%** of safeguarding enquiries were carried out with adults who identified as black/African/Caribbean, Asian, minority ethnic or mixed heritage.



# Our data

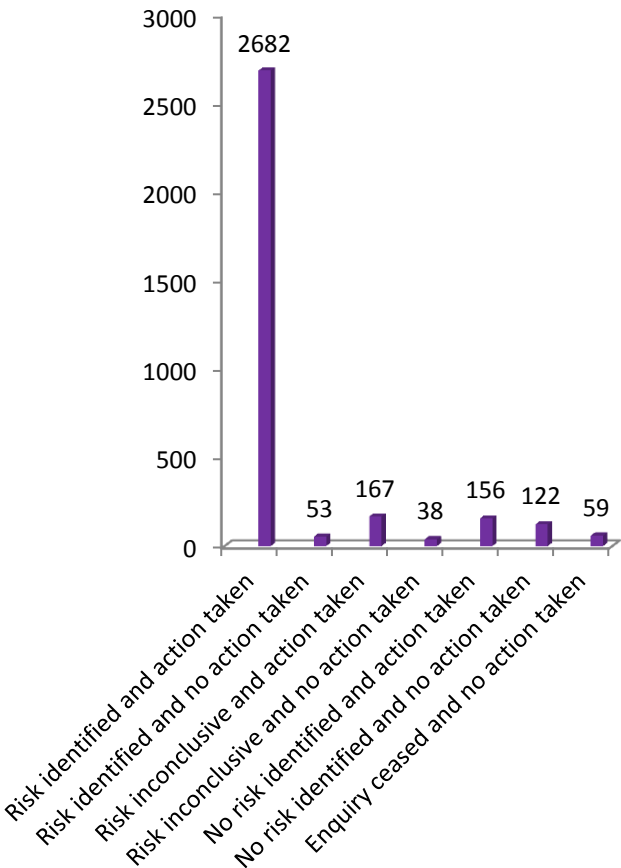
## Outcomes

### Assessment outcomes of concluded Section 42 enquiries

As part of a Section 42 enquiry, an assessment of the risk to the adult is made and whether any action is needed. Where a risk is identified, the outcome is recorded at the conclusion of the enquiry.

In the majority of concluded Section 42 enquiries, **2682 outcomes**, risks were identified and action taken.

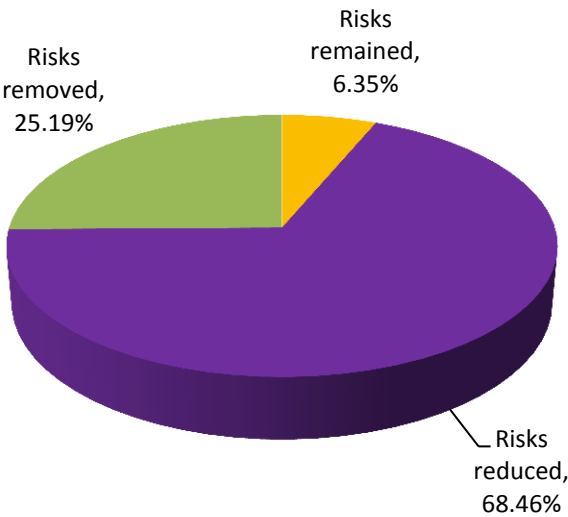
The reason for actions not being taken when risk has been identified (53 cases) are due to the risk ceasing or adults not wanting any action taken.



### Risk outcomes where a risk has been identified

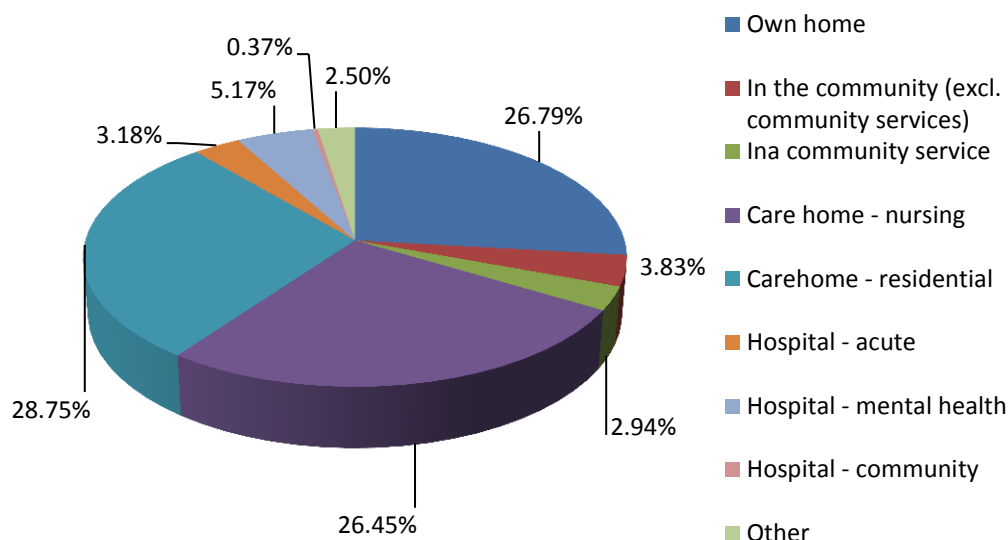
Where a risk was identified in Section 42 enquiries, a total of **93.65%** had either risk reduced or risk removed completely.

Where 'risk remains' this could be due to a person who has capacity choosing not to take advice/use support offered, or after being given an explanation and options has chosen to make an 'unwise decision'.



# Our data

## Location



Over half of adults, that is **55.2%**, for which Section 42 enquiries were completed, lived in **nursing and residential care homes**.

The next most prevalent area of where adults lived when experiencing risk, was at their **own home** which accounts for **26.79%**.

# Our data

## Deprivation of Liberty Safeguards (DoLS)

The Deprivation of Liberty Safeguards (DoLS) is an amendment to the Mental Capacity Act 2005. This allows restraint and restrictions for those who lack capacity to make decisions about their care and treatment, if they are in a person’s best interests. To deprive a person of their liberty, care homes and hospitals must apply for standard authorisations from a local authority.

In this reporting year of 2018-19 there were a total of **3785** applications, an increase of **1%** from the previous reporting year.

The total level of DoLS activity in the reporting year was **7680**.

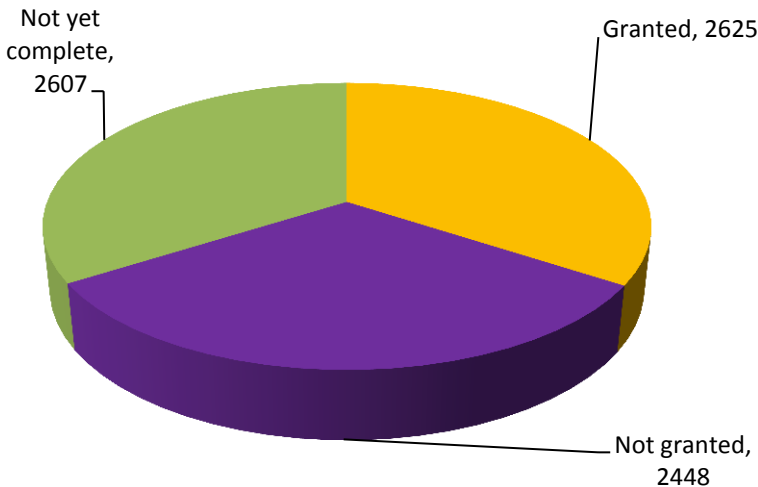
### DoLS activity

The total level of DoLS activity in the reporting year was **7680**.

‘Activity’ includes applications not yet fully processed by the local authority from previous years, applications received from the current year (regardless of the status of the application at the end of the period), applications completed during the year (regardless of when the applications were received) and all incomplete applications in the 2018-19 reporting period.

Out of the total **7680** DoLS activity of 2018-19, **2625** were granted, **2448** were not granted (this includes applications that were withdrawn) and there were **2607** that were not completed.

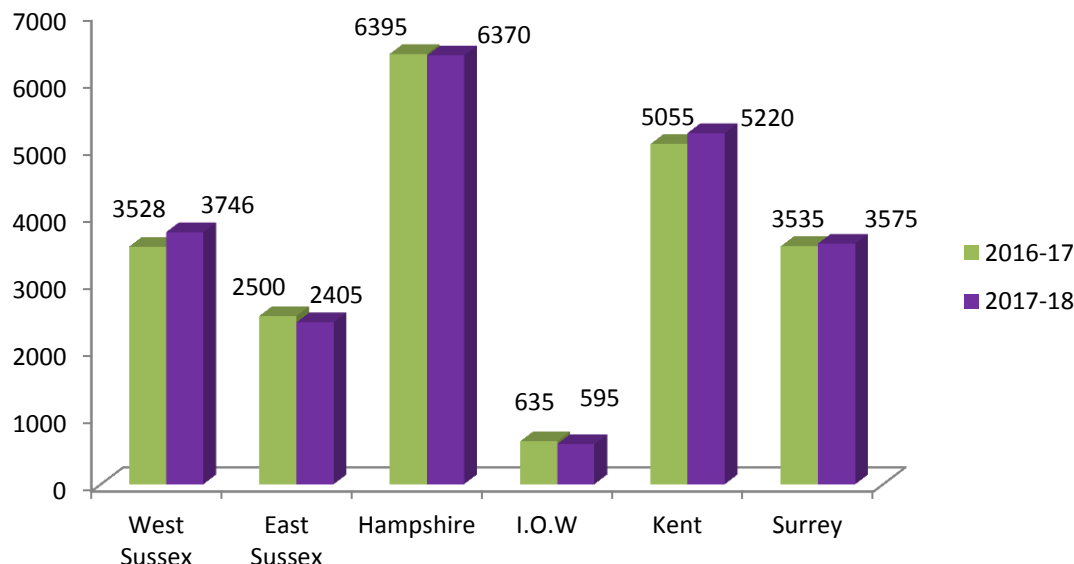
### DoLS activity



# Our data

## Deprivation of Liberty Safeguards (DoLS)

### DoLS applications for 2016-17 and 2017-18 comparative to neighbouring authorities



### DoLS Applications

In 2018-19 West Sussex received **3785** DoLS applications.

West Sussex continues to report fewer DoLS applications nationally and is broadly comparable to Surrey in its referrals.

### Gender

Of the **2625** DoLS granted in 2018-19, **60 per cent** were for females.

### Ethnicity

Of the **2625** DoLS granted in 2018-19, **88 per cent** identified with being white. Those who identified as Asian, Black, mixed heritage and other ethnic origin represent **1.5 per cent** of the DoLS granted. Of the DoLS granted, **10 per cent** of individual's ethnicity were either 'not stated', 'undeclared' or 'not known'.

Ethnicity	
Asian/British Asian	15
Black/Black British	10
Mixed/multiple ethnic group	10
Not stated	257
Undeclared/not known	14
White	2314

# Learning

## What did we learn?

**The Safeguarding Adults Board is responsible for ensuring that all agencies working with adults in West Sussex continue to learn and develop the best safeguarding practice. We do this by reflecting on practice through audits and best practice events and conferences with staff.**

This year the SAB held a number of safeguarding best practice days in partnership with learning and development colleagues. These considered the introduction of a learning strategy for safeguarding in line with standard 10 of the care certificate which is aimed to support care homes and other services.

## Safeguarding performance dashboard

The SAB also identified the need to have oversight of all safeguarding activity in West Sussex. Data and information around the number of concerns raised were examined; how concerns are managed and included within a Safeguarding Adults Board Safeguarding performance dashboard.

Data from the dashboard has been reported to the Board on a regular basis and partners have already recognised the benefit in having a dashboard where trends and patterns have been able to identify how the Board could focus their activity to support better safeguarding practice.

## Our learning

- We have a higher than average level of repeat concerns raised to those raised nationally – this is where more than one safeguarding enquiry happens to the same person in the space of a year. In 2019/20 we want to look at this to ensure that safeguarding plans are robust and effective. We will do this by undertaking a multi-agency audit.
- To share learning and work collaboratively with our partnering Boards in East Sussex and Brighton and Hove and also with the West Sussex Children Board. We are working on joint policies, challenge events and shared learning events.
- Evidencing Making Safeguarding Personal is not always being captured and recorded in a way that is meaningful for the person or the organisation. The Safeguarding Adults Board will look at national assessment tools and systems and see how we can apply within West Sussex.



# Learning

## Our priorities for 2019/20

**As a Board we will continue to work together to deliver our vision to keep people in West Sussex safe from abuse and neglect.**

In 2019/20 we will be placing a focus on:

- Embedding safeguarding practices and processes that are person-led and underpinned by the principles of **Making Safeguarding Personal**;
- Building the resilience of those who may be at risk of abuse and neglect, including adolescents who are **transitioning** to adulthood and
- Working with partners to assist **prevention** and promote the **wellbeing** of those who are **homeless** and experience abuse.

We have also published a strategic plan, outlining our vision for the Board and the outcomes we want for the people of West Sussex. This strategic plan includes key actions and target timescales, under the following work streams:

- accountability and leadership;
- policies and procedures;
- quality, audit and learning;
- prevention, engagement and Making Safeguarding Personal and
- training and workforce development.





# Learning

## Safeguarding Adults Review (SAR)

**A SAR is a legal duty under the Care Act 2014. The purpose of the review is to learn from cases to prevent similar incidents occurring. The aim is not to apportion blame on an organisation or individuals for any failings that may be discovered.**

During 2018/19, we worked closely with neighbouring Boards to ensure that we applied the threshold for SARs consistently. This has prompted a full review of the Safeguarding Adults Review protocol which will be implemented later this year.

The SAR subgroup received **nine** referrals in 2018/19. None of these were identified as meeting the threshold for a full Safeguarding Adults Review and indicates a need for the process and training for referrals to be updated as part of the protocol review.

**Two SARs** were published in April 2018, the full reports for which can be accessed on the SAB website:

<http://www.westsussexsab.org.uk/publications/safeguarding-adult-reviews-2/>

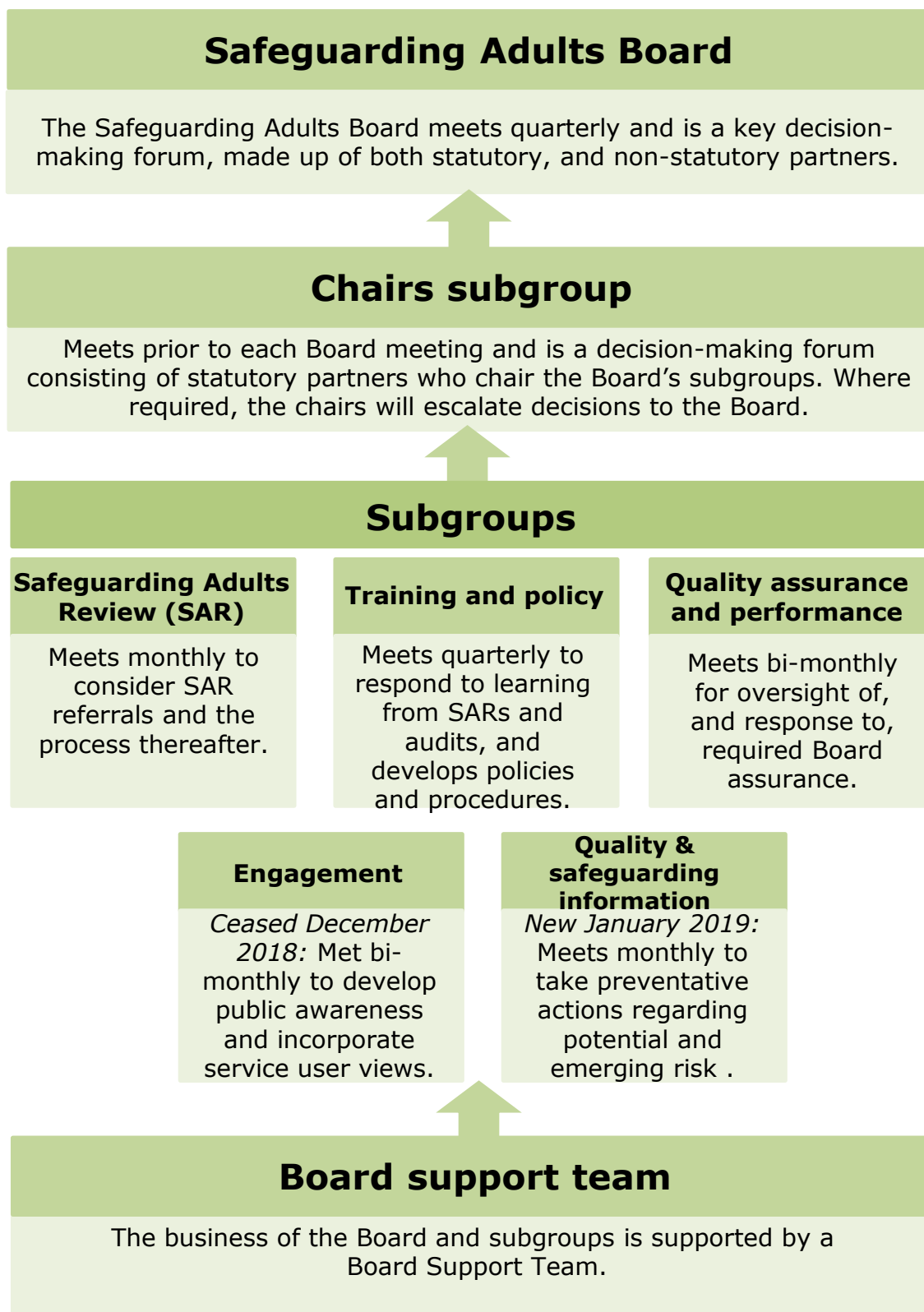
### Learning Reviews

In addition to the SARs published this year, the Board has also undertaken two learning reviews. Our published Reviews are available on our website [here](#).

We also held two learning events to reflect on learning from Safeguarding Adult Reviews nationally. Examples of areas of focus included the monitoring of fire safety visits on our data dashboard and information required by our community about the use of emollient creams.

# Board structure

## The structure of the Safeguarding Adults Board



# Board governance

## Our links to other Boards

**The West Sussex Safeguarding Adults Board reports to the Health and Wellbeing Board which is a Board consisting of key decision-makers from the health and care sector.**

The aim of the Health and Wellbeing Board is to give a voice to communities and involve them in decisions made about local health and social care issues.

Our Annual Reports are submitted to this Board for scrutiny, and also to:

- the West Sussex County Council Cabinet and
- the Health and Adult Social Care Select Committee.

In addition, our Board maintains links with the following:

- West Sussex Local Safeguarding Children Board;
- National Network for Chairs of Safeguarding Adults Boards;
- Pan Sussex Safeguarding Adults Boards
- Pan Sussex Modern Slavery Network and
- Pan Sussex Honour-Based Abuse Network.



# Board membership

**The Board consists of the following membership:**

## **Statutory partners**

- West Sussex County Council (WSCC)
- Clinical Commissioning Groups (CCGs); Horsham and Mid Sussex CCG, Crawley CCG and Coastal West Sussex CCG
- Sussex Police

## **Members**

- WSCC Public Health
- Local Safeguarding Children's Board
- Western Sussex Hospitals Foundation Trust
- West Sussex Fire and Rescue Service
- Care Quality Commission
- NHS England
- WSCC Community Safety and Wellbeing
- South East Coast Ambulance Service
- Probation Services
- Sussex Partnership Foundation Trust
- Brighton and Sussex University Hospitals
- WSCC Lifelong Services
- Sussex Community NHS Foundation Trust
- Healthwatch West Sussex
- District and Borough Councils
- Ford Prison
- Surrey and Sussex Healthcare
- Queen Victoria Hospital
- West Sussex Partners in Care
- Representatives from the community and voluntary sector



# Contact points

## Reporting concerns about harm, abuse or neglect

**If you are concerned that you, or someone you know is being harmed, neglected or exploited, you can report these concerns.**



If you think the danger is immediate, phone the emergency services on 999

- Phone West Sussex County Council's Adults' CarePoint on 01243 642121
- NGT Text Relay for people with hearing loss (available as a download able App for tablets and smartphones)  
018001 01243 642121
- Complete an online adult safeguarding alert form [here](http://www.westsussex.gov.uk/social-care-and-health/social-care-support/adults/safeguarding-adults-raise-your-concerns/):  
[www.westsussex.gov.uk/social-care-and-health/social-care-support/adults/safeguarding-adults-raise-your-concerns/](http://www.westsussex.gov.uk/social-care-and-health/social-care-support/adults/safeguarding-adults-raise-your-concerns/)
- Write to Adults' CarePoint at Adults' CarePoint, Second Floor, The Grange, County Hall, Chichester, PO19 1RG
- Phone Sussex Police on 101



If you would like to access WSCC's safeguarding training programme, or would like more information on safeguarding training in general, please visit:  
[www.westsussexcpd.co.uk](http://www.westsussexcpd.co.uk)

Electronic copies of our Annual Report are available at  
[www.westsussexsab.org.uk](http://www.westsussexsab.org.uk)

If you would like to find out more about this report, or the work of the Safeguarding Adults Board, please e-mail:  
[safeguardingadultsboard@westsussex.gov.uk](mailto:safeguardingadultsboard@westsussex.gov.uk)

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<b>Date of meeting:</b>	<b>20 June 2019</b>
<b>Item Title:</b>	<b>Healthwatch Community Partnership Working</b>
<b>Executive Summary:</b>	<p>Healthwatch connects Health and Social Care stakeholders and the Community and Voluntary sector in partnerships for the benefit of West Sussex residents.</p> <p>Over the last 15 months Healthwatch West Sussex CIC have targeted reinvestment of all income from Social Enterprise contracts outside of Statutory Healthwatch activities into funding our work to develop Community Partnerships which we believe will help underpin the aspiration of truly Integrated Care Systems – Health, Social Care, Community and Voluntary organisations working together in partnership to support individuals and family and friend carers.</p>
<b>Recommendations for the Board:</b>	The Board is asked to note the report.
<b>Relevance to <a href="#">Joint Health and Wellbeing Strategy</a>:</b>	The Strategy's vision is to achieve improved health and wellbeing outcomes across all local health and care services for the whole population. Core to achieving this vision is the widest possible integration of health and care services. This report outlines the role of Healthwatch in working with commissioners and leaders across the NHS, public health and social care, local authority elected members, representatives of the voluntary and community sector to coming together in order to improve the health and wellbeing of the people in West Sussex.
<b>Financial implications (if any):</b>	N/A
<b>Consultation (undertaken or planned):</b>	N/A
<b>Item author</b>	<b>Frances Russell – Chairman of Healthwatch</b>

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## Community Partnerships

### We connect Health and Social Care stakeholders and the Community and Voluntary sector in partnerships for the benefit of West Sussex residents.

Over the last 15 months Healthwatch West Sussex CIC have targeted reinvestment of all income from Social Enterprise contracts outside of Statutory Healthwatch activities into funding our work to develop Community Partnerships which we believe will help underpin the aspiration of truly Integrated Care Systems - Health, Social Care, Community and Voluntary organisations working together in partnership to support individuals and family and friend carers.

### Size doesn't matter - self-supporting network

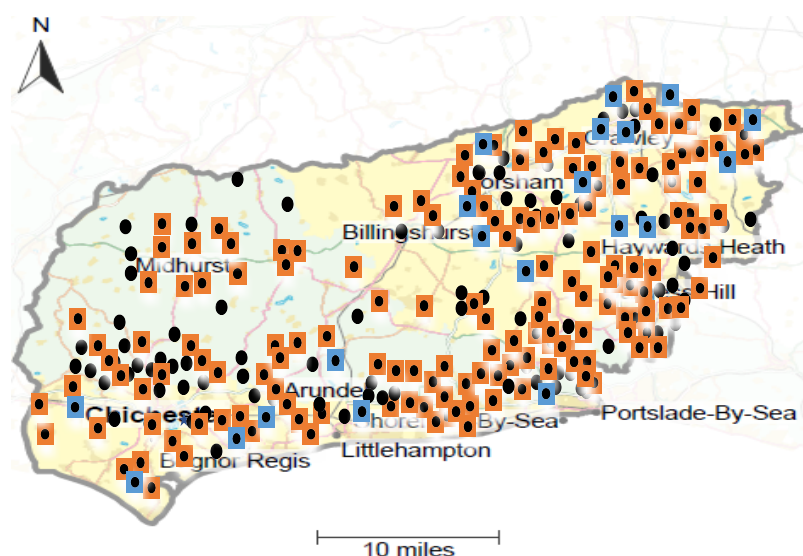
Our partnership approach works for all community and voluntary groups and organisations regardless of size and geographical reach. Working together has mutual benefits for the people they work with whether they are referred to as members, patients, clients, the public, carers, family or friends. People trust their established relationships with groups and organisations and don't need to repeat their stories and experiences multiple times. Together, we have been able to raise awareness of services, needs are greater and clearer, access to services is more timely and appropriate and time and resources are saved.



### Supporting Social Prescribing and sharing ideas

Our Community Partnership Coordinator quickly established strong links to the Social Prescribers working from the Rural North Chichester practices. We have been able to link groups, share ideas from different communities that can be replicated and adapted to suit local needs. A large number of [Spotlight case studies](#) have been developed as a result allowing us to share ideas further. Using simple *Community*

*Chest Fund* of less than £8000 we have been able to seed collaborative projects with grants from £80 - £500. 38 applications have been received to date with 23 awards made. Every project has grown and developed and resulted in ongoing partnerships both formal and informal. We have encouraged groups who have used initial connections from these projects or events to then build their own future initiatives which we are delighted to see happening. In return we have been able to hear even more insight which we can share with health and social care stakeholders to help shape future provision to have a greater impact. Many other



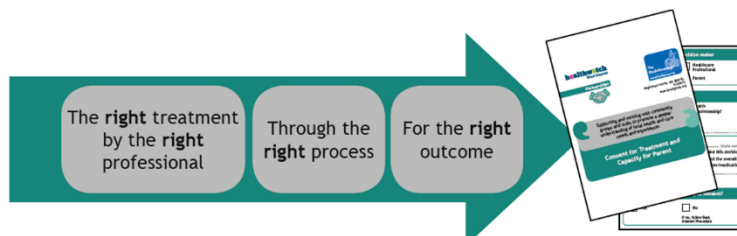
projects have started without funding, they have just needed some mentoring and network contacts.



## Example 1 - The Disability Trust Partnership - Innovation for improved outcomes

Healthwatch Community Partnerships worked with the Disabilities Trust to develop a [Best Interest Decision Making toolkit](#) for use by Health and Social Care professionals working with vulnerable people who lack capacity to make their own decisions about medical care or who

are at risk when needing medication or surgical procedures. The toolkit has been made free to anyone to use and is now being shared as best practice by Healthwatch England.



The toolkit includes:

- Consent to treatment introduction
- Care professionals document
- Doctor document
- Interested parties document
- Parent document
- Social Worker document
- Easy read version for service user

**healthwatch**  
West Sussex

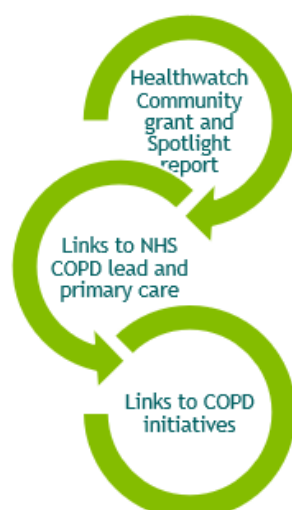


Registered charity No: 800797,  
SC038972  
[www.thedtgroupp.org](http://www.thedtgroupp.org)

**Consent to treatment  
Tools for Best Interest Decision Making**

## Example 2 - COPD Support Group East Grinstead - Making connections

- Links forged as part of Community Fund grant



- Positive outcomes for people living with COPD who attend the support group



In our first year we are actively working with over 150 organisations across West Sussex providing a diverse range of ideas. We are able to connect groups and organisations to each other for the benefit of residents Health and Wellbeing.

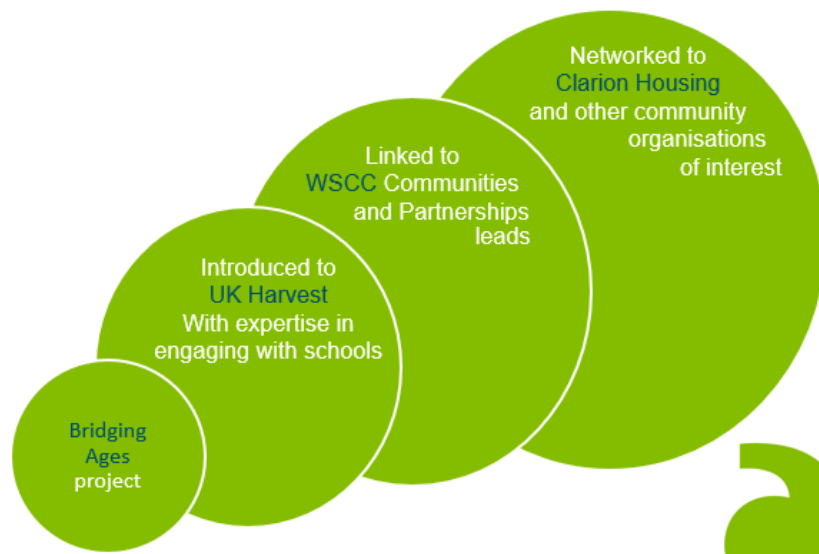
Community connections have enabled us to plan and host events in a matter of weeks for example a Community Event at the new Bridge Leisure Centre in

Broadbridge Heath included 15 statutory and community organisations together reaching over 300 people with no direct costs. Through working closer with local communities we are hear early warnings of issues which we are then able raise and help address before they escalate. A current example is the impact of the closure of Boots Chemists in Bentwood.



### Example - 3 organisations sharing knowledge and increases impact

Bridging Ages is a tiny grass roots community project which we partnered with UK Harvest, WSCC Community Leads and Clarion Housing Association. As a result the impact of the work has dramatically increased and supported individuals, families, carers and communities. We have been able to work with Social Prescribers and GP practices.



### The future - supporting the Long Term Plan and Primary Care Networks

Our 2019/20 workplan for community partnerships has been able to continue thanks to match funding from WSCC Communities Team. This will mean we can:

- Continue to nurture community contacts and health and social care stakeholders to widen the network and partnership resource pool
- Extend links to social prescribing as the model roles out more widely across the county.
- Support and shine a light on Integrated Care System developments such as the Community Hub proposals being worked on for the Rural North Chichester PCN.
- Continue to target links with “seldom heard” communities including ethnic groups, young people, dementia groups, food banks, homeless
- Raise awareness through media articles, and innovate with new ways of partnership working
- Ensure that opportunities for Communities in Action grows in West Sussex. This will widen our voice, increase awareness and broaden our insight.
- Continue to work with condition specific community and voluntary groups and the corresponding system stakeholders to share insight and increase impact.

**Further information** You can find more details about our Community Partnership work:

Community Partnerships Lead - [cheryl.berry@healthwatchwestsussex.co.uk](mailto:cheryl.berry@healthwatchwestsussex.co.uk) 07966 529 756



For more information about our work and how this makes a difference visit our website or follow us on social media

[www.healthwatchwestsussex.co.uk](http://www.healthwatchwestsussex.co.uk)





<b>Date of meeting:</b>	<b>20 June 2019</b>
<b>Item Title:</b>	<b>West Sussex Health and Wellbeing Board Terms of Reference</b>
<b>Executive Summary:</b>	The suggested revised terms of reference for the West Sussex Health and Wellbeing Board is set out in the Appendix.
<b>Recommendations for the Board:</b>	<p>The Board is asked to:</p> <ol style="list-style-type: none"> <li>1) provide feedback on the suggested revisions; and</li> <li>2) endorse the Terms of Reference, as amended, for recommendation to the County Council's Governance Committee.</li> </ol>
<b>Relevance to <a href="#">Joint Health and Wellbeing Strategy</a>:</b>	In the Health and Social Care Act 2012 duties and powers were introduced for Health and Wellbeing Boards to develop/provide Joint Health and Wellbeing Strategies (JHWSs). The revised Terms of Reference is necessary to inform Governance arrangements so that the Board can undertake its duties in line with West Sussex County Council's Constitution.
<b>Financial implications (if any):</b>	None
<b>Consultation (undertaken or planned):</b>	Members of the Health and Wellbeing Board at the Board Meeting on 20 June 2019.
<b>Item author and contact details:</b>	<p><b>Erica Keegan, Democratic Services Officer</b>  <b>Tel: 0330 022 26050</b></p> <p><a href="mailto:erica.keegan@westsussex.gov.uk">erica.keegan@westsussex.gov.uk</a></p>

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## **West Sussex Health and Wellbeing Board Terms of Reference**

### **Constitution**

~~The West Sussex Health and Wellbeing Board includes representation from all bodies in West Sussex with major responsibilities for commissioning health services, public health or social care. The quorum is a quarter of the members of the Board.~~

### **Purpose of the West Sussex Health and Wellbeing Board**

Health and Wellbeing Boards are central to the objective of a more integrated approach to health and social care.

Established and hosted by local authorities, health and wellbeing boards bring together the NHS, Public Health, Adult Social Care and Children's Services, Other Partners, including elected representatives and Local Healthwatch to plan how best to meet the health and wellbeing needs of their local population and tackle local inequalities in health.

The West Sussex Health and Wellbeing Board (HWB) established under the Health and Social Care Act 2012 is a strategic board which brings together elected members, leaders from the NHS, Local Authorities, Voluntary Sector and other partners to work together to:

- improve the health and wellbeing of the residents of West Sussex
- reduce health inequalities of the residents of West Sussex
- promote the integration of services in West Sussex

### **Members:**

West Sussex County Council

- Cabinet Members whose portfolio responsibilities include:
  - ~~—Community Wellbeing~~
  - Community Development
  - Health and Adults' Services
  - Children and Families
  - Note: the relevant Senior Adviser may attend in place of the Cabinet Member
- Directors with commissioning responsibility for:
  - Public Health
  - ~~Commissioning Health and Social Care~~
  - Adults' Services
  - Children's Services
  - Communities and public protection



West Sussex District and Borough Councils:

~~Two- Three~~ representatives from different ~~authorities- district and borough councils if possible~~ from the north and south of the county (representing both urban and rural areas) nominated by the district and boroughs.

- ~~• Two elected members or~~
- ~~• One elected member and one chief executive~~

~~West Sussex Health Inequalities Network:~~

- ~~• One representative~~

~~Surrey and Sussex Area Team of NHS England:~~

- ~~• One representative, to be drawn from the following:  
Director, Nursing and Quality and Medical Director~~

West Sussex Clinical Commissioning Groups (CCGs):

One senior clinical and one non-clinical representative from each of

- NHS Coastal West Sussex CCG
- NHS Crawley CCG
- NHS Horsham and Mid-Sussex CCG
- ~~• Coastal West Sussex Clinical Commissioning Group: Three representatives: Clinical Chief Officer, Chairman and Chief Executive~~
- ~~• Crawley Clinical Commissioning Group: Two representatives: Clinical Chief Officer and Chairman~~
- ~~• Horsham and Mid-Sussex Clinical Commissioning Group: Two representatives, to be drawn from: Clinical Chief Officer and Clinical Leader and Chairman~~

Voluntary Sector:

- ~~Two- Three~~ representatives nominated by the Voluntary Sector through arrangements made by relevant organisations across the County

Healthwatch

- One representative

NHS Providers:

One representative from each of

- NHS Sussex Partnership Foundation Trust
- NHS Sussex Community Trust



Observers with speaking rights (Non-voting) one from each of:

- West Sussex Health and Adult Social Care Select Committee
- Sussex Police and Crime Commissioner or nominated representative
- Chairman of Safeguarding Adults Board (SAB)
- Chairman of Local Safeguarding Children's Partnership (LSCP)

~~Such additional non-voting members from relevant agencies and user groups as are agreed by the Board to assist in achieving the Board's objectives.~~

### **Notes**

~~The Chairman of the Health and Wellbeing Board will be one of the County Council Cabinet Members, to be appointed by the County Council. The Board will elect a Vice-Chairman annually.~~

~~In any circumstance where a decision is required, the Chairman shall strive to ensure a consensus is achieved. If a vote has to be taken, in the event of an equality of votes, the Chairman shall have a second or casting vote. All members of the Health and Wellbeing Board will be entitled to vote.~~

~~The Health and Wellbeing Board meetings will be held in public.~~

### **Terms of Reference**

~~1. —~~

~~2. — To provide a forum for local democratic and public accountability of the NHS, social care for adults and children and other commissioned services that the Health and Wellbeing Board agrees are directly related to improved health and wellbeing and health equality outcomes in West Sussex.~~

~~3. — To promote integration, trust and partnership working between the NHS and local government as well as promoting joint working with commissioners and providers of services that impact on wider health determinants.~~

~~4. — To develop a shared understanding of the needs of the local community through a review of the Joint Strategic Needs Assessment, the key evidence base to inform the priorities of the Health and Wellbeing Board.~~

~~5. — To develop an agreed Health and Wellbeing Strategy for West Sussex and to review the effectiveness and degree of integration across the health~~

- ~~5. To establish a relationship with other partnerships such as Joint Commissioning Arrangements, district level wellbeing partnerships and the Start of Life Partnership Board.~~
- ~~6. To consider the effectiveness of health partnership arrangements so as to ensure there is no duplication of activity.~~
- ~~7. To propose recommendations regarding the work of the Health and Wellbeing Board to:~~
  - ~~• West Sussex County Council~~
  - ~~• West Sussex Clinical Commissioning Groups~~
- ~~8. To submit reports and information on the work of the Health and Wellbeing Board to the scrutiny of the County Council's Health and Adult Social Care Select Committee or other County Council Select Committees when appropriate. For some specific issues there may be opportunities for joint scrutiny with district and borough councils.~~

## Terms of Reference

- ~~1. To provide strategic, system-wide leadership to promote health and wellbeing and reduce health inequalities in West Sussex~~
- ~~1.2. To provide a forum for local democratic and public accountability of the NHS, Public Health social care for adults and children and other commissioned services that the Health and Wellbeing Board agrees are directly related to improving health and wellbeing and reducing health inequalities in West Sussex. ~~improved health and wellbeing and health equality outcomes in West Sussex.~~~~
- ~~2.3. To promote integration, trust and partnership working between the NHS and local government and other local partners through joint working with commissioners and providers of services that impact on health and the wider determinants of health and wellbeing. ~~as well as promoting joint working with commissioners and providers of services that impact on wider health determinants.~~~~
- ~~3.4. To jointly develop and approve the Joint Strategic Needs Assessment (JSNA) and ensure it is key evidence base to inform strategic decisions of the Health and Wellbeing Board and its constituent organisations. ~~a shared understanding of the needs of the local community through a review of the Joint Strategic Needs Assessment, the key evidence base to inform the priorities of the Health and Wellbeing Board.~~~~

- 4.5. To develop and ~~agree~~ a Joint Health and Wellbeing Strategy (JHWS) for West Sussex ~~and~~ to review the effectiveness and ~~degree~~ scope of integration across the health and social care system in the County.
- 5.6. To establish a relationship with other partnerships such as the parties to Joint Commissioning Arrangements, district-level wellbeing partnerships, Safeguarding Boards/Partnerships and the Safer West Sussex Partnership and the Start of Life Partnership Board.
- 6.7. To consider the effectiveness of health partnership arrangements and so as to ensure there is no duplication of activity in relation to areas of shared responsibility.
- 7.8. To propose recommendations regarding the work of the Health and Wellbeing Board to constituent member organisations and those they represent:
  - ~~West~~ Sussex County Council
  - West Sussex NHS Clinical Commissioning Groups (CCGs)
  - District and Borough Councils
  - Voluntary Sector
  - NHS Providers
- 8.9. To submit reports and information on the work of the Health and Wellbeing Board ~~to the~~ for scrutiny ~~by~~ of the County Council's Health and Adult Social Care Select Committee or other County Council Select Committees when appropriate. For some specific issues there may be opportunities for joint scrutiny with District and Borough councils.
10. To review the commissioning plans of the West Sussex Clinical Commissioning Groups (NHS Coastal West Sussex CCG, NHS Crawley CCG and NHS Horsham and Mid Sussex CCG) and provide an opinion whether these contribute to the delivery of the Joint Health and Wellbeing Board Strategy (JHWS).
11. To provide advice, assistance or other support as the Board thinks appropriate for the purpose of encouraging the making of arrangements under section 75 of the National Health Service Act 2006 (arrangements between NHS bodies and local authorities for joint service provision, commissioning arrangements and pooled budgets).
12. To undertake and keep up to date the Pharmaceutical Needs Assessment.
13. To carry out any other function that may be delegated to the County Council under section 196(2) of the Health and Social Care Act 2012.
14. To provide an opinion on whether the County Council is discharging its duty to have a regard to the JSNA and the JHWS in the exercise of its functions

15. To review and approve any other plans or strategies that are required either as a matter of law or policy to be approved by the Board such as Sustainable Transformation Partnerships (STPs) and those related to the Better Care Fund.

### **Accountability**

- The Board is a committee of the local authority and for the purposes of any enactment is to be treated as if it were a committee appointed by that authority under section 102 of the Local Government Act 1972
- The work of the Board will be available for scrutiny by the County Council's scrutiny committees

### **Conduct of Meetings**

The Health and Wellbeing Board will meet in public and its agenda and minutes made public accordingly.

### **Quorum**

The Board is quorate when there are five members of the Board present and at least one representative from each of:

- West Sussex County Council (Elected Member, Chairman or nominated Deputy)
- Clinical Commissioning Groups
- West Sussex County Council Director

Where a meeting is inquorate those members in attendance may meet informally but any decisions shall require appropriate ratification at the next quorate board meeting before they take effect.

### **Chairman/Chairing the meetings**

The Chairman of the Health and Wellbeing Board will be one of the County Council's Cabinet Members to be appointed by the County Council. The Board will elect a Vice-Chairman annually from the CCG representatives.

### **Voting**

In any circumstance where a decision is required the Chairman shall strive to ensure a consensus is achieved. If a vote has to be taken, in the event of an equality of votes, the Chairman shall have a second or casting vote. All members of the Health and Wellbeing Board will be entitled to vote apart from Observers.

Terms of Reference Review

The Terms of Reference will be reviewed by the Board annually and when required to ensure the Board remains fit for purpose and is able to respond to changes affecting partner organisations and partnership arrangements.

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<b>Date of meeting:</b>	20 June 2019
<b>Item Title:</b>	<b>Better Care Fund Monitoring</b>
<b>Executive Summary:</b>	Summary report of the Better Care Fund 2018/19 year end position and planning for 2019/20.
<b>Recommendations for the Board:</b>	To note the contents of the report.
<b>Relevance to <u>Joint Health and Wellbeing Strategy</u>:</b>	Maintaining Wellbeing and Resilience
<b>Financial implications</b> (if any):	N/A
<b>Consultation</b> (undertaken or planned):	N/A
<b>Item author and contact details:</b>	Paul Keough, BCF Officer – <a href="mailto:paul.keough@nhs.net">paul.keough@nhs.net</a>

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## **Better Care Fund Monitoring**

Date 20 June 2019

### **Report by Better Care Fund Coordination Team**

#### **Executive Summary**

This paper concerns performance of the West Sussex Better Care Fund against the 4 national metrics and provides a brief update on planning for 2019/20.

#### **The Health and Wellbeing Board is asked to:**

- 1) Note the West Sussex performance against the national metrics:
  - Non-elective Admissions which is higher than planned but an improvement on last year.
  - Residential Admissions is higher than planned but marginally improved when compared to last year.
  - Reablement/Rehabilitation which is worse than planned and performance in previous years.
  - Delayed Transfers of Care higher than planned but significantly improved when compared to the previous year.
- 2) Note the Better Care Fund Planning requirements for 2019/20 as published so far.

## **1. Background**

The Better Care Fund (BCF) is a programme spanning both the NHS and local government which seeks to join-up health and care services, so that people can manage their own health and wellbeing, and live independently in their communities for as long as possible. This report summarises Better Care Fund performance for 2018/19. It also provides a brief update on BCF planning for 2019/20.

## **2. BCF Performance 2018/19**

### **2.1 Metrics Overview**

The national BCF policy framework establishes the national metrics for measuring the progress of integration through the BCF as shown below:

Indicator	2018/19 Target	2018/19 Actual	Required Trend
1. Non-Elective Admission (Specific Acute)	93,261	96,238	Lower
2. Long-term support needs of older people (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population.	595.1	613.8	Lower
3. Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services.	86.0%	70.2%	Higher
4. Delayed transfers of care from hospital per 100,000 population.	1,050.4	1,110.0	Lower

Key:	Meets Target	Within -0.1%-5% of Target	> -5% from Target
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## 2.2 Non-Elective Admissions (Specific Acute)

This metric measures the outcome, a reduction in the number of unplanned acute admissions to hospital.

Effective prevention and risk management of vulnerable people through effective, integrated Out-of-Hospital services will improve outcomes for people with care needs and reduce costs by avoiding preventable acute interventions and keeping people in non-acute settings.

For 2018/19, the number of Non-elective Admissions across West Sussex is above plan by 3.2% and 4.6% higher than in the previous year. However, although performance is above plan, there is an improvement from 2017/18 when Non-elective Admissions were 8.4% higher than planned.

Compared to other Health and Wellbeing Board areas, when expressed as a rate per 100,000 population, the West Sussex rate of Non-elective Admissions is lower than the national average and better than two of the three closest comparator Health and Wellbeing Board areas.

## 2.3 Residential and Nursing Care Admissions

This metric measures the outcome, reducing inappropriate admissions of older people (65+) in to residential care.

Avoiding permanent placements in residential and nursing care homes is a good measure of delaying dependency, and the inclusion of this measure in the framework supports local health and social care services to work together to reduce avoidable admissions. Research suggests that, where possible, people prefer to stay in their own home rather than move into residential care. However, it is acknowledged that for some client groups that admission to residential or nursing care homes can represent an improvement in their situation.

For 2018/19, the number of residential and nursing care admissions is above plan by 3.1% but marginally improved from 4.9% above plan in 2017/18. Initiatives such as the Step Up Step Down Programme and the new operating model for social care building on

community strengths/assets should enable more people to remain independent in their own home for longer rather than being admitted to a residential home in 2019/20.

## **2.4 Reablement/Rehabilitation**

This metric measures the outcome, increase in effectiveness of these services whilst ensuring that those offered service does not decrease.

Improving the effectiveness of these services is a good measure of delaying dependency, and the inclusion of this measure in the scheme supports local health and social care services to work together to reduce avoidable admissions. Ensuring that the rate at which these services are offered is also maintained or increased also supports this goal.

For 2018/19, reablement/rehabilitation performance across West Sussex is below plan by 18.4% after several years of above plan performance. Figures are now collated through MOSAIC (the Council's client management system) although still reliant on existing manual collection. Causes of the apparent decline in performance are under investigation and may require a review of baselines and targets.

## **2.5 Delayed Transfers of Care**

This metric measures the outcome, effective joint working of hospital services (acute, mental health and non-acute) and community-based care in facilitating timely and appropriate transfer from all hospitals for all adults.

This is an important marker of the effective joint working of local partners, and is a measure of the effectiveness of the interface between health and social care services. Minimising Delayed Transfers of Care (DToCs) and enabling people to live independently at home is one of the desired outcomes of social care. The DToC metric reflects the system wide rate of delayed transfers and activity to address it will involve efforts within and outside of the BCF.

For 2018/19, the number of Delayed Transfers of Care in West Sussex are above plan by 5.8%. This in the context challenging targets mandated mid-year which, for NHS delays, required an additional reduction of 18%. However, when compared to 2017/19, there is an overall reduction in Delayed Transfers of Care of 17.7%.

Compared to other Health and Wellbeing Board areas, when expressed as a rate per 100,000 population, the West Sussex rate of Delayed Transfers of Care is higher than the national average and higher than two of the three closest comparator Health and Wellbeing Board areas.

## **3. BCF Planning for 2019/20**

The Better Care Fund Policy Framework for 2019/20 was published on 10<sup>th</sup> April confirming the following details. This is the first guidance document with the Planning Requirements and financial allocations to follow at an, as yet, unspecified date.

- There will be minimal change in 2019/20 which is seen as a transitional year before a new spending period.
- A national review of the Better Care Fund will shape policy for 2020/21.

- No narrative plan required as all information collected via an enhanced planning template with more specific questions.
- Schemes to be keyed to national metrics and integration enablers.
- Increased focus on the High Impact Change Model which is itself under review.
- Includes Winter Pressure Funding paid to local authorities.
- Alignment with local STP plans in respect of integrated care.

Alison Hunter  
**Better Care Fund Coordinator**

**Contact:** Paul Keough, BCF Officer – paul.keough@nhs.net