

HEALTH AND WELL BEING BOARD Agenda

Date Tuesday 10 November 2020

Time 2.00 pm

Venue Virtual Meeting -
https://www.oldham.gov.uk/info/200608/meetings/1940/live_council_meetings_online

- Notes
1. DECLARATIONS OF INTEREST- If a Member requires any advice on any item involving a possible declaration of interest which could affect his/her ability to speak and/or vote he/she is advised to contact Paul Entwistle or Mark Hardman in advance of the meeting.
 2. CONTACT OFFICER for this Agenda is Mark Hardman, email constitutional.services@oldham.gov.uk
 3. PUBLIC QUESTIONS – Any member of the public wishing to ask a question at the above meeting can do so only if a written copy of the question is submitted to the Contact officer by 12 Noon on Thursday, 5 November 2020.
 4. FILMING – This meeting will be recorded for live and/or subsequent broadcast on the Council’s website. The whole of the meeting will be recorded, except where there are confidential or exempt items and the footage will be on our website. This activity promotes democratic engagement in accordance with section 100A(9) of the Local Government Act 1972.

Recording and reporting the Council’s meetings is subject to the law including the law of defamation, the Human Rights Act, the Data Protection Act and the law on public order offences.

MEMBERSHIP OF THE HEALTH AND WELL BEING BOARD IS AS FOLLOWS:
Councillors Ball, M Bashforth, Chauhan, Moores, Stretton (Chair) and Sykes, Dr Zuber Ahmed, Chris Allsop, Mike Barker, Jill Beaumont, Dr Bal Duper, Nicola Firth, Majid Hussain, Dr Keith Jeffery, Gerard Jones, Stuart Lockwood, Dr. John Patterson, Katrina Stephens, Tamoor Tariq, Mark Warren, Carolyn Wilkins OBE, Liz Windsor-Welsh and Keith Wrate and by invitation Val Hussain, Joanne Sloan and Karen Worthington

Item No

- 1 Apologies for absence
- 2 Declarations of Interest

To Receive Declarations of Interest in any Contract or matter to be discussed at the meeting.



3 Urgent Business

Urgent business, if any, introduced by the Chair.

4 Minutes of Previous Meeting (Pages 1 - 6)

The Minutes of the meeting of the Health and Wellbeing Board held on 21st July 2020 are attached for approval.

5 Public Question Time

To receive Questions from the Public, in accordance with the Council's Constitution.

6 Oldham Safeguarding Adults Board Annual Report (Pages 7 - 28)

7 Oldham Safeguarding Children Board Annual Report (Pages 29 - 56)

8 The Oldham response to COVID-19 (Pages 57 - 64)

9 Impact on the Health and Care System

The Board to receive a presentation on this issue.

10 Implementing the Phase 3 Recovery Plan for the Oldham (Pages 65 - 74)

11 Future developments in the NHS

The Board to receive a presentation on this issue.

12 Date of Next Meeting

The next meeting of the Health and Wellbeing Board is scheduled to be held as a Development Session on Tuesday, 15th December 2020 at 2.00pm.

HEALTH AND WELL BEING BOARD
21/07/2020 at 2.00 pm



Oldham
Council

Present: Councillor Stretton (Chair)
Councillors Ball, M Bashforth, Moores and Sykes

Dr John Patterson	Oldham CCG
Majid Hussain	Oldham CCG
Mike Barker	Executive Director Commissioning and Chief Operating Officer (Oldham Council/Oldham CCG)
Mark Warren	Managing Director of Health and Adult Care Services
Katrina Stephens	Director of Public Health
Jill Beaumont	Director of Children's Health and Wellbeing (Oldham CCG)
Nicola Firth	Pennine Acute NHS Trust
Stuart Lockwood	Oldham Community Leisure
Keith Wrate	First Choice Homes
Val Hussain	Greater Manchester Fire and Rescue
Joanne Sloan	Dr. Kershaw's Hospice

Also in Attendance:

Mark Hardman	Constitutional Services
Lori Hughes	Constitutional Services

1 **APPOINTMENT OF VICE CHAIRS**

RESOLVED – That Dr John Patterson and Majid Hussain be appointed Vice Chairs of the Health and Wellbeing Board for the 2020/21 Municipal Year.

2 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Chauhan, Carolyn Wilkins, Dr Bal Duper, Dr Keith Jeffrey, Claire Smith, Liz Windsor-Welsh, Gerard Jones and Rebekah Sutcliffe.

3 **DECLARATIONS OF INTEREST**

There were no declarations of interest.

4 **URGENT BUSINESS**

There were no items of urgent business.

5 **MINUTES OF PREVIOUS MEETING**

RESOLVED – that the minutes of the meeting of the Health and Wellbeing Board held on 12th November 2019 be approved as a correct record.



6 **PUBLIC QUESTION TIME**

No public questions had been received.

7 **HEALTH AND WELLBEING STRATEGY UPDATE**

The Director of Public Health reminded the Board of discussions at a development session held in January 2020 at which the development of a new Health and Wellbeing Strategy for the Borough had been considered. A proposal for developing the Strategy had been prepared for submission to the March 2020 meeting of the Board which had been cancelled. In light of the Covid-19 pandemic much had changed and it had not been possible to progress development of the Strategy in the meantime. It was therefore suggested that, subject to the approval of the Board, a proposal for the development of the new Strategy be brought to a future meeting of the Board.

Comment was made in support of the proposal, noting that much had changed across health and social care settings as a result of the pandemic meaning that how services were offered and how patients and clients would access those services would look very different, and that a new strategy would need to have a strong focus on prevention.

RESOLVED – that the report of the Director of Public Health be noted and a report on proposals for the development of a new Health and Wellbeing Strategy for the Borough be brought to a future meeting of the Board.

8 **PHARMACEUTICAL NEEDS ASSESSMENT -
SUPPLEMENTARY STATEMENT**

The Board was reminded that it held a statutory responsibility to publish and keep up to date a Pharmaceutical Needs Assessment (PNA). Oldham's current PNA was due to be reviewed during 2020/21 and the renewed PNA to be published in April 2021. However, the Department of Health and Social Care had determined that the publication of PNAs would be suspended for one year in order to reduce unnecessary extra pressure on local authorities and Local Pharmaceutical Committees (LPCs) during the response to the Covid-19 pandemic. Oldham's renewed PNA was now not required to be published until 2022.

The Director of Public Health advised that some work to review the PNA had already commenced and a number of required changes identified which could be published in a Supplementary Statement. A proposed Pharmaceutical Needs Assessment Supplementary Statement June 2020 that included corrections, clarifications and updates to service provision which superseded the original information in the PNA 2018-21 and a previous Supplementary Statement issued on 17 December 2018 was submitted for the consideration of the Board.

Comment was made that while there were a large number of pharmacies across Oldham, there were concentrations in particular areas while others were not so well served. The Director of Public Health advised that the issue had not been highlighted to date but a conversation could be held to consider this issue. The Board was advised that the CCG had worked over the period of the pandemic to improve contacts with the LPC and Dr Patterson offered to share contacts with the Director of Public Health.

RESOLVED that –

1. the suspension of the requirement to publish the renewed Pharmaceutical Needs Assessment for one year (until April 2022) as determined by the Department of Health and Social Care as a consequence of the Covid-19 pandemic be noted;
2. the publication of the Pharmaceutical Needs Assessment Supplementary Statement which responds to local changes in pharmaceutical needs at this time be agreed.

9

OLDHAM COVID-19 MANAGEMENT PLAN: HOW WE CONTROL OUTBREAKS

The Board received a report advising on the background to the Covid-19 pandemic and the progression of the national response to date. The Board was advised on the development of the Oldham Covid-19 Management Plan to meet national requirements for local Outbreak Control Plans, the document providing local direction and guidance to collectively manage and prevent the spread of Covid-19 across our communities. This Plan supplemented the existing Oldham Health Economy Outbreak Plan (2018) by providing specific management arrangements to effectively respond to the unique threats posed by the Covid-19 pandemic and would continue to be reviewed and revised in response to changes in national requirements and advice, and to incorporate learning from implementation.

The Director of Public Health made a presentation to the Board considering the four principles behind the development of the Plan: the Plan should be rooted in the Public Health system and demonstrate strong leadership, should present a whole system approach, should be delivered through an efficient and locally effective and responsive system informed by timely data and intelligence, and should be sufficiently resourced. In regard to the latter point the Board was advised that an allocation of £1.5m had been made for the current financial year. The Plan needed to consider and address approaches to the prevention and management of local outbreaks. With regard to prevention, this included access to testing, support for people to isolate, advice on how not to be a contact, hand hygiene, and contact tracing. With regard to managing and contributing to minimising the impact of any local outbreak, this included building trust and confidence in the local system, having robust data, identified clear roles and responsibilities, and standard operating procedures.

Seven themes for the control of any local outbreak had been identified – care homes and school, high risk places, local testing capacity, contact tracing in complex settings, data integration, vulnerable people, and local boards/governance structures – and the actions required in each of these areas was considered. With regard to governance, the Board was advised that nationally a ‘Health Partnership Board’ to maintain day to day oversight was required: in Oldham this had been established as the Covid-19 Prevention and Control Board chaired by the Director of Public Health and which fed into the Covid strategic command structure which was important if more wide ranging actions needed to be escalated. The remit of the Member-led Health Protection Sub-Group of this Board had been extended to consider communications with the public and to ensure linkage to this Board. A local Equalities Advisory Group had also been established in response to national awareness of equalities issues arising through the pandemic.

The Board received an Executive Summary of the Management Plan and was advised of next steps, including desktop exercises, developing local plans in response to the Contain Framework published on 17th July, and the continuing review and evaluation of the Management Plan through the Covid-19 Prevention and Control Board.

In response to a query concerning circulation of detail to community groups, the Director of Public Health confirmed that the Service would be happy to share detail and that much work had already been undertaken with Action Together; this included a joint webcast to be made later that week. Further to a query concerning the elderly and a suggestion that they appeared not to be highlighted as vulnerable in the same way as early in the pandemic, it was confirmed that the elderly as a group are vulnerable to Covid and the outbreak plan recognised the group as being at high risk and a priority for test and trace. Further comment was made regarding how much older people seemed to have aged when subject to lockdown, emphasising the need to get Oldham moving again and the need to promote face coverings as a means to build confidence to get people leaving their homes.

The importance of communications was considered, it being noted that lessons around the need for dynamic communications and engagement could be taken for the experiences of other local authority areas. It was queried whether there was any particular tipping point identified that would lead to government intervention. The Board was advised that a more public facing version of the executive summary had been prepared and that a communications strategy was near completion. The public dashboard was currently updated weekly on the Council’s website and was being further developed as additional data became available. The experience of Leicester was noted and the Board advised that several

considerations, including the direction of travel on the number of cases and the number of positive cases, could point towards possible intervention.

Comments were made such that, notwithstanding the current position in Oldham, complacency needed to be guarded against and that the Plan would need to be changed as circumstances changed. The work of the Public Health Team in developing the Management Plan in the required timescale and in light of all other work required at this time was noted and supported and the Management Plan commended. It was noted that further consideration of this matter would be made in closed session.

10 **DATE OF NEXT MEETING**

It was noted that the next meeting of the Board was scheduled to be held on Tuesday, 15th September 2020 at 2.00pm.

11 **EXCLUSION OF PRESS AND PUBLIC**

RESOLVED that, in accordance with Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that they contain exempt information under paragraphs 1 and 3 of Part 1 of Schedule 12A of the Act, and it would not, on balance, be in the public interest to disclose the reports.

12 **OLDHAM COVID-19 MANAGEMENT PLAN: HOW WE CONTROL OUTBREAKS**

Further to Minute 9 above, the Board received the draft “Oldham Covid-19 Management Plan: How we control outbreaks”.

RESOLVED that –

1. the Covid-19 Management Plan and the local arrangements for preventing and controlling the spread of Covid-19 be approved;
2. the governance arrangements for the Plan be approved.

The meeting started at 2.00 pm and ended at 3.00 pm

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Report to HEALTH AND WELLBEING BOARD

Oldham Safeguarding Adults Board: 2019/20 Annual Report

Portfolio Holder:

Councillor Chauhan, Cabinet Member for Health and Social Care

Officer Contact: Mark Warren, Managing Director Health & Adult Social Care Community Services, Oldham Council / Northern Care Alliance

Report Author: Julie Farley, Business Manager, Oldham Safeguarding Adults Board.

Ext. 6401 (Mobile: 07809 514922)

Date: 10th November 2020

Purpose of the Report

The Oldham Safeguarding Adults Board (OSAB) is a statutory partnership set up to safeguard adults who are at risk of experiencing abuse, neglect or exploitation. As part of its statutory duties the Board produces an Annual Report setting out the safeguarding concerns it has dealt over the last year, along with the actions it has taken to help keep people safe in Oldham. The Health and Wellbeing Board is asked to consider the OSAB 2019/20 Annual Report and priorities for 2020/21.

Background

Over the last year The Oldham Safeguarding Adults Board (OSAB) has introduced a series of measures designed to remodel adult safeguarding arrangements across Oldham. The new arrangements are designed to strengthen and improve multi-agency working through a combination of new safeguarding structures, greater alignment with the Children's Safeguarding Partnership and integrating safeguarding structures across Community Health and Social Care.

This 2019/20 OSAB Annual Report is the first under these new arrangements. It reflects the Boards ambition to develop a more outward facing role to ensure there is 'no wrong door' to reporting safeguarding concerns across communities and most importantly to ensure the work of the Board is held publicly accountable.

Current Position

The role of the OSAB is to assure itself that organisations and agencies across Oldham are working together to protect and enable adults to live safely. This means helping people to make decisions about the risks they face in their own lives as well as protecting those who lack the capacity to make these decisions.

The OSAB has a statutory duty to:

- Produce a **Strategic Plan** setting out the changes the Board wants to achieve and how organisations will work together.
- Publish an **Annual Report** setting out the safeguarding concerns it has dealt with in the last year as well as plans to keep people safe in the future.
- Undertake a **Safeguarding Adult Review** where it believes someone has experienced harm as a result of abuse, neglect or exploitation.

The attached Annual Report provides information on the number and type of safeguarding concerns reported in Oldham during 2019/20. It also sets out the actions taken to ensure that lessons learnt from the Safeguarding Adult Reviews have been used to change front line practice and improve the way services work in Oldham.

Key Issues for the Health and Wellbeing Board to Discuss

During 2019/20 a total of 1580 safeguarding referrals were made for residents in Oldham and of these referrals 556 became the subject of a formal safeguarding Enquiry. The number of referrals received in 2019/20 show that the figures have almost doubled in the last two years, however this may be due to a combination of improvements in the recording of data and campaigns designed to encourage people to report safeguarding concerns.

During 2019/20 a total of 1543 safeguarding referrals and enquiries were dealt with and closed which is a significant increase on the previous year's total of 960. Of the cases closed in 2019/20 48% were complex cases involving people who lacked capacity to make their own decisions. The breakdown by sex, age and ethnicity suggests that White British women aged between 18 and 64 were more likely to be the subject of a reported safeguarding concern in 2019/20 compared to any other group.

The types of abuse recorded saw an increase in the number of safeguarding concerns relating to self-neglect, acts of omission and domestic abuse which can include psychological abuse, violence, physical abuse and financial abuse. Some of the increase in domestic abuse cases coincided with the start of the Covid-19 lockdown where those living with an abusive partner may have experienced an escalation in abuse, coupled with restricted access to community contacts and professional support.

During 2019/20 the OSAB conducted five Safeguarding Adult Reviews (SARs) compared to two in 2018/19. For each SAR the Board has adopted the recommendations put forward by the independent reviewer and overseen changes to services designed to prevent similar cases happening again. These changes have also been informed by Making Safeguarding Personal conversations with local people who have first hand experience of safeguarding issues relating to mental health, learning disability, addiction and long-term conditions.

Developing Oldham's All Age Safeguarding Offer

For 2020/21 a key ambition for Oldham's new safeguarding arrangements include an effective 'all age' safeguarding offer. Over the last year progress has been made to align the work of the OSAB with Oldham's Safeguarding Children Partnership. Joint working arrangements between the children's and adults Safeguarding Business Units has resulted in the creation of a joint Safeguarding Oldham website, bi-weekly newsletter and Self-Neglect Practice Learning Seminar.

The new Learning Hub model being developed by the Safeguarding Children Partnership also involves representation from adults' services and ensures that cross cutting themes are identified and responded to quickly and effectively. The aim is to continue to build the all age safeguarding offer through joint pieces of work focusing on safeguarding transitions and complex and contextual safeguarding where success depends on effective multi-agency contributions across children's and adults' services.

Adult Safeguarding and the Coronavirus Pandemic

Like other areas in Greater Manchester the challenge for adult safeguarding in Oldham is the ongoing impact of the Coronavirus Pandemic. For some people lockdown restrictions and social isolation have created the perfect conditions for new forms of safeguarding concerns to emerge as well as escalating existing safeguarding issues. Whilst organisations in Oldham were quick to reconfigure services across health, social care and the criminal justice system at the start of lockdown in March 2020, we now face further change as services come together to decide what a good Covid-19 recovery model looks like in practice.

Oldham's recovery model also needs to reflect the disproportionate impact that Covid-19 is having on some adults and broaden our scope and understanding of groups who fall within a safeguarding remit. These groups include people shielding who remain isolated from family, friends or professionals, those in care homes, BAME communities, and households facing increased poverty and lower incomes. As part of its bi-weekly Covid-19 Assurance meetings the OSAB is actively exploring the additional safeguarding needs for these groups.

The challenge going forward is to manage future waves of lockdown restrictions whilst putting plans in place to enable services to come back to full capacity. This will also involve managing surges in safeguarding demand as we regain visibility of people hidden during lockdown restrictions. We are already starting to see a trend in Safeguarding Adult Review referrals for people experiencing neglect or abuse compounded by the first wave of Covid-19 restrictions. OSAB is prioritising the sharing of lessons from these cases as quickly as possible to inform current and future waves of restrictions.

Recommendation

Members of the Health and Wellbeing Board are asked to consider and comment on the Oldham Safeguarding Adults Board 2019/20 Annual Report

Appendices

1. The Oldham Safeguarding Adults Board 2019/20 Annual Report

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**OLDHAM
SAFEGUARDING
ADULTS BOARD**

**ANNUAL REPORT
2019 – 2020**

“ The most important thing for me was having support to help me live life the right way . . . one year I was in hospital twenty two times, last year I wasn't in hospital once.”

Participant
Oldham Safeguarding Event
September 2019

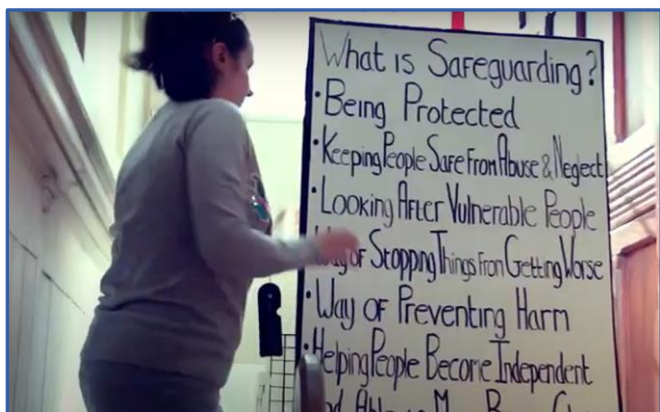
Contents

Helping people live safely in Oldham	3
Profile of Oldham	4
Message from the Independent Chair	7
Safeguarding Adult Reviews	8
People at the heart of what we do	10
Our work in 2019/20	11
Partner Contributions	12
Oldham Council	
Oldham Clinical Commissioning Group	
Greater Manchester Police	
Our Plans for 2020/21	15
Get involved!	16

Helping people live safely in Oldham

Whilst abuse can happen to anyone, some people face a greater risk of being hurt, neglected or exploited. The Oldham Safeguarding Adults Board aims to help people in Oldham to live safely and make sure that everyone is valued and their rights are protected.

There are many different types of abuse and neglect such as financial and sexual abuse, domestic violence, elder abuse, modern slavery all of which can happen at home, in the community or within a care setting. The term Safeguarding describes how organisations work together to help people live free from harm, abuse and neglect.



By law, each Local Authority area in England must have a Safeguarding Adults Board that is responsible for protecting people's health, their wellbeing and their human rights.

The Board has 3 core duties:

- **Produce a Strategic Plan setting out the changes the Board wants to achieve and how organisations will work together**
- **Publish an Annual Report setting out the safeguarding concerns it has dealt with in the last year as well as future plans to help keep people safe**
- **Undertake a Safeguarding Adult Review where it believes someone has experienced harm as a result of abuse or neglect**

This Annual Report provides information on the types of safeguarding concerns seen in Oldham during 2019/20 and sets out the actions the Board has taken to help keep people safe. The Report also gives details of the Safeguarding Adult Reviews it has undertaken and what it has done to ensure that any lessons learnt from these reviews have shaped and improved the way services work in Oldham.

Who are we?

By law, the Board membership must include Oldham Council, Oldham Clinical Commissioning Group and Greater Manchester Police.

The Board works as a collaboration between the following partner organisations:

- Age UK Oldham
- Positive Steps
- Early Help
- National Probation Service
- Community Rehabilitation Company
- Dr Kershaw's Hospice
- Greater Manchester Police
- Pennine Care NHS Trust
- Public Health
- Pennine Acute NHS Trust
- Turning Point
- Healthwatch Oldham
- Multi-Agency Safeguarding Hub
- Northern Care Alliance
- Action Together
- Housing Services
- Greater Manchester Fire and Rescue Service
- Oldham Council
- Oldham Clinical Commissioning Group

The Board is managed by an independent Chair who is responsible for providing leadership, ensuring partners carry out the legal duties of the Board and to offer independent and constructive challenge.

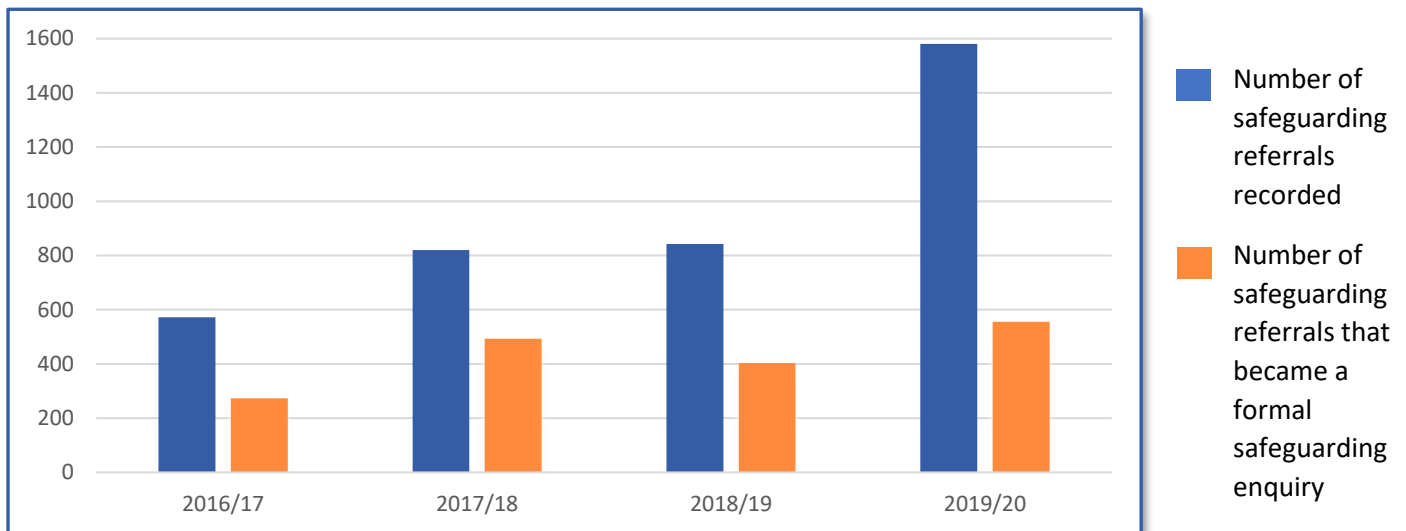
We are also working with Oldham residents and communities to set up the **Oldham Safeguarding Voice Network**. This group will help to inform the work of the Oldham Safeguarding Adults Board, lead awareness raising campaigns and engagement events, and support the training of operational teams.

Profile of Oldham

The following section shows the adult safeguarding referrals recorded for Oldham residents in 2019/20 and compares this information to referrals from previous years. This comparison enables us to identify any changes in the number and types of safeguarding concerns in Oldham.

Safeguarding referrals that became a formal safeguarding enquiry

Each safeguarding referral is investigated and if we believe that someone is at risk of abuse or neglect the referral becomes the subject of a formal safeguarding enquiry. The chart below shows the number of safeguarding referrals and formal safeguarding enquiries recorded over the last four years.



During 2019/20, a total of 1580 safeguarding referrals were received and of these 556 became the subject of a formal safeguarding enquiry. The number of safeguarding referrals recorded in 2019/20 has almost doubled compared to the number in 2017/18. Some of this increase may be due to improvements in the way information is recorded and campaigns designed to encourage people to report any safeguarding concerns.

Sex, age and ethnic group of safeguarding referrals



safeguarding referrals were about women in 2019/20



safeguarding referrals were about men in 2019/20

In 2019/20 a total of 1580 safeguarding referrals were received and of these 55% of the referrals related to women, 44% of referrals related to men and 1% were unknown. In Oldham women make up 51% of the total adult population so the percentage of safeguarding cases per head of population in 2019/20 were slightly higher for women than for men.

Of the 1580 safeguarding referrals in 2019/20:

- 772 were 18-64 years old
- 206 were 65-75 years old
- 602 were 85 years old or older



Of the 1580 safeguarding referrals in 2019/20:

- 81% were White British
- 9% were Asian/Asian British
- 1% were Black/African/Caribbean
- 2% were Other
- 7% were Unknown

The breakdown by age group showed that 49% of cases related to someone aged between 18 and 64 and 38% of cases related to someone aged over 85.

These figures suggest that White British people aged between 18 and 64 were more likely to be the subject of a safeguarding enquiry in 2019/20, compared to any other group.

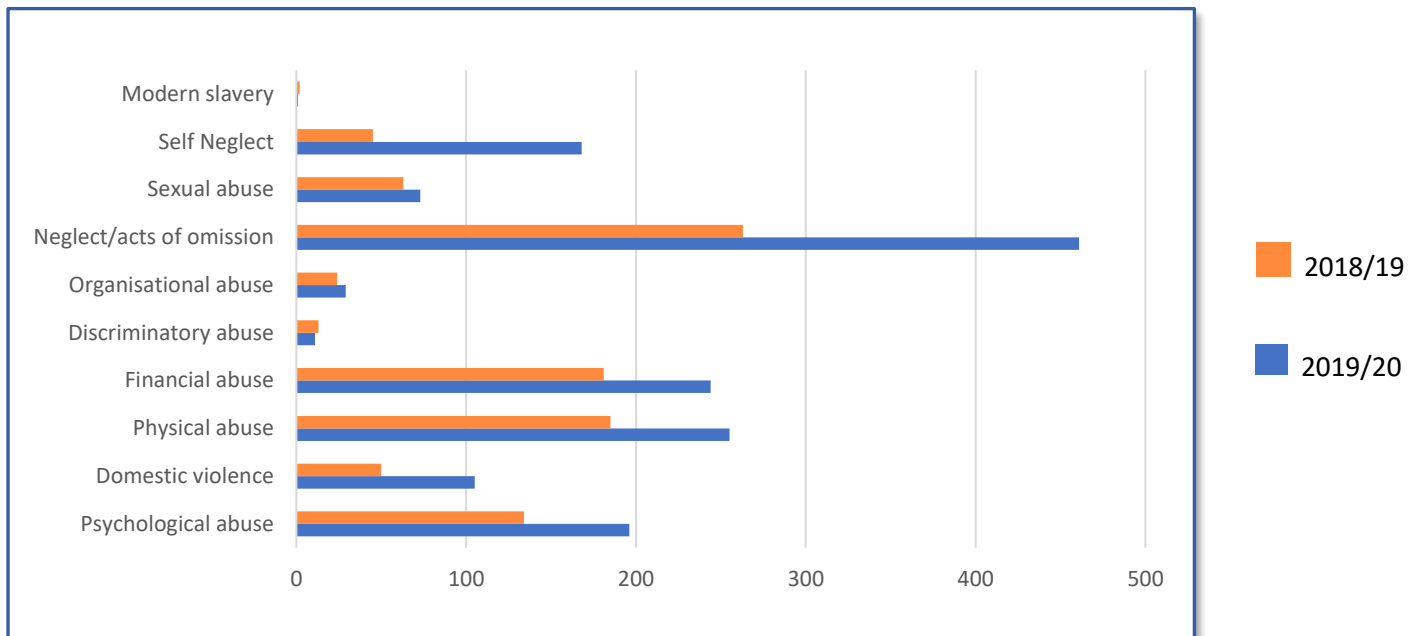
Number of closed safeguarding referrals and enquiries



During 2019/20 more safeguarding referrals and enquiries were closed than the year before and many of the cases in 2019/20 were more complex as 48% involved people who lacked capacity to make their own decisions compared to 30% in 2018/19.

Types of safeguarding abuse

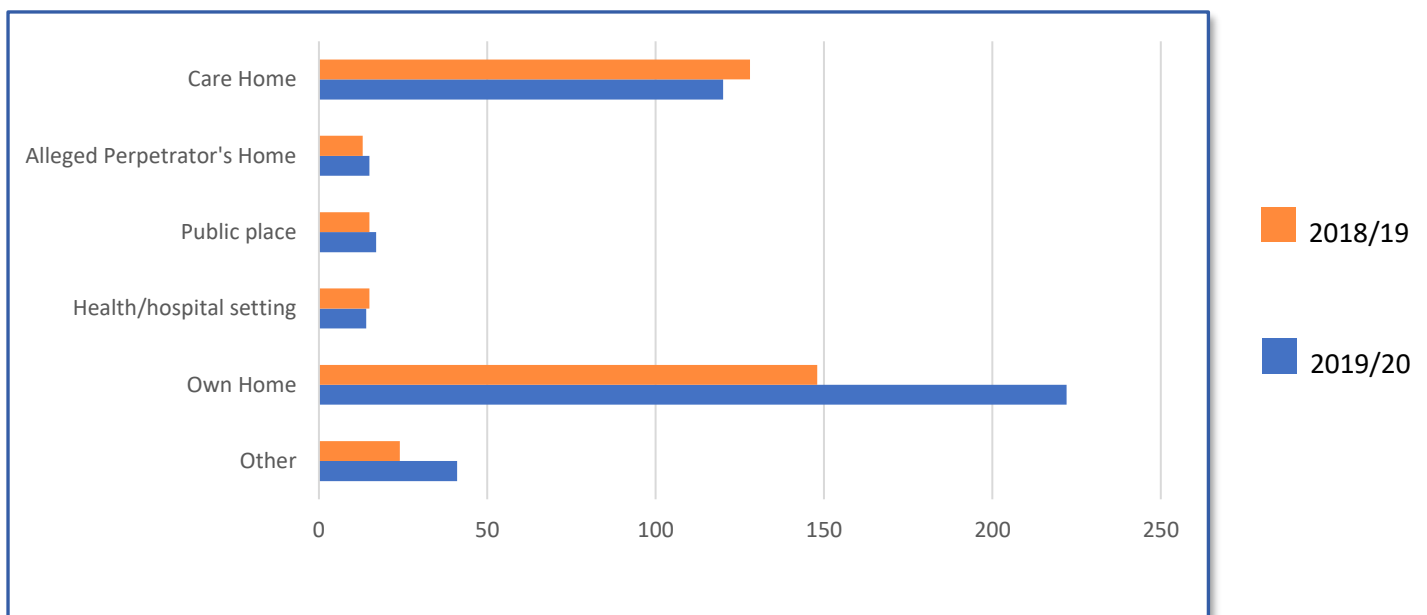
The chart below shows the number and type of safeguarding abuse investigated in 2019/20 compared to those investigated in 2018/19.



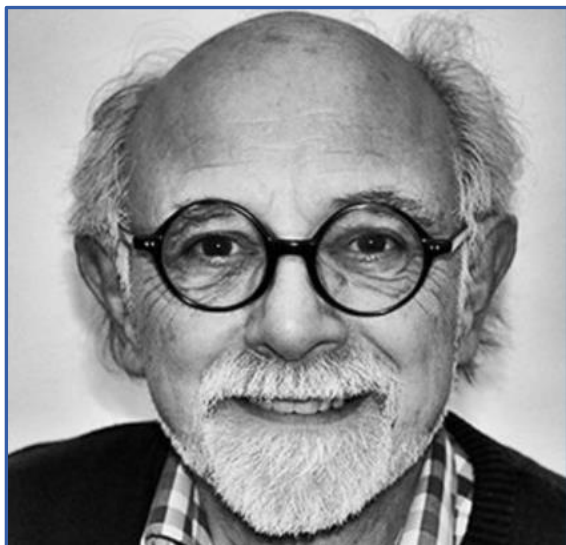
There has been a significant increase in the number of cases relating to self-neglect, neglect by care services or carers, and domestic violence (which can also include physical abuse, sexual abuse and/or psychological abuse). Some of these increases coincide with lockdown restrictions during the Covid-19 pandemic at the end of 2019/20 when families found it harder to access services and support.

Where the abuse took place

The chart below shows the number of safeguarding enquiries completed by location in 2019/20 compared to the cases completed in 2018/19.



Message from the Independent Chair



alignment of services across Oldham's five health and social care community clusters to reflect locality living.

All of this should ensure a more responsive safeguarding provision from agencies and a greater confidence in the community to raise safeguarding concerns.

The Oldham Safeguarding Adults Board continues to commit itself to being a learning forum. This can be seen in its response to findings from the Safeguarding Adult Reviews, its ability to adapt and respond to new manifestations of safeguarding need and its preparedness to be led by people's experiences of accessing help and support.

As part of our learning culture we invited Dr Adi Cooper OBE to join our Development Day in February 2020. Drawing on her extensive experience chairing the Association of Directors of Adult Social Services (ADASS) and several Safeguarding Adults Boards, Dr Cooper reflected on the positive attitudes of partners and culture of the Oldham Board. She challenged us to aim high with our safeguarding ambitions and to continue to shift from a Local Authority focus to ensure that safeguarding is recognised as everyone's business.

The period covered by this annual report came to a close as the impact of the Covid-19 pandemic was felt in Oldham. Whilst this posed significant challenges for all agencies and services in Oldham, including the Adult Safeguarding Board, it has also shown how well services have come together to safeguard adults at greater risk of experiencing abuse and neglect as a result of the lockdown arrangements. The Covid-19 pandemic has also provided significant learning opportunities, as we will report next year, which will enable more effective safeguarding practice in the future.

A handwritten signature in black ink, appearing to read 'Henri Giller'.

Henri Giller
Independent Chair
Oldham Safeguarding Adults Board

“ This annual report demonstrates the growing role of the Oldham Safeguarding Adults Board and the effective influence its work has on the lives of people in Oldham. However, this increase in influence and the reach of the Board across local communities, brings an increase in the number of referrals and enquiries into adult safeguarding concerns. Moreover, these referrals and enquiries show an ever-increasing degree of complexity and involve people who do not always have the capacity to make decisions with respect to their own health, safety and wellbeing. This, in turn, is reflected in the primary reason for referrals. While we continue to see substantial numbers of referrals for physical and psychological abuse, there has been a significant increase in the number of referrals that relate to neglect or acts of omission, where people have struggled to meet their basic needs including medication, nutrition, housing and heating.

In order to meet the different safeguarding challenges, the Oldham Adults Safeguarding Board has been seeking to reposition itself to be more responsive to emerging trends. This is all part of the Boards response to improve its efforts in Making Safeguarding Personal.

This work has involved close examination of the context for prevention of safeguarding need and how we translate this into practice, the engagement of users and their carers to gain a better understanding of what they need to help keep them safe, and the re-

Safeguarding Adult Reviews

The Board has a legal duty to carry out a **Safeguarding Adult Review** if it believes that someone in Oldham has died of, or experienced, serious abuse or neglect which could have been prevented. A review brings together all the organisations connected with an individual to review the way services worked together. The process also invites the individual, if they are still alive, or the family to take part in the process to share their experiences.

The aim of a review is to gather learning to improve services and prevent the abuse or neglect happening again. There are many different types of abuse and neglect including financial abuse, sexual abuse, neglect, domestic violence, elder abuse, physical abuse, psychological abuse, modern slavery and organisational abuse.

Where cases do not meet the legal requirements for a formal Safeguarding Adult Review, but the Board feels there are lessons to be learnt, it can carry out a Learning Review.

The information below shows the number of reviews that were commissioned by the Board in 2018/19 and 2019/20.

2018/19 2 Safeguarding Adult Reviews
1 Learning Review



2019/20 5 Safeguarding Adult Reviews
4 Learning Reviews



The following stories show what can happen when families and services work together to prevent abuse or neglect or, in the case of Kasia, what happens when there isn't a service with overall responsibility for coordinating support.

Andy's Story

Andy is 40 years old. A few years ago, he was attacked and suffered a brain injury which has left him with several chronic health issues including epilepsy, neurogenic bowel and bladder problems and problems swallowing. Andy receives all his nutrition via a special (PEG) tube.

Andy depends on nursing staff to anticipate all his needs and sometimes this requires 5 members of staff to help him at the same time which can upset him.

Andy's mum raised several safeguarding concerns about the nursing staff relating to unexplained bruising, issues with the PEG feed and his personal care. Concerns were also raised by the nursing staff who were unhappy with the way Andy's mum behaved with them. The relationship between nursing staff and Andy's family started to break down.

A safeguarding enquiry officer got involved and recognised that Andy's communication improved through one-to-one interaction and with people who he is close to. The enquiry officer developed a positive relationship with Andy and completed a life story with him.

As Andy did not have the capacity to make his own decisions about where he lived, or about his care and treatment, the enquiry officer connected him to an independent advocate who was appointed to represent Andy's wishes at meetings about his care.

Andy was originally from Manchester and his family still live there. One of the outcomes from the 'Making Safeguarding Personal' conversations with Andy, his advocate and his family was to move him to a nursing home in the Manchester area.

Andy's mother and other family members can visit him every day and the combination of this and less restrictive care means that he is more settled, and his family have a more positive relationship with staff.

Safeguarding Adult Reviews

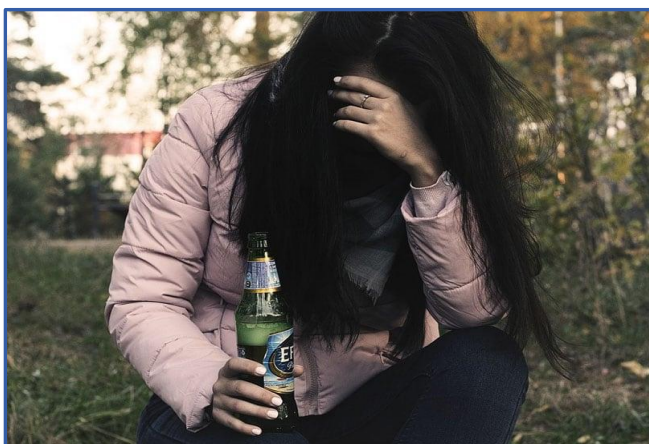
Kasia's Story

Kasia was a victim of domestic violence. Her three children were living with other family members whilst she was living in a rented property with no food or heating. Kasia was at risk of becoming homeless and services were concerned about her mental health and wellbeing because she often drank, became aggressive and neglected her wellbeing.

On one occasion Kasia was admitted to hospital as she was found unconscious outside her house with hypothermia after drinking alcohol. Kasia experienced minor physical injuries in the year before she died such as bruising and grazes associated with falls.

Kasia's mother tried to get support for her daughter on several occasions and finally reported her concerns to the police. The police went to Kasia's house but found that she had died. There were around one hundred empty alcohol bottles littered throughout the property.

It is not clear if Kasia understood the implications of her actions because services did not explore this with her. What is clear is that Kasia was known to several different services so the main concern raised by the Safeguarding Review was that agencies had failed to talk to each other about how they could work together to help Kasia.



The Safeguarding Review for Kasia also looked at some similar cases. The review made the connection between key factors such as homelessness, childhood trauma, physical and mental ill-health and substance misuse.

The following recurring issues were highlighted by the review:

- Frustration by people with multiple and complex needs to connect with lots of different services at the same time.
- Inflexible services that do not shape their support to meet people's unique situations. Services can create barriers to access, especially for those whose lives are chaotic and challenging.
- Adverse childhood experiences can result in homeless women experiencing a complex mix of social and health issues which put them at risk of further abuse.
- Services can be quick to close cases, or step back and transfer responsibility to others, or have rigid referral criteria when a more flexible and proactive approach is needed to look at people as individuals.
- In cases of domestic violence and child protection, services should also consider ongoing support to safeguard a mother when children are removed.

The Board accepted all fourteen of the recommendations in the Safeguarding Review and have a plan in place to change the way services work to prevent similar cases like this happening again. The key recommendation focuses on improving multi-agency working by identifying a lead agency and key worker and hosting multi-agency meetings that create the time and space to focus on complex and challenging cases that span across Adults and Children's services.

The Board has made a commitment to implement the recommendations within twelve months and report back on the changes it has made to services and how this has improved the situation for people in Oldham.

An update will be included in next year's Annual Report.

People at the Heart of what we do

One of the main priorities of the Board is to ensure that agencies listen to the wishes of the individual at the centre of a safeguarding enquiry. Whilst this seems obvious sometimes the act of bringing organisations together to help find solutions can end up focusing on the process rather than the person.

In Oldham we want to make sure that people control decisions about their own lives.

What we did in 2019/20

Every safeguarding enquiry must start by asking the person what they would like to change about their situation or what they want to happen as a result of the safeguarding concern. This is recorded so the Board can review how well services support people during a safeguarding enquiry.

In 2019/20, over 90% of Oldham residents involved in a safeguarding enquiry were asked about their wishes and the outcomes they wanted to achieve. Our aim is to increase this figure in 2020/21 and we will report on our progress in next year's Annual Report.

The Board has also been involved in an exciting project with a Community Theatre Company called Made by Mortals. In September 2019, a mix of local people and professionals from Oldham took part in a drama production called Rats in the Sofa. The performance explored financial abuse, hoarding and self-neglect and created a safe space for people to share stories and ideas about how to keep each other safe and manage risky situations.



The project was led by Age Uk Oldham, Healthwatch Oldham, Oldham Council and Made by Mortals and was a great example of how extraordinary people

with their own 'lived experience' can create a show about safeguarding and use it to connect with others in similar situations.

"The process benefits both the audience and the performers involved. It helps professionals working in safeguarding put their work into context and consult in a meaningful and accessible way...and helps 'real people' experience a sense of authorship over their lives and the world in which they live."

Paul Hine, Made by Mortals

The aim of the performance was to come up with solutions to help prevent abuse and neglect. The performance listened to the experiences of people with mental health, learning disability, addiction and/or long-term health issues who are not eligible for Adult Social Care support.

Rats in the Sofa was jointly funded by Healthwatch Oldham, Turning Point, Age Uk Oldham, Oldham Council, Oldham CCG, GMP and Greater Manchester Health and Social Care Partnership.

Our plans for 2020/21

In 2020/21, we will continue to develop solutions to help prevent people in Oldham experiencing abuse, neglect or exploitation. Despite the impact of the Covid-19 pandemic we will continue to collect and share people's stories. We are working with local people and groups to establish a **Safeguarding Voice Network** and create a podcast library. People's stories will be used to help professionals and organisations adapt services to reflect the needs and wants of people in Oldham, ensuring that the views of local people are at the heart of Oldham's safeguarding practice.

"Sharing stories allows people to be educated and to be closer together and that is important in a social community like we have."

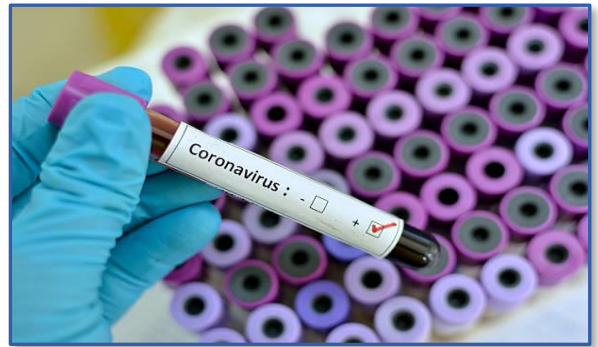
John, Rats in the Sofa, September 2019

Our Work in 2019/20

The role of the Oldham Safeguarding Adults Board is to ensure that organisations across Oldham are working together to help adults live safely. This means helping people to make decisions about the risks they face and protect people who are not able to make decisions for themselves.

The Board's Three-Year Strategy sets out the changes it wants to achieve and explains how partners will work together. Each year partner organisations provide an annual summary of their safeguarding work which is published in the Board's **2019/20 Single Agency Report**. Some key achievements include:

- Oldham partners have delivered mandatory safeguarding awareness training to relevant staff and additional training has been offered by some agencies covering the Mental Capacity Act, suicide prevention, domestic abuse awareness and 'unconscious bias'.
- Learning from the Safeguarding Adult Reviews has changed the way services are provided through new policies and procedures on 'Persons in a Position of Trust' and self-neglect. As an example, The Royal Oldham Hospital has adopted processes to identify and address self-neglect both within the hospital and community setting.
- A dedicated Business Unit has been set up to strengthen and improve the local Safeguarding Adults Board arrangements. The service is hosted by Oldham Council and provides a multi-agency safeguarding resource for partners on the Board as well as agencies and communities across Oldham.
- A total of fifteen workshops have been held to raise awareness of PREVENT, a programme designed to reduce the radicalisation of vulnerable adults. Over 380 staff from different organisations took part in the training.
- The Prevention Sub Group reviewed eight safeguarding case studies to understand what good preventative safeguarding looks like. The group identified several recurring themes relating to older people who self-neglect, in particular the need to improve the early identification of safeguarding concerns within primary care.



- In March 2020, the Covid-19 pandemic and lockdown restrictions changed people's situations overnight. The Board recognised that limited access to family, friends and services placed some groups in Oldham at a much greater risk of abuse or neglect. In response it set up the Covid-19 Safeguarding Assurance Group bringing together council, health and police services. Through weekly updates the group gathered information to identify safeguarding trends and understand the levels of risk for people in Oldham. The Board ensured that organisations reacted appropriately to safeguarding issues as they emerged.
- Domestic abuse and elder abuse have been key areas for concern during the Covid-19 lockdown. Partners in Oldham were quick to adapt their services and focus on prevention. The National Probation Service worked with several agencies to ensure known victims of domestic violence were actively supported during lockdown, whilst Greater Manchester Police hosted successful domestic abuse Facebook adverts and campaigns with partners in Oldham. Age UK Oldham also created a crisis support service to help unpaid carers manage the challenging behaviour of the person they care for during lockdown.
- Care Homes have also felt the impact from Covid-19 with the dual challenges of low staffing levels and residents with high needs. Council and health services in Oldham established the multi-agency Supporting Treatment in Care Homes (STICH) team to offer wrap around support and pick up any safeguarding concerns. The STICH model has been identified as an example of best practice across Greater Manchester

Oldham Council is responsible for providing a range of public services to support local communities. One of the main services it provides is Adult Social Care which offers practical support to help people live independently and safeguard people who have extra support needs from abuse or neglect.

In Oldham, Social Care has been integrated with some community health teams and sits within the **Adult Community Health and Social Care Service**.

Where does safeguarding fit?

Safeguarding is central to Oldham's Adult Community Health and Social Care service. We work with individuals to make safeguarding personal by understanding what is important to them and how they want to live safely. Working with other agencies we help people to identify and manage risks to help safeguard themselves and prevent abuse.

We also have a duty to make sure that people are not illegally deprived of their liberty, and work with care providers to review the quality and safety of their services so people are not neglected or abused.

Lessons from Safeguarding Adult Reviews

In line with recommendations from the Self-Neglect Thematic Review new systems have been set up across Adult and Children's services to help staff understand and recognise patterns of self-neglect as they emerge. These systems also include multi-agency processes designed to coordinate and join up services to help people live safely and maintain their wellbeing.

In 2019/20 our safeguarding work focused on:

- **Consistent Safeguarding** – we have been working with partners to develop guidelines and policies to improve the way statutory services work together to safeguard adults.
- **Improving skills** – a programme of safeguarding training has been delivered to Community Health and Social Care services to improve the way we identify, support and help people to keep safe.

- **Creating a new multi-agency Strategic Safeguarding Service** - based on recommendations from the Safeguarding Review completed in January 2019, the new service includes specialist safeguarding workers, a revised Deprivation of Liberty function and enhanced safeguarding support based within five community hubs.
- **Tackling new safeguarding trends** – particularly focusing on emerging issues of self-neglect, domestic abuse, and complex safeguarding which can include sexual and financial exploitation, drug and alcohol issues and trafficking. Some trends increased during the Covid-19 pandemic and will continue to be a priority in 2020/21.

Our Priorities for 2020/21

Oldham Council will continue to deliver its statutory safeguarding functions and the focus on human rights, wellbeing and safety will be central to the work of Community Health and Social Care Services.

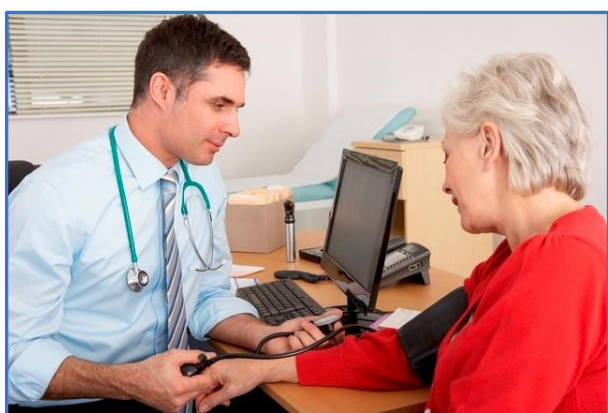
The biggest challenge going forward will be the continued impact of the Covid-19 pandemic. Whilst our statutory duties for safeguarding have not changed, Adult Community Health and Social Care Services in Oldham have responded to the pandemic by adapting ways of working to maintain existing services whilst developing new solutions to support adults at greater risk of abuse or neglect as a result of the Covid-19 pandemic lockdown. We are preparing for an increase in safeguarding activity as the visibility of some adults who have been hidden from services is regained. Other priorities for 2020/21 include:

- Embedding safeguarding within the five community hubs across Oldham to proactively identify and connect with people who have extra support needs to prevent a safeguarding incident.
- Improve the current Deprivation of Liberty Safeguards as part of national legislation designed to support people who do not have the capacity to make their own decisions.

We will continuously review safeguarding trends and how we are working to ensure Community Health and Social Care services can respond to any increases in demand during the Covid-19 recovery phase and ensure individuals remain at the heart of our work.

NHS Oldham Clinical Commissioning Group is responsible for deciding how taxpayers' money is spent on the health of people who live in Oldham. It is a member led organisation and every family doctor in Oldham is a member.

The vision of NHS Oldham Clinical Commissioning Group is to improve the health and healthcare for people of Oldham and ensure high quality services are provided close to the patient's home and represent good value for money. The Clinical Commissioning Group shapes the services provided by local GPs and hospitals.



Where does safeguarding fit?

Safeguarding is central to the work of the Clinical Commissioning Group. As well as commissioning health services on behalf of Oldham residents it has a key role reviewing services to make sure that the people who use them are safe and protected from abuse or neglect.

As well as being core members of the Board, the Clinical Commissioning Group deliver regular safeguarding training sessions and the Designated Safeguarding Nurse for adults leads the Safeguarding Adult Reviews.

Lessons from Safeguarding Adult Reviews

One of the main areas of learning from the Safeguarding Reviews relates to the development and care of pressure ulcers. An action plan has been developed based on review recommendations to create a multi-agency process to ensure the early identification and treatment of pressure ulcers.

In 2019/20 our safeguarding work focused on:

- **Pressure ulcers** – at a Greater Manchester level we have been working with partners to review current processes to manage safeguarding concerns for people with pressure ulcers.
- **Self-neglect** – At the beginning of 2019/20, the Safeguarding Adults Board commissioned a thematic review in response to four self-neglect cases that resulted in the deaths of Oldham residents. The Designated Safeguarding Nurse was the lead for this review, supporting the independent author. The review is an example of a successful multi-agency initiative with over fifty representatives taking part in the learning event. The case of Kasia is highlighted in this Report.
- **Out of borough placements** – The Clinical Commissioning Group is working to address ongoing challenges to ensure the safety of Oldham residents placed in accommodation outside of the borough. This is a particular concern for those in specialist secure facilities.

Our Priorities for 2020/21

The Clinical Commissioning Group will continue to review and monitor the safety of services across GP practices and hospital settings and adapt services to truly embed the learning from Safeguarding Reviews.

However, the biggest challenge will be the continued impact of the Covid-19 pandemic. Health services in Oldham were quick to respond to the pandemic and have had to adapt and work in very different ways. The challenge is to ensure that all services come back to full capacity, whilst recognising that different ways of working will continue for the foreseeable future. Whilst this presents a challenge it also brings opportunities as teams and services have found ways of working more collaboratively together to solve problems quickly and effectively.

As lockdown eases, we need to balance the safety of both staff and service users whilst remaining visible to those in extremely vulnerable circumstances. We will strive to make sure services across the system work well together whilst ensuring that the needs of the individual remain a key priority.

Partner Contributions



Greater Manchester Police exist to keep people safe and protect local communities. In Oldham, Neighbourhood Policing Teams are made up of dedicated neighbourhood officers based in the community, supported by additional police officers from the wider area. We work closely with local authorities, partner agencies, community leaders and residents to decide on local policing priorities.

Where does safeguarding fit?

Safeguarding is the responsibility of every member of the policing team from call takers, first responders, neighbourhood policing teams to detectives and specialist officers. Making sure that people are safe and protected from abuse and neglect is the foremost priority at any incident. Where officers have a concern, there are clear processes in place to trigger a safeguarding referral to multi-agency partners.

In 2019/20 our safeguarding work focused on:

- Setting up a **Complex Safeguarding Team** – Complex Safeguarding is the term used by the police to describe criminal activity that includes the sexual exploitation of vulnerable children and adults, financial exploitation, trafficking and modern slavery. This work covers all ages and will be an important focus going forward.
- **Domestic Abuse** – There has been an increase in demand related to domestic abuse cases that came to a head during the Covid-19 pandemic lockdown. In response we established a Facebook Panel for domestic abuse giving us a greater reach into the community to signpost people to help.
- **Stalking Protection Orders** – These orders can be implemented without the victim's involvement if an agency feels that an individual is at risk but is fearful of supporting a stalking order.



In 2019/20 GMP faced a challenge with the introduction of a new IT platform called IOPs which made the headlines for all the wrong reasons. This resulted in an inspection and a recommendation to review the domestic abuse cases referred to the service since the system was set up. The system is now working well and has proved to be a valuable resource for supporting vulnerable adults.

Lessons from the Safeguarding Adult Reviews

GMP has set up a process to capture the recommendations and learning from Oldham's Safeguarding Adult Reviews. Information from a review is uploaded onto a district tracker and the information is cascaded to the Single Point of Contact Officer to ensure that the relevant information and recommendations are acted upon and disseminated. The Officer sends written confirmation when this has been done.

Our Priorities for 2020/21

In 2020/21 GMP will continue to focus on the impact of the Covid-19 pandemic lockdown and address the increased demand in domestic violence and child abuse cases. We expect to see a continued rise in cases due to ongoing restrictions and backlog of reports, although this is yet to be seen within GMP.

We have already initiated a successful partnership approach to World Elder Abuse Day in June 2020. This involved partners and members of the public coming together to raise awareness of Elder Abuse through a social media and leaflet campaign. We are also planning to hold a second Stalking Scrutiny Panel bringing together police, the Crown Prosecution Service, Victim Service Coordinators and other partners to develop a multi-agency response.

Other priorities will focus on the Investigative Safeguarding Review which is the evaluation of the merger of the Criminal Investigation Department with the Public Protection Investigation Unit and how it can improve investigations involving vulnerable adults. We will continue to roll out the successful Adult at Risk Policy used by frontline officers attending calls where they recognise vulnerability.

Our Plans for 2020/21

The work of the Oldham Safeguarding Adults Board and its Sub Groups are continuing as normal despite the impact of the Covid-19 pandemic. Virtual meetings are working well and some of the new safeguarding processes introduced for lockdown will continue as best practice going forward.

As the ongoing impact of Covid-19 will not be known for some time, local safeguarding trends will be closely monitored and reviewed to ensure the Board remains focused on issues that pose the greatest risk to vulnerable adults. The Board's current priorities for 2020/21 are to:

1. Support recovery following the Covid Pandemic.

This includes supporting victims caught up in the back log of domestic abuse court cases and managing the increase in safeguarding concerns experienced by GM Police, Fire and Rescue Services, Turning Point drug and alcohol support and Pennine Care NHS Foundation Trust.

2. Improve the way we communicate: Our priority is to develop the Oldham Safeguarding Adults Board website to provide information, newsletters and training resources for communities and professionals. The website will also host a programme of awareness campaigns coordinated with the Local Safeguarding Children's Partnership.

3. Help young people moving into adult services: Establish a 'Transitions' safeguarding offer to ensure seamless support for young people leaving care, and for young people moving into adult health, social care or criminal justice services. The joint Children's and Adults Transitions Sub Group will review how well the current Transitions offer works and highlight new initiatives such as the introduction of specialist Transitions staff by the GM Community Rehabilitation Company (CRC).

4. Make it easier to report a concern: We will review the way safeguarding enquiries are reported and managed through the Multi-Agency Safeguarding Hub (MASH). This includes developing clear processes to manage safeguarding referrals and concerns for people who are at risk of abuse but not eligible for Adult Social Care support.

5. Be led by people's experiences of services: Set up the Safeguarding Voice Network to make sure the work of the Oldham Safeguarding Adults Board is shaped by the views of local people. The Rats in the Sofa engagement event started to identify interested individuals and groups, however Covid-19 lockdown restrictions have delayed the Network getting together. In response, the 'Making Safeguarding Personal' Sub Group is working on a virtual project to connect people and share stories.



6. Ensure consistent safeguarding standards: Set up a group to review the quality of services in Oldham, making sure that different organisations have the same standards in place to safeguard adults and all services use the same processes to report and manage safeguarding concerns.

7. Embed learning from safeguarding reviews: Make sure that recommendations and learning from the Self-Neglect Thematic Review are adopted by all partner organisations and reviewed to understand how these changes have made a difference.

8. Respond to Complex Safeguarding issues: Build on the work of the Children's Safeguarding Partnership, GMP, Domestic Violence Partnership, National Probation Service and housing to focus on complex issues related to exploitation. Learning Events will bring together people with lived experience and agencies to share understanding and help prevent these forms of abuse from happening in the future.

9. Training: We will work collectively to commission and provide safeguarding training resources for partner organisations and Oldham communities.

Get involved!

There are lots of ways to get involved to support the work of Oldham's Safeguarding Adults Board.

Stay in touch

The work of the Board is supported by the Safeguarding Adults Business Unit. We help the Board to carry out its legal roles and signpost residents and professionals to information, advice and training resources. If you would like to keep in touch and find out more about our work through our newsletters, please contact us by email:



OldhamSafeguardingAdultsBoard
@oldham.gov.uk

Oldham Safeguarding Voice Network

The Board is keen to work with Oldham residents and groups to set up the Safeguarding Voice Network. This group will make sure that services, are led and shaped by the people best placed to know what works: people who use the services.



As a member of this Network you will get the chance to meet and connect with other people as a social group, share your ideas, or tell us about your experiences to help us improve local services.

The Network will also lead awareness raising campaigns and engagement events and support the training of operational teams by sharing stories and experiences.

What to do if you are worried about an adult

Abuse and neglect can happen anywhere, be carried out by anyone and it can take many different forms.

If you are experiencing abuse, or you think someone you know is experiencing or is at risk of being abused or neglected, and they are not able to protect themselves then please report it.

The Oldham Multi-Agency Safeguarding Hub (MASH) has been set up to help people who want to report a safeguarding concern:



0161 770 7777 or
Adult.Mash@oldham.gov.uk

Social media

You can also follow us on Twitter and share our content to raise awareness of safeguarding and what people can do to keep them and their families and friends safe in Oldham.

 **@SafeguardOldham**

Thank you from us



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Oldham
Council

Report to HEALTH AND WELLBEING BOARD

Oldham Safeguarding Children Partnership – Annual report 1 April 2018 to 30 September 2019

Portfolio Holder:

Councillor Moores, Cabinet Member for Children and Young People.

Officer Contact: Gerard Jones, Managing Director, Children's Services

Report Author: Lisa Morris, Business Manager, Oldham Safeguarding Children Partnership

Ext. 1524 (Mobile: 07718 78092)

Date: 10th November 2020

Purpose of the report

The Oldham Safeguarding Children Partnership (OSCP) is a statutory partnership which replaced the Local Safeguarding Children Board (LSCB) on 30 September 2019. As a Board and now as a Partnership there is a statutory duty to prepare and publish an Annual Report which describes how our partners safeguard children and young people.

This annual report covers the period from 1 April 2018 to 30 September 2019 in order to conclude the work of the LSCB and introduce the new Safeguarding Partnership arrangements.

Background

The Local Safeguarding Children Boards (LSCB) were introduced in April 2006 with the primary responsibility of coordinating and ensuring the effectiveness of the work undertaken by partner agencies for the purposes of safeguarding and promoting the welfare of children and young people.

Following a national review of their effectiveness by Sir Alan Wood in 2016 the LSCBs were replaced by new safeguarding arrangements which places statutory responsibility for safeguarding children on three key agencies: Local Authority; Clinical Commissioning Group and Police. The statutory partners have identified other relevant agencies who are considered key to safeguarding and promoting the welfare of children in Oldham. Collectively these agencies make up the Oldham Safeguarding Children Partnership.

This 18-month report demonstrates the activity and impact that Oldham LSCB had in year one of our three-year strategic plan (2018-2021) across six key priority areas:

- Domestic Abuse

-
- Complex and Contextual Safeguarding
 - Children not accessing education
 - Transitions
 - Understanding the impact of trauma
 - Child's lived experience

A key element of the new arrangements is the closer alignment of the Children's Safeguarding Partnership and the Safeguarding Adult Board. This will be achieved by joint working arrangements between the two Business Units, and the introduction of joint subgroups focusing on Complex and Contextual Safeguarding, Transitions, Workforce Development and Communications.

Current position

The vision and aims of the Oldham Safeguarding Partnership are those stated in the Oldham Strategic Safeguarding Plan 2018-2021. While the plan was originally developed and signed off by partners under the Local Safeguarding Children's Board (LSCB) arrangements, the local safeguarding partners continue to be committed to this vision and aims, demonstrating the continuity of their commitment to the safeguarding partnership, irrespective of change to governance structures.

The vision of the partnership is:

"For everyone to work together to ensure that all children and young people are safe and feel safe within their homes, schools and communities,"

Over the period from 1 April 2018 to March 2021 the strategic aims of the Board and now the Partnership are to ensure:

- Excellent practice is the norm across all practitioners in Oldham
- Partner agencies hold one another to account effectively
- There is early identification of new safeguarding issues
- Learning is promoted and embedded
- Information is shared effectively
- The public feel confident that children are protected

Key issues for Health and Wellbeing Board to consider

In the 18 month period between 1 April 2018 and 30 September 2019 progress was evident in all priority areas with key successes including the introduction of Operation Encompass to support information sharing about domestic abuse between police and schools; the introduction of multi-agency training to support trauma informed practice across the Partnership and dedicated work with children and young people to develop tools to support access to mental health support services.

Learning and improvement activity focused on areas of complex safeguarding. The GM peer review took place in September 2019 which highlighted a lot of good practice and areas for improvement, all of which are being used to shape and develop Oldham's Complex Safeguarding offer.

Six serious case reviews and two multi agency concise reviews were held during the period of the report, highlighting key learning themes which include:

- The need for evidence-based approaches and interventions relating to children's mental health and trauma;
- A focus on improving the quality of assessments

-
- A collective commitment to addressing neglect
 - A focus on collaborative working, decision making and planning
 - Early identification of risk specifically in relation to unborn babies, non-mobile children and those at risk of exploitation
 - Supporting professionals to be culturally competent in their practice

Multi- Agency training continues to be of high quality with over 52 training opportunities made available to professionals from across the Partnership. These are delivered through a variety of access points which includes briefings, half day events, one and two-day courses, targeted training linking into strategic plans and quality assured e-learning modules where appropriate.

Next Steps

The Partnership's focus from 30 September 2019 is on the embedding the new safeguarding arrangements, evaluating their effectiveness and impact against the key strategic aims.

Joint working with Safeguarding Adult Board will continue to develop with the implementation of a joint Safeguarding Oldham brand, social media and website platforms and the engagement of adult safeguarding colleagues in a new model of learning and improvement for children's partnership (the learning hub) which will ensure that cross cutting themes are identified and responded to quickly and effectively.

Recommendation

Members of the Health and Wellbeing Board are asked to consider the Oldham Safeguarding Children Partnership Annual Report for 1 April 2018 to 30 September 2019.

Appendices

1. The Oldham Safeguarding Children Partnership Annual Report for 1 April 2018 to 30 September 2019

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OLDHAM LOCAL SAFEGUARDING CHILDREN BOARD ANNUAL REPORT

1 April 2018 – 30 September 2019



This Annual Report is a public document.

It can be accessed on the website of Oldham Safeguarding Children Partnership: <https://www.olscb.org/about/publications/>

Approved by Oldham Safeguarding Children Partnership on 17 September 2020

Independent Chair: Dr Henri Giller

Report compiled and written by: Lisa Morris (OSCP business Manager)

Date of publication: 28 September 2020

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Sources and verification:

Availability and accessibility: if you would like to receive this report in any other format please contact Lisa Morris - address above.

Contents

1. Foreword by Independent Chair.....	4
2. Introduction	5
3. Oldham’s context.....	5
4. Oldham’s Safeguarding snapshot	6
5. Progress on our priorities.....	7
6. Learning and Improvement.....	13
7. Allegations against professionals.....	17
8. Private Fostering.....	18
9. New Safeguarding Arrangements.....	19
10 What difference have we made for Children and Young People?.....	20
Appendix 1 – Governance and Membership.....	21

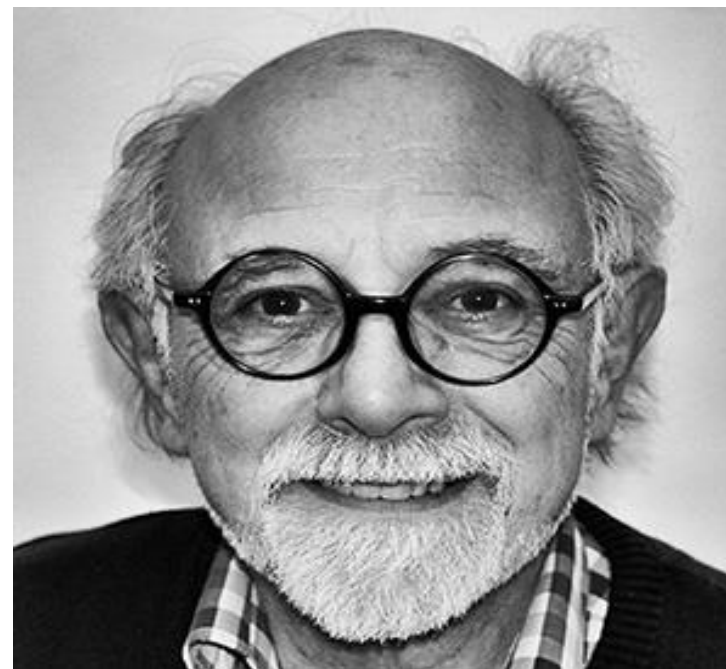
Page
35

Foreword

This is the final report on the work of the local safeguarding children board in Oldham and covers the period from April 1st, 2018 to September 29th, 2019. From September 30th, 2019, new safeguarding partnership arrangements came into effect, as required by legislation, and their initial implementation up to the 31st March 2020 will be the subject of a separate report.

During the period covered by this report the Oldham local safeguarding children board has been implementing the requirements of a new three-year strategic agenda. This has prioritised a key number of safeguarding needs that have a disproportionately negative impact on the life chances of children and young people: domestic abuse, complex safeguarding, non-access to education, childhood trauma and enduring needs requiring the transition of services from childhood to adulthood. Our understanding and response to these needs is enhanced by listening and learning from the child's lived experience and effectively communicating these safeguarding issues to professional and local communities in Oldham.

This report clearly demonstrates the scale of the safeguarding task in Oldham, the professional commitment to the delivery of partnership working and the impact such commitment has on local patterns of need. While there remains the need for continuous improvement in identifying and responding to safeguarding risks and needs, the legacy of the board is such that it passes to the new safeguarding partnership a robust set of policies, procedures and strategies by which to support and safeguard children, young people and their families in the borough.



A handwritten signature in black ink, which appears to read "H. Giller". The signature is written in a cursive, flowing style.

Dr Henri Giller
Independent Chair

1. Introduction

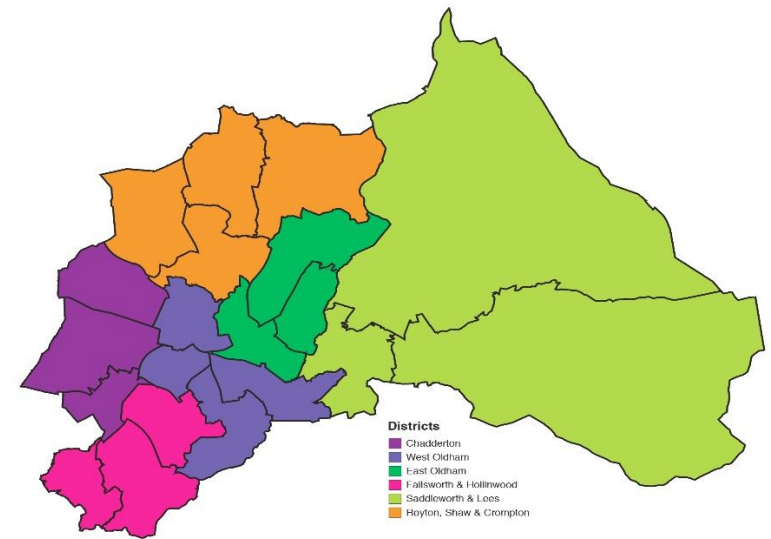
Oldham Safeguarding Children Board (OLSCB) has a statutory duty to prepare and publish an Annual Report which describes how our partners safeguard children and young people. This annual report will cover the period from 1 April 2018 to 30 September 2019 in order to conclude the work of the LSCB and introduce the new Safeguarding Partnership arrangements.

Our primary responsibility is to co-ordinate and ensure the effectiveness of the work undertaken by partner agencies for the purposes of safeguarding and promoting the welfare of children and young people. The Annual Report 2018-19 demonstrates the activity and impact that the OLSCB has had in year one of our three-year strategic plan (2018-2021).

The strategic aims include:

- Excellent practice is the norm across all practitioners in Oldham
- Partner agencies hold one another to account effectively
- There is early identification of new safeguarding issues
- Learning is promoted and embedded
- Information is shared effectively
- The public feel confident that children are protected

2. Oldham's Context



Oldham has a population of 233,759 people making it the 7th largest borough in Greater Manchester.

There is a high proportion of Oldham residents under the age of 16 years (22.5%) compared with 15.7% over the age of 65 years.

Oldham has a diverse population with 22.5% of residents from Black and Minority Ethnic (BAME) backgrounds.

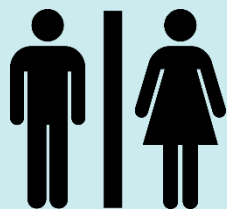
Although levels of deprivation have improved in the borough, we are still ranked 47th highest out of 327 local authority areas. Four areas within Oldham are ranked amongst the top 1.1% of the nation's most deprived areas.

21.6% of children in Oldham are living in poverty

3. Oldham's Safeguarding Snapshot

If Oldham had 100 Children and Young People

51 would be boys, 49 would be girls



56 would be White British and Irish.
19 would be Pakistani Asian and 14 would be Bangladeshi Asian. 1 child would be Black, at least one of whom would be Black African.

31 would be living in poverty, even before any housing costs are taken into consideration.

18 would be living in workless households.

8 would be Children in Need.
Less than 1 would be Looked After and less than 1 would be subject to a Child Protection Plan

Less than 1 would be at risk of Child Sexual Exploitation.

Out of 5 five-year olds, 1 would have one or more decayed, filled or missing teeth.

Out of 10 children in reception, 1 would be obese and 2 would be overweight.
Out of 10 children in Year 6, 2 would be obese and 4 would be overweight.

11 would have a special educational need. 4 would have an Education, Health and Care plan, most probably for Speech, Language and Communications Needs.

20 would be eligible for free school meals



Less than 1 would be admitted to hospital for mental health conditions

Less than 1 would be admitted to hospital as a result of self-harm

Less than 1 would be first-time entrants to the youth justice system

4. Progress on our priorities

4.1 Domestic Abuse

Our aim by 2021: To have a competent and confident workforce who can recognise and appropriately respond to the needs of children affected by domestic abuse. This will be led by a clear domestic violence and abuse strategy that is fully reflective of children's safeguarding priorities.

Key successes in year 1:

- A domestic abuse training framework has been developed which supports professionals in understanding the level of training they should access based on their role and interaction with children affected by domestic abuse.
- An audit has been undertaken to evaluate agency's use of the DASH risk assessment. The findings of the audit have been shared with the Domestic Abuse Partnership and LSCB Executive for learning to be cascaded.
- The Domestic Abuse Partnership held a workshop to develop the new strategy for 2019-2021, from which the impact on children was identified as a clear priority.

2547 incidents of Domestic Abuse were recorded by police where children were living at the home address

1221 referrals were made to Children's Services where domestic abuse was a factor

- Operation Encompass has been rolled out across schools and colleges in Oldham. The initiative supports information sharing between police and education establishments about domestic abuse incidents, allowing schools and colleges to better respond to the needs of children affected by domestic abuse. The effectiveness and impact of Operation Encompass locally is being evaluated by the Domestic Abuse Partnership.

"As Encompass develops, we can see the potential it has in supporting schools supporting pupils involved in domestic abuse incidents.

Recently one of our schools had received a notification over the weekend regarding an incident involving a pupil. Immediately from the e mail, which included a log number and the name of the officer involved, the Head and Assistant Designated Safeguarding Lead were able to quickly gain further information and context which allowed them to consider if any further intervention was required.

We are confident that as the system continues to grow, it will become embedded into practice, therefore becoming a valuable tool in supporting the safeguarding of our children and young people."

Geoff Howard – Assistant CEO, Newbridge Group

4.2 Complex and Contextual Safeguarding

Our aim by 2021: To have a clear understanding of the scale of complex and contextual safeguarding within Oldham, with a clear multi-agency response to raising awareness with children and young people, assessing their needs and providing appropriate support.

Key successes in year 1:

The Partnership has undertaken a multi-agency case evaluation (MACE) on the JTAI theme of “Children associated with gangs and at risk of exploitation.” The learning from the evaluation resulted in series of Partnership briefings on Contextual Safeguarding being delivered and contributed to the development of a Youth Violence strategy. Presentations on knife crime have been delivered in schools and a gap analysis of the existing partnership offer in relation to contextual safeguarding have been undertaken.

- A peer on peer abuse pathway has been developed and cascaded in order to support professionals to identify and assess peer on peer abuse.
- Modern slavery briefings have been delivered via the LSCB calendar
- Work has begun on establishing a joint complex and contextual safeguarding subgroup with the Safeguarding Adult Board.

Complex Safeguarding peer review

Oldham took part in the Greater Manchester Complex Safeguarding peer review in September 2019.



The review identified areas of good practice including:

- Good investment from wider partners in prevention and disruption of complex safeguarding themes.
- Investment in training for trauma informed practice.
- Piloting of a contextual safeguarding response through Positive Steps.
- Complex safeguarding nurse embedded within the team.
- Established Youth Detachment offer.

Recommendations for improvement included:

- Scope demand across partners to truly understand the extent of exploitation and resources required.
 - Review of the services and pathways to ensure they are coordinated.
 - Continuous training for wider workforce on exploitation.
- Review of assessments and planning to ensure they are child focussed and SMART.

“The outcome of this peer review was the foundation on which we have started to build Oldham’s Complex Safeguarding offer which we are aiming to be an all age service. It recognised that some good work had already been undertaken but we were only at the start of the journey and as a local partnership we needed to work closely together to fulfil our ambition. We have an action plan which we are working towards achieving and later this year a further peer review will be undertaken to measure our development.” Debbie Dooley, Vulnerability Superintendent, GMP

Contextual Safeguarding Case Study

J was open to Youth Justice Service for a Youth Conditional Caution and later a Referral Order. There were lots of concerns about his lifestyle including being involved in turf wars which included weapons, drug running and a lack of parental rules and boundaries. Dad had psychosis and mother had passed away 6 months prior.

A referral was made to Phoenix however, J was reluctant to engage, and they subsequently closed. A subsequent referral was made to Barnardo's Independent Child Trafficking Advocacy Service and due to the relationship J had with his support worker it was agreed to work in consultation with them as opposed to direct work.

A referral to Children's Social Care was also made and allocated to Aftercare due to his age. Early Help Intensive Support also became involved. A plan was agreed between agencies to explore family support networks and improve home life by Children's Social Care and Early Help and for Youth Justice Service to concentrate on J's lifestyle.

This appeared successful, J became involved in working with the Salvation Army as part of his Giving Back and was receiving lots of positive praise and feedback. He was also supported into enrolling at college and given a bike to get him there, as well as attending the gym weekend and engaging in interventions.

4.3 Children not accessing education

Our aim by 2021: All children in Oldham are accessing suitable education and where children are electively home educated that this provision is of a suitable standard.

Key successes in year 1:

- Children Missing from Education (CME) flowchart has been developed and cascaded to schools and academies to support education professionals in effectively applying the CME guidance.
- Missing from home data and missing from education data has been cross-referred to identify a vulnerable cohort of children and young people
- Contextual Safeguarding work is being undertaken with schools and colleges relating to peer on peer abuse, Harmful Sexual Behaviours and Knife Crime.
- Work has started on the development of an educational neglect policy for Oldham. Educational neglect "involves a carer failing to provide a stimulating environment, show an interest in the child's education at school, support their learning, or respond to any special needs, as well as failing to comply with state requirements regarding school attendance. (Howarth (2007))"



4.4 Transitions

Our aim by 2021: To have a clear transitions process from children's services to adult services that ensures that that agencies work together to develop a transition plan that begins at an early stage, involves the young person and their family/carers and ensures that appropriate safeguarding information is shared.

Key successes in year 1:

- Partners from both the children and adult safeguarding boards have mapped the existing pathways across five transitions workstreams:
 - Youth to adult justice
 - Child to adult substance misuse
 - Child to adult mental health
 - Children's Social Care to Adult Social Care
 - Primary to secondary to further education

The LSCB received reassurance that strong transitions pathways are in place for some of the key workstreams, particularly youth to adult justice. This was acknowledged in the Youth Justice Service Inspection in April 2019:

"Inspectors commented in several cases that positive work had been undertaken on the transition to adult criminal justice services....The YJS has undertaken valuable work with the National Probation Service to ensure that its provision supports transition to adult services."
(Ofsted 2019)

The primary focus for the Transitions subgroup in year 2 will be to consider the priority areas and expectations in relation to the safeguarding aspects of transitions.

Transitions good practice example

An example of an outstanding piece of transitions with between Youth Justice Service and Children's Social Care. During our National Standards Audit 2019-20 we audited a case where the joint working, voice of the child, multiagency bespoke plan focussing on transitions was rated outstanding.

Children's Social Care and Youth Justice Service worked together to focus all their combined efforts on a bespoke plan of transitions to adult services (Adult Social Care and National Probation Service). The young person's needs (diagnosed and undiagnosed) were taken into consideration and from reading the Youth Justice Service plan I felt like I really knew and understood him. The plan was detailed around building trust and was clear what the young person and each professional was going to do. The professionals stayed involved post 18 years and Youth Justice Service kept case supervision (we always keep case responsibility for Children Looked After but usually the supervision goes to the local Youth Justice Service) when he moved out of area. This enabled a trusting relationship, which was really important due to his frequent placement breakdowns and attachment needs. This case involved effective professional challenge regarding transition to Probation Service by the Case Manager and Social Worker which gained the right outcome.

Suzanne Taylor – Service Lead, Youth Justice and Prevention

4.5 Understanding the impact of trauma

Our aim by 2021: To have professionals appropriately trained to utilise a continuum of tools including the ACES toolkit and the Trauma Symptoms Checklist for Children in order to fully assess the impact of trauma on children and young people and to commission appropriate support to meet the needs identified.

Key successes in year 1:

- All trauma related training has been mapped across the Partnership in order to ensure a comprehensive offer of workforce development is available.
- Introduced new training sessions, delivered by the Family Nurse Partnership on the following:
 - The adolescent brain
 - Attachment
 - Communication skills
 - Engaging with marginalised clients
 - Trauma informed practice
- A directory has been developed to support professionals in signposting families for support relating to Adverse Childhood Experiences (ACES)
- Funding has been agreed by the virtual headteacher to pilot another round of Trauma Symptoms Checklist for Children (TSCC) with children looked after.



4.6 Child's lived experience

Our aim by 2021: To be confident that all professionals recognise and fully reflect the child's lived experience, including those who are non-verbal and that all children and young people can be involved in the work of the board and its partners.

Progress in year 1:

- All LSCB documents and materials have been updated to reflect the change from voice of the child to the child's lived experience.
- Briefings sessions on the child's lived experience have been added to the LSCB training calendar
- Work is taking place with Oldham Youth Voice Family to develop the Greater Manchester I-thrive logo into a tool for professionals to support young people in accessing services. Greater Manchester will be looking to adopt this as a model.
- Representatives from Oldham Youth Voice Family attended our new arrangements workshop in June 2019 and set out their expectations of us as Safeguarding Partners.

“Children desperately need us to listen to them. Inside each child is a story that needs to be told, a story that no one has yet had time to listen to. It is through expressing themselves that children get to know themselves and sort out their confusions and develop their own self-image.” Claire Winnicot (1996)

What did our children and young people tell us?

We expect to be included and involved. We expect it to be a conversation rather than a decision that is made over our heads. We are the experts in our own lives.

We expect that training is available and where possible that young people could be involved in co-delivering that training.

Opportunities
Partnership

Involved

Guidance
Consultation
Co-delivery
Awareness
Safe
Training

We expect you to provide a range of opportunities for young people to work with you directly. That could be consultations, conferences, workshops and other meaningful activities.

We expect that the priorities that you identify are developed in Partnership with young people and your plans are built on a partnership with children and young people

We expect the public to be made aware of the safeguarding partnership and of how to approach a safeguarding concern.

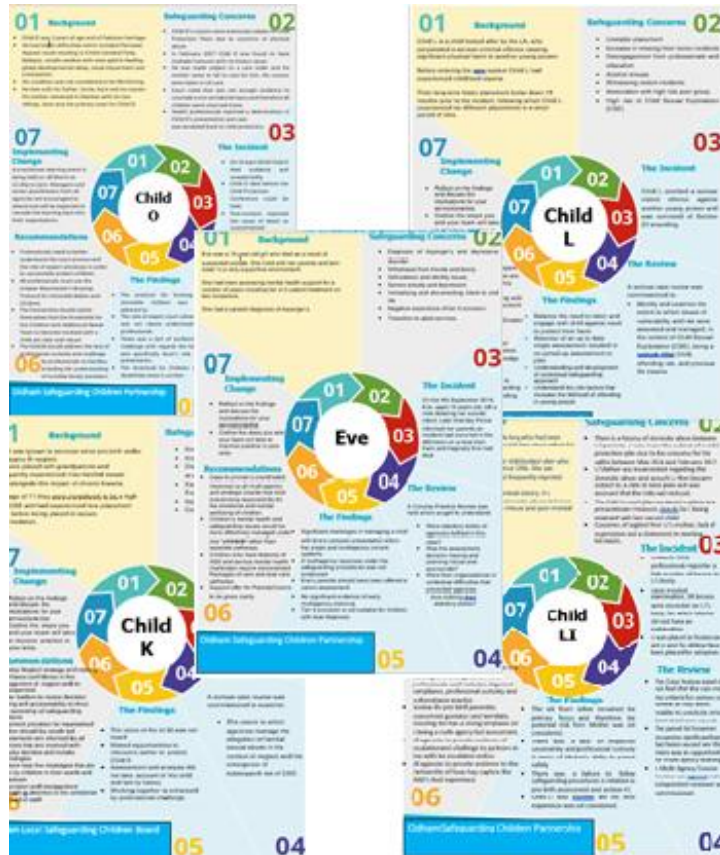
Educated
Dedicated
Included
Informed

We expect to be informed. For us to be able to understand who you are and what you do, we expect to be educated

5. Learning and Improvement

6.1 Case Reviews

The LSCB has commissioned six serious case reviews (SCRs) and two multi agency concise reviews (MACRs) during the period covered by this report. Of the eight reviews five have been completed in full. [More information](#) can be found on the website.



The reviews completed to date have highlighted the following learning themes:

- **Mental health and Trauma:** A need to identify evidence-based approaches and interventions that are effective in supporting children affected by trauma, mental health and attachment issues
- **Improving the quality of assessments** by ensuring that they:
 - are multi agency,
 - are informed by family history,
 - reflect the child’s lived experience
 - informed as a result of professional curiosity and respectful uncertainty
- **Neglect:** a collective commitment across all agencies to address neglect including the cumulative history of intergenerational neglect.
- **Collaborative working:** Focus on collaborative working, decision making and planning whilst operating a positive culture of professional challenge and dispute resolution
- **Early identification of risk:** specifically, in relation to unborn, non- mobile children and those at risk of exploitation.
- **Culture and Diversity:** supporting professionals to be culturally competent and to have the confidence to ask potentially difficult questions of other cultures.

“The SCR group has reviewed several cases during this period and utilised a variety of ways to instigate and provide assurance and learning for the partnership.

The strong support and challenge of the Partnership ensures that all cases reviewed are focused on ensuring the best outcomes from children, by identifying areas of strength and ways to strengthen the partnership work and practice.” Eileen Mills, Designated Nurse and Chair of SCR subgroup

6.2 Multi Agency Case Evaluations (MACE)

The OSCB has a duty to monitor and evaluate the effectiveness of what is done by the local authority and Board partners individually and collectively to safeguard and promote the welfare of children and advise them on ways to improve. We do this through a variety of mechanisms including performance indicators and multi-agency case evaluations.

The Board undertook two case evaluations during the period covered by this report. These were on the two following Joint Targeted Area Inspection (JTAI) themes:

Children associated with gangs and at risk of exploitation:

Out of 20 cases screened, 5 were chosen for a deep dive. The cohort were all males, aged between 12-17 years.

Top 3 strengths:

- Outstanding case with a single and coherent multi agency plan for the child
- Good information sharing between agencies
- Good offer from YJS in terms of "The Project".

Top 3 areas for improvement:

- Agencies' understanding and recognition of the risks associated with gangs
- All cases should have a single cohesive multi agency plan
- Improved multi agency response to children associated with gangs

Child Sexual Abuse in the family environment:

Out of 20 cases screened, 5 were chosen for a deep dive. The cohort included 3 females and 2 males, aged between 3-13 years.

Top 3 strengths:

- Evidence of proactive support from schools
- Evidence of timely information sharing
- Evidence of management oversight and supervision

Top 3 areas for improvement:

- Need for increased professional curiosity from all agencies
- Improvement in the quality of assessments
- SMART action plans

Key next steps:

- Develop and promote a range of tools to support the contextual assessment of children associated with gangs and at risk of exploitation.
- Develop a clear pathway of support and intervention for children associated with gangs.
- Work with Business Intelligence to review the data relating to child sexual abuse in order to better understand the prevalence in Oldham.
- Develop a multi-agency strategy to help to protect children and young people from sexual abuse.

6.3 Child Death Overview Panel (CDOP)

Oldham CDOP operates as a tri-partite arrangement with Bury and Rochdale authorities to review all child deaths where the child is normally resident in these areas. Findings are used to prevent future child deaths.

Table 1: Child death notifications and case closures in Oldham – 2018-19

Total deaths notified	% of overall GM deaths (notifications)	Closed cases	% of overall GM deaths (cases closed)
20	10%	14	7%

Page 47

In Bury, Oldham, Rochdale area 40% of child deaths were felt to have modifiable factors present such as smoking, obesity and poor care management. This is above the national percentage of 27%. Those deaths in which contributory modifiable factors are identified as deemed to be potentially preventable according to national guidance.

More detailed information can be found in the Greater Manchester [CDOP annual report 2018/19](#).

6.4 Multi Agency Training

Safeguarding children effectively requires a knowledgeable and skilled workforce. By delivering multi agency training Oldham LSCB aims to provide staff with good quality training that enhances inter agency communication, cooperation and provides a place to reflect on practice.

There are currently 52 training opportunities running with a capacity to accommodate 1,454 learners. We continue to offer a variety of access points to training which includes briefings, half day events, one and two-day courses, targeted training linking into strategic plans and quality assured e-learning modules where appropriate.

The training pool continues to be the core delivery system for training which enables us to be Oldham centric in our work. We have devised a comprehensive person specification for training pool members and offer a train the trainer course to all our members.

Attendance

Education, Health and Children’s Social Care continue to be the largest agencies accessing our training programme, although working closely with the Children’s Sector Workforce Consultant and Principle Social Worker has been required in relation to appropriate social work attendance.

Police, Housing, Positive steps and Early Help have increased attendance of around a third from 2017/2018. The Probation Service has remained static; however, Adults Social Care have seen a three-quarter increase in their attendance. We still however would like to see more representation from these agencies on our courses.

We have encountered a drop in the attendance from the third sector but are investigating if the category box as “any other groups” could account for this.

E-learning

A bespoke Oldham LSCB [E-learning module](#) has been written and devised to form part of the LSCB offer. It is Oldham and Greater Manchester centric and can be modified by a small group of administrators if required.

Impact

The training subgroup undertook a deep dive evaluation on the “**Making a child protection referral**” training.

The findings included:

- 100% of participants felt the training aims and objectives had been met.
- Several managers reported an increase in levels of knowledge and confidence within their staff post training attendance. Many participants attended as mandatory refresher training and made reference to the thresholds document, quick guide and escalation policy as information /process that were useful.
- Only two of the participants were aware of the escalation process prior to attending.
- There was evidence of information being shared with staff teams
- Many participants were attending the course as part of their induction, they would not necessarily be the designated people making referrals however it was reported the contents helped them identify potential safeguarding concerns to pass onto their designated leads.
- As a direct result of the training one attendee made a referral to MASH, the outcome being that safeguarding mechanisms were put
- in place for a young person with a social worker and phoenix worker bring allocated to them.

Comments from learners

I learnt what the neglect toolkit was and what the criteria was when using the toolkit. I now understand how I can include this within my professional practice (Intensive case worker,

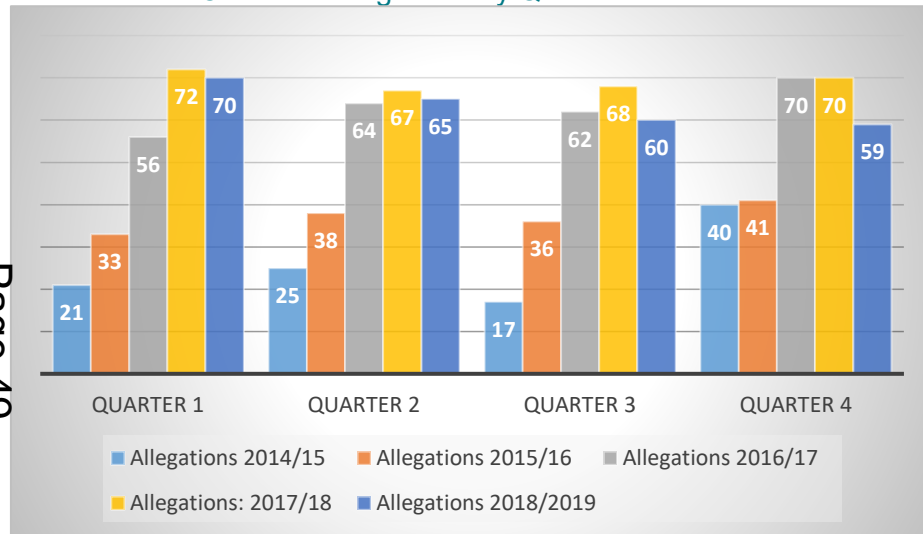
In both Missing Children and Child Sexual Exploitation, I now feel better able to identify students at risk and refer to the appropriate agencies. (Attendance Manager – School)

Learnt about the development of a baby's brain before they are born through to infancy and what impacts the development of this. Learnt about the vulnerabilities of a baby, what increases the risk of being a 'shaken baby', ways to support parents. (Senior Practitioner)

6. Allegations against professionals

The LADO role is a function of the Local Safeguarding Children's Board (LSCB). It is designed to manage all allegations against all professionals who work with children (both employed and voluntary) and to assist professionals, to create safer environments for children to access services.

Breakdown of Oldham's allegations by Quarter



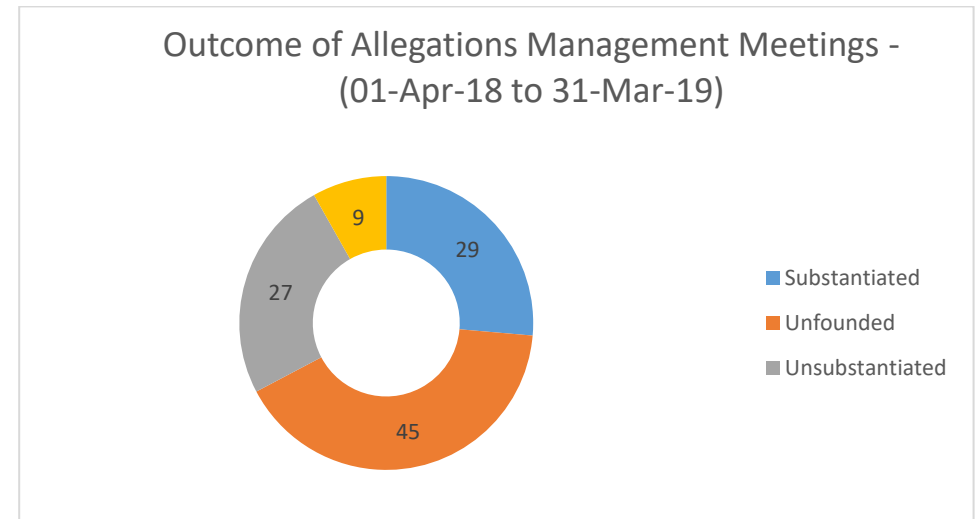
- There were 254 allegations in the 18/19 period with 116 of these leading to an Allegations Management meeting (AMM) meeting.
- The slight drop in referrals has been the fact that Ofsted now refer all issues to one point of contact in the council (complaints officer) and this has reduced the number of inappropriate referrals which were not in the remit of the LADO.

Employment sector

The greatest proportion of allegations related to fostering and residential care (N=100), followed by education (N=76). Early years providers accounted for 16 referrals and faith groups accounted for 10 referrals.

Outcomes

Of cases that went to an Allegation Management Meeting (AMM) the following outcomes were recorded.



Eight referrals in the time period of this report went to DBS but there are a number of ongoing cases that may have that outcome.

7. Private Fostering

A private fostering arrangement is one that is made privately for the care of a child under 16 (under 18 if disabled) by someone other than a parent or a close relative with the intention that it should last for 28 days or more.

There are currently 2 Private Fostering Notifications with ongoing Assessments and 1 confirmed Private Fostering Arrangement within Oldham:

- 1 is open to Oldham Children's Social Care
- 2 have started since May 2019 and the assessments are ongoing

- Private Fostering awareness run has been completed on Social Media and article has also been published in Oldham Council's circulation 'Borough Life'



Page 50 Profile:

Age	Number	Gender M/F	White UK	Asian	White UK & Black Caribbean	Other
13-16 years	1	1	1	0	0	0
Over 16 child with disability	0	0	0	0	0	0

Key successes:

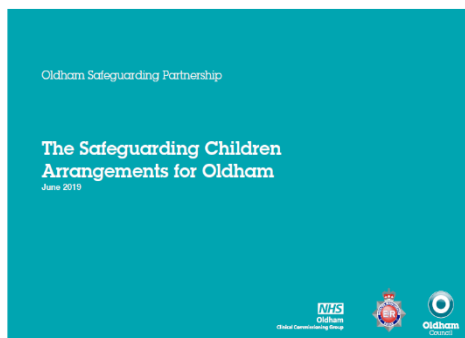
- Resources and awareness communications have been developed, produced and circulated amongst partner agencies including Health, Education and Social Care.
- Input has been delivered to AYSE staff and new starters as part of their MASH induction

Areas for Improvement

There continues to be an under reporting of private fostering arrangements and a need to raise the profile with all communities and with all partners so that private fostering remains an important part of strategies to safeguard the welfare of children in Oldham.

A Strategic Communications Plan has been circulated during this review period 2018/2019. That said, Oldham's figures are lower than our neighbouring Authorities and so this will continue to be reviewed with visits to the Long-Term teams by the Social Care Lead to explore with them whether there may be any arrangements that have not been considered.

8. New safeguarding arrangements



For many years the partner agencies in Oldham have coordinated their preventative and protective roles and responsibilities via the Oldham Safeguarding Children's Board. This Board has, over time, delivered effective and efficient safeguarding

strategies and responses, many of which have been innovative and commanded the attention of national audiences.

The Children and Social Work Act 2017 required the three lead statutory agencies (local authority, police and local clinical commissioning group) to put in place revised safeguarding multiagency arrangements by September 2019. These arrangements need to engage all relevant local agencies for the purpose of safeguarding and promoting the welfare of children in the area. This annual report marks the final report for the Oldham Safeguarding Children Board which ceased to operate on 29 September 2019.

As part of the transition from a LSCB to the Oldham Safeguarding Children Partnership, the three Safeguarding Partners have published the Safeguarding Children Arrangements, which are available [here](#).

"I welcome the new arrangements and believe that whilst we had good partnership working before, they were implemented we now have a stronger partnership working relationship, whereby we are not afraid to have professional discussions and challenge one another where appropriate to do so. It has also allowed us to realise that whilst there are three key statutory partners, our wider partners are still vital to assisting in developing our safeguarding offer to the communities of Oldham. The major difference I think is the accountability which is more focussed now than previously and will help us to ensure our safeguarding of children and young people is effective."
Debbie Dooley, Vulnerability Superintendent, GMP.

"The new safeguarding arrangements have created an equal partnership as opposed to the previous lead responsibility of one agency. This has enabled the health voice to be central to the partnership work bringing issues and perspectives for the health economy which contribute to safeguarding our children and young people. The new arrangements, have helped the partnership identify and effectively mitigate risk at the earliest opportunity, keeping the voice of our children central, through the development of the subgroups and business plan. The implementation of the Child Safeguarding Practice Review and rapid review approach to learning has quickly identified learning to be shared across the partnership to effect change for children and young people at pace. The partnership methodology has been utilised to reshape the approach to working with adolescents who face risk, in particular of child exploitation (sexual, criminal, gangs, etc.)"
Claire Smith, Director of Nursing and Quality, Oldham Clinical Commissioning Group.

"Oldham has always had a strong ethos of partnership working and a shared ambition for Oldham to be a place where children and young people thrive. These new safeguarding arrangements provide us with an opportunity to reflect on and refresh our existing structures and processes to ensure that we remain focused on critical safeguarding matters and improving outcomes for children and young people. I continue to welcome the support and challenge from across the partnership as we all strive to learn and improve our safeguarding practice. I would like to see children and young people at the centre of everything that we do -the child's voice and lived experience is key to our success as a partnership"
Merlin Joseph, Interim Director of Children's Services, Oldham Council

What difference have we made for Children and Young People?

Worked with children and young people to support them to contribute and shape the work of the Partnership

Focused on understanding the child's lived experience to ensure all children including those who are non-verbal are able to express their wishes and concerns

Provided support through school following an incident of domestic abuse

Improved knowledge of exploitation so that support can be provided at the earliest opportunity

Worked to raise awareness of private fostering to ensure that children are receiving support that they're entitled to

Invested in prevention and disruption activities to reduce the risk of exploitation of children and young people

Worked together to ensure that children are safeguarded against risks from professionals that they're working with

Invested in work relating to trauma to ensure that professionals are able to support children and young people in the most appropriate way

Worked to raise awareness of complex and contextual safeguarding in schools to support young people to understand the risks

Worked on developing trusted relationships to ensure children and young people are supported to engage and access appropriate support services

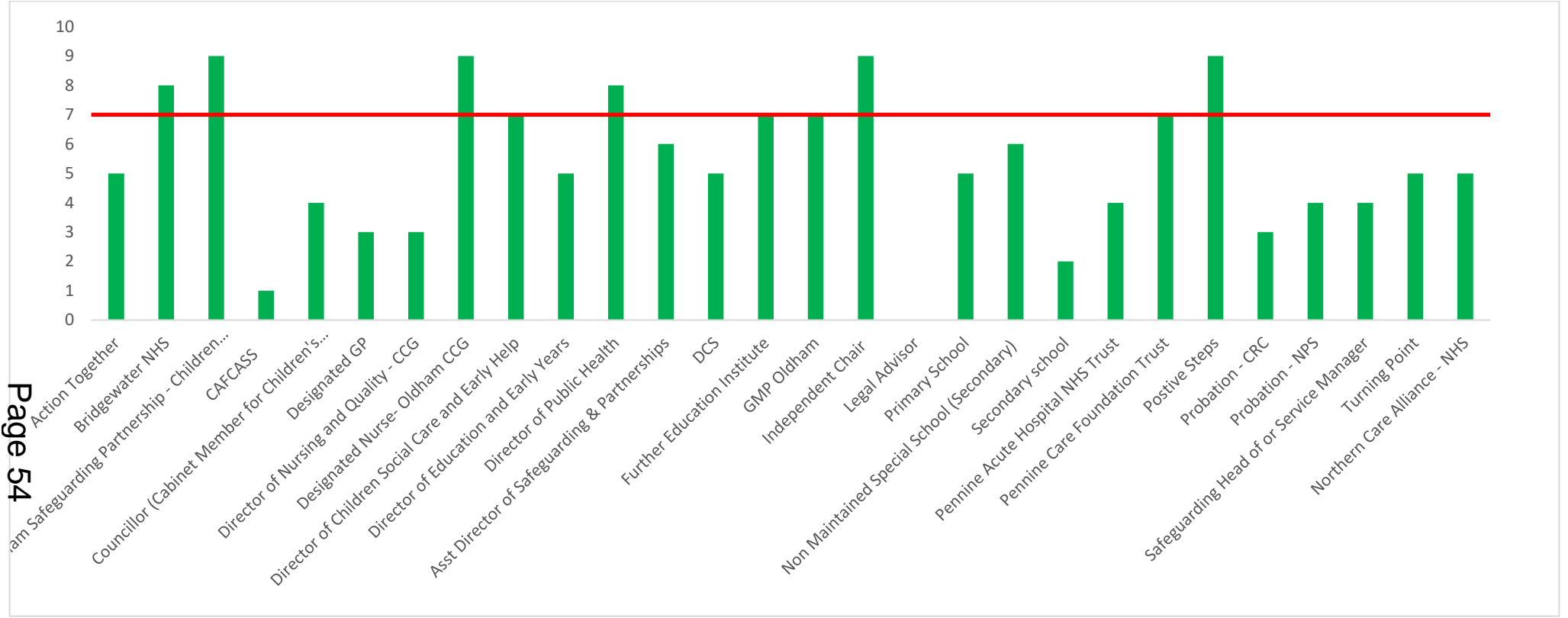
Appendices

1. Governance and Accountability

1.1 Membership

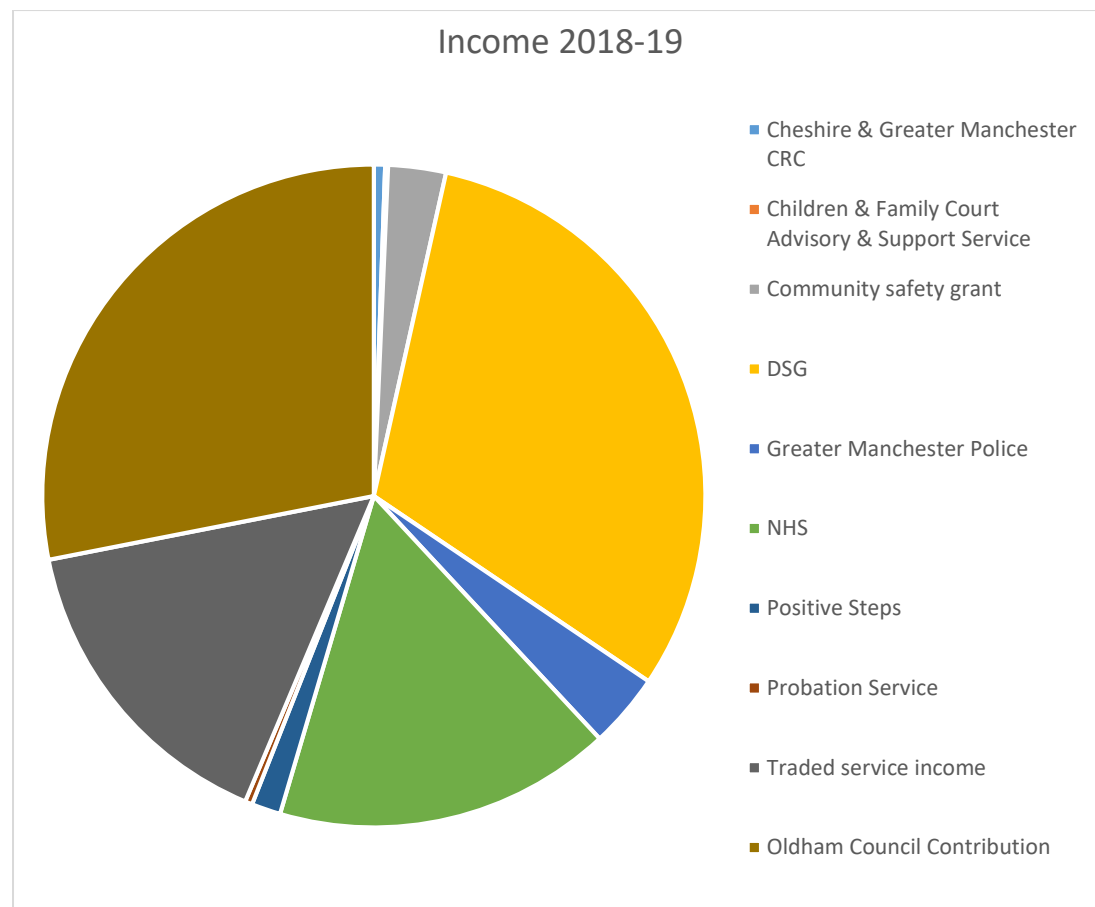
Role	Agency
Independent Chair	
Cabinet Member for Children's Services	Oldham Council
Director of Children's Services	Oldham Council
Director of Children's Social Care and Early Help	Oldham Council
Director of Education and Early Years	Oldham Council
Superintendent	GMP
Director of Nursing and Quality	Oldham CCG
Designated Nurse	Oldham CCG
Designated Doctor	Pennine Care NHS Trust
Director of Public Health	Oldham Council
Director of Community Health Services	Pennine Care NHS Foundation Trust
Director for safeguarding services	Bridgewater Community Health NHS Foundation Trust
Associate Director of Nursing	Northern Care Alliance
Assistant Director of Safeguarding and Partnerships	Oldham Council
Head of Safeguarding	Oldham Council
Service Manager	CAFCASS
Head teacher	Primary school
Assistant CEO	Non maintained special school
Head teacher	Secondary school
Deputy Principle	Oldham College
Assistant Chief Executive	National Probation Service (NPS)
Community Director	Community Rehabilitation Company (CRC)
Chief Executive	Positive Steps
Strategic Locality Lead	Action Together
Senior Operations Manager	Turning Point
Legal Advisor	Oldham Council
LSCB Business Manager	Oldham Council

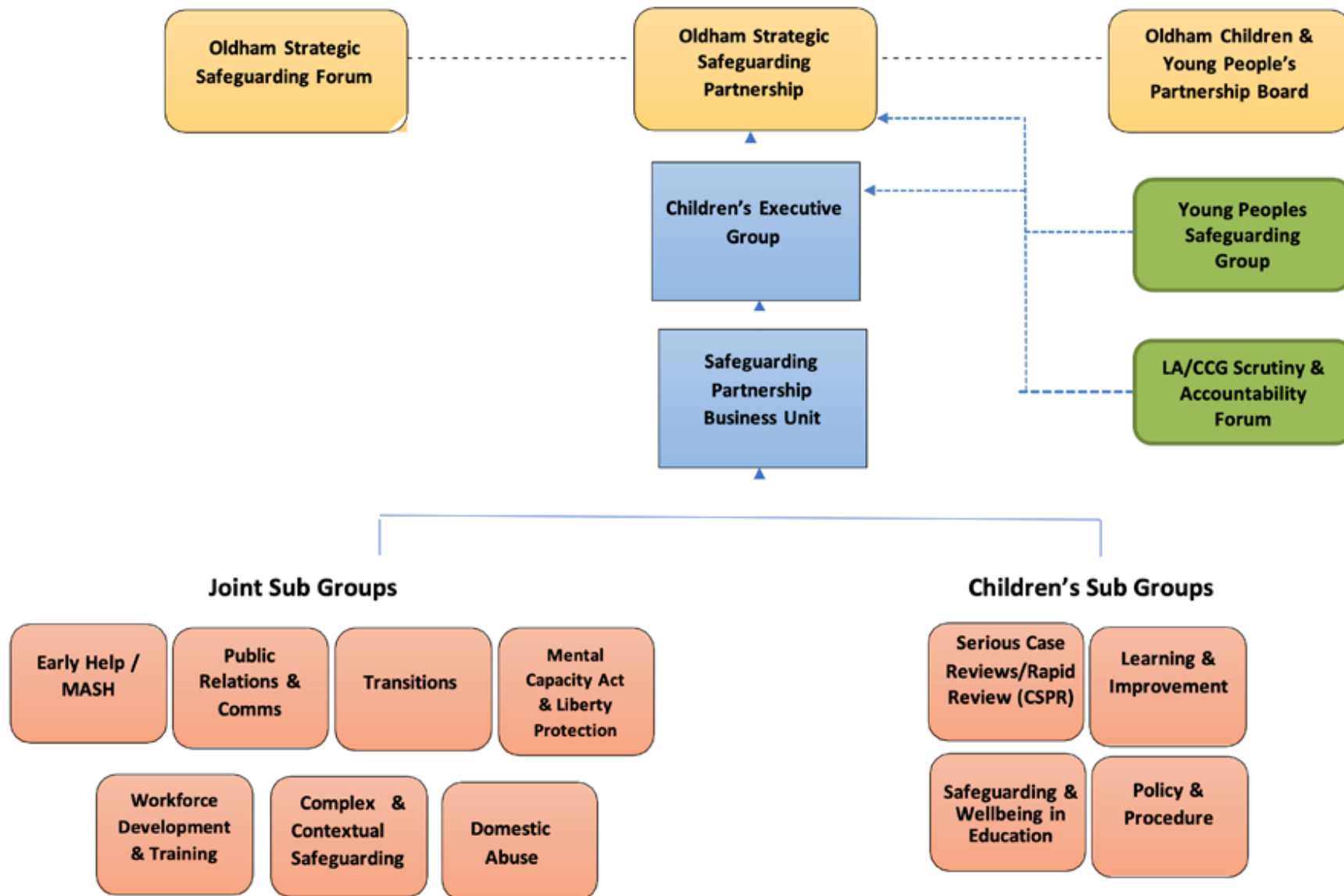
1.2 Member attendance



1.3 Budget 2018-19

2018/19 Outturn	
Expenditure	
Description	Amount (£)
Employee Costs	214,675
Room Hire	2,507
Transport and Travel	1,577
Supplies and Services	56,436
Support Services	80,310
Total Expenditure	355,504
Income	
Description	Amount (£)
Cheshire & Greater Manchester CRC	1,944
Children & Family Court Advisory & Support Service	505
Community safety grant	10,000
DSG	110,000
Greater Manchester Police	12,900
NHS	58,640
Positive Steps	5,050
Probation Service	1,269
Traded service income	55,358
Oldham Council Contribution	99,838
Total Income	355,504







Report to HEALTH AND WELLBEING BOARD

Oldham's COVID-19 Response

Portfolio Holders:

Councillor Shah, Deputy Leader and Cabinet Member for Covid-19 Recovery

Officer Contact: Katrina Stephens, Director of Public Health

Report Author: Jonathan Downs Corporate Policy Lead

Ext. 5691

Date: 10.11.2020

Purpose of the Report

This report provides an update on how the Council and its partners continue to monitor and manage the impact of Covid-19 in Oldham.

Requirement from the Health and Wellbeing Board

To note the content of the report.

Oldham's COVID-19 Response

1. Background

- 1.1 On 31 December 2019, the World Health Organization (WHO) was informed of a cluster of cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province, China. On 12 January 2020 it was announced that a new novel coronavirus had been identified, causing the outbreak. This virus is referred to as SARS-CoV-2, and the associated disease as COVID-19. Since January the virus has spread quickly across the globe, causing a global pandemic.
- 1.2 Manchester and Greater Manchester (GM) declared a major Incident on Friday 20 March 2020. This activated the multi-agency response arrangements in line with the GM generic response plan and the pandemic flu plan. The Prime Minister's unprecedented announcement at 8.30 pm on Monday 23rd March set out the seriousness of the situation and the expectations of all residents, businesses and public services.
- 1.3 New emergency legislation was quickly passed into law to support local authorities in responding to the pandemic, whilst ensuring essential business and services continue. The legislation gives the Council a statutory duty to coordinate food, self-care, medical supplies and other forms of necessary assistance to vulnerable groups in response to COVID-19.
- 1.4 Over the past several months Covid-19 cases have risen in Oldham, across Greater Manchester and nationally. Following the rise in cases Government introduced the "rule of six" on September 14th, making gatherings of more than six people in England illegal, unless they meet one of the exemptions, for example, a wedding or a funeral.
- 1.5 As cases continued to rise across the UK, Central Government introduced three-tier coronavirus alert levels: Medium Level (Tier 1), High Alert (Tier 2) and Very High Alert (Tier 3). On Friday 23 October, following failed negotiations with Government, Oldham, along with the rest of Greater Manchester, was placed into local Covid alert level very high (tier 3) restrictions. Throughout the Council and its partners has maintained a focus on enforcement and compliance, testing, tracing, and communications and community engagement.
- 1.6 Under tier three, very high alert level rules, pubs and bars not serving substantial meals must close, while household mixing is banned indoors and outdoors in hospitality settings and private gardens. Betting shops, casinos, bingo halls, adult gaming centres and soft play areas also must close, and there is guidance against travelling in or out of the very high alert area to reduce the risk of virus transmission.
- 1.7 On Saturday 31st October, Boris Johnson announced a new national lockdown across the UK. The new measures will come into effect on Thursday 5 November and will last until Wednesday 2 December. The key restrictions from the new lockdown are similar but not identical to the original lockdown in spring. They include:
 - Pubs, bars and restaurants must close, although food takeaways and deliveries will be permitted
 - All non-essential retail must close
 - A ban on the mixing of households, except for support or childcare reasons. Exercising outdoors with one person from outside of your household is also permitted.

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- A restriction on travel, including outbound international travel (except for work). Travel within the UK is also discouraged.
 - Staying at home to be encouraged except for education, work (if impossible from home), medical reasons, shopping for good or essentials, caring for others or exercise.

Unlike the first lockdown, nurseries, schools, colleges and universities will remain open. At the time of writing we are waiting for full details of the new restrictions.

- 1.8 This report provides an update on how we are continuing to collectively manage and prevent the spread of COVID-19 across our communities following the implementation of the new restrictions.

2. Current Position

- 2.1 As of the 29th October 2020 there has been **9,139** cases of COVID-19 identified in Oldham, **the weekly** infection rates are currently running at around **700** cases per 100,000 people. Oldham has the highest rate of cases in Greater Manchester and the second highest in England.

- 2.2 Over the past 30 days (**up to 23rd October**), **36,770** people have been tested for COVID-19 in Oldham. This includes **10,396** in Pillar 1 (tests undertaken in hospitals, care homes and staff employed by the health and care sector) and **26,374** in Pillar 2 (commercial labs that process at-home and drive-through tests). Out of the **36,770** tests undertaken, **4,749** people tested positive (**552** in Pillar 1 and **4,197** in Pillar 2). There have been **288** deaths in Oldham (up to 16th October).

- 2.3 The number of cases in the population aged over 60 is increasing rapidly, increasing by over 50% in the week ending 24th October. As the number of cases in the older population increases, the number of people in hospital with COVID-19 is also increasing rapidly.

- 2.4 Household transmission remains a key factor, accounting for approximately 30% of cases. However, we are also aware of cases which have arisen through social contact between households in a range of other settings, including visits to other households, in hospitality and in workplaces.

- 2.5 As rates of infection in the community increase we are also seeing a higher number of cases in care homes. Currently 6 care homes have outbreaks, and there are 69 cases in care home residents and staff across all care homes in Oldham.

3.0 Oldham's Covid-19 Response Updates

- 3.1 For the purposes of this report, Oldham's response has been broken down into four key themes: Test, Trace, Enforcement and Compliance, and Community Engagement and Communications.

4.0 Test

- 4.1 **Local Testing** – The ongoing overall aim of Oldham's local testing approach is to test at least 500 people/100,000 a day, and to have testing sites operating in all 5 districts of the borough each week. We continue testing at a higher daily rate than our Greater Manchester and national counterparts, with an average testing rate over the 7 days to 21st October of 528.7/100,000. We have undertaken a data and intelligence led mapping exercise to identify suitable local testing sites across the 5 districts and this is regularly reviewed by our Testing Bronze Group. This approach is based on outbreaks,

demographics and geographical profiles. Testing at these local sites is provided by the national NHS Test and Trace service.

- 4.2 **Door to Door Testing** – Our door to door testing offer launched on Friday 14th August. This offer is operating alongside community engagement work. To date we have held over 10,000 conversations with households and tested 2,300 people on the doorstep. Doorstep testing is being planned systematically based on need, trends and cases, using our hotspot mapping tool.
- 4.3 **Locally commissioned testing offer** – We have commissioned a local testing service to provide testing for health and care staff, and other key workers. This service is also able to provide targeted testing in response to outbreaks and delivers the door to door testing offer.
- 4.4 **Business Testing** – To support local businesses to increase the testing of staff, The Well Pharmacy in Saddleworth has agreed to be part of a pilot to distribute home testing kits for local businesses such as public houses and restaurants. We have also been engaging with high risk workplaces with the aim to complete 10% routine testing as a pilot programme, aiming to prevent outbreaks before they occur.
- 4.5 **School Testing** – We are currently working with schools to ensure they have access to testing kits, with systems being put in place to enable schools to order and replenish their stocks. Throughout the pandemic, we have been safeguarding vulnerable children through a partnership arrangement between education, health, social care and schools; supporting Early Years and school resilience through health advice, infection control and case management; building sector partnership through regular bulletins, virtual meetings and reference groups for stakeholders; and promoting attendance through the education welfare system and school, parental and community campaigns.
- 4.6 **Homelessness Testing** – Working closely with Oldham Street Angels, the 7-day homelessness service enables individuals to provide an address for test results, ensuring that homeless people can access testing facilities in Oldham.
- 4.7 **Care Homes** – To support Care Homes during the pandemic, Oldham Council has established a STICH team (Supporting Treatment in Care Homes), bringing together community nurses, allied health professionals and social workers to work directly with care homes that have residents and staff showing possible Covid-19 symptoms. In line with national hospital discharge requirements, all patients being discharged to care homes are tested for Covid-19 prior to discharge. We have developed a system-wide risk assessment and individual risk assessment regarding care home admissions. This has involved all parts of the system, including the hospital and forms the basis of our approach to care home admissions.
- 4.8 **Testing Results** – Turnaround time for tests have improved, with the average now 48 hours. As such, a request has been put through to the Department for Health and Social Care and Deloitte for walk up appointments to resume at Local Testing Sites. A similar request has been made to Greater Manchester for Mobile Testing Unit Sites to offer walk up provision to address digital exclusion issues and to have the ability to reserve slots for outbreak management e.g. schools with multiple cases.
- 5.0 **Trace**
- 5.1 Contact tracing is a proven method to control the spread of many infectious diseases. In COVID-19 it works by identifying contacts of people who have tested positive and then encouraging them to self-isolate and closely monitor their health, rather than continuing to mix with others and passing the virus on.

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- 5.2 We have recognised that Test and Trace is both a key part of our immediate response to COVID-19 and a feature of our locality system for the foreseeable future. The overall aim of our contact tracing approach is to increasing completion rates for cases to 90% and contacts to 85%.
- 5.3 Alongside other Greater Manchester authorities, we have invested in a Greater Manchester Contact Tracing Hub which handles complex cases and situations referred on from the national contact tracing service.
- 5.4 Locally Supported Contact Tracing has been in place in Oldham since mid-August, whereby local contact tracers follow up cases of individuals who have not been successfully contacted by the national team within 24 hours of a positive test. The average number of cases per day referred to the local team is between 30 – 50, after duplicates have been removed.

6.0 Enforcement and Compliance

- 6.1 **Tier 3 Restrictions** – Following the announcement of tier 3 restrictions, all 169 wet pubs (pubs providing just alcohol) in the borough have been written to and informed of the new regulations, including what is required if they decide to start serving a substantial meal. We are working with these premises to provide alternative support, such as signposting them to business grants and other forms of local / regional support as required. Betting shops, casinos, bingo halls, adult gaming centres and soft play areas have also been contacted to offer support. Most premises are complying with the new regulations. Where we have identified non-compliance, premises are being served with directions and in a small number of cases, being temporarily closed. *Since this report was written, a new national lockdown has been announced across the UK. The new measures will come into effect on Thursday 5 November and will last until Wednesday 2 December. At the time of writing we are waiting for full details of the new restrictions*
- 6.2 **Support to Businesses** (please note the information in this section is subject to change) – A new Local Restrictions Support Grant (LRSG) will support approximately 210 businesses in Oldham which are required to close under the tier 3 restrictions. It is applicable to those businesses that have been required to close for at least three weeks on or after 9th September due to lockdown restrictions. There will also be a discretionary fund to allow support for other businesses affected by closure, which may not be on the business rates list and which are deemed vital to their local economy.

On 22 October 2020, the Government announced a further round of grant compensation for those businesses in high alert level areas (Tier 2) that are not legally closed but severely impacted by the restrictions on socialising such as hotels, pubs, restaurants, bed and breakfasts and leisure businesses. It is currently anticipated that this will be backdated to 1 August and will run to the start of the Tier 3 measures. Detailed guidance on this support has not yet been issued and eligible businesses have not yet been identified.

- 6.3 **Takeaways** – Various premises are visited on a weekly basis through joint police/environmental health and NSL parking officer visits, ensuring compliance and providing information and support to these businesses to help keep staff and residents safe. Fixed penalty notices have been served for failure to provide / display QR codes (Pubs, restaurants, barbers and museums are required to display new QR codes in a bid to control coronavirus and save lives).
- 6.4 **Covid Cars** – There are 4 Greater Manchester Police Covid Cars on patrol every weekend. These vehicles are responsive and can be called upon to quickly respond to reports of breaches in the restrictions, including people holding parties or meeting in large groups.

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- 6.5 **Metrolink** – We have been working with Transport for Greater Manchester (TFGM) on a joint deployment at Metrolink stops, including undertaking face covering compliance checks. This approach enables us to communicate with commuters, ensuring everyone understands the guidance to travelling on Metrolink and to ensure they feel safe while using public transport.
- 6.6 **Barbers and hairdressers** – Further communications activity is planned to remind these establishments about their responsibility for QR codes, as well as Covid safe working practices.
- 6.7 **Taxis and Private Hire Vehicles** – 2500 face coverings have been made available for use across the borough and are issued to taxi drivers as well as other at-risk groups. Work continues to secure the budget to further install safety screens in taxi's and private hire vehicles.
- 6.8 **Furlough** – On Saturday 31st October, following the announcement of a new month-long national lockdown, it was confirmed that the Coronavirus Job Retention Scheme (furlough scheme) has been extended for a month with employees receiving 80% of their current salary for hours not worked and further economic support announced. The level of the grant will mirror levels available under the CJRS in August, so the government will pay 80% of wages up to a cap of £2,500 and employers will pay employer National Insurance Contributions (NICs) and pension contributions only for the hours the employee does not work.
- 7.0 Community Engagement and Communications**
- 7.1 **Community Engagement Teams** – Five community engagement teams are being recruited (one per district). These will provide a more sustainable staffing resource to undertake engagement work over the coming months, supporting our ongoing door-to-door information and testing campaign.
- 7.2 **Public Health Messaging** – Key public health messaging, including updated messaging on the tier 3 guidelines has been communicated through a wide range of engagement channels, including social media, press and billboards. These messages have also been shared in several relevant languages to help achieve as wide an audience as possible.
- 7.3 **We are Oldham Campaign** – The We Are Oldham Campaign aims to show how the borough is coming together to help tackle Coronavirus. It includes stories of residents and community groups who have gone the extra mile, as well as information on how we can all keep safe.
- 7.4 **Voluntary and Community Response** – There has been a huge breadth of support from across Oldham's voluntary and community sector, with many new mutual aid groups being established to support Oldham's COVID-19 response. These groups have been providing a huge amount of support for local people impacted by the pandemic, including leafletting to reach people who are isolated and to raise awareness of support available; running errands, shopping or other activities self-isolated people cannot perform; and providing emotional support and contact for people who are self-isolating or struggling with the effects of the pandemic.
- 7.5 **Mental Health Support** – We know that the Covid-19 pandemic has put a huge strain on people's mental health with some people feeling socially isolated, anxious and stressed. Through our website, communication channels and partners we have been promoting a wide range of support that's available, including MIND (the leading mental health charity) and mental health crisis support services. There is also a dedicated helpline for NHS staff, providing confidential listening from trained professionals and specialist advisors, including coaching, bereavement care, mental health and financial help.
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- 7.6 **Self-isolation Payments** – Promoting self-isolation payments to support people self-isolating. On 20th September, the Government announced a new national Test and Trace Support scheme. Under the new scheme, payments of £500 are now available for residents who have received notification from NHS Test and Trace to self-isolate, providing that their period of self-isolation started on or after 28th September 2020.
- 7.7 **Social Media** – Social media messaging has continued, showing examples of businesses that are adhering to social distancing rules to keep their customers and staff safe. This includes paid for advertising targeted at “hotspot” areas, particularly sports clubs, pubs and restaurants.
- 7.8 **Test and Trace App** – Relevant Council departments and local businesses have been worked with to both promote and encourage take up of the NHS test and trace app.
- 7.9 **Reopening the High Street Safely Fund** – Oldham has been granted £210k from the European Regional Development Fund to support safe trading in public places. To date we have used the funding to create radio advertising, billboards, targeted social media posts and face covering reminder stickers for taxi doors. Also, in the pipeline is lamppost signage, sanitising stations and tram and bus advertising to support the Christmas period.
- 7.10 **Equality and Diversity** – In Oldham we are committed to minimising the impact of COVID-19 across our communities. The steps we are taking to tackle the pandemic and the subsequent recovery planning, aim to support people, especially those groups with protected characteristics who are often most impacted. To support this approach, we have established an Equality Advisory Group which will provide insight and expertise, helping us capture the voice of lived community experience in our COVID-19 response and recovery planning. This group is meeting regularly to anticipate and identify any discriminatory or negative consequences of the pandemic, helping us positively respond to any disproportionate impact COVID-19 has on our communities.

8. Key Issues for Health and Wellbeing Board to Discuss

- 8.1 The evidence that we have does not currently link transmission to any specific setting, but does suggest that we are seeing transmission happening in a range of settings where there is social contact between people that is not socially distanced.
- 8.2 In order to reduce transmission and bring the R value below 1, we need to substantially reduce the amount of social contact between people from different households. SAGE, Independent SAGE and the Chief Medical Officer have highlighted that measures which go further than the current tier 3 package of measures may be needed in order to substantially reduce infection rates. However, there is evidence that more wide scale lockdowns are effective in reducing R.
- 8.4 Beyond the current period of national lockdown, it is necessary to consider what package of measures/strategy will be needed for the coming months, as the challenges of controlling transmission will persist throughout the winter and into the spring. Control measures need to be supported by effective communications, engagement, and enforcement as well as testing and contact tracing, therefore our work on these remains a vital part of our ongoing strategy.
- 8.5 Whilst the impact of additional measures on individuals, communities and businesses will be significant if appropriate mitigation (such as furlough) is not put in place, the impact of not acting in the face of rising infection levels is also significant.

9. Recommendation

9.1 To note the content of the report and consider the key issues for discussion.



Health & Wellbeing Board Report

Date of Decision: 10th November 2020
Subject: Implementing phase 3 recovery
Report Author: Mike Barker, Strategic Director of Commissioning

Reason for the decision:

Summary: *To provide the Board with an overview of the confirmed 'phase 3 recovery' plan within local health and care services.*

What are the alternative option(s) to be considered? Please give the reason(s) for recommendation(s): *N/A as this is a plan that was mandated by NHS England and NHS Improvement.*

Recommendation(s): *That the Board approves the phase 3 recovery plan for the Oldham health and care system.*

Implications:

What are the *financial* implications? *Not applicable to this Board – the financial implications of the recovery relate to the Covid-19 budget dealt with at a national level in the NHS.*

What are the *procurement* implications? *Not in relation to the core recovery work, although as the recovery work leads into transformation and redesign of some local services, there may be procurement implications.*

What are the *legal* implications? *The CCG will be undertaking its legal 'duties to involve' by carrying out engagement with patients and communities about any changes to services that had to be made because of Covid-*

19, and also where further adaptations to services need to be made.

What are the **Human Resources** implications?

N/A

Equality and Diversity Impact Assessment attached or not required because (please give reason)

Will be included as part of the CCG's legal 'duty to involve' obligations, as there may be various equality, quality and financial impact assessments that need to be made.

What are the **property** implications

N/A

Risks:

Risks are included on the CCG's risk registers, which as an overview relate to any issues arising with not being able to meet the national targets met, as well as further outbreaks of Covid-19 that could impact on the recovery programme as a whole.

Has the relevant Legal Officer confirmed that the recommendations within this report are lawful and comply with the Council's Constitution/CCG's Standing Orders?

N/A

Has the relevant Finance Officer confirmed that any expenditure referred to within this report is consistent with the S.75 budget?

N/A

Are any of the recommendations within this report contrary to the Policy Framework of the Council/CCG?

No

Reason why this Is a Key Decision

to be significant in terms of its effects on communities living or working in an area comprising two or more Wards or electoral divisions in the area of the local authority

There are no background papers for this report

Report Author Sign-off:	
Mike Barker	
Date:	

Please list any appendices:-

Appendix number or letter	Description

Background:

Introduction

- Following the implementation of phase 2 recovery as part of the Covid-19 response, Oldham's health and care phase 3 recovery assessment and route to implementation has now been established.
- The overarching aim of this recovery work is to ensure that more, if not all, services are stepped back up safely, whilst operating within the context of enhanced infection, prevention and control (IPC) measures, which as well as impacting on care delivery, impacts on estate capacity also.
- A hospital and mental health activity template (data and accompanying narrative) for the locality is being submitted to Greater Manchester Health and Social Care Partnership.
- The data used for the planning is based on assumptions using existing and current capacity and demand modelling, and is aligned (for Oldham borough patients) with the Northern Care Alliance (incorporating Pennine Acute Hospitals – Royal Oldham) and Pennine Care.

Assessing the gap

- The data that has been compiled and submitted provides us with the ability to assess the gap between the national ask around phase 3 recovery and current local capacity and delivery - we also know there is a gap in relation to some of the expected timescales for implementation and completion, and the ability for some of the services to be able to meet these specified deadlines.
- Work is, therefore, now underway to establish how we can get local health and care services to the required levels for phase 3 recovery implementation – this builds on what was already taking place in Oldham prior to the Covid-19 response, due to many services not meeting the required national NHS Constitutional standards.
- Additional bed capacity was put in place across the North West, but more work is needed to establish what the acute and complex parts of the pathway need to look like in Oldham – the aim will be for independent sector providers to support lower acuity care, and builds on brokerage between organisations to help develop relationships across providers to enable them to work together effectively across the locality.

Activity context

- The CCG is required to plan for its population, which is anyone registered at an Oldham member GP practice, irrelevant of where they receive their care. Many Oldham patients receive care outside of Oldham, either due to circumstance or choice. Whilst the CCG commissioned a large amount of healthcare, it does not commission everything. Some services provided by hospital are commissioned by other agencies and are therefore not included the CCG's plans.
- Hospitals are required to plan for the utilisation of their facilities. They are location based and have to plan for anyone attending their services, irrelevant of where those patients live or are registered. Many people from out of the Oldham borough access Royal Oldham Hospital, and in the last 12 months, only 62% of the activity for people who used Royal Oldham were Oldham-registered patients.
- For these reasons the CCG activity plan and the local hospital provider plan will never fully align. The CCG has submitted a plan that is broadly in-line, but slightly less than national and regional recovery expectations, with the exception of referrals, which are significantly less than required.

National activity target expectations

- **Referrals:**
 - The national expectation is that this returns to **100%** of the previous year's activity – The CCG is realistically planning for this to be back to **80%**
- **Elective inpatients:**
 - That national ask is that this activity incrementally returns to **70%** of the previous year **rising to 90%** by March 2021 – The CCG is realistically planning for this to be back up to **73%**
- **Elective outpatients:**
 - The national ask is that this activity incrementally returns to **90%** of the previous year **rising to 100%** by March 2021 – The CCG is realistically planning for this to be back up to **91%**
- **Non-elective inpatients:**
 - The CCG is planning for this to be back up to **83%** of the previous year's activity
- **Emergency department attendances:**
 - The regional ask is that this activity returns to not less than **75%** of the previous year – The CCG is realistically planning for this to be back up to **89%**

Proposals:

Cancer services

ACTIONS UNDERWAY

- Northern Care Alliance (NCA) has recently launched the Rapid Diagnostic Centre at its Oldham and Salford sites, which has seen an increase in referrals and is running at an 8-10% cancer conversion rate
- Two week wait (2WW) cancer referrals now only 8% down on pre-lockdown levels
- Contracting of routine endoscopy diagnostics were transferred to the hospital trust to provide support for cancer work – supported by a GM-wide programme to increase mobile endoscopy capacity
- GM-wide surgical hubs for cancer in place at Rochdale Infirmary and The Christie as 'green' Covid-secure sites
- CCG-chaired Board in place to transform outpatients system-wide (SWOP), focusing on diagnostics and service recovery

ACTION PLAN

- Improve cancer referral data
- Work with NCA on a diagnostic hub business case to provide additional capacity
- Work with NCA to ensure that its cancer recovery plan is reviewed and approved
- Implement additional PET-CT scan machine
- Continue to promote the bowel, cervical and breast proactive screening programmes in primary care under 'Primary Care Plus'
- Implement local and national cancer campaigns: "We are here for you"
Utilise existing Covid-19 community engagement to provide information on cancer symptoms and services

Elective activity

ACTIONS UNDERWAY

- GM-level management of independent sector hospital capacity in place across the system
- Independent sector community elective providers being engaged in relation to capacity availability, and will be supported by the CCG regarding estates needs due to IPC measures
- Virtual solutions are being used to increase outpatient activity (including assessments and reviews) to the required levels
- Pregnancy terminations continued to be provided throughout lockdown, with medications sent via post
- Supply of all community elective providers to NCA to look at potential for additional capacity that can be offered on an provider-to-provider basis
- Implementation of tele-dermatology to reduce face-to-face contacts required and increase the numbers of patients managed outside of specialist services

ACTION PLAN

- Work with providers to enact key demand management tools, such as 'advice and guidance' to support the reduction in outpatient need

- Work with NCA on the broader 'System Wide Outpatient Programme' to continue to implement different ways of delivering outpatient care, as well as implementing new initiatives to support reduction in volumes such as PIFU
- Work with providers to consider and consult on a more permanent arrangement to the use of medication for early medical abortions (up to 10 weeks) in conjunction with over the phone or virtual appointments
- Roll out of new referral template to improve quality of referral information and support improved triage with advice and guidance responses back where appropriate

Primary care and community services

ACTIONS UNDERWAY

- Locality-wide post-Covid rehab pathway implemented across acute, community and primary care and is working well, and additional capacity has provided for the lung service
- Community service recovery plans in place
- A community optometry service was commissioned in May 2020 to support the national ask for local urgent eye care services, which has continued and will be expanded to include routine care to help reduce the demand on acute trusts
- Care home 'STICH' enhanced community nursing support in place for care homes and end of life
- Work underway for PCNs to take a greater lead role in proactively reaching out to vulnerable patients as part of the MDT approach
- All 6-8 week checks for babies have been maintained throughout
- Paediatric 'virtual' ward due to go live, with an additional 20 beds to support early discharge
- Paediatric 'rapid access clinics' due to commence for primary care community care services to refer into specialisms, with the aim of avoiding hospital admissions
- The children's community nursing team has maintained face-to-face contact throughout Covid-19 with children who have complex health needs and also children on the end-of-life pathway
- The school health services has scheduled community 'catch-up' clinics for out of hours immunisations and vaccines
- Practices and PCNs are undertaking weekly pastoral care calls with care homes

ACTION PLAN

- Ensure clinical pathways and standard operating procedure are signed off for the paediatric virtual ward
- As part of processes to deal with childhood immunisation issues, oversee (in collaboration with CHIS) the redesign of processes to improve the system going forward
- Assess the effectiveness and quality of the weekly pastoral care calls between primary care and care homes, as well as individual care plans and structured medicines reviews
- Development of a revised outcome-based district nursing offer to bridge the period up to March 2021, which will ensure caseload prioritisation and also areas of current commissioned activity that can be ceased/provided differently in the wider system

- Confirm next steps for STICH enhanced nursing support for care homes and end of life pathways
- Develop robust links between medicines optimisation team and the PCNs
- Commission the GM 'minor ailments' scheme as support to the 'self-care' policy work
- Work with secondary care to increase the amount of medicines provided at discharge to reduce pressure on primary care prescribing
- Ensure that clinical vulnerable children are prioritised in community service recovery plans
- Ensure oversight of children with complex health needs and who have been shielding who may not be able to return to school so that their care and educational needs are met
- Maximise and lock in the benefits and changes that have been realised during COVID-19
- The system deficit will need to be managed in the context of the impact of the pandemic and will focus on:
 - Managing the backlog of patients
 - Safely resuming clinical activity
 - Preparing for winter
 - Surge planning
 - Supporting our existing workforce and securing a sustainable workforce
 - Exacerbation of existing health inequalities

Mental health, LD and autism

ACTIONS UNDERWAY

- IAPT services activity is returning to pre-Covid levels – the service has continued to be in place throughout
- It is expected that the children and young people access target will be met
- Health checks for people with learning disabilities (LD) have continued throughout as part of the Direct Enhanced Service and Primary Care plus
- We are expecting the Transforming Care trajectories to be met for both secure and non-secure patient discharges by 31 March 2021
- The 'eliminating mixed sex accommodation' programme is now underway again following a pause in March 2020

ACTION PLAN

- Increase investment in mental health services in line with the 'MHIS' plan
- Oversee the implementation of the IAPT 24/7 helpline to include full crisis resolution and home treatment services, and work with Pennine Care FT to ensure that the appropriate recruitment is in place and delivered to support the workforce action plan for the service
- Work with providers to ensure that access to these services is clearly promoted and advertised – this will include continued borough-wide campaigns to support mental health and wellbeing for all
- Following a review of LD prescribing of anti-psychotics, develop an action plan for this area to support practices and provide them with implementation plans
- Develop an action plan to support LeDeR reviews and lack of capacity

Winter

ACTIONS UNDERWAY

- A robust flu immunisation programme plan is now in place for Oldham, with specific interventions for target and at-risk groups, integrated with the national and local communications and engagement flu and winter campaign
- A multi-agency flu programme group is in place to ensure the delivery of the immunisation plan – this includes a dedicated individual from the CCG's primary care team to coordinate work as needed with practices
- Community and primary care nurses are trained to administer flu vaccines
- Paediatric rapid access clinics are increasing in number, offering up to 30 appointments per week - GP 'advice and guidance' service in place, which will also coordinate with the rapid access clinic
- StartWell specialist nurses are back in the emergency department

ACTION PLAN

- Consider the establishment of a 'cold diagnostic site to reduce DNAs due to Covid-19 fears
- Consider a more joined-up approach with community pharmacy so that there is reduced competition for vaccine supply
- Work with community pharmacies to improve the signposting of key services and the best ways to access them during the winter, as well as promotion of the flu immunisation programme to encourage take-up
- Increase the number of paediatric multi-disciplinary teams across the neighbourhoods in the borough

Workforce

ACTIONS UNDERWAY

- Enhanced mental health initiatives, platforms and support for all staff across the Oldham system are in place
- Regular 'pulse' surveying is in place to track how staff in the Oldham Cares system are feeling
- Robust risk assessments are in place to ensure that all staff, and particularly those at risk, can ensure that working practices and work places are safe, and that adjustments are made for individuals when needed
- New equality strategy for Oldham is being produced by all partners and the community, voluntary and faith sector
- Oldham CCG 'equity' plan for recruitment, retention and progression is in development

ACTION PLAN

- Work across the Oldham Cares system to agree a collaborative approach and response to the NHS People Plan
- Produce a specific primary care response to the NHS People Plan, as a collaborative approach between the commissioners and Greater Manchester and Health Education England workforce leads

- implement the new primary care workforce programme to support the delivery of recruitment, retention and training objectives

Health inequalities and prevention

ACTIONS UNDERWAY

- Health inequalities are being addressed via Primary Care Plus in relation to key indicators such as by increasing prevalence and reducing exception reporting – those with severe and enduring mental health conditions are targeted, as well as those vulnerable to frailty
- Work is underway to address the issues that driver poor health outcomes, such as the recruitment of social prescribers who are deployed into PCNs
- GPs and the acute trust are reviewing all children and young people on the ‘shielded’ patient list and removing those from the list that are no longer deemed clinically ‘extremely vulnerable’ – all children and young people on the list are seen by services
- Increased testing is in place for all vulnerable people
- Regular ‘sit-reps’ are in place for care homes

ACTION PLAN

- Examine the potential to utilise medicines optimisation pharmacists working within PCNs to identify and support at risk patients as part of structured medicines reviews and health checks
- Extend the teams to support the ‘continuity of carer’ agenda, with specific teams to be put in place for vulnerable patients, including those with learning disabilities
- Phase in a new ‘visiting plan’ for maternity units to ensure the necessary family support is in place, as safety measures allow

Conclusions:

- The success of the phase 3 recovery plan will be reliant on:
 - Robust partnership working
 - Strong clinical leadership and engagement
 - Effective engagement with our communities and with patients
 - Clear programmes for service redesign and transformation
 - Good governance
- The core transformation programmes will centre around:
 - A new model for managing long term conditions, utilising a ‘hub’ that includes non-elective, elective and primary / community care
 - A new model for urgent care, as linked to the Greater Manchester model
 - Redesign of local community services
- The Board is asked to note some of the external factors that will also impact on phase 3 recovery, including the rates of infection of Covid-19 and the need to support the management of any outbreaks, as well as potential changes to the future of commissioning.

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