

Public Document Pack

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16 June 2021

West Sussex Health and Wellbeing Board

A virtual meeting of the Committee will be held at **10.30 am** on **Thursday, 24 June 2021**.

Note: In response to the continuing public health restrictions, this meeting will be held virtually with members in remote attendance. Public access is via webcasting.

The meeting will be available to watch live via the Internet at this address:

<http://www.westsussex.public-i.tv/core/portal/home>

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Agenda

- 10.30 am 1. **Chairman's Welcome and Membership** (Pages 5 - 6)
- Chairman to welcome all to the meeting and ask the Board to note its membership from the start of the new Council (attached).
- 10.35 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.
- 10.40 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.
- 10.45 am 4. **Minutes** (Pages 7 - 16)
- The Board is asked to confirm the minutes of the meeting of the Health and Wellbeing Board held on 28 January 2021.

- 10.50 am 5. **Public Forum**
- The Board invites questions and comments from the public for consideration at the meeting. Please submit questions, at least **three days ahead** of the meeting in order to allow a substantive answer to be given. Contact Erica Keegan on Telephone: 0330 222 6050 (a local call) or via email: erica.keegan@westsussex.gov.uk
- The meeting will be available to watch live via the Internet at this address: <http://www.westsussex.public-i.tv/core/portal/home>
- 11.10 am 6. **Update on the Children First Board** (Pages 17 - 20)
- The Children First Board, being accountable to the West Sussex Health and Wellbeing Board, as a sub-group of the Board, will provide a formal update at its quarterly public meetings.
- 11.25 am 7. **West Sussex COVID-19 Local Outbreak Engagement Board** (Pages 21 - 24)
- The Local Outbreak Engagement Board, being accountable to the West Sussex Health and Wellbeing Board, as a sub-group of the Board, will provide a formal update. This will include an update on the latest position with respect to Covid19 with a further verbal report at the meeting should further information become available.
- The Health and Wellbeing Board is asked to;
- (1) provide feedback on the progress of the West Sussex COVID-19 Local Outbreak Engagement Board (LOEB), since the last quarterly report to the Health and Wellbeing Board in January 2021; and
 - (2) consider how the LOEB could further increase engagement with residents and communities across West Sussex during the ongoing pandemic, recognising the steps within the government's roadmap out of lockdown, and aligning with key messages.
- 11.45 am 8. **Healthwatch West Sussex Annual Report** (Pages 25 - 62)
- The Board will receive the Healthwatch West Sussex Annual Report 2020/21 from the Chief Officer.
- The Health and Wellbeing Board is asked to: -
- (1) promote stakeholder engagement with Healthwatch West Sussex to ensure services are most effective for needs; and

(2) recognise the priorities and to seek updates of progress against these priorities.

12.00 pm 9. **West Sussex Safeguarding Adults Board Annual Report**
(Pages 63 - 92)

The Head of Adults Safeguarding and the Chairman of the West Sussex Safeguarding Adults Board (WSSAB) will present the West Sussex Safeguarding Adults Board Annual Report 2020/21 to the Health and Wellbeing Board.

The Health and Wellbeing Board is asked to: -

- 1) Actively support the West Sussex Safeguarding Adults Board's strategic plan to improve prevention services and the experience of adults in West Sussex County Council who are at risk of abuse and/or neglect.
- 2) Provide feedback on how the Health and Wellbeing Board, as representative of the partner agencies and, within the Collaborative Working Agreement, will contribute to the West Sussex Safeguarding Adults Board's priorities for 2021-22.
- 3) Share learning and improvement which interfaces with Adult Safeguarding.

12.15 pm 10. **Integrated Care System, Place Based Plan**

A verbal update will be provided by the Executive Director, Adults and Health.

12.30 pm 11. **Better Care Fund Monitoring Quarter 3 & Quarter 4 2020-21** (Pages 93 - 100)

This paper summarises performance against the 4 national metrics for Quarters 3 and 4, 2020/21 and provides a brief overview of Better Care Fund (BCF) expectations for 2021/22 pending publication of guidance.

The Health and Wellbeing Board is asked to;

(1) Note the West Sussex performance against the national BCF metrics at Q3 and Q4 2020/21, and the degree to which these are impacted by Covid-19; and

(2) Note the BCF planning expectations for 2021/22.

12.45 pm 12. **Health and Wellbeing Board Work Plan 21-22** (Pages 101 - 102)

The Health & Wellbeing Board is asked to note its work programme for 21/22 as attached.

Members of the Board are requested to mention any items which they believe to be of relevance to the business of the

Health and Wellbeing Board.

If any member puts forward an item, the Board is asked to assess briefly whether to refer the matter to the Chairman to consider in detail for future inclusion.

1.10 pm 13. **Date of next Meeting**

The next meeting of the Board will be held at 10.30 am on 7 October 2021.

To all members of the West Sussex Health and Wellbeing Board

West Sussex Health & Wellbeing Board Membership

West Sussex County Council

- Bob Lanzer (Cabinet Member for Public Health and Wellbeing)
- Amanda Jupp (Cabinet Member for Adult Services)
- Jacquie Russell (Cabinet Member for Children and Young People)
- Duncan Crow (Cabinet Member for Communities Support, Fire and Rescue)
- Keith Hinkley (Executive Director Adults and Health)
- Alison Challenger (Director of Public Health)
- Lucy Butler (Executive Director of Children, Young People and Learning)
- Chris Clark (Joint Strategic Director of Commissioning)
- Emily King (Director of Communities)

West Sussex District and Borough Councils (x3)

- Natalie Brahma-Pearl (Chief Executive, Crawley Borough Council)
- Nigel Lynn (Chief Executive, Arun District Council)
- Catherine Howe (Chief Executive, Adur and Worthing CouncilsCh)

West Sussex Clinical Commissioning Group (CCG) (x3)

- Pennie Ford, Executive Managing Director West Sussex CCG
- Laura Hill (Clinical Chair, West Sussex CCG)
- vacancy

Voluntary Sector (x3)

- Helen Rice (Chief Executive, Age UK, West Sussex)
- Jess Sumner (Chief Executive Community Works)
- Rep for each meeting chosen by VCS and VCSI Alliance

Healthwatch (x1)

- Sally Dartnell (Chief Officer, West Sussex)

NHS (x4)

- Sam Allen, Chief Executive, Sussex Partnership NHS Foundation Trust
- Siobhan Melia, Chief Executive, Sussex Community NHS Foundation Trust
- Marianne Griffiths (Chief Executive, University Hospitals Sussex NHS Foundation Trust)
- Michael Wilson (Chief Executive, Surrey & Sussex Healthcare NHS Trust)

Observers (with speaking rights)

- TBC (Chairman West Sussex Health and Adult Social Care Select committee)
- Annie Callanan (Safeguarding Adults Board Chairman)
- Vacancy (Chairman of Local Safeguarding Children's Partnership (LSCP))

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West Sussex Health and Wellbeing Board

28 January 2021 – At a virtual meeting of the West Sussex Health and Wellbeing Board held at 10.30 am

Present: Cllr A Jupp (Chairman)

Cllr Russell	Dr Laura Hill	Jess Sumner
Lucy Butler	Alex Bailey	Helen Rice
Dr Tony Hill	Nigel Lynn	Sue Livett
Keith Hinkley	Natalie Brahma-Pearl	Annie Callanan
Emily King	Samantha Allen	Cllr Turner
Chris Clark	Sally Dartnell	

Apologies were received from Cllr Crow and Pennie Ford

Part I

11. Chairman's Welcome

11.1 The Chairman welcomed those attending and thanked them for joining the virtual Health and Wellbeing Board Meeting. In welcoming all to the meeting, the Chairman made the following key points;

- The Chairman recognised that since the last meeting of the Health and Wellbeing Board in October, the pandemic had continued to bring unprecedented challenges throughout West Sussex and across the nation. The Chairman stated that this period had been one of the greatest challenges that public health, social care, the NHS, and all our communities had ever faced, whilst continuing to stretch and affect daily lives in many ways.
- The Chairman reassured that there was hope with the arrival of the COVID-19 vaccine, which NHS colleagues were rolling out at great pace, working with Sussex Resilience Forum partners and West Sussex Public Health.
- Vaccinations were currently being administered in West Sussex to the first two priority groups advised by the Joint Committee on Vaccination and Immunisation (this includes residents and staff in care homes for older adults, all those aged 80 years and over, and health and social care workers) via hospital hubs, GP-led vaccination services, and care homes by a roving service that will also support those who are housebound. This week also saw the largest vaccination centre in Sussex open at the Brighton Centre to provide eligible people across Sussex greater opportunity to receive their vaccine.
- The Chairman highlighted again, the importance of working together and supporting each other, putting a 'whole systems approach' at the fore to help everyone through this difficult period,

both locally and nationally. Board members, key systems leaders across the health and care system, continued to maximise their collaborative strength, working together tirelessly to make the most effective use of combined resources to protect and support residents and communities during these most challenging times.

- The Chairman recognised that challenges of the pandemic could not be met without the workforces, volunteers and communities. On behalf of the West Sussex Health and Wellbeing Board, the Chairman expressed her sincere thanks to everyone throughout West Sussex, for their determination, stamina, compassion and commitment to supporting residents and communities during this time; the work and support was noted as simply outstanding.

11.3 In conclusion the Chairman brought Board members attention to the updates that had been circulated that provided the latest information on the COVID-19 Vaccination Programme and West Sussex County Council Communications supporting the COVID-19 response.

12. Declaration of Interests

12.1 There were no declarations.

13. Minutes

13.1 Resolved – that the minutes of the meeting held on 8 October 2020 are approved as a correct record and are signed by the Chairman.

14. Public Forum

14.1 The Board had invited questions from the public for consideration at this meeting. The Chairman informed the meeting that a question had been received asking; 'Bearing in mind that the deadline for vaccinating against Covid-19 adults over the age of 65 in care homes was 24 January, was that objective achieved, please, and did this include the residents of so called extra care homes?'

14.2 The Chairman thanked the questioner for this question and advised that a written response would be provided following the meeting. The Chairman then read out the response, that had been provided by West Sussex NHS Commissioners, as follows:

'Older people in care homes are one of the top priority groups for the COVID-19 vaccine due to their high risk from coronavirus.

In line with the national target to have vaccinated all care homes by the end of the month, we have been working tirelessly to vaccinate both residents and staff across Sussex, As of Monday, we had vaccinated more than 8,381 residents across a total of 454 care homes for older people (equating to 90 per cent of all of our care homes for older people in Sussex) and progress has continued further this week.

Unfortunately, anyone with COVID-19 is unable to receive the vaccine while they are recovering. Some care homes are currently experiencing positive cases of COVID-19 amongst their residents and in these cases the

home or those residents who are unwell have not been able to have their vaccination at this point. The vaccination teams have a clear schedule in place and will be revisiting them 28 days following the positive test.

In Sussex, we have one of the highest numbers of nursing and care homes per capita across the country and so this is a significant undertaking but thanks to the dedication and commitment of our vaccination teams from GP-led services and Sussex Community NHS Foundation Trust we are making excellent progress towards achieving the government target. For all supported living / Extra Care settings, the residents will be invited in to receive their vaccination during attendance at a local GP-led vaccination service, in line with the [national priority groups](#). We are currently working with groups through 1-4.

Residents who are housebound will have a home visit to receive the vaccine to make sure they can receive this vital protection. Sussex Community NHS Foundation Trust is working with local GP practices to understand which residents need this level of service and will be making arrangements for appointments. Vaccinations have started and people will be contacted as soon as an appointment is available. We are asking people not to contact their GP practice - they will be contacted as soon as possible.'

15. Update on the Children First Board (a sub-group of the Health and Wellbeing Board)

15.1 The Executive Director of Children, Young People and Learning, Lucy Butler, presented the report updating on the establishment and work of the newly formed Children First Board chaired by Councillor Jacquie Russell (Cabinet Member for Children and Young People).

15.2 It was reported that the Children First Board had met twice with the inaugural meeting held on 8 October 2020 (notes available on the website appended to this Agenda). Meetings will be held four times a year.

15.3 It was noted that the Children First Board had agreed three main goals:

- Improve outcomes for children and young people who live in West Sussex or who are cared for by West Sussex Children's Services.
- Ensure that all agencies that provide services for children and young people in West Sussex work together effectively.
- Listen and respond to the views of children, young people and their families all the time, particularly when discussions are being held about how services are run and funded.

15.4 It was noted that the first meeting of the Children First Board focussed on how the Board could keep the views of children and young people central to its work.

15.5 Board Members were informed that one of the Children First Board's early priorities was to establish a Children and Young People's Plan having noted that this was a preference of young people.

15.6 The Chairman of the Children First Board, Jacquie Russell (Cabinet Member for Children and Young People) welcomed the positive feedback from partners in developing the Children and Young People's Plan. Board Members were informed that Luke Rodgers (The Care Leaders) had provided an informative session on what outstanding participation and engagement could be and the Children First Board were committed to this outcome so that the voice of children and young people was at the heart of the Children First Board. The Chairman of the Children First Board also explained that the Children and Young People's Plan would link to the West Sussex Joint Health and Wellbeing Strategy 2019 -2024.

15.7 In receiving this report, Health and Wellbeing Board Members requested a timeline for the Children and Young People's Plan to be brought to the next meeting and agreed that this plan would be presented to the Health and Wellbeing Board at the appropriate time.

15.8 The Chairman referred the Board Members to the report's recommendations and the Board formally;

Resolved – that the establishment of the Children First Board and contents of the Children First Board report be noted.

15.9 In thanking the presenters for their report, the Chairman congratulated them on the work that had been achieved so far.

16. West Sussex COVID19 Local Outbreak Engagement Board

16.1 The Interim Director of Public Health provided an update on the progress of the West Sussex Covid19 Local Outbreak Engagement Board (LOEB) since its first meeting in July 2020. It was reminded that the LOEB was established as part of the Government's requirements for the Covid19 National Test and Trace Programme and as a sub-group, is accountable to the West Sussex Health and Wellbeing Board.

16.2 The LOEB was noted as a key part of the governance structure for the West Sussex Local Outbreak Control Plan published on 30 June 2020 which, following review, was in the final stages of a substantial update. It was reminded that the LOEB's Chairman was Councillor Amanda Jupp, Cabinet Member for Adults and Health and Chairman of the West Sussex Health and Wellbeing Board. It was reported that the LOEB had met on a monthly basis since July 2019, bringing together key systems leaders across the County Council and the wider health and social care system, applying its collective strength to reduce the spread of infection and save lives.

16.3 The Interim Director of Public Health outlined the purpose of the LOEB was to provide up to date and key information to the public during the pandemic. This includes the latest data, public health prevention messages, any changes to Government Policy and keep the 'Keep West Sussex Safe Campaign' messaging. It was reported that the LOEB had been working with communication teams from West Sussex County Council and partners such as District and Borough Councils and the NHS to

coordinate a collective communications approach. The Interim Director of Public Health informed the Board that the LOEB would continue to engage with local communities across West Sussex and welcomed any ideas or suggestions from Health and Wellbeing Board Members on how the LOEB could further increase its engagement with communities in West Sussex.

16.4 It was stated that the LOEB also received operational updates, when needed, on the programme of work around Covid19 including the Local Tracing Partnership, Covid19 Testing and the NHS Covid19 vaccination programme which was noted as the responsibility of the NHS.

16.5 The Interim Director of Public Health updated the meeting on the latest Covid19 data, as of today (28 January 2021), as follows:

- West Sussex reached a peak of Covid19 cases two weeks ago and now numbers had begun to fall. The Seven day rate remained at 360 Covid19 cases per 100,000 people. Within this figure there was variance between areas of West Sussex such as the Covid19 cases in Crawley being 561 per 100,000 compared to the Covid19 cases in Mid-Sussex of 265 per 100,000.
- The number of people infected over the age of 60 was reported as 278 per 100,000 people, again with a variance in areas of West Sussex such as 500 per 100,000 people in Crawley and 200 per 100,000 people in Horsham.
- West Sussex figures were similar to the regional South East figures and National England figures.
- The measure of testing how many people were Covid19 positive was reported as a good indicator of cases and spread. At present there was a positivity rate of 10% in West Sussex (1 in 10 people found to be Covid19 positive). This figure was improving across the County.
- It was noted that Hospital Activity had not seen an improvement with substantial numbers of people in hospital in West Sussex and the surrounding area. This had begun to level off but numbers were reported as not falling yet.
- The numbers of deaths saw a peak during the first wave of Covid19, following the first lockdown there was a reduction in the death rate but a substantial increase had occurred in the last two to three weeks and was expected to continue to rise over the next two weeks. This was noted as a huge tragedy for all those involved.

16.6 In receiving the report, Health and Wellbeing Board Members;

- discussed the need for key messaging on the pandemic to be accessible to all residents. It was confirmed that the West Sussex County Council's Communities Team was working with the voluntary sector, Faith Leaders, translators and local people to make sure messages were being heard by those residents that may not otherwise be reached;
- confirmed that Covid19 communications were accessible and had been produced in an Easy Read format;
- agreed that the Director of Communities and the Chief Executive of Community Works would discuss Covid19 communications, outside

of this meeting, to ensure any further messaging avenues were explored;

- noted the severe levels of pressure that Health and Care Services were working under with a determined effort to manage the situation;
- acknowledged the Bereavement Services that were working tirelessly, across the system, providing necessary and fundamental support
- pointed out the impact that the pandemic had on Mental Health in the community and suggested that this impact be tracked alongside transmission rate reporting. This was agreed as an action moving forward.

16.7 Resolved – that the Health and Wellbeing Board;

- (1) acknowledged, with feedback, the progress of the West Sussex Covid19 Local Outbreak Engagement Board since its' inaugural meeting in July 2020; and
- (2) agreed to explore a further increase in engagement with communities across West Sussex, throughout the Covid19 pandemic, to reduce the spread of infection and save lives.

17. Learning Disability Awareness

17.1 The Board received a report from the Learning Disability and Autism Commissioner on behalf of the Learning Disability Partnership Board (LDPB) asking Members to consider what actions each of them could take forward in their respective roles and organisations to improve accessibility and health outcomes for those with Learning Disabilities.

17.2 It was explained that the LDPB works to improve the lives of people with learning disabilities and their families in West Sussex, including people with learning disabilities as equal partners who often lead the way in working to improve life chances for young people and adults.

17.3 The Health and Wellbeing Board received an Easy Read report, (appended to the Agenda and available on the Website) which made written information easier to understand and more accessible for people with learning disabilities by using, short, simple sentences and pictures. The report focused on preventing health inequalities in people with a learning disability and digital inclusion so that nobody is excluded due to a lack of digital access, confidence or skills.

17.4 In receiving the report the Board;

- recognised that life expectancy is considerably lower for people with learning disabilities and the health inequalities needed to be addressed by working together;
- welcomed the report and agreed that the voluntary sector should be included as it has frontline experience and advice on some of the issues as well as possible solutions;

- noted that those with learning disability would be supported through the Covid19 vaccination process through the Covid Partnership Group;
- understood the importance of digital access with provision of equipment and wi-fi;
- pointed out that Healthwatch were in the process of drafting an Autism and Learning Disability Health Plan;
- requested that the Board be kept updated on practical ideas for promoting digital inclusion for people with a learning disability;
- agreed that all respective organisations would develop learning disability inclusion into their plans and share at the next Health and Wellbeing Board meeting on 24 June.

17.5 Resolved – that the Health and Wellbeing Board;

- (1) endorsed the actions of the Learning Disability Partnership Board (LDPB) which works to improve the lives of people with learning disabilities and their families in West Sussex; and
- (2) considered actions each member would take forward in their respective roles and organisations to improve accessibility and health outcomes for those with Learning Disabilities.

18. Creating Healthy and Sustainable Places: A Public Health and Sustainability Framework for West Sussex

18.1 The West Sussex County Council Programme Manager, Public Health and Sustainability presented her report on Creating Healthy and Sustainable Places: A Public Health and Sustainability Framework for West Sussex. The Board was reminded that the council held a responsibility for delivering positive health and wellbeing outcomes for its residents, addressing the wider determinants of health which includes shaping the built and natural environments. This Framework provided public health guidance to decision makers on creating healthy and sustainable places in West Sussex in order to help address health and social inequalities and mitigate negative health impacts and consequences. In presenting the report, the following key points were made;

- A health in all policies approach was identified as an opportunity to reduce health inequalities and maximise sustainability. The environment was recognised as a major determinant of health and wellbeing with the provision of healthy and sustainable places to live, work and play;
- The use of the Framework was seen as a support to influencing policy to deliver healthier lives and a consistent, holistic approach to producing good quality places for communities both now and in the future;
- It was reported that this approach had been endorsed by Public Health England and was noted as innovative and cross cutting with a clear statement on the commitment of the council to healthy and sustainable place making across the County;
- The Framework had gone out for two round of consultation with internal and external partners. This included the residents of West Sussex, all of the District and Boroughs, NHS Estates, Public Health

England, Sport England, two major developers, the Voluntary Sector and Healthwatch.

18.2 In receiving this report Board Members;

- welcomed the Framework as a good piece of work which supported the Health in all Policies agenda that had been aspired to over 3 or 4 years;
- stated that the Board would need to consider how policy could be turned into action and embedded;
- acknowledged the importance of the environmental impact on Health and Wellbeing in helping to deliver positive health outcomes;
- recognised that the Framework was not a statutory document and therefore there was the challenge of influencing planning policy and decision making as well as the challenge of managing compliance from developers;
- noted that the Framework supported the Sport England Active Strategy of producing physical and mental wellbeing, individual development, social and community development and economic development;
- referenced the [Marmot Review Ten Years On](#) which examined Health Equity progress and decline since 2010. Board Members were keen that, although ambitious, the Creating Healthy Places Framework be used to influence positive outcomes and tackle unacceptable health gaps;
- noted the Creating Healthy Places Framework as an important document, despite its non-statutory status, as a resource that can be actively used to help tackle and prevent health inequalities.

18.3 The Interim Director of Public Health thanked the Programme Manager, Public Health and Sustainability for her excellent work. It was stated that the Framework was a forerunner in the Country and Board Members agreed that the Creating Healthy Places Framework is ambitious, collaborative and partnership driven and were keen to act upon the guide to collectively take this work forward and make it part of core business.

18.4 In summing up, the Interim Director of Public Health thanked the District and Borough Councils, who were already using this guidance, despite its non-statutory status and thanked Board Members for their support.

18.5 Resolved – that the Health and Wellbeing Board endorse, support and agree to build upon the work on the Creating Healthy and Sustainable Places: A Public Health and Sustainability Framework for West Sussex.

19. Better Care Fund Monitoring Q1 and Q2 2020

19.1 The Board received the Better Care Fund (BCF) Monitoring Report Q1 & Q2 2020/21 from the Joint Strategic Director of Commissioning, as part of the mandatory governance requirement that the BCF be reported to the Health and Wellbeing Board. The BCF spanned both the NHS and Local Government, joining up health and care services so that people

could manage their own health and well-being and live independently in their communities as long as possible.

19.2 Board Members were notified that National BCF reporting had been suspended as a consequence of the pandemic. The four national conditions for the West Sussex BCF in 2020-21 had been met as well as being compliant in producing an income and expenditure plan for 2020/21.

19.3 In referring to the Comparative BCF Performance data, it was recognised that operations had been undertaken under the extraordinary pressure of Covid19. However joint working had produced marked improvements in Hospital Discharge figures. The average time for a patient to be discharged from hospital was 15 days and, currently, this had reduced to 4 days. This meant that the strategic objective of increasing the numbers of people being supported to be at home had been met.

19.4 The BCF programme would continue next year with national guidance expected Mid-March unless delayed as a result of the pandemic.

19.5 In receiving the report, a question was raised on Telecare expenditure of £860,800 as Districts and Borough Councils could offer this service without profit. It was agreed that the Joint Strategic Commissioner would follow up outside of this meeting.

19.6 Resolved – that the Health and Wellbeing Board;

- (1) noted the national Better Care Fund planning requirements for 2020/21, the associated West Sussex Better Care Fund funding sources and expenditure plan meeting national conditions 1 to 4; and
- (2) noted the West Sussex performance against the national Better Care Fund metrics at Quarter 1 and Quarter 2 2020/21 and the degree to which these are impacted by Covid19.

20. Work Programme

20.1 The Chairman referred Board Members to the Work Programme as attached to the agenda. Members were requested to mention any items which they believed to be of relevance to the business of the Health and Wellbeing Board.

20.2 In receiving the work programme Members;

- Pointed out there had been a Sussex Wide Covid19 Survey which could be used as part of an item on Covid19 Recovery;
- Called for close integration on Health and Social Care items, noting that an initial report on ICS (Integrated Care System) would be provided at the next meeting in June.

20.3 In concluding the meeting, the Chairman announced that Alison Challenger would be joining West Sussex County Council on 1 April 2021 as Director of Public Health. The Chairman passed on her sincere thanks

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to Dr Tony Hill as Interim Director of Public Health who had worked hard in supporting West Sussex at this difficult time.

21. Date of next Meeting

21.1 The date of the next meeting of the Health and Wellbeing Board was confirmed as 24 June 2021.

(Meeting closed at 12.35pm)

Chairman

Report to West Sussex Health and Wellbeing Board

24 June 2021

Report title: Update on the Children First Board (a sub-group of the Health and Wellbeing Board)

Report by: Lucy Butler, Executive Director Children, Young People and Learning

Summary

This report provides a brief update on the work of the Children First Board formed in October 2020.

Recommendation to the Board

The Health and Wellbeing Board is asked to;

- (1) Note the contents of this report.
-

Relevance to [Joint Health and Wellbeing Strategy](#)

1. Starting Well
2. Living and Working Well

1 Background and context

- 1.1 The Children First Board is chaired by Cllr Jacquie Russell, Cabinet Member for Children and Young People. Meetings are held four times a year, and the inaugural meeting was held on the 8 October 2020. There have been two subsequent meetings (on the 14 January and the 3 April) since the first report made to the Health and Wellbeing Board.
- 1.2 The Board is made up of a wide range of organisations and groups in West Sussex – including schools, police, health partners, voluntary and community sector. Importantly, there are also four young people on the Board, they are supported by the Voice and Participation team and all notes and papers for the Board are written in as simple and clear a style as possible.
- 1.3 The Children First Board has agreed three main goals;
 - Improve outcomes for children and young people who live in West Sussex, or who are cared for by West Sussex’s children’s services.

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- Ensure that all agencies that provide services for children and young people in West Sussex work together effectively.
- Listen and respond to the views of children, young people and their families all the time, particularly when decisions are being made about how services are run and funded.

1.4 To achieve these goals, the Children First Board will;

- Have oversight of the key strategic planning for children and young people's services, especially when these plans affect more than one agency or service.
- Always remember that our children and young people have the right
 - To be kept safe by everyone, and learn how to keep themselves safe
 - To be supported to be as healthy as possible – both physically and emotionally
 - To be given the skills to be successful in adult life.

1.5 The Board will also;

- Decide what the main priorities are for children and young people.
- Agree how these will be addressed.

2. Update on progress

2.1 One of the Board's early priorities is the development and production of a Children and Young People's Plan. The Board has agreed an approach and style for this Plan, having previously established that this was the young people's preference. There have been a number of workshops with partners and key stakeholders to develop the content of the Plan, and a draft will be submitted to the Board for discussion and approval at its July meeting.

2.2. To inform the production of the Children and Young People's Plan, at its second meeting, the Board reviewed information held by a range of organisations and services about children and young people's views. Jenny Hacker, Public Health, talked about the importance of making links to the Health and Well Being Strategy, the Board endorsed this approach.

2.3 In response to a query from our young people's representatives about what we know about the impact of Covid-19 on West Sussex's children and young people, public health led a useful presentation. The Board noted that children are likely to be disproportionately affected by measures to contain the virus and that deprivation and poor mental health were worsening factors. More positively, some children have been able to increase their resilience and learnt new skills.

2.4 Emotional wellbeing and good mental health for our children and young people is a key priority for the Board. The Board has established an Emotional Wellbeing and Mental Health sub-group whose primary focus will be to develop and oversee implementation of a place-based improvement and delivery plan.

The first meeting is in late June, and the sub-group will meet every two months thereafter.

3. Consultation, engagement and advice

- 3.1 The Board has a very strong ethos of engagement and participation. The first meeting of the Board (held on the 8 October) focussed on thinking about how the Board keeps the views of children and young people central to its work. The young people's representatives gave two very helpful and informative presentations. It was agreed that it was important to make sure that as wide a range of views from children and young people as was possible was considered, and that the Board considered the information about views already held in many groups and organisations.
- 3.2 The Board has had a powerful and informative session with Luke Rodgers (The Care Leaders) on what outstanding participation and engagement looks like – the Board remains very committed to working toward this outcome.

Contact:

Susan Tanner, Assistant Director – Children's Commissioning
susan.tanner@westsussex.gov.uk
Tel: 033 022 22002

Appendices None

Background papers None

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Report to West Sussex Health and Wellbeing Board

24 June 2021

West Sussex COVID-19 Local Outbreak Engagement Board

Report by: Alison Challenger, Director of Public Health

Summary

This report provides a quarterly update on progress of the West Sussex COVID-19 Local Outbreak Engagement Board.

The Board was established as part of the Government's requirements for the COVID-19 National Test and Trace Programme and is accountable to the West Sussex Health and Wellbeing Board, as a sub-group of the Board, providing formal updates at its' quarterly public meetings.

Recommendation(s) to the Board

The Health and Wellbeing Board is asked to;

- (1) Provide feedback on the progress of the West Sussex COVID-19 Local Outbreak Engagement Board (LOEB), since the last quarterly report to the Health and Wellbeing Board in January 2021.
- (2) To consider how the LOEB could further increase engagement with residents and communities across West Sussex during the ongoing pandemic, recognising the steps within the government's roadmap out of lockdown, and aligning with key messages.

Relevance to [Joint Health and Wellbeing Strategy](#)

West Sussex Public Health's COVID-19 response aims to minimise the impact of the virus on the population of West Sussex by controlling the COVID-19 rate of reproduction (R), reducing the spread of infection and saving lives. In line with the West Sussex Joint Health and Wellbeing Strategy priorities, this preventative approach also aims to improve the overall health outcomes of West Sussex residents and reduce inequalities, supporting our local population during these challenging times.

1 Background and context

- 1.1 The West Sussex member led Local Outbreak Engagement Board (LOEB) has been established as a sub-group of the West Sussex Health and Wellbeing Board to provide political ownership and public-facing engagement and communication for outbreak response during the COVID-19 pandemic.

Agenda Item 7

- 1.2 The LOEB is a key part of the governance structure for the [West Sussex COVID-19 Local Outbreak Control Plan \(LOCP\), published on 30 June 2020](#). The Director of Public Health drives this local plan through the West Sussex COVID-19 Health Protection Board in collaboration with the West Sussex County Council (WSCC) Strategic Management Group (Gold Command) and the LOEB.
- 1.3 The LOEB has been chaired by Amanda Jupp, Chair of the West Sussex Health and Wellbeing Board and Cabinet Member for Adults and Health from July 2020 to May 2021. Following local Elections on 6 May 2021, key appointments to the Council's Cabinet were confirmed on 21 May, after Full Council. Some changes took place including a new portfolio for Public Health and Wellbeing for which Cllr Bob Lanzer is the Cabinet Member. Consequently, Cllr Lanzer is appointed as Chairman of the West Sussex Health and Wellbeing Board and the LOEB, taking this forward as part of his portfolio responsibilities.
- 1.4 The LOEB looks forward to welcoming Cllr Lanzer to his new role and would like to take this opportunity to express their sincere thanks to Cllr Jupp for driving the Board forward throughout the pandemic.
- 1.5 The Board meets on a monthly basis and has met ten times during the period July 2019 to May 2021. The next meeting is scheduled for Thursday, 17 June 2021.

Local Outbreak Engagement Board Progress Update

- 1.6 The LOEB continues its role in bringing together key systems leaders across the County Council and the wider health and social care system, applying its collective strength and resources to reduce the spread of infection and save lives across the county.
- 1.7 Standard agenda items remain focused on providing Board members with updates across important areas including a COVID-19 update by the Director of Public Health, COVID-19 data overview, and communications and engagement activity.
- 1.8 Further agenda items during the period February to May 2021, have included the Asymptomatic Testing Programme for West Sussex, COVID-19 Vaccination Programme, Local Tracing Partnership (LTP), early years, schools and university, preparations for Election, adult social care, and future events.
- 1.9 This approach has enabled a greater 'deep dive' into available data and knowledge, particularly for early years, schools and university, and adult social care, enabling Board members to gain greater understanding of the impact of COVID-19 in these settings and provided the opportunity for further clarification questions to subject matter experts presenting the updates.
- 1.10 With regards to future events, it was highlighted to the Board that event planning is becoming an increasingly busy area for the WSCC Public Health team as restrictions ease, with the team working closely with district and borough council colleagues to ensure events are COVID-secure. It was also acknowledged that Councillors were likely to receive enquiries from their

residents and communities regarding events, therefore signposting to information and advice on events was suggested as a useful addition to be included in the regular WSCC Members Bulletin.

- 1.11 In preparation for Elections on 6 May, Board members emphasised concerns regarding ensuring COVID-secure polling stations across the county to reduce the spread of the virus. It was recognised that a pan-Sussex approach to public health guidance for Elections was required due to the Police and Crime Commissioner Elections taking place at the same time (which were across Sussex) as local Elections. Following this, the WSCC Public Health team worked with public health colleagues across Sussex to develop guidance and share with democratic services colleagues across these areas. The WSCC Communications Team provided further support by communicating key public health messages around safe voting procedures to further support this approach.
- 1.12 At its most recent meeting in May 2021, WSCC Head of Communications and Engagement, reported that a wide range of COVID-19 communications activity continues to take place across multiple media channels. This includes out of house advertising with a focus on testing, including banners to promote home testing at collection points, complemented by geo-targeting social media messaging, and a large focus on COVID-19 vaccinations, particularly with communities experiencing health inequalities. Focuses include promoting quiet vaccination sessions, free transport, assurance over the Oxford/AstraZeneca vaccine, and encouraging attendance at second dose appointments. There is also a weekly feature in the WSCC Residents' newsletter regarding vaccinations; the newsletter now has nearly 200,000 subscribers (data as at 30 April 2021).
- 1.13 Additionally, communications messages supported Mental Health Awareness Week during 10-16 May.
- 1.14 With regards to forward planning, social media announcements and reminders will continue to go out from the WSCC Communications Team to reinforce positive behaviours to prevent the spread of the virus, in line with public health guidance, government announcements, and key messages at each step of the government's roadmap out of lockdown.

Key Policy Changes

- 1.15 On Monday, 22 February 2021, the Prime Minister announced the publication of the 'COVID-19 Response – Spring 2021' which set out the roadmap out of the current national lockdown for England and how the government will continue to protect and support citizens across the UK.
- 1.16 Setting out 4 key steps for the easing of restrictions and activities, Steps 1-3 have taken place in line with proposed dates, however, on Monday, 14 June, the Prime Minister announced that from Monday, 21 June, there will be a 4-week pause at Step 3 of the roadmap due to the exponential growth of the Delta variant spreading across England. After 2 weeks, the data will be reviewed by the Government to ascertain if risks have reduced. It is expected that England will now move to Step 4 on Monday, 19 July. Consequently, Step 3 restrictions will remain in place during this time.

Agenda Item 7

- 1.17 The LOEB will continue to support the delivery of national messages at local authority level, using its voice to engage with residents, local communities, businesses, and key partners, to help to keep West Sussex safe.

2 Proposal details

- 2.1 The purpose of this paper is to provide a formal quarterly update to the West Sussex Health and Wellbeing Board on the progress of the West Sussex COVID-19 Local Outbreak Engagement Board (LOEB).
- 2.2 Views are sought from the Health and Wellbeing Board on how the LOEB could further increase engagement with residents and communities across West Sussex during the ongoing pandemic, recognising the steps within the government's roadmap out of lockdown, and aligning with key messages.

3 Consultation, engagement and advice

- 3.1 Not applicable.

Contact: Alison Thomson, Public Health Lead – Partnerships Tel. 0330 222 4132
Email: alison.thomson@westsussex.gov.uk

Appendices: None

Background papers: None

Report to West Sussex Health and Wellbeing Board

24 June 2021

Healthwatch West Sussex Annual Report 2020/21

Report by: Sally Dartnell, Chief Officer Healthwatch West Sussex

Summary

Presentation of the key points from Healthwatch West Sussex Annual Report 2020/21 including:

- The way we work - to support residents and our health and care partners
- Examples of work from the year
- Capacity concerns
- Future priorities

Recommendations to the Board

The Health and Wellbeing Board is asked to;

- (1) promote stakeholder engagement with Healthwatch West Sussex to ensure services are most effective for needs; and
 - (2) recognise the priorities and to seek updates of progress against these priorities.
-

Relevance to [Joint Health and Wellbeing Strategy](#)

The insight from Healthwatch West Sussex is shared for inclusion in the Joint Health and Wellbeing Strategy

1 Background and context

- 1.1 We are the independent West Sussex champion for people who use health and social care services. We're here to find out what matters to people and help make sure their views shape the support they need. Our work informs strategic development at neighbourhood, placed and at a Sussex level.

Contact: Sally Dartnell, Chief Officer Healthwatch West Sussex,
sally.dartnell@healthwatchwestsussex.co.uk 07960 280822

Appendices:

Appendix 1 Presentation Paper

Appendix 2 Annual Report 2020/21

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Healthwatch West Sussex Annual Report

2020-21

On Equal Terms
- Then and Now



Sally Dartnell - Chief Officer

“Local Healthwatch have done fantastic work throughout the country during the COVID-19 pandemic, but there is more work ahead to ensure that everyone’s views are heard. COVID-19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people’s lives.”

Sir Robert Francis QC, Chair of Healthwatch England

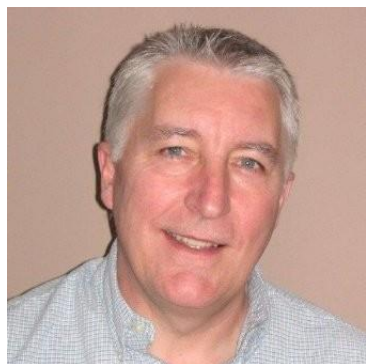


Agenda Item 8
Appendix 1

“Previous technology and community partnership investment made it possible for us to swiftly adapt to remote working with other community and voluntary organisations so we understood peoples’ health and wellbeing needs in real time. ...

... We will continue with challenging but supportive conversations to make sure the changes are right to meet needs”

Steve Cooper, Chair of Healthwatch West Sussex



Here to make health and care better

The independent champion for people who use health and social care services. To understand what matters to local people, help make sure views are heard and shared with those who have the power to make change happen.

Helping you to find the information you need

We help people find the information they need about services in their area. This has been vital during the pandemic with the ever-changing environment and restrictions limiting people's access to health and social care services.

Our goals



1 Supporting you to have your say

We want more people to get the information they need to take control of their health and care, make informed decisions and shaping the services that support them.



2 Providing a high quality service

We want everyone who shares an experience or seeks advice from us to get a high quality service and to understand the difference their insight made.



3 Ensuring your views help improve health and social care

We want more services to use your experiences and views to shape the health and care support you need today and in the future.

Highlights from the year

Reaching out



We heard from
17,379 people
about their experiences of health and social care.

We provided advice and information to
3,000+ people

Responding to the pandemic



We engaged with and supported
2,700+ people
during the COVID-19 pandemic

Ensuring Health and Social care that works for you



90 volunteers

helped us to carry out our work. In total, they contributed over 2,400 hours. With many more people offering input and support.

9 staff

equivalent to 6 full time people with the team working voluntarily over and above their hours during the year because of the public demand.

£315,889 in funding

Received from our local authority in 2020-21

£114,275 in-kind value

From the work of our volunteers and independent board. As a not-for-profit Community Interest Company, all of the income from our social enterprise work is also reinvested in projects for West Sussex.

Making a difference to care



We published
130 reports

about the improvements people would like to see to health and social care services. From this, we escalated 62 concerns (some small and other effecting many) and made over 30 recommendations for improvement.

85% of recommendations

we made last year have been acted upon, at the point where we reviewed progress.



Theme one: Dentistry



Then: access to NHS dental services

“Thanks to people across West Sussex sharing their experiences of dentistry we were able to help commissioners adapt to sudden changes in need and ensure patients had access to simple, clear information about their treatment.”



Now: ongoing dentistry issues

West Sussex insight contributed to the national picture for NHS England.

Locally we focussed on trusted information via websites working with the Local Dental Committee early in the pandemic to get a **checklist out to help local practices**. This has been shared across the region to support other areas.



‘Thank you for the advice, it’s helped me to find the strength to continue to seek treatment and find a dentist (after 15 calls) that is willing to send an application for treatment, which is likely to be in August.’

West Sussex Resident (June 2020)

Theme two: Mental Health



Then: Review of Mental Health Plans

we raised concern over a consultation that offered only one option as a solution and sought to create a more robust and meaningful engagement ...
... to make sure people had the chance to express their views more fully, we took part in the public events and were part of the group that reviewed the findings



Now: Revised plans

The Trust's revised business case (presented to HASC earlier in 2021) demonstrated how peoples' concerns had been heard and contributed to the subsequent proposal for change.

...Effective engagement and consultation is key to getting services right for people and for building trust and confidence



Understanding what patients have said as to why shared space works is important on a number of levels.'

Katrina, Locality Manager for Healthwatch West Sussex

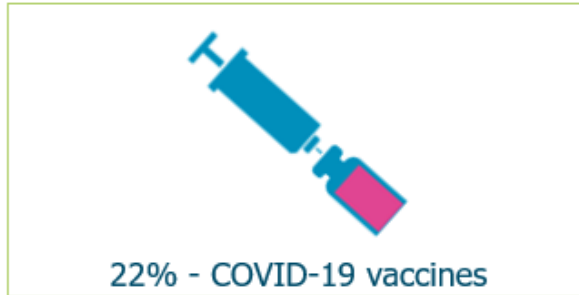


Responding to COVID-19

Top four areas that people have contacted us about:

This year we supported over 750,000 times by:

- Providing up to date, local advice
- Linking people to reliable up-to-date information
- Supporting confidence in the vaccine programme roll-out
- Providing a safe space for people to talk though the impact of paused cancer and planned services and separations from loved ones in care homes
- Helping people access the health and social care services they need.



Independent Health Complaints Advocacy

Complaints handling has changed with investigations and follow-up actions often having to be suspended as staff were redeployed. In the early stages of lockdown 1, our team proactively reviewed our service information and aligned to the new NHS England complaints framework.

The trend of increased case complexity continues. We are also seeing increasing demand. If this trend continues at the current referral rate we will exceed our resources.

We will monitor with commissioners to make sure people are not denied support. Hearing and addressing complaints also results in valuable learning for the health and social care systems.

- 1** Added to our self-help [information](#) to reflect changes to local resolution meetings which have moved to being held virtually.
- 2** Both complexity and number of cases has intensified. Cases often involve multiple agencies, safeguarding or serious incidents.
- 3** Valuable Lessons: For example, our support meant a resident's mental health care complaint resulted in six recommendations to improve services.

In August, we published [An Annual Reflection for the Service for 2019-2020](#) with Independent Health Complaints Advocacy Service case studies and learning.



Working with Healthwatch England for national integrated innovation

It is essential to determine how well specific people's health and social care needs are met. Healthwatch West Sussex are privileged to be **one of five local Healthwatch nationally** funded to develop a national **Integration Index** toolkit for this.

We used set health and care experience profiles to look at the needs of:

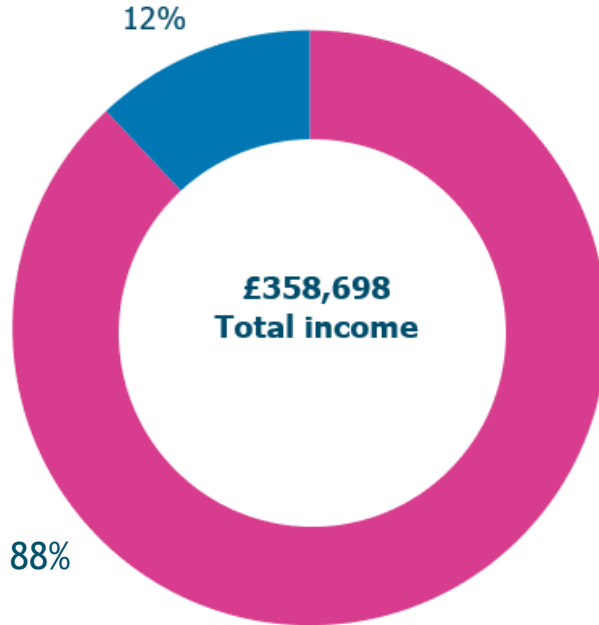
- Children and young people with mental health support needs who are becoming adults
- Black men with a number of health needs including a recent experience of cancer.

We were able to reflect on national and local expectations, research, guidance and good practice, before approaching people to explore with them their own experiences against this context.



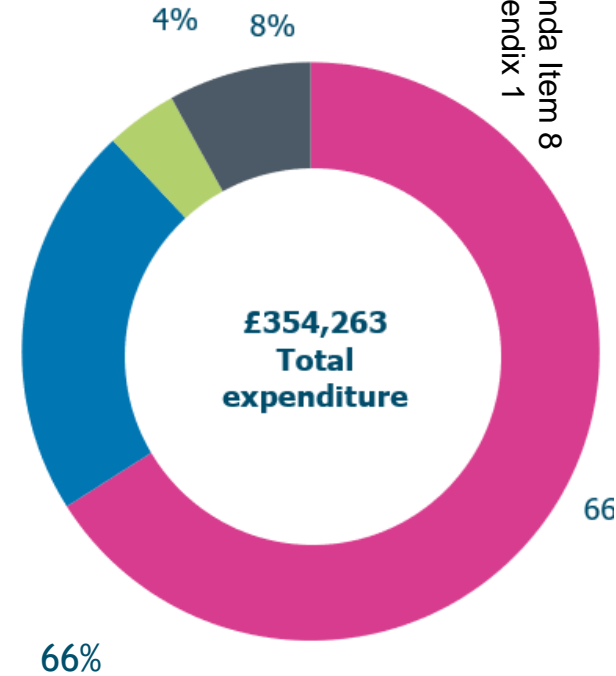
Finances

Income



Expenditure

- Delivering Core Healthwatch
- IHCAS provision
- C.I.C investment projects in West Sussex communities
- C.I.C. costs

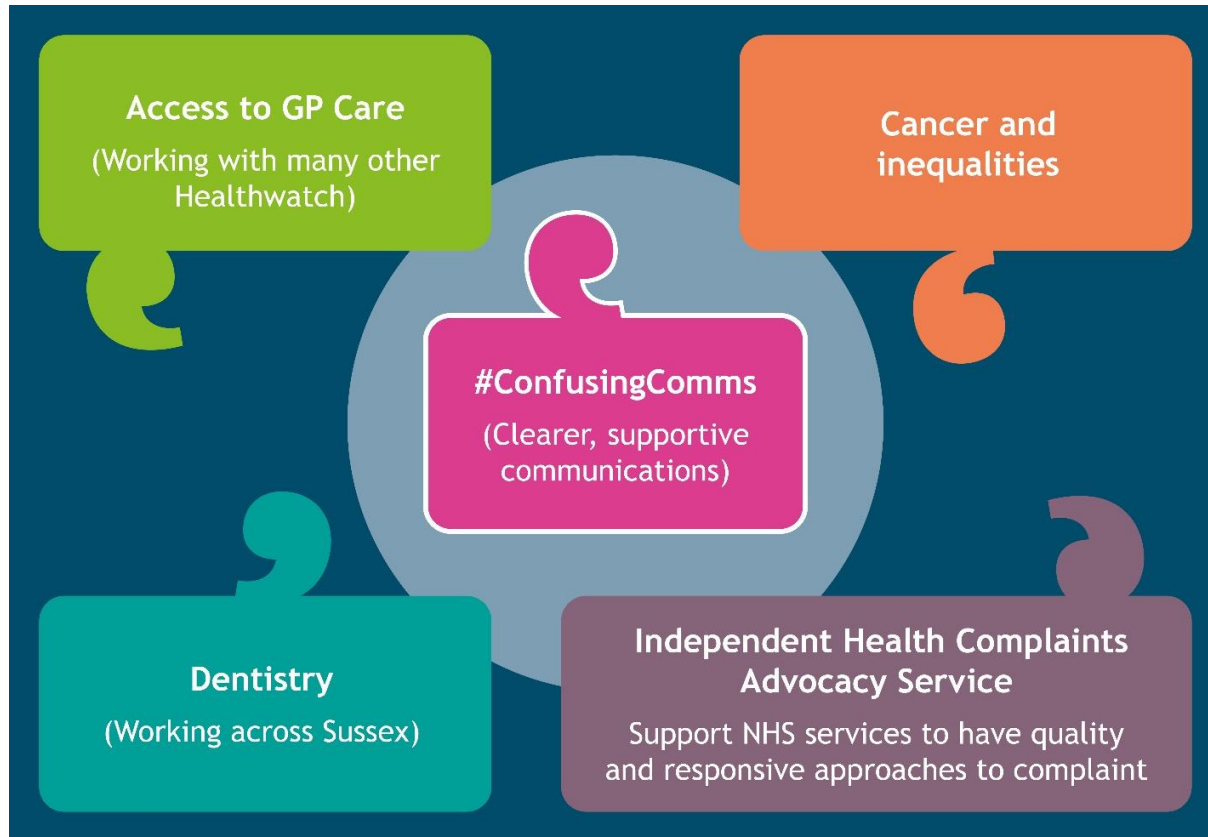


Appendix 1
Agenda Item 8

- One of the lowest funded Healthwatch in the country per head of population
- Innovative in seeking additional funding and reinvesting Social Enterprise income
- We seek to support everyone but demand exceeds our resources and this means raising concerns now.
- **£1 of Local Authority funding : £1.48 Healthwatch West Sussex C.I.C. spending, investment and volunteering**



Future priorities



Tackling unfair health differences will need those in power to listen. To hear the experiences of those facing inequality and really understand the steps that could improve people's lives, and then to act on what has been learned.

Martin Phillips, Independent Non-Executive Director for Healthwatch West Sussex

How to get in touch and be involved

Please contact us at helpdesk@healthwatchwestsussex.co.uk
or call

0300 012 0122

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



@Healthwatchwestsussex



@Healthwatchws



On equal terms

Then and now

Healthwatch West Sussex Annual Report 2020-21



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Message from our Chair

Following the Prime Minister's national directive our face-to-face engagement ceased in March 2020, and we moved rapidly to a new and flexible plan. We refocused our immediate priority on COVID-19 and any hot topics arising from peoples' issues and experiences.

Adapting and working with others:

Previous technology and community partnerships investment made it possible for us to swiftly adapt to remote working with other community and voluntary organisations so we understood peoples' health and wellbeing needs in real time.

One example was our working with the *Local Maternity Partnerships* when pregnant women were struggling to get to post-natal appointments and scans. The outcome was free patient transport for those affected. Similarly, after hearing women express anxiety and confusion about when birthing partners could be with them, we were able to secure and promote clearer information.



Thank you for bringing this to our attention. We need to ensure we have the right communication going out and it looks like we need some additional communication.

Sean, Sussex Maternity System Lead

We also continued to work on priorities not related to the pandemic: An example being what we heard from people suggesting long delays in the adult neurological services. People who were referred for an Autism Assessment shared their experiences that they were unable to get access to the support they needed suggesting that autistic adults were falling through the gaps without the right support in the community.

We've since worked with community partners, and autistic people to fully understand lived experiences and this is helping shape a new *Sussex Autism and Learning Disability Strategic Health Plan*, which will underpin the transformation of support for West Sussex residents living with a learning disability and/or autism.

We take every opportunity to influence positive change. Martin, one of our Board Directors has spoken with senior leaders about our concern over the autism gap and from April 2021 there should be additional resources and changes to support better health and lived outcomes for those living with autism. We will continue with these and many other challenging but supportive conversations to make sure the changes are right to meet needs.



Steve Cooper, Chair from April 2021

About us

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We, Healthwatch West Sussex are the independent champion for people who use health and social care services in the county. We are here to understand what matters to local people, to help make sure their views are heard and shared with those who have the power to make change happen.

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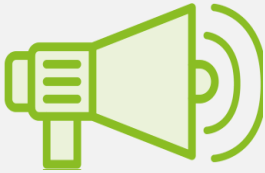
“Local Healthwatch have done fantastic work throughout the country during the COVID-19 pandemic, but there is more work ahead to ensure that everyone’s views are heard. COVID-19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people’s lives.”

Sir Robert Francis QC, Chair of Healthwatch England

Highlights from our year

Find out about our resources and how we have engaged and supported people in 2020-21.

Reaching out



We heard from

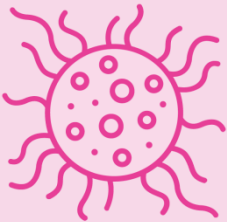
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Theme one: Then and now Dentistry



Then: access to NHS dental services

Thanks to people across West Sussex sharing their experiences of dentistry we were able to help commissioners adapt to sudden changes in need and ensure patients had access to simple, clear information about their treatment.

Prior to the pandemic increasingly people told us they couldn't get an appointment within a reasonable time frame, particularly in specific parts of our county.

We found that the quality of information on dentists' websites was out of date. Nationally, Healthwatch England undertook a programme of work in partnership with local Healthwatch to get the NHS website up to date and to support dentists to keep their information up to date. In January 2020 this programme of work led to the Department of Health and Social Care making it a mandatory part of the contract for dentists to keep the NHS website up to date and check it on a monthly basis. This will substantially improve the information available to patients trying to find a dentist.

It was also identified that some part of our society were missing out on NHS dental care. In particular, people living in care homes. Healthwatch England convinced the Care Quality Commission to investigate in 2018. As a result, they published the 'Smiling matters' report in 2019, which led to a range of immediate changes, including training for care home staff on oral care, and providing free toothbrushes and toothpaste.



Now: ongoing dentistry issues

Thanks to people sharing their experience of dental concerns during the pandemic, we pushed for a Sussex and national focus on dentistry. This has led to a campaign to ensure that the issue of dentistry is right at the top of the *worry list* for NHS England. Making this issue a political and policy priority has been essential to ensuring the issues continue to be addressed.

Between June – October 2020 over 140 people shared their experience of dentistry with us, over 6 x higher compared to the previous five months. Many more people shared issues on social media about dental care issues throughout this time.

The main issues included:

- Difficulties in booking emergency and routine care appointments.
- Priority being given to private patients.
- Inaccurate, out of date and confusing information about availability of treatment.

People told us that when they were unable to access a dentist, they experienced anxiety, worsening problems requiring further treatment, pain and fear and inconvenience. Some people even told us about their experiences where lack of access to care pushed them to take steps which put their own health and wellbeing at risk.



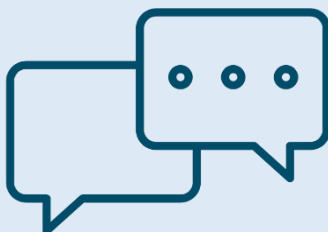
'Thank you for the advice, it's helped me to find the strength to continue to seek treatment and find a dentist (after 15 calls) that is willing to send an application for treatment, which is likely to be in August.'

West Sussex Resident (June 2020)

The lack of accurate (or in some cases any) information we found when we looked at local dentists' websites was raised with the Local Dental Committee early in the pandemic and we've worked together to get a checklist out to help local practices. This has been shared across the region to support other areas.

In the face of the ongoing pandemic we called on the local commissioners to make more resource available to the dental sector to help them clear the backlog and have had limited success (with two, reducing to one practice offering additional hours). Nationally, more availability is being championed and Healthwatch England has also asked the Government and the NHS to review the cost of NHS dental treatments, as in the current global climate the reality is a lot of people have lost their jobs and have less money, but we believe everyone should be able to access the dental treatment they need.

Share your views with us



If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch is here for you.



www.healthwatchwestsussex.co.uk



0300 012 0122



helpdesk@healthwatchwestsussex.co.uk



Theme two: Then and now Getting mental health care right



Then: mental health beds in West Sussex

For people, whose mental health has deteriorated so much that they need to spend time in hospital, it is vital to create a safe and comfortable space for them to recover to be able to return home.

At the end of 2014, we needed to speak up for people who were inpatients at Langley Green Hospital (one of the County's mental health hospitals) because we were concerned over what we had seen and heard from patients. We have revisited the hospital a number of times since and found much had improved.

Since then, the Care Quality Commission has reported on non-compliance with single-sex wards. We were asked to comment on a proposal document, readied for public consultation on the reconfiguring mental health beds in West Sussex and in Autumn 2018, we raised concern over the authenticity of a consultation that offered only one option as a solution and sought to create a more robust and meaningful engagement process.

After delaying the consultation to make sure people had the chance to express their views more fully, we took part in the public events and were part of the group that reviewed the findings.



Now: revised plans for mental health hospital stays

From our involvement it is clear that both patients and staff find it beneficial to have communal space for all to come together, rather than same-sex wards only. Furthermore, the scarcity of appropriate hospital beds across England, means many people find themselves in hospitals far away from their family, friends and local community and failing to meet the travel and communication needs that are vitally important so people can stay connected.

The arrival of the pandemic delayed the publication and progress of the redesign of West Sussex mental health services, and has placed even more pressure on resources to support people living with declining mental health and those who face a mental crisis.



'We recognise for some people there will be strong religious or cultural reasons for single-sex accommodation, and we do not wish to diminish the need for sensitive and appropriate single-sex rooms and areas. Understanding what patients have said as to why shared space works is important on a number of levels.'

Katrina, Locality Manager for Healthwatch West Sussex

In early 2021, Sussex Partnership NHS Foundation Trust, responsible for mental health services in Sussex, presented their proposal for changing in-patient provision across West Sussex, to the West Sussex Health and Adult Social Care Scrutiny Committee responsible for reviewing health decisions. The Trust's revised business case demonstrated how peoples' concerns had been heard and contributed to the subsequent proposal for change.

As a result, the Committee recommended that the Trust look at extra resources in and around Chichester, in the meantime the development of a centre of excellence moves forward.

Furthermore, the Senior Lead for improvement mental health in Sussex, recognised our continued challenge around the need to consider transportation and the ease with which patients' families and friends can stay in touch; we are calling for the routine '*booking in*' hospital process to include travel and communication.

Access to updates on the wellbeing of patients, and limited communication with patients in hospitals has been a feature for many families during the pandemic, and evidence shows this type of disconnection hampers recovery.

Effective engagement and consultation is key to getting services right for people and for building trust and confidence in the NHS.



To find out more > > >

[Visit the West Sussex Health and Scrutiny Committee page](#)



Responding to COVID-19

Healthwatch plays an important role in helping people to get the information they need about health and social care. That role has proved especially key through the pandemic. The insight we gather from people is shared nationally, with Healthwatch England, and locally with partners to ensure services are operating as effectively as possible during the pandemic. Information shared is anonymous and used to highlight themes.

This year we supported over 750,000 times by:

- Providing up to date, local advice on the COVID-19 response
- Linking people to reliable up-to-date information
- Supporting the COVID-19 vaccine programme roll-out
- Providing a safe space for people to talk through the impact of paused cancer services and separations from loved ones in care homes
- Helping people access the health and social care services they need.

Top four areas that people have contacted us about:



22% - COVID-19 vaccines



20% - GP-led services



15% - Dental care



14% - Hospital care

Improving communication on B12 deficiency treatment



Early in the pandemic, we heard repeatedly from people who were having trouble getting the vitamin B12 injections they needed. In all, 80 people shared their experience. We focused on supporting GPs to provide people with clear, consistent and appropriate advice and information. Refreshed guidance was given to GPs and we shared this [information](#) in our [FAQs](#) articles on our website to help address people's concerns.

We also supported a local GP practice to reflect on their work undertaken to review patients B12 treatment needs and who can safely be moved to oral medication during the pandemic, as this was not communicated well in their own information.



Contact us to get the information you need

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Responding to COVID-19 by enabling community voices to be heard

We have documented our communities' experiences of the pandemic. We have recorded the **compassion, dedication, innovation, partnership and strong leadership** within communities and lodged these as historical evidence with the West Sussex Records Office.

At the time of the first lockdown, we were hearing how proactively many of our community and voluntary organisations were responding to support residents. We partnered with Arun and Chichester Voluntary Action, Horsham Voluntary Sector Support, Mid Sussex Voluntary Action, and Sussex Community Foundation, captured information through a survey, undertook semi-structured phone and online conversations, which were developed into case studies and a number of reports.

Together, we looked at how voluntary organisations and community groups responded, current working, financial implications, and future planning during the first and second lockdowns of the COVID-19 pandemic.

Although organisations and groups had to stop delivering their support in their usual way, they continued to support staff, volunteers and local people. The voluntary and community organisations responded and adapted with **speed and efficiency**, redeploying resources and moving swiftly to remote working and support.

Voluntary and Community Voice - COVID-19

Aim of Project
Listening to your voice
Partnering with Horsham Voluntary Sector Support, Mid-Sussex Voluntary Action, Arun and Chichester Voluntary Action and Sussex Community Foundation. Voluntary and Community Sector Organisations were given the chance to reflect on their COVID-19 experiences - challenges, solutions, financial impact, and future planning - and the impact this has had on the people being supported, and those providing support and the organisation.
Methods used:
1. An online resilience survey (of 21 questions)
2. Semi-structured conversations with organisational leads (both telephone and virtual)
3. Development of independent case studies (x 58) and a series of reflective reports.

The Learning
The project captured 149 reflective accounts: 58 conversations and case studies | 91 resilience surveys
Key Findings/Learnings:
The project highlighted:
• compassion
• dedication
• innovation
• partnership working
• strong leadership
and although many Voluntary and Community Sector Organisations's stopped delivering services in their usual way, they continued to support staff, volunteers, and local people and communities.
The sector responded with speed and efficiency redeploying and setting up remote working for staff and operations, ensuring that this complied with appropriate policies and procedures.
Conclusion
Recognising the sector as an important partner in defining and delivering wider and cost-effective solutions for addressing the issues arising from the determinants to health, supporting social prescribing, and statutory organisations. Urgent investment and easy to access grants are needed to meet increased demand for services, new ways of working and technology.
It is important to add that the work carried out by the sector is promoted and acknowledged - as it *champions* what is happening on the ground within the communities servicing local people. Recognition is needed as the sector supports many NHS and Public Health projects and messages - *social prescribing, wellbeing, loneliness, isolation.*
This vital contribution needs to be recognised appropriately and financially to ensure that demand does not impact on statutory services adversely.
There is an urgent need for Voluntary and Community Organisations to self promote and shout about their vital work and showcase the difference they make.
"Day Break services stopped; it is really hard looking after someone in the advanced stages of dementia alone."

Our Reports
Voluntary Sector Response to COVID-19 in:
• Horsham - <https://doi.org/10.1111/2047-2018.12111>
• Mid Sussex - <https://doi.org/10.1111/2047-2018.12112>
• Arun & Chichester - <https://doi.org/10.1111/2047-2018.12113>

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www.healthwatchwestsussex.co.uk
Author: cheryl.barry@healthwatchwestsussex.co.uk

Poster for the International Social Prescribing Conference, March 2021



They are the unsung heroes of the COVID-19 crisis along with the many thousands of local people who have supported their communities.

Community and Voluntary Support organisation, in Mid Sussex

With health and care services emerging out of pandemic restrictions and moving to restoring services and looking at the need to level-up society by removing the barriers to health inclusion, there are significant learning points from this work. The voluntary and community sector needs to be supported to self-promote. **There is a need to be acknowledged as an asset to the wider health and care provision and be funded to continue to operate. Without the sustainability of this sector, it will be inevitable that demand will impact on statutory health and care services adversely, to a point of crisis.**

Such organisations have supported many NHS and public health projects and messages. They are vital as champions of what is happening within communities. Without the sustainability of this sector, it is inevitable that there will be an adverse impact on demand for statutory services.



‘Easy access to grants and investing in support through voluntary and community partners is urgently needed to meet the suppressed demands that are starting to be felt across the NHS, so that further new ways of working and technology can be realised.’

Cheryl, Strategy Community Partnership Lead for Healthwatch West Sussex

Best Interest Decision Making Toolkit

Our toolkit for supporting health and care professionals working with people who have cognitive impairment, is designed to achieve better outcomes and to support professionals in secure decision-making.

Our Healthwatch West Sussex developed toolkit is now part of the NICE guidance (national Institute for Health and Care Excellence), having been quality assured for inclusion in their shared learning collection as a supporting [resource](#).



‘It will make a real difference to the lives of many vulnerable people, and to the health and care professionals supporting them.’

Irene Sobowale, CEO, The Disabilities Trust

Supporting people to have their health concerns understood during the pandemic

Over the year, complaints handling has changed with investigations and follow-up actions often having to be suspended as staff were redeployed to fight the pandemic. In the early stages of lockdown, our **Independent Health Complaints Advocacy Service** team proactively reviewed our service information and processes. We looked at our resources against the draft complaints framework, created by NHS England, so our documents were ready and aligned to the new way of working.

Towards the end of the year, we saw increasing demand for health complaints advocacy. If this trend continues at the current referral rate we will exceed our resources. We are looking at this closely and will be talking to commissioners early, to make sure people are not denied support to have their voice heard and complaints addressed as this often also results in valuable learning for the health and social care systems.

In August, we published [An Annual Reflection for the Service for 2019-2020](#) with Independent Health Complaints Advocacy Service case studies and learning.

<p>1 Added to our self-help information to reflect changes to local resolution meetings which have moved to being held virtually.</p>	<p>2 Both complexity and number of cases has intensified. Cases often involve multiple agencies, safeguarding or serious incidents.</p>	<p>3 <u>Valuable Lessons:</u> For example, our support meant a resident’s mental health care complaint resulted in six recommendations to improve services.</p>
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Before the pandemic, commissioners recognised the need for a Clinical Harm Review to look into emerging concerns about an *Any Qualified Provider* contract for Non-Obstetric Ultrasounds, where potential harm to a number of people had taken place. We agreed to be part of the panel overseeing the review which has continued during the pandemic, to support the NHS in better understanding things from a patient’s viewpoint. The learning from this work is even more relevant as the NHS starts to recover from the impact of the pandemic.

 **‘Healthwatch’s participation in this review was important, as this was looking how to identify people at risk because of issues with a provider. We were able to add value by raising non-clinical considerations, through our in depth knowledge of supporting people to have their voice heard and to help the NHS learn lessons.’**

Katie, Senior Independent Health Complaints Advocate for Healthwatch West Sussex



Working with Healthwatch England for integrated innovation

It is essential to determine how well specific people's health and social care needs are met. Healthwatch West Sussex are privileged to be one of five local Healthwatch nationally funded to develop a toolkit to do this.

We used set health and care experience profiles and were asked to look at the needs of:

- Children and young people with mental health support needs who are becoming adults
- Black men with a number of health needs including a recent experience of cancer.

We were able to reflect on national and local expectations, research, guidance and good practice, before approaching people to explore with them their own experiences against this context.



'This work has produced some powerful insight, and we recognise these profiles are ones that need focused attention. We can see a lot of resources are being invested in these areas, but sitting independently, it can be hard to see where progress is being felt on the ground. This work has stimulated our thinking and we are giving more thought to how we work with health and care services to show people the changes being made and how we evaluate the difference this has made.'

Katrina, Locality Manager for Healthwatch West Sussex

The Integration Index: taking a different approach to developing health and social care

The NHS in England wants to provide people with the best care possible. To do this it is important that all services, like hospitals, GP surgeries, community services and mental health services, work well together.

Often the NHS needs to think about how other public services can be included, like housing, benefits, transport, education and community organisations. All these things are vital in supporting people's wellbeing as well as their health.

For the people receiving care it should feel like they are being supported by one big joined up team which is concentrating on them.

The NHS has been thinking about this issue for some time, and important changes have been made already. But to know if this is working, they need to hear from people about their experiences. This is what the 'Integration Index' is all about. The use of health and social care experience profiles is one of the methods that have been developed to help the NHS understand why some things are not working.

Our example from working with young people

Focus Group events were advertised through social media (Instagram, Facebook and Twitter) and at Chichester College. The groups were kept small and run by a youth support organisation. The young peoples' contribution to this work was rewarded through acknowledging their voice in our report and with a £25 gift voucher.

The first event took place in February and another with College students in April.



What people told us

Professionals need to understand how low self-esteem affects people and adapt, otherwise mental health needs go unaddressed.

Recognising health literacy and offering time/information to help with understanding support. Along with the importance of support in educational settings, where many spend much of their time.

Starting over again and again, and retelling negative stories works for the 'system' but is harmful to the young people.

Young people have supported us both to understand issues and to inspire change. Our report showcases the ideas and innovations produced in these groups. These ideas work towards overcoming the issues young people have raised and now need the attention from those who can make them happen.



Volunteers

At Healthwatch West Sussex we are supported by over 40 formal volunteers but many more people volunteered their support and time (over 90 in total). All provide input to help us find out what people think is working, and what improvements people would like to make to services.

This year our volunteers:

- Helped people have their say from home, carrying out surveys over the telephone and online.
- Created engagement activities and helped shape our work and thinking.
- Carried out website reviews for local services on the information they provide, which immediately improved the information available to patients in many geographic parts of our county.
- Helped with the local volunteering efforts of shopping and collecting prescriptions for those self-isolating or shielding.

Together they added over 2,400 hours of valuable support to the work of Healthwatch in West Sussex.

Our [#ConfusingComms](#) campaign is running because people tell us the way the NHS communicates with is sometimes confusing. If you want to join Elsie and advise us on how the communication can be improved, please contact us now.



#ConfusingComms Advisor - Elsie, 18

‘During lockdown, I decided I’d like to do something beyond college work. I know Healthwatch well and wanted to see if I could volunteer. As part of my role, I’ve been supporting the team by sense-checking what they are working on or what the NHS has produced. I can offer my view and opinions and those of my peers. I know this is valued and listened to. It has been such an interesting and rewarding experience, helping the team gather experiences of care from an age group they need to continue to hear from.’



Volunteer - Patrick

“I have been supporting Healthwatch for the last three years. A key part of my volunteering is to liaise with one of the Trusts in our county, feeding back the issues discussed at committee meetings and to raise the patient voice. With my digital skills I’ve also been able to audit service websites, which have led to the creation of the dental website checklist. I’m also able to share insight and my views during the regular Zoom volunteer meetings, which shape the team’s priority project work. ”



Volunteer with us

Are you feeling inspired? We are always on the lookout for new volunteers. If you are interested in volunteering, please get in touch at [Healthwatch West Sussex](#).



www.healthwatchwestsussex.co.uk

0300 012 0122

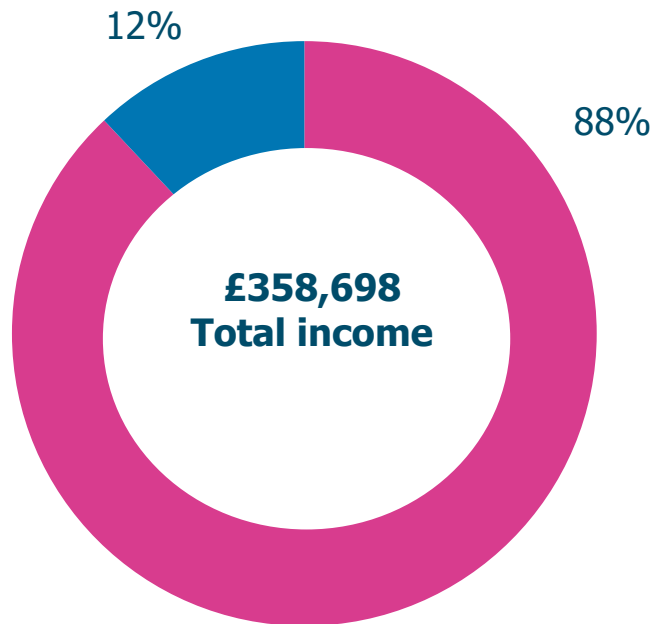
helpdesk@healthwatchwestsussex.co.uk

Finances

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

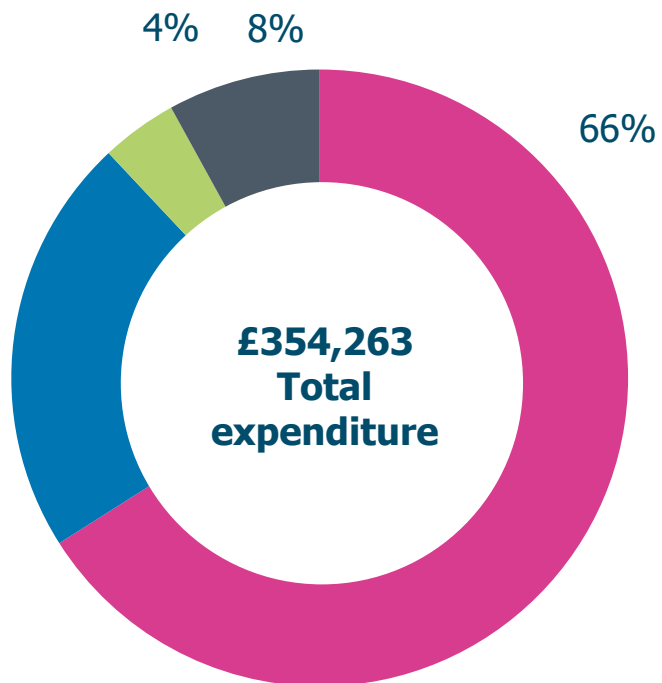
Income

- 88% funding received from local authority
- 12% social enterprise income



Expenditure

- Delivering Core Healthwatch
- IHCAS provision
- C.I.C investment projects in West Sussex communities
- C.I.C. costs



One of the lowest funded Healthwatch in the country per head of population.

Innovative in seeking additional funding and reinvesting Social Enterprise income

We seek to support everyone but demand exceeds our resources so we are raising concerns now.

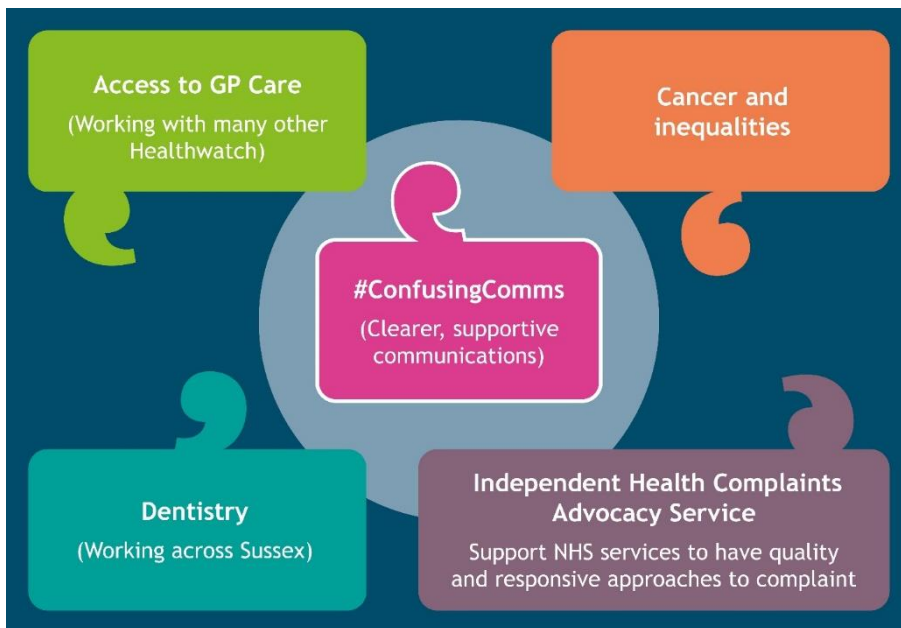
£1 of Local Authority funding : £1.48 Healthwatch West Sussex C.I.C. spending, investment and in-kind volunteering

Future priorities



Tackling unfair health differences will need those in power to listen. To hear the experiences of those facing inequality and really understand the steps that could improve people’s lives, and then to act on what has been learned.

Martin Phillips, Independent Non-Executive Director for Healthwatch West Sussex



Our priorities will help commissioners and services identify the bumps and barriers in care to best support West Sussex residents to access the right support at the right time.

Alongside these priorities we need to follow up on this year’s work with autistic people, those with sensory impairment, and in care homes.

We are committed to equality and diversity, and to hearing from seldom heard communities. We recognise we can do this best when we work alongside others. We will continue to work collaboratively and in partnership with others to hear from people who use services and those that cannot get access

Thanks



Our team are incredibly grateful for the support we have had over the past 12 months from local people, our community partners and health and social care leaders. One of the positives to build on from the pandemic is greater access to key stakeholders and this has helped us in our statutory role to influence decision-making. We hope people will continue to work with and truly recognise the merits of collaboration, co-production and seeing things from a patient/public viewpoint.

Sally Dartnell, Chief Officer for Healthwatch West Sussex



Statutory statements

About us

Healthwatch West Sussex CIC is a community interest company Limited by Guarantee. Registered Company Number 08557570.

Healthwatch West Sussex uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement with Healthwatch England.

Healthwatch West Sussex works with Help & Care to provide its statutory activities - 19 Southbourne Grove, Bournemouth, BH6 3QS.

healthwatch
West Sussex

help & care

The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch board consists of eight members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities, with two Executive members. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020/21 the board met eight times and made decisions on matters such as refocusing resources to support people through the pandemic and to raise concern for the future of day services without appropriate involvement and consideration for impact of lockdowns and changing needs to local political and health and social care system leaders.

We ensure wider public involvement in deciding our work priorities. We do this by reviewing the past insight from information and signposting enquiries, and what we have understood from attending public forums, committees and workstream meetings.

Methods and systems used across the year’s work to obtain people’s views and experience.

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2020/21 we have been available by phone, by email, provided a webform on our website, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media (with a Facebook, Twitter and Instagram presence).

We have also promoted these widely through partners and local village/town and area magazines.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. This year we have done this by, for example, working with community leaders and specific voluntary and community groups (who have benefited from having a *spotlight* on them.)

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it widely and will be presenting this at the June 2021 Health and Wellbeing Board.

2020-21 priorities

Project / activity area	Changes made to services
COVID-19 Response	We have raised a large amount of issues to health and care leaders, many of which have been actioned. We have, through weekly engagement with the vaccine programme have raised issues and these have led to better communication and improvement in the delivery of vaccines.
Young Peoples mental health	Healthwatch West Sussex represent all three local Healthwatch in Sussex on the Foundation for Our Future Oversight Board and continue to challenge the development on the independent review recommendations

Responses to recommendations and requests

All providers respond to requests for information or recommendations.

This year, due to the COVID-19 pandemic, we were unable to make use of our *Enter and View* powers. Consequently, no recommendations or other actions resulted from this area of activity.

We escalated access to dental care to Healthwatch England who have responded reporting the crisis within dentistry and continue to call for action.

Health and Wellbeing Board and scrutiny

Healthwatch West Sussex is represented on the West Sussex Health and Wellbeing Board by Sally Dartnell, Chief Officer. Katrina Broadhill, Locality Manager sits on the Health and Adult Social Care Scrutiny Committee.

During 2020/21 our representatives have effectively carried these roles by taking part in virtual workshops and meetings and promoting the need for appropriate public information on the Board activities and a pandemic task and finish review.

Healthwatch West Sussex CIC
PO Box 1360
Crawley RH10 0QS

Please note our staff and volunteers work from home and in the community,
as this offers us the flexibility to cover such a large County.

www.healthwatchwestsussex.co.uk

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 Healthwatch West Sussex

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Report to West Sussex Health and Wellbeing Board

24 June 2021

Report title

West Sussex Safeguarding Adults Board Annual Report 2020-2021

Report by Annie Callanan: Independent Chair of West Sussex Safeguarding Adults Board

and

Julie Phillips: Adults Social Care Assistant Director Safeguarding, Planning and Performance for West Sussex County Council

Summary

The West Sussex Safeguarding Adults Board (WSSAB) Annual Report for 2020-21 sets out the work achieved to deliver three statutory duties.

It includes reporting on the Board Subgroups activities, achievements on priorities set for 2020-21, Safeguarding Adult Reviews (SARs), Statutory Partnership initiatives to Covid-19, Safeguarding and Deprivation of Liberty Safeguards data and, priorities for 2021-22.

Please note that due to the new accessibility regulations, this year, we are presenting the key data areas in word format rather than using graphs.

Recommendation(s) to the Board

The Health and Wellbeing Board is asked to;

- 1) Actively support the WSSAB's strategic plan to improve prevention services and the experience of adults in West Sussex County Council who are at risk of abuse and/or neglect.
 - 2) Provide feedback on how the Health and Wellbeing Board, as representative of the partner agencies and, within the Collaborative Working Agreement, will contribute to the WSSAB's priorities for 2021-22.
 - 3) Share learning and improvement which interfaces with Adult Safeguarding.
-

Relevance to [Joint Health and Wellbeing Strategy](#)

The Four Boards Collaborative Working Agreement includes the interface between WSSAB and the HWB.

The activity of WSSAB is relevant specifically, in terms of enabling Adults, who have care and support needs in West Sussex County Council, to be safe from abuse and/or neglect.

1 Background and context

1.1. The WSSAB was established in 2011 and comprises a core membership of statutory partners from West Sussex County Council (WSCC), the NHS West Sussex Clinical Commissioning Group (CCG) and Sussex Police. The wider Board members include, a lay person, Sussex Partnership Foundation Trust, Sussex Community Foundation Trust, South East Coast Ambulance and, members from the voluntary and private sector. A full list of members can be found [here](#).

The purpose of the WSSAB is to safeguard adults with care and support needs. It does this by:

- assuring itself that local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance;
- assuring itself that safeguarding practice is person-centred and outcome-focused;
- working collaboratively to prevent abuse and neglect where possible;
- ensuring agencies and individuals give timely and proportionate responses when abuse or neglect have occurred;
- assuring itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.

1.2 All Safeguarding Adults Boards have three core duties that it must do to fulfill statutory requirements: Have a Strategic plan, produce an Annual Report and carry out Safeguarding Adult Reviews.

1.3 The 2020-21 WSSAB Annual Report provides information about the Board and:

- A Transitional Safeguarding Case Study
- The activity of the Board's Subgroups
- Achievements on 2020-21 Board priorities
- Safeguarding Adult Reviews (SARs)
- Statutory Partnership initiatives to Covid-19
- Safeguarding and Deprivation of Liberty Safeguards data
- Priorities for 2021-22 which, are based on learning from SARs
- How to report a concern
- Compliments and complaints

- How to contact the Board

2 Proposal details

- 2.1 It is proposed that the Independent Chair of the WSSAB along with West Sussex County Council's Adults Social Care Assistant Director Safeguarding, Planning and Performance provide the annual update to the Health and Wellbeing Board in respect of the WSSAB's activity for 2020-21.

3 Consultation, engagement and advice

- 3.1 The WSSAB's partnership has been engaged and consulted in the production of the 2020-21 DRAFT Annual Report.

Contact: Ru Gunawardana, West Sussex Safeguarding Adults Board Manager,
Tel: 0330 222 28362, ru.gunawardana@westsussex.gov.uk

Appendices

Appendix 1 – West Sussex Adults Safeguarding Board DRAFT Annual Report 2020-2021

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West Sussex
Safeguarding Adults
Board
Making Safeguarding Personal



DRAFT Annual Report 2020/21



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Foreword from Annie Callanan



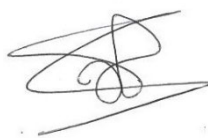
This is my fourth Annual Report and, marks my third year as Independent Chair of the West Sussex Safeguarding Adults Board. This last, unprecedented, year with COVID-19 has required us to adapt ways of working to recognise pressures and respond to increasing demand. Whilst it has been a year of challenge, it has also, been a year of progress. Despite the postponement of some of our planned work, it was possible, with the commitment of our Statutory Partners, Board Members and with the diligent and efficient work of the Board Support Team, to progress improvements in many areas. I thank everyone for their support for making this possible particularly, given the significant pressures across services.

In March 20, we temporarily postponed some of our Subgroup meetings in recognition of the pressures for the Partnership due to the pandemic. This decision was revisited in June 20, when all meetings fully resumed; with the support of our Partners, we continued progressing all workstreams to safeguard adults in West Sussex. In January 21, once again, we reduced the frequency of some Subgroup meetings. However, I am able to report that all work has continued to be progressed with oversight and sign off by key Partners. This has ensured continuation, as far as possible, to the vital work to protect adults at risk of abuse and neglect and, ensure compliance with the Care Act.

As well as continuing to hear case studies at Board Meetings, we have streamlined membership across Subgroups, to drive forward workplan objectives. The Safeguarding Adults Review Subgroup have improved processes for Safeguarding Adults Reviews, which are being considered for adoption by East Sussex and, Brighton and Hove Boards. In our Learning and Policy Subgroup, we carried out a Training Needs Analysis which gives us significant assurance of safeguarding training and knowledge across the Partnership. Our Quality and Performance Subgroup developed a new process for focused audits and held challenge meetings, with success and positive feedback from those involved. Within our Quality Assurance and Safeguarding Information Subgroup, and across all Subgroups, we have strengthened our use of data to understand and gain assurance of safeguarding activity including, considering areas needing detailed exploration. Our new Multi-Agency Risk Management Subgroup enables support for high-risk cases where non-engagement and self-neglect are often features.

Despite the significant challenges responding to COVID-19, we have demonstrated that objectives can be progressed and adults in West Sussex are safer as a result. We acknowledge that there is more to do and have plans in place to progress postponed actions, alongside new objectives for the coming year.

Annie Callanan



About us

The West Sussex Safeguarding Adults Board was established in 2011 and comprises a core membership of statutory partners from West Sussex County Council (WSCC), the NHS West Sussex Clinical Commissioning Group (CCG) and Sussex Police. We also have a number of [other partners](#).

The purpose of a Safeguarding Adults Board (SAB) is to safeguard adults with care and support needs. It does this by:

- assuring itself that local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance;
- assuring itself that safeguarding practice is person-centred and outcome-focused;
- working collaboratively to prevent abuse and neglect where possible;
- ensuring agencies and individuals give timely and proportionate responses when abuse or neglect have occurred;
- assuring itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.

Every Safeguarding Adults Board has three core duties that it must do to fulfill its statutory requirements: Have a Strategic plan, produce an Annual Report and carry out Safeguarding Adult Reviews. You can find out more about these on our [website](#).



Case study

This case study illustrates how a young man was supported by an advocate, and, a safeguarding enquiry led to an understanding of his needs and wants, at that time, to be more independent.

Please note that the name used, Barry, is not that of the individual. Direct quotes have had names removed to protect confidentiality.

Who Barry is

Barry is a 20-year-old man. He has a diagnosis of Autistic Spectrum Disorder and Learning Disabilities. Barry loves drawing and is very, artistically, talented. He often gets up early to draw and also draws every evening and weekend. He is particularly good at drawing American trucks and adds each drawing to a collection on his wall. Barry also likes building Lego vehicles of his own designs.

Before lockdown in March 2020, Barry was living with his Father. Unfortunately, Barry's Father lost his home and so, Barry and his Father moved into his Mother's home with his three Brothers, all of which are younger than him. Barry said that "the little one's jobs were to annoy me; they wind me up and I didn't get my peace and quiet."

The safeguarding concern

Whilst living with his Mother there was a safeguarding concern raised about the management of Barry's finances. Due to the safeguarding concern being raised, Barry was referred to an Advocate to help him make decisions about what he wanted from the safeguarding process.

The Advocate met with Barry and asked him about his finances. She asked if he could remember talking to the social worker about this. He said, "I do, yes, but I don't really understand Mum needs my money to pay the bills and buy food" and, "I don't mind Mum using the money, I don't have any money."

The Advocate also spoke with Barry about his home life. During this conversation, Barry expressed his wish to have more control over his life, learn to look after himself and to move out of the family home. The Advocate made a recommendation to the Social Worker, who was undertaking the safeguarding enquiry, that Barry should have a mental capacity assessment completed around his management of his finances and requested a review to take place regarding his wishes to move out and live more independently. Barry said the advocate "helped me be more independent."

The outcome of the safeguarding enquiry

Following involvement from the Advocate and with Barry's wishes taken into consideration, the Safeguarding Enquiry was completed by West Sussex County Council. The outcome of the enquiry was that there was no financial abuse occurring. As Barry's main focus and goal was to become more independent, he worked with a Social Worker following the enquiry, to look for suitable places for him to move to.

With the support of his Social Worker, Barry was found a Shared Lives Placement which is where individuals live within another family's home and is supported by those family members. The family are known as Shared Lives carers; they have 3 dogs which Barry likes to help walk. Barry said the Social Worker "helped me find somewhere to live and helped me be more independent."

Barry's feedback

Barry shared the following for the purposes of this case study.

"I like living with my Shared Lives Carers. Life is very different. I have peace and quiet" ... "they help me to learn to be more independent and help me with rules like tidying up, rules are good. When you have your own place, you have your own rules" ... "I am happy now, I still go and stay with my family but I'm not there all the time so, my brothers don't wind me up as much." When asked about what Barry would like for the future, he said that he would "like to learn to be more independent."

Barry goes to college and shared that he is on a course about "learning how to be independent sometimes I go four days, sometimes three days. We don't always go in on a Thursday, to do home learning." Barry has just learnt how to independently use the bus to go to college after being supported with travel training by his Shared Lives Carers.

Barry's hopes for the future

Barry said, "When I finish college, I want to go and work in Tesco, work on the tills and stack shelves. I have 2 years left at college. You have to have a job to earn money and if you want money you have to work." Barry also said, "I want to have my own flat, not a high up one though. I am scared of heights. I would also like a pet snake."

In conclusion Barry shared, "I was worried that when I moved out of Mum's I wouldn't see my family again, but now I'm not worried about that. I know I can see them, and they can come and see me. Family is very important, and I feel happy and safe."

Our Subgroups

The Safeguarding Adults Board has six Subgroups, comprised of five working subgroups, and a sixth decision-making Chairs Subgroup. The work undertaken by each Subgroup links with the [Board Strategic Plan](#).

Subgroups consist of members from across the Adult Health and Social Care sector and, Sussex Police. Further details of our Board Members, can be found [here](#).

Safeguarding Adults Review (SAR) Subgroup

This Subgroup:

- Meets monthly and is chaired by a representative from Sussex Community NHS Foundation Trust.
- Considers SAR referrals and, the process thereafter.
- Is attended by a core group of Statutory Partners and, Sussex Partnership Foundation Trust (SPFT) and Sussex Community Foundation Trust (SCFT).

Our SAR Subgroup Achievements this year includes:

- Progressed the WSSAB SAR protocol with East Sussex and Brighton & Hove Safeguarding Boards to create a Pan-Sussex version [Pan-Sussex Safeguarding Adults Review Protocol](#);
- Developed & agreed a new process & recording system to track open and closed Reviews & referrals.
- Revised Summary of Involvement and Individual Management Review processes & forms which have been agreed for use on a Pan-Sussex basis.
- Produced guidance for SAR referrers.
- Produced process mapping stages and timescales for Reviews.
- Produced templates for Review Terms of Reference (ToRs).
- Produced template report for Reviews.
- Produced Expectation Guidance for SAR Reviewers.
- Agreed actions resulting from the National SAR Analysis Project recommendations.
- Produced and published [Safeguarding Adults Review \(SAR\) Learning Briefing](#).



Quality and Performance Subgroup (Q&P)

This Subgroup:

- Meets bi-monthly and is chaired by a Sussex Police representative.
- Has oversight of, and response to, required Board assurance such as multi-agency audits and, analysis of and response to safeguarding data.
- Is attended by Statutory Partners and senior leads across the partnership.

Our Q&P Subgroup Achievements this year includes:

- Revised our audit process for Board priorities.
- Organised and facilitated a Statutory Agency Challenge Audit Meeting, to gain assurance of safeguarding activity.
- Further worked to develop and understand safeguarding data, using this to identify patterns, trends, and areas for further consideration.
- Undertook a project to look at hard to reach communities, including ways in which we may need to ensure that these individuals are aware of how to report & respond to safeguarding concerns.
- Analysed the impact of the COVID-19 on safeguarding activity, including frauds and scams, domestic abuse, and modern slavery.
- Became a member of 'Friends Against Scams,' a National Trading Standards initiative.

Quality Assurance and Safeguarding Information Group (QASIG)

This Subgroup:

- Meets monthly and is co-chaired by a representative from WSCC and the CCG.
- Responds to known risk and, takes preventative actions regarding potential and emerging risk in the provider market.
- Is attended by Statutory Partners and senior leads across the partnership.

Our QASIG Achievements this year includes:

- Further considered & analysed data to look for outliers & to identify potential areas for further exploration.
- Development & analysis of data to include information from other Board Partners, alongside WSCC data, to further identify concerns in the provider market.
- Continued information sharing across Partners, enabling comprehensive collaborative work & support to providers where there are issues or concerns.

Learning and Policy Subgroup (L&P)

This Subgroup:

- Meets bi-monthly and is chaired by a representative from the CCG.
- Responds to learning from SARs and audits and, develops policies and procedures.
- Is attended by Statutory Partners and senior leads across the partnership.

Our L&P Achievements this year includes:

- Developed & agreed a process for learning and assurance from Reviews.
- Revised & undertook a Training Needs Analysis of all Board Partners and Care providers.
- Created an exemplar of a Learning Briefing Action Plan for Partners to reference when they develop action plans to take forward learning from Reviews.
- Developed the use of data regarding Care Providers that report high & low levels of Safeguarding concerns to identify where there may be a knowledge gap or a training need. Also, created a questionnaire to send to identified Providers.
- Agreed Making Safeguarding Personal (MSP) Toolkit guidance.
- MSP learning briefing developed by East Sussex Safeguarding Adults Board promoted with Partnership to facilitate learning and understanding across agencies.
- Developed and published a [Professional Curiosity Learning Briefing](#)

Multi-Agency Risk Management Subgroup (MARM)

This is our new Subgroup which discusses and considers available options for increasing the safety of adults with care and support needs who may be refusing services and where, despite all options having been explored, the level of risk remains high.

This Subgroup:

- Meets monthly and is chaired by a representative from WSCC.
- Ensures comprehensive multi-agency communication and information sharing to support agencies in managing the most challenging and concerning cases.
- Is attended by Statutory Partners, members across the partnership and Voluntary sector.

Our MARM Achievements this year includes:

- Agreement of scope, criteria, membership, and Terms of reference for this new Subgroup.
- Meetings held in January and March 2021.
- Full engagement and active participation from across the Partnership has resulted in supporting managing the risk of 4 of the most complex cases so far.

Chairs Subgroup

This Subgroup:

- Meets prior to each Board meeting and is chaired by our Independent Chair
- Is a decision-making forum which shares progression of Subgroup work plans and enables effective workflow between Subgroups.
- Is attended by Subgroup Chairs and Statutory Partners.

The Terms of Reference for each of our subgroups can be found [here](#).

Our Board Achievements

This year we are pleased to share the following achievements:

- Supported and worked with East Sussex and Brighton & Hove Safeguarding Boards to create a:
 - [Pan-Sussex Information Sharing Protocol](#);
 - [Pan-Sussex Adult Death Protocol](#);
- Reviewed and updated all published documents to meet the Accessibility Standards' deadline of September 2020.
- Updated the Terms of Reference for all Subgroups.
- Reviewed Memberships of all Subgroups.
- Further developed the Threshold Guidance, to include information related to COVID-19.
- Established Board representation for GP service, Ford Prison, Gatwick Immigration Centre and, the Department for Work and Pensions.
- Included case studies at Board meetings to ensure the voice of the user.
- As part of the Board's Communication and Engagement Strategy, initiated a Service User Engagement Task and Finish group. This is led by our Healthwatch Partner and our Lay Person to reach community groups in order to promote what safeguarding is and how to refer.



Our Board Priority Achievements

Transition and Safeguarding

We use the word Transition to refer to young people moving into adulthood who have been involved with services.

This year we wanted to learn more about safeguarding for young people. We will continue to take forward the actions as a result of our learning this year, to have assurance on this pathway.

To learn we revised our audit process by:

- Developing a new, bespoke focussed audit tool.
- Holding a multi-agency audit meeting, providing an opportunity to consider audit responses and allow inter-agency challenge. This meeting was attended by key partners from West Sussex County Council Adults and Children's Social Care, Police, Clinical Commissioning Group, Sussex Partnership Foundation Trust, Sussex Community Foundation Trust and District and Borough Housing.
- Creating a plan for actions across several agencies. This action plan aims to improve safeguarding processes for young people. It includes, developing guidance on safeguarding referrals and, taking forward preventive work to reduce the risk of safeguarding concerns occurring. This plan is monitored by the Quality and Performance Subgroup.
- Developing a new follow-up case file Audit tool to seek assurance of measures agreed at the audit meeting.

We also, published a special edition newsletter for sharing across the Partnership, including articles from:

- Sussex NHS Commissioners on Transition of Care Leavers.
- West Sussex County Council Adult Social Care on assessment and planning.
- Sharing of learning from East Sussex Safeguarding Children Partnership: Serious Case Review of Child T, which identified learning around transition points, and, the risks around the management of complex health needs at times of transition.

We have been leading on producing a Protocol with the West Sussex Safeguarding Children Partnership on Safeguarding Young People 17.5+. This will be a West Sussex Protocol initially, however, there is a commitment to take this forward as a Pan-Sussex Protocol.

Our Safeguarding Adults Review and Learning and Policy Subgroups have considered learning required nationally from SARs which have been undertaken for young people.

Mental Health and Safeguarding



We have revised our audit process and tool in preparation for taking forward a mental health and safeguarding audit.

We have promoted learning in a special edition newsletter shared across the Partnership, including articles from:

- Sussex Partnership Foundation Trust on Safeguarding and NHS Mental Health Services.
- Author, Maria Alfieri on Overcoming Shame and Finding Connection.
- Sharing of learning from Lewisham Safeguarding Adults Board SAR of Mr Tyrone Goodyear. The review examines the circumstances and issues including homelessness, mental ill-health, and suicide prevention.

Our Learning and Policy subgroup have audited what mental health and safeguarding training is available across the partnership, as part of the training needs analysis. The outcome of this is that we are assured that for almost all of our Partners, this training is provided.

Homelessness and Safeguarding



We have revised our audit process and tool in preparation for taking forward a homelessness and safeguarding Audit.

We have worked with WSCC and District and Boroughs to develop a Homelessness and Safeguarding section to our [Safeguarding Thresholds Guidance](#).

We are leading on creating a safeguarding and homelessness section to the Pan-Sussex policy and procedures.

We have been drafting a special edition newsletter on homelessness and safeguarding to promote learning in this area.

Please note, in 2021/22 the West Sussex Safeguarding Adults Board will continue to progress outstanding workstreams for our 2020/21 Board priorities alongside our action plan to deliver our 2021/22 Board priorities.

Safeguarding Adult Reviews (SARs)

Safeguarding Adults Reviews (SARs) are a legal duty under the Care Act 2014. The purpose of a SAR is to determine what agencies involved with an individual might have done differently that could have prevented harm or death. It is not an investigation and is not to apportion blame. Instead, it is to learn from situations, and to ensure that any learning is applied to future cases to prevent similar harm occurring again.

The criteria for a SAR is:

- an adult has died, and abuse is known or suspected; or
- has experienced abuse which has resulted in permanent harm, reduced capacity, or quality of life, or
- would have likely died but for an intervention, and
- agencies could have worked more effectively together.

SAR Referrals and Reviews in 2020/21

In 2020/21 the SAR subgroup received 6 referrals of which, 3 met the criteria for a Review. Of the 3 referrals that proceeded, 2 were Desktop Reviews, chosen due to the in depth analysis and consideration of concerns by other agencies prior to referral and, 1 was a Review in Rapid Time, which was carried out over a 3 week time period to enable timely learning.

There were 3 open Reviews received prior to April 2020 which continued to be progressed in 2020/21. These were, a SAR, a Thematic SAR for 3 individuals and, an Organisational Learning Review for a Residential Service.

There were in total, 6 Reviews being progressed in 2020/21, all of which were referred by West Sussex County Council Adult Social Care and were all regarding concerns about neglect or acts of omission.

Regarding the 3 referrals which did not proceed for a SAR, the reasons were that:

- no abuse or neglect was identified
- possible abuse or neglect occurred as a child resulting in the referral being considered by the Safeguarding Children Partnership in consultation with WSSAB
- no multi-agency learning was identified

Demographics

Of the 6 reviews in 2020/21, 5 were for older adults and 1 for an older adult with a mental health diagnosis. There were 2 Reviews carried out for provider services for older adults (male and female residents) and one Thematic Review with respect to 1 female and 2 males. For the Reviews carried out for just one individual, all were White British, 1 was female, and 2 were males.

Learning and Themes from Reviews

The Independent Reviewers for the 6 reviews being progressed in 2020/21 have identified key themes and areas of learning for the WSSAB to take forward. In summary these are:

- Person-centred approaches and, making safeguarding personal
- Health optimisation
- Recognising and working with cases of self-neglect
- Assessing and managing risks, including conducting risk assessments
- Knowledge and implementation of the Mental Capacity Act
- Safeguarding practice, including implementation of the Care Act 2014
- Multi-agency working and information sharing
- Staff management and supervision
- Professional curiosity
- Partnership working including with the private and voluntary sector, housing, and GP's
- Identifying unusually low or high levels of reporting of accidents, incidents, and safeguarding concerns
- Promote and sustain whistleblowing and the raising of safeguarding concerns in care services
- Increase customer and family members' understanding of quality and "what good look like" in care homes

These Reviews will be published on our [website](#) later in 2021 and, will be reported on fully in our next annual report for 2021/22.

SARs Assurance Process

To ensure learning from SARs is taken forward to practice, an assurance process is followed. The process was confirmed this year and involves the following:

1. The SAR Subgroup agrees the Review's recommendations for learning & creates an action plan based on these.
2. L&P Subgroup then considers how to best take forward the actions for learning. As a standard, L&P Subgroup produce and share across the partnership, a learning briefing and going forwards for this coming year, an accompanying podcast also. The learning briefing requires Board partners to commit to how they will take forward learning.
3. Around 6 months following learning being shared, the Q&P Subgroup collate & analyse feedback from the learning briefing, podcast to establish assurance that learning is embedding into practice.
4. Q&P Subgroup then provide feedback and assurance to SAR Subgroup.
5. SAR Subgroup provides feedback to the Board.



Statutory Partners' Initiatives to COVID

Given the unprecedented pressures created by COVID-19. The WSSAB and our Partner agencies have adapted ways of working, to recognise and respond to increasing demand.

At each Board Meeting during 2020/21 data and information has been presented regarding the initiatives and key areas progressed and developed, as a direct result of COVID by our statutory Partners. Some examples of these are shown below:

West Sussex County Council (WSCC)

- Strengths-based working with customers & streamlined paperwork enabled practitioners to work in a more proportionate way, working creatively in both their interventions, care planning & support.
- Increased use and development of an online Provider Zone, to collate and share information, guidance & resources.
- Development of a Community Hub which provided community support for vulnerable people.
- The Safeguarding Hub took on additional duties, freeing up capacity in community teams.
- Initiated a process to rapidly seek assurance on infection control measures, where required.
- Increased Independent Domestic Violence awareness and advice, including extending phone support hours to include bank holidays and weekends; a wide social media campaign and working with pharmacies to get messaging on all pharmacy bags Pan-Sussex.
- Delivered an annual 'Get Safe Online Programme', running events and training sessions to support communities to be safe online and not fall victim to fraud. Delivery Officers within Community Safety and Wellbeing are trained as Friends Against Scams 'SCAMChampions' to deliver more wider fraud prevention activity across the County.
- As part of WSCC [Modern Slavery Pledge](#), Modern Slavery training is now available to all WSCC staff and Partners via the Learning and Development Gateway.

Clinical Commissioning Group (CCG)

- Initiated a tiered command system, adopted across all NHS organisations and Integrated Care Partnerships, ensuring timely response to all COVID related requests and tasks.

- Increased funding in West Sussex to the Multi-Agency Safeguarding Hub to support liaison of Multi-Agency Risk Assessment Conference information to Primary Care Teams.
- Provided multi-agency support to accelerate funding for Health Independent Domestic Violence Advisor Service, due to a rise in domestic violence referrals.
- Increased support and supervision to health providers and safeguarding teams during national lockdowns.

Sussex Police

- Domestic abuse and the dynamics of abusive relationships during and immediately after lockdowns has been a key focus during the COVID-19 pandemic. This has included the introduction of a specialist team who are able to provide an initial response to non-urgent Domestic Abuse cases. Using innovative video technology, trained police officers are able to interact with survivors remotely, put safeguarding measures in place whilst also capturing evidence for further investigation and, are able to make referrals to relevant partner agencies.
- Continued to identify and support vulnerable victims of fraud, which increased during COVID-19, focusing on protection and prevention.
- Have raised awareness of the issue within communities through neighbourhood policing teams and the media, encouraging people to take preventative steps.
- Work with WSCC Community Safety and Wellbeing to utilise local intelligence and inform resource development and delivery of prevention work. Community Safety and Wellbeing have created Romance Fraud video resources.



Data

WSCC is the lead for safeguarding and records all safeguarding data. Concerns about abuse and neglect are reported using an [online form](#) and triaged by WSCC's Safeguarding Hub.

The figures provided within this report relate to the first submission for NHS Digital and may be subject to change post further analysis.

Safeguarding concerns received and enquires undertaken

In the previous year, 2019/20, there were 8,286 concerns received. Of these 3,493 proceeded to a Section 42 Enquiry. This represents a conversion of 42.2% of safeguarding concerns proceeding to a Section 42 Enquiry.

This year, 2020/2021, there were 2,154 concerns received. The number of concerns reported each month has ranged between 122 to 238. Of the 2,154 concerns raised 1,213 proceeded to a Section 42 Enquiry, this represents a conversion rate of 56.3%.

The number of safeguarding concerns reported to WSCC is fewer this year. This lower number is attributed to a change in the way in which WSCC receive and record concerns. Prior to the implementation of the Safeguarding Hub, all incoming concerns were recorded on a safeguarding concern form. However, a referral stage has now been added. A referral may lead to a safeguarding concern or another work pathway such as a care act assessment. The total number of referrals received in 2020/21 was 7,390.

Type of abuse people experienced

Of the concluded Section 42 Enquiries, concerns regarding neglect and acts of omission accounted for 47.7% of enquiries, financial abuse 15.5% of enquiries and, physical abuse 18.1% of enquiries. Together, these three categories represent 81.3% of all concluded safeguarding enquiries and have remained the top three categories for the last three years, this is constant consistent with the national picture.

Neglect and acts of omission has been the most reported form of abuse over the past three years. However, like other Local Authorities, we have seen an increase in the level of reporting regarding financial abuse, which has increased from 12.4% in 2019/20 to 15.5% in 2020/21 and domestic abuse, which has increased from 2.6% in 2019/20 to 5% in 2020/21. Other categories have remained relatively consistent.

Primary support needs of those safeguarded

Of the concerns received where the Section 42 criteria was met, those with physical support needs were the most likely to require an enquiry, accounting for 42.35%. The next category accounting for 15.07%, is those whose primary support need relates to memory and cognition, for example Dementia.

Gender and age and ethnicity of those safeguarded

Of the Section 42 enquiries undertaken in 2020/21, 61.08% were for women and 38.57% were for men. There were 0.36% of enquiries undertaken where an individual's gender was not documented.

As with last year, the majority of adults involved in a Section 42 enquiry were over 65 years old, which accounts for a total of 57.04%. The highest proportion of this figure was for those aged 85-94 years old which accounts for 29.82%.

In 2020/21 the vast majority of safeguarding enquiries were for adults who identified as white, totalling 78.2%. The data reflects the overall proportion of people's ethnicities in West Sussex and is consistent with last year. Enquiries completed for all other ethnicity categories, did not individually account for more than 1.4%. There was 18.4% of enquires where an individual's ethnicity was unknown, this was either due to this not yet being obtained or because of the individual declining to provide this information.

Location of abuse

Last year, 2019/2020, abuse in Residential and Nursing Homes accounted for 49.1% of enquiries and, 32.9% for those living in their own home. This is a difference of 16.2%.

This year, 2021/22, abuse in Residential and Nursing Homes accounted for 41.6% of enquires and, 37.5% for those living in their own home. Therefore, the most likely location to experience abuse remains Residential and Nursing Homes. However, the difference, which is 4.1%, is much smaller this year. Therefore, although West Sussex remains an outlier, the gap has reduced.

There are a number of factors that may have contributed to this change, such as: the support offered by West Sussex Care and Business Support Team; the work being undertaken by QASIG and; the implementation of the online safeguarding concern form enabling individuals to report concerns directly. We continue to monitor this data as we are aware that less people have been able to visit care homes during the pandemic and this could also be a factor.

Making Safeguarding Personal

As part of a Section 42 Enquiry, people are asked for their desired outcomes. 52.3% had these fully achieved and 39.4% of people had these partially achieved. There were 8.3% of individuals where desired outcomes were not achieved. The most common desired outcome requested, was for individuals to have access to help and the right support to feel safe.

How safeguarding changed risk

For 51.7% of individuals where a risk was identified, action was taken to reduce this risk. There were 25.2% of individuals where action was taken and the risk was removed and, 7.7% where actions were taken, and the risk remained. There was 9.5% of people with an identified risk where no action was taken, this would include adults who have capacity and choose to live with risk.



Deprivation of Liberty Safeguards (DoLS)

The Deprivation of Liberty Safeguards (DoLS) is part of the Mental Capacity Act and is a legal measure to protect people who lack capacity to make decisions about their care and treatment. DoLS has been scheduled to be replaced by the Liberty Protection Safeguards (LPS). However, due to COVID, further government guidance on the timescale for implementation is awaited.

The LPS will create a difference in administration and practice but the focus remains on continuing to ensure vulnerable people's care and treatment is in their best interests.

Details of DoLS referrals and assessment for 2020/21 are as follows.

Referrals received and the outcomes

In 2020/21 there were a total number of 8,687 DoLS referrals being progressed. From the 8,687 referrals, there was a total of 6,885 individuals who received DoLS assessments in 2021/22. Of these assessments, 4,807 were granted and 2,076 were not granted. There is a total of 1,804 assessments in progress.

Of the 4,807 referrals granted, the vast majority were granted for a period of 6 to 12 months.

Where referrals came from

The majority of DoLS referrals were made by social care, accounting for 7,169 referrals. Acute Hospitals are the second highest referring agency, accounting for 1,241 referrals.

Gender & Ethnicity

The majority of granted referrals were for females, accounting for 5,416. This is consistent with the national picture as women tend to live longer. The majority of granted referrals were for white people, accounting for 7,654 which, reflects WSCC's demographic.

Primary Support Reason for granted referrals

Those who were referred for a DoLS assessment are most likely to have had Dementia recorded as their primary support need. This accounted for 3,843 people.

Our priorities for 2021/22

Our Priorities for 2021/22 were considered and decided on during a bespoke Board meeting where we considered data, learning from SARs, training needs analysis results, and work undertaken in 2019/20. We decided on 3 priorities, which cover the learning from SARs we need to take forward and these are:

- **Priority 1: Collaborative Working** focussing on:
 - Information sharing
 - Monitoring of safeguarding concerns
 - Safeguarding pathways
- **Priority 2: Learning and Embedding into Practice** focussing on:
 - Risk assessment
 - Professional curiosity
 - Understanding of differences between quality & safeguarding
 - Understanding of safeguarding policy and procedure
- **Priority 3 Assurance and Engagement** focussing on:
 - Compliance with safeguarding policy and procedure
 - Person centred approaches
 - Consideration of protected characteristics
 - Engaging with the private and voluntary care sector, and families/representatives
 - Multi-agency auditing

Compliments and Complaints

In 2020/21 the Safeguarding Adults Board received no complaints.

A copy of our [Complaints Process](#) can be found on our website.

In 2020/21, we received three compliments:

- from WSCC on our accessibility work and the quality of our documentation.
- from Swindon Borough Council on our Thresholds Guidance Document, who adapted this for their own use.
- from WSCC on our newsletter content being easy to understand and informative.

Report a concern

If you or someone you know with care and support needs are being harmed, neglected or exploited, or at risk of this, you can report concerns to WSCC.

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

Otherwise, please

- Complete [an online adult safeguarding concern](#)
- WSCC Adults' CarePoint on 01243 642121
- NGT Text Relay for people with hearing loss (available as a downloadable App for tablets and smartphones): 018001 01243 642121
- Write to Adults' CarePoint at Adults' CarePoint, Second Floor, The Grange, County Hall, Chichester, PO19 1RG
- Phone Sussex Police on 101



Contact us

If you would like to find out more about this report, or the work of the Safeguarding Adults Board:

Email: safeguardingadultsboard@westsussex.gov.uk

Write to: Safeguarding Adults Board, 1st Floor, County Hall North, Parkside, Chart Way, Horsham, West Sussex, RH12 1XH

Phone: 03302 227952

If you would like to access West Sussex County Council's safeguarding training programme, or would like more information on safeguarding training in general, please [visit the West Sussex Learning and Development Gateway](#).

Electronic copies of our [Annual Report](#) are available on our website.

Further information about [DoLS](#) can be found on the [West Sussex County Council website](#).



Report to West Sussex Health and Wellbeing Board

24 June 2021

Better Care Fund Monitoring Quarter 3 & Quarter 4 2020-21

Report by Chris Clark, Joint Strategic Director of Commissioning, West Sussex Clinical Commissioning Group and West Sussex County Council

Summary

This paper summarises performance against the 4 national metrics for Quarters 3 and 4, 2020/21 and provides a brief overview of Better Care Fund (BCF) expectations for 2021/22 pending publication of guidance.

Recommendations to the Board

The Health and Wellbeing Board is asked to;

- (1) Note the West Sussex performance against the national BCF metrics at Q3 and Q4 2020/21, and the degree to which these are impacted by Covid-19.
 - (2) Note the BCF planning expectations for 2021/22.
-

Relevance to [Joint Health and Wellbeing Strategy](#)

The Better Care Fund supports partnership working across the West Sussex Health and Social Care system. The funded schemes include multi-disciplinary teams delivering proactive community-based care, services for carers, social prescribing, and a broad range of adult social care services.

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 well-being and live independently in their communities for as long as possible.

The programme is planned and delivered at Health and Wellbeing Board area level across England. For West Sussex, day to day oversight of BCF is within the remit of the Joint Commissioning Strategy Group on behalf of the Health and Wellbeing Board.

The programme is a collaboration between:

- The Department of Health and Social Care
- The Ministry of Housing, Communities and Local Government

Agenda Item 11

- NHS England and Improvement
- The Local Government Association

First launched in 2015, the programme established pooled budgets between the NHS and local authorities, aiming to reduce the barriers often created by separate funding streams. The current pooled budget is a combination of contributions from the following areas:

- Minimum allocation from NHS clinical commissioning group(s) (CCGs)
- Disabled Facilities Grant – local authority grant
- Social care funding (improved BCF) including Winter Pressures Grant funding – local authority grant

It is important to note that, despite the nomenclature, the BCF does not consist of a pool of funding pending distribution. Rather it forms core allocation funding supporting key schemes commissioned by West Sussex County Council and West Sussex Clinical Commissioning Group.

For 2020/21, given the ongoing pressures of Covid-19 on local systems, Health and Wellbeing Boards were advised to roll forward Better Care Fund plans from 2019/20 into 2020/21, ensuring service continuity in advance of the delayed publication of the updated Better Care Fund national guidance published in the form of an online 'policy statement' in December 2020.

2 Better Care Fund Performance Q3 & Q4 2020/21

Details of the Better Fund metrics performance for Q3 and Q4 are given in Appendix 1. Due to the impact of Covid-19 on BCF planning, no targets are set for 2020/21 and national reporting is suspended.

The metric for Delayed Transfers of Care was permanently suspended in March 2020 and that for Non Elective Admissions will no longer be used as a Better Care Fund national metric during 2021/22. It is expected that these will be replaced by measurements focusing on Discharge to Assess and Admissions Avoidance.

Metrics for Residential Admissions and Reablement/Rehabilitation will continue in 2021/22 although the long-standing measures used for BCF have been under review by the Association of Directors of Adult Social Services and Department of Health & Social Care and therefore may see revisions.

3 The Better Care Fund in 2021/22

- Funding:
- The Spending Review has confirmed no change from the previous year for the iBCF (at £2.077 billion nationally) and DFG (at £573 million nationally) for 2021/22.
 - CCG contributions will again increase by 5.3% in line with the NHS Long Term Plan settlement.
- Content:
- Planning and assurance as in previous years with continuation of previous national conditions. Health and Wellbeing Board areas should work together to prioritise continuity of provision where

existing BCF schemes will be continued in 2021-22, with opportunity to prepare for next year.

- BCF national metrics under review and yet to be finalised.
- Timing:
- Publication of the Better Care Fund Policy Framework is expected shortly. Although this will confirm national conditions and set direction, it does not necessarily follow that the detailed planning requirements and template will be published at the same time.
 - Potential 8-week planning window following publication

The Joint Strategic Commissioning Group will work with commissioners and system partners to conduct a strategic review of the West Sussex Better Care Fund as part of the planning process. In addition to the funded schemes, this will include governance and wider system engagement.

This is also in the context of a wider Sussex-wide review which seeks to understand the allocation and utilisation of the Better Care Fund in each of the three Sussex places.

Contact: Paul Keough, Better Care Fund Manager, West Sussex Clinical Commissioning Group and West Sussex County Council, 07920 817577, paul.keough@nhs.net

Appendices Presentation Papers

Appendix 1: Better Care Fund Metrics Report Q3 and Q4 2020/21

Background Papers

National Better Care Fund webpage:

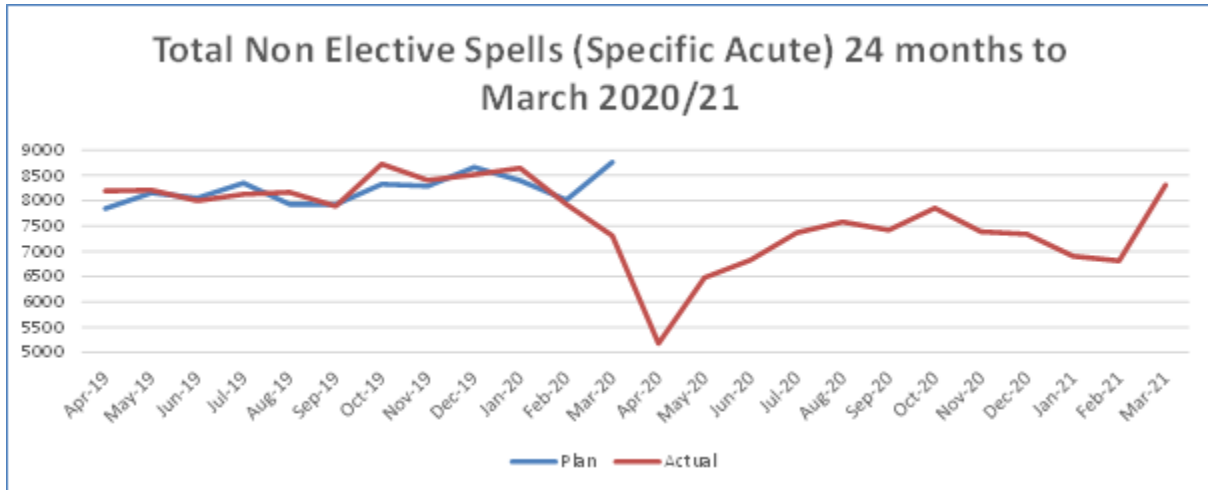
<https://www.england.nhs.uk/ourwork/part-rel/transformation-fund/better-care-fund/>

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West Sussex Better Care Fund Metrics Performance – Q3 & Q4 2020/21

1. Total Non-Elective Spells (Specific Acute) – All Ages

Latest data available Mar-21:	8,311	Vs same period last year Mar-20:	7,306	Vs 2020/21 plan Mar-20:	N/A
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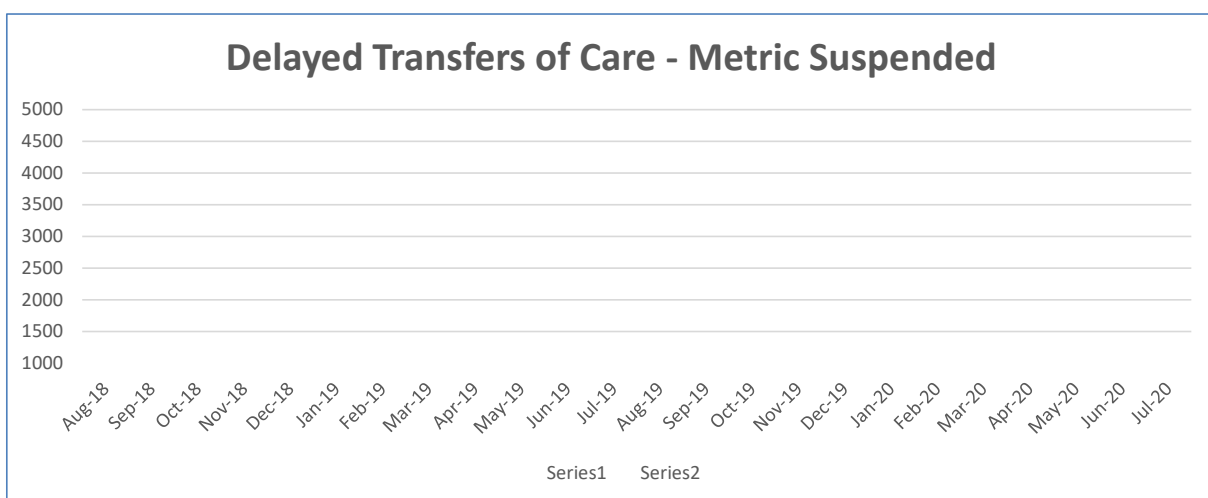
Source: SUS TnR / NHS England

At Month 12 2020/21, NEAs rose steeply when compared to the previous month. Planned figures are not available as a consequence of Covid-19 impact and the national collection and publication of national BCF performance metrics is suspended for 2020/21.

There is a complex range of variables which contribute to the number of emergency admissions to hospital particularly as this metric is for all ages rather than the typical cohorts of many BCF schemes.

2. Delayed Transfers of Care (Delayed Days)

Latest data available Jul-20:	N/A	Vs same period last year Jul-19:	N/A	Vs 2019/20 plan Jul-20:	N/A
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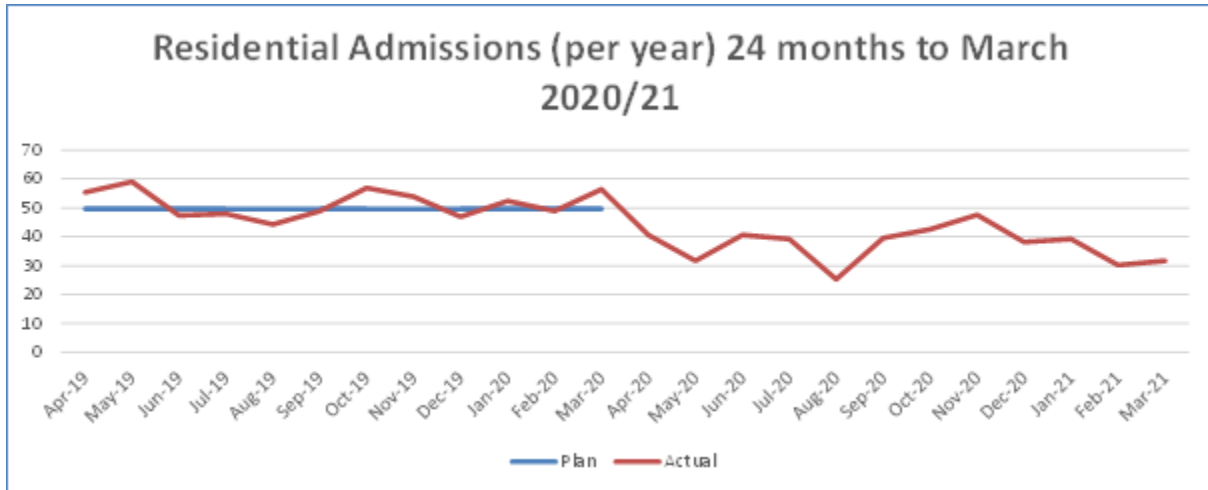
Source: NHS England Statistics

Targets for Delayed Transfers of Care (DToC) were suspended effective 19th March due to Covid-19. The revised Hospital Discharge Service operating model, published in August and

Appendix 1
 focussing on discharge to assess, is clear that this metric is permanently superseded by new D2A-base data collections.

3. Permanent Admissions to Nursing and Residential Homes (per month)

Latest data available Mar-21:	31.7	Vs same period last year Mar-20:	56.4	Vs 2020/21 plan per month:	N/A
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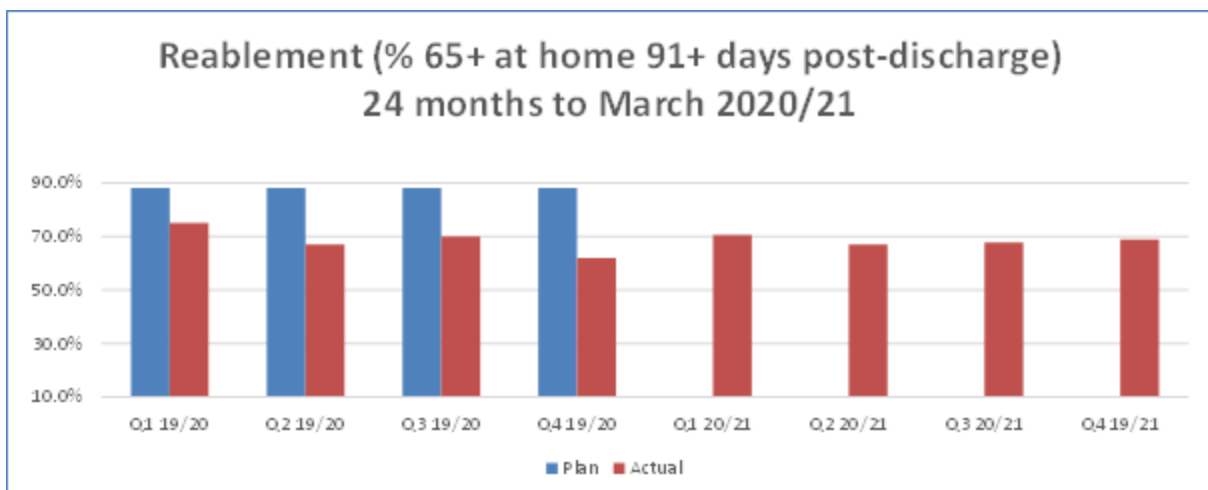


Source: In-year Data Collection WSCC Performance & Intelligence Team (National Metric is collected annually, reporting 6 months after year-end.)

Performance remains impacted by the effects of Covid, therefore the data is not representative of normal patterns of admission. We have seen a significant reduction in the proportion of customers in pay in residential settings, in comparison to non-residential. Adult Social care are continuing to work towards reducing new admissions to residential setting, while increasing non-residential options. This is starting to take effect, however the average cost of placements is increasing.

4. % Older People at Home 91 Days after Discharge into Reablement/Rehabilitation Services

Latest data available Mar-21:	68.9%	Vs same period last year Mar-20:	62.0%	Vs 2020/21 plan:	N/A
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Source: In-year Data Collection WSCC Performance & Intelligence Team (National Metric is collected annually, reporting 6 months after year-end.)

Performance has seen a slight rise at Q4 20/21 and year-end analysis has resulted in revision to the figures reported for previous quarters of the current year. This indicator is under review by ADASS. If we are unable to contact the customer or the customer does not respond, then the guidance requires us to record these as not at home. Work is underway to consider whether there are more effective ways of using this measure through SE ADASS networks. West Sussex has a number of reablement offers that contribute to supporting independence, these include both home-based reablement and bed-based provision. A local based measure looking at these outcomes would be more reflective of the local picture.

Performance Targets and Data Collection

Due to the impact of Covid-19, no targets for BCF metrics have been set for 2021/21 and the quarterly publication by the national team of 'actual' versus 'planned' performance is suspended. This means that comparison with comparator HWB areas is not possible for this year.

Contact: Paul Keough, Better Care Fund Manager, West Sussex Clinical Commissioning Group and West Sussex County Council, 07920 817577, paul.keough@nhs.net

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Health and Wellbeing Board (HWB) Work Plan 21/22				
Meeting Date		24-Jun-21	07-Oct-21	27-Jan-22
Items	Lead Contact			
Learning Disabilities Awareness	Mike S Smith		√	
Sussex Wide Covid19 VCSE Review (Date TBC)	Jess Sumner			
Annual Reports/Actions				
Terms of Reference	Erica Keegan			
Joint Health and Wellbeing Strategy Annual Review	Alison Challenger			
Safeguarding Adults Annual Report	Annie Callanan and Julie Phillips	√		
Safeguarding Childrens Annual Report				
West Sussex Health Protection Grps Annual Report	Director Public Health			
Public Health Annual Report	Director Public Health			
HealthWatch Annual Report	Sally Dartnell	√		
Pharmaceutical Needs Assessment	Ally Katsande			
Standing Items				
HWB - Local Outbreak Engagement Board	Alison Thomson	√	√	√
HWB - Children First Board	Cllr Jacque Russell/Lucy Butler	√	√	√
Better Care Fund Monitoring	Paul Keogh/Chris Clark	√	√	√
Public Forum	Chairman	√	√	√
ICS/STP Place Based Plan	Chris Clark/Keith Hinkley	√		√
Seminar/HWB Working Group		N/A	30 July 21 TBC	TBC
Date of HWB Meeting		24-Jun-21	07-Oct-21	27-Jan-22
Venue		MS Teams	TBC	TBC

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