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Agenda

Name of meeting **HEALTH AND WELLBEING BOARD**
Date **THURSDAY 28 OCTOBER 2021**
Time **9.30 AM**
Venue **COUNCIL CHAMBER, COUNTY HALL, NEWPORT, ISLE OF WIGHT**

Participants

Councillor Lora Peacey-Wilcox
Councillor Debbie Andre
Michele Legg, IW CCG (Vice-Chairman)
Norman Arnold, IW Economic Development Board
Simon Bryant, Isle of Wight Council
Steve Crocker, Isle of Wight Council
Sarah Jackson, Hampshire Constabulary
Gill Kennett, Healthwatch
Councillor Michael Lilley, Voluntary Sector Forum
Emma Lincoln, Age UK iW
Councillor Karl Love
John Metcalfe, Isle of Wight Council
Maggie Oldham, IW NHS Trust
Colin Rowland, Isle of Wight Council
Alison Smith, IW CCG
Councillor Ian Stephens
Kai Wacker, IWALC representative

Democratic Services Officer: Charlotte Sadler
democratic.services@iow.gov.uk



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1. **Minutes** (Pages 7 - 12)

To confirm as a true record the Minutes of the meeting held on 29 July 2021.

2. **Declarations of Interest**

To invite Members to declare any interest they might have in the matters on the agenda.

3. **Public Question Time - 15 Minutes Maximum**

Questions may be asked of the Chairman without notice but to guarantee a full reply at the meeting such questions must be delivered in writing or by electronic mail to Democratic Services at democratic.services@iow.gov.uk no later than Monday, 25 October 2021. Each question must give the name and address of the questioner.

4. **Chairman's Update**

The chairman to verbally update the board on progress on actions since the last meeting, including actions that have not been dealt with as a separate agenda item and to invite partners to advise on any extraordinary issues which may affect the work of the board and have been drawn to his attention.

5. **Covid 19 update**

To receive a presentation on Covid-19.

6. **HWB Strategy Development presentations**

To receive a presentation on the Health and Wellbeing Strategy.

7. **Island Covid-19 Recovery plan**

To receive a presentation on the Covid-19 recovery plan.

8. **Mental Health Update**

To receive an update on Mental Health.

9. **Better Care Fund** (Pages 13 - 24)

To consider a report on the Better Care Fund.

10. **Health and Care Bill**

To receive a verbal update on the Health and Care Bill.

11. **IW Safeguarding Children's Annual Report** (Pages 25 - 70)

To consider the Safeguarding Children's Annual Report.

12. **Members' Question Time**

A question must be submitted in writing or by electronic mail to Democratic Services no later than 9.30 am on 26 October 2021.

CHRISTOPHER POTTER
Monitoring Officer
Wednesday, 20 October 2021

Interests

If there is a matter on this agenda which may relate to an interest you or your partner or spouse has or one you have disclosed in your register of interests, you must declare your interest before the matter is discussed or when your interest becomes apparent. If the matter relates to an interest in your register of pecuniary interests then you must take no part in its consideration and you must leave the room for that item. Should you wish to participate as a member of the public to express your views where public speaking is allowed under the Council's normal procedures, then you will need to seek a dispensation to do so. Dispensations are considered by the Monitoring Officer following the submission of a written request. Dispensations may take up to 2 weeks to be granted.

Members are reminded that it is a requirement of the Code of Conduct that they should also keep their written Register of Interests up to date. Any changes to the interests recorded on that form should be made as soon as reasonably practicable, and within 28 days of the change. A change would be necessary if, for example, your employment changes, you move house or acquire any new property or land.

If you require more guidance on the Code of Conduct or are unsure whether you need to record an interest on the written register you should take advice from the Monitoring Officer – Christopher Potter on (01983) 821000, email christopher.potter@iow.gov.uk, or Deputy Monitoring Officer - Justin Thorne on (01983) 821000, email justin.thorne@iow.gov.uk.

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Minutes

Name of meeting	HEALTH AND WELLBEING BOARD
Date and Time	THURSDAY 29 JULY 2021 COMMENCING AT 9.30 AM
Venue	COUNCIL CHAMBER, COUNTY HALL, NEWPORT, ISLE OF WIGHT
Present	Cllrs L Peacey-Wilcox, D Andre, M Legg (Vice-Chairman), N Arnold, S Bryant, S Jackson, M Lilley, K Love, J Metcalfe, M Oldham, A Smith, I Stephens and C Tozer
Apologies	S Crocker

1. **Minutes**

THAT the Minutes of the meeting held on 18 March 2021 be confirmed as a true record.

2. **Declarations of Interest**

No declarations were received.

3. **Public Question Time - 15 Minutes Maximum**

No written public questions were received.

Cllr Brodie asked a question in relation to health inequalities and the impact of deprivation and poverty. Reassurance was sought to ensure that the Council would commit to spend money in Pan and Barton to address these issues with particular regard to affordable housing. The chairman reassured that this would be considered, and requested that specific details on this matter be forwarded in order for them to be looked into. The Director of Public Health noted that health inequalities, including those in Pan and Ryde East, would be addressed in the refreshed Health and Wellbeing Strategy.

4. **Chairman's Update**

The chairman invited the Chief Executive to advise on any issues which may affect the work of the Board.

Attention was drawn to the Health and Care Bill which was set to allow the establishment of new integrated care systems (ICS) to bring together providers and

commissioners of NHS services, local authorities, and other health partners, to plan health and care services to meet the needs of their population. It was advised that the Hampshire and Isle of Wight ICS was operational in shadow form and was set to go live from April 2022. It was not yet clear in the legislation how ICS's would work alongside health and wellbeing boards and work needed to be done to establish the boundaries between the two bodies. It was agreed that an update would be provided at a future meeting.

The Chief Executive of the IW NHS Trust provided an update on the recent CQC inspections of core services and management which had taken place in June 2021. A letter from the CQC found that clear progress had been achieved and the full report would be published in due course. Questions were raised in relation to the interactive mental health service platform and the integrated mental health hub, and it was confirmed that all plans were on track.

RESOLVED:

THAT the updates be noted.

5. **Covid-19 Update**

The Director of Public Health provided an update on Covid-19 which included an overview of current infection rates, the roll out of the vaccination programme, and contact tracing. It was highlighted that work was underway to prepare schools to restart in the Autumn term.

The Chairman of the Isle of Wight Voluntary Sector Forum reflected on feedback from the community which highlighted concerns around isolation and its impact on staffing shortages. The voluntary sector were thanked for its consistent efforts throughout the pandemic.

The Director of Adult Social Care thanked Public Health for its support in providing clarity around recent government guidance which made some health and social care staff exempt from isolation.

The Vice-Chairman provided an update with regards to the roll out of the vaccination booster programme from September 2021. It was advised that initial guidance had been issued by NHS England however this was likely to be updated over the summer period.

RESOLVED:

THAT the update on Covid-19 be noted.

6. **Covid recovery - Community, Economy and Place Recovery, Recovery Plan vs Business as usual**

The Director of Regeneration delivered a presentation on the progress to date and the next phase of recovery, which included an outline of the recovery plan themes, (community, economic, place), and the island profile recovery. The Board

considered the proposed recovery priorities for continuing oversight of the Board, which included; housing needs and supply, anti-poverty, community recovery and hub sustainability, education recovery, wellbeing, commemoration and celebration, 'kickstart' and other unemployment responses, and Island Place marketing.

The Chairman of the Isle of Wight Voluntary Sector Forum highlighted issues around health inequalities and collaboration with town and parish councils.

Discussion took place regarding housing issues, and the Deputy Leader confirmed the commitment of the Council for housing to be a key priority. The Director of Adult Social Care and Housing Needs advised on key steps to move forward which could include assessing the supply of housing, working with registered social landlords, supporting private landlords, and the delivery of the Empty Home Strategy. The representative of Hampshire Constabulary reflected on housing issues from a policing context and reported that a lack of accommodation was a contributing factor in reoffending and had a significant impact on recovery in terms of substance misuse, mental health issues, and domestic abuse.

RESOLVED:

THAT the presentation of the Director of Regeneration on Covid-19 recovery be noted.

7. Health and Wellbeing Strategy development

The Director of Public Health delivered a presentation which outlined the process for the development of the Health and Wellbeing Strategy which needed to be refreshed for 2022. The aim was to set out a shared vision in which people live healthy and independent lives, supported by thriving and connected communities, with timely and easy access to high-quality and integrated public services when they need them. Key themes identified for further development included inequalities and the impact of deprivation and poverty, children and young people, the long term impact of Covid-19, community recovery, mental health and wellbeing, getting people physically active, and housing and health.

The Cabinet Member for Children's Services highlighted concerns around the effects of Covid-19 on children and young people. Collective priorities of the Board were considered, and it was suggested that a focus be placed on the mental health and wellbeing of children and young people, housing and health, and health inequalities.

It was agreed that specific questions in relation to the report should be submitted to the Director of Public Health for consideration and inclusion in the development of the strategy.

RESOLVED:

- i) THAT the progress towards the development of the refreshed Health and Wellbeing Strategy be noted.

- ii) THAT specific questions in relation to the report be submitted to the Director of Public Health for consideration and inclusion in the development of the strategy.

8. **Joint Strategic Needs Assessment (JSNA)**

The Director of Public Health presented the report which provided the Board with an update on the Isle of Wight Joint Strategic Needs Assessment (JSNA) work programme. It was advised that the JSNA work programme had been suspended due to the need of the Public Health Intelligence Team to undertake Covid-19 data response work. It was anticipated that the JSNA work programme would recommence in Summer 2021, dependent on the Covid-19 response work reducing significantly.

Comments were made in relation to the interventions which had been working well, and it was noted that these activities could be highlighted in the work of the Recovery Cell.

RESOLVED:

THAT the Joint Strategic Needs Assessment (JSNA) work programme be noted, and the development engagement by member organisations be noted.

9. **Better Care Fund**

The Director of Adult Social Care and Housing Needs presented the report which updated the Board on the Better Care Fund (BCF) 2020-21 final submission to the National Better Care Fund team, as was required at the end of May 2021. The Assistant Director of Adult Social Care highlighted that majority of funding had been allocated to care and support in the community through rehabilitation, crisis response, and the development of the Integrated Discharge Team. It was noted that all mandatory conditions had been met, and it was confirmed that the Improved Better Care Fund formed part of the reporting arrangements. Questions were raised in relation to the Woodlands provision.

RESOLVED:

THAT the report be noted.

10. **Introduction to Hampshire and Isle of Wight Physical activity strategy, We Can Be Active**

The Strategic Lead for Physical Activity and Health of Energise Me delivered a presentation which provided an update on the Hampshire and Isle of Wight Physical Activity Strategy. The strategy drew on the "Impact of Covid-19 on physical activity plans" which was presented to the Board at its meeting held on 18 March 2021.

The Board received information around the development of the strategy, the strategic goals, how the strategy could be implemented on the Isle of Wight, and the governance arrangements to oversee its progress and impact. Clarification was

sought regarding the consultation process and discussion took place regarding physical activity as a part of wellbeing for children and young people. It was noted that various activities were available however work was needed to reach out to those families who would not usually participate.

RESOLVED:

- i) THAT the Isle of Wight and Hampshire We Can Be Active strategy be adopted.
- ii) THAT a representative from each member organisation support the Isle of Wight We Can Be Active event on the 23 September 2021.

11. **Members' Question Time**

No written questions were received.

CHAIRMAN

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Committee: HEALTH AND WELLBEING BOARD

Date: 28 OCTOBER 2021

Title: BETTER CARE FUND UPDATE 2021/22 and 2022/23

Report of: Ian Lloyd, Strategic Manager Partnerships and Support Services
Tracy Savage Locality Director, Community, Primary Care and Medicines Optimisation, Hampshire, Southampton and IW CCG

Sponsors: Laura Gaudion, Interim Director Adult Social Care
Alison Smith, Hampshire, Southampton and IW CCG (Managing Director IW)

Summary

1. The Better Care Fund (BCF) programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care and support, and better outcomes for people and carers. The requirements of the BCF are set by NHS England and include requirements for pooled/aligned workstreams and budget within section 75 agreement.
2. The annual planning process for the BCF was delayed during 2020/21 due to the impact of Covid-19. However, requirements for the development and submission of BCF plans has recommenced for 2021/22 on a delayed timeline. The suite of BCF Planning documents for 2021/22 were received on 30 September 2021 which outlined the following submission timeline:

Fig. 1 2021/22 Planning Timeline

BCF planning requirements published	29 September 2021
Optional draft BCF planning submission submitted to BCM	By 19 October 2021 *
Review and feedback to areas from BCMs	By 2 November 2021
BCF planning submission from local HWB areas (agreed by CCGs and local government). All submissions will need to be sent to the local BCM, and copied to england.bettercarefundteam@nhs.net	16 November 2021
Scrutiny of BCF plans by regional assurers, assurance panel meetings and regional moderation	16 November to 7 December 2021
Regionally moderated assurance outcomes sent to BCF team	7 December 2021
Cross-regional calibration	9 December 2021
Approval letters issued giving formal permission to spend (CCG minimum)	From 11 January 2022
All section 75 agreements to be signed and in place	31 January 2022

*An extension to this milestone has been agreed with the Better Care Manager (BCM), enabling a submission window between the 19 and 26 October 2021.

3. Use of BCF mandatory funding streams (clinical commissioning group [CCG] minimum contribution, improved Better Care Fund [iBCF] grant and Disabled Facilities Grant [DFG]) must be jointly agreed by CCGs and local authorities to reflect local health and care priorities, with plans signed off by Health and Wellbeing Boards (HWBs).
4. The national CCG contribution to the BCF has been increased in line with average NHS revenue growth (by 5.3 per cent for 2021/2022). The relevant funding streams have been adjusted to reflect this growth.
5. This paper provides an update for the Health and Wellbeing Board about the 2021/2022 Better Care Fund (BCF) final submission to the National Better Care Fund team as required by 16 November 2021, and once approved centrally, will be incorporated into the local s.75 agreement. In addition, this paper outlines the proposed development of 2022-23 BCF.

Background

6. The current BCF has been in place since April 2017 and is based around the following schemes:
 - a) Locality/Community Model (nursing, crisis response and falls etc).
 - b) Hospital to Home (Home and Residential Care, Single Point of Access, Personal Assistants etc., Winter Pressures spend)
 - c) Carers Support
 - d) Community Voluntary Sector (Early Help and Intervention etc)
 - e) Support for Providers (Raising Standards)
 - f) Promoting Independence (Disabilities Facilities Grant, Equipment inc. Assistive technology, etc.)
 - g) Rehabilitation, Reablement and Recovery (Integrated Discharge Team (Single Point of Access Referral Service -SPARRCS), Rehabilitation bedded care, Reablement etc.)
 - h) Integrated Mental Health Provision (Woodlands and Mental Health (MH) Grants)
 - i) Learning Disabilities (Westminster House)
 - j) Continuing Healthcare including Hospital Discharge Scheme (HDS)
 - k) Care Act Infrastructure (Maintenance of ASC provision etc.)
7. Since 2018/2019 the BCF has been stable in terms of the workstreams it contains, and the funding attached by both the council and the CCG to those workstreams. The only significant change has been the inclusion of both the Continuing Health Care (CHC) provision and Funded Nursing Care (FNC) following the integration of the CCG team with the councils Adult Social Care and Housing Needs Department in January 2019.
8. Senior staff of both the council and the CCG are engaged in both the development and reporting for the BCF scheme under the current governance process applied. During this financial year the following activities will be required:
9. The governance process for the BCF will be reviewed and aligned with the refresh of the Integrated Care Partnership (ICP) and the new Integrated Care System (ICS) also reflecting the now merged CCG for Hampshire, Southampton, and the Isle of Wight.
10. Between September 2021 and March 2022, the current BCF schemes will be reviewed to identify effectiveness and value for money. This will inform decision around which schemes stop, carry on or are changed moving in to the 2022/23 financial year.

11. Having received the national guidance for the BCF, the Section 75 Agreement which governs the BCF for 2021/2022 is being developed in partnership by the council and the CCG and a Deed of Variation to the existing legal agreement is being drawn up to reflect the required changes. The Section 75 Agreement together with the Deed of Variation will provide clarity around the transfer of the CCG minimum mandated contribution to Adult Social Care and the agreed way in which that will be spent. It is accepted that the contribution will be transferred without deduction or expectation that it will be recharged against CCG service deliverables.
12. The total value of the 2020/2021 BCF was £52,400,000.
13. Mandatory inclusion in the BCF includes:
 - CCG contribution to Adult Social Care (ASC) (uplifted by 5.3 per cent for 2021/22) to be used for social care and out of hospital spend
 - ASC Disability Facilities Grant
 - ASC Improved BCF (iBCF) and Winter Pressures Funding
 - NHS funded Hospital Discharge Scheme (new in 2020/2021)
14. The remainder is non-mandatory and accounted for £32.4m of the fund. CCG contribution overall is c.£42m and ASC c.£10m. in 2020/2021.
15. The IW BCF operates more as an aligned budget than a pooled budget.
16. There are three proposed areas for BCF review in 2021/2022:
 - a) **Early Help and Prevention** (including all voluntary sector funded Better Care Fund services) – agreed by Integrated Care Board, the council is leading and is due to report by the end of October 2021 to action agreed outcomes in 2021/22 including revised scheme and associated budget for 2022/2023 Better Care Fund.
 - b) **Rehabilitation, Reablement and Recovery (Regaining Independence)** – a bedded care review has been initiated by the Community Oversight Group; a full review of Rehabilitation, Reablement and Recovery, including discharge pathways, Integrated Discharge Team (IDT), Onward Care Intervention Team (OCIT) etc., is proposed. To action agreed outcomes in 2021/22 including revised scheme and associated budget for 2022/23 Better Care Fund. (This will incorporate a review of the Single Point Access Referral Review and Coordination Service (SPARRCS) and Enhanced Professional Service scheme lines and a re-specification within the context of Hospital Discharge Service and Integrated Discharge Team to support allocation and Local Authority agreement of the associated funding from the NHS Adult Social Care Mandatory Contribution).
 - c) **Refresh of the other Better Care Fund Schemes and associated funding – revised Framework for Isle of Wight delivery of effective integrated services at locality (Integrated Care Partnership) level by 2022/2023** – Undertake a structured review of the Better Care Fund Section 75 agreement framework, scope, metrics/Key Performance Indicators and funding opportunities, based on agreed Integrated Care Partnership overarching principles and IW Health and Care Plan refresh. This is intended to potentially reduce the number of individual Schemes (11; see para. 8 above) to reflect the updated models of integrated practice being agreed/consolidated, e.g. with key over-arching schemes such as Discharge and Community Integration, Voluntary Sector Offer, Integrated Mental Health and Learning Disabilities, and Continuing Healthcare.

National Better Care Fund Planning Requirements for 2021/2022

17. For 2021/2022, BCF plans will consist of a narrative plan and a completed BCF planning template including:
- planned expenditure from BCF sources
 - confirmation that national conditions of the fund are met, as well as specific conditions attached to individual funding streams
 - ambitions and plans for performance against BCF national metrics
 - any additional contributions to BCF section 75 agreements.
18. The four national conditions for this planning year are similar to the 2019-20 planning period, and the conditions for 2020-21 (which were not assured due to pressures resulting from COVID). The BCF Plans must meet all four national conditions to be approved, they are:

1	A jointly agreed plan between local health and social care commissioners and signed off by the Health and Wellbeing Board
2	NHS contribution to adult social care to be maintained in line with the uplift to CCG minimum contribution
3	Invest in NHS commissioned out-of-hospital services
4	Plan for improving outcomes for people being discharged from hospital

Fig. 2 National conditions BCF 2021/22

19. The plan must also set out the system's approach to delivery and will also describe how the approach to integration in the BCF aligns with wider plans in order to:
- continue to implement a joined-up approach to integrated, person-centred services across health, care, housing and wider public services locally
 - support people to remain independent at home
 - jointly improve outcomes for people being discharged from hospital
 - reduce the percentage of hospital inpatients who have been in hospital for more than 14 and 21 days
 - enable a 'Home First' policy
20. Final BCF plans must include stretching ambitions for improving outcomes against the national metrics for the fund. In the case of length of stay, these ambitions should align to local NHS trust plans to reduce the number of inpatients who have been in hospital for 21 days or over.
21. However, it has been acknowledged that, due to the wider impact of Covid-19. Where appropriate, these stretch targets may be to maintain existing performance with a view to recovery and improvement in the future. Planning templates must include plans for achieving targets as a condition of approval.
22. Due to the late release of the planning guidance, the decision is still pending whether reporting of performance against these targets will occur in both Q3 and 4 or as a final annual report.
23. The BCF policy framework for 2021/2022 provides continuity from previous years. BCF plans must continue to meet all four national conditions of the fund.
24. Plans must continue to be jointly agreed by CCGs and local authorities to reflect local health and care priorities, with plans signed off by Health and Wellbeing Boards (HWBs).

25. NHS England continues to require CCGs to pool a mandated amount of funding with adult social care which is to be maintained in line with the uplift to the CCG minimum contribution as per para. 15 above. Local Authorities are required to pool grant funding from the Improved BCF (iBCF) and the Disabled Facilities Grant.
26. The grant determination for the iBCF was issued in May 2021. Since 2020/2021, funding that was previously paid as a separate grant for managing winter pressures has been included as part of the iBCF grant but is not ringfenced for use in winter.
27. The funding may only be used for the purposes of:
 - meeting adult social care needs
 - reducing pressures on the NHS, including seasonal winter pressures
 - supporting more people to be discharged from hospital when they are ready
 - ensuring that the social care provider market is supported
28. The DFG is pooled into the BCF to promote joined-up approaches to meeting people's needs to help support more people of all ages to live in suitable housing so they can stay independent for longer.
29. The grant conditions remain broadly the same as in 2020/2021.
30. There must be agreement to invest in NHS commissioned out of hospital services and support discharge home, which may include 7-day services and adult social care.
31. A high priority will be to address Managing Transfers of care including a clear plan for improved integrated services at the interface between health and social care that reduces Delayed transfers of Care (DTC), encompassing the Local Government Association High Impact Change Model for managing Transfers of Care. As part of this all Health and Wellbeing Boards adopt the centrally set expectations for reducing or maintaining rates of DTC during 2021/22 into their BCF plans.
32. Local NHS trusts, social care providers, voluntary and community service partners and local housing authorities must be involved in the development of plans. However, it has been acknowledged that, due to the late release of the planning guidance, extant stakeholder engagement may be used to inform the current BCF plan in lieu of a fresh cycle of engagement.

National Approval of agreed plans

33. The BCF plan will be approved by NHS England following joint NHS and Local Government regional assurance process against a set of national key Lines of Enquiry (KLOEs).
34. Assurance processes will confirm that national conditions are met, ambitions are agreed for all national metrics and that all funding is pooled, with relevant spend agreed.
35. Assurance of final plans will be led by Better Care Managers (BCMs) with input from NHS England and local government representatives. It will be a single stage exercise based on a set of key lines of enquiry (KLoEs). Recommendations for approval will be signed off by NHS regional directors – this will include confirmation that local government representatives were involved in assurance and agree the recommendations.
36. NHS England will approve BCF plans in consultation with Department for Health and Social Care (DHSC) and Department for Levelling Up, Housing and Communities (DLUHC). NHS England, as the

accountable body for the CCG minimum contribution to the fund, will write to areas to confirm that the CCG minimum funding can be released. NHS England will focus its oversight particularly on approval and permission to spend from the CCG ringfenced contribution on plans linked to National Condition 4 and ambitions for reducing long length of stay. This will include an assessment at regional level of the ambitions, with a further review of plans at national level. Plans will still need to meet all the requirements and national conditions to be approved.

37. Where the local governance schedule does not coincide with the submission deadline, submission is still required with an explanatory note that final approval from the Health and Wellbeing Board is pending. The plan may then proceed through the early stages of the national assurance process but, where otherwise all other conditions are fulfilled, final approval will be held in abeyance until the local Board has granted approval in line with Condition 1. Only once both approval processes have been completed will the Plan be deemed officially sign off and that the S75 agreement may be put into place. Until that point, all expenditure in line with the BCF intentions will be considered as undertaken 'at risk'.
38. Post-submission approval by the HWB must be received by the National team before 7 December 2021.
39. A timeline of the approval process has been included within Fig. 1 above.

Strategic Alignment

40. The Isle of Wight BCF Section 75 Agreement (S75) is a large and complex document dating back to its inception 2013, revised for 2017/2019 with the iBCF, which has been rolled forward in 2019/2020 and 2020/2021 by Deed of Variation. The document sets out the legal basis, governance (BCF S75 Board via Integrated Care Partnership Board (ICP), to Health and Wellbeing Board), Key Performance Indicators and reporting, schemes descriptions/service specifications etc.
41. The BCF Plan and S75 needs to be considered within the context of the Isle of Wight Health and Care Plan to drive system transformation, financial savings and efficiencies. The S75 agreement will remain in place as the financial and contractual vehicle between the CCG and Local Authority and supports the development of an integrated health and care partnership.
42. The framework for the Better Care Fund derives from the government's mandate to the NHS issued under Section 13A of the NHS Act 2006. The BCF provides a mechanism to promote and strengthen integration of health, social care and housing planning and commissioning. And in this context the use of pooled funding arrangements remains consistent with the development of Integrated Care Systems/Partnerships (ICS/ICP).
43. It brings together ring fenced CCG allocations, and funding paid directly to local government, including IBCF, DFG and winter pressures alongside locally identified budgets into pooled budget arrangements.
44. The BCF Plan aligns with a number of strategic plans including the:
 - The IOW Health and Wellbeing Strategy – in particular the BCF aligns with the Living Well and Ageing Well domains.
 - The IOW Health and Care Plan – the BCF aligns with the focus on prevention, integration and care close to home

- The ASC Care Closer to Home Strategy (CCtH) -which also aligns to the Councils corporate plan. The BCF provides a vehicle for delivery of CCtH core delivery and enabling pillars including: promoting wellbeing, improving wellbeing and protecting wellbeing as well as integration and partnerships and commissioning for value and impact.
- The HIOW Partnership of CCGs Delivery Plan
- The System Winter Resilience Plan
- The Extra Care Strategy
- The Disabled Facilities Grant Plan
- NHS Long Term Plan
- High Impact Change Model

45. In addition, it should be noted that any proposals under a revised Health and Social Care Bill may impact on the Better Care Fund, and councils and CCG staff will address any impact once it is known.

Risk

46. There is significant risk to both the IW Council, the CCG, and the wider system if the BCF Plan and submission for 2021/2022 is not agreed and subsequently approved by regulators:

No.	Risk	Risk	Mitigation
1	Should the system not agree and fail to submit its plan by 16 November 2021, the system will not receive additional funding earmarked for local systems to support ASC. In particular, the Improved Better Care Fund (iBCF) and Disabled Facilities Grant (DFG) continue to be paid to local authorities on the condition that they are pooled locally into the BCF and spent on specific purposes set out in the grant determinations and conditions. The worst-case scenario could see mandatory funding withheld from the system.	R	<ul style="list-style-type: none"> • Extension to initial BCM review deadline from 19 to 26 October, enabling wider feedback window. • HWB agree to receive a BCF narrative that describes what has been achieved, what has changed and what will be different next year - recognising these could be subject to change • HWB agree to receive a refresh existing financial commitment-recognising these could be subject to change.
2	Failure to submit presents a significant reputational risk to the CCG, LA, HWB and wider system. In particular, the BCF planning guidance forms part of the core NHS Operational Planning and Contracting Guidance. CCGs are therefore required to have regard to this guidance by section 14Z11 of the NHS Act 2006. With a view to the wider system; having published a single system Health and Care Plan, that includes a single control total, failing to submit the BCF plan will likely result in external scrutiny from National regulators and further scrutiny of system plans and agreements to develop ICP arrangements.	A	<ul style="list-style-type: none"> • Agree timeline for full review of BCF and S75 in 2021/2022 in preparation of 2022/2023. This will facilitate development of a detailed plan that meets the needs of the Island's population as the system shifts out of response mode to recovery and restoration. Utilisation of this planning period will enable a deployment of resource across partners in a more managed approach which will account for extant and upcoming pressures which may arise from ongoing recovery from the pandemic.
3	Failure to agree financial contributions within the BCF plan may result in the requirement to undertake a significant BCF and S75 refresh placing additional resource strain upon the	A	<ul style="list-style-type: none"> • For the current plan, capacity

	system.		<p>from within the Council and CCG has been identified to co-ordinate the 2021/2022 refresh. Weekly planning meetings in place and allocated work now in progress.</p> <ul style="list-style-type: none"> • Where the HWB does not meet prior to submission deadline a virtual HWB sign-off process prior to the final deadline is proposed.
4	<p>HWB governance arrangements and decision making does not support effective BCF development and delivery.</p> <p>Where there are concerns over the submission, performance or compliance with BCF requirements the Better Care Fund Support team (BCST) and Better Care Manager (BCM) will take action that could range from informal support, advice and guidance moving through formalized support and formal regional meetings up to formal escalation panels that involve NHS England and LGA.</p> <p>In the event of national escalation, under the NHS Act 2006 NHS England does have the ability to direct the use of CCG funds where an area fails to meet the BCF conditions.</p> <p>The escalation panel may also make recommendation that an area should amend plans that relate to spending of the DFG, Winter pressures or IBCF- however this money is not subject to NHS E powers. However, if there is not agreement and a plan cannot be agreed Departments can recover grant payments or withhold future funding.</p>	A	<ul style="list-style-type: none"> • HWB to agree BCF management and decision-making infrastructure as part of the Health and Care Plan implementation. • To engage with the local BCM for guidance prior to final submission. • To have cross-organisational contribution and review of the plan prior to submission.
5	Scale of system financial challenge threatens BCF development and delivery	R	<ul style="list-style-type: none"> • HWB agree the process for investment and disinvestment decisions • Review the current pooled budgets • Ensure that BCF schemes are aligned to sustainability plan priorities
6	Winter pressures money are to be paid to local government via a section 31 grant, to be used to alleviate pressures on the NHS over	A	<ul style="list-style-type: none"> • This is a recurrent approach to Winter pressure funding with

	winter and to ensure it is pooled in to the BCF. No further resources are currently available to the system to support winter resilience.		well-established planning and delivery mechanisms; which would potentially downgrade this risk to green. However, maintained at a higher escalation level as winter planning and response will also need to factor in any changes arising from shifts in the pandemic.
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Financial Impact

47. For 2021/2022 and 2022/2023 Finance leads in the Council and CCG will work jointly with BCF scheme leads to review all funding allocations. The approach and detail will be worked up and agreed through the System Finance Group. This will also provide focus in ensuring any queries in relation to the level of mandated contribution by the CCG are resolved.
48. The total value of the Better Care Fund in 2021/2022 is £52,794,044. This value is made up of both mandated and discretionary funding contributions from both the CCG of £42,004,343 and the council £10,789,701. (see para. 12-15 above).
49. From this allocation, services are then agreed in line with the BCF guidance and funding transferred to either the CCG or council based on who commissions the service. The table below shows the schemes within the BCF and where the money has been transferred to provide the services and contractual payment commitments against each of the identified schemes:

Scheme	BCF FUNDING ALLOCATED TO EACH PARTNER		
	CCG £'000	IWC £'000	Total £'000
1) Locality / Community Model	7,621	67	7,688
2) Hospital to Home	69	1,261	1,330
3) Carers	-	577	577
4) Voluntary Community Sector	-	863	863
5) Provider Sector	-	80	80
6) Promoting Independence	44	3,250	3,295
7) Rehabilitation, Reablement and Recovery	5,004	5,612	10,617
8) Regaining Independence - Hospital Discharge Scheme	-	4,317	4,317
9) Integrated Mental Health Provision	2,246	147	2,393

10) Learning Disability Services	-	1,070	1,070
11) Continuing Health Care and Funded Nursing Care	15,573	-	15,573
12) Care Act and Infrastructure	-	4,991	4,991
Total BCF funding shared between CCG/IWC to fund scheme contracts	30,558	22,236	52,794
Percentage of share	58%	42%	100%

* *Hospital Discharge Schemes are still under review and subject to change following government decision on any ongoing funding.*

50. The BCF template includes the summary of the expected income and expenditure that will form the basis of the Section 75 Finances for 2021/2022. It outlines the quantum of financial resource currently included on a scheme-by-scheme basis, including reference to both the mandated CCG contributions, Mandated Local Authority elements and additional local investments and pooled funds.
51. The Hampshire Southampton and Isle of Wight CCG has approved the Isle of Wight local financial planning approach and are satisfied that all mandatory contributions have been refreshed and uplifted in line with the National technical guidance.
52. The BCF plan reflects an iterative journey over several years, with some specific agreements of where funding is assigned dating back as far as 2012.
53. The Section 75 agreement sets out the arrangements for financial risk sharing between the CCG and the Council should the aligned budget over/underspend. The current provisions of the S75 agreement provide that each organisation is responsible for the over/underspend relating to its own functions; therefore, the Better Care Fund does not increase the financial risk to either organisation.

Involvement and Consultation

54. The BCF planning template and associated Section 75 agreement is developed and updated by the CCG and IW Council; processes are in place to ensure that the current submission is reflective of input from both bodies.
55. Due to the short timeframe for completion, a refreshed engagement process with wider stakeholders is not being undertaken and the central team have advised that previous engagement feedback may be incorporate in lieu. As wider stakeholders have been strongly involved in the development of the Health and Care Plan and previous BCF planning, feedback is being drawn from these sources to inform the current submission.
56. The oversight of the BCF S75 for the Island is in collaboration between the IW CCG and council commissioners. This is overseen by both the Managing Director of the IW CCG and Assistant Director for Commissioning (IWC). Proposals to use the BCF funds must be submitted to both the ICP and then in turn via the HWB for formal sign off and approval. This is in addition to the sovereign organisations' internal governance routes (e.g. CCG Partnership Board and councils Cabinet). Monitoring of BCF spend is provided via a quarterly monitoring reports for S75 aligned budget use.

57. Although required to review and revise the S75 agreement around the agreed priorities, it is not necessary to create a complete re-write of the S75 document every year to form a new agreement. In considering revisions:
- It will be reviewed to reflect any specific changes and will maintain the financial risk sharing between the CCG and council should the pooled budget overspend or underspend;
 - It will clarify the transfer of the CCG minimum mandated contribution to Adult Social Care and the agreed way in which that will be spent;
 - It will seek to simplify the S75 Agreement to reflect new governance and aspirations based on emerging ICP place principles, priorities, and fit with both NHS Integrated Care Systems and Local Government direction of travel.
 - It continues to maintain the spirit of the original S75 rather than seeking to start a new agreement that would take considerable time and resource to produce a very large agreement document from scratch with little change to the needs of the agreement.

Decisions, recommendations and any options

58. To note the proposals and:

- a) APPROVE the draft BCF Plan 2021/2022 as appended to this report, in alignment with the Better Care Fund Programme intentions noting the need for a virtual sign-off prior to 7 December 2021.
- b) APPROVE the undertaking of a review and refresh of BCF schemes during 2021/22 in advance of the 2022/23 submission.

Appendices

1. BCF Planning submission – initial draft as being submitted to the regional Better Care Fund Manager for comments and recommendations.

ALISON SMITH
Managing Director, IW CCG

LAURA GAUDION
*Interim Director of Adult Social Care, IW
Council*

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ISLE OF WIGHT SAFEGUARDING CHILDREN PARTNERSHIP
Annual Report 2020-21



FOREWORD

It is my pleasure to welcome you to the Isle of Wight Safeguarding Children Partnership's (IOWSCP) Annual Report for 2020/2021, which covers the performance year to the 31st March 2021.

Whilst the year has undoubtedly been dominated by the COVID-19 pandemic and the unique challenges this has presented, day-to-day safeguarding issues and the wellbeing of children and young people have remained at the forefront of our minds and efforts. Colleagues from across the Partnership, led by the local authority, the police and health in their role as the Safeguarding Partners, came together to respond to these new challenges whilst maintaining essential service provision with energy, innovation, and a collective determination to protect some of the most vulnerable members of our communities.

In my role as the Independent Chair and Scrutineer, I saw first-hand a fierce commitment to safeguarding, sharing timely and relevant information, agreeing priorities, maintaining a necessary line of sight, and taking effective action.

We have learned many important lessons and will continue to work together to address areas where we can improve; tackling neglect, identifying at the earliest opportunity those in need of help, and making sure children and families are at the heart of everything we do.

The Safeguarding Partners were visible and active in their respective and joint roles throughout 2020/21 maintaining an effective line of sight to our most vulnerable children, and the IOWSCP remains committed to children and young people on the Isle of Wight.



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A handwritten signature in black ink, appearing to read 'Derek Benson'.

Derek Benson



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ABOUT THE ANNUAL REPORT

INTRODUCTION

This Annual Report is published as part of Isle of Wight Safeguarding Children Partnership's statutory responsibilities under [Working Together to Safeguard Children 2018](#). It covers the reporting period 1st April 2020 to 31st March 2021, and details the Partnerships achievements collected from the activity of the subgroups, training evaluations, learning from the multi-agency case reviews and audits, single agency audits, as well as assurance and monitoring activities.

The 2020/21 Annual Report re-affirms the partnership commitment to working collaboratively across organisational boundaries and in partnership with other public sector bodies, voluntary and community sector organisations to safeguard, promote and improve the welfare and outcomes for children and families. Our vision is to protect children from harm and the risk of being harmed and support their recovery from harmful situations. Drawing on the reflective, proactive, and innovative practice of the children's workforce across the Isle of Wight, the IOWSCP continues to develop and improve services through effective safeguarding, learning and development.

The Annual Report evidences how effective multi-agency safeguarding arrangements have promoted safeguarding the Isle of Wight's children with a focus on impact, evidence, assurance, and learning, as agreed by the Isle of Wight Safeguarding Children Partnership and scrutinised by the Independent Chair.

THE INDEPENDENT CHAIR

The role of Independent Chair is to provide critical challenge and seek assurance in judging the effectiveness of multi-agency arrangements to safeguard and promote the welfare of children on the IOW, including arrangements to identify and review serious child safeguarding cases.

The Independent Chair is: Objective, acts as a constructive critical friend and promotes reflection to drive continuous improvement.

The Independent Chair functions in 2020/21:

- Chair of the Partnership Board meetings, working closely with the three Safeguarding Partners (who hold statutory responsibilities for the co-ordination of multi-agency working).
- Sought assurance in judging the effectiveness of the new multi-agency arrangements to safeguard and promote the welfare of all children on the IOW.
- Scrutinised whether the three Safeguarding Partners were fulfilling their statutory obligations and the effectiveness of safeguarding arrangements.
- Acted as a critical friend, in order to scrutinise performance management, supporting audits and ensured quality assurance mechanisms were effective.
- Supported and encouraged an open culture of mutual and constructive challenge.
- Arbitrated when there was disagreement between the three statutory Safeguarding Partners.
- Chaired the section 11 Challenge Panel process and facilitated mutual challenge across the Partnership.
- Worked with the statutory partners in scrutinising progress made against the Business Plan.
- Reviewed the impact of the IOWSCP in 2020/21 through reviewing the Business Plan outcome measures.
- Maintained oversight and connectivity of the subgroup work-plans, offering constructive challenge, and sought assurance that agreed subgroup work-plans were being progressed.
- Supported the three Safeguarding Partners to fulfil their statutory objectives, to enable the Partnership to identify and measure its success and impact.
- Ensured that arrangements had a positive impact on the lives of children, multi-agency working and frontline practice during 2020/21.

THE STRATEGIC LEADERSHIP GROUP

Isle of Wight Council Children's Services, Hampshire Constabulary, and Isle of Wight Commissioning Group (CCG) form the three safeguarding partners, providing strategic leadership and oversight of the IOWSCP.

Members of the partnership hold a strategic role within their organisations and are able to speak with authority, commit to matters of policy and hold their organisation to account. All three lead safeguarding partners have equal and joint responsibility for local safeguarding arrangements.

The multi-agency partnership on the IOW is mature, robust, and effective, with a clear commitment from senior leaders to review and improve some of our ways of working, building on strengths within the strong partnership relationships that exist.

The Annual Report provides evidence of the partnership's response to COVID-19 during 2020/21. Despite the challenges, the partners adapted quickly to the national situation, responding effectively to local need and risk. Strong strategic leadership ensured rapid and decisive action to safeguard Island children and those at risk of harm or abuse and ensure access to the most appropriate support services to keep them safe. Safeguarding remained a firm priority for all partner agencies during 2020/21, demonstrated by consistently good levels of attendance and effective engagement in subgroups, and a strong culture of constructive challenge and debate. Key to our success has been a focus on the different safeguarding contexts that exist across the IOW, with emphasis being placed on children being safeguarded in their lives at home, in their friendship circles, in health, education and in the public spaces that they occupy both off and online.

The Annual Report reflects the IOWSCP vision and partnership approach with:

- Child-focussed leadership which is effective and ambitious across the partnership
- Agencies that understand their roles and actively engage in multi-agency safeguarding arrangements
- An environment in which multi-agency practice can flourish
- Effective information sharing systems which professionals are confident and knowledgeable about
- Strong support and healthy challenge within the multi-agency system
- Creating a culture of continuous improvement and learning

IOW CONTEXTUAL AND KEY SAFEGUARDING DATA

There is a well-established and well-regarded front door process in Hampshire (which provides this function of behalf of Isle of Wight Children's Services) which has been subject to repeated inspection since its inception in 2014, including most recently in April 2019. Decision making across both the Children's Reception Team (CRT) and Multi-Agency Safeguarding Hub (MASH) is regularly reviewed and monitored, and this area of work is subject to regular multi-agency audits. The application of threshold across both teams is consistently applied, and was confirmed during both the recent Ofsted inspections, a Peer Review in February 2020 and multi-agency audits completed in August 2020 by the IOWSCP.





IOW covers 146 miles



Population: **141,771**



60% of the IOW is rural land

53.9% of the population live in 6 main towns: Newport, Ryde, Sandown, Shanklin, Cowes and East Cowes



28.3% of residents are over 65 years

There are a total of **24,673 children** on the IOW (ONS Mid 2020 estimates)



On the IOW there are:

- **7,649** 0 - 5 year olds
- **8,544** 6 - 11 year olds
- **7,212** 12 - 16 year olds
- **2,753** 17 -18 year olds

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17,817 children attending IOW schools

526 children Electively Home Educated (EHE) end of June 2021

- IOW schools*:**
- 39** Primary schools
 - 6** Secondary schools
 - 3** Through schools (2 private)
 - 3** Special schools
 - 50** Early Years Settings

4.6% of pupils on IOW with SEN or Educational, Health and Care Plan (EHCP) compared to **3.3%** England average

*www.compare-school-performance.service.gov.uk

387 Early Help assessments were completed in 2020/21



472.1 per 10,000 children were a Child in Need (CIN) on the IOW at the end of March 2020 compared to **304.4** per 10,000 in the South East

50.9 children per 10,000 were subject to a Child Protection Plan (CPP) in 2020 on the IOW, compared to **42.8** per 10,000 in England



107 children per 10,000 were Looked After Children (LAC) at the end of March 2020 on the IOW, compared to **53** per 10,000 in the South East

The IOW was ranked **96** out of **317** Local Authority areas for average rank, in 2019 on the indices of multiple deprivation



Free school meal entitlement: **18.1%** of primary-aged children **15.6%** of secondary-aged children

Children with English as an additional language: **3.3%** of Primary children **3.4%** of secondary children



12 areas on the IOW are among the 20% most deprived in the country



IOW CONTEXTUAL AND KEY SAFEGUARDING DATA

The IOW has had a consistently higher rate of referrals to the Children’s Reception Team (CRT) when compared to statistical neighbours and the England average. This is mainly due to the way different authorities count referrals. It is also reflective of the level of awareness of safeguarding amongst partner agencies, and socio-economic profile of the Island.

After a significant increase in referrals in quarter two (a trend seen across the county due to the relaxation of lockdown in 2020), quarters three and four saw a return to the previous levels of referrals, although it should be highlighted that the level of complexity of cases was reported to be higher than average by social care staff.

Front door data	2020/21	2019/20		
Total number of CRT contacts	12,556	13,097	A decrease of 541	↓
Contacts progress to referral	40.62%	37.77%	An increase of 2.85%	↑
Child In Need (CIN) Referrals	5,575	5,279	An increase of 296	↑
% of re-referrals into CRT MASH	36.85%	35.50%	An increase of 1.35%	↑
Assessments completed within timescales	93.8%	92.4%	An increase of 1.4%	↑
ICPCs* within timescales	79.45%	84.08%	A decrease of 4.63%	↓
No of children subject to Early Help at year end	417	458	A decrease of 41	↓

*Initial Child Protection Conference

The number of children in need has increased since last year, the rate (per 10,000) is higher on the IOW compared to the South East and statistical neighbour average. It is mandatory local practice for all cases stepping down from child protection planning to receive ongoing support through child in need planning for a minimum of three months to ensure that support and progress is sustained. CSC believe this is good practice.

Child Protection (CP) Plans	2020/2021	2019/20
No of children open to social care:	1343	1260
No of children subject to CP plans: 48% increase in CP plans 43% increase in care proceedings since pandemic started	188	126
Unborn babies subject to CP plans at year end:	9	0
% of RCPCs** conducted in time frames:	98.3%	99%

** Repeat Child Protection Conference

Prior to March 2020 the number of children subject to CP Plans had incrementally reduced over a 3-year period. Since national lockdown in March 2020 the number of children subject to a CP Plan has slowly increased. At the beginning of March 2020, 120 children were subject to CP Plans. At the end of March 2021, 188 children were subject to CP Plans.

The data for current CP Plans lasting two years or more is lower than South East averages and indicates that services continue to intervene effectively in the lives of children at risk to support families to make the necessary changes to reduce those risks.

Categories of registration for CP Plans	2020/21	2019/20
Emotional abuse	26.6%	10.3%
Physical abuse	2.7%	2.4%
Sexual abuse	7.4%	7.1%
Neglect	63.3%	80.2%
Categories of registration for CP plan where Domestic Abuse was a secondary factor	2020/21	2019/20
Domestic Abuse (Emotional)	14.9%	3.2%
Domestic Abuse (Physical)	2.7%	2.4%
Domestic Abuse (Neglect)	14.9%	15.9%

The rate of children in care per 10,000 remains above the national average and statistical neighbours. This is due to a number of factors including the legacy of historically inadequate services and the socio-economic conditions on the Island. The age profile of children in care evidences a higher than average number of adolescents. As highlighted, this is reflective of the legacy of previous services, with a cohort of children who came into care following the strategic partnership with Hampshire and appropriate thresholds being applied, coupled with a number of adolescents who have developed complex needs as a result of no service being provided to the family in the child's early years.



Number of looked after children:

272 in 2020/21

266 in 2019/20



% of looked after children reviews completed in time frames:

89.2% in 2020/21

90% in 2019/20



% of health reviews completed in time frames:

81.9% in 2020/21

84.1% in 2019/20



% of vaccinations completed in time frames:

84.4% in 2020/21

85.1% in 2019/20



% of dental checks completed in time frames:

24.5% in 2020/21

77.1% in 2019/20

Child Exploitation	2020/21	2019/20
Total no of children assessed as at risk of Child	TBC	TBC
Total no of children assessed as at risk of Child	TBC	TBC
Total number of missing episodes:	636	416
Total number of children who went missing:	127	110
Total number of children missing from care:	48	40
Local Authority Designated Officer (LADO)		
Local Authority Designated Officer (LADO)	168	191
LADO referrals that met criteria:	86	73



THE THREE SAFEGUARDING PARTNERS ARE ACTIVELY INVOLVED IN STRATEGIC PLANNING AND IMPLEMENTATION

FUNDING

Working Together 2018 states that the three safeguarding partners should agree the level of funding secured from each partner (which should be equitable and proportionate), and any contributions from each relevant agency, to support the local arrangements.

The funding arrangements for 2020/21 included contributions by partner organisations who, in addition provide a variety of resources, such as staff time for training, subgroup attendance and other development activity.

The funding arrangements are regularly reviewed by the three safeguarding partners. Accommodation, legal and communications services are provided by the Isle of Wight Council.

The financial challenge for many frontline services across the safeguarding partnership is one of increasing demand, with reducing income from central government. The IOWSCP statutory and non-statutory partners have expressed their commitment to cross-agency support and continued to demonstrate a shared responsibility to safeguarding during 2020/21 ensuring that the IOW's innovative and robust partnership is sustained.

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INCOME 2020-21	
Total partner contributions for 2020/21	£170,575
 IWC	£111,323
 CCG	£40,576
 Hampshire Police	£13,616
 NPS	£415
 CRC	£415
Reserves	£4,230

TOTAL EXPENDITURE 2020-21 £146,616	
 Staffing costs	£117,511
 Child Death Overview Panel (CDOP)	£8,550
 Venues & meetings	-£1,296
 Running costs / Miscellaneous	£4,655
 Serious Case Reviews (SCRs) / Local Child Safeguarding Practice Reviews (LCSPRs)	£2,750
 Training	£6,514
 Independent Chair	£7,932

ISLE OF WIGHT SAFEGUARDING CHILDREN PARTNERSHIP BUSINESS PLAN

The IOWSCP Business Plan forms the basis of partnership work for 2020-2023. It sets out the strategic commitment of the partnership to embed good practice making its vision a reality. The IOWSCP acknowledges that for services to be effective, they should be based on a clear understanding of the needs and views of children and their families.

Multi-agency activity within our groups promotes work to drive a range of improvements to both the safety and welfare of children to reduce risk factors, while increasing protective barriers. Subgroups have a clear remit and a transparent mechanism for reporting to the IOWSCP, and terms of reference and membership are reviewed annually.

Priorities remain flexible for the duration of the Business Plan, and the detail is set out in subgroups and task and finish group plans. The objectives in the Business Plan cover complex areas of children's safeguarding which require a deeper collective understanding to inform a targeted and coordinated partnership response to achieve real impact on the lives of children living on the IOW. These objectives have been identified from themes arising from the partnership's existing scrutiny and quality assurance programmes, as well as findings from local and national learning reviews. The strategic objectives will remain the same for the three-year period of the plan but the activities that sit underneath them will be reviewed and refreshed annually during that period.

PART A OF THE BUSINESS PLAN

PRIORITY: SAFEGUARDING ADOLESCENTS

Actions Taken: The purpose of the Safeguarding Adolescents Task and Finish Group is to explore partnership understanding, responses and provision for safeguarding adolescent children, identifying gaps and strengths and utilising them to develop a partnership response aimed at ensuring adolescent children and their families receive the right level of support and intervention, at the right time, by skilled professionals, and develop an Adolescent Safeguarding Strategy.

The group reviewed understanding of risks, shared examples of good practice from other areas, identified gaps in provision, and workforce training or information needs, and undertook a survey to find out what people thought.

A total of 547 surveys were completed, 203 by children, 157 by parents/carers and 187 professionals across Hampshire (Hants) and IOW. Children talked about the main issues they had and cited:

School workloads, exam stress, peer achievements and keeping up, image pressure, social expectations, and many sited social media. Adolescent mental health came out as the key priority for action.

Outcomes and Impact: Audits and surveys completed as part of the development of the Adolescent Safeguarding Strategy has evidenced that the children's workforce across the IOW and Hampshire SCPs have a good understanding of the range of complex and inter-related risks that impact on safeguarding adolescents.

One of the survey comments was: *"Please don't treat us like some mystical other group. Yes, we're younger and can be very immature at times, but being treated like slightly larger children or patronised doesn't exactly provide a motivation to be mature"*

This sums up the complexity of adolescents and the need to consider our responses to and support for them.

Areas for further development in 2021/22: The Adolescent Safeguarding Strategy and Toolkit will be completed and launched by December 2021. The Adult and Children's Transitions Group set up across the HIPS areas will explore transitional issues and inform the Strategy and Toolkit, the task and finish group will identify further training needs for the workforce to inform the learning needs analysis process and training programme development.

Further consultation will be needed to find out how useful the strategy and materials for professionals are and to develop the toolkit for Children and parents/carers with more interactive materials.



PRIORITY: RESPONDING TO NEGLECT

Actions Taken: Joint IOWSCP/Hampshire Safeguarding Children Partnership (HSCP) multi-agency Neglect Task and Finish Group was re-established to review and update the Neglect Strategy and online toolkit.

The Neglect Strategy and Toolkit was re-launched in February 2021 with additional practical tools added. IOWSCP Neglect training offer was reviewed and now includes scenario-based activities and materials.

Outcomes and Impact: New policy and materials well received and staff report using the ideas in practice. Staff more aware of types of neglect and the impact on children and effective responses and interventions. Agencies report embedding the strategy across their agencies.

Areas for further development in 2021/22: Once materials are embedded the Task and Finish Group will evaluate and measure the impact of the revised Neglect Strategy, toolkit, and training offer once fully delivered.

**PRIORITY: TO UNDERSTAND AND REDUCE THE RATES OF IOW CHILDREN WHO BECOME 'LOOKED AFTER'**

Actions Taken: Multi-agency working group was established in order to better understand children on the IOW who are currently in the care of the Local Authority and those who are likely to become looked after.

The group considered common factors associated with this group of children including local, demographics and socio-economic factors. They mapped services that the children and their families received from IOW agencies to consider other opportunities for innovative and pro-active partnership work to intervene and support families earlier. Agencies were consulted to seek their views on the current position, what the challenges are, how we might work differently, and what we need to do next. The IOWSCP audited case files to examine the journey of the child into care and the group created a plan to identify actions needed.

Outcomes and Impact: The consultation, exploration and audit work provided fresh eyes on the issue from a multi-agency perspective and this will be taken forward at a strategic level through the Children's Trust using the multi-agency strengths based and family focussed approach to enable children to safely remain with their families.

PART B OF THE BUSINESS PLAN**PRIORITY: EVALUATE THE IMPACT OF IOWSCP INITIATIVES AND PROGRAMMES****Areas for further development in 2021/22:**

In collaboration with HIPS LSCP's, evaluate the impact of the Lurking Trolls online safety campaign once launched and embedded.

Evaluate the understanding and application of the updated Unborn Baby Protocol post implementation.

Conduct a first-phase evaluation of the IOW Every Sleep Counts campaign by the end of the reporting period and undertake a professional and public evaluation of impact of the ICON programme on the IOW.

PRIORITY: EVERY SLEEP COUNTS CAMPAIGN

Action Taken: This work was first generated in Hampshire SCP and then IOWSCP

joined the developments. Every Sleep Matters material was launched at the IOWSCP Conference in October 2019 and has been rolled out across agencies in 2020.

Outcomes and Impact: Family Centres, Midwives and Health Visitors, Early Help providers and other agencies are now using the materials in their work with families both pre and post birth.

Materials reviewed in the light of the National Panel's 'Out of Routine' report and Public Health involvement in promoting safe sleep messaging and issues of overlay.

Areas for further development in 2021/22: Further embed the materials and messaging in practice. Undertake a first phase evaluation of Every Sleep Counts campaign and materials and the impact they are having on professionals and families in keeping babies safe. In addition, the Safeguarding Infant training will continue to be rolled out.

PART B OF THE BUSINESS PLAN

PRIORITY: IMPROVED AND EFFECTIVE DISSEMINATION AND COMMUNICATION CHANNELS ACROSS IOWSCP SAFEGUARDING PARTNERS AND RELEVANT AGENCIES

Actions Taken: IOWSCP published its Learning and Improvement Framework and Communications Strategy outlining use of social media and how information and initiatives will be shared with agencies and frontline professionals. IOWSCP has worked with communications colleagues in partner agencies to develop communication plans for core initiatives and key information dissemination to professionals.

Outcomes and Impact: Both the Learning and Improvement Framework and Communications Strategy have been used by the SCP in its work, providing clarity of approach to be used. Work with IOW Council Comms team on the launch of the Lurking Trolls campaign has been well organised and thorough which should lead to a well-publicised launch.

Areas for further development in 2021/22: IOWSCP member agencies to provide evidence how they have incorporated learning from IOWSCP activity into messages and policy for their workforce and report on the impact to the IOWSCP.

PRIORITY: DARE TO SHARE - MULTI-AGENCY INFORMATION SHARING. TO BE UNDERTAKEN IN PARTNERSHIP WITH HAMPSHIRE, PORTSMOUTH AND SOUTHAMPTON (HIPS) LSCPS

Action Taken: IOWSCP participated in several HIPS 'Dare to Share' meetings to promote effective and timely information sharing across agencies. CPI information sharing has improved, and systems are in place via the HIPS Exploitation Group and local Delivery groups to monitor CPI completion. Staff training is in place and being delivered across the HIPS Area. Information Sharing Agreements are being updated to promote more robust information sharing between agencies.

Outcomes and Impact: The number of completed CPI forms is slowly rising on the IOW and staff awareness activity and CPI training has meant a wider range of agencies are sharing information and know how to share information with police.

Areas for further development in 2021/22: Completion and publication of the updated Information Sharing Agreement. CPI training to be rolled out.

PRIORITY: EFFECTIVE SAFEGUARDING OF UNBORN AND NEWLY BORN BABIES

Action Taken: IOWSCP responded to the local findings of the unborn/newborn safeguarding baby audit to inform frontline practice in member agencies. IOWSCP representatives from Health, Children's Social Care and the Police worked with a broader HIPS Working Group and action groups led by key staff from the Health economy, contributed to the development of a fully revised HIPS Unborn Baby Protocol (UBB) and toolkits which were launched in March 2021 (see page 38) across the children's workforce. A wider Safeguarding Infants training package was developed to be rolled out in 2021.

Outcomes and Impact: The launch event was well-attended, and the revised materials are very clear and improved and available on the [IOWSCP website](#). Feedback from front line staff has been very positive and the PQA data set and commentary demonstrates good use of the protocol. Social care staff have adopted a new approach to working with babies and families referred under the UBB Protocol to ensure additional support is available to this vulnerable group of children.

Areas for further development in 2021/22: IOWSCP to evaluate understanding and application of the updated Protocol, processes and toolkit via a staff survey, an IOWSCP case file audit and examination of data will be undertaken. Safeguarding Infants multi-agency training will be rolled out.



THE HAMPSHIRE, ISLE OF WIGHT, PORTSMOUTH AND SOUTHAMPTON (HIPS) PARTNERSHIP

The IOW statutory safeguarding partners work in partnership with the statutory safeguarding partners for Hampshire, Portsmouth, and Southampton and are known locally as the 'HIPS' area.

It is acknowledged that for many agencies and professionals who work across more than one of the local authority geographical areas, the HIPS partnership provides greater joined-up working on strategic issues and common themes. Given that each local area was keen to retain some degree of distinct local arrangements, partners agreed to form the HIPS Executive Group, supported by some specific four-area subgroups, to work alongside the four local partnerships that benefit all four areas through:

- Achieving clarity of purpose
- Greater efficiency/less duplication
- Developing strategic priorities
- Making the connection between effective learning and practice and quality assurance activity.
- Making effective links to other partnerships; to and from the IOWSCP to organisations

THIS HIPS EXECUTIVE

The HIPS Executive membership consists of the lead safeguarding partners across Hampshire, Isle of Wight, Portsmouth, Southampton plus the Independent Chair. The role of the HIPS Executive Group is to provide strategic direction, identify shared safeguarding priorities and opportunities across the four areas and coordinate safeguarding activity across the four HIPS areas. The HIPS Executive has convened four standing subgroups where there is a clear benefit to coordinating specific areas of business across the HIPS areas:

HIPS Health Group – This group co-ordinates safeguarding business across the HIPS wide health economy. It takes the lead on the promotion and implementation of any best practice and learning for the health sector. The work of this group feeds into the local IOW Health Subgroup.

HIPS Strategic Child Exploitation Group – The purpose of this group is to develop a shared understanding of the threat and response to child exploitation, including patterns of activity that may reflect the organised exploitation of children. Identifying risks requiring strategic intervention. The group aims to drive forward a collective response to child exploitation through a tasking system that draws

upon the specialist skills and experience of staff across the HIPS area. Vulnerabilities and risks associated with children who go missing are understood and incorporated within a consistent and robust multi-agency response. Operational requirements are managed through existing local exploitation Delivery Group and METRAC structures.

HIPS Policies and Procedures Group – This group develops and reviews all common multi-agency safeguarding policies and procedures that inform single-agency policy and practice across the HIPS area and maintains a shared website.

Child Death Overview Panel (CDOP) – This Group performs the functions of the CDOP as outlined in Working Together 2018. The key functions of a CDOP are to:

- Review all child deaths, excluding those babies who are stillborn and planned terminations of pregnancy carried out within the law.
- Determine whether the death was preventable (if there were modifiable factors which may have contributed to the death).
- Decide what, if any, actions could be taken to prevent such deaths happening in the future.
- Identify patterns or trends in local data and report these to the Safeguarding Partnerships.
- Refer cases to the SCP Chairs where there is suspicion that neglect, or abuse may have been a factor in the child's death. In such cases a Local Child Safeguarding Practice Review (LCSPR) may be required.
- Agree local procedures for responding to unexpected child deaths.

The HIPS CDOP provides a bi-annual report and thematic CDOP panels outcome reports to the HIPS. It should be noted that governance and reporting functions for this group will transfer to the Pan-Hampshire and Isle of Wight Integrated Care System (ICS) once it is fully established.

REVIEW OF SAFEGUARDING ARRANGEMENTS

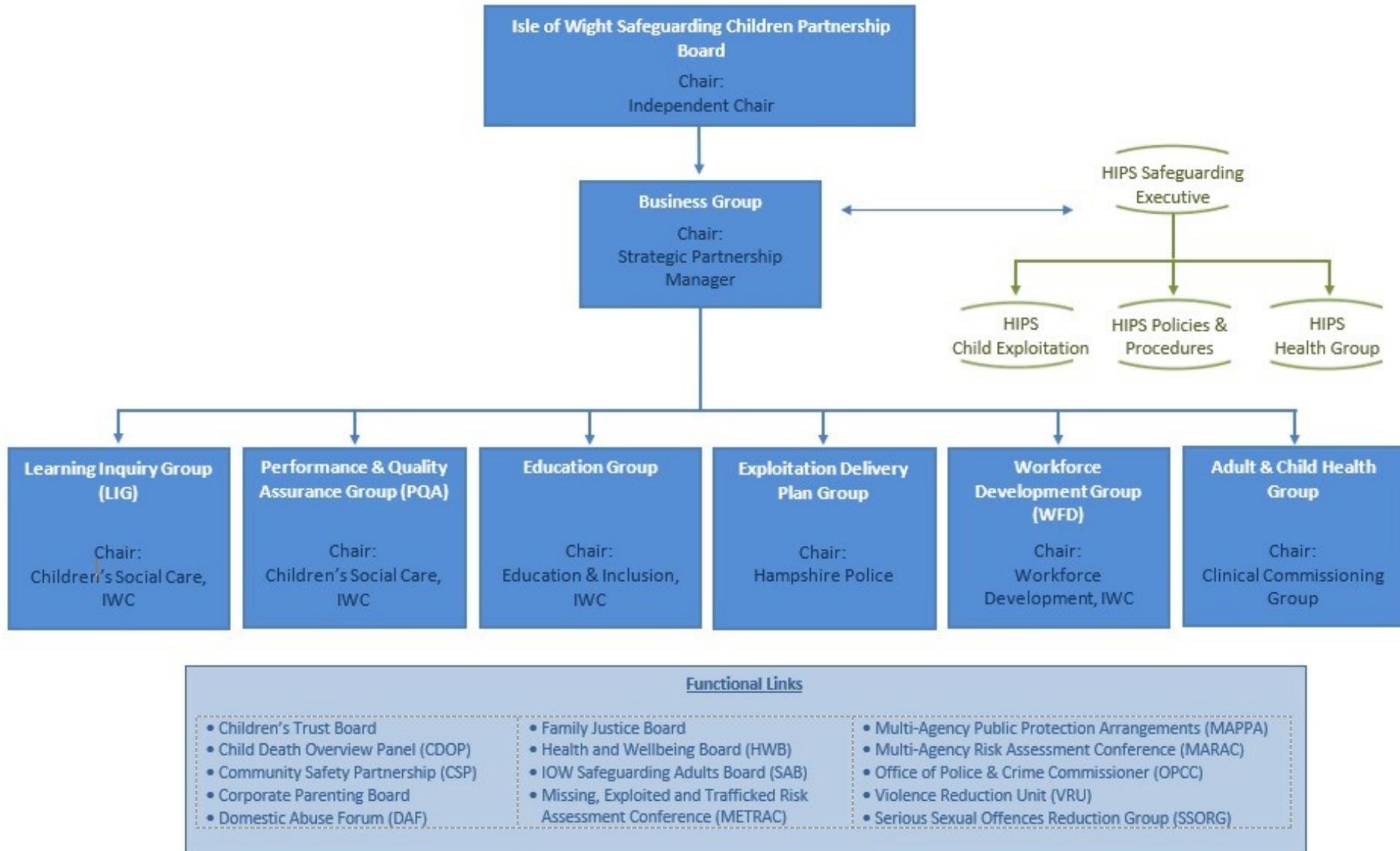
The IOWSCP [Local Safeguarding Arrangements](#) provide details about how support services are arranged to meet the needs of Island children and families, whilst seeking to continually improve our services so that we can offer even better levels of support and assistance in the future.

Other Relevant Agencies listed in this Annual Report as specified in [The Child Safeguarding Practice Review and Relevant Agency \(England\) Regulations 2018](#) support with the implementation of local and national learning, including learning from serious safeguarding incidents.

REPORTING AND SCRUTINY, PARTNERSHIP STRUCTURE AND SUBGROUPS

IOWSCP STRUCTURE:

Page 38



Scrutiny and reporting processes include a regular review of the performance and impact of the IOWSCP. Performance is measured against the Business Plan's outcome measures and is reported to the Business Group and Partnership Board.

The statutory partners are responsible for appointing an Independent Chair who works with the statutory safeguarding partners to offer constructive challenge. The Independent Chair meets with the statutory safeguarding partners four times a year to review the effectiveness of the arrangements and the impact of the IOWSCP. The safeguarding partners are held to further account by the multi-agency Performance and Quality Assurance Group (PQA)

The IOWSCP continues to strengthen the interface between the Partnership and other key strategic forums and SCP subgroups and their chairs.

Partners maintain the IOWSCP Learning & Improvement Framework, scrutinise & challenge performance, identify, disseminate, and embed learning, engage with IOW children and their families, and evaluate SCP impact on outcomes.

HOW THE THREE PARTNERS ARE ASSURED THAT THE ISLE OF WIGHT SAFEGUARDING CHILDREN PARTNERSHIP WORKS EFFECTIVELY ALONGSIDE OTHER PARTNERSHIPS

Links to other Partnerships

The IOWSCP has formal links with other IOW and Pan-Hampshire and strategic partnerships and IOWSCP members often have dual roles and sit on several strategic Partnerships. This means IOWSCP Board members are able to bring information to IOWSCP meetings from other partnerships, enhancing information sharing and planning and maximising opportunities for shared work.

PARTNERSHIP	EXAMPLE OF EFFECTIVE PARTNERSHIP WORKING
Isle of Wight Health and Wellbeing Board	<ul style="list-style-type: none"> A protocol is in place to ensure both groups share commitments in strategy and Business Plans
Isle of Wight Council Corporate Parenting Board	<ul style="list-style-type: none"> A protocol in place to commit both groups to sharing information, reports and aligning work
Isle of Wight Safeguarding Adults Board (SAB)	<ul style="list-style-type: none"> Adult Social Care and SAB Co-ordinator attend IOWSCP meetings and are fully informed of our priorities. They have been very proactive in promoting the Family Approach and jointly delivered Family Approach training with IOWSCP

PARTNERSHIP	EXAMPLE OF EFFECTIVE PARTNERSHIP WORKING
Isle of Wight Safeguarding Adults Board (SAB)	<ul style="list-style-type: none"> Housing services reports and data provided by SAB to PQA and Board Regular liaison meetings between the IOWSCP and SAB Board Chairs and Co-ordinator/Manager facilitate opportunities for joint working and shared understanding of priorities Joint Health and Workforce Development subgroups promote cross Board work and shared areas of focus for training and joint budget expenditure
Domestic Abuse Forum (DAF)	<ul style="list-style-type: none"> The DAF is chaired by an IOWSCP Board Member and there is shared group membership with the IOWSCP which enables effective communication and shared work such as domestic abuse campaigns to raise awareness amongst adults and children ,and of domestic abuse service provision on the IOW Information brought to the Domestic Abuse Forum informs IOWSCP groups, for example the Education subgroup to ensure schools are fully engaged in promoting healthy relationships and local domestic abuse services Capacity Building Funds secured with a review of current arrangements and needs assessment being undertaken by Aurora New Dawn Establishing new Domestic Abuse Local Partnership Board arrangements building on an already active Domestic Abuse Forum
PREVENT Board	<ul style="list-style-type: none"> Shared membership across IOWSCP and PREVENT Board enables good communication IOWSCP advertises PREVENT training and information via website
Violence Reduction Unit (VRU)	<ul style="list-style-type: none"> Joint subgroup membership and good communication Shared work on the exploitation agenda and violence reduction in teenagers for example via the youth allotment work, knife crime inputs into schools

PARTNERSHIP	EXAMPLE OF EFFECTIVE PARTNERSHIP WORKING
Isle of Wight Community Safety Partnership (CSP)	<ul style="list-style-type: none"> Shared membership at groups ensures effective information sharing about SCP and CSP initiatives
Office of the Police and Crime Commissioner (OPCC)	<ul style="list-style-type: none"> SCP attendance at OPCC Youth Commission annual conferences to better understand their planned agenda IOWSCP support work in Primary and Secondary Schools to secure child Cyber Ambassadors via the Education subgroup Joint work with two Cyber Ambassadors to develop online safety training packages for schools to be delivered to families by children
Neighbouring Safeguarding Children and Adult Partnership Chairs	<ul style="list-style-type: none"> Chair of IOWSCP also chairs the three other HIPS Partnerships which facilitates good communication Strategic Partnership Manager and Partnership Manager attend and participate in The Association of Safeguarding Partners (TASP) Webinars and Managers network meetings Chair participation in meetings, National training events and conferences

PARTNERSHIP	EXAMPLE OF EFFECTIVE PARTNERSHIP WORKING
Government Inspection bodies	<ul style="list-style-type: none"> Work with National Panel in 2020 on a National Review into non-accidental injury in under 1's with extensive engagement of partner agencies in the review Partnership kept fully informed of Ofsted and CQC inspection outcomes and any identified strengths, areas for development and risks SCP kept informed of Government reports and incorporate findings into work priorities and planning
Community Action Group	<ul style="list-style-type: none"> Over 1,000 voluntary or community-based groups on the IOW ranging from small groups such as 'Baby Box IOW' to larger charities such as Barnardo's and YMCA. Representatives of the voluntary sector sit on the Partnership Board and subgroups ensuring

FACILITATING SAFEGUARDING CONCERNS TO AND FROM THE IOWSCP

CONCERN RAISED

HIPS Executive Partners raised with each other the risks to children during COVID-19 pandemic and how to manage them.



ACTION TAKEN

Excellent communication was put in place with regular telephone conversations and weekly partnership meetings, including Education, to address key risks raised and ensure service delivery was maintained. Partners broadened information sharing to include identification of vulnerable children and families who required ongoing interventions.

Police recognition of issues with both the quality and quantity of PPN1's submitted to partners by police and raised with the SCP.



The Constabulary has now implemented a number of checks to improve the quality of information and there is a PPN scrutiny panel in place. MASH administrators review PPN1s and raise any issues with police. There is a rolling programme of PPN training in place to ensure quality. This will remain a focus and will be monitored closely.

FACILITATING SAFEGUARDING CONCERNS TO AND FROM THE IOWSCP

CONCERN RAISED

Concern was raised about the 0-19 Health Visiting and School Nursing service changing providers to Solent NHS Trust following a commissioning process and the potential impact for IOW NHS Trust colleagues, including concerns around IT.



ACTION TAKEN

The IOWSCP has ensured that Solent NHS Trust are represented at key meetings and that the Board includes opportunities to seek assurance and provide challenge to health regarding the service. IT systems remain a concern and the IOW NHS Trust have added this to their risk register and are monitoring and reporting progress back to the SCP regularly.

The IOWSCP sought assurance that the 'Was Not Brought' policy was being used in Primary Care (as part of Neglect Strategy).



Leaflets are available for all Primary Care staff and supervision sessions for the Neglect Strategy are being developed to ensure the 'Was Not Brought' policy is fully embedded in practice.

The Hampshire & IOW Fire & Rescue Service submitted a LIG case referral following a fire due to concerns about injuries children sustained and multi-agency working.



The Fire & Rescue lead officer was invited to attend the LIG meeting to present the case. The case was scoped, and single-agency learning was identified, and actions taken as a result.

IOWSCP identified via the Section 11 process an agency did not have safer recruitment training in place for recruiting managers.



A training package has been developed by the service in consultation with their HR Development team and will be rolled out in July 2021 for all recruitment managers.

IOWSCP Partnership Board meetings provide an opportunity to challenge other agencies, for example completion of mandatory training by staff in a member agency, and why this was not at 100%.



The agency was able to provide assurance that numbers were less than 100% due to staff being on maternity or sick leave, or training completed not yet being on the recording system.

An agency were reminded by the IOWSCP of the need to provide performance information.



The performance team assisted, and the agency is now able to provide data as requested.

The increased exposure and risks of online radicalisation during lockdowns was raised at the Education subgroup.



Regulatory Services carried out a refresh of Prevent responsibilities, Channel referral process and online information, tools and e-Learning. This was shared with Designated Safeguarding Leads (DSLs).

The COVID-19 Assurance Framework was discussed at Health Subgroup.



Services provided assurance that children and families continued to be kept safe through robust processes.

THE WIDER SAFEGUARDING PARTNERS ARE ACTIVELY INVOLVED IN SAFEGUARDING CHILDREN

WIDER SAFEGUARDING PARTNERS ARE APPROPRIATELY INFORMED OF AND ENGAGED WITH IOWSCP ARRANGEMENTS AND BUSINESS PLAN PRIORITIES

Agencies on the IOW are all committed to safeguarding children and ensure they are well informed and actively engaged in the work of the Partnership. Here are some examples not already captured in the Business Plan review section.

CHILDREN'S SOCIAL CARE (CSC)



Children's Social Care play a significant role in identifying priorities by leadership in learning reviews. The Learning and Inquiry Group (LIG) is chaired by the Deputy Director of Children's Services and has two representatives attend from Children and Families (C&F) and Education and Improvement (E&I) teams. Every multi-agency review undertaken under the auspices of the LIG, is either led by or supported by a C&F representative.

Impact on safeguarding children:

Child I review was led jointly by C&F and health. This review identified the need for:

- Further awareness raising of the early help offer for adolescents - which the service has gone onto deliver-particularly with secondary schools across the Island.
- A focus on the voice and experience of the child in all work undertaken by partner agencies. This has been continually reinforced by the participation strategy and action plan within Children's Services and is monitored through audits.
- The promotion of a whole family strengths-based approach is a priority for the IOWSCP. This has been the focus of training which has been delivered to all Children and Families staff in 2020-21.

HAMPSHIRE CONSTABULARY



The Business plan and Safeguarding Arrangements documents have informed the priorities of the Child- Centred Policing agenda

Impact on safeguarding children: The constabulary's policies and those of partner agencies are aligned and complement each other providing consistency of message and a child-centred policing approach across Hampshire Constabulary.

ISLE OF WIGHT CCG



Health are core partners at the HIPS Executive Group which enables the CCG to remain abreast of progress with business plans and to support and influence key/priority workstreams.

Impact on safeguarding children: The CCG has facilitated and promoted inter-agency working and has represented the voice of health, influencing, and helping to shape the development of the safeguarding partnership Business Plan in turn providing a better child-centred service to children and families across the IOW.

SOLENT NHS



Submission of Section 11 audit response and associated improvement/action plan.

Impact on safeguarding children: Robust safeguarding arrangements are in place to support staff to fulfil their safeguarding responsibilities, to keep children and families safe from harm.

YOUTH OFFENDING TEAM (YOT)



Attendance at a range of subgroup meetings this has been made easier by the use of MS Teams.

Impact on safeguarding children: Information is disseminated from these forums to the IOW YOT Team Meetings and the Hampshire and IOW All Managers Meetings. One example of this was the review of Case I. This resulted in a focus on consideration and use of Early Help assessments when completing internal case audits at YOT. The Head of Service joined representatives from Health and Childrens Services to complete the Learning Review of the case and the YOT Assistant Team Manager worked with a range of agencies to develop training materials to disseminate learning from the case.

PROBATION



Compiling data for PQA Subgroup in relation to child safeguarding and receiving data from other agencies.

Impact on safeguarding children: Probation regularly provide safeguarding performance information in relation to a number of safeguarding referrals and Safeguarding liaison over the last three years. Performance information supports improvements in service provision ensuring that child safeguarding is at the forefront of practice.

HAMPSHIRE AND IOW FIRE & RESCUE SERVICE (HIWFRS)



The service is included within IOWSCP distribution list and a service representative cascades any updates, reports, surveys and other IOWSCP information across service staff.

Impact on safeguarding children: Relevant IOWSCP information is shared across teams and this has raised the awareness amongst staff of IOWSCP activity and areas for development in their practice.

A HIWFRS Safeguarding Communication strategy has been developed and endorsed by the Service Safeguarding Steering Group. This will enable a more structured and planned approach in how safeguarding information is shared across the Service and a greater awareness for service staff in relation to safeguarding children.

ANGLICAN DIOCESE OF PORTSMOUTH



Attendance and engagement at IOWSCP meetings and the diocesan website 'safeguarding parish resources' contains a link to the IOWSCP.

Impact on safeguarding children: Attendance at meetings has improved relationships and understanding of the Church's role in the community and its responsibility toward safeguarding children on the IOW.

The Business Plan has been shared with the diocesan safeguarding team and disseminated to parishes in training. Having a link to the IOWSCP website identifies to all parishes across the IOWSCP area that the diocese is 'signed up' to the arrangements of the partnership and is open and accountable in its' response to safeguarding children on the IOW. This has raised awareness across the diocese of the responsibility to safeguard children.

REGULATORY SERVICES



Included within the distribution list for the SCP Partnership Newsletter.

Impact on safeguarding children: Broadens the understanding of IOWSCP 'safeguarding' themes and enables updated information on service areas to be circulated amongst staff who are not 'front line' staff but are dealing with members of the public and families on a regularly basis.

OTHER EXAMPLES OF HOW PARTNERS AND RELEVANT AGENCIES HAVE BEEN INVOLVED IN PROGRESSING IOWSCP PRIORITIES AND THE IMPACT THIS HAS HAD ON SAFEGUARDING WITHIN THEIR AGENCY

Safeguarding Missing, Exploited and Trafficked Children

- HIPS area has a robust Child Exploitation Strategy with local delivery plans in place. Actions are identified and added to the Delivery Plan which is reviewed at quarterly delivery group meetings and updated as actions are progressed.
- Missing Exploited and Trafficked Risk Assessment Conference (METRAC) meetings are held monthly chaired by the Police and CSC Operations Service Manager. High-risk children are discussed, and an action plan drawn up.
- Childrens Service's Missing Policy has been re-written to incorporate new processes and return interviews are now more child friendly 'return conversations'. Forms have been aligned to the Hants and IOW Approach. The MET Coordinator has regular overview of data and attends team meetings offering internal training to ensure MET processes. There are 5 volunteers within the Resilience and Families Team (RAFT) trained to offer return conversations in a timelier way.
- A HIPS Missing task and finish group was set up with a focus on missing children who are looked after, as well as identifying training gaps, policy development or revisions required.
- A survey on use of the CERAF was completed across the HIPS area and work has begun to fully embed use of the CERAF to assess risks of exploitation.
- A new HIPS Missing, Exploited, and Trafficked course has been developed and will be rolled out in the Summer of 2021.
- Police commissioned the Missing Persons charity to review how return interviews and missing persons investigations were handled. This resulted in a clear improvement plan and the results were shared with the IOWSCP.

Impact:

There is a clear strategic direction for dealing with child exploitation through the HIPS Strategic group with a strong chair.

Local delivery plans are evolving and ensure co-ordinated approaches and that multi-agency activity links to the strategic aims. Agencies work well together and are supportive and progress plan priorities.

Responding to Child Sexual Abuse (CSA)

The Child Sexual Abuse Strategy Task and Finish Group was established in

response to the HSCP and IOWSCP Business Groups endorsement of the recommendation to develop a multi-agency Child Sexual Abuse strategy. **The strategy will address identification, intervention and prevention of child sexual abuse and be supported by:**

- **multi-agency training and awareness raising on child sexual abuse specifically.**
- **collation and development of direct work tools specifically developed to help children speak to trusted people about sexual abuse.**

The recommendation was initially identified by a Children Services report on [The multi-agency response to child sexual abuse in the family environment: prevention, identification, protection and support](#) (Ofsted, 2020) which summarises findings from the Joint Targeted Area Inspections (JTAs) which took place between September 2018 and May 2019. It was then informed by a multi-agency case file audit and an LCSRP currently under way on the IOW.

Connections were made to work being undertaken in Southampton SCP and a deep dive audit in Portsmouth SCP and the HIPS Executive approved a HIPS wide approach joining the groups together. This group has over 25 members, demonstrating the level of commitment to this important work.

After completing staff surveys, research across other SCPs and agreeing a structure for the strategy and toolkit, working groups are now being set up to develop the strategy with a clear steer from the Chair.

Responding to Domestic Abuse

The IOW has a well-established Domestic Abuse Forum (DAF) chaired by the IOW Police Superintendent. The DAF partners support and feed data into the data set along with a narrative that provides greater qualitative detail and analysis. This is used to address current trends and emerging needs and will continue to be developed in line with requirements under the Domestic Abuse Act.

The DAF quarterly data and reports allows DAF to identify and tailor campaigns to meet and respond to the local needs, incorporating an increased use of digital platforms to increase reach and improve performance through greater analysis.

- **During Quarter 1-3 there were 1426 Domestic Crimes with 185 children linked to high-risk domestic crimes. 28 children perpetrated domestic crimes with 43 16-17 year olds involved in perpetrating domestic crime.**
- **There were 70 MARAC cases where a child was linked to the case.**
- **YOU Trust received 692 referrals with 92 of these being repeat clients. At Quarter 3 end there were 13 children in the Refuge.**

- **Woman on the Wight (WOW) reported that 113 women joined the Freedom programme and Hampton Trust reported that 9 referrals were made to them for the perpetrators course ADAPT.**

The Youth Offending Team (YOT) are running a course 'Who's in Charge?' for parents where child to parent violence is seen.

Hampshire Constabulary have a new Domestic Abuse Strategy which includes guidance on protecting children.

The September 2020 DAF campaign focussed on the impact on children affected by Domestic Abuse.

YOU Trust are rolling out DragonFly training across the council, schools, and other agencies to raise awareness of domestic abuse and how to refer families.

Work is under way with GPs and Pharmacies to promote Domestic Abuse referrals and services.

The Police Operation Endeavour is in place ensuring Public Protection Notices for children at risk (PPN1s) are shared with schools, so that they can consider pastoral care needed for the child and they can talk to families about support on offer.

Wight DASH (Domestic Abuse Support Hub) made 750 welfare calls to families during the year and supported 63 women at group sessions.

The Domestic Abuse Act means that the IOW should have a Partnership Board in place. A needs assessment is currently under way to inform the new Board and Strategy and the IOW is well placed to move forward with the new requirements, having a well-established DAF and an evolving data set for domestic abuse.

Impact:

Use of developing data set to inform campaigns, greater use of digital platforms ensuring campaigns have a wide reach.

Awareness raising work is going well and other agencies are referring cases to Domestic Abuse services.

Schools are better informed about children at risk and are able to respond to support them in school.

Responding to COVID-19

Public Health led the COVID-19 pandemic response interpreting national guidance and considering how this might impact on safeguarding IOW children including the lockdown guidance for domestic abuse situations and the prioritisations for face-to-face mandated contacts within Public Health Nursing services. National guidance provided consistent approaches for all settings to ensure COVID-19 security for service users and staff and balancing it with safeguarding needs of children and families. Public Health commissioners held weekly meetings with providers.

Public Health led the Education Outbreak group supporting education settings with their risk assessments and COVID-19 security, enabling them to remain open and accessible for vulnerable children.

They also led a Commissioning 'recovery' group enabling commissioned services to use contract variations during COVID to reassess priorities, which required some redeployment of staff and ensured effective risk assessment and safety planning.

All Agencies worked to adapt to new service-delivery methods and ways of engaging children and families and developed digital solutions and other safe working practices in order to maintain engagement and eyes on vulnerable children.

Probation were aware of increased risks of cybercrimes, concerns regarding domestic abuse and the need for robust information sharing during lock downs. They used doorstep monitoring and held more liaison with partner agencies and developing more risk management plans.

Voluntary Sector was supported to set up 26 community hubs across IOW ensuring food and medication reached families and to provide information and support with housing, employment, befriending, mental health support.

Over 1,000 children were supported during the year via voluntary organisations including Youth Trust, Food Bank, Trussel Trust, and the Storeroom.

Hampshire and Isle of Wight Fire & Rescue Service developed bespoke COVID-19 Safeguarding training to support organisational awareness of the effect of the pandemic on children. Training included raising an awareness of the increase in vulnerability for children either being exposed or directly experiencing domestic abuse, and more limited access to support services for mental health concerns and online safeguarding concerns.

CHILDREN AND FAMILY'S VOICE

VOICE OF THE CHILD

The IOWSCP strongly believes that children should have a say when decisions are made which may affect them. We also believe that children should have the means and opportunities to raise issues which are important to them, and ensure they are listened to. By doing so, we believe that this will create a stronger child protection system that is more responsive to the needs of our most vulnerable children.

The Partnership endeavours to ensure that children are appropriately involved in the governance and decision making of the partnership and holds partnership members to account on their engagement and involvement of children within their own agencies, including through the section 11 audit process.

The IOWSCP seeks to ensure that agencies consider how the voice of the child has impacted on their day to day and longer term strategic work.

IOW COUNCIL (IWC)

The IWC has a participation strategy (2018) which details a progressive, engaging, and inclusive approach to hearing the voice of the child and for that voice to influence decisions that are made.

Participation leads have been appointed in every team within children's services to ensure:

- **Service participation - where children influence service delivery**
- **Personal Participation - where children influence decisions regarding their own plan**

Children's Services encourage completion of feedback forms so that families have an opportunity to voice their views on services received and influence changes to provision.

Participation leads meet regularly to discuss and agree best practice and to maintain participation folders.

The Rights and Participation Officer coordinates participation events and these were adapted to online engagements for 2020/21.

Early Help - service providers ask for feedback from children and families and use the views provided to improve services and approaches

CIN - Children and parents are invited to core group and CIN meetings and asked for their views on what is required in the plan. For children who do not wish to attend the meetings, direct work is undertaken to gather their views beforehand.

Child Protection - Children and families were asked for their views on a new proposal for safeguarding plans. Families indicated the areas of the plan they did not like. The resulting changes to the plan format made it easy for families to understand it and know what was expected of them.



Looked After Children (LAC) - Children attend monthly meetings of the Corporate Parenting Board and the agenda is child friendly. Four meetings were held over the year with 6 children attending. As part of the meetings, children voiced their discontent with terminology being used during meetings to describe them and their lives. Alternative vocabulary was put forward by the children and agreed that: 'looked after children' be replaced with 'Island children', 'foster carers' be replaced with 'foster parents' and 'contact visits' replaced with 'going to see mum'.

Hearing Young People's Experiences (HYPE) - This group gives Island children an opportunity to talk about the things that are important to them and their views. 11 meetings were held in 2020/21 with 68 attendances. Junior HYPE group was trialled with 6 children aged 8 -12 attending. Since the meetings were conducted virtually on Microsoft teams, four children living in another Local Authority area were also able to attend.

IOW Children's Services has gained national recognition for the standard and diversity of their participation offer and continues to seek new and exciting ways for Island Children to have a voice, such as the attendance of Anne Longfield and her team at multiple HYPE meetings.

Come Dine with Us - this work has supported care leavers to improve their confidence, skills, independence, and social interactions. 11 sessions were held with 52 young people attending and cooking a variety of meals. A junior pilot version was also delivered in 2 sessions and plans are in place to offer this in 2021.

Transitions - Children are flagged for transition work from age 14 + and they are fully involved in planning and giving their views on what they believe should happen, with opportunities for children to be fully involved in the process and early liaison with adult services where appropriate.

Bright Spots survey - This annual survey is conducted by Coram Voice. There was a 33% response rate to the survey which was co-created with children. The results of the survey inform the annual participation action plan. Examples of actions undertaken include; worker profiles being created to share with families, independent reviewing service using more strengths based and child centred communication with children, and Life Story work being refreshed and increased.

Have your say week - This is a well-established annual event on the IOW where children and families, who have been involved with Children's Social Care, are invited to attend a range of fun activities and at the same time complete consultation conversations with staff from CSC. The event was postponed several

times and then cancelled due to the pandemic in 2020, but planning is well under way for 2021.

Other ways the voice of the child is used to influence or improve safeguarding Services



Youth Council - This group meets monthly and 6 -10 attendees met online during lockdown. They have a manifesto, and this was acted upon during the year. The chair of the group received chairperson training from the IOW Council lead member for Education, Children and Families.

All Party Parliamentary Group (APPG) - Meetings were not able to go ahead due to COVID-19. Alternative virtual arrangements were set up via links to the Office of the Children's Commissioner with a meeting with Anne Longfield. The APPG views fed into national debates regarding the impact of COVID-19 on education and mental health impacts and the young people felt empowered and involved.

Young Inspectors - Short breaks activities are reviewed by children with disabilities and learning difficulties who take part in activities and then report back on areas children have previously identified as important to them i.e. accessibility of venues, friendliness of staff. 5 children carried out an inspection prior to the pandemic, but others planned had to be cancelled. The children were empowered by taking part in the activity, and the responsibility they were given for scoring the venue, and they were also able to try new things in their role as inspectors.

Interviews - 10 children supported 5 interview panels during 2020/21. 5 new staff were appointed to IOW Council and all staff appointed matched the recommendations from children. The children learnt professional behaviours, and the online interview process meant children living in care in off-Island placements could take part, so the process was more inclusive.

Involving Young People Training - CSC staff, Foster Parents and Partner Agencies have attended 'Involving Young People' training delivered by older children on the IOW. This is due to be revised and rolled out again in 2021. The training helps adults to keep in mind the views of children in their assessments and plans and the children involved feel empowered by being given a voice.

Young Carers - 300 children were supported by the YMCA as young carers during the year. The average age of IOW Young Carers is just 12 years. During the pandemic, support was virtual, but the YMCA offer activities, 1-to-1 support, liaison with schools and other agencies and every year they hold a Young Carers Festival in Hampshire. This gives children a voice and a chance to mix with other children who are caring for family members.

Domestic Incidents - When Police Officers attend domestic related incidents and there are children present, they obtain the voice of the child and record this in their report so that the child's views influence decision making.

An example of the child's voice being listened to and acted upon:

Child x was at high risk of CSE and CCE and was living between their two separated parents' houses.

There were regular disputes within the family over where the child should live for stability. Police spoke to the child away from family members and the child requested being moved to a foster placement that CSC agreed to. The child felt their voice had been heard in the decision-making process and was comfortable contacting police if they had any queries about their safeguarding plan.



Philomena Protocol - This is a research-based approach being piloted in Hampshire Constabulary and looks at unnecessary criminalisation of children who are LAC. It considers responses to all children and their lived experiences and making sure police responses don't differ for children who are looked after.

The development of Child-Centred Policing (CCP) was to ensure that children are considered as children first, that the voice of the child should be heard and that every interaction counts and could be a reachable/teachable moment. CCP ambassadors are in place across the force to ensure that the approach is embedded.

The OPCC Youth Commission - Has two cyber ambassadors in place for Primary and Secondary Schools and the cyber ambassador scheme was written and delivered by young people for young people. This scheme is developing well on the IOW with 7 Primary Schools, 3 Secondary Schools and 2 Colleges involved.

Plans are in place for the OPCC Cyber Ambassador Coordinators to work with IOW children to develop and deliver online safety training for their parents/carers. A parent/carer survey has been developed to find out about parent/carer cyber safety knowledge and what they would like to know, it will be launched in September 2021. Once the survey results are analysed, the Youth Commission Coordinators will work with school-based cyber ambassadors to develop and deliver cyber safety education to parents and carers.

SCP Group membership - Two members of the Hampshire and IOW Youth Commission are members of the HIPS Child Exploitation Group, where they have been ensuring young people's voices are included. They write regular articles for the newsletter, sharing the findings of the Youth Commission's consultation 'The Big Conversation' and giving feedback to professionals that shapes the services young people receive. The group have also been involved in reviewing partnership websites to see if they are young people friendly and advising on how they would like to see it move forward. More recently, there has been representation by young people on the Safeguarding Adolescents Group and careful planning is under way for involving children in the Child Sexual Abuse strategy development consultation.

Health - The IOW NHS Trust have been working to set up a Children and Young People Forum. The intention is for the forum to be led by children, supported, and guided by members of the Trust and community partners with the aim of improving the quality of service provided and the experiences of children who attend St Mary's Hospital.

YOT - Every child has an 'YOT Intervention Plan' – they contribute to this on a standard template or they can make their own child-friendly plan. This is reviewed every 3-6 months depending on their order. It helps children have ownership of their plan and better understand what the service expects of them and what they can expect from YOT. At the end of every order, whether voluntary or statutory, YOT seek feedback from children and use it to shape services, for example children said they would rather be seen in their community than at County Hall and so they are now often seen in their local Family Centre and feel safer and listened to.

YOT has a Youth to Adult Transitions programme delivered to those aged 17.5yrs plus. Children can begin to understand the difference between services for children and those for adults. They know where to go for help and advice and understand the difference between YOT and Probation.

Inclusion IOW Substance Misuse Service - Workers attend meetings with other agencies involved with the child and the service talks to both the child and the parent(s) when they need to inform other agencies of information about the child.

Young people are encouraged and supported to identify risks and possible ways to reduce those risks during keyworker sessions, for example:

During a weekly clinic at the Pupil Referral Unit a young person discussed using cannabis as their response to being angry. After discussion, the young person was able to identify some activities they could do instead when angry such as cycling, which was not a response they had thought of before. The support reduced the stress placed on the wider family and also enabled the young person to feel more in control.

The service also makes other agencies aware of the child's concerns and preferences so that the child feels listened to and their views valued. This transparency builds trust and enhanced cooperation. Involving the whole family helps them feel empowered and in control and this in turn reduces harm and promotes child safeguarding.



APPROPRIATE QUALITY ASSURANCE PROCEDURES ARE IN PLACE FOR DATA COLLECTION, AUDIT, AND INFORMATION SHARING

MULTI-AGENCY SAFEGUARDING DATA

Our Performance and Quality Assurance Group (PQA) collects data quarterly, and reviews data and commentaries twice a year.

Patterns and trends are noted and key questions or areas for the Board to consider are agreed. The report goes to the Business Group for further analysis and additional information is added, before going to the Partnership Board for consideration and discussion. Any agreed actions are added to the tracker and monitored to completion. (See performance data in Section 1)

Q3+4 2019/20 data report taken to the June 2020 Board – there were two key questions:

1. Are any changes to the data set required as a result of COVID-19? – The Board agreed that it was important to continue to track the full set of data
2. Given concerns relating to increases in criminal exploitation of children, what would the Board like to see included in the PQA data report? – It was agreed to include in the next exploitation commentary, a profile of the children concerned, particularly if any of them had SEND so that interventions and prevention work could be targeted.

Q1+2 2020/21 data report taken to the December 2020 Board – The Board discussed key changes in the data during the pandemic and implications for services in safeguarding children, and progress on data lines added to the data set

1. Children Services reported that CP and LAC numbers have gone up during the pandemic leading to a significant increased pressure on the multi-agency safeguarding system.
2. Police reported that online exploitation of children has increased during the pandemic with increased time spent online by children.
3. The NHS Trust reported a significant increase in children's mental health concerns including self-harming.

4. Inclusion IOW are now providing substance misuse data and commentary quarterly. Data shows that they have a pro-active approach to safeguarding children. Service users are now routinely asked about their children, so that risks to children can be assessed and appropriate support offered. Inclusion staff have received training in taking a family approach to service delivery. The Director of Children's Services informed the Board that as well as an increase in volume, the complexity and seriousness of cases that Children's Social Care were working with had increased since the pandemic started, and the consequences of these cases may remain for Children's Social Care and partner agencies for some time.

The 2020/21 Q3 and Q4 data report and key questions will go to the June 2021 Board for consideration.



SECTION 11 AUDIT PROCESS

As part of its statutory duty to ensure the effectiveness of what is done by each organisation in relation to safeguarding and promoting the welfare of children, the IOWSCP undertakes a two-year cycle of monitoring compliance with section 11 of the Children Act (2004).

This process has been strengthened by the use of a staff survey and a co-ordinated approach across HIPS areas for agency completion of the audit using a two-year cycle:

Y1 PROCESS	Y2 PROCESS
Agencies complete self-assessment tool	Agencies complete Action Plan review forms
Staff survey results processed and analysed	Staff survey results processed and analysed
Panels review HIPS and IOW agency self-assessment submissions	Panels review HIPS and IOW Revised Action Plan submissions
Independent Chair writes to agencies in response to panel findings	Independent Chair writes to agencies in response to panel findings
Panel conversations held with selected agencies	Panel conversations held with selected agencies
Verification visits made to selected agencies	Verification visits made to selected agencies

Part 1 of the cycle was undertaken in 2020, audits tools and staff surveys were completed by agencies by January 2021.

Panels were held for 13 HIPS agencies plus 10 IOW Agencies to review all submissions. The Independent Chair, in his scrutiny role, wrote to all agencies highlighting areas of strength in the self-assessments and areas for further development or clarification. Panel conversations and verification visits were not possible due to pressures on the system and pandemic restrictions. A report on the outcome was presented to the HIPS Executive Group.

Analysis of the completed self-assessments revealed that the three partners and statutory agencies had few significant safeguarding areas to progress but had

self-identified updates and extensions to current work that they were committed to in their plans. For example, ensuring that policy reviews included new safeguarding information and contacts, that when services were commissioned, the tender documents contained more detailed information about child safeguarding legislation and locally agreed policies and procedures to be followed.

However, for some smaller Relevant Agencies, there were emerging themes across responses received – A need to:

- Develop greater knowledge and understanding of the Thresholds Chart and process.
- Develop fuller understanding of the value of the Family Approach to services
- Have a more proactive approach to Early Help and further staff training on this area.
- Have greater awareness regards to vulnerabilities of children with disabilities and those with English as an additional language and safeguarding implications.

All of these will be fed into the Learning Needs Analysis process and agencies will be signposted to relevant training. A full analysis of the self-assessment scorings will be presented to the June 2021 Board meeting.

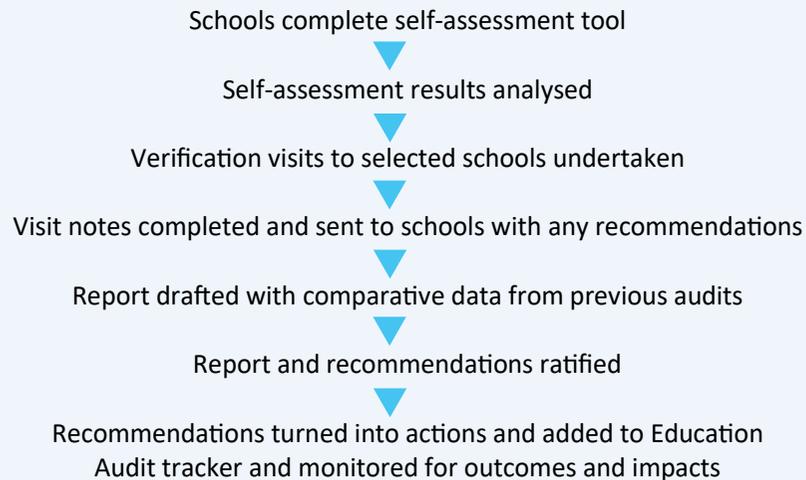
SAFEGUARDING IN EDUCATION AUDIT PROCESS

Under section 175 and 157 of the Education Act 2002, schools are required to carry out an annual self-assessment audit to review how well their arrangements ensure children are safeguarded. In 2020 100% of IOW Schools and colleges completed a self-assessment tool.

The tool is updated annually to take account of updates to [Keeping Children Safe in Education](#), [Working Together to Safeguard Children](#) and [EYFS guidance](#). The IOWSCP has developed a bespoke audit tool for Language schools that is more applicable to their activity areas and this is also distributed annually.

The Early Years Team complete an annual self-assessment process with Nursery and Pre-School settings and feed their outcomes back to the Education Subgroup.

Safeguarding in Education Audit Process



- **Keeping Children safe in Education self-assessment tool to be updated to enable monitoring of how schools were recording prejudicial language and behaviour incidents in schools and implementing the new RSE Curriculum**
 >> was completed and reported in the 2020 report. Training was provided for Head Teachers on using the tool and they were sent a link to the tool in the self-assessment document.

2020 self-assessment findings

- **97%** of schools felt confident that safeguarding policies and procedures were in place and up to date. 3% were aware of some updates needed.
- **91%** of schools felt their staff had received all of the necessary safeguarding training and the other 9% had identified specific training needed in their action plans to get this fully in place.
- **99%** of schools have robust record keeping processes in place. 1% felt this was partly in place since they had identified areas to further improve.
- **100%** of schools were confident about the LADO role and whistle blowing and have made sure their staff are trained and aware of processes.
- **97%** of schools felt confident that staff knew about and were using policies covering a range of safeguarding issues. The other 3% had plans in place to move from having this partly in place by updating policies and procedures to reflect emerging safeguarding themes such as criminal exploitation and so-called honour-based violence
- **100%** of schools engaged in interagency working and were aware of Thresholds Chart and how to use it
- **88%** of schools had the curriculum requirements fully in place and 11% had it partly in place with 1% not in place. This was due to schools taking the opportunity to review their wider curriculum in the light of changes to RSE/RSHE curriculum requirements.
- **100%** of schools were confident in recruitment and selection processes being fully in place and staff appropriately trained
- **88%** of schools self-assessed as having all arrangements fully in place for managing staff, student placements and visitors – one area some schools had not considered was checking visitor presentations before they were made to children and this was sited in action plans.

Recommendations from the 2019 self assessment and actions completed in 2020/21:

- **Advice to Head Teachers on providing and requesting references for staff**
 >> dealt with via the Education subgroup and a presentation was made and disseminated
- **Agree a standard template for safeguarding policies for schools to adapt with their local arrangements**
 >> agreed and disseminated to schools
- **Ensure schools have up to date whistle blowing policy in place**
 >> IOW Council policy was updated, and schools were informed
- **Find ways to improve communication between Education and Social Care**
 >> the pandemic led to very close working at a strategic and operational level between the two agencies. It was agreed for the Inclusion manager to bring any school concerns about cases to the attention of CSC via the regular Safeguarding Leads meetings and schools were also reminded of the Escalation Policy in place on the HIPS website.

CASE FILE AUDITS

Four thematic multi-agency case file audits are planned each year by the Performance and Quality Assurance (PQA) Subgroup as part of the LSCP's scrutiny and quality assurance work.

The audits are chaired by an appropriate PQA member or other senior manager and conducted with a multi-agency panel who develop the Terms of Reference and Audit Tool. Practitioners from a range of agencies with involvement in the cases attend the audit. The audit process provides a forum for honest and open reflection on how agencies work together and there is a shared agreement on the key strengths and areas for further development identified. Audits continue to be well attended, demonstrating a continued commitment amongst agencies to reflect on practice and share learning.

The Children's Rights and Participation Officer is also a panel member and offers the families an opportunity to participate in the audit and provide information on their lived experience of safeguarding systems to inform the report recommendations.

In the 2020/21 cycle, four audits were planned, but only two were completed due to the pandemic and pressures on the system. The other two audit themes will roll over into the 2021/22 audit process.

MASH Audit – with a focus on child exploitation and information sharing between MASH and the IOW NHS Trust: a 1-day audit, held in July 2020 via Microsoft Teams had 13 attendees and 5 cases audited



Reason the theme was selected: An audit of MASH cases is undertaken every year, the theme for this audit was Exploitation since this was an area of focus after the revised CERAF was put in place. We also discussed health information sharing for IOW cases and were seeking assurance that this was efficient.

Key Strengths:

- ✓ In 100% of cases, the referral was clear and risk indicators and supporting information was seen
- ✓ In 100% of cases, information from parents/carers was used to inform decision making
- ✓ In 100% of cases, the MASH Police were prepared for S47 strategy discussion within timescales and consideration was given to potential criminal investigations
- ✓ In 100% of cases, the voice of the child was evident in the MASH case summary and this is a great improvement since outcomes seen in the last MASH case file audit
- ✓ In 100% of cases, the referral outcome within MASH was appropriate and took account of all known information /risk factors
- ✓ In 100% of cases, outcomes were reached within timescales and consistent thresholds were applied
- ✓ In 100% of cases, referral outcomes were clearly evidenced and recorded in time scales
- ✓ In 100% of cases, the CAST Teams followed through on MASH outcomes appropriately and within times scales
- ✓ In 100% of cases there was evidence of appropriate management oversight and case supervision
- ✓ NHS Trust health check information provided helpful contact details for other key IOW agencies
- ✓ Links with wider family members for information sharing were given
- ✓ One referral that was identified as a particularly strong exemplar in terms of identifying risk
- ✓ Contact with London Boroughs was made to seek case information
- ✓ An excellent letter sent to the child to explain reasons why CSD were concerned about them was noted
- ✓ Excellent information on the wider family provided by Education was noted

Opportunities for strengthening practice included:

- **Health checks** should be sought from the IOW NHS Trust Safeguarding Team and recorded and used to inform risk assessments and decision-making processes within MASH - NHS safeguarding staff now have read and write access to ICS to enter records straight on to the system.
- **Referrers should reference CERAF and CSERQ4** assessments and scores within IARF referrals to CRT for exploitation cases to assist with assessments of risk.
- **MASH Strategy meeting template** to be updated to record who is in attendance and completed forms to be saved as a case note on the system.
- **Police to enhance PPN1s so they are detailed** and provide sufficient information on each child where there are several children present at an incident.

LAC Audit - the Journey of the Child through services before becoming looked after: 2-day audit of 6 cases, held virtually in November 2020 had 28 attendees

Reason Audit theme selected: In response to the high rate of looked after children currently on the IOW and to follow up on the work of the LAC Task and Finish group. The intention was to better understand children's journey into care and the support and interventions that were delivered to them.

The report acknowledged the small sampled size for this audit.

Key Strengths:

- ✓ Good multi-agency working was seen in most of the cases reviewed
- ✓ Professional Challenge was provided when needed in half of the cases
- ✓ Consistency of workers involved with families was seen in most cases and changes needed were sensitively made
- ✓ Persistence of workers was seen at all levels to secure actions and outcomes for the child and family
- ✓ Good use of bruising protocol and unborn/newborn protocol were seen

Opportunities for strengthening practice included:

- **Workforce Development Group** to consider offering a further workshop or online training on the escalation policy with a focus on raising the confidence of staff in using it and a better understanding of process

- **Education Group** to consider having an input at the DSL Conference on Looked After Children to increase knowledge and confidence of schools
- **SCP/Children's Trust** to consider exploring the support given to parents (particularly mothers) after removal of a baby into care with a focus on those parents who have had previous children removed to support them in breaking the cycle and having their own needs met before they consider further pregnancies.

ANNUAL REPORTS FROM AGENCIES

A range of IOW Agencies present reports to the PQA group, from MAPPA to Participation of Children and Young People with ten reports provided for 2020/21.

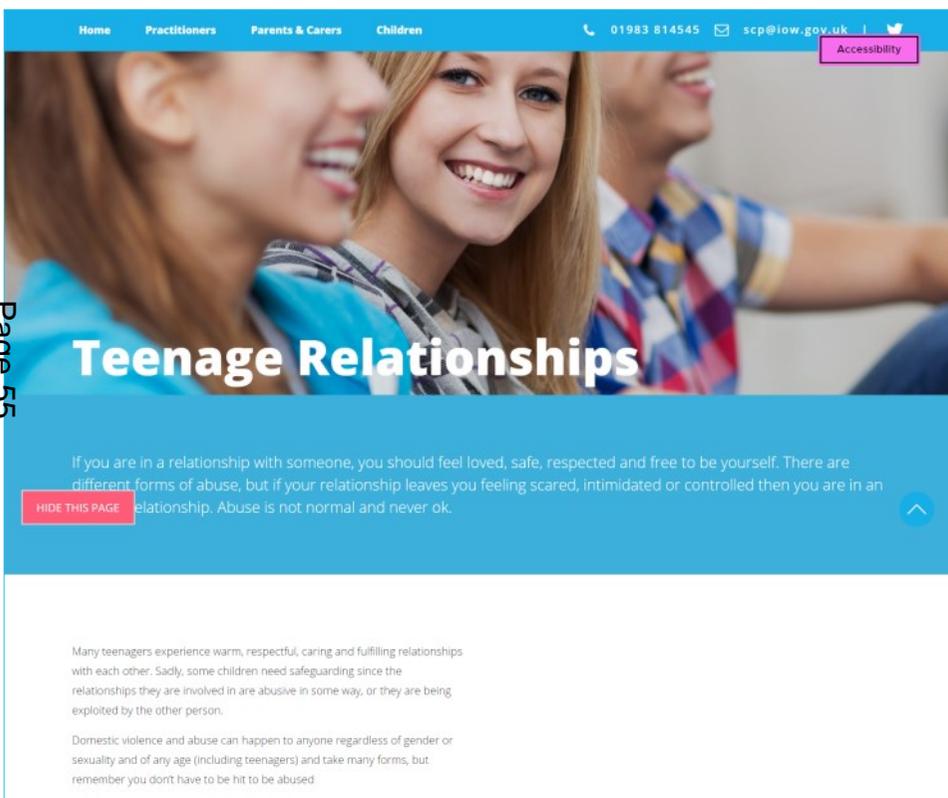
These reports provide assurance about agency approaches to safeguarding children. Agencies present their report and answer questions or clarify points raised by PQA members and any actions needed.



INFORMATION SHARING

The IOWSCP website contains information and guidance for children, parents, and practitioners on a variety of safeguarding subjects and is compatible with tablets and mobile phones. It also contains local policies and links to HIPS Policies website and to national legislation.

We have continued to update the resources pages during the year as part of a review cycle and are currently reviewing and updating the children's pages following feedback from older children.



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The Partnership Team have a planned approach to using Twitter and during 2020/21 sent Tweets on: County Lines, Exploitation, Hampton Trust ISVA service, children's mental health, domestic abuse – how to get help, services available, perpetrator service, Every sleep counts campaign, Water safety resources, IOWSCP training courses, Partner agency training, ICON, Where to get child health advice during COVID -19.

There were 50.4k impressions gained across the year and the top tweet gained 2,603 Impressions. There was a 5% increase in followers during the year.

4 Board Newsletters are produced per year following Board meetings which contain information about decisions made, presentations, links to key documents and articles. These can be found on the IOWSCP website and are sent out to distribution list members.

4 Education newsletters are produced by a Headteacher member of the Education subgroup and these are distributed to all IOW schools and colleges.

4 Child Exploitation newsletters are produced annually via HIPS Exploitation Group and distributed and available on IOWSCP website. They contain information about discussions, reports and resources and any changes to processes as well as links to policies and procedures and information from young people.

SCP subgroup and task and finish group meetings include information items where papers and links are added to promote national or local reports, documents, policies and procedures or changes to arrangements

In addition to timetabled meetings with the three partners and subgroup Chairs, the Independent Chair has met with a range of IOW Board member representatives and Relevant agencies via Microsoft Teams with a pre-planned agenda for discussions and visit outcomes were recorded as well as follow-up actions.

INDEPENDENT CHAIR: QUARTER 1 MEETINGS 2020:

Public Health rep | Chair of SAB | Principal Social Worker - Children | Adult Social Care rep | Childrens and Adults Board Managers | New Board members | Health and CCG reps | IW Councillor (children and families) | Education rep | YOT rep | Regulatory Services rep

INDEPENDENT CHAIR: QUARTER 2 MEETINGS 2020:

IWC Housing rep | Workforce Development rep | Head Teacher reps | Barnardo's rep

INDEPENDENT CHAIR: QUARTER 3 MEETINGS 2020:

Health reps | Probation reps

INDEPENDENT CHAIR: QUARTER 4 MEETINGS 2021:

Adult mental health rep | Head Teacher rep | NHS England rep

LEARNING FROM REVIEWS

The IOWSCP has a Learning Inquiry Group (LIG) that works on behalf of the Partnership. There is a clear process in place for considering cases referred to the LIG, determining whether a case review is appropriate and for identifying and investigating learning from Local and National case reviews.

The purpose of reviews of serious child safeguarding cases both at a local and national level is to identify improvements in practice to be made to safeguard and promote the welfare of children by better understanding what happened and why things happened as they did.

Serious child safeguarding cases are those in which:

- Abuse or neglect of a child is known or suspected and
- The child has been seriously harmed

During 2020/21, 4 cases were referred to the LIG for consideration. None of the four case met the criteria for completion of a Serious Incident Notification or Rapid Review however:

- One case was considered under Working Together to Safeguard Children 2018 Section 4 paragraph 19 as “raising issues of importance to the local area” and so safeguarding Partners chose to hold an LCSPR for this case and an external reviewer was commissioned in autumn 2020. The review is nearing completion.
- One case is currently being scoped. It did not meet the criteria for a Serious Incident Notification or rapid review, but LIG members wanted to share more information about the case before making a decision.
- Two cases did not indicate any new learning, though members took some actions from the LIG discussions.

During 2020/21 one LCSPR was brought to completion for Child I. The case had been referred in 2019/20 and the review held virtually, led by local agency leads in the form of a Reflective Practitioner Event.

The report was published on the IOWSCP website in January 2021.

The following strengths were identified in how Case I was managed:

- ✓ Appropriate and timely referrals were made to CRT/MASH by the school, school nurses.
- ✓ MASH and other agencies reported good access to and sharing of multi-agency information.
- ✓ There was a comprehensive assessment from Children’s Social Care which considered multi-agency contributions.
- ✓ YOT and CAMHS provided a flexible approach to try and maintain engagement with Child I and their family. This included CAMHS offering advice and guidance to YOT when Child I would not engage with CAMHS.
- ✓ Children’s Social Care and YOT worked together to support Child I to re-engage in education which was a key priority within the Child in Need plan.
- ✓ Due to the complexities of Child I’s emotional wellbeing, support had been sought from Forensic CAMHS and these strategies were being followed by relevant partner agencies.



Agencies have responded to the learning points from Case I in the following ways:

LEARNING POINT: Further promote the early help offer for adolescents and benefits of 'early help' for adolescents particularly secondary schools.

ACTIONS

Early Help training offered to specific groups in Health and Education and multi-agency sessions also offered.

In 2020 NHS Trust, Barnardo's, and Hampton Trust successful in bid to secure funding for Mental Health Support Teams that will be based in schools to provide support to children.

OUTCOMES & IMPACTS

➔ Early Help training now offered monthly to meet demand and targeted sessions have raised understanding of process and confidence at completing assessments among health staff.

➔ Mental Health Support team members recruited, training at Southampton University has begun in 2021, pilot schools have been selected, teams will start picking up a caseload in their host site in June 2021 and the service will be rolled out from January 2022.

LEARNING POINT: Ensure the voice and experience of the child is considered in all work undertaken by partner agencies with families.

ACTIONS

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SCP Case file audits look for evidence of all agencies incorporating the child's voice into all assessment planning and review processes.

Review the Family Approach Protocol and toolkit

Child's voice is central to the Hampshire and IOW Approach and all CSC staff received training in the approach and use it in their work

Capacity and consent will be considered in line with the Mental Capacity Act (2005) and the latest GMC 'Decision-making and consent' guidance (0 – 18)

OUTCOMES & IMPACTS

➔ Evidence of child's voice recorded in cases files, as seen in case file audits, and children influencing assessments, planning and review processes.

➔ This was not completed in 2020/21 and will be a priority for the coming year.

➔ Evidence of CSC work on the Hampshire and IOW Approach and staff using the child focussed approach in their letters and records.

➔ Family Approach training includes mental Capacity Act information, and this will be updated in the review to include GMC guidance.

LEARNING POINT: Ensure awareness and use of the 'Was Not Brought' policy and procedure across health services, including CAMHS.

ACTIONS

The Was Not Brought leaflet to be redistributed electronically to areas within the NHS Trust that see children

Case file audits to provide evidence that the was not brought policy is being used

OUTCOMES & IMPACTS

➔ Was Not Brought leaflet now widely available and used by Health professionals and will be promoted via learning workshops to be delivered in June 2021

➔ Case file audits beginning to show evidence of use of the policy and this work with continue in 2021

LEARNING POINT: Promote the new guidance tool for convening and leading professional meetings.

ACTIONS

Guidance to be rolled out to GPs as part of thematic safeguarding prevention event



Guidance to be sent to all partnership and subgroup members, made available on the IOWSCP website, newsletter, via Twitter and Early Help Hub meetings.



OUTCOMES & IMPACTS

Professionals Meeting Guidance presented at a Board meeting and promoted widely as planned. Evidence of impact will be sought during 2021/22 audits to see whether agencies are calling professionals meetings when required.

LEARNING POINT: Ensure the promotion of a whole family, strengths-based approach to support positive engagement of families and children in identifying the outcomes they want, developing plans that reflect these outcomes, and supporting their positive engagement in order to secure the desired outcomes.

ACTIONS

CSC to present the strength-based approach to Board members



OUTCOMES & IMPACTS

This was presented to Board members at the June Board meeting and eLearning has been made available via the IOWSCP website.

LEARNING POINT: Promote participation of both parents at appointments and meetings.

ACTIONS

On publication of the LCSPR, all Team Managers delivered key messages within Team Meetings to CSC practitioners with ongoing monitoring through case auditing.



OUTCOMES & IMPACTS

Review of referral and assessment paperwork to ensure prompts to involve both parents are made undertaken.

Engaging and working with fathers in Child Protection training delivered in 2020/21 and re-commissioned for 2021/22.



Training evaluations positive and observation of training reflected this.

Learning workshop to include the need to involve both parents in appointments/meetings.



Learning workshops to be delivered in summer 2021.

LEARNING POINT: Promote the importance taking an holistic view of child/family history so that events are not seen or responded to in isolation and patterns of behaviour over time are reviewed, rather than focussing just on the current presenting issue, to better inform support and interventions for the family.

ACTIONS

The need to take a holistic view of child and family history should be incorporated into Learning workshops.



OUTCOMES & IMPACTS

Workshops planned and include this messaging and the Workforce Development Group may follow this theme up in some case study-based workshops.

Whether full case history is taken to be a question in all Case File Audits to enable monitoring.



Case file audits evidence that in many cases, family history is both known and taken account of.

LEARNING POINT: Ensure that families are fully supported to follow up on signposted services, rather than presumptions being made that they will make this follow up, especially where there are known vulnerabilities in the family.

ACTIONS

How practitioners sign-post families to services particularly if they are vulnerable families covered at Early Help Hub meetings and incorporated into the workshops in July 2021

OUTCOMES & IMPACTS

Early Help Coordinator raised the need to follow up on signposting families to services at Hub meetings and this is also planned for the learning workshop in summer 2021. The PQA group to add a case file audit question to follow up on signposting in order to evidence that practice supports vulnerable families in accessing services



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During 2020/21 a number of single agency Positive Case Reviews were presented to the LIG so that members could take learning from cases where there was good practice.

These included reviews of cases from YOT, Health and Children's Social Care. For example, in one of the YOT cases presented, the events logged evidenced that:

- ✓ The young person had a good open relationship with staff and an understanding of YOT expectations right from the beginning of their involvement.
- ✓ The young person's mother was well supported by YOT both via the offer of B4Change, YOT Parenting Officer and via regular communication from the YOT case manager.
- ✓ YOT had good communication with the professional network around the young person including Children's Services, the Education provision and

CAMHS. This also included a Forensic CAMHS consultation in September 2019, regular checks of ICS and METRAC meeting attendance.

- ✓ There was robust management oversight over the case both for the YOT Case Manager and Restorative Justice Officer.
- ✓ YOT staff had regular communication with each other sharing safeguarding and risk concerns.
- ✓ The voice of the young person was recorded and heard. Two examples include their view of an improving relationship with their mother outlined in the young person plan and the young person's own view of their impulsive behaviour outlined in the young person assessment.

Learning from the first two National Panel Review Reports 'It was hard to escape' and 'Out of Routine' has informed the work of the HIPS Exploitation Strategic Group, CSC Leadership Team workshops and training materials for Safeguarding Infants Training which is in planning for June 2021.

THERE IS AN ACTIVE PROGRAMME OF MULTI-AGENCY SAFEGUARDING CHILDREN TRAINING

The Partnership has a well-established Workforce Development subgroup (WFD) jointly run with the Safeguarding Adults Board (SAB). Working together has enabled greater synergy between the two workforce development agendas and pooled budgets for delivery of training in areas of joint interest.

The Workforce Development Policy was reviewed in April 2020 with further detail added regarding Health Professional training levels.

We have a cyclical process in place for ensuring multi-agency training meets the needs of the workforce and this is underpinned by the following activity:



Learning Needs Analysis – is an annual process where consideration is given to the following information:

- Evaluations and attendance levels at SCP learning and development events
- Training Observations by WFD group members
- Feedback from annual staff survey of workforce development needs

- Findings from the Section 11 and Education Audits
- Recommendations from multi-agency case file audits
- Recommendations from LSCPRs or national review reports
- Feedback from IOWSCP subgroups and other groups such as Domestic Abuse Forum
- Learning identified from development or revision of policies, protocols, or strategies
- Business Plan Priorities
- Emerging National or Local learning or areas of focus

Key SCP training priorities are identified as well as any areas for joint development with the SAB. Decisions are also made about successful training opportunities to repeat in the year ahead, where there were waiting lists in place or where there are still identified needs for the training to continue.

Planning – once the priorities for workforce development are identified, decisions are made about the audience and level of training, budget considerations, style of training and learning objectives.

Delivery – was impacted during 2020/21 by the pandemic and swift action was taken to develop digital solutions while we were unable to offer face-to-face training. Most training has been delivered via shorter webinars or whole day events split into two parts. In addition, we have developed more eLearning packages to continue to offer access to training.

One external trainer introduced the use of pre-course workbooks, and this is something we will consider for wider use to ensure participants are sufficiently prepared before attending courses set at Level 3 and above.

A number of webinars hosted by the Hampshire SCP learning platform and eLearning packages were also developed and agreed across the HIPS area.

A total of 501 people attended the 31 SCP training sessions during 2020/21:

Course title	Total no. of attendees per
Working Together to Safeguard Children (Level 3)	84
Engaging and Working with Fathers in Child Protection	57
HIPS Unborn Baby Protocol Launch	75
Complex Multi-Agency Safeguarding Children (Level 4)	22
Family Approach to Mental Health, Domestic Abuse and	25
Responding to Neglect in Hampshire and IOW	86
HIPS Harmful Cultural Practices – An Introduction to FGM	6
Children’s Reception Team (CRT) & Multi-Agency Safeguarding Hub	31
Inclusion Service Provision Training	32
HIPS Harmful Cultural Practices – An Introduction to Breast Ironing	3
HIPS Child Exploitation – as a health professional what do you need	44
HIPS CERAFA – Risk Assessing and Introduction to the new CERAFA	50
Missing, Exploited and Trafficked Children (MET)	22
HIPS An Introduction to Modern Slavery	11
HSCP & IOWSCP Neglect webinar	17
HIPS Harmful Cultural Practices – An introduction to Child Abuse	19
HIPS Missing, Exploited and Trafficked Children (MET)	35
HIPS Harmful Cultural Practices- An Introduction to Honour Based	3

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Agencies attending	Percentage of all attendees at SCP training in 2020/21
Health (including NHS Trusts and CCG)	40%
Education (including Early Years, all schools and IOW College)	25%
IOW Council (including Social Care, YOT and Public Health)	19%
Voluntary Sector	7%
Police	3%
Private Sector	2%
Other	4%

Due to the Pandemic, the IOWSCP Annual Conference was cancelled for October 2020.

The Annual Conference for Designated Safeguarding Leads (DSL’s) was held in July 2020 as a virtual event and attended by 56 DSLs from IOW Schools and Colleges. There were presentations on:

- Updates to Keeping Children Safe in Education and Allegation Management
- Updates to Social Care thresholds and interventions
- Education role in Child Protection Conferences and Looked After Children reviews
- Early Intervention and Exploitation
- Mental Health awareness
- Public Health Education Recovery offer and Children’s Services response to the Pandemic
- IOWSCP priorities, updates and training opportunities

97% of attendees felt the **conference had met its aims**
85% of attendees **rated trainer delivery as excellent or good**
94% of attendees said the conference would **impact on their work in schools**
 There were over 40 views by DSL’s of the online recording of the event, using the materials to cascade to staff at their schools.

“ The KCSIE 2020 update was really useful and gave clear actions to support staff training. There were some really useful pointers to support the recovery plan I look forward to sharing the information with staff. ”

“ I am a new DSL ... who took up the post a month ago during the current Covid-19 situation, so this conference has been really informative and has provided practical information which I will be able to utilise in my day-to-day work. The event was clearly well organised considering the challenges of presenting a conference virtually and speakers have done an amazing job. Being able to access the presentation at a later date to be useful within our school. ”

The revised Hampshire and Isle of Wight Neglect Strategy and Toolkit was launched at three virtual events in February 2021 and introduced by the Independent Chair. Attendees were taken through the new materials, contextual information from national and local child safeguarding reviews and were informed of opportunities for further training in the year ahead. 86 IOW staff attended from a range of agencies and here is a small selection of their feedback on actions they intended to take in their workplaces:

“ Ensure that all staff in the wider school community are fully aware of the issues regarding neglect through staff training and policy review ”

“ I am currently reviewing our safeguarding supervision, and this will support this piece of work to ensure that we include the themes and actions required within supervision with clinical staff ”

“ I will share information and links and highlight at Early Years briefings and network meetings ”

The revised HIPS Unborn/Newborn Safeguarding Baby Protocol was launched at three virtual events in March 2021. The trainers shared the revised Protocol and toolkit, the key changes made, how to use the toolkits and increase understanding of when to use them. Case studies were presented to highlight how the protocol can be used. The event was attended by 75 IOW professionals.

Observation and Evaluation – as part of our agreed quality assurance process for training, WFD members observe training delivery. Written observations are shared with the trainer and their comments invited. Reports are fed back to the



WFD subgroup and lead to revisions to training content and delivery. Trainers have welcomed the opportunity to reflect upon their training. For example, the IOWSCP commissioned training by a Social Work Lecturer from Bristol University in response to findings from a safeguarding review undertaken by the IOWSCP. An observation was made of this ‘Engaging and Working with Fathers in Child Protection’ virtual training.

The observer noted the quality of training content, style and pace, training materials used, involvement of attendees and group discussion, how relevant local and national policy and information was used, equality and diversity issues and whether the training met stated aims.

The discussion with the trainer after training delivery was reflective and helpful:

Observer’s views

- Need to explore other areas of child protection and fathers i.e. young fathers and abusive head trauma if training is repeated as this is a priority area for us.
- We need to add to our SCP Family Approach toolkit information about involving fathers in a meaningful way and future audits could look more closely at how fathers are involved in case work.

Trainer’s views:

- People were making links on day 2 to the information provided on day 1 on types of fathers and this was heartening to see.
- The use of breakout rooms worked well and the movement in and out of groups went smoothly and enabled rich discussions.
- The case study handout was long, and more time was needed for this segment to allow people time to really tease out the answers to the questions and test their thinking.

Training evaluation forms are created with standard questions, and those tailored to specific learning objectives. For 2020/21:

- ✓ 100% of all attendees strongly agreed or agreed that the training met stated learning outcomes
- ✓ 100% of all attendees said they understood how to apply what they had learnt to their job role
- ✓ 92% of all attendees strongly agreed or agreed that the style of delivery enhanced their experience

In addition, participants are asked post training to provide three action points they will take to improve their practice as a result of attending the training. The following is a selection of action points or course comments from SCP training delivered in 2020/21:

CRT & MASH Information Session:

“ I will find this very helpful with my ongoing learning and development, it was perfect. I loved the fact that we could write questions in the chat so that it did not stop the flow of the delivery. Andy did a really good job in his explanations. I loved the questions that Andy gave to us as we went through because it made everyone think. I think the delivery should stay the same. ”

Working Together to Safeguard Children (Level 3):

“I thought the breakout rooms were very effective. Fiona did a great job of getting people to think and work together as well as making information available in a forthright manner.”
 “Use the thresholds chart on the SCP website more effectively”

Engaging and Working with Fathers in Child Protection:

“ Great to have multi professionals in attendance – good to share practice amongst colleagues in different settings. An excellent course. ”

Family Approach to Mental Health, Domestic Abuse and Substance Misuse:

“The linking of substance misuse, mental health and domestic violence, often these can all be factors and ensuring a multi-disciplinary approach is sought to support the individual and a holistic assessment completed...”

As an apprentice completing my social work degree and currently being on placement I will discuss my learning in my supervision and how valuable I found the course.”

“Make sure I use a more enquiring method when undertaking assessments”

HIPS CERAF:

“ I will be more confident now in using the new CERAF scoring system and tool ”

As well as post course evaluations, we have been piloting impact evaluations after six months to find out what impact training is having on practice and outcomes for children in the workplace.

Review – this takes place at quarterly WFD subgroup meetings when we examine attendance data, evaluation and observation feedback on our spreadsheets and input from other SCP groups.

Learning Needs Analysis – This completes the cycle and generates information to begin the next planning cycle.

Learning Hub - During 2020/21 we have been working towards joining the Learning Management System (LMS) used by IOW Council. From 1st April 2021 all SCP/SAB training opportunities will be hosted on the ‘Learning Hub’ affording us more efficient booking, evaluation and certification systems and access to a wider range of additional online learning and reporting dashboards. This should aid the collation of outcomes and development work to secure impact information through long term evaluations of training inputs. Moving forward, we will be able to generate a range of reports via the LMS system and this may help us target training advertisements as well as gathering more longer-term impact information.



2021/22 IOWSCP BUSINESS PLAN PRIORITIES

The Partnership reviewed its Business Plan priorities at a Development Day in January 2021 and agreed a revision of thematic work, to respond to local and national areas of safeguarding need as well as objectives from 2020/21 where further action was needed in the 2021/22 Business Plan.

The new Business Plan outlines the main objectives of the Isle of Wight Safeguarding Children Partnership for 2021-22. The Partnership acknowledge that this will be an exceptional time, defined by the COVID-19 public health crisis and our response to it. Accordingly, our Business Plan for the year will adapt and be orientated around the commitment that our partner agencies and their workforce provide to their day to day work priorities, supporting vulnerable children and their families across the Isle of Wight.



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STRATEGIC OBJECTIVES 2021/22 – PART A

1.Safeguarding Adolescents: The joint IOWSCP and HSCP Task and Finish Group will review the range of risks relating to safeguarding adolescents and develop a strategy and supporting Toolkit to assist practitioners in responding to adolescent Safeguarding needs

Source of identified priority	<ul style="list-style-type: none"> • A number of complex Adolescent cases in Hampshire and the IOW JTAI report • ‘Growing up Neglected - a multi-agency response to older children’
Expected outcomes	<ul style="list-style-type: none"> • IOWSCP has a good understanding of the range of complex and inter-related risks that impact on safeguarding adolescents on the IOW • Agencies understand and can recognise factors and indicators of safeguarding risks to adolescents • Agencies are supported by new Adolescent Strategy and Toolkit in place
Impact measures	<ul style="list-style-type: none"> • Monitor use of Early Help Plans with Adolescents • Staff survey undertaken once strategy is embedded to check levels of understanding • Improved response to adolescent safeguarding issues in case files via audits

STRATEGIC OBJECTIVES 2021/22 – PART A

2.Responding to Neglect: Following the launch of the revised Strategy and Toolkit, the Joint IOWSCP and HSCP Neglect Task and Finish Group will work to ensure that the strategy and tools are embedded, that a revised training offer is in place, and that auditing provides assurance that the strategy and toolkit are being used in practice

Source of identified priority	<ul style="list-style-type: none"> • The strategy was originally launched in 2016 in response to Neglect being under-reported • Partners have now identified a need to focus on responding to Neglect
Expected outcomes	<ul style="list-style-type: none"> • Training rolled out • Reviewed Strategy published • Professionals know how to respond to Neglect - IOW children are better safeguarded from Neglect
Impact measures	<ul style="list-style-type: none"> • Training evaluations show attendees have improved understanding of how to respond to Neglect • Case file audits evidence the strategy and toolkit are being used in practice • Data shows improved and timely responses to Neglect

STRATEGIC OBJECTIVES 2021/22 – PART B

2. Launch and evaluate IOWSCP and HIPS Initiatives: a) Family Approach Protocol Review

Source of identified priority	<ul style="list-style-type: none"> • The Family Approach Protocol (launched in 2019 in response Family G SCR findings) and how agencies considered needs of children and adults in a family
Expected outcomes	<ul style="list-style-type: none"> • Family Approach protocol and toolkit revised • Face-to-face training materials updated • eLearning package created
Impact measures	<ul style="list-style-type: none"> • Case file audits evidence the Protocol is embedded in practice • Good number and variety of agencies using new eLearning package • Programme launched at SCP conference and training well received

STRATEGIC OBJECTIVES 2021/22 – PART B

2. Launch and evaluate IOWSCP and HIPS Initiatives: b) Lurking Trolls Launch

Source of identified priority	<ul style="list-style-type: none"> Lurking Trolls is a HIPS wide project designed to enhance online safety inputs in Primary Schools
Expected outcomes	<ul style="list-style-type: none"> Lurking Trolls launched in September 2021
	<ul style="list-style-type: none"> Materials will enhance the curriculum and improve online safety
Impact measures	<ul style="list-style-type: none"> Lurking Trolls evaluation forms issued to staff and children
	<ul style="list-style-type: none"> Uptake of online materials

2. Launch and evaluate IOWSCP and HIPS Initiatives: c) Embedding ICON programme

Source of identified priority	<ul style="list-style-type: none"> ICON programme launched in response to the need to support families with crying babies and reduce abusive head trauma cases
Expected outcomes	<ul style="list-style-type: none"> ICON programme in place
	<ul style="list-style-type: none"> Greater workforce and parental awareness of the crying curve in newborn babies and strategies to manage the tricky first weeks
	<ul style="list-style-type: none"> Good use of Dadpad
Impact measures	<ul style="list-style-type: none"> Reduction in abusive head trauma cases
	<ul style="list-style-type: none"> Audit of cases
	<ul style="list-style-type: none"> Staff survey

2. Launch and evaluate IOWSCP and HIPS Initiatives: d) Embedding Every Sleep Counts and evaluate impact

Source of identified priority	<ul style="list-style-type: none"> Every Sleep Counts approach and materials developed in response to SCR cases and baby deaths across Hants and IOW and informed by the 'Out of Routine' NCSPP
Expected outcomes	<ul style="list-style-type: none"> Greater staff and parental awareness of the safe sleep messaging
	<ul style="list-style-type: none"> Safer sleep materials have been reviewed
	<ul style="list-style-type: none"> Infant safeguarding training is in progress
	<ul style="list-style-type: none"> Posters and information being used in services
Impact measures	<ul style="list-style-type: none"> Reduction in near misses, overlay cases and SUDIS
	<ul style="list-style-type: none"> Staff survey demonstrates awareness

STRATEGIC OBJECTIVES 2021/22 – PART B

2. Improved and effective dissemination and communication channels across IOWSCP Safeguarding Partners and Relevant Agencies through publication of Information Sharing Agreement

Source of identified priority	<ul style="list-style-type: none"> Information sharing and dissemination is both a local and National priority and an area highlighted in audits and reviews
Expected outcomes	<ul style="list-style-type: none"> Publish communications plans for core initiatives and key information dissemination
	<ul style="list-style-type: none"> Partner agencies to incorporate learning from IOWSCP activity into messages and policy for their workforce
	<ul style="list-style-type: none"> Publish an Information Sharing Agreement
	<ul style="list-style-type: none"> Information sharing is full and appropriate in order to safeguard children
Impact measures	<ul style="list-style-type: none"> Learning and practice improvements highlighted by the IOWSCP’s work is effectively disseminated and embedded in IOWSCP agencies as seen via audits and surveys

3. Effective safeguarding of unborn and newly born babies.

Source of identified priority	<ul style="list-style-type: none"> Need for the unborn newborn protocol to be revised identified following case file audits and a staff survey which showed that it wasn’t fully embedded in practice
Expected outcomes	<ul style="list-style-type: none"> Embed Protocol and review training available
	<ul style="list-style-type: none"> Deliver infant safeguarding training and evaluate
Impact measures	<ul style="list-style-type: none"> Case file audit and repeat Staff survey results show that staff know and understand the Protocol and use it to effectively respond to and reduce safeguarding risks to unborn or newborn babies

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GLOSSARY

APPG — All-Party Parliamentary Group
C&F — Children and families
CAMHS — Child and Adolescent Mental Health Service
CAST — Children’s Assessment Safeguarding Team
CCE — Child Criminal Exploitation
CCG — Clinical Commissioning Group
CDOP — Child Death Overview Panel
CERAF — Child Exploitation Risk Assessment Framework
CIN — Children In Need
CP — Child Protection
CPP — Child Protection Plan
CQC — Care Quality Commission
CRC — Community Rehabilitation Company
CRT — Children’s Reception Team
CSA — Child Sexual Abuse
CSC — Children’s Social Care
CSE — Child Sexual Exploitation
CSP — Community Safety Partnership
DAF — Domestic Abuse Forum
DSL — Designated Safeguarding Leads
E&I — Education and Inclusion
EHCP — Education, Health and Care Plan
EHE — Electively Home Educated
FGM — Female Genital Mutilation
HIPS — Hampshire, Isle of Wight, Portsmouth and Southampton Safeguarding Children Partnerships
HSCP — Hampshire Safeguarding Children Partnership
HYPE — Hearing Young People’s Experiences

ICPC — Initial Child Protection Conference
ICS — Integrated Care System
IOWSCP — Isle of Wight Safeguarding Children Partnership
IWC — Isle of Wight Council
JTAI — Joint Targeted Area Inspection
LAC — Looked After Child
LADO — Local Authority Designated Officer
LCSPR — Local Child Safeguarding Practice Review
LIG — Learning and Inquiry Group
LSCP — Local Safeguarding Children Partnership
MASH — Multi-Agency Safeguarding Hub
MET — Missing, Exploited and Trafficked
METRAC — Missing, Exploited, Trafficked Risk Assessment Conference
NPS — National Probation Service
OPCC — Office of the Police & Crime Commissioner
PPN — Public Protection Notice
PQA — Performance & Quality Assurance Group
RAFT — Resilience Around Families
RCPC — Repeat Child Protection Conference
SAB — Safeguarding Adults Board
SCP — Safeguarding Children Partnership
SCR — Serious Case Review
SEN — Special Educational Needs
SSORG — Serious Sexual Offences Reduction Group
TASP — The Association of Safeguarding Partners
VRU — Violence Reduction Unit
WFD — Workforce Development
YOT — Youth Offending Team



BOARD MEMBERS

Name	Organisation	
Angela Anderson	Solent NHS Trust	Joined November
Stuart Ashley	Children's Social Care, IOW Council	✓
Sarah Beattie	National Probation Service	✓
Derek Benson	Independent Chair (Chair)	✓
Ian Berry	Anglican Diocese	✓
Emma Blake	IOW Clinical Commissioning Group	✓
Paul Brading	Education & Skills, IOW Council	✓
Simon Bryant	Public Health, IOW Council	✓
Emma Coleman	IOW Safeguarding Adults Board	✓
Steve Crocker	Children's Social Care, IOW Council	✓
Jennifer Daly	NHS England & NHS Improvement	✓
Amanda Gregory	Regulatory Services, IOW Council	✓
Sue Holman	Special School representative	✓
Mark Howe	Adult Social Care, IOW Council	✓
Sarah Jackson	Hampshire Constabulary	✓
Jane Leigh	IOWSCP	✓
Kathy Marriott	Children's Social Care, IOW Council	✓
Rachel McKernan	Voluntary Sector Forum representative	✓
Karen Morgan	IOW Clinical Commissioning Group	Joined October
Matthew Parr-Burman	Secondary School representative	✓
Robert Pears	Public Health, IOW Council	✓
Darren Rawlings	Hampshire Constabulary	✓
Maggie Sanderson	Primary School representative	✓
Tim Sandle	IOW & Hampshire SCP	Joined September
Nikki Shave	Youth Offending Team	✓
Natalie Smith	Education, IOW Council	✓
Louise Spencer	IOW Clinical Commissioning Group	✓
Lesley Stevens	IOW NHS Trust	Joined December
Barbara Swyer	Community Rehabilitation Company	✓
Sarah Teague	Learning & Development, IOW Council	✓
Alice Webster	IOW NHS Trust	✓
Cressida Zielinski	IOW Clinical Commissioning Group	Joined March

Previous Board members during 2020-21		
Sophie Butt	IOW & Hampshire SCP	Left on secondment - Oct 20
Julia Barton	IOW Clinical Commissioning Group	Joined June - Left Oct 20
Mandy Tyson	IOW Clinical Commissioning Group	Left March 21

Board Member Organisation	No of reps	Attendance at meetings
Adult Social Care	1	4 of 4
Anglican Diocese	1	3 of 4
Children's Social Care, IOW Council	3	4 of 4
Community Rehabilitation Company	1	2 of 4
Education & Skills, IOW Council	1	4 of 4
Education, Isle of Wight Council	1	4 of 4
Hampshire Constabulary	2	4 of 4
IOW Clinical Commissioning Group	3	4 of 4
IOW NHS Trust	1	4 of 4
IOW Safeguarding Adults Board	1	1 of 4
Learning & Development, IOW Council	1	1 of 4
National Probation Service	1	3 of 4
NHS England & NHS Improvement	1	2 of 4
Primary School representative	1	3 of 4
Public Health, IOW Council	2	4 of 4
Regulatory Services, IOW Council	1	3 of 4
Secondary School representative	1	2 of 4
Solent NHS Trust	1	1 of 2
Special School representative	1	3 of 4
Voluntary Sector Forum representative	1	3 of 4
Youth Offending Team	1	3 of 4

Partnership Team: Tim Sandle – Strategic Partnership Manager
 Jane Leigh - Partnership Manager
 Sally Bloomfield - Senior Admin Officer
 Amanda Findon - Senior Admin Officer

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