

# Public Document Pack

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18 January 2023

## West Sussex Health and Wellbeing Board

A meeting of the Committee will be held at **10.30 am** on **Thursday, 26 January 2023** at **County Hall, Chichester, PO19 1RQ.**

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

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

**Tony Kershaw**

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### Agenda

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

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.

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.

4. **Minutes** (Pages 5 - 12)

The Board is asked to confirm the minutes of the meeting of the Health and Wellbeing Board held on 3 November 2022.

10.40 am 5. **Recommendations and Actions Tracker** (Pages 13 - 16)

The Board is asked to monitor/note the responses to Recommendations and Actions made at the meeting on 3 November 2022.

- 10.45 am 6. **West Sussex Safeguarding Children Annual Report** (Pages 17 - 66)

The West Sussex Safeguarding Children's Partnership (WSSCP) is required to produce an annual report providing an overview of its key achievements against its business plan priorities. The Health and Wellbeing Board does not have a role in approving or endorsing this annual report as it is a partnership document. It will be presented to the board, for information, as a key partner and as WSSCP activities aligns with the Joint Health and Wellbeing Strategy outcomes.

- 10.55 am 7. **Public Forum**

The Board invites questions and comments from the public for consideration at the meeting. Contact Erica Keegan on Telephone: 033 022 26050 (a local call) or via email: [erica.keegan@westsussex.gov.uk](mailto:erica.keegan@westsussex.gov.uk)

- 11.10 am 8. **West Sussex County Council's Communities Directorate update on whole Council response to cost of living pressures** (Pages 67 - 74)

At the meeting of the Board on 3 November 2022 the collaborative approach to tackling cost of living pressures across West Sussex and addressing some of the potential negative impacts on the local population's health was considered. An addendum to the Joint Health and Wellbeing Strategy was agreed to; describe the cost of living pressures as they relate to our local population, consider high level potential impacts to population health and wellbeing and describe the approach and principles to addressing cost of living pressures. An update will be provided on the countywide strategic approach.

- 11.25 am 9. **Children First Board** (Pages 75 - 78)

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.

- 11.35 am 10. **West Sussex COVID19 Local Outbreak Engagement Board** (Pages 79 - 82)

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.

- 11.45 am 11. **Public Health Update**

The Director of Public Health will provide a verbal update on current public health matters. This will include a briefing on the [Director of Public Health Annual Report 2021 - West Sussex County Council](#).

- 12.00 pm 12. **Integrated Care System Update**
- An update will be provided on the strategic development of the Integrated Care System at a local level.
- 12.10 pm 13. **Better Care Fund Monitoring Quarter 2 2022/23** (Pages 83 - 98)
- This paper summarises performance against the Better Care Fund national metrics for Quarter 2 2022/23.
- 12.20 pm 14. **Health and Wellbeing Board Work Programme 2023/2024** (Pages 99 - 100)
- To note the work programme for 2023/24 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.
- 12.25 pm 15. **Date of next Meeting**
- The next meeting of the Board will be held at 10.30am on 27 April 2023.

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

### **Webcasting**

Please note: this meeting is being filmed for live and subsequent broadcast via the County Council's website on the internet. The images and sound recording may be used for training purposes by the Council.

Generally the public gallery is not filmed. However, by entering the meeting room and using the public seating area you are consenting to being filmed and to the possible use of those images and sound recordings for webcasting and/or training purposes.

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

3 November 2022 – At a meeting of the West Sussex Health and Wellbeing Board held at 10.30 am at County Hall, Chichester, PO19 1RQ.

**Present:** Cllr Lanzer (Chairman), Cllr Duncan Crow, Cllr Garry Wall, Alison Challenger, Emily King, Chris Clark, Catherine Howe, Helen Rice, Sue Livett and Jess Sumner

**Apologies:** Cllr A Jupp, Cllr J Russell, Alan Sinclair, Lucy Butler, Pennie Ford, Natalie Brahma-Pearl, Dr Jane Padmore and Katrina Broadhill

**Also in attendance:** Dani Plowman and Jenny Boyd

### **Part I**

#### **25. Chairman's Welcome**

25.1 In welcoming all present to the meeting the Chairman outlined the following updates;

25.2 Board Members were referred to the West Sussex Health and Wellbeing Board Terms of Reference (copy appended to the agenda available on the website) which had been amended to include the arrangements for the new Sussex Integrated Care System that came into force on 1 July 2022. Members were asked to note.

25.3 Since the last meeting of the Board, the Chairman formally confirmed his Chairman's Action to sign-off, the Pharmaceutical Needs Assessment (PNA) as circulated to Board Members.

25.4 It was noted that an informal Health and Wellbeing Board Seminar was held on 7 October, which focused on the priorities and relationship between the Health and Wellbeing Board and the Integrated Care System place-based partnership following its formal launch. This had provided valuable input and discussion, exploring the role of the Board within the system and its interface with the Integrated Care Board (ICB), known as NHS Sussex, and the Integrated Care Partnership (ICP), known as the Sussex Health and Care Assembly.

25.5 The Chairman reminded members of the Four Boards Collaborative Working Agreement: In autumn 2019, a Collaborative Working Agreement was developed between the four countywide strategic boards to galvanise and strengthen relationships and describe the collective endeavour to deliver the responsibilities, priorities and ambitions of the Health and Wellbeing Board, Safeguarding Adults Board, Safeguarding Children's Partnership, and Safer West Sussex Partnership. In early October 2022, representatives from the four boards came together to re-energise the principles of collaboration, share respective Board priorities, and to identify opportunities to work more closely to support residents and communities.

25.6 The Chairman provided an update for Board Members on the progress of the West Sussex Joint Dementia Strategy 2020-2023, which launched in September 2020, ending in March 2023. It was noted that excellent progress had been made throughout the pandemic, thanks to excellent partnership working across the system with health, social care and the voluntary and community sector. NHS funding for the Strategy had provided opportunities for innovation, new roles and services, including the development of a new Learning Disability Dementia Assessment Pathway, additional support for carers, greater dementia awareness and improved awareness for people affected by dementia from South Asian Communities. Members were informed that as the strategy moves into its final 5 months a programme of activities was being developed to help support people with dementia and their carers through the winter period and cost of living pressures.

## **26. Declaration of Interests**

26.1 There were no declarations of interest.

## **27. Minutes**

27.1 Resolved – that the minutes of the meeting held on 7 July 2022 are approved as a correct record and are signed by the Chairman.

## **28. Public Forum**

28.1 It was noted that the Board had received two questions that would be dealt with outside of the meeting as one did not meet with the Board's jurisdiction and both needed sufficient time for a substantive answer. As both questioners were not in attendance it was confirmed a written response would be provided following the meeting.

## **29. Children First Board**

29.1 The Assistant Director (Early Help & Children's Social Care) provided a formal update on the Children First Board, being accountable to the West Sussex Health and Wellbeing Board, as a sub-group of the Board.

29.2 Members were reminded that the Children First Board is made up of a wide range of West Sussex organisations and groups including young people, parent, carers and others who look after children on a daily basis. It also comprised of members from practitioners, officers of the County Council; people elected to represent the views of the people of West Sussex, Districts and Boroughs, schools, colleges, police, health partners, and representatives from the voluntary and community sector. The voice of young people was noted as being provided through four young people on the Board with the Board's vice-chair also being a young person.

29.3 Since its last report to the Health and Wellbeing Board the Children First Board had been working on the development and production of a Children and Young People's Plan (CYPP). Following a twelve week consultation process (April 2022 - June 2022) a number of important

changes were made to the draft plan and incorporated into the final version. The plan would now focus on five priorities noted as:

1. Keeping children and young people safe from harm
2. Providing the earliest support to families on low incomes to minimise the impact this has on their lives
3. Closing the disadvantage gap for children and young people across all key stages
4. Improving children and young people's emotional health and wellbeing
5. Strengthening multi- agency approach to identifying and meeting the needs of children and young people with special educational needs and disabilities

29.4 It was informed that the final plan would be made available in an electronic format in the first instance, so it could be circulated and accessed virtually. It would then be put into a range of formats so it would be accessible to all.

29.5 The last meeting of the Children First Board, held on 17 October 2022, received an update on the Children and Young People Plan as well as receiving reports on the progress being made on emotional health and wellbeing and special educational needs and disabilities (SEND).

29.6 In receiving the report members asked how the Children First Board would be responding to the Cost of Living Crisis. It was answered that this was seen as a priority and joined up work, between partners, was taking place to support families whilst also addressing poverty. The primary focus was taking place at local level and the Children First Board was being kept informed. The Assistant Director (Communities) confirmed that all partners were working hard to ensure a collaborative approach at a local level. One example was where direct feedback from schools was being used. Free holiday club places were being made available over the school Christmas holidays for children who receive means-tested free school meals; 41 organisations are assisting with delivery of the Holiday Activity and Food programme (HAF) across the county, with a wide range of activities on offer, and each child given a meal for every day they take part. Separate to the HAF programme the County Council was also providing a £15 supermarket food voucher to eligible families, which would support over 17,500 children in West Sussex.

29.7 Resolved – that

- i. the content of this report be noted; and
- ii. the key message from the Children First SEND group, ensuring that all stakeholders are fully aware that children's special educational needs can be met at SEND Support rather than through an Education, Health and Care Plans (EHCP) and that children and young people with EHCPs can have their needs met in mainstream schools and don't necessarily need specialist provision, be promoted.

### **30. Public Health Update**

30.1 The Director of Public Health provided a verbal update on current public health matters and highlighted the following key points;

- It was expected that the Winter period would bring more infectious disease. Covid rates had stabilised and the rates in West Sussex were declining. It was hoped that a decline would continue in Covid rates in the over 60 age group and in the number of hospital admissions. The Local Outbreak Engagement Board, as a Subgroup of the Health and Wellbeing Board, would continue in its prevention and protection work.
- It was encouraged that anyone who has had an invite for a seasonal flu or Covid-19 vaccine to come forward.
- It was noted that the annual national stop smoking challenge, known as Stoptober, this year focused on younger smokers between the age of 25 and 50. Members were informed that evaluation of the campaign would be undertaken to monitor its effectiveness.
- Board members were informed that the annual Public Health Report was due to be published shortly. This was an independent report by the Director of Public Health and this year's topic would be on Covid-19, its impact and learning.

30.2 In thanking the Director of Public Health for the update, the Chairman emphasised the importance of vaccines in making a positive health difference to the local population and encouraged all eligible residents to receive their seasonal flu/Covid-19 vaccination.

### **31. West Sussex Joint Health and Wellbeing Strategy 2019-2024 - Cost of Living Report**

31.1 The Board received a presentation (copy tabled at the meeting and appended to the agenda available on the website) on the Board's Joint Health and Wellbeing Strategy (JHWS) 2019-2024. The presentation to the Board focused on cost of living pressures, and potential impacts on the local population's health. A proposed strategic approach was outlined and principles to tackle this countywide with a recommendation to the Board for inclusion as an addendum in the JHWS. The Assistant Director (Communities) and the Chief Executive of Worthing and Adur Councils also provided a verbal update to the Board on the approach to addressing cost of living pressures across the county, and current work being developed and implemented to support residents and communities. It was noted that whilst the report specifically focused on the proposed cost of living pressures addendum to the JHWS, it was also important to highlight, that in addition to this, the JHWS will be reviewed in light of current national policy to ensure it continues to meet the health and wellbeing needs of residents and communities.

31.2 In discussing the presentation the West Sussex Joint Health and Wellbeing Strategy 2019-2024 was considered and the Board;



- agreed that an understanding of how Cost of Living pressures were impacting the population needed to be established to help effectively target the response and how the utilisation of place based quantitative data was important for operational insight;
- stated that maximising existing services ensuring good accessibility was key as well as ensuring close partnership working;
- pointed out that West Sussex County Council's Community Hub which was established in response to the pandemic was being utilised to support Cost of Living pressures. The County Council was noted as working in partnership to support people and families who are struggling with the rising cost of living. The government's Household Support Fund is being used to provide financial and practical assistance to people especially during this winter. Working closely with district and borough councils and charities the council's Community Hub continued to offer direct support to vulnerable households, providing essentials such as food and supplies, as well as grants to those who are eligible. It was also noted that the 36 West Sussex libraries offer a warm welcome to all visitors and library staff are on hand to help advise people on topics, from money management to energy saving, job seeking and benefits guidance;
- suggested that food banks be utilised as the front-line delivery point to those in need and integrate this model into existing pathways;
- pointed out that District and Borough Councils were seeing people who had not normally needed support, working people and those not previously affected by hardship;
- considered that mental health support was required due to the link between deprivation and mental health;
- agreed that supportive infrastructure should be collaborative with a good strength of messaging, adopting the same working practices used with Covid-19;
- informed that the voluntary sector was being impacted in terms of fundraising difficulties and staff had received no uplift in their salaries. It was seen as important that the strategy included the recognition of the voluntary sector in delivering a cost of living response;
- outlined the increasing demands on the voluntary sector in terms of complex cases and a depleted workforce. It was viewed that staff recruitment and retention was a significant issue that needed to be addressed with the support of the county council. It was pointed out that the emerging theme in the Integrated Care System was workforce wellbeing and this was being proposed for inclusion in the developing Integrated Care Strategy;
- questioned whether partners could keep up with the pace of emerging cost of living pressures. It was acknowledged that Cost of Living could impact on the population for a long time and so a sustainable approach would be adopted in the Joint Health and Wellbeing Strategy (JHWS) to address local, collective, Cost of Living issues. The JHWS would focus on partnership and collaborative working; and
- requested a Seminar/Working Group to explore the response to Cost of Living as partners and question of Leadership in West

Sussex. This was added to the Health and Wellbeing Board's newly established Action Log for later consideration.

31.3 Resolved – that

- i. the potential impacts of cost of living pressures on our local population's health and wellbeing, be acknowledged;
- ii. feedback had been provided on the proposed strategic approach and principles to tackle cost of living pressures in West Sussex as outlined in the Public Health Specialty Registrar's presentation; and
- iii. the Public Health Specialty Registrar be approved to progress inclusion of the proposed cost of living addendum in the West Sussex Joint Health and Wellbeing Strategy 2019-2024 (JHWS).

**32. Integrated Care System**

32.1 The Assistant Director (Integrated Health) provided a presentation (tabled at the meeting, copy appended to the agenda on the website) updating the Board, on the implementation of the local Integrated Care System and progress on the development of the Integrated Care Strategy for Sussex.

32.2 It was noted that the aim was to achieve better health and care for all across Sussex, with everyone living longer, healthier, and fulfilling lives with access to the best possible services and support when required. With the oversight of the Sussex Health and Care Assembly, the Integrated Care Strategy was being developed, following a period of co-production and suggestions for content, capitalising on opportunities created by being part of an Integrated Care System (ICS). A draft strategy was expected to be circulated to the West Sussex Health and Wellbeing Board virtually during November, for consideration of future planning implications before the final strategy is presented to the Sussex Health and Care Assembly in December 2022 for sign off.

**33. Better Care Fund Monitoring Quarter 1 2022/23**

33.1 The Board received a report that presented the West Sussex 2022/23 Better Care Fund Plan and Capacity and associated Demand Plan for approval and summarised performance against the Better Care Fund national metrics for Quarter 1 2022/23.

33.2 Following consideration of the report and plan, it was

Resolved – that

- i. the West Sussex Better Care Fund plan for 2022/23, be approved;

- ii. the West Sussex Capacity and Demand Plan for Intermediate Care Services Q3 & Q4 2022/23; and
- iii. the West Sussex performance against the national BCF metrics at Q1 2022/23, be noted.

### **34. Work Programme**

34.1 In considering the Work Programme the Chairman raised the following key points;

- the previous meeting asked for an Action Log and this would be implemented with effect from today's meeting;
- with respect to the request for reinstatement of the Health and Wellbeing Board's Newsletter it had been agreed that the county council's communications team will incorporate any Health and Wellbeing Board news into their communications letter to residents. This was noted as already having a circulation to over 200k residents; and
- the request for an Annual Report from the West Sussex Safeguarding Children's Partnership had been followed up and a report will be received at future meeting.

34.2 In discussing the Work Programme, it was requested that Cost of Living become a standard item at every meeting.

34.3 Resolved – that the Health and Wellbeing Board Work Programme 2022/23 be noted.

### **35. Date of next Meeting**

35.1 The date of the next meeting of the Health and Wellbeing Board was confirmed as 26 January 2023.

The meeting ended at 12.22pm

Chairman

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## West Sussex Health and Wellbeing Board (HWB) Action and Recommendations tracker

The action and recommendations tracker allows the HWB to monitor responses, actions and outcomes against their recommendations or requests for further action. The tracker is updated following each meeting and circulated to Board Members electronically. Once an action/recommendation has been completed, it will be removed from the tracker.

### Recommendations

Topic	Meeting (date raised)	Recommendations	Responsible Officer/ Member	Follow up	Response/Progress/ Deadlines	Status
Children First Board	3.11.22	(1) Note the contents of this report. (2) Promote key message from Children First SEND Sub-group	Lucy Butler/Cllr Russell	N/a	Ongoing	Resolved at meeting
JHWS, Cost of Living	3.11.22	(1) Acknowledge the potential impacts of cost of living pressures on our local population's health and wellbeing. (2) Provide feedback on the proposed strategic approach and principles to tackle cost of living pressures in West Sussex as outlined in the Public Health Specialty Registrar's presentation. (3) Approve the Public Health Specialty Registrar to progress inclusion of the proposed cost of living addendum in the West	Dani Plowman/Alison Challenger	N/a	Ongoing	Resolved at meeting

<b>Topic</b>	<b>Meeting (date raised)</b>	<b>Recommendations</b>	<b>Responsible Officer/ Member</b>	<b>Follow up</b>	<b>Response/Progress/ Deadlines</b>	<b>Status</b>
		Sussex Joint Health and Wellbeing Strategy 2019-2024 (JHWS).				
Better care Fund	3.11.22	(1) Approve the West Sussex Better Care Fund Plan for 2022/23. (2) Approve the West Sussex Capacity and Demand Plan for Intermediate Care Services Q3 & Q4 2022/23. (3) Note the West Sussex performance against the national BCF metrics at Q1 2022/23.	Chris Clark	N/a	N/a	Resolved at meeting

**Actions**

<b>Topic</b>	<b>Meeting (date raised)</b>	<b>Action</b>	<b>Responsible Officer/ Member</b>	<b>Follow up</b>	<b>Response/Progress/ Deadlines</b>	<b>Status</b>
Cost of Living	3.11.22	Establish a Health and Wellbeing Working Group on Cost of Living	Chairman will consider item for inclusion	At agenda prep meeting 5.1.23	The establishment of a working group is not required; a comprehensive programme of work is already underway to address cost of living pressures across West	Completed

<b>Topic</b>	<b>Meeting (date raised)</b>	<b>Action</b>	<b>Responsible Officer/ Member</b>	<b>Follow up</b>	<b>Response/Progress/ Deadlines</b>	<b>Status</b>
					Sussex. Regular updates to be provided at quarterly Health and Wellbeing Board meetings	
Work Programme	3.11.22	(1)Request to add item on work programme for next meeting to update on Cost of Living  (2)Request to add item on Health and Care workforce planning	Chairman will consider item for inclusion	At agenda prep meeting 5.1.23	(1) Cost of Living Item added to Work Programme  (2) This item to be dealt with and included in Integrated Care System updates on the work programme.	Completed

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

**26<sup>th</sup> January 2023**

### **West Sussex Safeguarding Children's Partnership Annual Report October 2020 to March 2022**

**Report by, Chris Robson, Independent Chairman, West Sussex  
Safeguarding Children's Partnership**

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#### **Summary**

The West Sussex Safeguarding Children's Partnership (WSSCP) is required to produce an annual report providing an overview of its key achievements against its business plan priorities.

Nationally Children's Safeguarding Partnerships are expected to submit the report to the Department of Education. Unfortunately, due to capacity issues within the WSSCP business team, we were unable to produce a report to cover the 2020/21 period. Therefore, this report is dated from October 2020 to March 2022 to account for the partnership's activities over this period.

The Health and Wellbeing Board does not have a role in approving or endorsing this annual report as it is a partnership document. It is being presented to the HWB for information as they are a key partner and the WSSCP activities aligns with Health and Wellbeing Strategy outcomes.

#### **Recommendation(s) to the Board**

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

- (1) To note the WSSCP progress in delivering business plan priorities.
- 

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

##### **1 Background and context**

- 1.1 The West Sussex Safeguarding Children Partnership (WSSCP) is led by three Strategic Lead Partners: Police, Health and the Local Authority, whose role, functions, and operations are set out in the statutory guidance *Working Together to Safeguard Children 2018*.
- 1.2 Statutory partnerships are required to work together as joint and equal partners to shape bespoke arrangements which respond to local need. [The Wood Review](#) of multi-agency safeguarding arrangements emphasises the need for strong leadership from partners.

- 1.3 Safeguarding children's partnerships are expected to set out safeguarding priorities based on local needs which are identified based on data and consultation with key priorities. The annual report provides an overview of the partnership's progress in delivering priorities over the previous year as well as identifying any gaps or evidence of emerging need which enables the setting of priorities for the upcoming year.

## 2 Proposal details

- 2.1 In 2019, the WSSCP identified the three following priorities based on data and consultation with partners: neglect, exploitation, and strengthening of multi- agency safeguarding practice. In addition, the partnership also sets out three overarching priorities to improve how it functions. These include: 'Lead and consolidate effective partnership arrangements' and 'Revise and embed a Learning and Improvement Framework'.
- 2.2 The Annual report produced in 2020/21 outlined progress in delivering the priorities and confirmed that the priorities set out in 2021 were still the right one for the partnership, so these were rolled over to 2021/2022.
- 2.3 As outlined in the introduction to this report, there have been some capacity issues with the WSSCP business team which has had an impact on delivery. None the less, there is evidence of key achievements.

In addition to the activities undertaken to address neglect and exploitation, WSSCP identified that mental ill health and wellbeing was an emerging need and during 2020 undertook a number of actions to improve provision in this area.

- 2.4 Some of the key achievements to highlight include:
- **Neglect** - implemented a neglect strategy across all agencies in the partnership to improve practice, undertook a neglect scrutiny process and implemented a multi-agency training programme
  - **Exploitation** – undertook a child exploitation scrutiny process, started two safeguarding practice reviews related to exploitation and improved WSSCP's governance arrangements.
  - **Improving multi agency safeguarding practice** – worked with the West Sussex Safeguarding Adults Board (WSSAB) to develop protocols to improve the movement of young people from children to adult services, supported the development of the Family Safeguarding Model and delivered the ICON project to disseminate safer sleeping messages.
- 2.4 During this time the WSSCP also worked very closely with statutory partners and colleagues in WSCC public health to develop interventions to address mental ill health and emotional wellbeing.

Mental ill health need increased across the country partly as a result of the COVID-19 pandemic.

West Sussex was particularly affected. There was an increase in the number of children completing suicide during the report timeframe. In addition, data provided by the public health team showed that there was a significantly higher level of mental health need in the area compared with other areas in Sussex.

To address this, the partnership supported a number of mental ill health and emotional wellbeing interventions. This included supporting Operation Warren, a multi-agency response that included wrap-around support to at-risk children and undertaking several safeguarding practice reviews which included suicide.

- 2.5 An area of strength was the multiagency training program which saw 904 people from a range of organisations attending training in key subjects in line with the recommendations of safeguarding practice reviews, audits and scrutinise. Training evaluation found that of those who completed evaluation forms, 91% said that the training increased their confidence.
- 2.6 The annual report enabled the WSSCP to identify areas for the partnership to build on and these will be taken forward as part of the Business Plan development process. The partnership plans to:
- Develop a series of impact measures to enable us to evidence the effect of our interventions and policies.
  - Increase and improve our communications activities to ensure that a wider range of stakeholders attend and benefit from our extensive training programme.
  - Develop and implement a voice and participation strategy to ensure that children and families can directly influence WSSCP work.

A WSSCP business plan is being developed in partnership with stakeholders which will set out clear objectives for 2023/24 and it will address some of the issues outlined above.

### **3 Consultation, engagement and advice**

- 3.1 The Annual report was developed in consultation with key stakeholders. This included the Heads of Safeguarding from across Police, Health and Children's Social Care and the Chairs of all the WSSCP subgroups. The report also went to the District and Boroughs for their input.
- 3.2 The report was also discussed at key WSSCP subgroups such as the Improvement and Assurance Group, the Learning and Development Group and the Steering Group. Membership of those groups includes

additional partners such as the voluntary sector and probation as well as representation from health, police, CAHMS and a range of WSCC departments

- 3.3 Data included in the report came from Children Social Care, Community Safety, Health and Public Health. Data leads from those organisations provided invaluable advice on how to present and interpret the data.

**Contact:** Julia Mlambo, **Interim Partnership Projects and Programme Manager/West Sussex Safeguarding Children's Partnership** phone 03302227230 E-mail: [Julia.Mlambo@westsussex.gov.uk](mailto:Julia.Mlambo@westsussex.gov.uk)

**Appendix:** West Sussex Safeguarding Children's Partnership Annual Report October 2021 to March 2022.



# West Sussex Safeguarding Children Partnership

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Annual Report - October 2020 to March 2022

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## FOREWORD

Welcome to my section of this Annual Report. As the Independent Chair and Scrutineer of the WSSCP I have the responsibility for scrutinising this document, making sure it is accurate and provides the information you, the reader, require. I hope that it meets your expectations, provides you with the information you need and above all gives you confidence in the way the Partnership strives to safeguard children in West Sussex.

As you read this section and other parts of this annual report, I would ask you to consider that WSSCP is emerging from the terrible pandemic that has had such a massive impact on all of us. It is at times like these that our focus is drawn to the true value of those who safeguard our children on a daily basis. This is especially true when we lose their input, when children are not in school, pre-school and after school activities. I want to reassure you that the WSSCP recognised this and worked tirelessly to make sure other measures were put in place to fill this gap. It is important that we acknowledge the response of our communities and the way they assisted us. Often, we can be overwhelmed by the negatives of a situation but the response of professionals, volunteers and the community to safeguarding during the pandemic has been a real positive for us. I hope that as we return to a semblance of normality, we can continue to rely on each other to take responsibility for safeguarding our children.

As the Independent Chair of the Partnership, I am consistently impressed by the professionalism, drive and hard work of all who are involved in safeguarding. West Sussex is fortunate to have leaders from all agencies who are committed, professional and understand the value of corroborative working. Please be assured that whilst they do not always agree they are resolute in their joint objective of improving outcomes for West Sussex children.

This report is unusual in that it details the achievements made over an extended eighteen-month period. Whilst this is not ideal it has become necessary to complete an extended report because of resource pressures experienced during that reporting period.

It is important that I acknowledge that this lack of a consistent, fully functioning support team has resulted in some basic expectations not being met. Some of our sub-group meetings have gone on without administrative support, timeliness of papers has been an issue and some safeguarding practice reviews have been difficult to service, causing delays. The statutory partners have supported recruitment and at the time of writing this report a new team has been recruited. This is a real positive for WSSCP going forward.

I would like to take this opportunity to thank everyone who contributed to this report, in particular the WSSCP Interim Board Manager who has created a document that is fair, informative and balanced.

On a final note, I want to thank everyone involved in the WSSCP for their tireless work over the reporting period. West Sussex is blessed with some excellent safeguarding professionals who go 'above and beyond' to protect our children. It is fair to say that safeguarding cases often create negative press that seek to blame agencies or individuals. Whilst it is right that we seek to learn and constantly improve, I would ask that you also consider the tireless work that goes on across the county to safeguard children. The fantastic, positive work that is done rarely hits the news; I hope when you read this report you will become aware of its impact on our children, families and communities.

**Chris Robson,**  
**Independent Chair of the West Sussex Safeguarding Children Partnership**

## LOOKING INTO THE GOLDFISH BOWL

### The Lay Member's Perspective

My name is John Thompson, and I have celebrated my 10<sup>th</sup> year as the now only Lay Member of the West Sussex Safeguarding Children Partnership. That means that I have worked with every Independent Chair and every Board/Partnership Manager since the beginning.

So, what does a Lay Member do? Originally the plan was for a two-way communication between the Board as it was then and the community. More recently it has moved towards a "scrutiny role". The one asset I bring to the Partnership is my extensive experience and networks in Health, Local Government and especially Schools.

What do I see in the goldfish bowl?

- The first thing is the massive impact of Covid-19 on the services we provide to support the young people we see – with the cost-of-living crisis things are not going to get better anytime soon.
- A real desire to do all we can for our children.
- Amazing dedication from front-line staff – going the extra mile – to support the children allocated to them.
- Some real successes – Operation Warren.
- Excellent responses to new challenges – around violence reduction i.e. setting up a youth violence thematic review
- Better engagement with fathers and men – ICON and Dad Pad.

But!

- There is too often a knee-jerk reaction when something goes wrong – LCSRs (Local Child Safeguarding Review) and RRs (Rapid Review) are not always the most effective way of identifying areas for improvement and more importantly delivering real improvements for young people.
- Far better to acknowledge what went wrong and get the learning briefs and training in place – some LCSPRs have been running for a long time.
- The Partnership Business Team have very finite resources – they need to be used to maximum effect and, if necessary, supplement them from other agencies.

For the last seven years, I have sat on what is now the Improvement and Assurance Group. The last year has seen really encouraging improvements in the way that the group works. We have a plan to do audits that support improvement work and/or examine emerging issues. Also, we are now actively looking at identifying and removing where possible barriers to improvement. We now have an iteration of the Data set that will be easy to maintain and of wide use.



**John Thompson MBE**  
WSSCP Lay Member



## INTRODUCTION

We are delighted to present this Annual Report on behalf of the three statutory partners of the West Sussex Safeguarding Children Partnership. The report covers a range of activities carried out between October 2020 and March 2022.

WSSCP has made good progress in delivering its existing priorities of tackling Neglect and Exploitation and ensuring effective multi-agency safeguarding practice. It has also undertaken robust action to address the mental health challenges that have emerged partly as a result of the Covid-19 pandemic. This includes the inception of Operation Warren, a multi-agency partnership giving an active response to support children who are at risk of suicide. This has been an excellent example of effective, focused and flexible partnership working and the lessons from this project should help to inform our approach to children's safeguarding moving forward. Recently Op Warren, which has now been renamed was recognised with a national award for Mental Health Initiative of the Year.

We have also undertaken a number of rapid, thematic and local child safeguarding practice reviews, which while outlining some areas of good practice, highlighted others where partner agencies need to make improvements to their work.

Therefore 2022/23 will be focused on further implementing the actions from those reviews, including continued actions on mental health and a renewed focus on safeguarding under-2s, and the steering group will receive regular reports on progress. We will continue to prioritise key safeguarding issues including Neglect and Exploitation

In September, Chief Superintendent Jon Hull left Sussex Police to take up a new senior role at the College of Policing. We want to take this opportunity to thank Jon, our Police Strategic Lead Officer for his hard work over the years. He ensured that the Police continued to be an engaged and committed partner in addressing children's safeguarding in the local area.

We remain grateful to all who work to support children, young people and families in West Sussex; none of what has been achieved would have been possible without the hard work of practitioners and volunteers. We are especially grateful to the children and families whom we have worked with. The voice of children and families will remain at the centre of our work and ensure that the Partnership remains focused on their needs.



**Jon Hull**  
**Detective Superintendent –**  
**Public Protection, Sussex Police**



**Naomi Ellis**  
**Director of Safeguarding &**  
**Clinical Standards, NHS Sussex**



**Lucy Butler**  
**Director of Children, Young**  
**People and Learning, West**  
**Sussex County Council**



**1. THE WEST SUSSEX DEMOGRAPHIC CONTEXT**

**West Sussex County Overview**

West Sussex is a large area in Southeast England. It is a diverse area which comprises seven districts and boroughs. Much of the coastal area of Arun, Worthing and Adur is urban in character and densely populated; inland, Chichester, Horsham and Mid Sussex districts are characterised by countryside and market towns. To the north is the large town of Crawley, with Gatwick international airport adjacent. There are good transport links, with major roads, bus and train stations and ports.





## Demography & Ethnicity

According to the 2021 census, the population has increased by 9.4% from 2011 to 882,700, which is a larger rise than for other areas in Sussex. While figures show that West Sussex has an ageing population, the percentage of under-17s has increased by 7.8% since 2011, which is higher than the average English increase of 5%.

In West Sussex, 88.9% of the population is White British (English/Welsh/Scottish/Northern Irish), a higher proportion than for the population of England and Wales (80.5%) and the Southeast (85.2%).

West Sussex is less ethnically diverse than English averages. Overall, 43.6% of the population who are not White British belong to the White Irish, White Gypsy or Irish Traveller or Other White ethnic groups. A further 31.7% are Asian and 11.2% are of Mixed or multiple ethnic groups. The most diverse areas in the County are Crawley, where 72.1% of the population is white British.

The County also has a substantial transient population which includes travelling families and seasonal migrant workers, some of whom are employed within the agricultural sector. The demography and numbers of these groups are harder to establish; however, in 2011, the census recorded 58,000 people as Gypsy/Traveller in England and Wales, with a further 4,000 recorded in Scotland.

In line with national figures, the number of male and female West Sussex residents comprises a 50:50 split for all age groups up until the 65+ year group.

Local data on sexual orientation and gender reassignment is limited. Survey data taken from the ONS 2011, suggests that roughly 2.5% of the adult population in the Southeast identify as lesbian, gay, bisexual or other (LGBTplus). This is slightly higher than the England percentage and has seen a rise in recent years.

## Deprivation

West Sussex is a relatively affluent area. Using the Index of Deprivation 2019, West Sussex is ranked 129 out of 151 upper tier authorities (1 being most deprived, 151 being least deprived). The County therefore remains one of the least deprived areas in the country. In relation to neighbouring authorities, West Sussex is relatively less deprived than East Sussex (ranked 93) and Brighton and Hove (ranked 87). Crawley ranks as the *most deprived* district area in West Sussex, followed by Arun, Adur and Worthing. West Sussex is a county of considerable contrasts. Within the County there are some neighbourhoods (in Littlehampton, Bognor and in Broadfield, Crawley) that rank within the 10% most deprived neighbourhoods in the country.

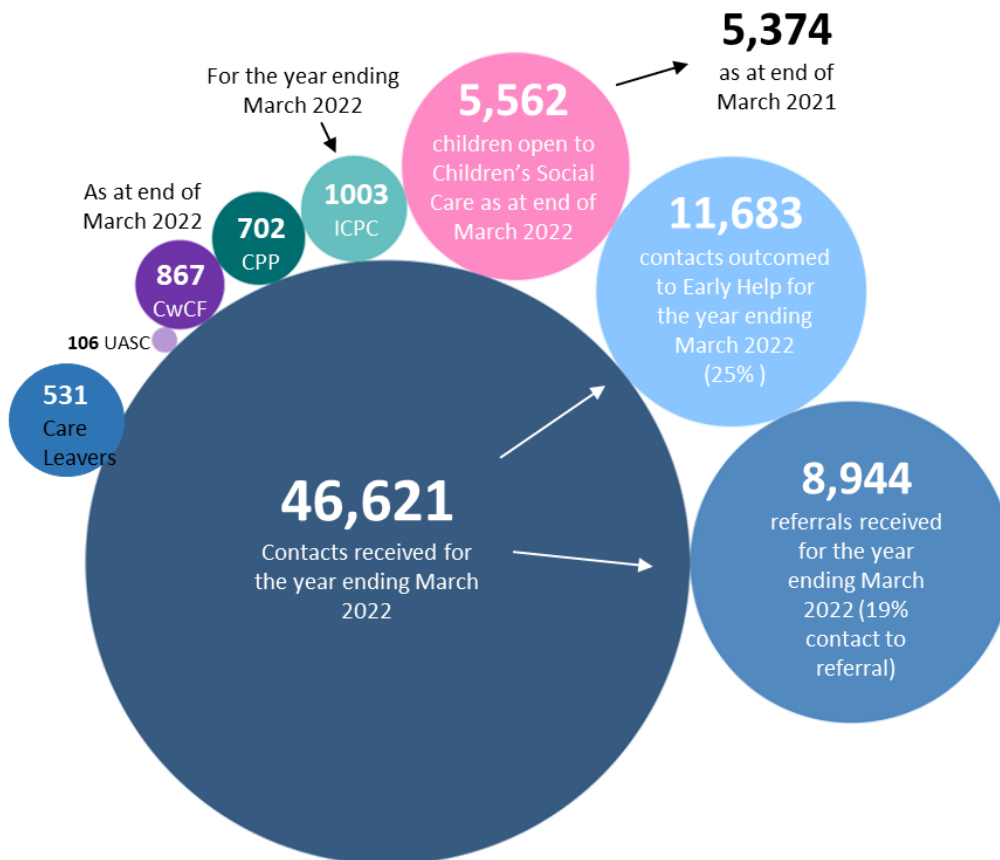




## 2. THE WEST SUSSEX SAFEGUARDING CONTEXT

Despite this relative affluence, West Sussex is a complex area with a number of specific challenges affecting the welfare of children, young people and their families, as explained below. The WSSCP aims to be intelligence-led, basing its priorities on evidence of local need.

# Children’s Social Care Safeguarding Data

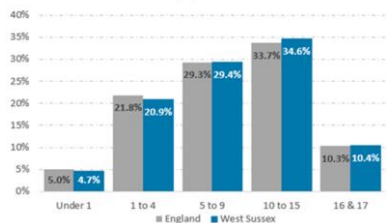


**20% children and young people as a % of total population**



● 0 - 17 ● 18 and over

Children and Young People by age band - mid-2020 population estimates



13%

children under 18 who are BME

13%

children living in relative poverty

**5,288** families turned

around and claimed for against national vulnerability criteria (Supporting Families Programme – Sep 21)

**154** Care Leavers who are NEET (40%, Mar-22)

177,363 children and young people aged under 18 living in West Sussex (ONS mid 2020 population estimates)

127,800 children attending school (Jan 2021 School Census)

12,226 pupils eligible and claiming free school meals (Jan 2021 School Census)

18,175 SEN (No Statement or EHC) children in schools (Jan 2021 School Census, 15.2%, 12.1% nationally)

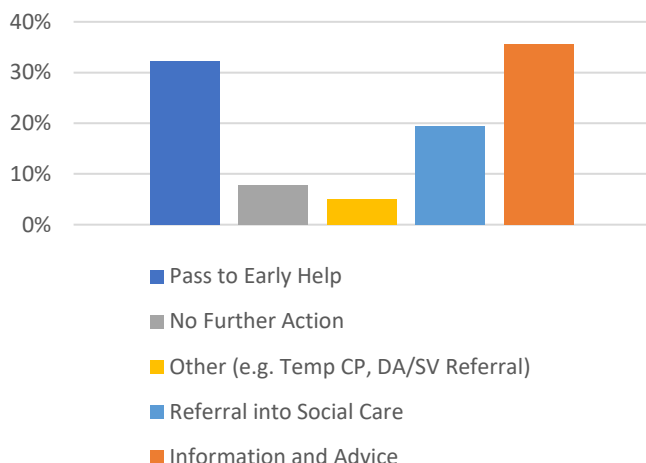
4,732

Pupils with statements or EHC plans (Jan 2021 School Census)

**11.0%**

pupils classed as persistent absentees in 2020/21 autumn term (13.0% nationally)

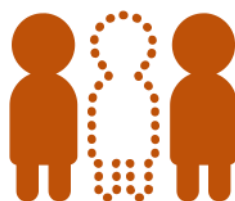
**MASH referrals 2021/22**



48,150 children were referred to the Multi-Agency Safeguarding Hub (MASH) during 2021/22, with Police being responsible for the most referrals, and the NHS improved its contribution by increasing the specialist health resource.



There are around 4,154 children with an Education Health and Care Plan (EHCP) currently in West Sussex. (Social Care Data)

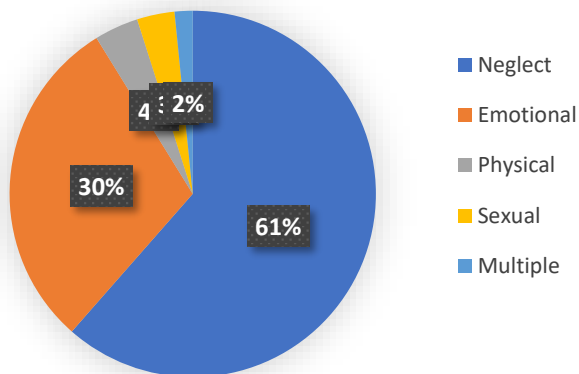


In March 2022 there were 693 children on Child Protection Plans in West Sussex. This has reduced from 954 as at the 31<sup>st</sup> of March 2021. (WSCC data)

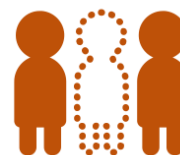
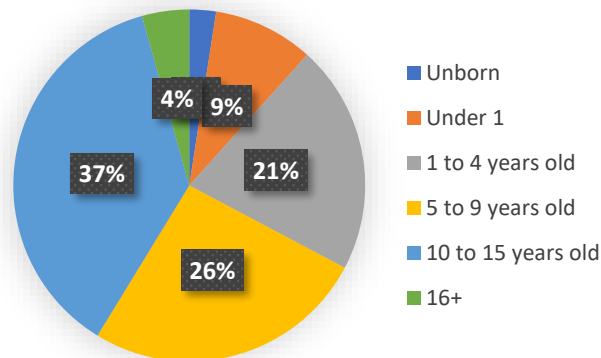


Looked after children make up 0.5% of the West Sussex population of children under the age of 18 years. (ONS data)

### Child Protection Plans by type at 31st March 2022 (West Sussex)

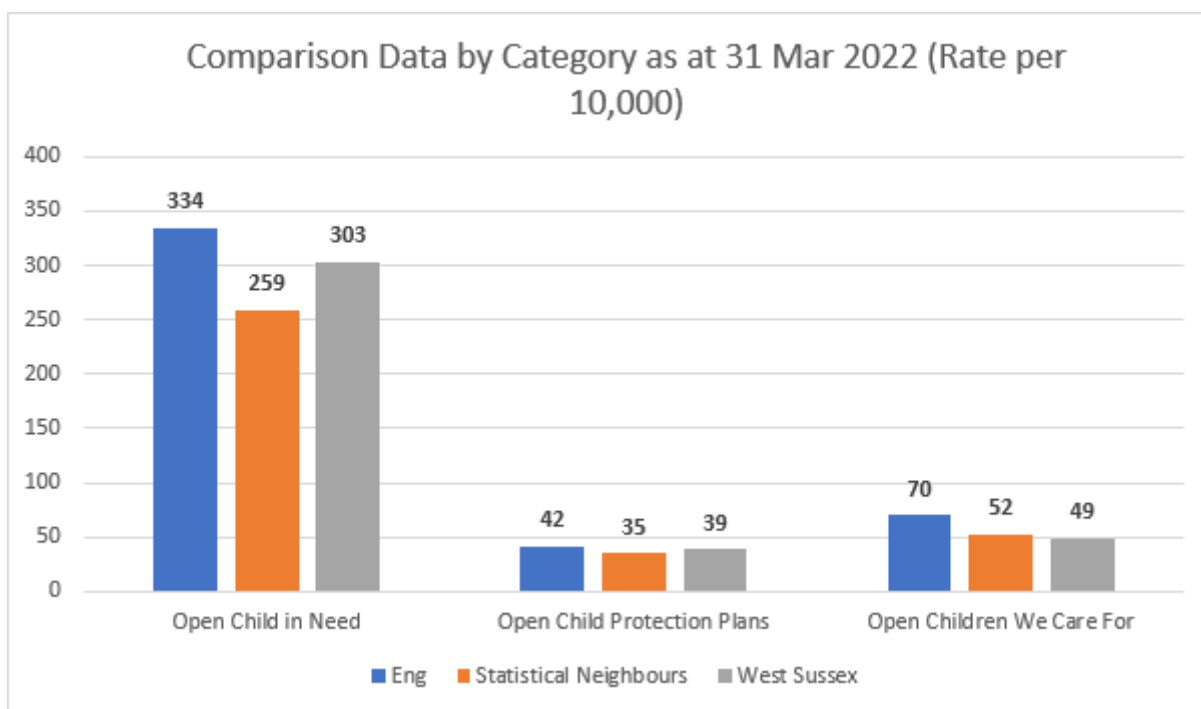


### Child Protection Plans by Age



As of March 2022 there were 693 children subject to Child Protection Plans in West Sussex. This has reduced from 954 as at 31<sup>st</sup> of March 2021, (WSSCC data), the largest category being Neglect.

Using data from the DWP, in 2021 there were over 23,000 children in West Sussex living in low-income households; this is likely to increase given continued cost of living pressures. (DWP data)



### 3. THE WEST SUSSEX SAFEGUARDING CHILDREN PARTNERSHIP

The West Sussex Safeguarding Children Partnership (WSSCP) is led by three Strategic Lead Partners: Police, Health and the Local Authority, whose role, functions, and operations are set out in the statutory guidance *Working Together to Safeguard Children 2018*.

Statutory partnerships are required to work together as joint and equal partners to shape bespoke arrangements which respond to local need. The Wood Review of multi-agency safeguarding arrangements emphasises the need for strong leadership from partners.

The following paragraphs summarise the agreed vision, principles and priorities of the WSSCP:

#### Vision

***An assured safeguarding partnership which collectively engages with children and families enabling them to thrive.***

#### Delivering our vision will mean that:

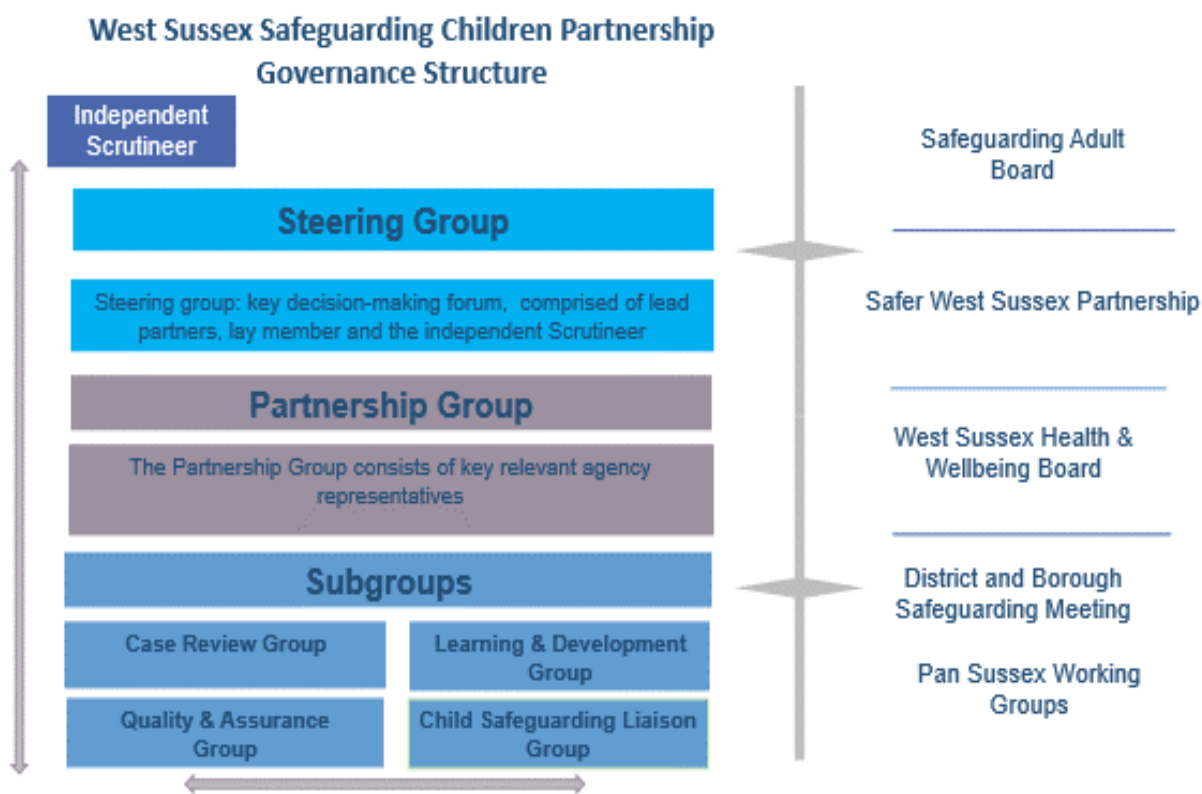
- Children and young people are safe from harm and able to thrive within their family units.
- Children and young people enjoy a healthy life, including good mental health and emotional wellbeing.
- Families are resilient and feel supported within their communities, via bespoke community-led work to meet their needs.
- Our wider networks, including schools and colleges, keep our children and young people safe and help to support and equip them with the skills they will need for their adult life.
- We will disrupt criminal activity and hold offenders to account, so that children and young people are protected from harm.



### 4. GOVERNANCE ARRANGEMENTS

The West Sussex Safeguarding Children Partnership (WSSCP) supports local organisations and agencies to work together in a system which ensures children and young people are safeguarded and their well-being promoted.

The WSSCP is supported by the WSSCP Business Team which, when fully staffed is made up of 4 officers, who provide the Secretariat for the Partnership.



### Steering Group

The Steering Group acts as the Executive group of the Partnership, responsible for strategic direction and decisions, including business plans and sign-off for major reports and reviews. Each of the statutory partners are represented at senior decision-maker level at this group; the Partnership Group and subgroups report to and will escalate issues to this group. The Steering Group manages performance by ensuring that subgroups deliver against their agreed actions. It is also responsible for horizon-scanning and making sure that national guidance is implemented locally.

### Partnership Group

The Partnership Group has a wide membership from partners across the voluntary and community sector. Its role is to provide challenge and an external perspective on the WSSCP work. This enables the WSSCP to consult with a wide range of stakeholders, ensuring that priorities and actions reflect the needs within the area.

The Partnership Group was reviewed in 2021, and it was agreed that it would enhance its role by supporting the development of children’s participation, ensuring greater engagement with the voluntary and community sector and taking a more thematic approach to meetings.

### Case Review Group (CRG)

This subgroup is responsible for receiving notifications of serious safeguarding practice incidents: death and serious harm involving neglect/abuse. The CRG is required to review cases that are referred to it,



which are taken to rapid review using a set criterion. It convenes Rapid Reviews and makes recommendations to the Independent Chair as to:

- whether a local or national child safeguarding practice review should be carried out (and if a local review, the methodology that should be used)
- whether a child safeguarding practice review should not be completed but another type of review should be undertaken and the methodology to be used, or whether other action should be taken by the WSSCP

The CRG meets on a monthly basis, and as part of its role monitors the delivery of child safeguarding practice reviews. The CRG uses the learning from local and national child safeguarding practice reviews to inform policy, practice and the WSSCP learning and development programme.

### Quality and Assurance Subgroup

The main purpose of the Quality Assurance (QA) Subgroup is to support the WSSCP to fulfil its monitoring, evaluation and scrutiny functions, as set out in *Working Together to Safeguard Children 2018* in order to continuously improve safeguarding practice across the Partnership.

The group is responsible for ensuring practice improvement across the whole Partnership, leading the quality assurance and scrutiny processes in accordance with the WSSCP Quality Assurance and Scrutiny Framework. It is also responsible for leading all audits and scrutiny processes, ensuring that they are delivered in line with best practice and that practice improvement actions are implemented promptly.

Following review, the Quality and Assurance Group became the Improvement and Assurance Group in May 2022.

### Child Safeguarding Liaison Subgroup

The local Child Safeguarding Liaison Subgroup (CSLG) is an inter-agency forum that meets every two months to consider joint working practice in respect of child safeguarding arrangements. The role of the group is to discuss cases that have complex and challenging issues, with a view to identifying and sharing learning and improving frontline practice and communication.

The group identifies and shares learning from cases where there have been concerns about practice and how agencies could have worked differently, as well as learning from cases of good practice. This enables them to learn from good practice and support positive working relationships while maintaining quality communication between all agencies.

### Learning and Development Subgroup

The WSSCP Learning & Development Subgroup will support the WSSCP Learning & Development Framework to promote and strengthen a learning culture across partner agencies in West Sussex, to safeguard the welfare of children and young people.

The Learning and Development Subgroup is responsible for overseeing the planning of the multi-agency training programme, and for responding to learning from reviews in ensuring that practitioners in partner agencies take part in training opportunities.

The group is responsible for creating a learning and development workplan based in part on a bi-annual training needs assessment.

### Discussion

The membership and purpose of each subgroup was refreshed and reviewed in 2020 to ensure that there was appropriate representation from each agency.

WSSCP continues to improve its governance arrangements; financial reporting and other processes are being developed to ensure that statutory leads can effectively manage risks. In 2022, we began planning awaydays for each of the subgroups, with external facilitators to support them in setting objectives and developing SMART action plans. The first of these was an awayday for the Quality and Assurance subgroup, the planning for which began in early 2022.

### Key achievements

The achievements of the Steering Group, Partnership Group and Subgroups in the period under review are included in Section 5 below (Achievements Against Business Plan Priorities).

### Links to Other Partnerships

- **Safer West Sussex Partnership** - WSSCP and the Safer West Sussex Partnership have worked together to deliver outcomes to safeguard children affected by exploitation and youth violence. This includes:
  - WSSCP supporting the development of the West Sussex Exploitation Strategy 2019/24
  - A joint Exploitation and Violence Reduction Board
  - Working together to deliver rapid reviews and practice reviews related to youth violence and exploitation, domestic abuse and exploitation
  - Working together to implement learning from Domestic Violence Homicides
- **West Sussex Health and Wellbeing Board** - WSSCP and Public Health have worked closely together in response to children who have completed suicide, for example through the implementation of the multi-agency response which included Operation Warren. As part of work to support mental health and wellbeing more broadly, partners have collaborated on the development of mental health and emotional wellbeing support in schools, such as through the implementation of Mental Health Support Teams and provision of self-harm support resources.

- **West Sussex Safeguarding Adults Board (WSSAB)** - WSSCP and the WSSAB have worked together to improve the safeguarding support provided to young people transitioning from Children to Adult services.
- **District and Boroughs (D&Bs)** - Adur & Worthing, Arun, Chichester, Crawley, Horsham and Mid Sussex are key partners. The WSSCP Manager attends a regular meeting with district safeguarding leads to exchange information and support actions to safeguard children. Districts and Boroughs are represented on the Steering Group and Partnership Group.



## THE VOICE OF THE CHILD

WSSCP aims to include the voice of the child in all aspects of the Partnership's work.

WSSCP undertakes a number of activities to promote children's participation both at a practice and at a policy level. As part of our multi-agency audit process, the Partnership reviews case files to ensure that as far as possible practitioners consider the voice of the child. WSSCP also enables children's participation at a strategic level; for example, children were included in the challenge session during the Section 11 audit process (see Section 6).

During 2022/23 we plan to further build on this work by developing processes to include diverse children's voices as part of the WSSCP governance structure, building on the existing participation structures of partners such as Social Care, SPFT and voluntary and community sector agencies.



## 5. ACHIEVEMENTS AGAINST BUSINESS PLAN PRIORITIES

The West Sussex Safeguarding Partnership identified three key practice priorities and two overarching priorities in 2020, based on the needs of the area. The priorities were agreed based on data as well as engagement and consultation with key partners, including representation from children, families and stakeholders in the voluntary and community sector.

The achievements in this section include both the work that the WSSCP has undertaken, as well as some key work that partners have carried out in line with our priorities. In addition, we have added an update on actions to address mental ill health and improve emotional wellbeing.

As mentioned in the Introduction, while mental health was not identified as a priority in 2019, it has become an emerging area of focus due to the increased need in the area.

### The main practice priorities are:

1. Neglect
2. Child Exploitation
3. Ensure effective Multi-Agency Safeguarding practice

### The overarching priorities are:

4. Lead and consolidate effective partnership arrangements
5. Revise and embed a Learning and Improvement Framework

### Shared principles that underpin our key priorities are:

- **Child Centred Practice** - the Partnership will ensure that children and young people have opportunities to participate and collaborate in the work of the Partnership, and that the voice of children is embedded in multi-agency practice.
- **High support - high challenge** - the Partnership will promote a culture of high support and high challenge to develop working environments where growth and learning are accelerated.

- **Promoting Practice leadership** - the Partnership will involve practitioners in the continuous learning process of quality assurance and scrutiny in a supportive and challenging way, in order to build practice leadership capacity across the Partnership.
- **Restorative approach** - the Partnership will take the approach of 'working with' rather than 'doing to' with key stakeholders, including children and families.
- **Promoting a culture of continuous learning** - the Partnership will create the environment for learning, recognising the way systems influence each other and the benefits of working together rather than as individual agencies. We will ensure that we learn from best practice, case reviews and multi-agency audits, including monitoring the implementation of recommendations.

Working in this way we will ensure our core safeguarding practice is of high quality, is responsive to the needs of our communities and improves outcomes for children and families in West Sussex.



## Practice Priority 1 – Neglect

**Strategic Outcome - Practitioners across the Partnership can identify, assess, and intervene early to prevent the harmful impact of neglect on children**

### Evidence of need

WSSCP agreed that Neglect would be one of its key priorities, since its impact on children and young people is significant. Neglect can cause great distress to children, leading to poor health, educational and social outcomes. It can also increase a child's vulnerability to other forms of abuse, so addressing and preventing neglect can improve outcomes for children across a range of indicators.

In addition, our figures show that in West Sussex, in 2019 at the beginning of the strategy, for 53% of the total number of children who are subject to child protection plans, this is due to neglect. This is higher than the national average of 43.8% of children on child protection plans due to neglect ([West Sussex Neglect Strategy 2020-2023](#)). Our initial aim is to bring figures more in line with the national average. The end-of-year figure for March 2022 showed that this had increased to 61% against a national figure of 47%. This increase could be seen as a positive as it reflects practitioners' improved ability to identify and therefore address neglect. An audit is being undertaken during 2022/23 to test this hypothesis.

### Objectives

In order to improve the response to neglect across all agencies in the area, the WSSCP agreed the following objectives:

- **Recognise:** Front line staff in all agencies will be able to recognise the signs of neglect and ensure that families receive the support they need at the point of first contact.



- **Respond:** Each agency will provide robust and timely responses to children, young people and their families to meet their needs and prevent neglect from escalating.
- **Quantify:** The extent and range of neglect in the county will be identified through the agreed Impact Framework.
- **Evaluate:** The scrutiny and evaluation of progress will be carried out via individual agency quality assurance mechanisms, to track and evidence progress against action plans. The progress of the action planning will also be reviewed against each individual agency action plan at the regular multi-agency Neglect Working Group.

**Progress – Between October 2020 and March 2022, the above objectives were delivered in the following ways:**

- **Effective implementation of the Neglect Strategy across all agencies, which has resulted in improved practice to address neglect across the Partnership. This includes:**
  - increased use of the ‘a day in my life’ assessment tool, with 85% of front-line practitioners stating that they like the tool and the impact chronology.
  - Setting up Neglect Champions within all partner agencies, who are responsible for promoting good practice within their organisations.
  - Reviewing and relaunching the Neglect data dashboard.
- **Delivered multi-agency training in order to improve response to neglect across all agencies within the Partnership.** Between April 2021 and March 2022, 101 people attended training; 91 were from WSSC, 4 were from the Private and Voluntary sector and 6 were from Education. Training evaluation found that while there has been attendance from a range of agencies, more work needs to be done to ensure better representation from organisations other than WSSC. There are plans to address this through discussions within the Learning & Development subgroup to ensure all agencies are included in the development of content for new courses. This will ensure they meet the needs of different agencies, taking into account the importance of training in a multi-agency learning environment, promoting training across the Partnership and challenging those agencies that do not attend multi-agency training.
- **It was agreed to test the effectiveness of the Neglect Strategy through multi-agency audits, evaluation and the scrutiny process.** A Neglect scrutiny event was completed in November 2020 which resulted in the development of thematic action plans; this enabled lead officers to take forward improvement actions within their own organisations, overseen by the Partnership.

In March 2022, planning began for a multi-agency audit, and the training and other learning activities are subject to regular evaluation. This will help us test whether the increase in Neglect-related plans is truly an indication of improved practice.

- **The Strategy comes to an end in March 2023.** Working with the Neglect Action Plan group, the WSSCP team is seeking to refresh the Strategy and relaunch it for 2023/26.



## Practice Priority 2 - Child Exploitation

### Outcome - All partners can demonstrate how they recognise, respond and evaluate the risks in relation to Child Exploitation

#### Evidence of Need

Unfortunately, in common with other areas in the country, children in West Sussex, particularly vulnerable children are at risk of criminal exploitation.

Exploitation can affect children differently depending on their background. For example, girls are at higher risk of being sexually exploited and there is an over-representation of ethnic minority children who have been identified as being exploited and this number is increasing.

Given the good links to London and other large cities, County Lines (criminals using children to transport drugs out of the main urban areas) feature in the patterns of child exploitation. West Sussex does not have disproportionately high numbers of children and young people who are at risk of exploitation. However, given the very negative impact that being exploited has on children's life prospects, addressing exploitation will continue to be a priority for the Partnership.

West Sussex has received additional funds to address the needs of exploited children through the Home Office Violence Reduction Unit (VRU) fund. WSSCP is working closely with the Safer West Sussex Partnership to support the development of interventions. ([West Sussex Community Safety Strategic Assessment 2022](#))

#### Objectives

In 2019, working with the Safer West Sussex Partnership and the West Sussex Safeguarding Adult Board, WSSCP developed a Strategy to address Exploitation. WSSCP's role was specifically concerned with addressing the safeguarding element of child exploitations. The Exploitation Strategy contains the following objectives:

- Work with communities and our partners to **raise awareness** of the warning signs of exploitation.
- **Empower** the whole community to adopt a proactive, zero-tolerance response to exploitation.
- **Assist** those who have been abused or are at risk of abuse – as well as their family members, friends, and the wider community.
- **Protect and support** those who have experienced exploitation as they **recover**.

- Ensure our response to perpetrators of exploitation is **restorative** and proportionate, whilst balancing the need for **rehabilitation and recovery** - especially where perpetrators may themselves have been groomed and exploited.
- **Improve** how professionals, organisations, and systems respond to the needs of exploited individuals.
- Develop services that can respond and adapt to **meet unmet needs**.

## Progress

**Between October 2020 and March 2022, the above objectives were delivered in the following ways:**

- **Delivered a multi-agency training programme to improve practitioners' ability to assess and support children at risk of exploitation.** Between April 2021 and March 2022, 74 practitioners attended child exploitation training; this included 70 WSSC-based practitioners, 1 police officer and three attendees from the voluntary sector. Evaluations stated that 100% of attendees not only felt the training enhanced their knowledge of exploitation, but also that it improved their confidence in identifying and tackling this aspect of safeguarding. One learner stated, "I'm going to be more curious and alert to possible signs of child exploitation when working and supporting with families, children and young people, I've already had a conversation with my children after attending this course".
- **A survey was used to explore multi-agency practitioners' experiences, knowledge and confidence relating to child exploitation.** A learning and development work plan is being developed in 2022/23 to meet the Partnership's identified learning and development needs; this will include commissioning specialist training around trauma-informed practice and a focus on Adultification particularly as it affects ethnic minority groups.
- **Worked with neighbouring areas to improve the pan-Sussex WSSCP response to children at risk of exploitation.** WSSCP supported the development of pan-Sussex policy and procedures on safeguarding children at risk of exploitation.
- **Started two Local Child Safeguarding Practice Thematic Reviews (LCSPRs)** featuring Exploitation and began the process of implementing learning from the reviews ahead of final publication, planned for late 2022 (see Section 7).
- **WSSCP carried out a Child Exploitation Scrutiny in July 2021.** The Audit consisted of a case sample of twelve children who had been deemed at risk of exploitation and had been presented to the Missing & Exploitation Operational Group (MEOG) within the past six months (Dec 2020-May 2021). The Audit found some good practice, such as robust multi-agency working, as well as some areas for improvement, such as the need for better use of common tools. The recommendations from the Audit were translated into an Action Plan overseen by the Quality and Assurance Subgroup. This Action Plan has led to an improved understanding of and response to children affected by exploitation.



- Districts and Boroughs have been active in supporting our exploitation outcomes. All Districts operate a local multi-agency **Peer Group Conference (PGC)**, involving Community Safety, Secondary Schools, Police, Children’s Social Care/Early Help, at which matters of concern, including individual children are discussed. They may operate in slightly different ways (monthly or quarterly). These are not in-depth discussions of individual cases, but are valuable for sharing information, and may lead to onward action – e.g., referral to Children’s Social Care or targeted police intervention. Information on referral types and other specific case-related responses are not currently available. There is also District and Borough representation on the MEOG group convened by WSSC.

A new analytical report was conducted by Safer West Sussex partners into ‘Understanding and Reducing Drug Demand - Bognor Regis Analysis - December 2021’. The report informed the work of the Safer Arun Partnership and supported an understanding of the drivers and implications of drug demand in the locale of Bognor Regis.

- A new CSC Exploitation and Missing Team has been developed. This team has direct implications for enhancing safeguarding in a multi-agency context.



### Practice Priority 3 - Ensure effective Multi-agency Safeguarding Practice

**Outcomes - All partners can demonstrate that core safeguarding practices are effective and embedded within their agencies and are keeping children safe**

Between October 2020 and March 2022, the following improvement actions were delivered:

- **Improved our response to children moving from children to adult services.** The WSSCP participated in WSSAB’s multi-agency Safeguarding Transitions audit in October 2020, from which a resulting action plan focussed on ways of improving the transitions safeguarding pathway, including developing guidance on transitions, referral pathways & progression of preventive work. The outcome of this audit was the development and implementation of a joint protocol with WSSAB for **Safeguarding Young People 17.5+** which was implemented in July 2021.
- Oversaw the launch and embedding of the **ICON programme** to help parents cope with a crying baby in the correct way and undertook the first stage professional and public evaluation of its impact (see Case Study and West Sussex conference).
- **Supported the development of the Family Safeguarding model** whereby multi-disciplinary teams work together to support children and parents, tackling domestic abuse, parental mental health and substance misuse to improve children's lives. The Family Safeguarding model went live in February 2022.
- **Started to improve the use of data.** A new tool is being used to advance joint agency data collection and sharing. The phased plan will allow the local authority access to a dashboard

customisable to its needs. The dashboard will include frequently missing children, children arrested, children involved or witness to domestic incidents, etc. West Sussex will be joining this programme of work shortly.



## Emerging Priority - Mental Health and Emotional Wellbeing

### Evidence of Need

According to national surveys of children and young people aged 5-16 years, there has been an almost 25% increase in the number of children and young people with a mental health disorder between 2017/18 and 2021 (NHS. Series / Collection Mental Health of Children and Young People Surveys. NHS choices 2021). Based on findings of these surveys, the estimated number of children aged 5-16 years with a mental disorder in Sussex increased from 29,470 in 2017/18 to 37,200 in 2021. In 2020/21, over 5,850 pupils were identified with social, emotional and mental health needs, 3,063 of whom were of primary school age and 2,788 of secondary school age across the three local authorities in Sussex: (Special educational needs in England. Gov.uk March 2022).

The WS Public Health team reviewed evidence of the impact of Covid-19 on CYP mental health in order to support the development of the Sussex-wide 'Foundation For Our Future' strategy and actions.

Young adults have been particularly affected. When compared with other Sussex Health and Care Partnership local authorities, West Sussex has a significantly higher prevalence of mental health disorders in our young adult population. West Sussex also has the highest number of young adults with eating disorders. (NHS Digital 2021. Wave 2 follow up to the 2017 survey on the Mental Health of Children and Young People in England, 2021).

Lesbian, gay, bisexual and transgender plus (LGBTplus) children and children affected by autism are over-represented in national suicide data (University of Manchester 2022).

**Specific mental health and emotional wellbeing outcomes will be developed during 2022/23 and will be incorporated into the next iteration of the Business Plan. However, between October 2020 and March 2022 the following key achievements were delivered:**

- Development of the Mental Health and Wellbeing Team. This is a team that provides in-school support to vulnerable children, including a multi-agency triage team. Between October 2020 and December 2021, 339 vulnerable children were triaged.

- During the reporting period a number of children completed suicide. The impact of these tragedies on families, friends, professionals and communities has been felt across West Sussex. The Partnership's thoughts continue to be with all of those affected. To address this, a robust multi-agency response was initiated, modelled on emergency response structures and complex safeguarding procedures. Operational delivery included Operation Warren, a multi-agency response that included wrap-around support to at-risk children. Multi-agency wrap-around meetings were held a minimum of weekly, chaired by the Head of Safeguarding, addressing broader issues such as support for family, extended networks, memorials, funerals, letters etc. Agencies involved include Police, Social Care, CAMHS, Schools and Early Help.
- To address the over-representation of LGBTplus groups in mental health statistics, Allsorts ([www.allsortsyouth.org.uk](http://www.allsortsyouth.org.uk)), has provided training on gender and sexuality; learning briefs and guidance on gender identity have been published on the WSSCP website.
- There are a number of partnership actions underway to improve the mental health and wellbeing of children and young people in West Sussex, which the WSSCP is able to feed into through their partner members:
  - SPOA (Single Point of Access) set up in 2022 and running in West Sussex – offering easier access to services
  - Mental health in schools teams targeting the most disadvantaged areas of Sussex
  - Targeted early intervention services commissioned – Youth Emotional Support (YES) and Community Mental Health Liaison (CMHL) (liaison) in West Sussex
  - Review and redesign of Neurodevelopmental Pathway across Sussex
  - Parent carers fora across Sussex to ensure parents and carers are involved in pathway and service redesign
  - Enhancing and expanding CAMHS to be able to respond more quickly
  - Enhancing work across Sussex to prevent suicide in young people – West Sussex: suicide prevention strategy; continued and enhanced delivery of self-harm learning networks amongst professionals; increased access to training on responding to disclosed intention to complete suicide
  - Continuation of the Self-Harm Learning Network training offer to schools, parents and carers and professionals
  - Continuation of the schools' self-harm toolkit and self-harm resources page



## Overarching Priorities

### Overarching Priority 1 - Lead and consolidate effective partnership arrangements

#### Outcomes - The Partnership is assured that the arrangements are delivering both the strategic priorities and improving multi-agency practice

WSSCP has undertaken a number of activities in order to improve the Partnership so that it can function effectively to deliver its priorities. Progress on this has been impacted by several issues, including the aforementioned lack of capacity of the Business Support team.

#### Progress

Between October 2020 and March 2022, the following improvement actions were delivered:

- In March 2021, WSSCP updated its Statement of Purpose and Engagement for the Partnership Group: Partnership meetings will be thematic to provide focused input and discussion.
- The Child Exploitation Subgroup was moved to the joint Violence & Exploitation Board to ensure synergy with the wider exploitation agenda and strengthen strategic and operational responses.
- Improvements were undertaken to the Q&A Subgroup, including peer support from Oxfordshire LSCP and consultancy-led improvement events, with the aim of improving outcome-focused QA work and insight from the Partnership dataset.
- The Learning and Development Group revised training and resources on learning from reviews, and an improved training offer is in place, including training on Exploitation and joint Social Care and Health training on motivational interviewing. (See Training, Section 8 for Learning and Development activity).
- The Child Safeguarding Liaison Group (CSLG) has discussed and reviewed a number of cases in each meeting, with issues ranging from complex mental health, multi-agency management of non-accidental injury (NAI), genital injuries/CSA and harmful sexual behaviours. Due to professional networking through this meeting, there has been an improvement in inter-agency communication, with the additional benefit of better resolution of inter-agency issues in acute situations.



### Overarching Priority 2 - Revise and embed a Learning and Improvement Framework

#### Outcomes - The Partnership is assured that the arrangements are delivering both the strategic priorities and improving multi-agency practice

In March 2022, the WSSCP published a Learning and Improvement Framework, which is intended to strengthen and support a learning culture across partner agencies in West Sussex, in order to continuously improve services to safeguard and promote the welfare of children and young people. An overview of these activities is given in the Improvement Actions below (Section 6).



## 6. PRACTICE IMPROVEMENT ACTIONS

The Partnership has a range of improvement mechanisms to enable ongoing analysis of practice and performance. Some of these processes are well embedded, for example Section 11 audits, whilst others like Child Safeguarding Practice Reviews and Local Learning Reviews are responsive to specific incidents.

The quality assurance and scrutiny processes need to be robust and include learning from research, local intelligence leads, benchmarking with statistical neighbours and national best practice, to ensure evidence-informed actions and learning.

In 2020, the WSSCP published an Improvement Framework which outlines the principles that drive our approach to quality improvement across the Partnership and ensures there is a coherent and consistent methodology taken by all partners.

### Improvement actions include:

- Section 11 audits
- Multi-agency audit
- Thematic scrutiny
- Learning from reviews
- Learning and development programme

### Section 11 Audit

Section 11 of the Children Act 2004 places a duty on a range of organisations, agencies and individuals to ensure that their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children.

In 2020, WSSCP carried out a Section 11 Audit, in partnership with other areas and in line with its statutory responsibilities. Twelve agencies and organisations working across at least two local authority areas were assessed under the pan-Sussex Section 11 process.

Four agencies were invited to a challenge event where they had to provide more details on their returns. This event was also attended by children from West Sussex County Council's Youth Cabinet to provide additional challenge and ensure that the voice of the child was represented. During 2022/23 a further



Section 11 audit will be carried out which will provide WSSCP with the opportunity to assess impact and measure whether there have been any overall improvements.

### Multi-agency audits

Partnership audits include single and multi-agency audits. The audits may be thematic or focus on a specific area of safeguarding. Recommendations from audits are turned into action plans which are overseen by the Quality and Assurance Subgroup. Between October 2020 and March 2022, the WSSCP carried out the following audit work:

- **Child Exploitation Audit** - The Audit consisted of a case sample of twelve children who had been deemed at risk of exploitation presented to the Missing and Exploitation Operational Group (MEOG) which is a multi-agency group (See Exploitation, Section 5). Recommendations were incorporated into the Violence and Exploitation Action Plan being overseen by the Violence and Exploitation Reduction Board (VERB).
- Preparation for the pan-Sussex multi-agency audit on Elective Home Education (EHE) (Pan-Sussex Working, Section 9) which was held in May 2022 and the Neglect audit which was held in July 2022.
- Started implementing the recommendations of the under 2s Audit carried out in 2020.

The Quality and Assurance Subgroup is responsible for overseeing the implementation of audit recommendations across all partner agencies and collaboration with other WSSCP subgroups.

### Independent Scrutiny

Independent scrutiny is critical to provide assurance in judging the effectiveness of the partnership arrangements, including arrangements to identify and review serious child safeguarding cases. The value of focused, impartial and robust independent scrutiny to drive practice improvement and identify areas for development is key to helping inform WSSCP's improvement journey.

As outlined in *Working Together*, independent scrutiny is part of a wider system that includes the independent inspectorate single assessment of the individual safeguarding partners and the Joint Targeted Area Inspections.

Scrutiny projects were implemented in line with commitments from the 2019/20 Business Plan. This included:

- Neglect Scrutiny in November 2020
- Child Exploitation Scrutiny with the report being finalised in May 2022. Recommendations from the report are being used to develop a workplan which will be overseen by the WSSCP.

## 7. LEARNING FROM RAPID REVIEWS AND LOCAL CHILD SAFEGUARDING PRACTICE REVIEWS

*Working Together 2018* sets out that: The responsibility for how the system learns the lessons from serious child safeguarding incidents lies at a national level with the Child Safeguarding Practice Review Panel (the Panel)<sup>1</sup> and at local level with the safeguarding partners.

Therefore, the Partnership has a duty to consider and if necessary undertake Rapid Reviews and Child Safeguarding Practice Reviews (SPR). These have replaced Serious Case Reviews (SCR) or local learning reviews when a child dies or is seriously injured, and abuse or neglect is suspected. The Partnership must also ensure that the thematic learning from these reviews is disseminated widely and embedded in multi-agency practice.

Partner agencies such as health, the police, local authority district and boroughs and the voluntary sector are key to the effective delivery and implementation of learning from reviews. Our partners have invested considerable resources in supporting the review process, for example sitting on panels.

We are now making good progress in delivering several complex safeguarding practice and learning reviews. The reviews undertaken in the period are summarised below.

SCR/SPR - Local Reviews - Rapid Reviews 2020/21		
2020	Local Learning Review	Sexual exploitation
2021	Local Learning Review	Death by suicide
2021	Rapid Review	Serious Violent Attack perpetrated by older children
2021	Rapid Review	NAI Under 1
2021	Rapid Review	Death by suicide
2021	Rapid Review	Death by suicide (LCSPR)
2021	Rapid Review	Death by suicide
2021	Rapid Review	Death by suicide
2022	Rapid review	Death by possible suicide
2022	Rapid Review	Death of 6-month-old

<sup>1</sup> National Child Safeguarding Practice Review Panel is an independent panel commissioning reviews of serious child safeguarding cases of national interest, and will advise if a local review is required. Child Safeguarding Practice Review Panel works with the Department for Education.

## Learning from Reviews

From the above reviews the following practice and systems improvement needs were identified. These are outlined below with the response and the impact:

YP Suicide	Learning & Practice Improvement Areas		
	Finding	Response	Impact
	Early recognition of Mental Health needs	Joint Commissioning Unit (JCU) have commissioned the Yes Service to provide early intervention to vulnerable children, and partners across West Sussex have improved systems and pathways	There is now better recognition and support around mental health with improved care pathways to refer children into appropriate care
	Understanding challenges and improving responses to working with declared intent	Operation Warren has developed an effective response with people at risk of suicide (Section 5 and Case Study in Section 10)	Improved multi-agency response to addressing mental health which has been recognised nationally
	Identifying safeguarding needs and/in Mental Health (not all MH needs will be safeguarding)	There is a plan to roll out training on mental health across the Partnership, which will include links between safeguarding and mental health	The aim is that this will improve understanding of mental health by practitioners, which will be measured by course evaluations
	Impact of early trauma & neglect for older children/adolescents	Trauma informed practice being rolled out across West Sussex partner agencies. Senior officers from all partnership agencies have been asked to input into the training	Increase in trauma competent practitioners able to address the needs in their particular agencies
	Timeliness of referrals to ensure early multi-agency response	Operation Warren has helped improve referral timelines. WSSCP I&A subgroup is exploring a role in keeping an overview of referral timelines	Improved response to children with mental ill health
	Supporting children and young people for whom issues of identity are critical	Allsorts training being rolled out and we have published guidance on Safeguarding and Gender Identity on the WSSCP website. In addition, a learning briefing is being developed	Improved understanding of gender identity matters and development of better processes around this issue, with appropriate escalation to WSSCP for action where necessary
	Recognising when parental response to MH needs is adversely impacting child	Family Safeguarding Model (Section 5) and SPOA are able to provide support and facilitate access to mental health support	Improved response to parental mental ill health, particularly as part of pre-birth work



Supporting parents to respond positively to their child's MH needs	SPOA are able to provide support and facilitate access to mental health support. Action being undertaken to publicise so that families who need mental health services are able to access it.	Families are better able to access appropriate support services
Safeguarding System Improvement Areas		
Finding	Response	Impact
Practitioner confidence in responding to declared intent	Development of the Operation Warren response to suicide and the schools	Improved response to mental health in schools, for example through daily triage meetings where needed
Practitioner confidence in responding to gender identity needs	See above response to gender identity training	Better understanding of gender identity matters with work being undertaken to improve procedures to guide practitioners' work
Role of Schools – recognised as critical responder with need to recognise impact on school community	Development of the Mental Health and Wellbeing Team (see Section 5)	Improved response to mental health in schools and with clear processes to support them. E.g. daily triage meetings, consultation in complex cases
Access to services (Level 2 below CAMHS) directly and via professional network	Commissioning of Yes and the development of the SPOA (see Section 5) process on mental health	Better early intervention response and more accessible services
Access to gender identity support and services	West Sussex County Council commissioned Allsorts who provide support to young people around gender identity and have disseminated information on the gender identity service	See above
Support for adolescents, especially those coming into semi-independence	Development of 17.5 plus protocol with plans to further improve the support to young people as they move between children and adult services	Improved pathways for young people moving from children to adult services, with practitioners understanding the role of different agencies
Practitioner confidence in responding to declared intent	Mental Health and Wellbeing Team includes consultancy to support practitioners on particularly complex cases	Practitioners more confident in responding to declared intent as they have the policies to support them
Practitioner confidence in responding to gender identity needs	Learning briefing on gender identity published on WSSCP website	Improved understanding of gender identity matters

Learning & Practice Improvement Areas			
Under 2s	Finding	Response	Impact
	Continued need for professional curiosity during assessments, visits and presentations	The Healthy Child team lead monthly safeguarding workshops; this included courageous conversations (how to talk about safeguarding); bruise protocol guidance and the 'Myth of Invisible Men' presentations and Bringing Baby Home. This work is supplemented by multi-agency training	Improved practice in all agencies. Evaluation of training showed increase in practitioner confidence
	Need for improved pre-birth assessments specifically	There continues to be a focus on ensuring that pre-birth assessments are shared, especially when closed prior to the Health Visitor becoming involved with a family	West Sussex Children's Services pre-birth work has been an area of significant improvement, with a dedicated pre-birth specialist who retains oversight of all unborn babies on the system.
	Identifying and being curious about unknown adults within household and changes in relationships	Learning re: curiosity about men in the household, prebirth assessments and respectful challenge have been disseminated through practitioner supervision	The understanding of the importance of a whole family approach now mainstreamed
	Management oversight and support including on effectiveness of virtual visits	Management training in place	Improved practice in all agencies
	Responding to non-engagement in young parenting support	The pre-birth worker is now linked into the Young Parents champion meetings	Resulting in improved support for young parents

Safeguarding System Improvement Areas		
Finding	Response	Impact
System improvements to enable access to completed pre-birth assessments	Performance dashboards provide good quality data which supports all managers to track progress and outcomes of referrals, assessments and safeguarding birth plans	Improved processes to support pre-birth assessments and appropriate escalation of issues through the WSSCP governance structure where needed
Confidence in effectiveness of virtual visits	Audit planned for 2022/23	Assurance of the effectiveness of visits with robust improvement actions where needed
Awareness of support available for young parents	The pre-birth worker is linked into the Young Parents champion meetings  Family Nurse Partnership provides specialist nurse support to young parents through their first pregnancy and the first years of their child's life	Young parents have more understanding of the support available to them

Youth Violence	Learning & Practice Improvement Areas		
	Finding	Response	Impact
Professionals' engagement to work effectively with challenging and intimidating parents/families	It was decided to commission a youth violence thematic LSPR to enable the Partnership to further explore these themes and develop recommendations to address them		
Importance of maintaining professional network when working with challenging and intimidating parents			
Good practice shown through use of multi-agency reflective group supervision, recognising impact of difficult cases			

	Need to focus on child protection plan outcomes, not compliance		
	Recognition of vulnerabilities to exploitation		
	Working with children to recognise peer influences		
	Recognising and responding to impact of family/parental criminality on children		
	Recognising and responding to impact of domestic abuse (coercion/control)		
<b>Safeguarding System Improvement Areas</b>			
<b>Finding</b>	<b>Response</b>	<b>Impact</b>	
Improving system response to enhance educational attainment for children in alternative provision, displaying threatening & other behavioural challenges	It was decided to commission a youth violence thematic LSPR to enable the Partnership to further explore these themes and develop recommendations to address them		
Working with other partners to improve safeguarding and child protection responses to youth violence			
Understanding types and risks of exploitation for children locally (embedding contextual safeguarding)			

Most of our reviews concern non-accidental injury, youth violence and suicide which could be reflective of rising national rates due to the strain on families countrywide as a result of the pandemic.

Over the course of 2022/23, work will be undertaken on improved measurement of the impact of the actions above.



## 8. WEST SUSSEX TRAINING PROGRAMME

This year has seen more creative training techniques introduced, so that practitioners are able to access a range of resources in different formats. This has included eLearning and a podcast. A Train the Trainer programme has also been developed to support those professionals who are delivering the WSSCP Training Programme. Courses delivered and their take-up is summarised in the following tables:

### 1. WSSCP Training Programme 2021/22 figures<sup>2</sup>:

#### a) WSSCP Training Programme in Line with WSSCP Business Priorities -

Course Title	Number of sessions delivered	Total Number of attendees	Pan Sussex Offer?	% of Spaces Used	Core Offer?
Neglect	8	101		63%	Y
Working Together to Recognise & Respond to Child Exploitation	3	30		20%	Y
Recognising and Responding to Child Exploitation Using a Contextual Safeguarding Approach	4	44		44%	Y

#### b) WSSCP Training Programme for Whole Training Offer -

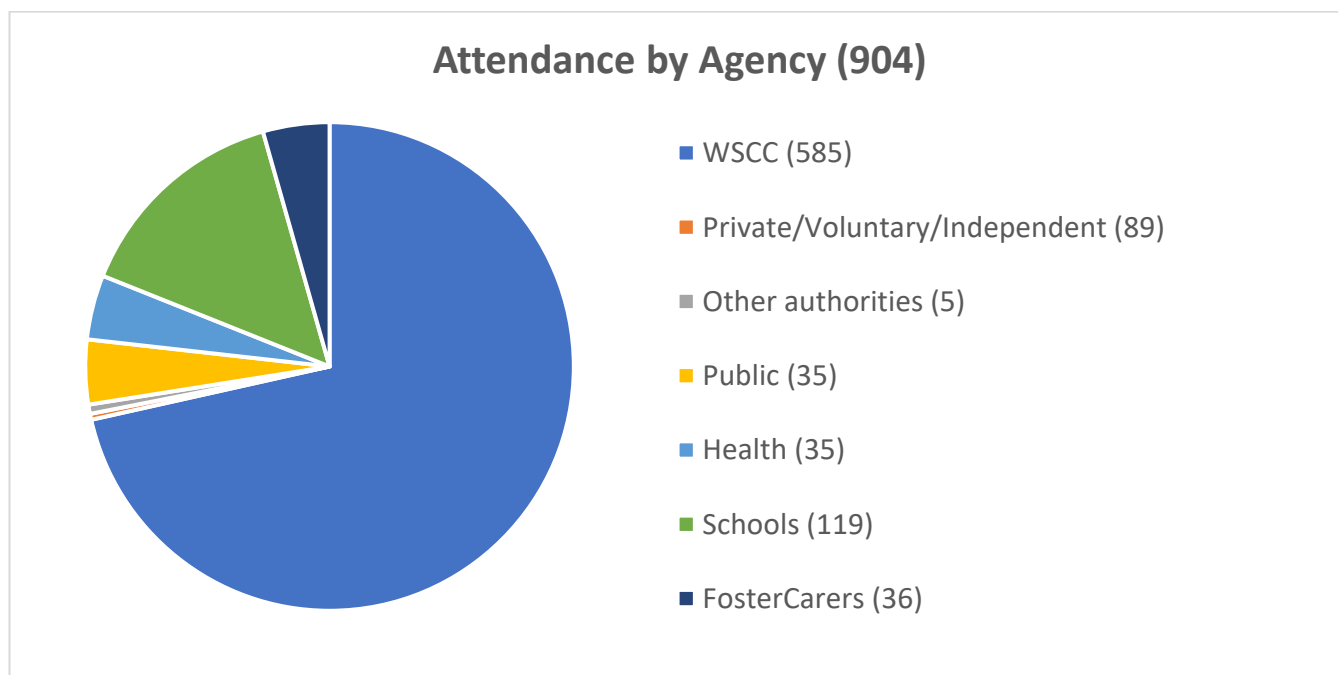
Course Title	Number of sessions delivered	Total Number of attendees	Pan Sussex Offer?	% of Spaces Used	Core Offer?
Professional Curiosity	10	114		59%	Yes
Working Together to Safeguard Children	11	143		69%	Yes

<sup>2</sup> It is important to note that there are some challenges with the way in which data is gathered and categorised from the Learning Gateway. When practitioners register for an account to access training it is their responsibility to choose a “best fit” category for their organisation. This is open to some interpretation and is something to bear in mind when looking at the data for the agency of each attendee. This is something that is currently being looked into and it is hoped that it will be improved for future reporting.

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Working Together to Safeguard Children Refresher	9	113		72%	Yes
Safeguarding Hot Topics – Non-Accidental Injury	3	39		52%	Yes
The Role of the LADO	10	113		56%	Yes
Improving Outcomes for Children Looked After	6	39	Yes	88%	Yes
Pan Sussex Safeguarding Under 1's Conference	1	59	Yes	100%	No
Safeguarding Hot Topics – Child Sexual Abuse	3	28	Yes	37%	Yes
Safeguarding Hot Topics – Fabricated / Induced Illness	2	40	Yes	80%	Yes
Harmful Practices – Female Genital Mutilation / Breast Ironing	2	5	Yes	28%	No
Harmful Practices – Forced Marriage / Honour Based Abuse	2	9		50%	No
Child Protection Conferences – Reports & Plans	4	27		35%	No
<b>Total Number of Attendees</b>		<b>904</b>			

c) Attendance by Agency to All Training



## 2. Training Programme overview

The WSSCP Training Programme offer has been well received and the numbers of practitioners booking a place has been maintained. There is currently no date confirmed to move back to the delivery of face-to-face training, although once this is agreed, it is likely that the WSSCP will offer a hybrid of training delivery, so that the same course can be accessed both face-to-face and virtually, to meet the needs of those working from home/the office and those who prefer to attend a classroom-based session.

The training offer has broadened over the past year and there are now more courses available, with more planned. There have been some capacity issues in the WSSCP Business team, which has impacted in terms of practitioners not being charged for late cancellation and non-attendance. This is reflected above in the percentage of places filled. The message that practitioners will be charged, in line with the WSSCP Cancellation and Non-Attendance policy has been lost over the past year, whereas previously consistent charging for those not attending or cancelling late was reaching partner agencies, and these figures were accordingly significantly lower. There are plans to address this, but staff consistency and capacity remains an issue.

The Train the Trainer programme was developed with an expectation that all professionals who deliver on behalf of the WSSCP should attend. This was introduced to ensure continuity across the Training Programme and also that each trainer was confident to deliver, able to manage a group of learners and knowledgeable about how to successfully assess delegates' learning, responding appropriately to different training situations. Six trainers attended and there are currently 19 professionals in the WSSCP Training Pool.

2021/2022 has provided the WSSCP Training Programme with challenges in terms of the way training is delivered and the capacity of trainers; however, the way in which learning is shared and disseminated has progressed. Because of this, and the increase in the use of online learning, information has been shared using a range of methods, enabling practitioners to choose to receive information in the way that suits them best.

### Reducing Parental Conflict project

In September 2021, the WSSCP agreed to temporarily hold a grant awarded to Early Help by the DWP. This was to provide free training and resources to support the work carried out by professionals on reducing parental conflict.

Introductory and Advanced sessions were planned for May and June 2022, and these were to be accompanied by a wide range of resources including visual cards, a relationship app and an animation to support work around this often-challenging topic. All these tools and resources will be available to all agencies working with children, young people and their families.

### Other ways learning has been shared / staff have been trained

- Podcast – Safeguarding the Under 1s, developed and led by practitioners
- Basic Awareness of Safeguarding Children eLearning – a West Sussex specific eLearning course has been developed and is a pre-requisite for attending the Working Together to Safeguard Children training



- Regular Lunch and Learn ‘online’ briefings including briefings on non-accidental injuries (NAIs) provided by the designated paediatrician
- Sessions delivered on “Case Review Briefings - Early to Middle Years”

### Evaluating the Training Offer

Those attending WSSCP training courses are required to complete an evaluation prior to receiving their certificate of attendance. Evidence of how attending a WSSCP training course has benefited the practitioner is also gathered through a feedback form which is available to access on the Training Calendar page of the WSSCP website. There are plans to gather impact evidence through a sample of attendees from different courses by telephone to create anecdotal information. This has not been possible up to now because of capacity issues.

Out of those who completed a post-training evaluation (309), 91% reported an increase in knowledge following attendance at training and 89% reported an increase in confidence.

Other feedback gathered from post-training evaluations included:

*I liked the use of the case study to consider risks and vulnerabilities. Exploring the concept of using conversations to move things forward - then asking "Why" again to gain a more rounded perspective and the triangulation of information - Professional Curiosity training*

*It has helped me to look at possible signs of fabricated induced illness caused by the care giver and possible reasons why – Safeguarding Hot Topics – Fabricated / Induced Illness*

*Relevant to my role in assessment team assessing young people who are likely to be exploited – Working Together to Recognise & Respond to Child Exploitation Using a Contextual Safeguarding Approach*

*I have just started as an FSW so this training will be very useful in identifying neglect in families I will be working with – Neglect*

*It will help me identify non-accidental bruises on children and give me more confidence in doing this. I will be referring any dad's I work with in future to check out 'Dad Pad' – Safeguarding Hot Topics – Non-Accidental Injury*

*Updated my understanding of procedures and refreshed my knowledge – Working Together to Safeguard Children Refresher*





## 9. PAN-SUSSEX WORKING

The WSSCP works closely with its colleagues in East Sussex and Brighton and Hove to improve processes and services and deliver interventions across Sussex to enhance outcomes for children. Pan-Sussex working enables consistent practice and development of procedures across Sussex and can result in improved efficiencies due to economies of scale. This is particularly true of the training programme.

Between October 2020 and March 2022, the following pan-Sussex projects were delivered:

- **Pan-Sussex Learning & Development** opportunities –
  - Multi-Agency Public Protection Arrangement (MAPPA)
  - Improving Outcomes for Looked After Children
  - Harmful Practices
  - Suicide Prevention
  - *Planned training in development: Cultural Competency*
- A number of pan-Sussex awareness campaigns occurred, including “**ICON Week**” held at the end of September 2021.
- West Sussex is part of the pan-Sussex Procedures Working Group which is responsible for developing safeguarding and child safeguarding processes. West Sussex contributes to a part-time post which is responsible for coordinating the pan-Sussex group that develops the procedures. The group meets quarterly and is represented by the West Sussex Partnership Business Manager and the Head of Children’s Safeguarding.
- **The three partnerships worked together to deliver a conference on Safeguarding Children under 5 which was delivered on 5 November 2021.** This covered sudden unexpected deaths, the engagement of male carers, and parent and infant relationships. It incorporated safe sleep in response to national panel learning ‘Out of routine’; it stressed the importance of understanding the role of fathers and reinforced ICON messages. It also looked at infant mental health.

## Appendix

Around 100 practitioners from across Sussex attended, with 59 from West Sussex. There were 25 from the Local Authority, 1 from the Police, 14 from Health, 10 from Early Years and 9 from the Voluntary and Community sector; 78% reported an increase in their knowledge and understanding of non-accidental injuries and how this could present to them as practitioners.

- The four business managers worked together to develop arrangements for the pan-Sussex Elective Home Education multi-agency audit. The audit was held in early May 2022.
- **WSSCP working with the other partnerships in the area to deliver the statutory Section 11 audit.** See Improvement Actions (Section 6) for further details.
- **A Sussex Strategic Self-Harm and Suicide Prevention group** (with a specific children and young person's subgroup) was established at the beginning of 2022 to develop and take forward a strategic approach to prevention. This group is chaired by the Director of Public Health in East Sussex. A children and young people emotional wellbeing group (reporting to the Children First Board) works on the implementation of recommendations made in the Foundations for our Future strategy.
- **Pan-Sussex Strategic Leaders Group** Pan-Sussex Safeguarding Lead Partners from West Sussex, East Sussex and Brighton and Hove hold a regular meeting to ensure that national and local safeguarding good practice is implementing across the region, to horizon-scan emerging risks and opportunities and to identify opportunities for efficiencies through economies of scale.
- The 2021/22 Pan Sussex Child Death Overview Panel Annual Report contains a summary of the activity conducted by the Panel - activity which seeks to drive improvements in children and young people's health across the three areas represented: East Sussex, West Sussex and Brighton and Hove.

## 10. CASE STUDIES – BEST PRACTICE EXAMPLES



The ICON Programme is a preventative programme, based around helping parents cope with a crying baby.

The programme emphasises that:

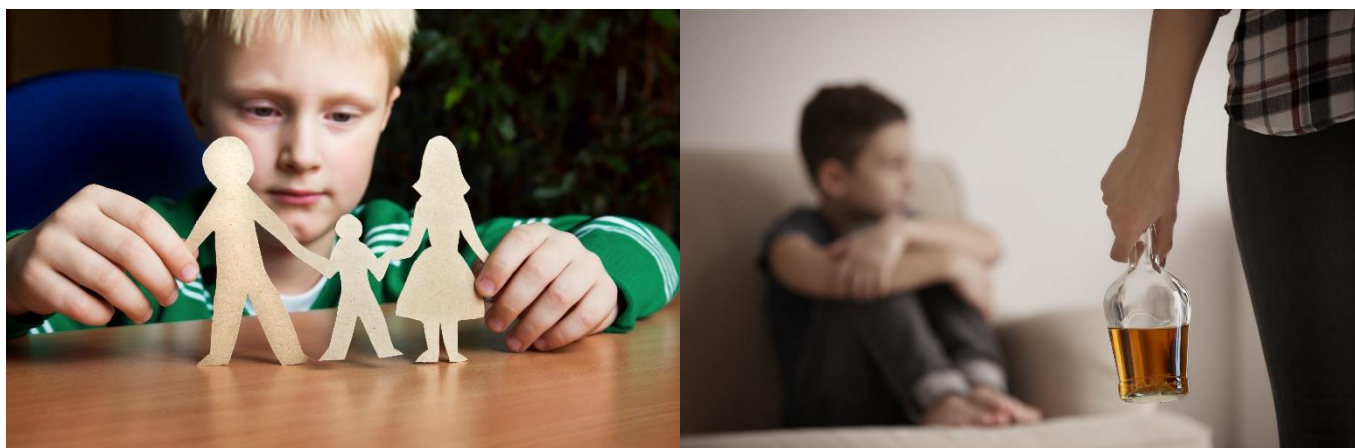
- I – Infant crying is normal
- C – Comforting methods can sometimes soothe the baby
- O – It's OK to walk away
- N – Never, ever shake a baby

West Sussex was amongst the earliest adopter local authority areas in the country to introduce and embed the ICON programme. We have invested in DadPad to help engagement and practical support for male care givers.

ICON training is aimed at multi-agency audiences and is adaptable for individual service needs. Services trained include a number of Health services, Children's Social Care, Fire service, Police, Probation, Early Help & Early Years teams.

Multi-agency partners in the County were trained to use this message in order to reduce the prevalence of babies coming to harm through abusive head trauma. Multi-agency staff are now equipped with the knowledge to support parents to understand normal child development stages including babies crying, in order to support families to develop a strategy to manage this through the sharing of the ICON messaging including the 'crying plan'.

ICON and Safe Sleep national campaigns have been embedded in the Healthy Child Programme (HCP) across Sussex. This has involved close working between HCP providers and commissioning leads. NHS Commissioning Safeguarding leads have taken part in this work.



## Addressing Parental Substance Misuse

### Supporting Children of Alcohol Dependent Parents

In December 2018, West Sussex had been one of nine local authorities nationally that secured innovation funding from the Department of Health and Social Care and Department of Work and Pensions, through (then) Public Health England.

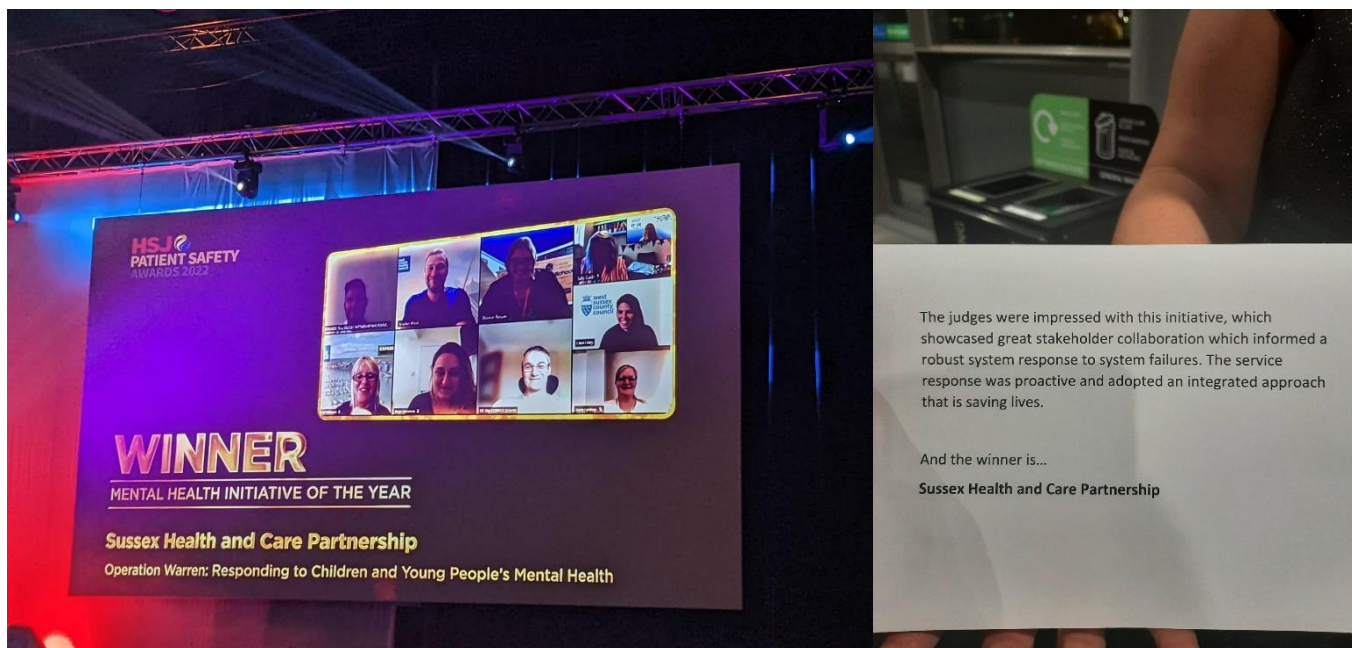
This enabled the development and implementation of a new service aimed at early identification and support to people drinking alcohol during their pregnancy, as well as the county-wide expansion of an existing specialist therapeutic service for children and young people (CYP) affected by parental alcohol use. Additional funding from NHS partners enabled the scope of the therapeutic service to be extended to children affected by parental drug use.

Local evaluation by West Sussex Public Health identified some positive outcomes, including reduced alcohol use reported by pregnant and new parents, and improved outcomes in CYP receiving therapy.

### Maternity Stop Smoking Support Pilot

Public Health have worked closely with Maternity (as part of Western Sussex Hospitals NHS Foundation Trust at the time) to develop and resource a Midwifery-led Stop Smoking Support Pilot, in order to inform future Maternity Stop Smoking Support Services in response to the publication of the NHS Long Term Plan.





## Operation Warren - Response to Suicide

Education Psychology, the Education Safeguarding Lead and the Children's Mental and Emotional Health team ensure that support is available on the first working day to a school where a child is believed to have completed suicide, in order that immediate support can be offered to staff and vulnerable young people. Support is also provided in respect of communications to parents and the broader school community, to ensure containment and to reduce the risk of escalation.

In-school support is provided by Education Psychology, Children's Mental and Emotional Health team, Early Help and CAMHS from Day 2, in order that we can work with the school to identify vulnerable/impacted pupils and consider the best next steps to ensure their safety, and reduce the risk of further suicides and clusters.

Multi-agency wrap-around meetings are held a minimum of weekly, chaired by the Head of Safeguarding, addressing broader issues such as support for family, extended networks, response to memorial, funerals, letters and other follow-up actions.

Operation Warren ended in July 2022 with 13 schools being a part of the triage process. Over 300 young people were discussed during 2022, and over 600 have been discussed at triage with over 1000 children discussed within the operation and the in-schools response team. Feedback from schools have been overwhelmingly positive.

The ongoing commitment of partner agencies, CAMHS, SPFT, Police, YMCA, Early Help, and Youth Emotional Support (YES) has been guaranteed for 2022/23, with the development of the Multi-Agency Mental Health Education Triage (MAMHET) being established. This will allow the positive work begun through Operation Warren to continue.

## 11. FINANCIAL SUMMARIES

### WSSCP Finance

As a result of staffing vacancies there has been an underspend in the WSSCP budget. Other than staffing, the main expenditure has been on LCSPRs.

#### WSSCP income and expenditure 2021/22

Income	Contribution
Training Fees	7,800
WSCC Contribution	242,000
NHS Sussex CCG	71,861
Sussex Police	35,000
Crawley Borough Council	1,000
National Probation	1,969
Adur & Worthing District Council	2,000
Arun District Council	1,000
Chichester District Council	1,000
Horsham District Council	1,000
Mid Sussex District Council	1,000
C/fwd. from 2020/21	50,000
<b>Total Funding</b>	<b>415,630</b>

Area	Budget	Expenditure
Staffing	252,700	194,143
Non Staffing Costs		
Travel	2,000	0
LCSPR	67,000	0
Other non-staffing costs	83,900	8,689
<b>Total Expenditure</b>	<b>405,600</b>	<b>202,832</b>

<b>Underspend</b>		<b>212,798</b>
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#### WSSCP income and expenditure 2020/21

Income	Contribution
Training Fees	7,800
WSCC Contribution	167,500
NHS Coastal	46,637
NHS Horsham & Mid Sussex	15,667
NHS Crawley	9,557
Sussex Police	35,000
Crawley Borough Council	1,000
National Probation	1,969
Kent Surrey and Sussex Rehab	2,625
Adur & Worthing District Council	2,000
Arun District Council	1,000
Chichester District Council	1,000
Horsham District Council	1,000
Mid Sussex District Council	1,000
C/fwd. from 2019/20	50,000
<b>Total Funding</b>	<b>343,755</b>

	Budget	Expenditure
Staffing	232,000	216,835
Non Staffing Costs		
Travel	2,000	1,005
LCSPR	30,000	12,196
Other non-staffing costs	31,900	11,661
<b>Total</b>	<b>295,900</b>	<b>241,697</b>

<b>Underspend</b>		<b>102,000</b>
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Appendix A

Overview of Steering Group, Partnership Groups and Sub-Groups Membership as at October 2020

STEERING GROUP	
PURPOSE	MEMBERS
<p>Executive group of the Partnership. Responsible for strategic direction and decisions: including business plans, sign-off for major reports and reviews. Other groups report to and will escalate issues to this group.</p>	<p><b>Chair - Independent Chair/Scrutineer</b></p> <ul style="list-style-type: none"> <li>• WSCC Director of Children’s Services</li> <li>• Sussex Police Superintendent Public Protection</li> <li>• NHS Sussex CCG Director of Safeguarding</li> <li>• Detective Superintendent</li> <li>• Safeguarding Investigation Unit, Sussex Police</li> <li>• Head of Safeguarding and Looked After Children</li> <li>• Chairs of Sub-Groups</li> <li>• Assistant Director Children’s Services (with responsibility for the Partnership)</li> <li>• Lay Member</li> <li>• District and Borough Representative</li> <li>• Named Nurse for Safeguarding</li> <li>• Designated Doctor</li> <li>• Head of Safeguarding, WSCC</li> <li>• Partnership Business Manager</li> </ul>
PARTNERSHIP GROUP	
PURPOSE	MEMBERS
<p>This is where the wider Partnership members meet to share current issues, challenges and best practice.</p>	<p><b>Chair - Independent Chair/Scrutineer</b></p> <ul style="list-style-type: none"> <li>• Lead partners plus safeguarding leads from all relevant agencies</li> <li>• District &amp; Borough Councils</li> <li>• Schools, colleges and other educational providers</li> <li>• Early Years incl. childminders</li> <li>• Adult Social Care/Safeguarding Adults Board</li> <li>• Housing Services/providers</li> <li>• Probation Service</li> <li>• UK Visas, Immigration and Border Force (Gatwick)</li> <li>• CAFCASS</li> <li>• British Transport Police</li> <li>• West Sussex Voluntary, Community Sector, Sports Clubs and Faith Based organisations</li> <li>• Sussex Partnership Foundation Trust</li> <li>• Sussex Community Foundation Trust</li> </ul>

	<ul style="list-style-type: none"> <li>• University Hospitals Sussex</li> <li>• West Sussex Public Health</li> <li>• West Sussex Youth Justice Service <i>(Three Lead Safeguarding Partners)</i></li> <li>• <i>West Sussex Local Authority Children’s Services</i></li> <li>• <i>Sussex Police</i></li> <li>• <i>Sussex CCG</i></li> </ul>
CASE REVIEW GROUP (CRG)	
PURPOSE	MEMBERS
Responsible for receiving notifications of serious safeguarding practice incidents: death and serious harm involving neglect/abuse. Required to review cases, gather agency information, review decision-making, monitoring recommendations from reviews.	<b>Chair - Independent Chair/Scrutineer</b> <ul style="list-style-type: none"> <li>• Children’s Social Care Head of Safeguarding</li> <li>• Children’s Social Care Head of Service Family Safeguarding</li> <li>• CCG Head of Safeguarding</li> <li>• CCG Designated Doctor</li> <li>• CCG Named GP</li> <li>• WSCC Early Help Head of Service</li> <li>• Sussex Police Det Sgt Review Team</li> <li>• WSCC Education Safeguarding</li> <li>• WSCC Youth Justice Service</li> <li>• WSSCP L&amp;D Lead</li> <li>• WSSCP Manager</li> </ul>
QUALITY ASSURANCE GROUP (QA)	
PURPOSE	MEMBERS
The main purpose of the Quality Assurance (QA) Subgroup is to support the WSSCP to fulfil its monitoring, evaluation and scrutiny functions as set out in <i>Working Together to Safeguard Children 2018</i> in order to continuously improve safeguarding practice across the Partnership.	<b>Chair – Ass. Director Quality and Performance CSC</b> <ul style="list-style-type: none"> <li>• Head of Safeguarding, WSCC</li> <li>• Head of Safeguarding &amp; Looked after children, Sussex Community Foundation Trust</li> <li>• Designated Nurse for Looked after Children</li> <li>• Head of Safeguarding, CCG</li> <li>• WSSCP Manager</li> <li>• Head of Quality Assurance, WSCC</li> <li>• Service Lead for Early Help</li> <li>• Police</li> <li>• Probation</li> <li>• Safeguarding in Education</li> <li>• Lay member</li> </ul>
LEARNING & DEVELOPMENT GROUP	
PURPOSE	MEMBERS
Oversee planning and engagement of multi-agency programme, and response to learning from reviews.	<b>Chair – Designated Nurse CCG</b> <ul style="list-style-type: none"> <li>• Designated Nurse</li> <li>• Workforce Development Manager</li> <li>• Children’s services – Principal Social Worker</li> <li>• Training and Development Consultant Fostering Service</li> </ul>



	<ul style="list-style-type: none"> <li>• Early Help service representative</li> <li>• Training and Development Consultant Adult Social Care</li> <li>• WSSCP Learning and Development Officer Manager</li> </ul>
<b>CHILD SAFEGUARDING LIAISON GROUP (CSLG)</b>	
<b>PURPOSE</b>	<b>MEMBERS</b>
<p>The local Child Safeguarding Liaison Group (CSLG) is an inter-agency forum that meets on a bi-monthly basis to consider joint working practice in respect of child safeguarding arrangements. It discusses cases that have complex and challenging issues with a view to sharing learning.</p>	<p><b>Chair – Designated Doctor/ CSC Head of Safeguarding</b></p> <ul style="list-style-type: none"> <li>• Children’s Services</li> <li>• Western Sussex Hospitals Trust</li> <li>• Clinical Commissioning Groups</li> <li>• Sussex Police</li> <li>• SCFT (including CSARC)</li> <li>• Sussex Partnership Foundation Trust</li> <li>• Probation</li> <li>• Education safeguarding lead</li> </ul>

### Appendix B - Links to other statutory partner strategies

Statutory Partner	Strategy	Shared aims
Health	<p>Health and Wellbeing Strategy:  <i>West Sussex Joint Health and Wellbeing Strategy 2019-2024</i> (West Sussex JSNA Website)</p> <p>Sussex Health and Care Partnership:  <i>Sussex 2025 - Our vision for a healthier future</i> (<a href="http://www.sussex.ics.nhs.uk">www.sussex.ics.nhs.uk</a>)</p> <p>Shared objectives include:</p>	<p>Improved mother and baby health and wellbeing, especially for those in most need.</p> <p>Children growing in a safe &amp; healthy home environment with supporting and nurturing parents and carers.</p> <p>Good mental health for all children.</p> <p>Children and young people leaving care are healthy and independent.</p>
Local Authority	<p>Children and Young People’s Plan:  <i>(Children and Young People’s Plan - Your Voice West Sussex website)</i></p> <p>The three key priorities for this Plan have initially been identified as:</p>	<p>Keeping children and young people safe.</p> <p>Addressing poverty and closing the disadvantage gap.</p> <p>Improving emotional health and well-being.</p>
Sussex Police	<p>Police and Crime Commissioner:  <i>Sussex Police &amp; Crime Plan 2021/24</i> (<a href="http://sussex-pcc.gov.uk">sussex-pcc.gov.uk</a>)</p>	<p>Protecting children from criminal exploitation by raising awareness and increasing the reporting of these offences against children, in partnership with Sussex Police and other agencies.</p> <p>Ensure that child victims receive the support they need and that offenders are brought to justice.</p>

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

**26 January 2023**

### **West Sussex County Council's Communities Directorate update on whole Council response to cost of living pressures**

**Report by Emily King, Assistant Director (Communities), West Sussex County Council**

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#### **Summary**

This report provides an update to the Board on action being taken by West Sussex County Council's Communities Directorate to mitigate the impacts of cost of living pressures on the health and wellbeing of the West Sussex population. The report focuses on activity supporting residents facilitated via the Communities Directorate, including our response to residents and activity via Libraries and the Community Hub, and reflects our whole Council approach.

#### **Recommendation to the Board**

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

- (1) Note the contents of this report.
  - (2) Identify opportunities to work collaboratively, as key systems leaders across West Sussex, to mitigate potential adverse impacts of cost of living pressures on our local population.
- 

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

This report provides an update on the actions of the Council's Communities Directorate to mitigate the impact of cost of living (COL) pressures on health and wellbeing across the life course through working together across the County Council and with partners. These activities address the JHWS goals of Starting Well, Living and Working Well, and Ageing Well, and the principles agreed in the COL addendum, to: work in partnership; maximise the benefit of existing services; optimise our use of data and intelligence; and utilise community insight.

#### **1 Background and context**

1.1 The Health and Wellbeing Board discussed the impact of COL pressures on the health of the West Sussex population at their November 2022 meeting, and considered the impact of COL pressures on the local population's health and health inequalities. The proposed strategic approach and principles were agreed. This report provides a snapshot of current West Sussex County Council (WSCC) activities from the perspective of the Communities Directorate, building on the verbal update from the Assistant Director (Communities) at the November meeting.

1.2 The update reflects the context of the whole Council approach to responding to COL pressures led by the Communities directorate. This approach includes

collaborative working across directorates, drawing on knowledge and skills from different teams, having one point of contact for partnership engagement, and making best use of resources to deliver joint activities and our offer of community-based support for residents.

1.3 In common with other organisations delivering services in the current context, WSCC is seeing the impact of COL pressures on people who use our services, including older people, children and families. Business as usual services are adapting to respond to this and to meet additional needs across multiple areas of Council business. The Council response to changes in demand and support to existing clients through core services and functions is not specifically included in this report.

1.4 The Council is developing tactical, coordinated community-based support through the Communities Directorate, led by the Assistant Director (Communities), to provide additional support to residents most in need. An internal officer group has been convened to co-ordinate and support the whole Council approach to delivery of the community-based response and activities with partners, set out below. The group includes representation from across the Council, including the Communities directorate (Community Hub, Partnerships, Libraries, Prevention Assessment Teams), Performance and Intelligence, Public Health and Communications, and is accountable to the Assistant Director (Communities).

1.5 The delivery approach is aligned with the JHWS COL addendum principles, including through working in partnership with Districts and Boroughs (D&Bs) and Voluntary, Community and Social Enterprise (VCSE) organisations.

## **2 Update**

### **2.1. Work in partnership:**

#### 2.1.1. Partnership relationships (see Appendix 1 for activities and outputs)

The Council has invested in key posts to support internal and external collaborative working in the Communities Directorate's COL response. West Sussex Public Health is funding a 12-month Public Health Lead role within the Communities Directorate, which is supporting joint working across Public Health and Communities. The Public Health Lead contributes specialist, evidence-based, public health advice and guidance to the COL response, and works closely with the Partnerships and Communities Manager.

The Partnerships and Communities Manager and team lead on relationships with D&Bs and VCSE partners to enable close collaborative working as the basis for the COL response. The role engages with D&B leads and provides a single point of contact and consistent attendance at key local COL meetings. This enables good communications, engagement and support to key partners. Good working relations have been created with VCSE organisations, e.g. Citizens Advice delivery of Government support grants and Sussex Community Foundation small grants to support the voluntary sector.

#### 2.1.2. Communications (see Appendix 2 for activities and outputs)

Our COL campaign, Here to help – advice and practical support with COL, launched in October 2022 with the aim of supporting our most vulnerable residents by ensuring residents are aware of, and can engage with, local and national support services and offers. The campaign brings together information from different Council/partner services, with a focus on partnership working to ensure consistent messaging.

Key messaging focuses on the three contact points for residents with the County Council; the warm welcome in Libraries, our Community Hub, and our online COL campaign and advice pages. COL campaign pages were developed with D&B and VCSE support to cross-promote offers such as council tax relief, and avoid duplication. Key messages have included signposting to mental health support and income maximisation through encouraging take up of central government schemes and benefits, such as the Warmer Homes grant, social tariffs, and pension credit. Fire safety messages have also been linked to the campaign.

### 2.1.3. UK Harvest food rescue pilot (see Appendix 3 for activities and outputs)

WSCC is working with UK Harvest, D&Bs and local partners to pilot community food hubs for six months in Bognor Regis, Crawley (Broadfield area), and Southwick. The pilot is led by the Waste Prevention team with Partnerships team support, and was initiated before the COL response but has been brought into alignment due to wider opportunities. At the community food hubs, people are able to pick up a wide selection of surplus foods which would have otherwise ended up as waste from suppliers for a small financial donation. The hubs are also holding education sessions to help people reduce their food waste and save money, for example by using up leftovers, batch cooking, or using a slow cooker.

## 2.2 **Maximise the benefit of existing services:**

### 2.2.1. Information and advice services (see para 2.4.1 for service insights)

Information and advice (I+A) services are commissioned by the Council and D&B partners from Citizens Advice West Sussex and Age UK. The services seek to generate income for clients through supporting benefit claims and financial awards e.g. pension credit. The impact of COL pressures has been felt directly by these services, including increased demand and complexity. I+A services have a central role in the COL response for all residents and support other community-based activities such as income maximisation and communications, as well as providing community insight.

Two COL client groups have been identified: clients newly experiencing changes to income due to change in circumstances and/or rising costs; and clients already struggling, who are more likely to have a permanent health condition or be in receipt of benefits. As demand and complexity of client needs are increasing, I+A services are taking more flexible approaches to reach vulnerable residents and accommodate the time and resource requirements needed to address and resolve client issues.

### 2.2.2. Libraries

WSCC Libraries have been supporting residents experiencing COL pressures as an integral part of their business as usual activity: providing an information, enquiry and signposting service; offering books, leaflets and online resources on relevant topics; delivering an events/activities programme for targeted audiences; and providing access to partner services (e.g. Citizens Advice). Our network of 36 Libraries is supporting people experiencing hygiene poverty through distribution of essential toiletries packs. Targeted promotion enabled households most in need to benefit, particularly pensioners, disabled people, carers and families with young children. Around 2000 packs were successfully distributed before Christmas. The model will be repeated with an initiative to support individuals experiencing period poverty.

### 2.2.3. Community Hub and Household Support Fund round 3 (HSF3)

The Community Hub remains available for residents, providing support with COL and HSF3. Skilled advisors provide information, advice, guidance, signposting and practical support, resolving issues where possible, and signposting internal/external services and support when needed. HSF3 funding from national government runs until 31 March 2023; WSCC was allocated £4.8 million. Funding criteria apply with a focus on households in the most need, particularly those who may not be eligible for other government support, including families with children, pensioners, unpaid carers, care leavers and people with disabilities.

Distribution of funds for the first 3 months has seen at least 26,256 households provided with support via the Household Support Fund 3. Data on the support provided in the current period is in Appendix 4.

### **2.3 Optimise our use of data and intelligence:**

#### **2.3.1. Targeted household-level income maximisation using LIFT platform**

WSCC is working collaboratively with D&Bs to take a targeted approach to supporting the most vulnerable households through income maximisation, which increases money coming into the household. This will involve identifying vulnerable households using data on household characteristics, and delivering targeted interventions and support. Several D&Bs e.g. Adur and Worthing, have established programmes using the Low Income Family Tracker (LIFT) platform. LIFT combines multiple local authority data sets to provide a holistic view of low income families, and displays data on household characteristics including financial resilience categorisation. WSCC will learn from D&B experiences and work together for maximum impact.

The Council will utilise the LIFT platform and develop an approach to using LIFT with D&Bs. This will include developing the WSCC support offer to households, ensuring it aligns with the Council's remit as an upper tier local authority and adds value to the D&B approach. Taking a coordinated approach will be key to ensure the most appropriate organisation contacts households, and to prevent duplication.

### **2.4. Utilise community insight:**

2.4.1. Insights from partners are informing the wider COL response - for example, insights from Information and Advice services are shaping communications priorities, signposting, and the income maximisation approach. Key insights include:

- Majority of enquiries are income-related and benefits dominates; all include COL;
- Advisors report clients are expressing anxiety and increasing distress;
- Deficit personal budgets – even after maximising income and debt management there may not be enough money to meet day to day costs;
- Clients whose financial position is above benefit thresholds but vulnerable to COL;
- Clients with a health or disability need are experiencing greater COL impact;
- 'Clients in crisis' indicators e.g. needing emergency food support are increasing;
- Clients are cancelling essentials, including e.g. care alarms, dementia clubs etc making people more isolated and potentially at risk.

2.4.2 WSCC Communities Directorate will continue to work in partnership to deliver community-based actions to mitigate the impact of COL pressures on residents' health and wellbeing through a whole Council approach. Priorities in coming months include delivery of the remainder of HSF3 through the Community Hub and with partners, the development of our income maximisation approach and exploring further potential opportunities, for example, small grants, to support voluntary and community sector

organisations across the county. We will continue to work in partnership with D&Bs and VCSE organisations, including in our comms approach, and would welcome contact from partners about collaborative working across the system to mitigate the adverse impacts of cost of living pressures on the health and wellbeing of our local population.

**Contact:** Kate Birrell, Public Health Lead (Communities), WSCC,  
[kate.birrell@westsussex.gov.uk](mailto:kate.birrell@westsussex.gov.uk)

## **Appendix 1: Partnership relationships – activities and outputs**

Key activities and outputs to date:

- Coordination of D&B involvement in Household Support Fund delivery for white goods and food vouchers, plus offer to food banks for energy vouchers distribution.
- Collaborative delivery of information, advice and clear communications to signpost residents, including Libraries as warm spaces, and sharing same information on websites.
- Attendance at District & Borough Strategic Leads Meetings (monthly).
- WSCC attendance at strategic and tactical cost of living meetings in D&B areas.
- Attendance at Local Community Network leads meetings on a monthly basis with COL a priority for all, and meetings over the winter period focussed entirely on collaboration around COL.
- Single point of contact for D&Bs to clarify WSCC position on COL issues and getting a quick agreed response between partners;
- Coordination of conversations relating to the LIFT data management tool to support a collaborative approach to its utilisation;
- Review of energy advice service currently provided by Citizens Advice, with a partnership proposal for future support;
- Through regular meetings and conversations, ability to link D&Bs together where there was a common issue being discussed, e.g. warm space grants, creating risk registers to capture key work (Arun & Chichester).

**Appendix 2: Communications – activities and outputs** (contact Faye Rogers, [faye.rogers@westsussex.gov.uk](mailto:faye.rogers@westsussex.gov.uk) to get involved)

Promotional **activities** include:

- Press engagement and coverage including interviews with Cllr Paul Marshall on Greatest Hit Radio and Wave 105;
- Regular features on COL in residents' e-newsletter (~210,000 people);
- A regular schedule of posts on the WSCC social media platforms;
- Production and distribution of a printed and digital leaflet to schools, Libraries, family hubs and partners;
- Promotion of the Council's support for children who receive benefits-related free school meals (FSM), including the Holiday Activity and Food Programme and school holiday food voucher scheme;
- Encouraging residents and staff to visit our campaign pages through artwork carried in many of our service and staff newsletters.

**Webpages** *leisure-recreation-and-community/cost-of-living/* October to December 2022

- 18,231 total views
- 14,778 unique views
- 1min 23s average view time
- 49% bounce rate
- Majority of visitors coming through gov delivering links
- Worthing, Chichester, Bognor Regis, Crawley and Horsham all feature in the top-ten list of user locations for these pages

**Residents e-newsletter (5 editions)**



- 210,000 recipients/ Total Unique Link clicks to COL pages: 5,175

**Social media**

- Impressions 90,793
- Reach 28,911

**Fire and Rescue social media**

- Impressions 78,522
- Reach 49,328

**Warmer Homes social media**

Meta Ad performance, targeted at locations of low EPC rated homes, across West Sussex.

- Outputs: 73.2k reach, 546k impressions
- Cost per result £0.27
- Ad spend to date £1784
- 81% women/17% men/ 20% uncategorised link clicks
- Outcomes: 6,709 link clicks to date.

Outcome: 1081 total applications, 105 properties completed, £884K spend - £8.4k average per property. It is noteworthy that local authority was the key referral source.

**Appendix 3: Community food hubs – activities and outputs**

Since launching the community food hubs in September we have held three hubs at each location: Broadfield (Crawley), Bognor Regis, Southwick, and a combined hub and education session at Bognor. During this time, we have provided food to 310 residents, which equates to 993 individuals fed.

<b>Date</b>	<b>Location</b>	<b>No of residents attended</b>	<b>How many people were fed</b>
5/10/22	Bognor	28	84
12/10	Southwick	25	54
19/10	Crawley	38	129
2/11	Bognor	53	187
9/11	Southwick	54	168
16/11	Crawley	66	206
5/12	Bognor	47	165

The food provided has an approximate weight of 3313kg (3.3 tonnes) based on average weights from 3 hubs), with a potential value of £3441.67. This means that for each bag provided, residents have received around £12 of food, plus the additional non-monetary support, an increased sense of community, the on-site support, education on food waste reduction, healthy eating, recipes, and new ingredients.

**Appendix 4: HSF3 – activities and outputs**

## Agenda Item 8

On reviewing a sample of the MI data for the support provided for this current period from 1<sup>st</sup> October 2022 to 31<sup>st</sup> December 2022:

- The Community Hub application based service has spent £90,728 supporting 1444 households of which 70% of referrals received have been from households with children.
- Citizens Advice continue to focus on providing fuel support with the option for the provision of emergency vouchers and utility bill payments. In the first 3 months £630,415 has been spent supporting 734 households of which 58% of referrals received have been from households with children.
- D&Bs have access to vouchers for white goods and instant-access supermarket vouchers. To date 152 households have been supported of which 56% include a person of pension age.
- Over 18,200 children who meet the eligibility criteria for term-time free school meals received a £15 per week supermarket voucher during the October half term and for each week of the Christmas break.

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

**26 January 2023**

### **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**

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#### **Summary**

This report provides a summary of the work of the Children First Board formed in October 2020.

#### **Recommendation(s) 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 Well
3. 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<sup>th</sup> October 2020.
- 1.2 The Board is made up of a wide range of West Sussex organisations and groups including young people, parent, carers and others who look after our children on a daily basis. It also comprises members from practitioners and officers of the County Council; people elected to represent the views of the people of West Sussex, Districts and Boroughs, schools, colleges, police, health partners, and representatives from the voluntary and community sector. The voice of young people is provided through four young people on the Board and the Board's vice-chair is also a young person; Harley Collins. They are all supported by the Council's Voice and Participation Team and to facilitate their participation, Board notes and papers are written in an accessible style.

1.3 The Children First Board has agreed three main goals

These are to:

- Improve outcomes for children and young people who live in West Sussex, or who are cared for by West Sussex's children's services;
- Ensure that all agencies that provide services for children and young people in West Sussex work together effectively;
- Always listen and respond to the views of children, young people and their families, particularly when decisions are being made that affect them such as how services are run and funded.

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

- Have oversight of 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 to learn how to keep themselves safe;
  - supported to be as healthy as possible – both physically and emotionally;
  - given the skills to be successful in adult life.

1.5 The Board will also:

- Be responsible for determining the key priorities for all partners that need to be addressed to improve the lives of children and young people in West Sussex;
- Agree how these priorities will be addressed and track progress and impact.

## **2. The Children and Young People's Plan update**

2.1 The final plan was published in an electronic format on 7<sup>th</sup> December 2023. Plans for the CYPP's formal launch across the partnership are underway including a proposed event in April 2023. The plan can be found here: [Children and Young People's Plan | Your Voice West Sussex](#)

2.2 A CYPP Coordinating Group has been established to design and produce the CYPP Implementation plan and to drive its delivery, monitor progress and evidence impact. This group will manage all operational risks and issues and their mitigation referring these to the Children First Board for information and escalation. The work of this group will involve the

production of a CYPP Engagement Strategy – comprising a carefully planned series of stakeholder events – bringing partners, children, young people and their families together to share what is happening in relation to each of the CYPP’s priorities. This will include evaluating progress, celebrating success and learning from each other what we collectively need to do more of, differently or better to make a positive difference to the lives of children, young and their families.

### **3. Governance**

- 3.1 A review of the governance and meeting arrangements is now underway, which will consider the governance arrangements and how the Board is supported will be undertaken in order to build a stronger and effective set of partnership arrangements. A working group has been established to undertake this work and will report back to next Children First Board in March 2023.

### **4. Childrens First Board Update**

- 4.1 The last meeting of the Childrens First Board was held on 5<sup>th</sup> December 2022. Aside from an update on progress on the Childrens and Young People’s Plan and the agreement to review the Board, a report was received on Improving Perinatal Equity and Equality in Sussex 22 -25 Plan.
- 4.2 It was agreed that progress on the plan would be reported back to the Board in six monthly intervals.

### **5. Terms of Reference**

- 5.1 Following clarification from the Health & Wellbeing Board, the Terms of Reference have been reviewed and updated to secure compliance. The changes made included:
- a) Revision and update to the Code of Conduct
  - b) Revision to the reference to Children First Subgroups replacing with Working Groups.

#### **Contact:**

Marie Foley  
[marie.foley@westsussex.gov.uk](mailto:marie.foley@westsussex.gov.uk)

#### **Background papers**

Link to Children and Young People’s Plan: [Children and Young People's Plan | Your Voice West Sussex](#)

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

**26 January 2023**

### **West Sussex COVID-19 Local Outbreak Engagement Board**

**Report by Alison Challenger, Director of Public Health**

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#### **Summary**

This report provides a quarterly update on the West Sussex COVID-19 Local Outbreak Engagement Board (LOEB), following the previous update to the West Sussex Health and Wellbeing Board (HWB) in July 2022. An update was not brought to the Board's meeting in November 2022 as no meetings had taken place in the interim period; the meeting scheduled for 9 September 2022 was postponed due to the passing of Queen Elizabeth II.

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 HWB, 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 July 2022.
- (2) To consider how the LOEB can continue to engage with residents and communities across West Sussex, maximising its collaborative strength as we continue progressing through the 'Living with COVID-19' phase of the pandemic.

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#### **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.

#### **1 Background and context**

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



## Agenda Item 10

- 1.2 The LOEB continues to meet on a quarterly basis as we progress through the Living with COVID-19 stage of the pandemic, with members very much valuing the role of the Board. Meeting frequency is regularly reviewed by the Chairman, and the Board retains the flexibility and ability to regroup more frequently, if required.
- 1.3 The Board has met once (28 November 2022) since the last formal update to the West Sussex Health and Wellbeing Board in July 2022. The meeting scheduled for 9 September 2022 was postponed due to the passing of Queen Elizabeth II.
- 1.4 The next meeting is scheduled to take place on Thursday, 23 February 2023.

### **Local Outbreak Engagement Board Progress Update**

- 1.5 The LOEB continues to be committed to its role in bringing together key systems leaders across the County Council and the wider health and social care system in West Sussex to reduce the spread of infection and save lives across the county.
- 1.6 At the Board meeting in November 2022, the regular agenda was expanded to include an update on Winter Pressures, focused on both the NHS COVID-19 Vaccination Programme and NHS Flu Vaccination Programme, together with a public health update on tackling inequalities including access to vaccination, to increase uptake across the local population. This detailed update was welcomed by the Board.
- 1.7 The Director of Public Health emphasised the key message to the Board that the virus is still present in our homes and hospitals and has the ability to impact quite severely on some of our most vulnerable populations. As we come into the winter period, the need for vigilance of COVID-19 and building our resilience, as we do for flu and other respiratory illnesses that are more prevalent at this time of year, is required.
- 1.8 Both COVID-19 and flu vaccination rates in West Sussex are good, but there are still some clinically vulnerable groups for whom we would want to see a higher level of uptake, for example, those who are pregnant, children, and those who protect the most vulnerable people. We continue to promote both vaccines to increase uptake across the local population.
- 1.9 West Sussex County Council's (WSCC) current communications approach reinforces the importance of COVID-19 and flu vaccinations, promoting eligibility, access, availability and how to book, including promoting the ['Boost your immunity this winter'](#) campaign on the [West Sussex Wellbeing](#) website.
- 1.10 WSCC communications are developed in partnership with health partners and include amplifying national and local COVID-19 messages. The WSCC Communications Team continue to disseminate key communications messaging as widely as possible, exploring every channel that can be used and new ways of communicating/engaging with our residents and communities, to maintain high interest levels moving forward.
- 1.11 Updates were also provided to the Board on COVID-19 data, testing, and care homes (adults).

## **2 Proposal details**

- 2.1 The purpose of this paper is to 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 July 2022.
- 2.2 Views are sought from the West Sussex Health and Wellbeing Board on how the LOEB can continue to engage with residents and communities across West Sussex, maximising its collaborative strength as we continue progressing through the 'Living with COVID-19' phase of the pandemic.

## **3 Consultation, engagement and advice**

- 3.1 Not applicable.

**Contact:** Alison Thomson, Public Health Strategy Manager Tel. 0330 222 4132  
Email: [alison.thomson@westsussex.gov.uk](mailto:alison.thomson@westsussex.gov.uk)

**Appendices:** None

**Background papers:** None

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

**26 January 2023**

### **Better Care Fund Monitoring Q2 2022/23**

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

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#### **Summary**

This paper presents an update on the West Sussex 2022/23 Better Care Fund Plan, presents the West Sussex plan for the Adult Social Care Discharge Fund, and summarises performance against the Better Care Fund national metrics for Quarter 2 2022/23.

#### **Recommendation(s) to the Board**

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

1. Note the update on the West Sussex Better Care Fund Plan for 2022/23.
  2. Approve the West Sussex Adult Social Care Discharge Fund Plan.
  3. Note the West Sussex performance against the national BCF metrics at Q2 2022/23.
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#### **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.

#### **Background**

The Better Care Fund (BCF) is one of the government's national vehicles for driving health and social care integration. It requires integrated care boards (ICBs) and local government to agree a joint plan, owned by the health and wellbeing board (HWB). These are joint plans for using pooled budgets to support integration, governed by an agreement under section 75 of the NHS Act (2006).

The programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.

## **West Sussex Better Care Fund Plan 2022/23**

Confirmation of the approval of the West Sussex Better Care Fund Plan for 2022/23 submitted on 26<sup>th</sup> September was confirmed by email on 23<sup>rd</sup> December with the formal letter expected early in the new year.

The deadline for having a signed Better Care Fund section 75 Agreement in place is extended to 31<sup>st</sup> January to accommodate the additional requirement that the local authority and integrated care board Adult Social Care Discharge Fund monies are pooled into the agreement.

### **Adult Social Care Discharge Fund**

The first tranche of the £500 million Adult Social Care Discharge Fund, announced by the government on 22<sup>nd</sup> September 2022 was released to local areas in early December. The second tranche is due at the end of January following the submission of an agreed expenditure plan on 16<sup>th</sup> December, and progress review by NHS England and the Department of Health and Social Care in mid-January.

Funding will be provided through grants to local authorities (40% of the national fund) and allocations via Integrated Care Boards (the remaining 60%), with the latter confirming the agreed distribution of their allocation across the HWBs in their footprints:

West Sussex County Council LA Grant:	£2,752,877
NHS Sussex Integrated Care Board Allocation to HWB area:	£4,208,158
<b>Total:</b>	<b>£6,961,035</b>

Appendix 2 shows the expenditure plan covering the period from the start of December 2022 up until 31<sup>st</sup> March 2023 as agreed by the council and NHS Sussex.

Commencing 6<sup>th</sup> January, fortnightly activity reports must be submitted detailing what activities have been delivered in line with commitments in the spending plan. A final end of year report is required alongside the wider Better Care Fund end of year report by 2<sup>nd</sup> May 2023.

### **Better Care Fund Performance Q2 2022/23**

Appendix 1 shows metrics performance at Q2 2022/23 for the following metrics:

- Metric 1: Long term support needs of older people (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population.
- Metric 2: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services.
- Metric 3: Unplanned hospitalisation for chronic ambulatory care sensitive conditions.
- Metric 4: Discharge to usual place of residence.

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

**Appendices Presentation Papers**

Appendix 1: West Sussex Adult Social Care Discharge Fund Plan

Appendix 2: Better Care Fund Metrics Report Q2 2022/23

**Background Papers**

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

<https://www.gov.uk/government/publications/adult-social-care-discharge-fund>

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## Discharge fund 2022-23 Funding Template

### 5. Expenditure

Selected Health and Wellbeing Board:

West Sussex

Source of funding		Amount pooled	Planned spend
LA allocation		£2,752,877	£2,752,877
ICB allocation	NHS Surrey Heartlands ICB	Please enter amount pooled from ICB	£0
	NHS Sussex ICB	Please enter amount pooled from ICB	£4,208,158
		Please enter amount pooled from ICB	£0

Yellow sections indicate required input

Scheme ID	Scheme Name	Brief Description of Scheme (including impact on reducing delayed discharges).	Scheme Type	Sub Types	Please specify if 'Scheme Type' is 'Other'	Estimated number of packages/beneficiaries	Setting	Spend Area	Commissioner	Source of Funding	Planned Expenditure (£)
1	WS001 - Additional PTS Resource	Infrastructure: 1 additional vehicle (with another already live using Q3/Q4 funding.) Assumes impact is on reducing evening hand backs. Assumes one vehicle per site. Impact will increase depending on numbers of vehicles commissioned. Further vehicle being secured ensuring 1 per site for discharges.	Other	<Please Select>	Expanded patient transport service		Both	Social Care	NHS Sussex ICB	ICB allocation	£60,000
2	WS002 - Self-funder Placement Support Service (eg. CHS)	Expanded Capacity: Utilisation of private care seeker provider to support self funders. Assumes 25 self funders a month with reduced LoS in acute bed once MRRD and Care act assessment completed.	Residential Placements	Care home		75		Social Care	NHS Sussex ICB	ICB allocation	£75,000

3	WS003 - Health Care Assistants Providing Additional Care Capacity in Home First	Expanded Capacity: 10 Health Care Assistants providing additional care capacity in Home First. Focuses on P1 MRD delays for patients awaiting transfer to Home First.	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge		250		Community Health	NHS Sussex ICB	ICB allocation	£160,000
4	WS004 - Block Contracted Nursing Home Beds for Patients Awaiting Onward Placement (Not Discharge to Assess)	Placements/Packages: 37 beds in scheme merging spot purchase and block contract schemes, with an agreement that the focus needs to be block contracted capacity. Assumes length of stay twice that of LOS in acute bed. Current model assumes funded care up to 28 days although this may be reviewed to deliver a more equitable offer on all three discharge pathways. Based on double length of stay in placement bed compared to acute. For example, 50 additional beds would equate to 25 discharges.	Residential Placements	Nursing home		77		Community Health	West Sussex	ICB allocation	£780,000
5	WS005 - Personal Health Grants for Hospital Discharge Patients	Expanded Capacity: System to support discharge where patients may need access to a small amount of resources to facilitate discharge: Support earlier hospital discharge for 1-2 people per week.	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge		37		Community Health	NHS Sussex ICB	ICB allocation	£60,000
6	WS006 - Additional Social Work Capacity to Undertake Care Act Assessments Within the Discharge Capacity to Move People On.	Expanded Capacity: 10 Social Work Assessor Locums to support hospital based assessments. Includes cost of SW, and additional infrastructure to support additional assessments. Predicted to be 25 additional assessments a week. Will tackle current backlog. A reduction of LoS of 3 days for 25 patients. Impact will be dependent on ability to source placements from market.	Additional or redeployed capacity from current care workers	Costs of agency staff			Both	Social Care	West Sussex	ICB allocation	£294,498

7	WS007 - Additional B6 Nurse Locum to Support Clinical Assessment in HF	Expanded Capacity: 1 Band 6 agency nurse x 5 UCR teams - 7 days per week. Additional 10 discharges can be facilitated to HF per week per UCR team. This is dependent on care hours being available .	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge		200		Community Health	NHS Sussex ICB	ICB allocation	£333,540
8	WS008 - Additional DISCOs at UHSx	Infrastructure: Additional DISCOs to deal with workload (B4 admin - 2.46 WTE & B6 DISCO - 5.3 WTE.) Will be targeted at surge beds. Reduce LoS by 1 to 2 days for surge beds. Surge beds = 80. Actual numbers of discharges will rely on onward capacity.	Other		Additional workforce		Both	Community Health	NHS Sussex ICB	ICB allocation	£108,980
9	WS009 - Complex Discharge Coordinator Admin Role to Support HF Pathway	Infrastructure: Introduce a new role of complex discharge coordinator to help with the admin burden on clinicians within HF pathway (B4 admin 2 per shift = 2.46 WTE.) Focus would be on back end of home first to ensure good flow out of pathway. Focus on back end of home first. A reduction of LoS of 7 days for 5% of patients on HF pathway. This then allows flow into the HF pathway.	Other		Additional workforce		Home care	Community Health	NHS Sussex ICB	ICB allocation	£24,740
10	WS014 - Dedicated Senior Decision Maker Weekend Discharge Team	Extended Capacity: 1 x Consultant (agency), 1 x SHO (agency) - 11 additional PO discharges per weekend.	Other		Additional workforce		Both	Community Health	NHS Sussex ICB	ICB allocation	£173,866

11	WS015 - Adult Hospice Non-Specialist End of Life Care (EoLC) Bed Scheme	Extended Capacity: Increased hospice bed base, the equivalent of 8 – 10 beds across the 4 hospices. Equals approx. 310 episodes of care . There are approximately 6 to 7 patients in each site at any one time that could benefit from these 'less acute' beds. Expected LoS in each hospice bed is 2 weeks  01/01/23 to 31/03/23.	Bed Based Intermediate Care Services	Step down (discharge to assess pathway 2)		36		Community Health	NHS Sussex ICB	ICB allocation	£664,337
12	WS016 - Block Purchase Nursing Home Beds	Mental Health Expanded Capacity: Additional 6 dementia beds purchased as a block from the independent sector. MRDs across acute dementia beds currently 50% of acute dementia provision- circa 25 patients.	Residential Placements	Nursing home		12		Mental Health	West Sussex	ICB allocation	£351,000
13	WS018 - Hospital Discharge Care Additional Hours	Placements/Packages: Up to 840 hours dependent on capacity.	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge		75			West Sussex	Local authority grant	£390,000
14	WS019 - D2AR Flex Beds in WSCC Contracted D2AR Contracts	Placements/Packages: 6 discharge beds with immediate effect.	Residential Placements	Discharge from hospital (with reablement) to long term care		22			West Sussex	Local authority grant	£90,000
15	WS020 - Block Contract Residential and Nursing Beds	Placements/Packages: 22 beds. Whilst contracts are in place not all will be able to be scaled up due to price negotiation or beds unavailable. Beds not able to be scaled up can be tendered alongside WS004.	Residential Placements	Other	Care Home & Nursing Home	46		Social Care	West Sussex	Local authority grant	£410,000
16	WS021 - Domiciliary Care Rounds	Placements/Packages: 7 contracted rounds for immediate stand up +7 rounds to be tendered. Volume of hours TBC.	Home Care or Domiciliary Care	Domiciliary care packages		40		Social Care	West Sussex	Local authority grant	£400,000
17	WS022 - Transfer of Care Rounds	Placements/Packages: 5 TOC rounds, hours TBC (extension of contract followed by further procurement.)	Home Care or Domiciliary Care	Domiciliary care packages		20		Social Care	West Sussex	Local authority grant	£200,000

18	WS023 - Social Care and External Market Focused International Recruitment	Placements/Packages: To recruit 10 social workers and 5 OTs for WSCC and 10 social workers and 10 OTs for SPFT. Will support discharge from MH hospitals, by increasing assessing capacity for social care and Lead Prac capacity for SPFT. Will support social care discharge from general acute beds. Each lead prac will expect to have a case load of approx., 30. Currently patients wait in hospital as they are unable to be discharged without a Lead prac, so increase in 20 permanent staff will enable timely discharges. For social care, the social workers/OTs will be placed in hospital discharge and reablement teams, thus supporting acute discharges from both general and MH beds.  01/12/22 to 31/03/23.	Local recruitment initiatives				Both	Mental Health	West Sussex	Local authority grant	£500,000
19	WS027 - Enhancing MH Discharge Hub and Placement Finding Team	Mental Health Expanded Capacity: Mitigate shortfalls in the West Sussex MH Discharge Hub and Placement Finding Team. Support earlier hospital discharge for 2-3 people per week, reduction in MRD and reduction in LOS in West Sussex.	Other		Additional workforce			Mental Health	NHS Sussex ICB	ICB allocation	£150,000
20	WS028 - Acute/Community Co-ordinators Posts	Mental Health Expanded Capacity: Additional acute/community transitional co-Ordinator roles based upon successful length of stay reduction quality improvement projects . 2 band 7 roles for 4 months. Reduction in LOS evidenced via QI programme freeing up OBD and reduction in OAP.	Other		Additional workforce		Both	Mental Health	NHS Sussex ICB	ICB allocation	£70,000

21	WS029 - High Intensity Users Care Planning	Mental Health Advanced Discharge Planning: Senior Nurse Practitioner Band 7 to co-ordinate the development of anticipatory care plans for HIU. Programme will support hospital discharge for patients who are classified as MRD - due to complexity & risk which limits accommodation and support options. Will also reduce readmissions and presentation in ED/Urgent Care for same cohort- have refocused this to support discharge. Reduction in crisis incidents through pre-emptive support during a period of potential stress and anxiety for HIUs. Targeted support to circa 10 high intensity users.	Other		Additional workforce		Both	Mental Health	NHS Sussex ICB	ICB allocation	£54,900
22	WS030 - Employee Incentive	Incentivising additional care hours to be provided.	Other		Various		Both	Social Care	West Sussex	Local authority grant	£300,000
23	WS031 - Tracking, Infrastructure and Contract Support	Placements/Packages: enables close recording of use of beds and services to ensure flow and support swift move on.	Other		Various		Both	Social Care	West Sussex	Local authority grant	£100,000
24	WS032 - Care Provision and Associated Resource for D2A MH	Placements/Packages: supporting discharge through additional service provision and support.	Bed Based Intermediate Care Services	Step down (discharge to assess pathway 2)		21		Mental Health	West Sussex	Local authority grant	£212,877
25	WS033 - 2 x Dedicated AMHP in ED (SRH/WGH)	Assessment Capacity/Same Day Discharge: 2 WTE AMHPs based in ED (SRH/WGH). To assess MH patients on s136 MHA or informal, to facilitate early discharge where appropriate. Increase same day discharge and reduce delayed discharge, which is currently caused by lack of assessing capacity and competing demands for assessment in community vs acute. 10 discharges per week.	Other		Additional workforce		Both	Mental Health	West Sussex	Local authority grant	£150,000

26	WS034 - Same Day Discharge Front Door Practitioner	Placements/Packages: 1 x B7 community practitioner/community matron at each site located in ED to support same day discharge from ED, specifically aimed at frail/CH cohort. 3.73 WTE B7 - 16-18 same day discharges per week.	Other		Additional workforce		Both	Community Health	NHS Sussex ICB	ICB allocation	£120,000
27	WS035 - Smartwatch Technology Enabled Rehabilitation Following Hip Fracture in Older Adults	Extended Capacity: Worthing hospital only - Reducing hospital stay and 30 day re-admission for older, frail patients who are Medically Ready for Discharge (MRFD). Using smartwatch technology enabled, person-centred exercise and activity prescriptions delivered by charitable-sector teams. 50 patients across 3 months each with a reduction in LoS stay by 2 days.	Assistive Technologies and Equipment	Other	Smartwatch technology	50		Community Health	NHS Sussex ICB	ICB allocation	£13,636
28	WS037 - EoLC/Palliative Discharge Co-ordinator	Extended Capacity: Discharge Planning co-ordinator that works across the 4 hospices and with UHS to identify and pull patients out of hospital into appropriate end of life services. Note that this scheme is the gateway to Scheme 25 (WS015) above.	Other		Additional workforce			Community Health	NHS Sussex ICB	ICB allocation	£45,000
29	WS040 - Horsham McMillian - Additional HCAs to Provide Hospice at Home	Extended Capacity: Midhurst McMillian - Additional support to hospice at home allowing additional discharges to hospice at home care. 2x HCAs, 1x B6 clinician, additional 5 contacts a day.	Home Care or Domiciliary Care	Other	Hospice at Home	30		Community Health	NHS Sussex ICB	ICB allocation	£83,053

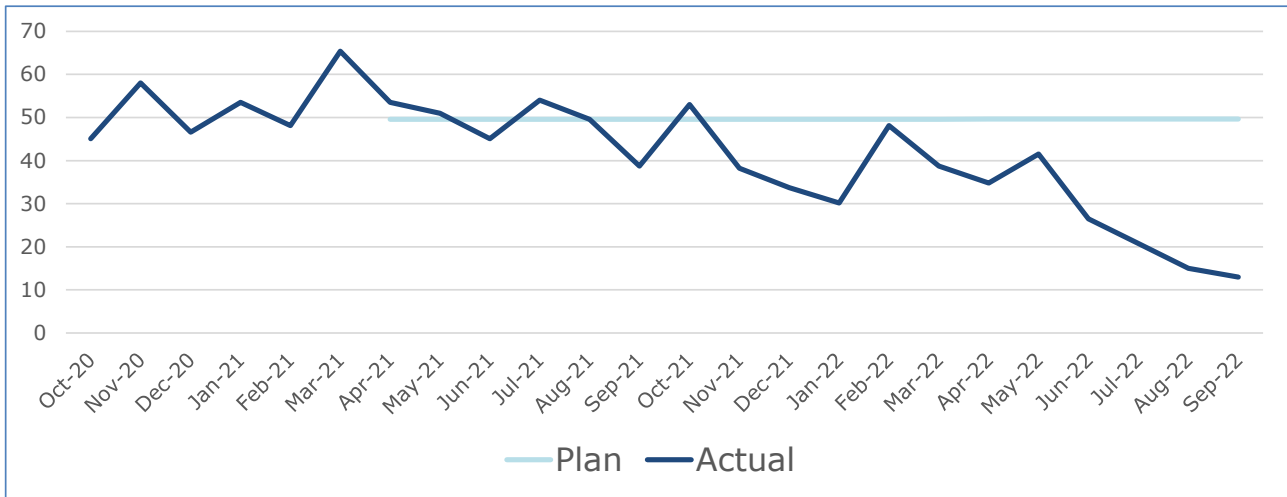
30	WS041 - Additional Infrastructure Support to ECHO	Extended Capacity: Enhanced staffing levels across all bands. ECHO support the placement of complex end of life patients. This patient co-hort often take complex planning and take up a large amount of resources both clinical and admin to achieve this. By increasing the number of staff in ECHO, more patients will be able to be supported and reduce the LoS in the acute while waiting for the complex packages to be sourced.	Other		Additional workforce		Both	Community Health	NHS Sussex ICB	ICB allocation	£36,610
31	WS043 - SaSH Same Day Emergency Care Discharge Team	Additional therapists and DISCOs to support same day discharge within AMU/ED and reduce 1 day LoS patients.	Other		Additional workforce			Community Health	NHS Sussex ICB	ICB allocation	£124,998
32	WS044 - Health Care Assistants Providing Additional Care Capacity in Home First (Additional to WS003)	Expanded Capacity: 10 Health Care Assistants Providing additional care capacity in Home First. Focuses on P1 MRD delays for patients awaiting transfer to Home First.	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge		250		Community Health	NHS Sussex ICB	ICB allocation	£160,000
33	WS045 - Expansion of SaSH at Home	Expand the SaSH at home service by an additional 12 home visits per day from end of January. Additional 2.5 discharges a week.	Home Care or Domiciliary Care	Other	Home visits	21		Community Health	NHS Sussex ICB	ICB allocation	£64,000
34	WS046 - Additional Qualified Social Work Assessors (Locums)	Expanded Capacity: 4 Social Work Assessor Locums to support hospital based assessments. Includes cost of SW, and additional infrastructure to support additional assessments. Predicted to be 10 additional assessments a week. Will tackle current backlog. A reduction of LoS of 3 days for 10 patients. Impact will be dependent on ability to source placements from market.	Additional or redeployed capacity from current care workers	Costs of agency staff			Both	Social Care	West Sussex	ICB allocation	£200,000



**HWB Better Care Monitoring Q2 2022/23: Appendix 2**

**Permanent Admissions to Nursing and Residential Homes**

**Figure 1 Residential Admissions (per month) - 24 months to June 2022**



2022/23 Plan: Lower than 49.7 per month (average of annual target of 595.8.)

September 2022 total: 13.0 (See note about data collection below.)

June 2021 comparison: 38.7.

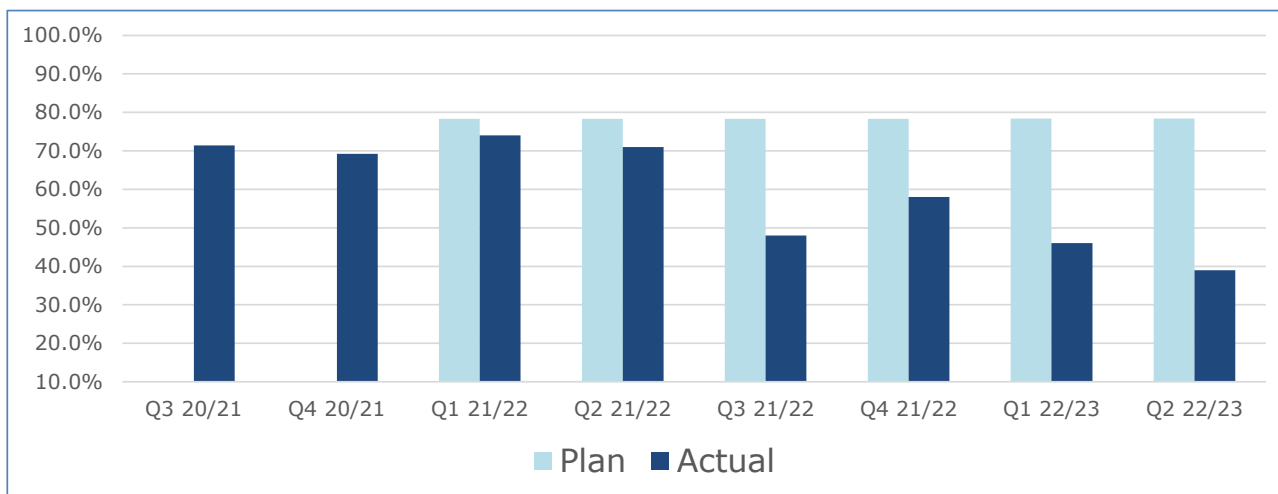
Current performance remains impacted by the effects of Covid; therefore, the data is not representative of normal patterns of admission. We have seen a significant increase in demand in all areas of adult social care, due to pent up demand. Adult social care is working towards reducing new admissions while increasing non-residential options. This is proving effective; however, the average cost of placements is increasing, due to market pressures and complexity of customer need.

Due to increased demand and reduced market capacity, significant wait times are experienced in all areas of the business. This means the current performance may be impacted by individuals having to wait longer before a placement can be identified, which shows as an over estimated reduction in new admissions.

Please note that data for this metric is collected over an extended period. Hence, the most recent months will always show low figures pending full data collection.

**% Of Older People at Home 91 Days after Discharge into Reablement/Rehabilitation Services**

**Figure 2 Reablement (% 65+ at home 91+ days post-discharge) - 24 months to Q2 2022/23**



2022/23 Plan: Higher than 78.4 percent per month (annual target of 78.4 percent.)

Q2 2022/23 total: 39.0 percent.

Q2 2020/21 comparison: 71.0 percent.

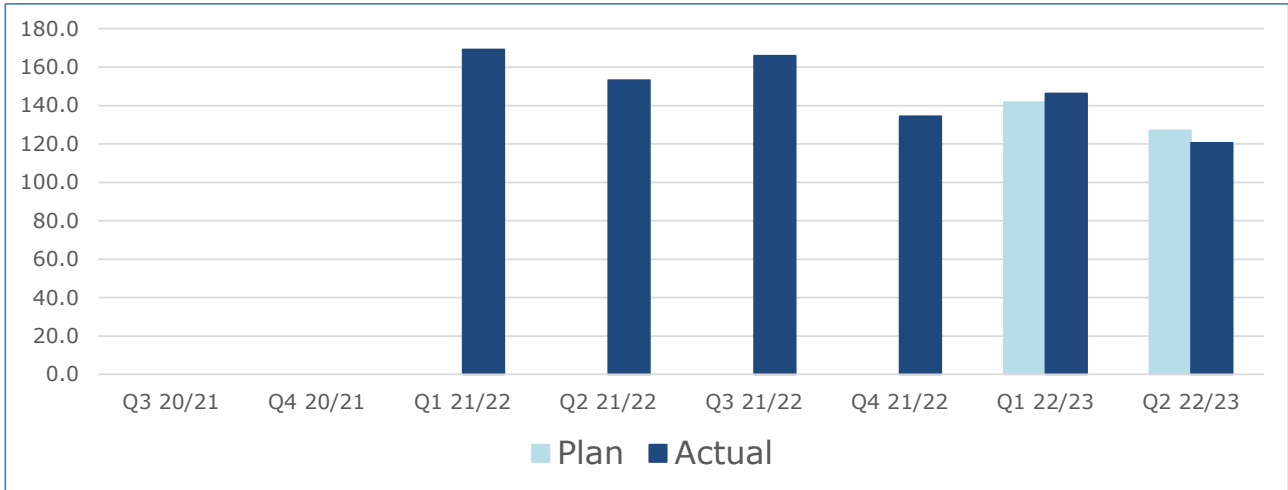
Performance at Q2 2021/22 remains lower than planned. Contributory factors include data quality issues around the 91-day measure which are being worked through, along with market pressures.

The reablement provider have been challenged with capacity during the pandemic due to staff sickness, and also challenges moving people on through the service who require a long term provision due to challenges in the social care workforce locally. There has also been a significant increase in the complexity and levels of dependence of people referred to our reablement service over the last 2 years which will have an impact on this indicator.

ADASS feel that the 91-day measure is not fit for purpose and are looking to remove this measure and refresh ASCOF. 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.

**Unplanned Hospitalisation for Chronic Ambulatory Care Sensitive Conditions**

**Figure 3 Reablement Ambulatory Case Sensitive Conditions - 24 months to Q2 2022/23**



2022/23 Q2 Plan: Lower than 127.1 – Indirectly standardised rate of admissions per 100,000 population.

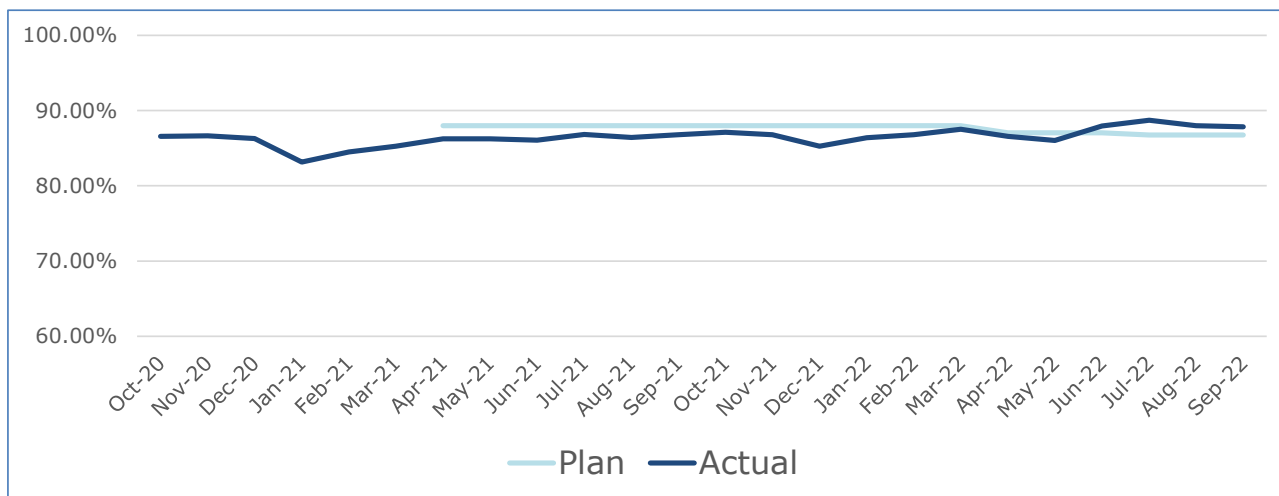
Q2 2022/23 total: 120.6.

Q2 2020/21 comparison: 153.2 percent.

This metric is a measure of emergency admissions with a primary diagnosis of an ambulatory care sensitive condition such as: acute bronchitis, angina, ischaemic heart disease, heart failure, dementia, emphysema, epilepsy, hypertension, diabetes, COPD, pulmonary oedema.

**Discharge to Usual Place of Residence**

**Figure 4 Discharge to Usual Place of Residence - 24 months to June 2022**



2022/23 Q2 Plan: Higher than 86.75 percent.

September 2022 total: 87.85 percent.

September 2021 comparison: 86.77 percent.

This measure for discharge to usual place of residence has been constructed by the national BCF team around the 95% expectation in the discharge policy for Pathways 0 and 1. However it should be noted that the policy was not intended as setting a hard target for these pathways.

In West Sussex, this figure tends to be lower than some areas due to the relatively large older population, and the capacity of Pathway 2 offering which provides an alternative to discharge to usual place of residence where appropriate.

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<b>Health and Wellbeing Board (HWB) Work Programme 2023/2024</b>				
<b>Meeting Date</b>	<b>27-Apr-23</b>	<b>20-Jul-23</b>	<b>02-Nov-23</b>	<b>25-Jan-24</b>
<b>Items</b>				
Cost of Living				
<b>Annual Reports/Actions</b>				
Terms of Reference Annual Review			√	
Safeguarding Adults Annual Report				
Safeguarding Childrens Annual Report				√
Public Health Annual Report				
HealthWatch Annual Report				
Pharmaceutical Needs Assessment				
Joint Strategic Needs Assessment				
Joint Health and Wellbeing Board Strategy - term ends in 2024				
<b>Standing Items</b>				
HWB - Local Outbreak Engagement Board	√	√	√	√
HWB - Children First Board	√	√	√	√
Better Care Fund Monitoring	√	√	√	√
Public Forum	√	√	√	√
Public Health Update	√	√	√	√
Recommendation and Action Tracker	√	√	√	√
Integrated Care System (ICS) (Incorporating Health Inequalities)	√	√	√	√

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