

ANNUAL REPORT

2022-2023



Bracknell Forest Safeguarding Board

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1. Welcome and Reflections...

....from the Independent Chair and Scrutineer

I am pleased to introduce the Bracknell Forest Safeguarding Board 2022/23 annual report. I have briefly set out a summary of the Board challenges and work undertaken during the past year. More detailed accounts are contained within the annual report.

During the past year, the strategic focus of Bracknell Forest Safeguarding Board has been to continue to embed an ethos that supports an effective 'all-age' approach to work undertaken within the borough. At the same time the Board has maintained an oversight of the statutory requirements in respect to both children and adults, challenging partners to ensure robust local processes remain effective and keep vulnerable individuals safe.

As well as chairing the Safeguarding Board and Safeguarding Partnership, I have established routine meetings with a wide range of senior officers and have continued to receive the necessary assurances through a range of data and relevant reports.

The past year continued to be dominated by the impact of the cost-of-living crisis and the long-term impact of COVID. This has presented all partners, both statutory and within the voluntary sector, with difficult challenges.

Evidence of Effective Partnership Working

The all-age Safeguarding Board was constituted in late 2019. Soon after its commencement it was confronted with COVID-19 and, as set out in last year's report, was able to support the partners during this difficult time. This year it was important to ensure that an all-age board was working effectively and that partners continued to support the approach. To that end a peer review was commissioned.

It concluded:

"The all-age board is a welcome development with partners valuing the opportunity for working together across children's and adults' services and recognising the potential this offers for innovation and improvement."

"....The balance of attention on children's and adults' safeguarding was thought to be managed well."

The review did highlight the need to ensure that disability received the required focus and that the Board needed an improved understanding of the relationship between the Board and supporting subgroups and to

improve the performance management of the strategy. This will be a major focus of the work in the coming year.

I have continued to observe a good partnership ethos but, whilst partners continue to work together, it is evident that the pressures they all face, especially in relation to recruitment and retention, dominates discussions and remains the highest risk to effective safeguarding.

The July 2022 Bracknell Forest OFSTED report provided further independent evidence of good partnership working.

"Relationships with partners have been strengthened and improved, which has had a positive impact on the quality of referral information and early joint working."

This inspection resulted in an 'Outstanding' grading which was a major achievement considering that it followed soon after the disruption of COVID-19.

However, an earlier Ofsted SEND inspection required a Written Statement of Action because of significant areas of weakness in the area's practice. Progress has been made and the Board will continue to monitor the subsequent action plan which is also subject to OFSTED oversight.

Work has continued to progress in the area of transitioning. The findings of the Task and Finish group, through an audit, hearing the voice of the child with the help of the local college and learning from Child Case reviews, has resulted in the production of an action plan and the formation of a Transitional Safeguarding Subgroup. This group will continue to progress this important area of work over the coming year.

During the year two Safeguarding forums where held:

- June 2022: Raising Awareness of Hidden Harm and Support for Carers
- November 2022: Cost of Living

They were online and well attended by staff from all agencies including the voluntary sector.

The Board's Safeguarding Partnership meetings have continued to be well attended and to be a particularly effective mechanism through which learning between agencies has taken place. Through regular meetings of this group, partners collaborated to help mitigate against the increased safeguarding risks during this period.

The Safeguarding Board's Strategic Plan 2023-26 continues to focus on the four Ps and sets out the strategic priorities for the coming year.

The Board has continued to collate information within a risk register that highlights the unique local and regional circumstances and challenges partners have collectively identified. Support for improved information sharing has been underpinned by the Memorandum of Understanding (MoU), which has continued to strengthen working between the Safeguarding Board and other local strategic partnerships:

- Health & Wellbeing Board (HWB)
- Children and Young People's Partnership (CYPP)
- Corporate Parenting Advocacy Panel (CPAP)
- Community Safety Partnership (CSP)

This has been supported by an Operational Managers' group. This approach is designed to enable improved communication between the partnership Chairs, their officers and to provide a more efficient approach that avoids unnecessary duplication. The focus of the MoU is now to identify risks that impact across all partnerships, leading to shared data and a more effective joined-up approach to these risks.

A number of adult and child reviews have been commissioned over the year leading to significant learning promoted across partners. These are set out in the report.

Partners have now been assisted by Supportive Safeguarding Learning Visits. Two have been held to date, one to support the Fire Service and one to look at a local Thames Valley Police Custody suite. Visits are supported by several partner agencies. They have found these visits to be mutually beneficial to the visited organisation and has improved the wider partnership's understanding of each other's roles and pressures. A further visit is planned for Broadmoor Hospital.

Conclusion

This report summarises the wide range of work of the Board during another difficult year. I believe, as the Scrutineer, that the partners are in a good position to continue to deliver safeguarding to the local community, both children and adults. There will be some major challenges, but these have been identified and acknowledged as potential risks.

I would therefore like to thank the many staff working across wide-ranging local services for their hard work and the additional efforts they've made.

Their responses have been outstanding and have ensured that vulnerable people in Bracknell Forest have continued to be supported.

Brian Boxall Independent Chair and Scrutineer

2. The Structure and Purpose of the Safeguarding Board

In 2019 Bracknell Forest Council, Thames Valley Police and Frimley ICB published their multi-agency safeguarding arrangements for children, together with their plans to integrate the requirements of the Care Act to ensure an 'all age' approach to safeguarding the most vulnerable residents within the borough.

A structure to support our work (see figure below) consists of:

- a Safeguarding Board whose membership includes senior decision makers of each of the three statutory partners and who fulfil the statutory requirements in relation to safeguarding both children and adults.
- a Safeguarding Partnership whose membership includes representatives from a wide- range of local partners from statutory and non-statutory organisations.
- Local and regional subgroups and task and finish groups.



The Board has continued to develop following the merger and leads adult and children safeguarding arrangements across its locality. The Board comprises senior leads from statutory partners, has an Independent Chair and Scrutineer (ICS) and meets on a quarterly basis. There has been 100% attendance from safeguarding partners throughout the year.

All partner organisations within Bracknell Forest are expected to prioritise a safeguarding approach that promotes the values of respecting individuals' dignity, individual rights and that aims to help them feel or actually be safe.

Promoting the concept of 'safeguarding being everyone's business' is at the heart of the collaborative philosophy promoted within the work of the Board.

The partnership member organisations are currently:

Berkshire Healthcare NHS Foundation Trust	Frimley Clinical Commissioning Group	Representative of Faith & Belief Group
Berkshire Women's Aid	Frimley Health Foundation Trust	Royal Berkshire Fire and Rescue Service
Bracknell Forest Council	Headteacher representatives	Royal Military Academy
Bracknell Forest Public Health	Involve Community Services	Silva Homes
Bracknell Healthwatch	Look Ahead	South Central Ambulance Service
Bracknell & Wokingham College	National Probation Service - Bracknell	Thames Valley Police: Local Policing Area/ Protecting Vulnerable People
CAFCASS	Police and Crime Commissioners Office	The Ark
Department of Work and Pensions	Public Protection Partnership	West London Mental Health Trust

3. How to Report Concerns

If you are worried about a vulnerable child or adult, it is important that you report your concerns to the appropriate people, as soon as possible. This will help to ensure the safety and well-being of the individual is put first.

In an emergency where there is a threat to life or serious injury **call 999**, or if you are concerned that a crime has been committed, **call 101**.

I'm worried about a child

If you're concerned about the safety and wellbeing of a child right now, you should phone:

- 01344 352005 (8:30am to 5pm, Mon-Fri)
- 01344 351999 when office is closed.

In an emergency, or if you believe a child is at immediate risk of harm call the police on 999.

Before making a referral to MASH consider if the child or young person's needs can be met by services from within your own agency, or by other professionals already working with the family. Read their advice for professionals and complete the safeguarding referral form.

Early Help Pathway

Some children may require early help where their needs are not clear, or not being met. Complete this <u>form to request support</u>.

Parents seeking behavioural, emotional or mental health support for their child should also use this referral form to request help.

If you want more information on 'what is child abuse?' then the NSPCC provides information on the different types of abuse, spotting the signs and the effects of abuse.

I'm worried about an adult

If you need guidance or advice, you can call:

- Adult Social Care on 01344 351500.
- 01344 351999 when office is closed.

In an emergency, or if you believe someone is at immediate risk of harm call the police on 999.

To alert us about adult abuse, fill in this safeguarding concern form.

The following organisations can give more information and support:

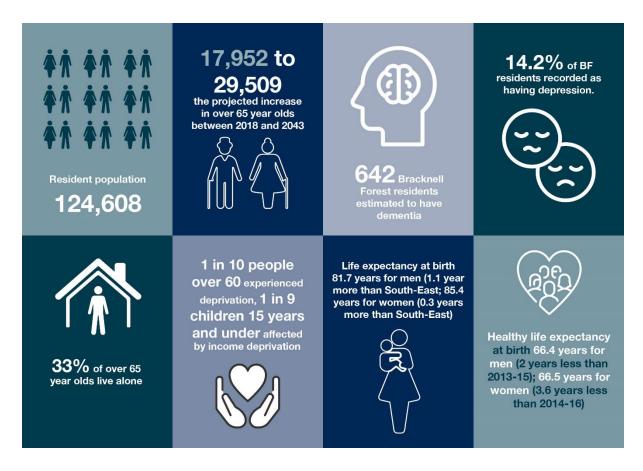
- AgeUK
- Berkshire Women's Aid- provides support to both male and female victims of domestic abuse (call: 0118 950 4003)
- Mind
- <u>Public Concern at Work-</u> free confidential advice for people who have witnessed wrongdoing at their work and need advice about whistle blowing (call: 020 3117 2520)
- Social Care Institute of Excellence
- Victims First

 provide free support
 to any victim of any crime in
 Berkshire, regardless of whether the
 crime has been reported to the
 police or not (call: 0300 1234 148)

4. Bracknell Forest Demographics

Bracknell Forest is a unitary authority area in Berkshire. The major urban area is situated in the centre of the borough, with the settlements of Sandhurst and Crowthorne to the south, Binfield to the north and North Ascot to the west.

Historically, Bracknell Forest has had a young population compared to the national age profile with a smaller proportion aged 50 years or older (34.7%) compared to the South-East (39.3%) and England (37.8%) but there is an increasing proportion of older people.



Sources for the data used are referenced below.1

^{1. &}lt;sup>1</sup> Census 2021 Age by single year

^{2.} Population projections for local authorities: Table 2 - Office for National Statistics

^{3. &}lt;u>Public Health Profiles: Dementia: QOF prevalence (all ages) 2021/22</u>

^{4.} Public Health Profiles: Depression: QOF prevalence (18+ yrs) 2021/22

^{5.} Public Health Profiles: Mental Health: QOF prevalence (all ages) 2021/22

^{6.} Census 2021: Living arrangements by age - Household reference person

^{7.} Public Health Profiles: Life expectancy at birth (male, 3 yr range) 2018-20

^{8.} Public Health Profiles: Life expectancy at birth (female, 3 yr range) 2018-20

^{9.} Public Health Profiles: Health life expectancy at birth (male) 2018-20

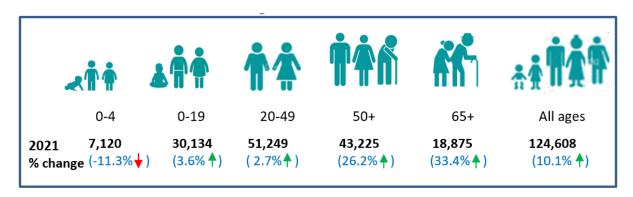
^{10.} Public Health Profiles: Health life expectancy at birth (female) 2018-20

^{11.} IMD - Income Deprivation Affecting Older People Index (IDAOPI) - score (%) in Bracknell Forest

Population Statistics from 2021 Census²

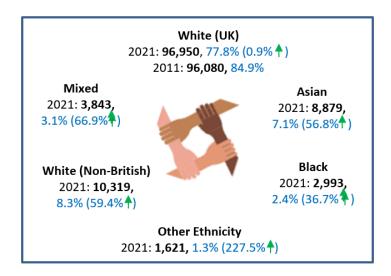
Age Distribution

There has been a 10% increase in the population in Bracknell Forest which can be seen predominately in the over 50s age groups. 0–4-year-olds have seen a decrease (11%) in their numbers.



Ethnic Composition

While the 2021 census shows there are more UK White British living in Bracknell Forest (96,950) the percentage has decreased to 78% (from 85%).



Disability (under Equality Act 2010)

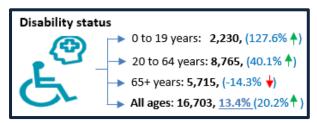
The Census 2021 changed the question people were asked to be more closely aligned to the definition of disability in the Equality Act 2010, where an individual is defined as disabled if they have a physical or mental impairment that has a substantial and long-term negative effect on their ability to carry out normal day-to-day activities.

The overall proportion of people that are disabled across England and Wales (E&W) decreased in 2021 although the number of households with at least

² Note that **% change** under age distribution and households composition refers to **% change of population size** between 2021 census and 2011 census.

one member that was disabled increased by 6.1% to 24.8 million. The census data on disability within households show that in Bracknell Forest:

- in 74% of households, no people are disabled (compared to 68.0% E&W)
- 21% of households include one disabled member (compared to 25.4% E&W)
- in the remaining 5% of households, two or more people are disabled within the household (compared to 6.6% E&W)

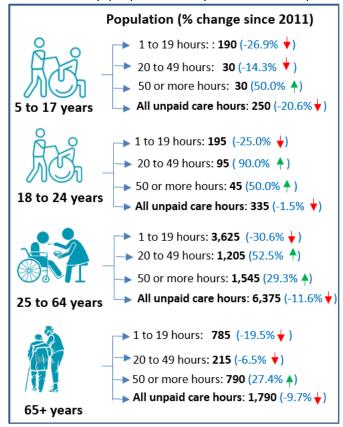




Provision of unpaid care by age and hours

The Census 2021 results included data about unpaid carers. Unpaid carers are people who look after, or give any help or support to, anyone with long-term physical or mental health conditions or illnesses. They could also offer support to anyone with problems related to old age, excluding anything they do as part of paid employment.

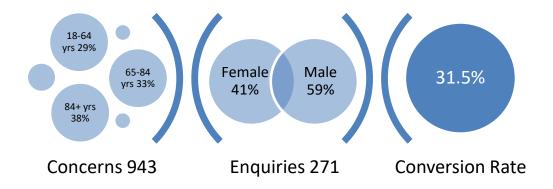
The provision of unpaid care is closely related to the age of a population. In a more elderly population, you would expect more unpaid care provision.



5. Safeguarding Activity

Safeguarding Adults Data 2022-23

A safeguarding concern is any issue raised with Adult Social Services, which is identified as being about an adult safeguarding matter. If the concern meets the criteria for safeguarding (as defined by the Care Act 2014), a Section 42 Enquiry¹ is raised, which involves fuller investigation and formal intervention.

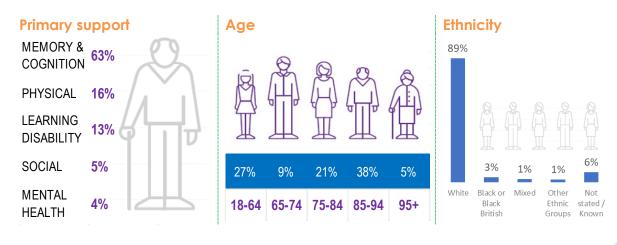


During the period of 2022 - 2023, there were 943 reported concerns of abuse, which represents a 4.8% increase compared to the previous year (902).

The number of enquiries that commenced under Section 42 during the year experienced a substantial increase from 108 to 271, representing a significant rise of 151% from the previous year.

During the same period a total of 638 individuals were involved in Safeguarding Concerns. 224 individuals were specifically involved in Section 42 Safeguarding Enquiries, while 25 individuals were involved in other safeguarding enquiries.

Reasons and characteristics of those involved in Safeguarding Enquiries:



¹ https://www.berkshiresafeguardingadults.co.uk/bracknell/procedures?procId=1439

73% of Safeguarding Enquiries related to people aged over 65 and 27% relate to working age adults (18-64).

89% of Safeguarding Enquiries involved people who identified themselves as White and 5% related to people who identified themselves as being part of the Black, Asian and Minority Ethnic (BAME) population. This is an increase from last year, when 5% of people indicated they were from the BAME community and is closer aligned to the 2011 Census. In 6% of cases ethnicity was refused, not known or not stated.

For comparison, the total number of Safeguarding Concerns per 100,000 adults for England (2021-22) was 1,218 and in Bracknell Forest (2022-23) was 975. The total number of section 42 enquiries per 100,000 adults was 364 in England (2021-22) whereas in Bracknell Forest it was 280 (2022-23).

The most common type of risk in Section 42 enquiries that concluded in the year was Neglect and Acts of Omission, which accounted for 49%, followed by Physical Abuse and Self-neglect.

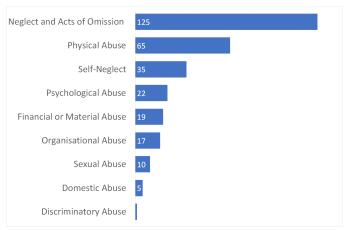


Figure 1 Concluded Enquiries by Abuse Type 2022-23

The majority of risks were located in their own home (40%), followed by residential homes. Where a risk was identified, 96% was reduced or removed.

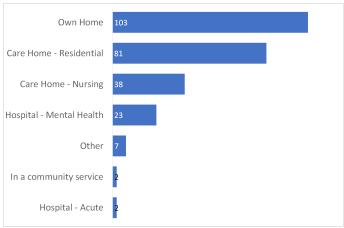


Figure 2 Concluded Enquiries by Location 2022-23

34% of concluded enquiries found the person at risk had lacked mental capacity, of these 84% had support provided by an advocate, family or friend.

In 42% of concluded Safeguarding Enquiries, the person at risk was asked and expressed what their desired outcomes were. Of these, 92% had their outcomes fully or partially achieved in the safeguarding enquiry. In 21% of concluded Safeguarding Enquiries, the person at risk was asked but did not express what their desired outcomes were.

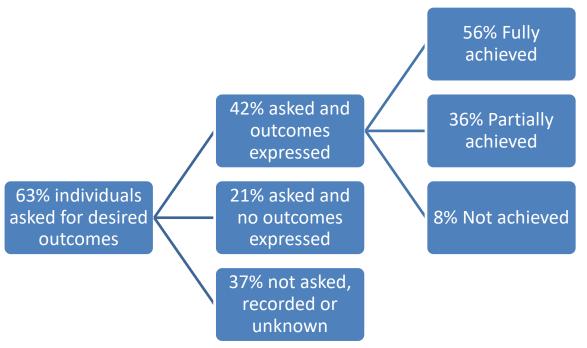


Figure 3 Desired Outcomes for Concluded S42 Safeguarding Enquiries



Safeguarding Children Data 2022-23

1. Early Help Services

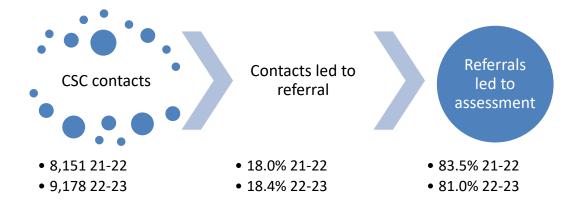
Between 1 April 2022 and 31 March 2023, Bracknell Forest had 1823 children referred to Early Help, which equates to 894 families. This is a 13% increase from the previous year (2021-2022). Schools are consistently the largest referrer at 36% which highlights their understanding of thresholds.

Early Help now have a more robust triage system in place when a family is referred, with a member of staff working as a full time Duty Early Help Professional. The Early Help triage system has been further refined to include a RAG rating and risk assessment which is applied to all families at point of referral. This ensured families were offered the correct support at the right time and significantly reduced the waiting list for family work.

The Early Help duty system is effective; this has been highlighted by a reduction in the percentage of Early Help referrals progressing to Early Help assessments (from 59% to 44%) and a 14% increase of families signposted to more appropriate services (from 20% to 34%).

2. Children in need of protection

There has been a sustained increase in initial contacts to Children's Social Care with 9,178 in 2022-23, an increase of 13% from the previous year (21-22) and 24% increase from the year before that (20-21). Less than a fifth of contacts led to a referral but from those 81% led to an assessment. There is work taking place to make the thresholds guidance clearer, audit the quality of contacts and referrals and rejuvenate the Early Help Assessment to ensure that we continue to deliver right services at the right time for the right children. The top referrers came from schools (29%), the police (23%) and local authority services such as adult social care (20%)



Nearly a quarter (23%) of referrals had a previous referral within the last 12 months compared to 19% the previous year.

Children subject to a Child Protection Plan

There were 158 children with a child protection (CP) plan at the end of March 2023 which is the same as March 2021 but lower than March 2022 (185). The reduction

was seen predominately for those recorded as needing protection from emotional abuse. The rate per 10,000 children was higher in Bracknell Forest (53.9 in Mar-23) compared to the national (42.1 Mar-22) and South-East (43.1 Mar-22).

There were more boys subject to a CP Plan across all age groups except for 16+ where there are slightly more girls. Many of the older children are known to MACE panel and profiling of this cohort takes place within this work.

The majority of children subject to a CP Plan are White British (88%) which is higher than the national figure (73% Mar-22). It is important that training for all organisations continues to promote the identification of children across all ethnic groups.

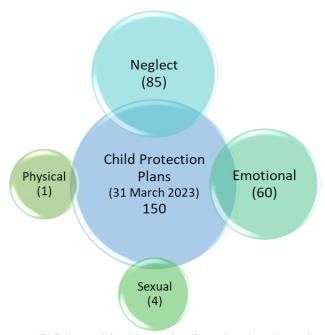


Figure 4 Children subject to protection plans by abuse type.

Children Looked After

There were 84 children who became looked after during 2022-23 and at the end of March 2023 there were 157 children looked after. This compares to 137 the previous year. The increase has been mainly in adolescent males and Unaccompanied Asylum-Seeking Children through the mandatory National Transfer Scheme. The rate per 10,000 remains lower than the national and South-East averages.

A high proportion of children looked after are of a white background (73%) but is becoming more diverse.

Placement stability is an important part of ensuring that care is a positive experience for children looked after and key if they are to recover from the trauma they have experienced prior to coming into care. Outcomes for children are generally better when they have stability and the aspiration is for children to move placements as infrequently as possible as this can impact upon their educational achievements, peer relationships and their access to services. Long term placement stability has

increased in Bracknell Forest (65% compared to 63.5% previous year)² although some children (11.5%) in Bracknell Forest had multiple moves³. Some of the reasons for a placement change include:

- children stepping down from residential to live within a family environment of foster care.
- moving to live with adopters.
- moving to long term foster care.
- needing to move in line with their care plan.
- gang activity, missing episodes and county lines (as a move may be needed to manage the risk factors although this affects a small number of children).

Where a placement move is unavoidable, multi-agency discussions take place at the various Life Chances Team meetings to ensure support is in place from the most appropriate person.

There were three children recorded as being privately fostered at the of March 2023 compared with one the previous year. The local authority has effective systems in place to monitor those in these arrangements, and there is ongoing work with partner agencies to ensure that notifications are made. The annual report was completed and presented to the Safeguarding Board.



² Calculated by taking the number of children under 16 who have been looked after for at least 2.5 years (30 months) and have been in the current placement for at least 2 years (24 months) divided by the number of children under 16 who have been looked after for at least 2.5 years (30 months).

³ 3 or more placements during the year.

6. Learning from Reviews

The Case Review subgroup (CRSG) meets on a quarterly basis, with the co-Chairs also engaged in additional routine management meetings to oversee the progress of cases. The focus of the CRSG has been to ensure that all the requirements of the regulations in respect of Rapid Reviews, Safeguarding Adult Reviews and Local Child Safeguarding Practice Reviews are fully met. Where cases do not meet the threshold for a statutory review, members of the panel are able to recommend partners engage in single agency activities and/or consider the merits of joint learning approaches. These seek to identify areas of good practice/effective systems as well as areas requiring improvement.

During 2022-23 the Board continued to refine its 'all-age' Rapid Review (RR) process to offer an effective response that enables partners to share learning swiftly and also an understanding of the adequacy of their safeguarding responses. While it is understood that organisations may be required to undertake internal enquiries following significant incidents, the Board has clarified its expectation that under such circumstances they must not delay the notification of RRs. In addition to the steps taken to strengthen our local RR responses, the Board's Business Unit has worked to help facilitate a Task and Finish group that explored the feasibility of a pan-Berkshire process to ensure a consistent approach being undertaken across the region. This remains work in progress.

During the year, a total of seven rapid reviews were conducted and considered learning in respect of both children and adults.

The CRSG has continued to ensure learning is shared directly with designated staff located within lead agencies and through the work of the Board's Learning and Development Forum (BFLDF), a wider range of partner organisations engaged in the dissemination of key messages emerging from reviews.

In addition, the specific learning from each review undertaken is made available to members of the public via the <u>Board's website</u>, with targeted learning events held online in order that a wider professional audience is able to be engaged in helping further disseminate learning. Where appropriate, reports are shared via the <u>NSPCC portal</u> and the <u>National SAR Library</u>. To support the onward promotion of findings from the reviews undertaken, the Business Unit has ensured that a dedicated learning brief is provided to attendees and is available on the Board's <u>website</u>.

Safeguarding Adult Reviews

During 2022/23 Bracknell Forest Safeguarding Board completed two Safeguarding Adult Reviews as required under <u>section 44 Care Act 2014.</u>

The following cases were completed during this period and due to concerns for the wellbeing of family members the Board decided that they should both be published anonymously. As a result, the summaries below have been restricted in detail.

Case 1 involved the tragic death of a young woman who was in receipt of a range of services and who had been the subject of safeguarding measures at different points during her childhood. Prior to her death, the young woman took a very large number of prescribed drugs, probably with the intent of taking her own life. The review noted that she had taken overdoses on several occasions and attempted to end her own life on a number of other occasions. As a child she reported she had been sexually assaulted and over time went on to make further allegations of other sexual assaults. She subsequently began to self-harm, reported hearing voices and was later detained by police. By the time of her death she had been detained on several occasions. It was noted that she went on to report physical health complaints that required medical/hospital treatment. In the coming years she experienced numerous changes of placement/address.

The review made the following recommendations, which are subject to on-going implementation:

- The continued development of foster placements which can provide a comprehensive and tenacious service to children and young people who have experienced complex trauma.
- The improvement of policy and practice in relation to managing the risk of harm and safeguarding of young people who are transitioning into adulthood.
- The development of alternative practice approaches to adults at risk of harm where there are concerns about the adult's ability to make decisions when they have experienced complex trauma.
- The strengthening of procedures that address the needs of young people with complex trauma histories can be prioritised and given greater consideration.



Case 2 involved the significant injury to a woman perpetrated by her partner in their home at a time when their children were present. The attack was prolonged and life-threatening. The review identified that such violence and coercive control had been a longstanding feature of her marriage. It was also noted that her husband had previously been convicted of offences against children.

The review made the following recommendations, which are subject to on-going implementation:

- Training on safeguarding adults and the multi-agency Risk Framework should be provided to relevant practitioners.
- Agencies to review their guidance on professional curiosity.
- A multi-agency audit should examine safeguarding referrals to the Local Authority and the use of the multi-agency Risk Framework.

In summary, both of the above reviews have helped highlight the importance of the following issues:

- Long term exposure to violence within the family.
- Impact of substance misuse and associated criminality.
- Effects of pandemic on individuals and service provision.
- Effects of long-term trauma resulting in serious mental ill-health.
- Oversight of medications prescribed.
- Vulnerability of care leavers during transition from children to adults' services.

Local Child Safeguarding Practice Reviews (LCSPRs)

Working Together 2018 sets out the statutory requirements for practice reviews and also highlights the learning that can be achieved through an initial analysis of cases that may not meet the requirements for a formal LCSPR. During the period covered by this report the Bracknell Forest Safeguarding Board (BFSB) completed one LCSPR (see Case 1 below for details) and commissioned one other. In addition, BFSB commissioned a substantial Local Learning Review involving several children/young people. This review is on-going, and details will be reported within the Board's annual report 2023/24.

The following case was completed during this period and due to concerns for the wellbeing of family members the Board decided that it should be published anonymously. As a result, the summary below has been restricted in detail.

Case 1 involved a number of children who witnessed serious domestic abuse perpetrated by their father. At the time of the attack, the children were subject to child protection plans and since their birth had been known to safeguarding services.

The following recommendations are subject to on-going implementation:

- Coercive control should feature as a significant area within training provided to practitioners.
- Consideration should be given by practitioners to the role and use of the advocacy service.
- A multi-agency audit should be conducted to ensure robust arrangements for managing safeguarding adult referrals.
- Relevant professionals receive training on safeguarding adults' procedures and the use of the Multi-agency Risk Framework.
- Substance misuse services should review structures to ensure they are sensitive to issues of gender.

Feedback on learning from partner organisations

Although not directly linked to the above reviews, the following partner organisations have demonstrated how they have implemented important learning into their work.

- Berkshire Healthcare Foundation Trust have increased their awareness
 of the multi-agency risk framework tool and improved recording of
 carers. New staff must do clinical risk training and staff are encouraged
 to discuss complex cases.
- Bracknell Forest Council holds learning events and engagement in relation to serious case reviews – ensuring opportunities for dissemination of learning and opportunities for practitioners to reflect. They have also made specific changes to practice and services.
- CAFCASS described their internal process which alerts senior leaders to incidents relating to families to whom they are working with or recently involved.
- Silva Homes have tightened procedures around reporting of domestic abuse and introduced mandatory training for housing officers in this area.
- The Ark Trust made Unconscious Bias training mandatory for all volunteers, as it is for staff.
- Involve Community Services have promoted activities and primary messaging from the Board.

 National Probation Service have implemented changes as a result of learning from their reviews such as DA and child safeguarding checks.

Some partners are incorporating learning from a much wider area:

- The West London NHS Trust run a monthly meeting that carefully reviews the progress of actions from reviews and subsequent practice changes are then incorporated and disseminated.
- Frimley NHS ICB have been involved in an increasing number of reviews across the ICS area and learning has been disseminated across a wide number of themes.
- SCAS incorporate learning from 24 LAs and Boards into their policies, practices and processes. They have been working to develop staff knowledge around the bruising protocol and unexplained injuries, including a detailed training package.
- TVP officers have received additional training days.
- FHFT detail how they have contributed to Berkshire Partnership Boards.

Through the work of the CRSG the Board has strengthened its monitoring of the actions allocated to partners in order that the findings from reviews result in long-term improvements. Further work is in progress to consolidate this with the work of the Quality Assurance Subgroup. With the support of the Independent Chair and Scrutineer, there will an increased focus on the impact of these activities.

7. What have we done to support our strategy?

During 2019/20 the Safeguarding Board developed its <u>strategic plan for 2020 - 2023</u>. Progress against the action plan is contained in Appendix 1.

The plan adopts a systems approach to ensure approaches to statutory safeguarding responsibilities and is underpinned by the following strands:

Partnership

We will seek assurance about the effectiveness of local partnerships and collaborations to safeguard people

Prevention

We will work to ensure partners work together to prevent all forms of harm recognising the long-term consequences

Protection

We will ensure a robust outcome-focussed approach to protecting people at risk of abuse and neglect

People

We will seek assurance that people who use services are involved in safeguarding processes and the work of the Board

The overarching strategic direction for 2020 – 2023 is:

"Working together, and as individual partners, we will quickly identify, understand, prioritise and respond to risks and issues arising throughout our local community, particularly those caused or intensified by the impact of Covid 19 and the increased cost of living, as captured in the Board's risk register."

Oversight of the plan is provided by the Board and Partnership and subject to scrutiny by the ICS.

Partner Contributions to the Strategic Plan

Partners were asked how their safeguarding policies contributed to the Board's Strategic Plan (see full responses in appendix 2):

 Berkshire Healthcare (BHFT) engaged in multi-agency working groups and sent senior representation to the Board to ensure strong partnership working. The Trust run on-call advice lines for staff for both safeguarding children and safeguarding adults to ensure staff have quick access to advice.

- Bracknell Forest Council make a key contribution to the Strategic Plan.
 They describe partnership working as being at the centre of their
 approach, including many services that are integrated and have colocated teams. All services are working towards being proactive to
 reduce any safeguarding concerns that are often encountered. All
 services are strengthening their safety culture to empower staff, people
 with lived experiences and families to raise any safety concern without
 fear or blame. They continue to promote a Safety culture by learning
 from and reviewing feedback from people with lived experiences,
 safeguarding, serious incidents, and complaints.
- CAFCASS described their safeguarding policy and strategic risks including growing caseloads, retention and recruitment issues and maintaining quality of work with children.
- FHFT have given details of their safeguarding commitment including a Safeguarding Exec Group which aims to ensure that systems and processes are in place to safeguard vulnerable patients.
- Frimley NHS ICB their priorities match the Board's 4Ps. They have described the workstreams that have contributed to improvements i.e MCA, campaigns, community safety, work with care home and domiciliary providers, training.
- Involve continues to promote safeguarding messages to its sector partners and provides an increased number of safeguarding training sessions.
- National Probation Service have implemented system to track child safeguarding enquiries to inform their assessment and risk of harm to others.
- SCAS describes its work in each of the 4Ps such as increasing its safeguarding team to build relationships with Boards, engaging in a broad range of preventative activities, and training program.
- Silva Homes also describe their work under the 4Ps such as regular attendance at our Partnership meetings, MARAC, CSP and CP meetings, implementing audit recommendations and training.
- The Ark Trust run programmes of prevention activities, working with BU to capture voice of the adults with care and support needs, work with partner organisations to deliver joined up services and promote safeguarding campaigns.
- TVP (LPA) have problem solving team with safeguarding officers that work in partnership. They have a safeguarding toolkit /flowchart to address inconsistencies across LPAs. They have exploitation hub for advice.

8. Activities of the Board and its Subgroups



Safeguarding Board

- Assurance received:
 - from TVP regarding local responses made to Child Q National Review and strip searches – status in Bracknell Forest.
 - o From TVP regarding Police attendance at CP strategy meetings.
 - from the CCG regarding the Ockendon review recommendations for maternity services.
- The Board approved:
 - o the Pan Berks Allegations Management Framework (Adults).
 - o the Annual Report for 2021-2022.
 - Terms of Reference and Constitution for Bracknell Forest Safeguarding Board and Safeguarding Partnership were reviewed and updated.
- Themed discussions were held on:
 - o Exploitation & serious violence.
 - o The impact of Covid-19.
- Received regular updates from:
 - The Case Review, Quality Assurance and Communication,
 Engagement & Prevention subgroups and monitored their work.
 - Those responsible for overseeing the SEND action plan following an Ofsted inspection.
 - o Those responsible for overseeing the SCAS improvement plan.
 - Board partners.
- Were informed of:
 - o from Early Help Partnership's strategy.
 - o regarding CQC LA assurance framework.
 - The Ofsted inspection and judgement of CSC.

- The National Safeguarding Panel's updates in response to the National review on children with disabilities and complex needs and received assurance regarding children placed outside of BF.
- Care Governance concerns regarding two care homes and one GP practice in Bracknell Forest.
- Took part in a peer review of the work of the Board and following its report formulated an action plan for necessary improvements following the report.
- The Board met quarterly.

Safeguarding Partnership

- Themed discussions were held on:
 - o Neglect
 - "How will we ensure partners work effectively together to develop mutual understanding of each other's roles and functions?"
 - Evaluating partners' work to prevent harm and offer of early help.
 - o Contextual safeguarding.
 - LPS & MCA, following a presentation from Frimley ICB and local authority.
- Received regular updates from the Board that included details of work undertaken by
 - The Case Review, Quality Assurance and Communication, Engagement & Prevention subgroups.
 - o Partner agencies current campaigns being undertaken/planned.
 - o 'Prevent'.
- Presentations providing assurance / information sharing:
 - o CAFCASS and how feedback is received from children.
 - Healthwatch regarding their Annual Report.
 - CQC on the 'State of Care' report.
 - CAFCASS about the work taking place linked to learning from case reviews.
- Informed all members of the Pan Berks Allegations Management Framework.
- Regular review and updating of the Risk register.
- Met every six weeks.

Case Review Subgroup

Monitored action plans for six reviews.

- Undertook one local learning review.
- Produced learning briefs and held learning events linked to completed reviews.
- Provided three learning sessions on Fabricated, Induced Illness (FII).
- Provided learning sessions on 'Contributing to a review'.
- Reviewed the work of the subgroup against the SCIE Quality Markers.
- Met quarterly.

For further, more detailed information on case reviews and the work of the CRSG undertaken during the year please see section 6.

Communication, Engagement and Prevention (CEP) Subgroup

- Worked with partners to support and promote the carers' project to capture voices and lived experience.
- Continued to seek and establish links with under-represented communities in Bracknell Forest.
- Promotion of 'What good looks like' leaflets.
- Promoting safeguarding risk and referral routes.
- Maintained communication networks and social media posts.
- Organised and ran two Safeguarding forums 'Hidden harm and safeguarding support for cares' and 'Safeguarding risks in a cost-ofliving crisis'.
- Produced newsletters.
- Supporting local safeguarding campaigns.
- Begun work on revised Safeguarding Board website.

Quality Assurance (QA) Subgroup

- Monitored action plan following review of quality of safeguarding referrals and concerns.
- Received presentations from partners on their QA processes.
- Analysed the annual adult self-assessment returns from partners.
- Agreed the QA framework.
- Analysed data from core safeguarding pathways for children and adults.
- Undertook multiagency audit of transitional safeguarding cases.
- Supported the work to merge the annual adult self-assessment into the pan Berks S11 process.
- Undertook supported learning visit to TVP custody suite.

- Began work on the Performance Framework to address peer review recommendations.
- Met quarterly.

Transitional Safeguarding Task and Finish Group

- Received case studies and "lived experiences" of people.
- Created an action plan to address recommendations of the transitional safeguarding multi agency audit.
- Researched partners approaches to transitional safeguarding.
- Decision made to make this a substantive subgroup.

Training and Professional Development Forum

- Continued to act as a forum to support partners safeguarding training.
- Received presentations on partner safeguarding training programmes Including support provided to staff affected by issues discussed.
- Held discussions on approaches to evaluating impact of training.
- Facilitated discussions on how case review learning could be incorporated into training programmes.
- Decision made to make a substantive subgroup.

9. Peer Review

A peer review of the all-age Safeguarding Board arrangements took place during 2022/3 to evaluate the effectiveness of the approach, the impact of the Board, and identify opportunities for improvement. The methodology included a desktop review of relevant documents, online meetings with all BFSB Board members, subgroup chairs and the Business Unit, observation of both a Board and Safeguarding Partnership meeting and email invitations to all partners to provide written feedback directly to the reviewer to a short list of SWOT based questions.



The findings of the review were:

- The all-age board is a welcome development with partners valuing the opportunity for working together across children's and adults' services and recognising the potential this offers for innovation and improvement. Overall, all-age focus was seen as 'the right thing to do'.
- The Independent Chair and Business Unit received widespread praise for their support to partners and in progressing the all-age board. The balance of attention on children's and adults' safeguarding was thought to be managed well. Of more concern was the breadth of the scope, now meaning that some areas across all ages may not get the required focus, notably disability and mental health safeguarding issues.
- Partners were keen to make sure that BFSB continues to improve its reach in terms of diversity and attention to issues of equality.
- The area which was the focus of most concern and questions related to performance management of the strategy and to the links between the architecture of BFSB groups and their respective roles in the shaping, delivery and assurance of the strategy.
- As demand pressures grow across all services, with resulting impacts on workforce and budgets, partners were acutely aware of the need to be able to evidence the value of the partnership and to ensure that the purpose and desired outcomes of all meetings and work was clear and measurable.

'The All-age Board was seen as 'the right thing to do'

An action plan has been implemented to address the recommendations of the peer review:

- In reviewing the new strategy, to ensure that disability, mental health
 and diversity issues are represented as areas of priority and that there is
 evidence of co-production in developing focus, aims and desired
 outcomes.
- The all-age board is well placed to take a regional and national lead now in areas such as transitional and contextual safeguarding. Partners should identify how to now build on their successful foundation of bringing together the children's and adults' partnerships by assuring, evidencing and communicating the implementation of learning from shared case reviews to reshape local service delivery for improved outcomes.
- Partners should review BFSB's performance framework to ensure that strategy, delivery, assurance and outcomes are understood and visible to all.
- Review and clarify the respective roles, responsibilities and communication channels between Board, Partnership and subgroups in shaping, delivering and assuring strategic aims. Consider holding strategy and assurance workshops together to improve understanding and ownership of the work.
- Review the funding of the Board, in order to ensure that ambitions for priorities in local partnership working for safeguarding can be maintained and sustained.
- Through the Communications, Engagement and Prevention subgroup, identify a wider range of tools, such as greater use of social media, for more inclusive communication to all areas of both the workforce and community.

The impact of the work to address the recommendations will be reported in next year's annual report.

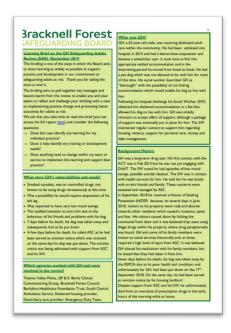
10. Communication, Safeguarding Events and Training

The Business Unit shared communications to partners by newsletters, social media and emails via the Communications, Engagement and Prevention (CEP) Subgroup highlighting:

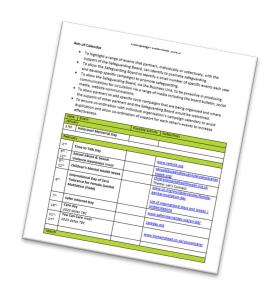
- Local campaigns
 - Water Safety
 - 'Who's in Charge?'
 - Safe Sleep
 - Dog Safety
 - Carers Week
- National campaigns

A safeguarding calendar was created to help track national events that all partners could acknowledge and share. Through spreading knowledge, it is hoped to strengthen the impact of these events for everyone in the borough. Some examples are:

- Mental Health Week
- Safer Internet Day
- Carers Week
- Child Safety Week
- National Safeguarding Day
- Information regarding reviews



At the end of every case review learning events are held. Professionals are invited to hear about the circumstances of that particular review and the learning that emerged from it. A learning brief is produced to support these events. The brief is disseminated widely throughout partners organisations as well as to the attendees of the sessions. It is also shared on the Board's website.



Information leaflets produced by the Board

The CEP Subgroup has been involved in producing 'What Good Looks Like' leaflets which have been disseminated both electronically and in hard copy. They have also been translated into Ukrainian and Nepalese.

We have also produced a 'Supporting People to be Safe' leaflet and continued to share our safeguarding posters for children and adults.



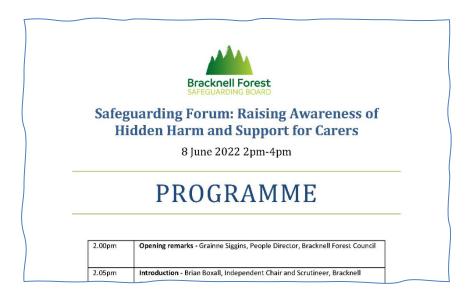




Safeguarding Events

The Safeguarding Board held two Forums during the year.

The first forum was held in June 2022. This online event helped attendees learn about hidden harm for families living with dementia, child to parent abuse and those struggling with substance misuse and hoarding issues. There was also information about carers and where help is available.



The second forum was in November 2022 on the cost-of-living crisis which was expected to increase safeguarding risks to vulnerable children and adults. This online event was in collaboration with Safeguarding Boards across East Berkshire (Bracknell Forest, Windsor and Maidenhead, Slough) to look at how agencies can help prevent the detrimental impact of increases to the cost of living and identify what support is available to help those that need it.



Social Media

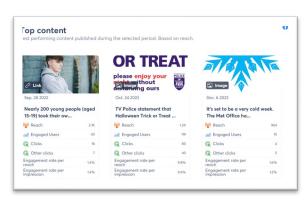
Facebook has been the primary Social Media vehicle during 2022/23 although Twitter was used regularly, and a new Instagram account was set up. During this year 99 posts were published on Facebook which had 567 engaged users.







Some of the top posts included information around suicide in young people, cuckooing, leaving a child unattended in a bath and safeguarding training.





Learning and Professional Development

As previously referenced in section 6 of this report (Learning from reviews), during the year the Safeguarding Board has supported multi-agency learning in respect of the following topics/areas:

- Multi-agency Risk Framework training
- Developing awareness of Fabricated or Induced Illness (FII)
- Learning events following publication of SARs and LCSPRs, including sharing of relevant learning briefs
- Training for staff in preparation for contributing to a safeguarding review (adults & children).

Partner Training

Partners were asked to provide details of their safeguarding training during 2022-23.

In Bracknell Forest Council, Berkshire Healthcare (BHFT), Broadmoor, Frimley Health (FHFT), Frimley NHS ICB, TVP, SCAS, Involve, Silva Homes, The Ark, CAFCASS and NPS staff are expected to complete some level of adult and child safeguarding training (usually e-learning), many as part of their induction. Most have staff attending domestic abuse training and there is a wide range of other topics such as:

- Child sexual exploitation
- Modern slavery
- Prevent

Many organisations also have staff attending Level 2 and Level 3 safeguarding training.

The Board also asked if partners have arrangements in place to ensure all relevant frontline practitioners complete training on:

- Coercive control
- Mental Capacity Act
- Trauma Informed Practice
- Unconscious Bias / Cultural competence

All partners have these as part of their training programme except for trauma informed practice where the picture is more mixed. Broadmoor Hospital continues to develop its Cultural Competence Practice Framework, and this is led by the BAME transitional lead role.

CAFCASS, ICB, SCAS and Silva Homes stated that they captured evidence of impact of safeguarding training on practice. NPS can evidence an increase in the number of domestic abuse checks and child safeguarding checks.

Voice and Lived Experience of Children and Vulnerable Adults

The Board strives to hear about the lived experience of children and vulnerable adults by work that is being done with partners and it continues to be a priority within the Strategic Plan.

Multi-agency audits continue to demonstrate that there is quality direct work with children and vulnerable adults and their voices are heard, although in some children's cases it was unclear if the views recorded came directly from the child or were the practitioner's interpretation. As a result, the importance of advocacy is being highlighted with the audit improvement plan.

The Quality Assurance Subgroup received assurance that the multi-agency Risk Framework was being applied effectively to ensure robust person centred, co-produced plans in line with the principles of making safeguarding personal, for people experiencing risk in their lives. The Safeguarding Partnership received assurance of the effective application of thresholds also ensured child centred co-produced plans.

Further co-production work is developing with a Carers Roadshow being implemented to capture and share experiences of carers and the cared for.

Some partners reported on consultation and feedback that they had undertaken during 2022-23.

Bracknell Forest Council

Bracknell Forest Council are committed to listening to the voice of children and young people and actively seeking their views not only around the decisions that will affect them directly but also to help improve the services that support them. They do this through a variety of means including SiLSiP

(Say it Loud Say it Proud), their Children in Care Council (CICC), meetings and events, Care Leavers Events, their new Care Leavers Council and through consultations. They have been involved in staff recruitment and training for staff.

Bracknell Forest Council consulted on their All-age Integrated Carers Strategy and sent out a survey by email and post to 728 carers, 242 parent carers, 194 parents of young carers and had 275 returns. They also visited 10 carers groups, spoke to 150 carers and held a focus group in a school. They spoke to professionals who provide carers services in the community, social workers and partners in the NHS. This consultation helped them to produce their strategic priorities which are:

- Recognising and supporting carers in the wider community
- Services and support that works for carers
- Employment and financial wellbeing
- Supporting young carers
- Young adult carers

Berkshire Healthcare NHS Foundation Trust

Training feedback surveys are collected by the safeguarding team and analysed quarterly. Content and delivery are reviewed accordingly. The safeguarding team are currently reviewing all safeguarding training to enhance opportunities for interaction as well as meeting the needs of staff who are not neurotypical. Domestic abuse training has led to an increase in staff reporting and seeking support due to concerns about domestic abuse in their personal lives. The domestic abuse specialist practitioner has supported the Trust's wellbeing team so that they are able to provide support to staff members.

Patient feedback and questionnaires across the Trust offer opportunities to feedback on any aspect of service user experience that's important to them and could include any safeguarding concerns.

The **Trust wide staff survey** is carried out yearly and is anonymous. The last survey showed the Trust that there is an inequality of experience for our Black, Asian and ethnic minority colleagues. For example, there are significant differences in colleagues sharing their experience of harassment, discrimination and perception of opportunities for career progression. The Trust are asking for staff to support the development of an action statement to address racism.

Community Safety Partnership

In July 23 the Community Safety Partnership (CSP) consulted on the extension of the Public Spaces Protection Order (PSPO) in Bracknell Town Centre. They also included questions on serious violence in the recent Youth Review consultation that took place over the summer.

In the case of the PSPO consultation, those results will inform their evidence for the extension proposal and the results of the serious violence questions in the Youth Review consultation will be used together with data in the Serious Violence SNA. They are expecting to consult on the CSP priorities in Spring 2024.

Domestic Abuse

Berkshire Women's Aid gain feedback from their clients. The summary for 2022/23 shows there were 55 planned closures with BWA clients, and 54 feedback forms completed. From those:

- 91% (n=49) reported feeling safer
- 87% (n=47) felt their wellbeing had improved
- 83% (n=45) felt their quality of life had improved
- 85% (n=46) felt optimistic about the future
- 80% (n=43) felt more confident in themselves
- Of those with children (n=40), 88% (n=35) felt they had been supported to improve safety of their children.

Survivor voices work is due to be recommissioned as part of DA Safe Accommodation strategy. A small working group is also due to be set up as a subgroup of the DA Executive Group to look into gathering survivor voices on a longer-term basis. TVP are also gaining views of survivors regarding knowledge of/views of the Domestic Violence Disclosure Scheme.

11. Looking Ahead

During 2022-23 the Board agreed a revised Strategic Plan for 2023-26. The strategic direction continues to focus on the long-term impact of Covid, but also considered the impact of current cost of living crisis.

The priorities for Year 1 (2023-24) are:

1. Partnership

Encourage closer working between children and adult services through challenge and promotion of allage protocols to strengthen links between services.

Continue mapping of pathways, review information obtained from Transitional Safeguarding T&F Group and implement actions including the development of transitional safeguarding guidance.

2. Prevention

Continue to develop and promote understanding of safeguarding risks and corresponding referral routes.

Audit of partners prevention and early help work.

Gain understanding of, and promote, trends of the types of abuse occurring and their location.

Develop guidance for neglect, self-neglect and update the thresholds for safeguarding.

Monitor and analyse available safeguarding information including that obtained from Transitional Safeguarding T&F group.

Introduce safeguarding e-learning system.

3. Protection

Thematic discussions at Safeguarding Partnership informs understanding of adequacy of local arrangements.

Formalise the process for gathering information from local multi-agency partnerships.

To support partners in promoting MCA and LPS within their training.

Facilitate presentations and discussion at Safeguarding Partnership and Board.

4. People

Develop and improve the current Safeguarding Board website.

Collaborate with the Community Cohesion and Engagement Partnership and Public Health to understand issues in BF communities and how to engage with them.

Importantly, the Peer Review of the Board has also helped contribute the strategic development for future years and is referenced in section 9 of this report.



12. Financial Summary

As there is no national formula for funding, levels of contribution are agreed locally. Bracknell Forest Council currently contribute most of the Board's direct funding. In addition, Bracknell Forest Council hosts the Safeguarding Board's Business Unit. The ICB and Thames Valley Police are the only other partners who currently contribute to the Board. Income and expenditure for 2022/23 are shown below.

Safeguarding Board 2022/23

INCOME / BUDGET	
BF Council Budget (base budget plus adjustments)	169,155
Partnership Funding	55,947
Gross Budget	225,102
Underspend	101,235
AVAILABLE FUNDING 2022/23	326,337
COSTS	
Staff costs: Business Managers x 2 (32 hours / 22.5 hours) Partnership and Performance Officer (22.2 hours) Business Support Officer (22.5 hours)	164,657
Independent Chair and Scrutineer	18,989
Child and Adult Case Reviews (CSPRs and SARs)	26,181
Other costs	10,242
TOTAL SPENDING 2022/23	220,069
UNDERSPEND 2022/23 CARRIED FORWARD TO 2023/24	106,268

Strategic Plan 2020-2023 – action plan progress – April 2023

1. Prevention – we will ensure partners work together to prevent all forms of harm recognising the long-term consequences

 By publishing up-to-date multi-agency guidance/ procedures that help partners maintain a high level of safeguarding awareness. 1a. Policy and Procedures (P&P) multi-agency safeguarding guidance continue to be routinely reviewed through pan-Berks meetings (for adults and children separately).

1b. Adult P&P website reviewed for effectiveness following the work of a task and finish group taking feedback from practitioners. Each local authority to contribute £450 per year to maintain website. The provider is ceasing to trade; a working group is meeting regularly to identify a new provider for sept 2023.

1c. Children's P&P have continued to be updated on a quarterly basis. Local panel have ensured updates reflect our regional learning and Tri.x draw on national developments.

1d. Consideration is being given to the need for local policies given the existence of the online PB P&Ps. Work has commenced on developing a local neglect strategy, a rapid review policy and a Local Multi Agency Hoarding Protocol agreed & circulated.

ii. By evaluating:
partners work to prevent harm and offer of early
help

Regular partnership meeting ensures feedback on effectiveness of local preventative work and informs the Board's Risk Register. This will continue in the 2023/6 plan. Review of safeguarding referrals completed which has helped to evaluate effectiveness of partners work and highlighted need for further emphasis on prevention – Prevention is on forward plan for QA Sub Group and is included in TOR for Transitional Safeguarding review QA sub group considers safeguarding performance. Rapid Reviews and Case reviews evidence compliance with procedures and inform actions to be taken to mitigate gaps. CEP subgroup continues to develop work on organisations promoting risks and referral routes.

Early help strategy development being reported to the board.

iii. By evaluating:

the strength of collaborative working within the borough to identify those who are most vulnerable.

Members of the Safeguarding Partnership continue to provide updates on their work and emerging risks. This has supported and enabled collaborative working.

The Risk Register is constantly updated reflecting this. Risks that apply to other partnerships are shared with them. The Risk Framework continues to be used and further promotion of the framework is taking place. Work to implement the Framework for 16/17 year olds is developing.

The CEP subgroup is collating responses on feedback from children and adult on the services they receive and are promoting work to tackle inequalities and ensure the voice of seldom heard groups is captured.

Subgroups are evaluating strengths through case reviews and multi-agency reviews.

The well-attended Safeguarding Forums highlighted local risks to community organisation and provided resources to support collaborative working.

iv. By promoting and evaluating a 'contextual safeguarding' approach by partner organisations.

Recently established local multi-agency group exploring exploitation and serious violence has started to report to the Board. Recent partnership workshop discussed serious violence and exploitation and outputs to be discussed by the Board to inform its strategy and the coordinated approach to working with other strategic partnerships. The Transitional Safeguarding review includes contextual safeguarding in its ToR. The work of the Board will be further informed by the recently established subgroups of the Community Safety Partnership. A workshop on contextual safeguarding is taking place at the January 2023 safeguarding partnership

v. By supporting partners to continue to embed an 'all age approach' to safeguarding including expansion of the risk framework to develop its application for older children.

Work continues to promote an all-age approach to safeguarding and is reflected in the reconfiguration of the local subgroups and continues to be promoted through the Board's safeguarding partnership. The Business Unit continues to promote this approach within its joint working with neighbouring safeguarding partnerships. Challenges identified within this work is shared within meetings of the BFSB and its Partnership. It is intended that the proposed elearning will help promote understanding of an all-age approach. The Risk Framework is continually promoted further through presentations to partners and meetings are underway to explore application to children. The Board has explored conceptual frameworks (such as the 'Family Approach') to support future strategic planning. The review of Transitional Safeguarding will incorporate the all-age approach and the frameworks referred to above. A peer review will provide feedback on effectiveness of all-age approach. Transitional safeguarding task and finish group work is being reviewed along with case review findings and further actions are being developed for the 2023 – 26 plan

vi. Through continual collation of risks identified by partner organisations and the mitigating actions being taken (to include a focus on the impact Covid and Covid recovery).

A risk register is informed by evidence provided by local partners, and in line with the Board's strategic direction, is continually updated following analysis undertaken within meetings of the Partnership and Safeguarding Board. A 'memorandum of understanding' is in place between BF partnerships and further ensures that risks and relevant information is shared between strategic partnerships. The risk register was reviewed in September '22 to ensure relevance and effectiveness. Risks associated with the cost-of-living crisis are being collated as well as the long term Covid impact risks

2. Protection – we will ensure a robust outcome focussed approach to protect people at risk of experiencing abuse and neglect

i. By working with partners, we will seek assurance that safeguarding thresholds are understood and where there is concern about decision making staff promptly challenge and if necessary, escalate issues using the SB procedures.

A Task and Finish Group has been established to review and revise the guidance. This will be reviewed every two years. The review of safeguarding referrals gave assurance that thresholds are understood but further awareness raising will take place and further assurance gained that the thresholds are well understood. Multi-agency audits/LSCPRs/SARs continue to scrutinise how thresholds are applied on an ongoing basis. A working group is now reviewing the safeguarding children thresholds

 We will require partners to evidence the effectiveness of actions taken to safeguard the most vulnerable. CEP subgroup is collecting the voice of child /adults. Individuals are routinely invited to take part in learning reviews. The CEP group's membership has been expanded to include representatives of the community to gain evidence and assurance of work to safeguard the most vulnerable. The safeguarding forum in November 22 focussed on work to protect the most vulnerable due to the cost of living increases.

QA subgroup review safeguarding performance data at each meeting and adult self-assessment data. BF and S11 panel returns are scheduled to be analysed in forthcoming meetings. Partner safeguarding QA processes are presented at each meeting. The recent review of referrals has helped evidence effectiveness of actions and areas for improvement.

Case Review subgroup monitors progress against SAR/CSPRs multi and single agency action plans. Detailed discussion and corresponding challenge takes place at regular safeguarding partnership meetings. Key partners provided evidence and case studies of actions at community forum in November 2021. QA and Case Review subgroup working together to evaluate impact of learning from case reviews. Boards QA Framework will focus on impact of work.

iii. We will require assurance that local practice recognises the impact of inequalities and ensures safeguarding plans reflect the unique needs of the individual.

Discussions continue to take place with community leaders to identify issues of inequality and challenges. The Safeguarding Forum highlighted the importance of reaching all communities. The Safeguarding Board is also sharing information with other BF Boards through joint MOU meeting to ensure issues are addressed appropriately. CEP subgroup has been collecting the voice of adult/ children and raising awareness of safeguarding matters. The CEP group's membership has been expanded to include representatives of the community to gain further insight into the impact of inequalities. The audits of safeguarding referrals / concerns provided assurance that cases were being dealt with appropriately. However recent feedback has highlighted potential to improve cultural awareness. Case Review subgroup work identified the need for equality of approach and action plans will aim to address this. The Business unit is currently supporting work to produce national guidance to ensure discriminatory abuse is robustly addressed within case reviews. Potential Inequalities are discussed at Partnership and subgroup chairs meeting and has included the impact of Covid and the impact of the cost-of-living crisis.

iv. We will require partners to demonstrate compliance with the Mental Capacity Act (MCA) and the Liberty Protection Safeguards (LPS).

Periodic reports re LPS from Head of Safeguarding and Practice Development are being received by the Board and its Safeguarding Partnership.

Annual adults self-assessment returns provide assurance of compliance with MCA.

Case reviews also analyse compliance with MCA and has provided recommendations as required. The partnership has been advised to ensure awareness of MCA is maintained. The Business unit is to ensure its work with the Local Learning and Development Forum promotes the focus

on LPS /MCA within partners training. Proposed e-learning could assist also. Themed discussion to take place at Board together with monitoring of implementation of LPS. Partners continue to be reminded to maintain training and awareness of MCA. Assurance has been provided by some partners that MCA training is a priority.

v. We will implement local, regional and national learning to ensure local procedures are the subject of continuous improvement.

The work of the East Berkshire L&D group continues to be developed. The BF L&D Forum promotes key messages for inclusion in their development/training activities. The Case Review subgroup ensures reviews include learning events/briefs and webinars. Learning is shared between Boards within the region. Safeguarding Forums share case studies and promote safeguarding matters to community representatives for dissemination. Proposed Task and Finish will share approaches to rapid reviews undertaken across Berkshire. The learning and development forum is now becoming established and facilitating the dissemination of learning

3. Partnership – we will seek assurance about the effectiveness of local partnerships and collaborations to safeguard people

 We will review and revise the Strategic Partnerships Memorandum of Understanding. MoU has been adopted by the Chairs of the Boards. Meetings of partnership officers regularly take place. A common theme of Transitional Safeguarding has already been agreed. A Partnership meeting identified that serious violence is an area of joint concern. Common themes like these demonstrates the need for joint governance such as the MOU is now providing. Officers are meeting to coordinate information sharing regarding work of Boards. The MOU officers group is now becoming established. The independent chair is holding a strategic meeting in January to review progress

Members of the Safeguarding Partnership group provide updates on their work and roles at each meeting. A themed discussion on each partners roles and priorities at this meeting highlighted the need for partners to explain their roles particularly when there are organisational changes. This is core to the work of the CEP subgroup e.g., comms plan, community leaders meetings and forum. The BF L&D Forum facilitates mutual understanding. A local BF self-assessment for organisations has been developed and is being implemented to strengthen this work. Additional scrutiny provided by the ICS. The Case Review subgroup continues to identify good practice and areas for development.

The Safeguarding Forums ensure partners clarify their local work amongst a wide range of community organisation representatives. ICS is further developing the subgroup chairs meeting to include pan Berkshire subgroups Pan Berkshire policy and procedures groups regularly update procedures which promote clarity relating to the roles and functions of partners. Further work has been identified to promote the policy and procedures. Partners

 ii. We will ensure partners work effectively together to develop mutual understanding of each other's roles and functions. are providing information on their services at each partnership meeting

iii. We will continue to support partners to identify emerging risks and to work collaboratively to implement effective solutions. Risk register is central to identifying emerging risks and backed up by work of the subgroups. Work with all key partners has helped establish potential risks. This collaborative approach has strengthened problem solving and has supported the prioritisation of emerging risks. The risk register is shared as a standing item within each meeting of the Board. The register continues to be updated as a result of information received from all sources but particularly Partnership and Board meeting discussions. Risk and referral route awareness being developed by CEP and MOU group. A review of the risk register process took place in September 2022. The risk register continues to be updated

- 4. People we will seek assurance that people who use services are involved in safeguarding processes and the work of the board.
- i. We will work with local partners to establish an understanding of the Bracknell Forest community as it relates to safeguarding.

CEP work has previously identified community leaders who are supporting the work to understand issues facing Bracknell Forest communities. This group is now being expanded as a result of collaboration with the local authority community engagement manager This work includes making safeguarding videos and promoting the voice of individuals.

The Board's Safeguarding Forum has been developed to enhance this. The implementation of the memorandum of understanding is facilitating better information sharing amongst Bracknell Forest partnerships which will include support to enable better understanding of local communities and how to engage them.

The Safeguarding Forums promote the need to understand safeguarding needs of all communities. Further work to reach communities through existing local forums is taking place. Work is developing with public health and the CCEP partnership to gain a further understanding of the community

ii. We will require partners to work together to identify factors associated with inequalities and any barriers to people's engagement with local safeguarding processes and the work of the Board.

The Business Unit continues to work with community leaders and all partners through subgroups and the safeguarding partnership to identify safeguarding inequalities and to determine the needs of local community.

The CEP subgroup is working with local communities to produce safeguarding materials and its membership is

being expanded with the aim of reaching more communities.

This action was promoted at the Safeguarding Forum. Community feedback is leading to a need to discuss board communication systems

The CEP group's membership has been expanded to include representatives of the community to gain further insight into the impact of inequalities.

iii. We will require partners to secure feedback from adults and children on the services they use.

The CEP subgroup and the Board's Safeguarding Partnership are receiving information collected by partners regarding the voice of children and adults.

The CRSG has sought to strengthen the involvement of individual and begun to reflect this within dissemination of learning. Findings from the recent review of safeguarding referrals has additionally helped to identify any necessary improvement.

The Transitional Safeguarding review is gaining feedback from children and adults regarding their experiences and the CEP subgroup is working to understand and promote the voice of carers.

Partners have been reminded that they need to provide feedback they receive within their organisations processes. Greater links are being developed with existing forums to gain feedback

iv. We will require partners to work together in an all-age approach to improve communication of the safeguarding messages to the local community. Work with community leaders to identify safeguarding inequalities to determine the needs of local community. One safeguarding awareness video has been produced. The Safeguarding Forum has been developed to enable ongoing conversations around the different forms of inequality.

Safeguarding messages are promoted via the board and partner's websites, social media and via campaigns and a partnership campaign calendar is in development. Partners have been asked to promote safeguarding messages by supporting and sharing Safeguarding Board communications. A communication plan is being updated. Partners reminded of the importance to share communications and the CEP group is carrying out work to ensure communication links are robust.

How partners have contributed to BFSB's Strategic Plan

Safeguarding Board partners were asked 'How have the adult and children safeguarding priorities / actions that your organisation implemented during 2022/23 contributed to the Strategic Plan'

Berkshire Healthcare NHS Foundation Trust (BHFT)

Partnership – BHFT engaged in multi-agency working groups and sent senior representation to the Board to ensure strong partnership working. Multi agency working is strongly promoted.

Prevention – The Trust has facilitated virtual face to face safeguarding training incorporating learning from local reviews to ensure staff are competent in recognising early signs of abuse and neglect and taking action to prevent harm. The trust run on-call advice lines for staff for both safeguarding children and safeguarding adults to ensure staff have quick access to advice. Staff are also able to access specialist advice from the domestic abuse specialist practitioner and the mental capacity act lead. All staff working with children receive child protection case supervision. Multiagency meetings such as strategy meetings, early help meetings and core groups are prioritised by staff.

Protection – Child protection conferences are prioritised and staff receive supervision where child protection plans and outcomes are reviewed with a specialist child protection named professional. Named professionals support staff to challenge where cases are not progressing or positive outcomes for children are not evident.

People - BHFT has a strong user feedback system to inform development of services.

Bracknell Forest Council

Services across the council make a key contribution to the Strategic Plan, and to safeguarding for our residents every day. The following include some illustrative examples of progress during the past year:

Partnership:

All services work closely with all partner agencies to ensure the safety and wellbeing of any person they work with. Partnership working is at the centre of our approach, including many services that are integrated and have co-located teams.

Through our MASH our children's social care and Early Help teams are working increasingly effectively in order to ensure that children and families receive the support and protection that they need. Referrals have increased during the year, and the teams have worked hard to engage with referring agencies to respond in a quick and effective way to concerns.

Our children's services have been rated as Outstanding by Ofsted during 2022/23. A key aspect of this has been in relation to strong local partnership working to ensure that children are safe – with an emphasis on multi-agency practice and decision making that places children at the centre of decisions.

Our adult social care teams have worked in partnership with NHS colleagues to respond to unprecedented challenges and avoid as many delayed discharges from hospital. Our hospital teams, intermediate care and commissioning teams have responded proactively to needs and continued to adapt to changing demands.

Our Learning Disability and Autism Partnership Board meets quarterly with service users, carers, commissioned services, schools, health as well as the community and voluntary sector with a shared ethos of wanting to make the lives of people with Learning Disabilities and Autism better.

Our education service has further developed Designated Safeguarding Lead network meetings in order to increase information sharing including good practice from schools to schools and learning from local and national safeguarding reviews.

The Community Safety Partnership (CSP) resolved 19 complex crime and ASB cases through the main Partnership Problem-Solving Group, and 7 complex crime and ASB issues resolved with the Town Centre Partnership Problem-Solving Group. In addition, a multi-agency operational problem-solving approach to adult victims of serious violence and exploitation as well as adult perpetrators was launched.

Prevention:

Our adult social care teams have focused on the continued improvement of strengths-based practice that support people to remain independent and use their strengths and assets. Our reablement team models this approach, providing support to more than 400 people during the year, of whom approximately 180 required no further ongoing care after their support.

The Autism Team hold a weekly drop-in session for those primarily not known to Adult Social Care but with a diagnosis of Autism, providing short term interventions often preventing a person from going into crisis.

Our Breakthrough Services, Waymead Respite and Day Services provide valuable levels of support to adults with learning disabilities and autism with getting and holding employment; attending Job/Benefits Centres; overnight and day respite to support individuals and families etc. The support provided by these services are preventative services which are crucial in promoting and maintaining the well-being and health of the people with learning disabilities/autism and their carers.

Our Community Team for people with a Learning Disability & Autism is a joint Health and Social care Team. We ensure that people with a learning disability have access to an annual health check. This is effective in identifying previously unrecognised health needs, including those associated with lifethreatening illnesses.

The Team are also working with the Integrated Care Board in piloting a reasonable adjustments flag which details the needs of the individual. This is then added to the persons health record that can be accessed by any health professional interacting with that person.

The Approaching Adulthood team for Adult Social Care are working with the Transitional Safeguarding Subgroup to look at the needs of young people transitioning to adulthood, identifying gaps in provision, such as education, health and housing with a focus on prevention.

Our mental health and out of hours services have worked with partners to provide a better prevention and more efficient care to promote the mental health, recovery, general well-being, and life chances for people with their families, and carers.

All services are working towards being proactive and have moved away from reactive services. The service areas are working in partnership to provide services such as enhanced harm reduction provisions and improving people's physical and mental health. In doing this it will **reduce any safeguarding concerns that are often encountered**. We will continue to attend all relevant risk training and ensure our risk assessments are up to date and reflective of the current situation. We will ensure we make appropriate use of all Risk Panel and Risk Framework meetings and learn from SARS to improve the services offered.

Our Early Help and Family Safeguarding Models are designed to secure and provide the support that families need to address challenges and to enable children to thrive. Our Early Help service responded to 99% of contacts within their target of three days to ensure that families receive a timely response.

Our Education Safeguarding Team hold half day safeguarding reviews – encouraging best practice. We are seeing more schools now purchase a full day review, with a half day review the following year. Half day review allows schools to 'pick and mix' certain key areas, allowing a more tailored experience following on from a look at the whole school safeguarding approach during a full day safeguarding review.

Protection:

All services are strengthening their safety culture to empower staff, people with lived experiences and families to raise any safety concern without fear or blame. The services will continue and improve on its response to crisis management, assessing the risks and opportunities, finding solutions that meet the needs of both the people with lived experience and the organisations.

The local authorities Care Governance Board brings together professionals from different teams, disciplines and organisations to consider and review information about provider quality concerns and make "flagging" decisions. The Board then oversees progress and activity in relation to quality improvements.

The council worked closely with partners in the NHS to oversee improvements and safeguarding within care settings that faced quality and safety issues – including the new Heathlands Nursing Home that received an inadequate inspection months after opening. Teams coordinated work to ensure oversight, training, and welfare checks to ensure safety.

Regular meeting between MASH Team, Early Help and the Education Safeguarding Team Member are used to disseminate key learning, areas for development and contextual safeguarding issues based on referrals and their contacts with schools.

Our Performance and Quality Boards, along with other key groups such as the Safeguarding Children's Monitoring Meeting, provide oversight and scrutiny of practice trends within the People Directorate. Actions and decisions are tracked and responded to in order to ensure that learning is embedded into practice.

The implementation of a new Home Care Framework from April 2022 has resulted in increased availability of care to meet needs, as well as enhancing protection through a more robust contract with monitoring and reporting requirements.

The CSP's Safe Accommodation Action Plan has seen the launch of a bidding process against the New Burdens Fund, Trauma-informed Training being rolled out to 38 BFC staff, appointment of a

Safe Accommodation Outreach Worker, re-tendering of refuge and outreach provision, creation of a short guide on victim support services, launch of a Sanctuary Scheme and the set-up of an emergency furniture provision fund.

People:

The council has reviewed the terms and conditions of our social care workforce, alongside a range of other measures to increase the attractiveness of Bracknell Forest as a place to work. This has increased salary rates and has shown an impact on reducing the need for agency staff.

The council has also refreshed its Core Values and Behaviours and launched these with a range of council wide messages. A staff survey in November 2022 was focused on the perceptions of staff in relation to these values and behaviours and showed a high level of staff satisfaction. The council's Corporate Management Team is overseeing actions in relation to areas identified in the survey.

To continue to promote a Safety Culture by learning from and reviewing feedback from people with lived experiences, safeguarding, serious incidents, and complaints. We will develop further the Making Safeguarding Personal throughout all of the services and be respectful about decisions people make.

Broadmoor Hospital - West London NHS Trust

SAFEGUARDING ADULTS:

Following the TUPE of the Broadmoor Hospital Social Workers to Trust employment in July 2021, the associated Sec 75 Partnership Agreement for Safeguarding Adults with Bracknell Forest was fully revised. It is now going through a further revision to incorporate the service provision agreement for IMCA's and the Hospital's established safeguarding monitoring of patients in seclusion or long term segregation, (Partnership and Protection)

We continue to ensure the completion of closure forms involving patients and their views for every termination of a safeguarding plan. On closure, any safeguarding related action points that do not need a stand-alone plan are incorporated into the patient's nursing care plan. There is a new multiagency Safeguarding Template added to the RIO clinical system where outcomes can also be recorded. (Prevention, Protection, People)

There is continued close monitoring of "below-safeguarding threshold" concerns, with each of the 14 wards using specific safeguarding and Prevent action logs within their clinical team meetings for these cases. (**Prevention and Protection**)

In 2022-2023 we continued to have safeguarding representation through an allocated social worker attending the Seclusion, Management and Review Group (SMARG). The social worker contributes to long term segregation reviews with patients. (**Prevention, Protection and People**)

A social work safeguarding representative is a key member of the Internal Referrals and Transfers weekly meeting (IRT). This meeting makes decisions on all internal patient transfers between wards. (Prevention and Protection)

The hospital has continued to develop staff awareness on maintaining professional boundaries. Staff receive mandatory boundaries training, and the Trust has recently commissioned active bystander training.

In August 2021, Broadmoor Hospital started to implement the "Safewards" initiative. This is a recognised model that encourages staff, patients, carers and other support persons to work together to make wards safer for everyone and the development of "Safewards" has continued to develop through this reporting period. (Prevention, Protection and People)

Social workers and other disciplines continue to act as Domestic Abuse Prevention Ambassadors (DAPAs) to promote awareness for both patients and staff, having received the required training. The Trust has also published a Staff Affected by Domestic Abuse S43 policy, ratified in June 2021. The Trust issued a completely revised Domestic Abuse D12 policy in July 2022. (Prevention, Partnership, Protection and People)

We continue to adopt "making safeguarding personal" principles, enabling patients (where possible and appropriate) to contribute to decision making and their safeguarding planning. The hospital maintains a proportionate response approach, where some safeguarding related concerns are effectively and proportionately managed outside of a formal safeguarding framework. The revised Partnership agreement identifies the appropriate commissioned IMCA service for the Bracknell Forest area. Broadmoor Hospital IMHA service provider was changed to POWhER in 2023. (People)

We have continued to revise the Safeguarding Adult User Guide and this is currently going through a further revision to incorporate information on more recent Safeguarding Adult areas, (Scamming, Cuckooing, Coercion and Control). The draft revisions also include additional content on Good Practice Principles in Safeguarding, links to the Governments Coercion and Control practice guidelines and the current Bracknell Forest PiPoT policy. The Trust is in the process of developing its own PiPoT policy which will be reported on in the 2023-2024 submission. In this year, the Trust has also developed an accessible revised information leaflet on Safeguarding for both patients' safety and staff responsibilities. (People, Prevention, Partnership, Protection)

SAFEGUARDING CHILDREN:

In this review period, authorised children (approved to have child visits in their best interests) have had both face to face and virtual visits with their relatives. All child visits are subject to robust assessment and authorisation in full compliance with the Department of Health, High Secure Directions for Child Visits (2013). In the last year (April 2022-March 2023), there was a total of 35 face to face and virtual child visits. There are presently 16 families who are approved to have child visits. Broadmoor Hospital is currently exploring the viability of introducing the Storybook Dads initiative which has been running successfully within the Prison Service for a number of years. (Prevention, Protection and People)

The child visits panel and the safeguarding children clinical improvement group (SCCIG) are held monthly. The panel and the SCCIG have representation from Bracknell Forest children's social care department. (Prevention, Partnership and Protection)

In this reporting year, The Trust's central safeguarding team has completed a project to develop a more unified recording process for preparing and collecting feedback on child visits across the whole Trust, including Broadmoor Hospital. Revised Child Visiting information and child visiting feedback reports are now available on the Trust website and within RIO respectively. (Prevention, Protection and People)

The new child visits film has been completed, following the move into the new hospital in 2019. This new film provides information to families and children and features a "walkthrough" of a child visit

from a child-focused perspective, using a child actor. The film also includes a "walkthrough" for Virtual Child Visits. This is available on the Trust website. **(People)**

The Trust central safeguarding team continues to produce a monthly safeguarding children and adult data report for all individual service lines across the Trust, including Broadmoor hospital. This report is reviewed by the SSCIG and focuses on child visits, training compliance, Trust developments, projects, initiatives and shared learning. (Prevention, Partnership, People and Protection)

CAFCASS

Our Safeguarding Policy sets out the requirements placed by Cafcass on its staff and contractors, relating to our statutory function of safeguarding and promoting the welfare of children. It details the procedures to be followed when completing a section 16A risk assessment; making a referral to children's services; taking urgent action to protect a child; and responding to an allegation made against a person who works with children.

Our strategic risk profile saw some increase in risk related to issues associated with rising demand, increased complexity of the work, and record levels of work staying open longer, all resulting in growing caseloads. Noteworthy risks include resourcing related to recruitment and retention due to increased levels of turnover of staff and availability of social workers within the sector. Priority remains focused on developing targeted approaches to recruitment in those areas having difficulty to recruit. Risks related to demand have remined critical throughout the year, with the private law transformation programme currently reviewing processes for allocation and closure of children's cases in order to mitigate these risks.

We face challenges in not only how to maintain the quality of our work with children but also, equally importantly, how we can continue to sustain and ensure the resilience and wellbeing of our staff. In this context, while the governance framework in place is working for now, we will continue to keep this under review. We continue to monitor organisational and strategic risk through our new reporting process which includes identification of emerging risks, and this is supported by regular assessment of environment risk.

At a local system level, our assistant directors, their heads of practice and service managers are responsible for managing relationships with designated family judges, local authority directors of children services, and other local partners. They meet with each on a regular basis to agree local working arrangements, including involvement in any local pilot programmes. We have delivered training to the BFSB and contributed to SARs and Learning reviews.

Frimley Health Foundation Trust (FHFT)

The safeguarding of vulnerable patients has remained a priority across FHFT.

The safeguarding team remain visible and available across all clinical area throughout the Trust, to support staff caring for vulnerable patients.

The Trust has a Safeguarding Executive Group which meets quarterly and is chaired by the Chief of Nursing and Midwifery. The aim of the group is to ensure that systems and processes are in place to safeguard vulnerable patients.

Assurance to commissioners have been provided through quality assurance as well as ongoing communication throughout the year. Training has been provided by the safeguarding team, reinforcing the importance of capacity assessments and good quality applications, and in response to local learning and themes.

- Monitoring current legislation and policy in relation to Safeguarding Patients.
- Overseeing the development, implementation and monitoring of systems, processes, and policies to ensure adults are safeguarded whilst in FHFT care.
- Dissemination learning of safeguarding and safeguarding partnership reviews.

The Trust is cognisant that staff are making an increased number of referrals that staff are making referrals in the reporting year. In addition, there has been an increase in requests from Trust staff for targeted areas of training and support such as Mental Capacity Assessments, Deprivation of Liberty, withdrawal from alcohol and inter familial domestic abuse.

All staff report through the incident reporting system where appropriate.

There is guidance in both the children/adult safeguarding adult policy which is accessible to staff via the intranet.

The Trust works effectively with partner agencies. Raising awareness and ensuring staff within the organisation understand the full scope of their responsibilities within the reporting processes for safeguarding adults and children, the Mental Capacity Act, Mental Health Act and Deprivation of Liberty Safeguards (DoLS).

Frimley Health Foundation Trust as part of induction for all new members of staff provide Safeguarding level two training via e-learning. The Trust also provides level three Safeguarding to key staff as identified by the intercollegiate guidance.

Contributed to a Joint Targeted Area Inspection (JTAI) in Surrey, which focused on early help.

Ongoing support for Trust staff on increasing confidence in timely applications and of the Mental Capacity Act.

Recruitment and retention challenges across both teams directly impacting capacity and increased workload on remaining team members.

Numbers of staff trained in level 3 adult safeguarding currently does not meet the Trust 85% standard. Plan proposed for 2022/2023.

Review the newly published Safeguarding Accountability and Assurance Framework (SAFF) for 2022.

The Trust has also engaged in the Benchmark against the SAFF 2022 to embed and ensure improved quality for FHFT which includes, compliance with safeguarding standards to protect children and adults at risk.

Safeguarding practitioners/Named professionals are recognised nationally as requiring additional clinical supervision due to the nature of the role.

Due to the nature of the safeguarding role, it is essential that all practitioners are provide a safe place, to reflect on their practice with an independent supervisor.

Safeguarding supervision for Head of safeguarding and Specialist Nurses is facilitated externally. In addition, the Head of Nursing for Safeguarding meets with the Director of Safeguarding (Frimley Health & Care ICS) frequently.

Safeguarding supervision is provided in a variety of ways; 1:1 supervision, group supervision, peer review and ad hoc. Face to face supervision is delivered for key staff groups: specialist paediatric nurses, neonatal unit, Emergency Department, and the paediatric ward. There is currently no formal facilitation within adults.

Forward Planning 2023/24

- Finalise and ratify the Supervision Policy.
- Develop a supervision plan cross site for adults.
- Capture data on staff groups receiving supervision, how often, by whom and within timescales.

Frimley NHS ICB

Frimley ICB geographical boundaries cross 5 Local Authorities; the ICB safeguarding team work hard to maintain a committed and active partnership with each safeguarding board and invites the safeguarding boards into the quarterly ICS Safeguarding Health group. This means that communication from health organisations to the boards remains current and relates to each Board's priorities.

It is pleasing to note that the partner relationships are strong and collaborative with grateful challenge. The team will implement continuous improvement across the whole area should it be deemed important that lessons learnt in one area are implemented in another. The priorities of Prevention/Protection/People match the local ICB NHS priorities. 2022 – 2023 has seen a very busy and challenging year for safeguarding. The local safeguarding teams work together under specific portfolios which, together, cover the established and emerging safeguarding priorities for children and adults and children who are placed in care.

The portfolios are reported upon every 6 months within the ICB safeguarding quarterly report and summarised in the annual report. They also form part of the agenda for team meetings and are reported upon every quarter at each place meeting including Bracknell Forest place.

The following workstreams contribute to the above priority improvements; actions include:

- Improvements in the application of the **Mental Capacity Act**, application to the court of protection for Deprivation of Liberty standards and preparation for Liberty Protection Standards (now delayed).
- Safeguarding Campaigns and Communications:
 - i. Child and Baby Safety: #who'sincharge, #thinkplanshare. Advice for all practitioners to consider safe sleeping messaging.
 - ii. Hypothermia advice for frontline practitioners regarding early signs of hypothermia and actions to take in the event.
 - iii. Water Safety due to deaths of young people 2022; a concentration on the safety message and development of a safety film went out early May 2023.
- **Domestic Abuse Diverse communities project**; this is continuing and sits across the whole of Frimley ICB areas.

- Work with **Children in Care** by the Designated Nurse for Children in Care; improvements to hearing and understanding the voice of the child and work to improve the compliancy for health assessments and GP notifications for children in care.
- Community Safety partnership work relating to domestic abuse and preparation for action planning around the Serious Violence Duty 2022; this includes active participation in serious violence prevention.
- Work with Care homes and domiciliary providers; any specific safeguarding meeting attended by a member of the ICB safeguarding team and also quality team.
- **Prevent**: working with the Prevent board and any channel panel referrals.
- Part of prevention of death by suicide group; ensuring work done via rapid reviews relating to suicide is brought to the Berkshire wide group.
- Safeguarding Training strategy for primary care and the ICB teams.
- **Child Death Overview Panel;** ensuring ICB representation at executive meetings, panel meetings and also organising Joint Area response meetings in the event of an unexplained child death. This ensures that learning from any JAR is fed into the correct safeguarding processes.
- Working with ICB teams and providing specialist safeguarding supervision including Continuing healthcare teams, children's commissioning team, medicines optimisations team and care homes leads.
- The Fire Referral form has been placed on the DXS record system to allow a practitioner to refer for a fire safety check any patients who are at risk of fire eg exposed to Oxygen therapy, petroleum-based emollients, reduced mobility (especially those that are heavy smokers), mental health issues and risks relating to hoarding
- The ICB safeguarding team have worked with the Medicines Optimisation Team and NHS England to develop clear **guidance for GPs about prescribing** of puberty-blocking treatments and hormone replacement therapy in child / young people with Gender Dysphoria. This has become particularly relevant following the decommissioning of the Tavistock Gender Identity Clinic and an increase in unregulated private providers.

Involve Community Services

As an infrastructure charity, Involve continues to promote key safeguarding messages to its sector partners. This includes publications of Safeguarding Reviews and associated learning, as well as some active campaigning and areas of focus in line with the priorities of the Safeguarding Board.

As a training organisation, Involve has increased the number of Safeguarding sessions it offers annually to the not-for-profit agencies and groups across the borough. In this academic year, our charity has offered nine level-1 adult safeguarding learning sessions, and four level 2/3. Similarly, we offered 8 children's safeguarding level-1 sessions and 3 level 2/3. We are committed to growing our training offer in line with need as we realise this is a fundamental aspect of resident care that underpins all service delivery.

National Probation Service

We have implemented a new system of requesting and tracking child safeguarding enquiries from partners, which means that we have more information to inform our assessments of People on Probation and their risk of harm to others.

Royal Berkshire Fire and Rescue Service

We successfully delivered our Safeguarding Action Plan to align with National Safeguarding Fire Standard, the National Fire Chiefs Council (NFCC) Self-Assessment and RBFRS Peer Review outcomes. The Action Plan was completed and a continual update on progress was provided through to Area Manager Collaboration & Policy. The Action Plan has been completed apart from Quality Assurance and Evaluation sections which will be transferred over to the new 2023/2024 Action Plan.

The Fire Standard Implementation Tool document has been updated and completed and will be signed off by AM Jim Powell at the Programme Board in July 2023.

The service delivers an effective safeguarding function that identifies continuous improvement.

We have implemented and written an Information Sharing Agreement for our partner agencies.

We completed the Meeting Structure Framework and implemented this across the three hubs through Prevention Managers, with Heads of Service authorisation and agreement. This was agreed as part of the governance structure within the Prevention and protection Support Group (PPSG).

The Safeguarding Meeting Structure Framework has now been published on RBFRS' Safeguarding Siren Document Library. Prevention Managers will now be cascading updates from their boards back into RBFRS' internal Safeguarding Working Group.

We continue to provide data to all the Berkshire Safeguarding Boards/Partnerships on a quarterly basis with regards to Safeguarding referrals submitted, Threat of Arson referrals completed, Safe and Well Visits completed and Adult at Risk Programme attendees.

We have carried out an immersive theatre event with Prospect Park Hospital to ensure that there is better consideration of our service provisions when patients return home and resettle back into the community across all six Berkshire Local Authorities. This will now form part of their risk assessment for those individuals who have known fire risk behaviours.

SCAS

The safeguarding service has been part of an improvement plan following an inadequate rating from a CQC inspection in May 2022. The BOB ICB have been fully engaged in the NHSE/ICB which has been held fortnightly. Phase 1 of the improvement plan is now complete, with all actions such as 'must do' and 'should do' completed. The phase two recovery plan is now in process. A full workplan is available if required.

Partnership- South central ambulance service has invested and increased its safeguarding team and is continuing to build relationships with our safeguarding boards, integrated care boards, local authorities, and other internal and external stake holders. These relationships are demonstrating good outcomes for service users.

Prevention- SCAS engages in a broad range of preventative activities, including educational roadshows, training and development and signposting service users to other appropriate services.

Protection- SCAS have introduced a training program that will help our clinicians to recognise abuse and neglect and has systems in place to ensure staff can report to the appropriate service. As a first

responder organisation we are limited to what options we have available to protect people and require the support of other agencies to ensure people are protected. We achieve this by working closely with other agencies to share information and risk.

People- SCAS actively promote the work and importance of safeguarding boards within the organisation.

Silva Homes

Partnership

We have attended regular meetings of the BFSB to ensure we are up to date with latest developments and to build relationships with other agencies.

We have a dedicated colleagues who attend MARAC, community safety partnership meetings and child protection meetings.

Our tenancy support service offers bespoke support to customers identified as hoarders and we run a hoarding support group that partner agencies can refer into which is partly funded by contractor social impact funds.

We have a dedicated panel to assess the appropriateness of internal transfers for customers deemed at risk of harm by us or partner agencies and regularly move victims of domestic abuse to safe accommodation.

Prevention

We have been audited around our safeguarding processes and implemented the recommendations including keeping all referrals and concerns in a central database. External contractors provide us with assurance that safeguarding referrals will be escalated to a named contact as part of the procurement process.

Protection

All safeguarding concerns raised by colleagues, contractors, customers or partner agencies are investigated by trained colleagues and escalated as appropriate to the relevant agency. Referrals are followed up to ensure they are not missed.

People

All frontline colleagues receive in person training biannually by specialist trainers. Online training is provided to all new starters and front-line colleagues annually. Domestic abuse training is part of housing officers' induction process.

The Ark Trust

The Ark Trust run programmes of prevention activities – e.g. internet safety targeted at people with care and support needs.

We have worked with the Business Unit to capture the voice of adults with care and support needs as well as those of their family carers.

We have worked with partner organisations to help deliver joined-up, effective services minimising duplication and maximising resource.

We promoted safeguarding campaigns to the wider community through our social media channels.

Thames Valley Police

We have a problem-solving team with embedded safeguarding officers that work closely with safeguarding services across the local authority and other partner agencies, to deliver safeguarding in partnership.

TVP has implemented a force wide safeguarding tool kit/flow chart to improve and standardise safeguarding responses. This has addressed inconsistencies across the 11 LPAs.

The force has introduced an online 'Exploitation Hub' for officers and staff to use to seek advice, guidance and best practise.

As part of the Force Review - TVP will be increasing our Neighbourhood Policing numbers which will include Harm Reduction Hubs and increased number of dedicated schools officers, and officers to support Mental Health colleagues.

Linked to the National Vulnerabilities Action Plan (NVAP) the force will monitor and drive progress via the Vulnerabilities Strategic Group and Force Performance Group.