# **Public Document Pack**



### **Simon Hobbs**

Director of Legal and Democratic Services County Hall Matlock Derbyshire DE4 3AG

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### **PUBLIC**

To: Members of Improvement and Scrutiny Committee - People

Tuesday, 14 July 2020

Dear Councillor,

Please attend a meeting of the **Improvement and Scrutiny Committee** - **People** to be held at <u>2.00 pm</u> on <u>Wednesday</u>, <u>22 July 2020</u> in Teams Live Event, the agenda for which is set out below.

Yours faithfully,

**Simon Hobbs** 

**Director of Legal and Democratic Services** 

# AGENDA

## PART I - NON-EXEMPT ITEMS

1. Apologies for absence

To receive apologies for absence (if any)

2. Declarations of Interest

To receive declarations of interest (if any)

3. Minutes (Pages 1 - 4)

To confirm the non-exempt minutes of the meeting of the Improvement and

Scrutiny Committee – People held on 12 February 2020.

4. Public Questions (30 minute maximum in total) (Pages 5 - 6)

(Questions may be submitted to be answered by the Scrutiny Committee, or Council officers who are attending the meeting as witnesses, on any item that is within the scope of the Committee. Please see the procedure for the submission of questions at the end of this agenda)

- 5. Update on Homes for Older People
- 6. Derbyshire Safeguarding Adults Board Update (Pages 7 22)
- 7. Derby and Derbyshire Children's Safeguarding Partnership Update (Pages 23 56)
- 8. Review of Derbyshire Care Leavers Offer Final Report (Pages 57 72)
- 9. Healthwatch Derbyshire Annual report (Pages 73 108)

**PUBLIC** 

**MINUTES** of a meeting of **the IMPROVEMENT AND SCRUTINY COMMITTEE – PEOPLE** held at County Hall, Matlock on 12 February 2020.

# **PRESENT**

Councillor G Musson (in the Chair)

Councillors L Chilton, J Coyle, C Dale, R Flatley, J Frudd, R Iliffe, D Taylor and J Twigg.

Also in attendance was H Henderson-Spoors, S Hobbs, S Stevens, and D Turner.

There were no declarations of interest.

**01/20 MINUTES RESOLVED** that the minutes of the meeting of the Committee held on 06 November 2019 be confirmed as a correct record and signed by the Chair.

**O2/20 PUBLIC QUESTIONS** A question had been asked by \*\*\*\*\* regarding the Spinney Consultation, the question was as follows:

"There are numerous misleading details in the press reports about the Condition of The Spinney Care Home. The Faithful and Gould reports states 'no indication of significant defects.' The abridged report on DCC website states estimated cost of work required £1720305 over 5 years the full report give a figure of £1.7 m over 25 years. I have been unable to find any written report stating the Spinney needs an immediate rewire.

CQC states in 2019 Extensive environmental refurbishment had been made and was in progress since our last inspection. This helped ensure people's needs were fully met by the design, adaptation and decoration of the premises.

Will the Council ensure its integrity and honesty is upheld by correcting this misleading information."

\*\*\*\*\* received a written response to her question and Simon Spencer, Deputy Director of Adult Care also provided a response during the meeting.

03/20 <u>REVISED VISION AND FUTURE STRATEGY FOR DIRECT CARE HOMES FOR OLDER PEOPLE 2020-2025</u> Cabinet approved a report on 23 January 2020 on the Revised Vison and Future Strategy for Direct Care Homes for Older People 2020-2025.

Specifically, Cabinet approved the revised future strategy for Direct Care Homes for Older People and the consultation on the proposed closure of those homes which, following evaluation, had been proposed for the reasons set out in the report to be unsustainable in the long-term.

The homes were as follows:

- Ladycross House (Sandiacre)
- Beechcroft (West Hallam)
- East Clune (Clowne)
- Holmlea (Tibshelf)
- The Spinney (Brimington)
- Goyt Valley House (New Mills)
- Gernon Manor (Bakewell)

Alongside this, there had also been a consultation with residents and their families on the retention and refurbishment of the following homes which would be required in the medium term according to the Council's market evaluation and investment plan:

- Briar Close (Borrowash)
- Rowthorne (Swanwick)
- New Bassett House (Shirebrook)

Approval had been agreed to fund for design and feasibility works to be undertaken on the three homes which had been proposed to be refurbished, as well as approval for funding. To support market management and development activity associated with the implementation of the Older People's Housing, Accommodation and Support Strategy 2018-2035 that would seek to create a range of housing and accommodation options for older people to meet demographic demand.

A further report would be received following the conclusion of the consultation and market engagement processes, including a full Equality Impact Analysis.

Public consultation on the proposals contained in the report commenced on 31 January 2020, this would be for 12 weeks until 24 April 2020.

**RESOLVED** to note the contents and actions following approval by Cabinet of the report on a Revised Vison and Future Strategy for Direct Care Homes for Older People.

**O4/20**ASSURANCE MEASURES FOLLOWING LOCAL GOVERNMENT OMBUDSMAN INVESTIGATION
The Council received a notice of prosecution in 2019 from the Care Quality Commission for failure to provide safe care and was subsequently prosecuted in December 2019. A

review commenced following the CQC notice and had subsequently taken into account the Local Government Ombudsman (LGO) report published on the 29th November 2019.

The review established 6 key Learning Lessons that had been used to inform and drive the actions within an improvement plan. From these 6 learning lessons, key actions had been established and acted upon. The actions taken had been outlined in the report.

**RESOLVED** to note the report.

**DERBYSHIRE HEALTHWATCH INTELLIGENCE REPORT DECEMBER 2019** The Healthwatch Derbyshire Intelligence Report, dated December 2019 had been presented. The document included information on the work done by Healthwatch over a period.

An update had been given on the most recent work done on homelessness, domiciliary care and falls prevention. This gave an overview of each subject.

Responses received from organisations involved in past projects and what action had been taken against recommendations from Healthwatch had been outlined in the report. After Healthwatch posted the engagement with exoffenders and their findings on the offender health engagement the Health Needs Assessment Group had responded providing information on services that were available to these individuals to resolve some of the problems raised in the report.

A number of past reports now had updates and resolutions to findings, this information had been provided within the report. Between November 2018 and January 2019 Healthwatch visited a number of orthotic clinics at LRCH and spoke to a total of 60 patients about their experiences of the service. LRCH had since provided an update on the actions they had made in response to the recommendations made in the March 2019 orthotics report. These included sending letters advising patients of the anticipated waiting times and receptionists had now informing patients of delays in running times.

Other information such as updates on past reports had been shared. Additionally, details had been shared on E&V visits to a variety of NHS and social care adult services which received income from public funding. Over the next few months Healthwatch would be undertaking further engagements to explore:

- Experiences of accessing the pain management service
- Diagnosis and support for people with COPD
- Communication between services i.e. hospitals and GP practices
- A&E process.

# **RESOLVED** to note the report.

# 06/20 DERBYSHIRE HEALTHWATCH OFFENDER REPORT

The Healthwatch Derbyshire Offender Health Report had been presented. The report included information on navigating services, experiences of using primary care and health literacy taken from personal experiences of offenders using health services in Derbyshire.

Information had been collected using a series of questions which had been developed to provide a framework for discussions. The prompt was based around the themes shared by the Derbyshire Criminal Justice Board, who navigated services, experiences of using primary care and health literacy.

The engagement had been carried out between May and August 2019 and 64 ex-offenders and youth offenders shared their experiences of health services in Derbyshire. Offices of the NPS, CRC and YOS had been visited to be able to talk with people before and after their appointments.

Key findings were outlined in detail in the report, some of the main factors raised had been around the lack of mental health support and what services offenders viewed as a priority. Another large problem that had been raised was the lack of information provided to offenders on their release from prison.

Resolutions to the problems raised had been provided by Healthwatch to assist with preventing reoccurring problems. In response, a sub group had been established, chaired by the Assistant Director of Public Health from DCC, with a membership that included representatives from commissioners and providers across both criminal justice and health ad care.

### **RESOLVED** to note the report.

**COMMITTEES WORK PROGRAMME** The Committee was to continue to review the Care Leavers offer as their main business. It had been difficult to obtain the relevant information as there were still pieces of work ongoing. A working group was to be set up in April to discuss the subject further.

After this, the Committee would move on to the home to school transport issue and the next agenda was predicted to be busy. This would be an opportunity to look back at information that had been provided in the past.

# Procedure for Public Questions at Improvement and Scrutiny Committee meetings

Members of the public who are on the Derbyshire County Council register of electors or are Derbyshire County Council taxpayers or non-domestic taxpayers, may ask questions of the Improvement and Scrutiny Committees, or witnesses who are attending the meeting of the Committee. The maximum period of time allowed for questions by the public at a Committee meeting shall be 30 minutes in total.

### **Order of Questions**

Questions will be asked in the order they were received in accordance with the Notice of Questions requirements, except that the Chairman may group together similar questions.

### **Notice of Questions**

A question may only be asked if notice has been given by delivering it in writing or by email to the Director of Legal Services no later than 12noon three working days before the Committee meeting (i.e. 12 noon on a Wednesday when the Committee meets on the following Monday). The notice must give the name and address of the questioner and the name of the person to whom the question is to be put.

Questions may be emailed to <a href="mailto:democratic.services@derbyshire.gov.uk">derbyshire.gov.uk</a>

### **Number of Questions**

At any meeting no person may submit more than one question, and no more than one such question may be asked on behalf of one organisation about a single topic.

### **Scope of Questions**

The Director of Legal Services may reject a question if it:

- Exceeds 200 words in length;
- is not about a matter for which the Committee has a responsibility, or does not affect Derbyshire;
- is defamatory, frivolous or offensive;
- is substantially the same as a question which has been put at a meeting of the Committee in the past six months; or

• requires the disclosure of confidential or exempt information.

# **Submitting Questions at the Meeting**

Questions received by the deadline (see **Notice of Question** section above) will be shared with the respondent with the request for a written response to be provided by 5pm on the last working day before the meeting (i.e. 5pm on Friday before the meeting on Monday).

It is at the Chairman's discretion whether the questions and responses are read out at the meeting.

# **Supplementary Question**

Anyone who has put a question to the meeting may also put one supplementary question in writing to the person who has replied to his/her original question. A supplementary question must arise directly out of the original question or the reply. The Chairman may reject a supplementary question on any of the grounds detailed in the **Scope of Questions** section above.

Supplementary questions must be emailed to democratic.services@derbyshire.gov.uk



# DSAB update for DCC People Improvement and Scrutiny Committee July 2020

Andy Searle DSAB Independent Chair, and Natalie Gee, DSAB Project Manager



# Who are we?

- The Derbyshire Safeguarding Adults Board (DSAB) is a multi-agency strategic partnership, which ensures and oversees the effectiveness of arrangements made by individual agencies to safeguard adults who have care and support needs or are experiencing, or at risk of experiencing, abuse or neglect.
- The DSAB is made up of key statutory and voluntary agencies in Derbyshire. There are three statutory partners to the DSAB;

**Derbyshire County Council Adult Care** 

Derby and Derbyshire Clinical Commissioning Group

**Derbyshire Constabulary** 

A fill list of current DSAB partners can be found here: <a href="https://www.derbyshiresab.org.uk/about-us/membership.aspx">https://www.derbyshiresab.org.uk/about-us/membership.aspx</a>

- The Chair of the DSAB is independent of all partners.
- The Board has a dedicated Project Manager and Business services support

# What do we do?

The work of safeguarding adults boards (SABs) is now directed by legislation, namely, The Care Act 2014. The Act states that SABs must assure themselves that local safeguarding arrangements and partners are protecting adults in its area who:

- Have needs for care and support (whether or not the local authority is meeting any of those needs) and;
- Are experiencing, or at risk of, abuse or neglect; and
- As a result of those care and support needs are unable to protect themselves from either the risk of, or experience of abuse or neglect.

# **DSAB Vision**

'We will all work together to enable people in Derbyshire to live a life free from fear, harm and abuse'



# Statutory duties of a Safeguarding Adults Board

- Publish a <u>Strategic Plan</u> setting out how it will meet its main objectives. In developing the plan, it must involve the community and it must consult the local Healthwatch organisation(s).
- Publish an <u>Annual Report</u> detailing the activities of the SAB which it must send to the following agencies for scrutiny:
- Local Authority Chief Executives and member leads.
  - a) local Health and Wellbeing Board(s)
  - b) local Police and Crime Commissioner
  - c) local Healthwatch organisation(s)
- Decide when a <u>Safeguarding Adult Review (SAR)</u> is necessary, arrange for its conduct. SARs are about learning lessons for the future so that practice improvements may be made



# **Six Safeguarding Principles**

The six principles of Safeguarding Adults are set out in the Care Act 2014 and each hold equal importance in the effective safeguarding of adults.

Empowerment	People should be supported and encouraged to make their own decisions and informed consent		
Protection	Support and representation for those in greatest need		
Prevention	It is better to take action before harm occurs		
Proportionality	The least intrusive response to the risk presented		
Partnership	Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.		
Accountability	Accountability and transparency in safeguarding practice.		



# **DSAB Strategy 2019-2022**

# Three strategic aims / priorities

 Making Safeguarding Personal (MSP)

'No decision about me without me'

Prevention

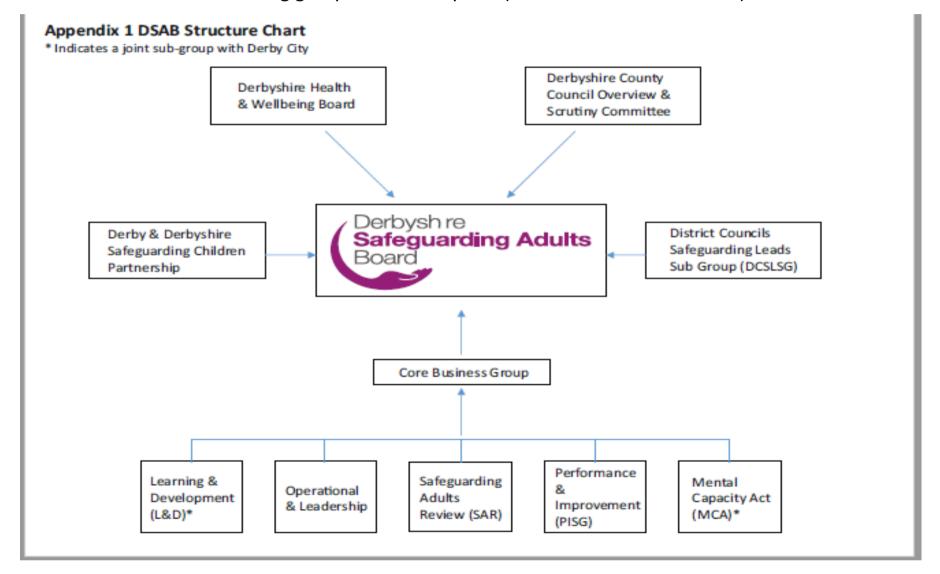
'It is better to take action before harm occurs'

Quality Assurance

'Ensuring that all partners are taking their safeguarding duties seriously'

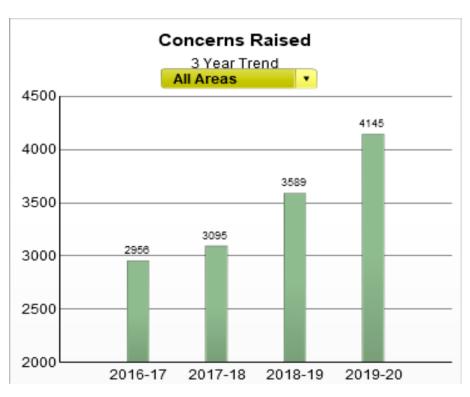
# **Sub Groups and Working Groups**

Six sub-groups in place and one new sub group (Policy and Procedures) due to commence October 2020. Two working groups are also in place (Financial Abuse and VARM)





# Safeguarding Referrals 2019/20

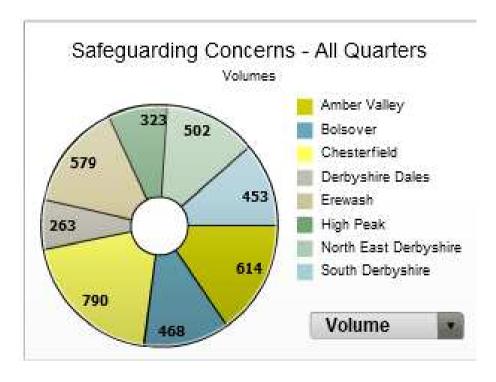


- 4145 reported concerns / referrals for the year 2019/20
- 13% increase on previous 12 months
- 1973 (48%) of these referrals had further enquiries undertaken under S.42 of the Care Act 2014.
- Adults aged over 65 made up 2600 (63%) of the referrals made.
- 61% of referrals were in relation to women
- 2.25% of referrals were for adults from BAME communities



# Safeguarding Referrals 2019/20

Type of Risk	Number	%
Neglect	1344	27.9%
Physical	1205	25.0%
Financial	614	12.8%
Psychological	578	12.0%
Self Neglect	348	7.2%
Domestic	240	5.0%
Sexual	213	4.4%
Institutional	164	3.4%
Sexual Exploitation	66	1.4%
Discriminatory	27	0.6%
Modern Slavery	14	0.3%



- The highest number of referrals made during the year 2019/20 were for Chesterfield cases (19%), followed by Amber Valley (15%) and then 14% were Erewash cases.
- Neglect, Physical Abuse and Financial abuse are the most common reasons for referrals made during 2019/20



# Making Safeguarding Personal (MSP)

The Care Act 2014 emphasises a personalised approach to adult safeguarding that is led by the individual, not by the process. The approaches of agencies and services to adult safeguarding should be person-led and outcome-focused

Between 01/04/2019 and 31/03/2020, social workers were asked to speak to service users who had been involved in a safeguarding enquiry to ask for feedback using x4 multiple choice questions. Approximately 50% of service users were asked and more work is needed to make sure that as many responses as possible are recorded.

Q1: 89% of service users who were asked said they were asked at the first point of contact and felt they could say what they wanted their desired outcome to be

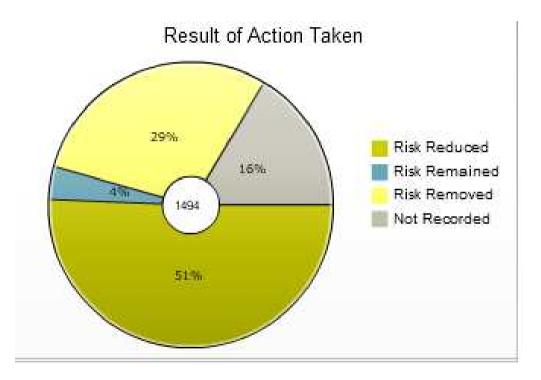
Q2: 80% of service users who were asked said they felt they were always listened to during conversations and meetings about helping them to keep safe.

Q3: 59% of service users who were asked said they were very happy with the end result of what people did to help them keep safe. (34% said they were, 'quite happy')

Q4: 71% of service users who were asked said they were satisfied that their outcomes were listened to and achieved



# Making Safeguarding Personal (MSP) Outcomes



In 2019/20 80% of cases resulted in the risk to the adult being removed or reduced as a result of the S42 enquiry.



# **DSAB Customer Engagement**

- DSAB Project Manager is a member of Derbyshire Stakeholder Engagement Board (DSEB) and consults with service users to co-produce safeguarding resources for the public.
- DSAB Project manager chairs a Deaf Community Working Group to assist with ensuring the deaf community have access to information and support
- Website <u>www.DerbyshireSAB.org.uk</u>
- Social Media- Facebook and Twitter @DerbyshireSAB
- Quarterly and Special Edition DSAB Newsletters
- WEAAD video featuring care home residents from Ada Belfield and Rowthorne
- Community Events for WEAAD, Scams Awareness Fortnight and Safeguarding Adults Week (currently on hold due to Covid-19)
- Leaflets/posters available on the DSAB website
- DSAB Animation video to be launched later this year



# **Social Media and Website Statistics**

- **49,633** views of the DSAB website during 2019/20
- Most popular pages on the website were safeguarding adult referrals, What is Abuse?/How to report Abuse, VARM, Policies and Procedures and SAB Training Courses.
- The period 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020 saw an increase of 305 (165.5%) Twitter followers from 184 to 489.
- The period 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020 saw an increase of 114 (64%) Facebook followers from 56 to 170.
- For the period 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020 the total 'reach' of posts/retweets was 3.45m people, with Q1 accounting for 1.69m. Examples of three of our Twitter posts are shown below.

	Reach	Date	Post
1.	113,880	21st November 2019	Children are not the only victims of <u>#cyberbullying</u> - adults can just as easily become prey to vicious internet attacks with devastating results.
1.	79,572	23 <sup>rd</sup> December 2019	For people in abusive relationships, Christmas can be the worst time of year. Derbyshire Domestic Abuse Support Line provides a range of services (tel: 08000 198 668).
1.	76,962	27 <sup>th</sup> May 2019	A multi-lingual leaflet produced by the Derby and Derbyshire Modern Slavery Partnership helps people working in the UK know their entitlements.



# Covid-19

- Updated DSAB Risk Register
- Covid-19 Risk and Assurance Plan in place
- Covid-19 Data/Performance Framework document in place
- Regular Core Business Group meetings with Statutory partners to allow assurance to be provided around safeguarding adults.
- Regularly data reports in relation to safeguarding adult referrals and S42 enquiries to allow closer scrutiny.
- BAU- Back to Business As Usual with sub group and Board meetings taking place via video conference. Annual Report for 2019/20 is currently being written to be presented at the September 2020 DSAB meeting.



# **DSAB** Resources



A variety of leaflets and posters can be found on the DSAB website

www.derbyshiresab.org.uk including leaflets translated into 3 languages (Polish, Romanian and Urdu).

### **DSAB** website

https://www.derbyshiresab.org. uk/home.aspx

# **Social Media**

Follow us on Twitter or like us on Facebook.

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### Derbyshire Improvement and Scrutiny Committee – 22 July 2020

# Derby and Derbyshire Safeguarding Children Partnership Report by Independent Chair

### 1. Introduction

The Derbyshire and Derby Safeguarding Children Boards (LSCBs) were merged, by voluntary agreement, on 29 September 2019, under the auspices of the Children and Social Work Act 2017 and Working Together 2018. Consequently, this the first feedback to the Improvement and Scrutiny Committee from the Derby and Derbyshire Safeguarding Children Partnership, for which I have the privilege to be the Independent Chair, having chaired the Derbyshire LSCB from March 2018.

Clearly, the context in which Safeguarding has been operating in the last few months is very different from that in which it was operating when the Annual Report was compiled for 2018/19 and very different from that anticipated when the new arrangements were implemented. Members are asked to bear that in mind in reading what follows.

### 2. Annual Reporting

Members of the Committee have received copies of the most recent Annual Report for the Derbyshire LSCB for 2018/19. As the two LSCBs ceased to operate from September 2019 (i.e. Mid-year), the Partnership agreed that it would be appropriate and practical not to prepare reports covering two half years, nor would it be sensible to prepare a consolidated report covering April 2019 to September 2020. Accordingly, the first full report for the new Partnership will cover the period April 2019 to March 2021. That report will be shared with this Committee, once it is completed.

### 3. Progress against 2018/2021 Priorities

When I presented the 2017/18 report last year, the final slide set out the priorities for Derbyshire for 2018/2021. Whilst these have been incorporated now into the Partnership Priorities, as being common to both City and County, one – Early Help – was more specific to Derbyshire.

At the time of the presentation, Derbyshire was in the middle of a period of significant change in its Early Help landscape and the Council was seeking to engage more closely and practically with other partner agencies to promote, enable and ensure that Early Help was assessed and delivered effectively by all agencies on an equal footing. As stated in the Annual Report 2018/19, a multi-agency Task and Finish group was set up to facilitate this aspiration. I can say that, with the engagement, support and commitment of all agencies, there has been a very effective response to the call for genuine partnership working and the work of the task and Finish group has been completed, other than a review in October 2020 to gain assurance that the initial progress has been maintained.

It is worth updating Members also on the progress made with the new arrangements on which I made comment last year and to which reference is made in Chapter 14 of the Annual Report 2018/19. The structure is available on the Partnership website <a href="www.ddscp.org.uk">www.ddscp.org.uk</a>.

In essence, there is a Chief Officer Group, meeting twice a year to oversee activity and assurance. This comprises the main Partners: Derbyshire County and Derby City Councils, Derbyshire Constabulary, Derby and Derbyshire CCG, Tameside and Glossop CCG and the Derbyshire Police and Crime Commissioner. An Executive Board meets quarterly. This has a

wider membership, including NHS Trusts, Education Groups, EMAS and Lay Members and is responsible for the effective work of the 11 subgroups and the important contribution of the Child Death Overview Panel (CDOP). 3 of those subgroups are Joint County and City and the 2 Quality Assurance Groups have been working more closely during the period of the pandemic.

It is very pleasing to report that the transition to the new arrangements was very smooth, despite initial staffing vacancies, the need to standardise reporting and management arrangements and the additional timescale pressures of Rapid Reviews. It should be recorded that the work of the Partnership team and its Manager contributed greatly to what has been a successful start to the new arrangements.

### 4. Partnership Business Plan 2020/21

The Partnership Business Plan for 2020/21 has been circulated to Members of the Committee. It refers to the new arrangements and sets out the five strategic priorities for the Partnership, agreed and signed off by the Chief Officer Group in January 2020.

### 5. Current Performance

Regular brief reports are prepared on progress against the Business Plan Priorities and the most recent, covering the period March to June 2020, is attached for information, alongside the brief which is made available for the public.

In addition to the planned work, a comprehensive review has been undertaken by the Partnership Team on case reviews/rapid reviews undertaken locally over the last two years. This has identified how the Partnership could respond even more effectively to incidents in the future and more in depth work is underway to assist that process.

### 6. Future Challenges

Clearly, the last few months have been difficult for all services, not least those seeking to address the Safeguarding of children. All the practitioners and managers involved in this work must be congratulated on their commitment and performance over that very difficult period.

Challenges faced since March 2020, which continue still, include:

- Reduced demand at the front door, certainly in April/May, particularly with the
  closure/reduced operation of schools and referrals from health bodies. Whilst this
  may seem positive, it is a great concern since, whilst communication with schools
  and between schools and families has remained strong, there is a concern about
  what might be happening 'behind closed doors'.
- Future demand amount and shape. There is an expectation that, post September, demand may begin to exceed that prior to March 2020 and work is being undertaken across the Partnership to try to identify what that demand might be in terms of level and content. It is notable that demand is now getting back to what was 'normal', even before September.

Steve Atkinson MA (Oxon), MBA, FIOD, FRSA Independent Chair Derby and Derbyshire Safeguarding Children Partnership

# Derbyshire Safeguarding Children Board

# Annual Report 2018 – 2019



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# **Chapter 1. Chair's Foreword and Introduction**



I am pleased to introduce this Annual Report on the work and effectiveness of the Derbyshire Safeguarding Children Board for 2018/19. This is the last such report for the Derbyshire Board, as new joint arrangements with Derby City – the Derby and Derbyshire Safeguarding Children Partnership – begin from September 2019. As last year, I must pay tribute to all Board members for their hard work and commitment and acknowledge the very positive contribution of the Board Manager, Catherine O'Melia and her team in ensuring that the Board delivered on its objectives for the year.

The Safeguarding Children Board is the key strategic partnership tasked with coordinating and ensuring the effectiveness of local working to safeguard and promote the welfare of children and young people. It holds agencies to account, individually and collectively, for their safeguarding practice and their role in the delivery of the Board Business Plan. The membership of the Board during the year 2018/19 is set out at Appendix A.

During 2018/19, the Board has focussed on the following areas, each of which is described in more detail in the body of the report: effectiveness of child protection processes – including increasing participation from children and multi-agency safeguarding partner representatives, scheduling and provision of reports; effective preparation and collaborative delivery of Early Help; addressing services for children at risk of exploitation; effective implementation of new Safeguarding Children arrangements; responses to domestic abuse and to substance misuse. All will remain priorities for 2019/20 and will be integrated with the priorities from Derby City Safeguarding Children Board, as the merging of arrangements is implemented. Fortunately, but perhaps not surprisingly, our main priorities are very similar.

In addition, learning from audits and reviews has been important to how we maintain and improve multi-agency working and sharing of information.

As we move towards the new safeguarding arrangements in light of Working Together 2018, we will continue to develop a framework which enables us to evaluate the impact of the work of the Board/Partnership and its safeguarding partners – not just in direct work with children, but with our partners in Safeguarding Adults, Community Safety and Health and Wellbeing.

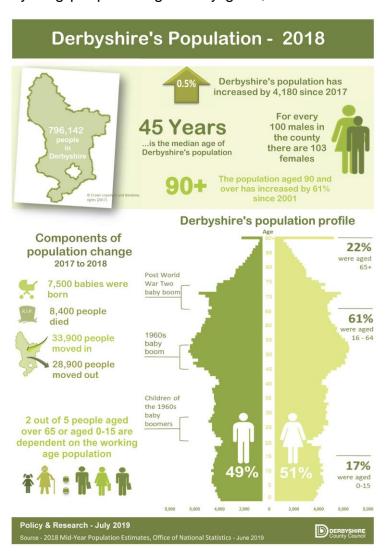
2018/19 has been a busy year, as it should be, and 2019/20 promises more of the same. 'Challenge' is central to the work of the Board and the emerging Partnership, as is the fundamental requirement that we all listen to what children and young people tell us. Both will be central to our Partnership work during 2019/20 – and beyond!

I commend this report to you.

Steve Atkinson, Independent Chair, Derbyshire Safeguarding Children Board

# Chapter 2. Characteristics of Derbyshire and the demographic context of the Derbyshire Safeguarding Children Board

Derbyshire is a large diverse county which encircles the unitary authority area of Derby City. Around a quarter of Derbyshire is made up of large sparsely populated rural areas alongside a number of heavily built up towns. Derbyshire's 0-19 population is approximately 153,000 (22% of the population). Levels of deprivation, outcomes and life chances for children and young people are generally good, but there are variations across the county. Derbyshire's



Black and Minority Ethnic and English as an Additional Language populations are significantly lower than England as a whole. A large part of the North and West of the county falls within the Peak District National Park.

### **Positive indicators**

More young people entering education training or employment than the national average or fewer 'NEET' young people – 2.3% NEET vs 3.1% nationally.

Significantly fewer first time entrants to the criminal justice system than the England average – 169 per 10k population vs 327 per 10k nationally.

Healthier birth weights than national average.

Pupil absence lower than regional and national average.

# Risks and challenges

Higher than average vulnerability issues

for teenagers - hospital admission, mental health

Higher than national and regional average numbers of Children In Need – increasing year on year since 2013

Significant increase in referrals to Children's Social Care during 2018-19, reversing a downward trend to higher than the national average.

Derbyshire has seen a significant increase in child protection planning since 2015/16. Although the numbers dipped in autumn 2018 they began to rise again by spring 2019, however the year end data shows a slight reduction in the rate of children per 10,000 subject to a protection plan dropping to 61/10k from 63/10k in 2017/18. The Office for National Statistics (ONS) estimates

that the child population (ages 0–17) will increase by 11% between 2014 and 2039. Based on the awareness of increasing overall demands on the child protection service across England, alongside the significant work underway in Derbyshire, it is anticipated that Derbyshire's current numbers of children subject to a protection plan will see some reduction over time.

# Chapter 3. Strategic objectives of the Derbyshire Safeguarding Children Board

The strategic objectives for the DSCB for 2018-2021 are set out below. The new priorities for the Derby and Derby City Safeguarding Children Partnership will be determined by partners across the City and County, as part of the implementation of the new joint safeguarding arrangements.

- The prevention of child abuse by ensuring the effectiveness of child protection processes within Derbyshire, particularly the timely identification of and prompt reduction of risk, by driving forward the recommendations of the 2017 independent review and ensuring impact. Ensuring that services are informed by and responsive to the voice and experiences of children and young people.
- 2. Ensuring the effective delivery of early help across the partnership including the prompt completion of Early Help Assessments and timely targeted intervention to address neglect and abuse.
- 3. Ensuring that children and young people are effectively protected from exploitation (including sexual exploitation) and emerging areas of vulnerability and risk e.g. County Lines and technology enabled abuse.
- 4. Ensuring that effective multi-agency safeguarding arrangements (MASA) are put in place for children and young people, drawing upon and linking with other boards operating across the safeguarding arena. Ensuring that these include robust governance arrangements.
- 5. Ensuring that an effective response to domestic abuse is achieved by cohesive planning across agencies.
- 6. Ensuring an effective response to substance misuse by children and young people, reducing the numbers adversely affected.

The Board set out the following additional aims for 2018/19:

- 1. To ensure that children in Derbyshire are safeguarded from all forms of abuse and exploitation.
- 2. Promote, monitor, coordinate and evaluate multi-agency effectiveness in safeguarding children across the child's journey.
- 3. Strengthen and support a competent and equipped workforce that is committed to learning and developing safeguarding practice.
- 4. To evidence the effectiveness and impact of the work of the DSCB.
- 5. Ensuring the wider community is aware and informed of safeguarding issues and equipped to react to these quickly and appropriately.

# Chapter 4. Priority area: Effectiveness of child protection processes

Following an independent review of child protection processes in Derbyshire in 2017, the DSCB established a Child Protection Improvement Group, to respond to the recommendations of the review and to ensure a continuous focus on improving multi-agency involvement in Child Protection Conferences. Activity in this area during 2018/19 included:

- Developing and launching a new format for the child's plan which follows the child's journey and focuses on clear outcomes
- Improving mechanisms for enabling children and young people to participate in their child protection conference
- Sampling of the quality of child protection conference reports by a number of the safeguarding agencies to identify good practice and where improvements are required.
- Observation of child protection conferences by each agency to evaluate the contribution of partners to the planning process.
- Delivery of workshops to GPs to promote child protection conferences and GP involvement in the planning process.
- Strengthening the conference booking process using a range of partner identifiers and systems e.g. CP-IS, police occurrences, DfE numbers
- Strengthening the arrangements for the Independent Dissent Panel and reporting of dissent issues. The Panel has extended its remit to include sampling of the quality of child protection plans.
- Refreshing the dissent and escalation policies and establishing clear monitoring of dissent and escalations which are reported to the DSCB on a quarterly basis.

### Our evidence tells us that:

There is improvement in the way child protection conferences are run. Conferences are timelier, more consistent in format and more focused on risk of significant harm. The quality of plans have improved.

- Child protection managers are taking a stronger quality assurance role with strengthened reporting arrangements with locality Heads of Children's Social Care and Early Help Services and there is evidence of increased use of escalation and challenge by child protection managers.
- Social care reports to conference are improving as are the quality of child protection plans, which better reflect the nature of the risks to children
- Use of formal dissent is increasing, which provides an opportunity for reflection and learning. The multi-agency Dissent Panel is working well and there has been only one dissent upheld in the year ending 2018/2019, suggesting that threshold and decision-making is robust.
- Further improvement is needed in the number of reports being submitted to conference by partner agencies, and the quality of analysis within multi-agency reports to conference. Work to address this is continuing.

Across the Partnership, there is evidence of a clearer focus on the risk of significant harm and that thresholds for child protection planning are generally appropriate. There is evidence that children are being protected through child protection processes in a more timely way.

There is weaker evidence in terms of how child protection plans are bringing about more timely change for children and families. Although the number of plans lasting for 2 years or more has fallen, the average duration of plans has increased; the reasons for this need further exploration.

# Plans for the coming period

- Additional pending evaluation reports will give further insight into the impact of agencies' quality improvement activity and workforce development to date.
- Ongoing work is continuing with GPs to increase the number and quality of GP reports being submitted to case conference.
- The need for multi-agency training in relation to analysis within child protection reports has been identified and will be addressed in the joint training programme for the new Derby and Derbyshire Safeguarding Children Partnership.
- A revised and updated action plan to be developed to guide further activity of the group.

# Chapter 5. Priority Area: Early Help

2018/19 has been a period of significant change for the early help landscape within Derbyshire. A number of organisational changes to key services commenced within the period and in December 2018 the DSCB agreed to form a multi-agency task and finish group with the aim of developing a multi-agency Early Help Strategy for Derbyshire which supports a fully collaborative approach to the delivery and operation of Early Help services across Derbyshire.

All agencies committed to the following practical actions as a matter of day to day operation, making the most effective use of the Children's Partnerships which exist in each of the Derbyshire localities, to ensure that these actions are owned and driven locally:

- High Peak and North Dales
- Chesterfield
- North East and Bolsover
- Erewash
- South Derbyshire
- Amber Valley

# All local agencies:

- Have an equal responsibility for identifying need and taking steps to address that need within this Early Help framework.
- Will reinforce with all their staff the necessity of critical questioning of circumstances in all potential referrals to establish information and facts prior to referral and of quality conversations with the family at all stages of intervention, to ensure that all referrals are necessary and fully informed.

- Will adopt a family-solutions-based approach, identifying and responding to the child's 'lived experience' through family-focused activities and strategies.
- Will be transparent in taking resource decisions and enter early meaningful dialogue with partners about the potential impact of such decisions on those partners and on the Early Help approach in its entirety.
- Will work in open partnership at the 'locality' level within Derbyshire (and separately within Derby City), with practitioners seeking to take decisions and actions in individual/family cases, within locally agreed priorities and delegated resource allocations.
- Will share information about a child and family as openly as possible, within data-sharing requirements, so that decisions and actions about them are fully informed.
- Will use the common procedural guidance to ensure appropriate and effective escalation of cases where higher levels of decision or resources are needed in only the most exceptional situations or where assessment concludes that higher levels of intervention are necessary.

To support the delivery of early help across all partner agencies, new early help assessment and planning documentation was agreed in 2018/19 and training will be provided to support roll out of the approach.

An agreed set of measures of effectiveness is in development which will enable the new Derby and Derbyshire Safeguarding Children Partnership to closely monitor outcomes for children young people and families, assessing the impact of changes within early help and working with agencies to identify innovative ways to intervene early and prevent problems from escalating.

# Chapter 6. Priority Area: Children at risk of exploitation

During 2018/19, the Board has worked with partner agencies to deliver activity to address and reduce the risk of children being exploited. The Children at Risk of Exploitation/Vulnerable Young People Subgroup of the DSCB provides a focal point for a wide range of agencies to identify areas for development and work together to improve responses to exploitation concerns.

In June 2018, the Derby and Derbyshire Safeguarding Children Boards launched a joint Children at Risk of Exploitation Strategy for 2018-2021, setting out a local vision to prevent exploitation wherever possible, protect children, ensure that children, young people and their families whose lives are affected by exploitation receive a high level of support, protection, and that offenders are held accountable for their actions, and brought to justice.

The strategy outlines the following priorities:

- 1. Strong Leadership and Partnership approach
- 2. That a young person may continue to require support until the age of 25.
- 3. Participation of children and young people in their meetings
- 4. Identification

- 5. Prevention and Early Intervention
- 6. Cross Cutting Approach
- 7. Disruption, protection and prosecution
- 8. Recovery

Throughout 2018/19 and via the Children at Risk of Exploitation/Vulnerable Young People subgroup, the Board delivered a range of actions to support delivery of the strategic priorities, including:

- Embedding multi-agency risk management arrangements via Locality Children at Risk of Exploitation (CRE) and Missing Partnerships and police tasking meetings
- Developing a joint multi agency tasking meeting covering City and County to improve oversight of high risk cases, including missing cases
- Delivering a 'Say Something If You See Something' campaign to raise awareness and reporting of CSE in diverse organisations such as hotels, restaurants, parish councils, partner agencies and taxi companies
- Reviewing and relaunching the CSE toolkit to encompass all forms of exploitation – renaming it Children At Risk of Exploitation (CRE) toolkit to reflect this broader approach.
- Completed a thematic multi-agency audit and evaluation day in relation to six cases of children at risk of exploitation, using the findings of this report to inform further development activity.
- Supporting improvements to timeliness and quality of missing return home interviews and more effective tracking and monitoring of missing episodes
- Raising awareness of risks for children who are more vulnerable due to them missing education, including publicity in health settings, libraries and schools
- Developing a harmful sexual behaviour policy to identify and reduce peer on peer abuse
- Revising multi-agency training to reflect all risks of exploitation and in line with the renewed strategy and toolkit.

### What impact have we seen?

- Working together and information sharing between the police and children's social care has been strengthened, and evidence shows where this activity has helped to protect victims and target offenders.
- Children are becoming more engaged in plans to help keep them safe.
- Intelligence sharing has supported activity to help prevent emerging worries of exploitation.
- Risk has reduced for children at risk of sexual exploitation.
- Children have greater understanding of risks online.

 Intelligence regarding youth violence within Derbyshire and our knowledge about children who associate themselves with being in a gang has been strengthened.

# Chapter 7. Priority area: Domestic Abuse

During 2018/19, a review of governance arrangements in Derbyshire took place, which clarified the role of the Domestic Abuse and Sexual Violence (DA/SV) Governance Board as leading and co-ordinating activity to address Domestic Abuse. The DSCB works closely with the DA/SV Board, ensuring appropriate representation from agencies working with children, developing a dedicated action plan as a standing agenda item for the DA/SV Board and receiving a 6 monthly update on DA/SV Board activity. During the year key areas of development were:

- Launch of the process for police notification to schools following a domestic abuse incident, enabling school staff to monitor and support the child as needed.
   Roll out of the initiative was supported by a programme of training and development for school staff.
- Completion of multi-agency case audits, using the Joint Targeted Area Inspection framework, to evaluate the effectiveness of practice by all agencies and inform the Domestic Abuse Action Plan.
- Development of a revised process regarding the commissioning and completion of Domestic Homicide Reviews (DHRs) where children are involved. This ensures that the DSCB is sighted on reviews being undertaken which have implications for children and young people and enables appropriate engagement throughout the process.
- Circulation of the summary of learning from Domestic Homicide Reviews to all DSCB members/agencies and a link posted on the DSCB website. Learning from DHRs has been included in relevant DSCB training.
- Completion of a multi-agency audit regarding training in relation to DA. This has been utilised to inform development of the DSCB training programme and Derbyshire Community Safety training programme, to further develop and clarify training pathways for all staff working with families experiencing domestic abuse.
- Derbyshire Police commissioned 'Domestic Abuse Matters' training, delivered by Safe Lives, for rollout in 2019 and have made training places available for multiagency partners to maximise the benefits of the training programme across the multi-agency workforce.
- Launch of a pilot project for working with perpetrators of Domestic Abuse, delivered by Intuitive Thinking Skills, supported by a referral pathway for social work teams.
- Secured over £740k of additional funding through the Ministry of Housing and Local Government to enable the specialist Domestic Abuse Support Services to enhance their offer to victims with complex needs.

 Recommissioned an Independent Domestic Violence Advisors Service (IDVA), which supports high risk victims of Domestic Abuse. The new service now incorporates evening, weekend and bank holiday provision.

#### Areas for development:

Specialist domestic abuse services are due to be re-commissioned in March 2020. The commissioning review has been informed by consultation led by Community Safety, as lead commissioner, and involving all relevant services working with children and families. The need to raise the profile of the role of specialist services has been identified, in order that they are fully utilised and delivered in partnership with other services who support families.

Work with perpetrators has been identified as an area of work for further development and it is proposed that a sub-group of the DA and SV Governance Board will move this work forward.

# Chapter 8: Priority area: Substance misuse Young people's specialist substance misuse service

Provided by Change Grow Live (CGL), this tier 3 (targeted) service delivers interventions aimed supporting children and young people to reduce or cease drug and alcohol use and to reduce the harm they may experience as a consequence of their use.

Trends and usage for substance misuse has been relatively static for a number of years and CGL have a focus on prevention and early intervention, promoting safeguarding as everyone's responsibility - empowering stakeholders to suitably identify and respond to substance use. Children are presenting with higher levels of associated vulnerability and complexity, including mental health issues and emerging safeguarding issues such as criminal exploitation ('county lines').

Over the period April 2018 to March 2019 the service received 196 referrals and worked with 142 children and young people (103 males and 39 females) between the ages of 12 – 18. Primary substances reported are detailed below.

Primary substance reported		
Alcohol	27	
Alprazolam	2	
Cannabis	93	
Cocaine	10	
Ketamine	1	
MDMA	9	

#### Young people's substance use outreach service

Change Grow Live (CGL) also provides a recently established outreach service aiming to reduce drug and alcohol related harm among young people aged between 16 and 25 years. The service delivers workshops within educational settings; engages with groups of young people in the community; and offers advice and information sessions within the night-time economy. Early data suggests that the key substances young people wish to discuss are MDMA and alcohol.

#### **Youth Offending Service**

The Derbyshire Youth Offending Service (YOS) employs two full-time substance misuse workers, who work with young people identified as having substance misuse issues during the assessment process for court and out of court disposals. The team will refer on to the specialist tier 3 service as required.

For the year April 2018 – March 2019 a total of 186 referrals were received by the substance misuse workers and worked with 161 males and 25 females between the ages of 12 -18. Primary and secondary substances reported are detailed below:

Substance	Primary substance used	Secondary substance
		used
Alcohol	31	43
Cannabis	118	20
MDMA	1	16
Cocaine	2	12
Stimulants	1	2
LSD	0	2
Xanex	0	2
Diazepam	1	0
Ketamine	1	2
NPS	1	0
Heroin	0	0
Tobacco	5	19

#### Space 4 U

Provided by Action for Children, this service offers support to children affected by someone else's substance misuse. In the period April 2018 to March 2019 the service worked with a total of 120 children, 59 male and 61 female, who at the time of referral were between the ages of 5-18.

Referral issue	
Alcohol	62
Drugs	34
Both	23
Not Known	1

#### Areas for development:

Derbyshire County Council – Public Health are seeking permission to go out to tender for a tier 2 substance misuse service, and if successful the newly commissioned service is planned to commence in June 2020

The service objectives are:

- Identify populations of young people in Derbyshire who may be at increased risk of health or social harms as a result of using drugs, alcohol or other psychoactive substances:
- Screen at risk populations in order to identify individuals who are at risk of health or social harms as a result of their use of drugs, alcohol or other psychoactive substances;
- Deliver brief and extended brief interventions to those young people identified to support the reduction of harm they are experiencing or may experience in the future as a result of their substance use;
- Refer individuals who require care-planned treatment to cease or reduce their substance use to the young people's substance misuse specialist service;
- Offer 'step-down' care to young people who have completed care-planned interventions delivered by the specialist service to support the maintenance of their treatment goals;
- Ensure other agencies are involved in the young person's care as appropriate

#### **Chapter 9: Lessons from learning reviews**

During 2018/19, the DSCB completed and signed off two Serious Case Reviews.

The first review was commissioned in January 2018. The case relates to a baby who was examined aged 1 month, following admission with concerns of lethargy and abnormal movement at home.

The report will be published in full following conclusion of criminal proceedings. In the meantime a briefing note has been prepared pending publication highlighting the key learning themes as follows:

- Pre-birth protocol was not utilised
- The need for full agency checks and specialist risk assessments to be undertaken.
- The need for the appropriate level of health visiting support to be provided
- The need to recognise and address parental vulnerabilities which may make them a risk to their children
- The need for appropriate responses to suspicious marks on pre-mobile babies
- The need to recognise the vulnerability of babies.

The DSCB accepted 6 recommendations within the report and a multi-agency action plan has been developed to address the work required within the coming months.

The second review was commissioned in June 2018. The case relates to a 3-month old baby who died as a result of an overlay which has been deemed by the Coroner to be accidental. However the child had been in hospital the week prior due to being dropped and injured during a party; although there is no evidence that this incident contributed to the child's death, the SCR was commissioned by the Independent Chair of the LSCB in light of this prior incident and the family's extensive history with services, including another local authority area. The SCR overview report was published in August 2019.

The learning themes identified from this report are:

- Professional curiosity and challenge in relation to potential injuries to pre-mobile babies where the circumstances include additional risk/ vulnerability factor (substance misuse and alcohol).
- Improved communication and clear referral pathway between the agencies at the time of the dropping incident.
- Holistic assessments involving all family members including fathers, with risks fully identified and understood.
- Unsafe sleep practice/co-sleeping.

The DSCB accepted the recommendations within the report and an action plan has been developed as a result.

Due to the common theme of vulnerable babies in both reviews, the Derbyshire 'Keeping Babies Safe Group' have been asked to respond to the recommendations of each review and to co-ordinate activity to raise the profile of issues relating to vulnerable babies and to improve agency responses.

In addition to the Serious Case Reviews above, the DSCB also oversaw three additional learning reviews in relation to serious child safeguarding incidents.

In January 2019 the DSCB approved the findings of a review in relation to the death of a child who died of health issues relating to obesity. A multi-agency strategic group has been established in response, with a focus on developing clear pathways for support to both prevent obesity and to prevent the harm caused by childhood obesity. This includes consideration for issues of neglect.

A further review identified areas of learning in relation to a child who died as a result of hanging. This, along with other concerns regarding children at risk of taking their own lives, has contributed to the Derby and Derbyshire Safeguarding Children Partnership identifying children's emotional health and wellbeing as a key area of focus and improvement.

The final review relates to a 4 month old baby who sustained multiple bruises in 2017 whilst on a child protection plan; this had been in place from birth due to risks identified in relation to both parents including domestic abuse and substance misuse. Bruises were observed by different professionals on different occasions but an overall shared picture of the potential risk of harm to the child was not developed or managed through the CP plan arrangements. The finding of fact could not establish the perpetrator of the injuries but found that either father or mother caused the injuries and the other failed to protect. The case did not meet SCR criteria as the nature of the injuries did not meet the threshold for 'serious harm', but the DCSB were keen to explore any lessons to be learned in relation to communication between agencies, to prevent any further issue of this nature arising. Panel meetings and a practitioner learning event have been held in relation to this case – a draft report has been prepared and updated following additional agency information being provided. This review is pending final sign off and publication.

Emerging learning in relation to this case is centred on ensuring the policy regarding responding to bruising of non-mobile babies is shared, understood and used consistently - work has been undertaken with health providers to address this.

#### **Aston Hall**

In July 2018, the DSCB published a report on the conclusion of an assurance review into historical sexual abuse at Aston Hall Hospital. The report, commissioned from an independent author, concluded that:

'Children can be confident that, if a similar situation, such as occurred at Aston Hall, arose again, there is a clear and transparent route for them to raise their concerns and that those concerns would be taken seriously. Furthermore, there are robust and effective processes in place to identify concerns that are not reported by children'.

The report recommended a series of measures for ongoing assurance. These have been accepted by the Board in full and an action plan produced to ensure they are implemented. The report has been shared with all partner agencies, along with the Safeguarding Adults Board, and assurance sought that it has been disseminated to all staff.

A copy of the Aston Hall report and all published information from other recent learning reviews can be found on the DSCB website. Our learning and development programme and priority areas of action reflect the findings of our learning reviews and are regularly updated accordingly.

#### Rapid reviews

During 2018/19 the DSCB completed five rapid reviews following Serious Child Safeguarding Incidents, in line with Working Together 2018 and transitional guidance. The Board has established a clear process for coordinating agency information to inform whether a learning review should be commissioned. The process has enabled agencies to identify immediate or early learning in each case to ensure a swift response to the issues identified and promote improved practice.

# **Chapter 10: Training and Workforce Development**

During 2018/19, the DSCB delivered an extensive multi-agency training programme, in line with the Joint Training Strategy for Derby and Derbyshire 2017-2020. The programme was informed by learning from local and national reviews of child safeguarding practice, including Serious Case Reviews, and reflected changes to national guidance.

During 2018/19, the DSCB delivered a programme of 81 safeguarding courses covering 22 different topics.

Training is delivered by a multi-agency pool of trainers, drawing on expertise from specialist practitioners and lead agencies. Trainers included:

- Derbyshire County Council Children's Training Team
- Residential Children's Home Manager
- Named and Designated Nurses
- Substance Misuse Worker

- Local Authority Designated Officer (LADO)
- Diocesan Safeguarding Advisor
- CAMHS Practitioner
- Domestic Abuse Support Services Practitioner
- Derbyshire Police Officer

A total of 1,163 participants attended multi agency programme courses.

In addition, a range of dedicated safeguarding training was provided to schools including:

- 9 Designated Safeguarding Leads full day courses
- 11 Designated Safeguarding Lead refresher courses
- 6 Safer Recruitment sessions including one session for HR managers
- 1 Managing Allegations for schools course
- 4 Governor Safeguarding sessions
- 1 Newly Qualified Teachers session
- 6 sessions regarding notifications to schools of Domestic Abuse incidents
- An Annual Schools Safeguarding Conference, hosted by the chair of the DSCB and focusing on learning from Serious Case Reviews.

A total of 3568 training places were utilised by schools in 2018/19.

The DSCB continues to offer a validation scheme for independent training providers, which enables them to utilise a kite mark on validation which assures organisations who are purchasing training independently the training is up to date and meets the quality requirements of the DSCB. During 2018/19 three agencies and two independent trainers achieved validated trainer status.

All training is evaluated and evaluation activity has established that training participants consistently feel that their training knowledge and skills have increased following training.

'Very relevant and useful course....very knowledgeable trainer, thank you for your experience and professional practice which made this training realistic and accessible'.

# Chapter 11. Statutory Safeguarding Audits

#### Section 11 audits

Derbyshire and Derby City Safeguarding Children Boards continue to work closely together to gain assurance that local agencies are fulfilling their responsibilities to safeguard children and promote their welfare, as required by s11 of the Children Act (2004). A robust annual audit has been developed, using shared audit templates and a shared approach to assurance visits, including joint visits to providers covering both areas. The audit tool is updated annually to ensure it reflects current emerging safeguarding issues and guidance.

The audit round for 18/19 requires providers to demonstrate robust evidence in support of their self-evaluation, and to identify where improvements or developments are required. Progress will be monitored through the quality and performance sub-group and reported to

the Derby and Derbyshire Safeguarding Children Partnership. Findings from the audit are not available to meet the timescale for this Annual Report, but will be published on the Partnership website.

#### Section 175 audits

All schools in Derbyshire are expected to undertake an annual safeguarding audit in accordance with s175 of the Education Act (2002) and Keeping Children Safe in Education guidance and to submit the audit along with an action plan. The number of schools completing the audit has declined year on year –239 returns in 16/17 declining to 209 returns in 17/18 and, as a result, the Board has requested that online solutions to streamline completion and submission be explored.

Key findings from the 17/18 audit previous audit were:

- The need to ensure that completion rates are maintained/increased to ensure the s175 audit reflects the current picture of safeguarding in schools and educational settings.
- Increase in the number of schools achieving 'good' Ofsted judgements in relation to safeguarding practice continues, reflecting that safeguarding is effective in Derbyshire schools.
- Increase in large multi-academy trusts and the need to ensure that 'cross border' Academies are aware of local issues and needs
- Concerns regarding funding arrangements and support for children with complex needs, SEND and safeguarding concerns
- Evolving provision of support services for children and families within schools, independent of local authority children's services

The education sub-group of the DSCB continues to work with schools to implement actions identified through the audit process and to increase the future completion rate. Where appropriate, the need for completing the s175 audit can be escalated through the involvement of the Education Improvement Service.

# Chapter 12. Child Death Overview Panel

The Derby and Derbyshire Child Death Review Partners have made arrangements for a structured and consistent approach to review all deaths of children under 18 years of age in line with Working Together 2018. The geographical footprint of Derby City and Derbyshire County reflects the network of NHS health providers, Police and Social Care providers for the local area. The arrangements are as follows:

- The child death review process will be modelled on and adhere to Child Death Review Statutory and Operational Guidance (2018); this will include the continued utilisation of the Child Death Overview Panel as the chosen forum for reviewing all child deaths.
- The Child Death Review Partners have agreed funding for a Designated Doctor for Child Death and a Lead Nurse for the Child Death Review process which

- incorporates the Link/Key worker role as stated in the statutory guidance. These posts will be recruited to by 29 September 2019.
- The partners have agreed funding for e-CDOP, an electronic case management system which automatically reports into the National Child Mortality Database. This has been active from 1<sup>st</sup> April 2019.
- The Partners will have oversight and be assured of the development and progress of the Child Death Review Process and CDOP through an agreed governance and reporting mechanism
- The Child Death Review Partners will publicise information regarding the arrangements for reviewing child deaths in Derby and Derbyshire.

The CDOP Annual Report will be published on the Partnership website, when available.

A copy of the full implementation plan can be found here

### Chapter 13: How children influence decisions made about them

The partner agencies actively work with children and young people to capture their voice and experience. Through the s11 audit process, each agency has provided evidence of how they enable children and young people to participate and influence the development of services. In addition, through the DSCB additional work has been undertaken to:

- Forge greater direct communication between the Independent Chair of the Safeguarding Children Board and the Derbyshire Youth Council and Locality Youth Forums. In 2019 the Chair attended the County-wide annual forum to hear about the issues that young people are most concerned about. These included: mental health and emotional well-being; homelessness; knife crime; internet safety; and effective parenting. The Independent Chair and Lead Member for Children and Young People also attend meetings of the Children in Care Council.
- Promote the involvement of children and young people in their child protection conferences, to ensure that their views are heard and inform their plan and to increase children's involvement in other meetings about them.
- Develop capacity to promote participation of children and young people and ensure they influence the work of the new Derby and Derbyshire Safeguarding Children Partnership

Locality Children's Partnerships have played a significant role in involving young people as leaders and influencers. An example of this is through the Chesterfield Locality Childrens Partnership, which identified there was a need for a consistent locality wide Online Safety Project aimed at and delivered by Primary School aged children. The project was developed in partnership with the Office of the Police and Crime Commissioner. In total 23 Primary Schools, 2 Secondary Schools and one Special School participated.

The project consisted of 4 elements:

- To support the children within their task, 150 Multi Agency Professionals took part in two excellent half day training sessions.
- 93 children and their teaching staff were trained as 'digital leaders'. Schools
  were provided with a comprehensive resource pack which provided the project
  with learning and the means to aid sustainability. This pack supported schools

- with all they needed and more to meet their OFSTED obligations on Online Safety.
- Each Primary School and the special school were given a bespoke training session to meet the needs of their students and their families. The specialised trainer, delivering the sessions, was supported by the schools digital leaders
- The Digital Leaders held a Celebration Event at the CASA hotel in Chesterfield,
   80 people attended, during the presentation they demonstrated their vast learning to other digital leaders and invited dignitaries.

The project has been embraced by children, young people and schools, who are planning for the next calendar year's activity. Initiatives such as these enable children and young people within Derbyshire to play a direct part in ensuring that they and their peers are effectively safeguarded.

## Chapter 14. Implementing new multi-agency safeguarding arrangements

Planning for new multi-agency safeguarding arrangements, in light of the changes defined by the Children and Social Work Act 2017, began in 2017/18 in Derbyshire and has continued at pace. Following consultation with existing safeguarding partners within Derbyshire and Derby City, is was proposed that the two Boards 'merge' to become the Derby and Derbyshire Safeguarding Children Partnership. The partnership will support and enable organisations and agencies across Derby and Derbyshire to work together so that:

- children are safeguarded and their welfare promoted;
- partner organisations and agencies collaborate, share and co-own the vision for how to achieve improved outcomes for vulnerable children;
- organisations and agencies challenge appropriately and hold one another to account effectively;
- there is early identification and analysis of new safeguarding issues and emerging threats;
- learning is promoted and embedded in a way that local services can become more reflective and implement changes to practice identified as positive for children and families; information is shared effectively to facilitate more accurate and timely decision making for children and families.

Strong leadership will be critical for the new arrangements to be effective in bringing together the range of organisations and agencies within the partnership. The statutory safeguarding partners across Derby and Derbyshire have equal and joint responsibility for local safeguarding arrangements.

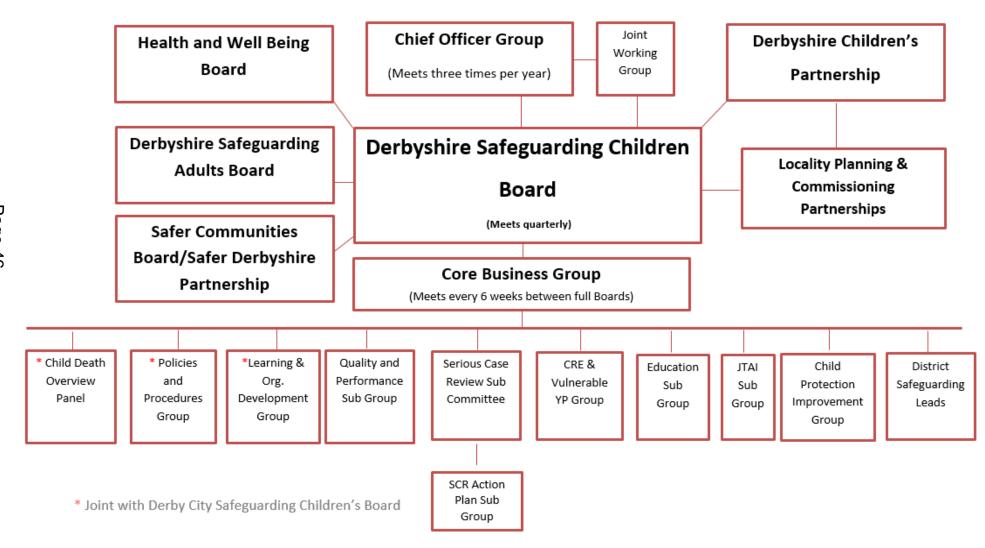
During 2018/19 a joint working group of senior representatives from the statutory safeguarding agencies has met regularly to develop and deliver an implementation plan for the new arrangements and to manage the transition from two separate Boards to one partnership. The implementation plan was published on 28<sup>th</sup> June 2019 and the Partnership will be in place by 29<sup>th</sup> September 2019 as required by statutory guidance.

The full plan can be found here

DSCB Membership 2018/	19 - Appendix 1	
Member	Role	
Steve Atkinson	Independent Chair	
Catherine O'Melia	Interim Board Manager – DSCB	
DS Matt Thompson	Head of Public Protection, Derbyshire Constabulary	
Heather Summers	Head of Housing Services - Rykneld Homes	
Adele Glover	Head of Child Protection, Derbyshire County Council	
Kathryn Boulton	Service Director, Schools and Learning, Derbyshire County Council	
Christine Flinton	Head of Community Safety, Derbyshire County Council	
Michelle Bateman	Director of Quality/Chief Nurse, Derbyshire Community Health Services	
Jane Parfrement	Strategic Director of Children's Services, Derbyshire County Council	
Liz Tanner	Service Manager – CAFCASS	
Brigid Stacey	Chief Nurse and Quality Officer, NHS Derby & Derbyshire CCG's.	
Charlotte Dunkley	Head of National Probation Service Derbyshire LDUs	
Grace Strong	Regional Manager, DLNR CRC	
Michelina Racioppi	Assistant Director for Safeguarding Children/ Lead Designated Nurse for Safeguarding Children, NHS Derby and Derbyshire Clinical Commissioning Group	
Juanita Murray	Designated Nurse Safeguarding Children, NHS Derby & Derbyshire CCG's.	
Jane Lakin	Principal Solicitor, Derbyshire County Council Legal Services	
Alison Noble	Service Director for Early Help and Safeguarding, Derbyshire Children's Services.	
Linda Dale	Acting Service Director, Performance, Quality and Partnerships, Derbyshire County Council	
Victoria Leonard	Lead Designated Nurse Safeguarding, Tameside and Glossop CCG	
Munera Khan	Designated Doctor, Tameside and Glossop CCG	
Patricia Field	Designated Doctor for Safeguarding Children Derbyshire	
DSCB Membership 2018/19 – Appendix 1 (cont)		
Member	Role	

Peter Bainbridge	Derbyshire Representative EMAS	
Carolyn Green	Executive Director of Nursing and Patient Experience, Derbyshire Healthcare NHS FT	
Rob Taylor/Phil Mitchell	Head of Prevention & Inclusion, Derbyshire Fire and Rescue Service	
Councillor Alex Dale	Cabinet Member for Young People, Derbyshire County Council	
Cathy Winfield	Director of Patient Experience and Chief Nurse, University Hospitals of Derby & Burton NHS Foundation Trust	
Lynn Andrews	Director of Nursing & Patient Care, Chesterfield Royal NHS Foundation Trust	
David Peet	Chief Executive, Office of the Derbyshire Police and Crime Commissioner	
Donna Reddish	Assistant Director – Policy & Communications, Chesterfield Borough Council	
Anne Hayes	Assistant Director, Public Health, Derbyshire County Council	
Jenny Tilson	Executive Director of Nursing & Quality, Derbyshire Health United	
Mick de Carteret	Service Manager, Derbyshire CGL & 1625 Outreach	
Lay Members		
Stephanie Marbrow	Lay Member	

## DSCB structure - April 2018



Derbyshire Safeguarding Children Board County Hall Matlock Derbyshire 01629 535716







# Derby and Derbyshire Safeguarding Children Partnership Business Plan 2020-2021

# The Derby and Derbyshire Safeguarding Children Partnership

Under the *Children and Social Work Act 2017*, the three statutory safeguarding partners (Local Authorities, Chief Officers of Police, and Clinical Commissioning Groups (CCGs)) must make arrangements to work together with relevant agencies to safeguard and protect the welfare of children in the area. These are referred to as Multi-Agency Safeguarding Arrangements. *Working Together to Safeguard Children (July 2018)*, sets out the statutory guidance to which all Multi-Agency Safeguarding Arrangements must adhere. Under the guidance it is permissible for the new arrangements to cover more than one local authority area with the same principle applying for Clinical Commissioning Groups and Chief Officers of Police. The statutory safeguarding partners across Derby and Derbyshire retain equal and joint responsibility for local safeguarding arrangements.

Derby City Council, Derbyshire County Council, Derby and Derbyshire Clinical Commissioning Group, Tameside and Glossop Clinical Commissioning Group and Derbyshire Constabulary approved the establishment and implementation of multi-agency safeguarding arrangements across Derby and Derbyshire. The new arrangements are called the Derby and Derbyshire Safeguarding Children Partnership and bring together the lead members and chief officers from the statutory agencies to oversee and scrutinise the work of a joint executive board comprising both statutory and other key partners. The chief officer group and executive board of the partnership are chaired independently of any of the Partnership members. The role of Chair includes scrutiny of the effectiveness of local arrangements consistent with the national guidance.

The new arrangements have increased the capacity within the system to improve its scrutiny of safeguarding arrangements whilst ensuring duplication is minimised. The arrangements build on the excellent performance of the two separate local safeguarding children boards allowing for wider sharing of both learning and resources.

## **Objectives**

The local arrangements have a specific remit to support and enable organisations and agencies across Derby and Derbyshire to work together so that:

- children are safeguarded and their welfare promoted;
- partner organisations and agencies collaborate, share and co-own the vision for how to achieve improved outcomes for vulnerable children;
- organisations and agencies challenge appropriately and hold one another to account effectively;
- there is early identification and analysis of new safeguarding issues and emerging threats;
- learning is promoted and embedded in a way that local services can become more reflective and implement changes to
  practice identified as positive for children and families; information is shared effectively to facilitate more accurate and
  timely decision making for children and families.

#### **Purpose of the Business Plan**

The Business plan supports the Priorities agreed by the Chief Officers' Group on 27 January 2020. These were identified in response to a combination of specific local intelligence and demands, previous priorities, national directives, performance information and individual casework and audits. The top five set out here have been identified by the Partnership as the main objectives to be achieved in 2020/21. This Plan seeks to incorporate into a single document the Strategic Priorities alongside the relevant lead agencies/subgroups, Performance Indicators and identified risks to be addressed by the partnership.

# **Strategic Priorities**

Priority	Description	Links to subgroups	
1	Promote emotional health and wellbeing and reduce the impact of Adverse Childhood Experiences (ACE's) WTOG ref (a)	QA Groups EVYP Groups LOD Group	
Page	Performance measures:     Section 47 enquiries     Use of graded care profiles     Use of CRE risk assessments     Children who are victims of crime     Missing from care/home     High risk CRE     Children admitted to hospital due to self-harm / substance misuse     CAHMS referral rates and waiting times	Ed Groups	
幺	<ul> <li>Safeguard children at risk of exploitation reflecting additional features such contextual safeguarding and our understanding of emerging vulnerabilities WTOG ref (a)</li> <li>Reduce the vulnerability of Electively Home Educated Children (EHE), Children excluded from school and Children who are Missing (From home, school and care) WTOG ref (c)</li> </ul>	EVYP Groups Ed Groups	
	Performance measures:      Use of CRE risk assessments     Missing from care/home     High risk CRE     Children Missing Education and Children Electively Home Educated		
3	Reduce the adverse impact of Parental Substance Misuse and Parental Mental Health WTOG ref (a)	QA Groups P&P Group	
	Performance measures:  • Substance misuse (including alcohol)	s. Sioap	

4	Promote and obtain assurance of Early Help arrangements (including responding to neglect) and response to requests for services WTOG ref (a)	QA Groups P&P Group
	Performance measures:	
	Early help (including volume, source and escalation)	
	Use of graded care profiles	
	Contacts and referrals	
5	Reduce the adverse impact of Domestic Abuse and family conflict	Ed Groups
	WTOG ref (a)	EVYP Groups
	Performance measures:	QA Groups
	Total CPP where DV is a significant factor	
	DASH score when Children present at DA Incident reported quarterly	
	DA figures at the MASH/Starting Point	

References to Outcome of Multi Agency Safeguarding Arrangements - Working Together 2018

- Children are safeguarded and their welfare promoted WTOG ref (a)
- Partner organisations and agencies collaborate WTOG ref (b)
- Early identification and analysis of new safeguarding issues and emerging threats WTOG ref (c)
- Learning is promoted and embedded WTOG ref (d)
- Organisations and agencies challenge appropriately and hold one another to account effectively WTOG ref (e)

# **Operational Priorities/Partnership Subgroups**

Additional priorities identified will be addressed as business as usual by the Partnership Subgroups, within their own terms of reference and in addition to their contributions to the five strategic priorities. Success will be measured through the Performance Framework and audit activity. In all cases, the Subgroup will be expected to identify the practitioner/manager development requirements to meet the stated priority and the capacity needed to ensure resilience. These will be shared with the other relevant groups, particularly the Learning and Organisational Development Subgroup, to ensure that a holistic view is taken of development and capacity needs. Any shortfalls will be identified and reported to the Executive Board, if they cannot be addressed within the Partnership Subgroup process.



### Derby and Derbyshire Safeguarding Children Partnership Business Plan 2020-2021

The Business Plan is based on the division of Priorities agreed by the Chief Officers' Group on 27 January 2020. This summary provides an update across the partnership of work being undertaken March 2020 – June 2020 in the context of the impact of Covid 19 on priorities.

Priority	DDSCP Strategic Priorities	Subgroups/groups with particular responsibilities	
1	Promote emotional health and wellbeing and reduce the impact of Adverse Childhood Experiences (ACE's)	QA Groups, EVYP Groups, LOD Group, Ed Groups	
C19 Update	DDSCP Performance Framework has been revised and the joint framework being reported to Chief Officers Group on a monthly basis.		
	<ul> <li>DDSCP has issued updated procedures in the context of urgent changes arising from the impact of Covid 19 respect of:</li> <li>Responding to safeguarding concerns</li> <li>Managing Risk to Vulnerable Children</li> <li>Child Protection Medicals</li> <li>DDSCP team has begun reviewing learning from Case Reviews to inform analysis of themes across the whole area to inform support for implementing procedures, guidance, training and proposals for joint reviews of cases where similar themes are evident.</li> </ul>		
2	Safeguard children at risk of exploitation reflecting additional features such contextual safeguarding and our understanding of emerging vulnerabilities, Reduce the vulnerability of Electively Home Educated Children (EHE), Children excluded from school and Children who are Missing (From home, school and care)	EVYP Groups, Ed Groups	
C19 Update	EVYP groups have prioritised jointly the key areas for agency reporting		
	Three young people are now involved with the Derby EVYP group and aim to participate fully at next meeting A Child Safeguarding Practice Review for two cases will jointly consider issues including learning linked to children who are		

	absent from school. DDSCP, Derby City Council and Derbyshire County Council have provided significant variety of resources and updates to schools to support safeguarding arrangements, responding to changing circumstances flexibly and in a timely manner.		
3	Reduce the adverse impact of Parental Substance Misuse and Parental Mental Health	QA Groups, P&P Group	
C19 Update	A Child Safeguarding Practice Review for two cases will jointly consider issues including learning linked to adverse impact of Parental Substance Misuse and Parental Mental Health		
4	Promote and obtain assurance of Early Help arrangements (including responding to neglect) and response to requests for services	QA Groups, P&P Group	
C19 Update	The revised joint QA performance framework includes consideration of Early Help, Children in Need and Child Protection		
Opaate	DDSCP has issued updated guidance on the use of the Graded Care Profile to improve assessment of neglect and Pre Birth Assessment. Learning from local case reviews will be included in resources for agencies to use to help implement updated guidance.		
	DDSCP has promoted the link to the Mental Health Support line to schools and partners as well as publishing the links on the Covid 19 webpage. This includes details of the revisions and updates to Early Help arrangements across the partnership		
	DDSCP team are currently working on developing a three E Learning training packages that include an introduction to safeguarding, safeguarding and domestic abuse and safeguarding introduction for the taxi / escort services.		
5	Reduce the adverse impact of Domestic Abuse and family conflict	Ed Groups, EVYP Groups QA Groups	
C19 Update	DDSCP and Derbyshire County Council have promoted across the education sector the additional information on Police DASH and PPN referrals to support vulnerable children during COVID-19. The Police have reviewed their systems in order to identify where additional support is required for vulnerable children and are communicating this to schools and parents following attendance at domestic abuse incidents. (Safeguarding referrals for more serious cases are being referred as per existing arrangements)		
	DDSCP team are currently working on a briefing paper to support practitioners in response to con and the additional impact of Covid 19. Alongside this the team are currently working on developing training for practitioners both to raise awareness of domestic abuse and explore features linked to Covid 19.	g a podcast to provide	

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#### COVID 19 Performance Summary Briefing – Up to 30<sup>th</sup> June 2020.

The Derby and Derbyshire Safeguarding Children Partnership is working hard with all agencies involved in safeguarding children and young adults to understand the impact of the COVID19 pandemic and lockdown conditions. This includes an understanding of where risks to children and young people have increased because of the current situation, as well as how well agencies are working together to ensure at risk and vulnerable children are safe.

We have been looking at information from all agencies and so far we can see that since the lockdown period began on March 23rd 2020 up until the 30th June 2020...



Contacts and referrals from members of the public and professionals concerned about the welfare of a child or young person are lower than we would usually see, but are starting to increase as lockdown restrictions ease. If you are worried about a child or family, there are details here on how to get help. In an emergency, if you believe a child or adult is

at serious risk of immediate harm, you should call 999 straight away and speak to the police.



The number of referrals to Social Care and calls to Derbyshire Police for domestic abuse continue to be higher than normal. If you are worried about domestic abuse, there is further information on how you can get help here.



A number of our vulnerable children are still attending school, this number is lower than we would expect but is increasing, particularly as schools reopen to more pupils. Agencies are working hard with schools and individual children to make sure that children are seen regularly and are safe.



Fewer children and young people are being referred to Mental Health Services; some of those who are referred have more severe illnesses than we would normally see, suggesting a delay in seeking care. If you are worried about mental health and would like further information on available support, you can call the Mental Health Support line, details here.



Despite the lockdown, a small number of young people are still going missing from home or care, some on more than one occasion. Practitioners are working hard with these young people to keep them safe.



We have seen an increase in new cases of Children at Risk of Exploitation this month, but this is still lower than we would usually see. This may be due to children and young people having less contact with professionals.



Many services are anticipating a sharp rise in referrals as lockdown restrictions ease and professionals have more contact with children and young people.

We will be checking regularly to make sure that agencies are working together to keep children safe and will be reporting each month to the Chief Officer Group. Further information about the local safeguarding partnership is available from our website, where you can also find lots of useful information for parents, carers, children and young people on how to stay safe and well.

The Derby and Derbyshire Safeguarding Children Partnership

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# DERBYSHIRE COUNTY COUNCIL IMPROVEMENT AND SCRUTINY COMMITTEE – PEOPLE 22 July 2020

# Report of the Chair of the Improvement and Scrutiny Committee- People

#### Review of the Derbyshire Care Leavers' Offer - Final Report

#### 1. Purpose of the Report

To inform Members of the outcomes of the scrutiny review of the Derbyshire Care Leaver's Offer

#### 2. Background Information

The review focussed on three discrete aspects of the Derbyshire Care Leaver's Offer: Council Tax, Accommodation and Financial support. During the review a series of working group meetings were held to ensure that Members were kept informed about partnership working undertaken by the Young People's Department to develop a more consistent offer throughout Derbyshire. The information gathered at these meetings is set out below.

#### 2.1 Council Tax

- It is not a statutory requirement for care leavers to be exempt from Council Tax. However, in some parts of the country, for example Nottinghamshire and Surrey, there are policies in place to exempt care leavers from Council Tax
- In August 2018, out of a desire to offer similar financial support to Derbyshire care leavers', Cllr Alex Dale (Derbyshire County Council's, Cabinet Member for Young People) wrote to all Derbyshire District and Borough councils to facilitate an in-principle agreement to exempt care leavers from Council Tax.
- Since that time, regular roundtable meetings have been held with district representatives, culminating in a consistent policy across Derbyshire to offer Council Tax discount to all Derbyshire care leavers between the age of 18 to 24 (from 1 April 2020).
- To be consistent with tax legislation the preferred terminology is "discount" and not "exemption".
- The discount covers a 100% of the care leavers Council Tax bill.
- Joint press briefings were planned to raise awareness of this significant change to the Derbyshire Care Leavers' Offer but due to priorities emerging from the Covid19 crisis the publicity was been delayed.
- As stated above, similar discounts are not mandated nationally so the policy is not consistent across the East Midlands region or the UK. For example, Nottinghamshire offers a discount to all care leaves regardless of their local

- connection, whereas Derby City offers a discount to their own Derby City care leavers but not Derbyshire County Council care leavers.
- To ensure all Derbyshire care leavers are treated equitably the County Council has undertaken to pay the Council Tax of eligible care leavers if they live in an area that doesn't offer a Council Tax discount.

#### 2.2 Accommodation provision

- The leaving care provisions of the Children's Act require that relevant children are provided with, or maintained in, suitable accommodation unless the local authority is satisfied that their welfare does not require it. To be suitable, accommodation must be reasonably practicable for the young person given their needs and the local authority must be satisfied as to the suitability of any landlord. These arrangements should be detailed in the young person's active pathway plan.
- Accommodation may be available through: Social Housing, Housing Associations, Private Accommodation and Semi-Independent Accommodation Providers. A care leaver may also choose to live with a family member.
- The County Council's role is to work with partners to find suitable accommodation.
- The support that a young person requires is determined by their circumstances. An individual may transfer "seamlessly" from semi-independent living into social housing or there may be more challenging circumstances. For example, a young person may have lost their tenancy due to unacceptable behaviour, in which case the Leaving Care Support Worker may have to present the young person to the district as homeless. On other occasions a young person may not use the district housing service at all and will go into private accommodation.
- Currently the County Council commissions 75 placements in semiindependent accommodation for older children in care and care leavers. The providers work with each young person to help them move on to appropriate long-term housing.
- The 75 placements offering semi-independent living are in significant demand and therefore there is a need to ensure that the flow of young people through this provision remains dynamic and timely.
- District housing departments treat all care leavers between the age of 18 and 24 as a priority group in terms of their duty to assess them.
- An agreement has now been reached that a Derbyshire care leavers' local connection will be to Derbyshire as a whole and not to an individual district.
- The removal of the local connection from the districts to the whole of Derbyshire is a significant change that will open-up more possibilities for finding accommodation for care leavers.
- Previously it was difficult for a young person to move to a different part of Derbyshire. For example, a young person who had been living in Bolsover would have been regarded as not having a local connection if they applied to live in Chesterfield, even if they had been successful in securing work in Chesterfield.

- Another significant change is that districts have agreed that they will not
  make a care leaver "intentionally homeless" without having a clear discussion
  with the leaving care service before a decision is made.
- Current performance data shows that 97% of care leavers are in suitable
  accommodation. There are situations when the service struggles to get
  young people into long term sustainable accommodation. A small cohort of
  young people are sofa surfing and a number of care leavers are in custody,
  so by definition are in unsuitable accommodation. Currently the Derbyshire
  Leaving Care Service does not have any street homeless young people.
- The service has been designed to be able to give support to the most vulnerable young people. There is a qualified social worker in each team who is assigned the most vulnerable and hard to reach young people. This is unusual for a Leaving Care Service and has proved successful as there has been a reduction of young people in unsuitable accommodation.
- Providing accommodation support has been challenging during the Covid19 pandemic. District housing departments are not accepting new referrals as readily as they were prior to the pandemic. A challenge for the service is to think creatively to find alternative suitable accommodation.

#### 2.3 Financial sustainability

- Children in care receive financial guidance over an extended period of time and this is reinforced when appropriate situations arise.
- At the launch of the new Leaving Care Service an important change was introduced. Each young person is now allocated their Leaving Care Support Worker at the age of 16. Prior to February 2019 the allocation of a support worker did not occur until the young person was 17 years and 6 months old. The rationale for this policy change is that it allows more time for a good working relationship to develop between the young person and their support worker. It also means that there are more opportunities to offer clear guidance about financial matters and to deliver "independence readiness" work.
- The effectiveness of this new approach has not been formally evaluated but the general view of staff working within the service is that care leavers are now better prepared to manage financial challenges as they transition to the adult world.
- Staff, however, remain mindful what a huge step it is for care leavers to go from receiving extensive financial support whilst in care to managing their own finances independently and taking personal responsibility for their own budget.
- Leaving Care Workers have monthly supervision, and this provides an opportunity to record what information has been delivered. However, evidencing and recording support is an area that potentially could benefit from improvement
- A publication entitled "Care Leavers' 18-25year olds Financial Entitlements" is available online. It sets out the financial support Derbyshire Care Leavers are entitled to and could receive from Derbyshire County Council. The intention is that this document is shared with all care leavers, and the relevant financial entitlements are detailed in each young person's pathway

- plan. There is a commitment to review this publication annually. The first review has commenced and will seek the opinions of care leavers.
- The new service is aiming to be more flexible, proactive and responsive to allocating discretionary funding to support the employment and training aspirations and endeavours of each care leaver.
- Under the previous commissioning arrangements discretionary funds were allocated in times of crisis for example to cover utility bill arrears. Now discretionary funds are spent on enablers like travel passes and clothing for job interviews. Another example of greater flexibility is the recognition that not all care leavers benefit from the scheme to match fund 10 driving lessons and that a less prescriptive travel fund is more appropriate.
- Not explicit in the financial entitlement booklet (but explained to all young people in their looked after child review from age of 16 1/2) is that the County Council will fund them for the first 5 weeks whilst they are waiting for Universal Credit payments (as Universal Credit is always paid in arrears). It is possible for a young person to apply for a loan from the Department of Works and Pensions (DWP) but this would mean the young person would be starting out their independent living arrangements in debt. The County Council has made the decision to gift the money, provided that the young person engages with the DWP in applying for Universal Credit.
- The DWP give care leavers priority so that that they can prepare their Universal Credit applications in advance and submit them when they become 18. However, the young person still has to wait five weeks before they receive any benefit payments.
- It's a key priority for the service to support care leavers into employment education or training (EET). Currently 57.9% of care leavers are in EET. Although this is likely to drop because of the impact of the Covid19 pandemic.
- The service has been liaising with several large employers (e.g. Morrison's, Amazon, Dunelm Mill) and consequently ten young people have been supported into work.
- Up to the age of 21 care leavers receive birthday money and Christmas money and there are financial incentives for those at university.
- At the start of the Covid19 pandemic the service had to respond quickly to
  put in place additional financial support for care leavers. For example, for the
  75 young people living in semi-independent accommodation, the Council has
  agreed to pay (for a specified time) the service charge that the individuals are
  usually responsible for.

#### 3. First-hand accounts of the Leaving Care Service

Cllr Musson and Cllr George met with two care leavers (Adam aged 21 and Ben 20) to ask about their experiences of the Leaving Care Service. This was an informal meeting held online and their Leaving Care Support Worker (Claire) was present. Whilst the conversation focussed on issues relating to accommodation and financial independence, there was an open invitation to raise any issue and to share suggestions about how the service might be improved.

It is acknowledged that conversations were held with a small sample size, however the Councillors felt the comments made were insightful and for this reason the Committee would like the opportunity to speak to more care leavers in the future. Below is a summary of reflections from a care leaver's perspective about the Leaving Care Service. To maintain confidentiality the names given are fictious.

Adam talked about his experience of moving from semi-independent accommodation to his own borough council flat. This was a difficult transition and he described the support of his personal adviser as being "massively important". Without her support and knowledge of how to apply, where to apply, and what to apply for, he feels he would not have been able to make the transition to living independently at the time he wanted to do so.

On reaching 18 Adam wished to live independently. He had experienced many moves throughout his lifetime and did not want to have to move again to supported accommodation with a different provider. There was no flexibility for him to extend his stay where he was living, whilst he applied for a council tenancy. Therefore, on his 18<sup>th</sup> birthday he had to leave his accommodation. He understood this was due to a funding issue. Fortunately, he was able to stay at his partners house for four weeks whilst his housing application was processed. At the time, if Adam hadn't had somewhere else to stay the next step would have been for his Leaving Care Worker to present him to the district council as homeless and he would have been offered interim bed and breakfast accommodation.

Claire clarified that the system works well when, at 18, a young person moves on to semi-independent accommodation (or another type of funded 24hr supported accommodation). However, when a young person (on reaching 18) wishes to move into their own flat and is required to sign a tenancy agreement, this is more complex. It is not possible to start the process of finding independent accommodation until post 18 because the young person cannot be allocated a bidding number that will allow them to submit an expression of interest for a council property. Consequently, this leaves the young person in an uncertain position and feeling unsure about their "Move-on plan". There are now robust mechanisms in place to ensure that the situation that Adam described, of having to move out of his accommodation on his 18<sup>th</sup> birthday, would not arise. Since the new Leaving Care Service was brought in-house procedures have been put in place to ensure that, when required, arrangements are made well in advance to fund post 18 accommodation.

During the conversation a suggestion was made that it would be helpful if care leavers could access a bidding number a few weeks before their 18th birthday so that they could begin the application process. They would still

have to wait to be 18 to sign a tenancy agreement but the opportunity to enter the system and initiate their application in advance would be extremely helpful and would lessen their uncertainty.

Ben explained that when he first met his Leaving Care Worker he was living in a children's home and his plan had always been to move into supported lodgings around his 18<sup>th</sup> birthday. Before this move occurred, Claire offered guidance and encouraged him to budget and he found this work helpful as it "set him up" for when he had to start paying his own bills. After 6 months in semi-independent accommodation with Adullam (Adullam Homes Housing Association Limited), he got the keys to his flat and he has now lived there for two years. This was a smooth process thanks to the support he received from Claire and the team at Adullam. He was very glad that Claire was there to guide him through the housing application process. He "understood very little of what the district council was saying" and it was invaluable to have the support of someone who understood the system and could explain the letters that he received.

Both Adam and Ben placed great importance on the strength of their relationship with their Leaving Care Worker. They have been with Claire since the age of 17 and a half years old, and grown to value her reliable and consistent support. They both said that it is beneficial for a young person to get to know their leaving care worker well in advance of leaving care. This view is in-line with the change introduction at the launched of the new Leaving Care Service (in February 2019). Now each young person is allocated their Leaving Care Worker at the age of 16.

Adam said "having one stable and solid person at that vital time in my life when I was transitioning from being a looked after child to having my own place was crucial to gaining my independence. To know that I could rely on Claire to always be there whatever my circumstances was very important".

Both Adam and Ben highlighted that it can be difficult to raise issues and concerns with a member of the Leaving Care Service if you don't have a relationship with them and they don't know your history. They indicated that from their own experience there had been times that they had felt uncertain about reaching out for help when their allocated support worker was not available (because of personal circumstances). They described it as daunting to reach out to somebody that you don't know and implied that there might be a tendency to push things aside at the expense of a person's wellbeing. They suggested that it would be reassuring for the young people within the service if they had a "backup support worker" who also knew them. Although that person wouldn't be able to get to know them in such depth it would bring a sense of stability and security to know

that there was someone else who they felt comfortable raising issues with if their main worker was not available.

Another issue that arose during the conversation was the support available after the age of 21. Ben said that Claire had been his main support since he left the children's home and therefore it feels daunting knowing that regular contact will not take place and his "support bubble" will disappear. There will still be the facility to contact the service by phoning through to the duty worker, but it will be hard to transition to a different level of support that doesn't have the same degree of continuity. It was suggested that having access to ongoing support, from a person that they know, beyond the age of 21 would be beneficial to many care leavers.

#### 4. Conclusions

The Committee acknowledges the significant progress that has been made in the development of the Derbyshire Care Leavers' Offer. Members welcome the fact that there is now an equitable approach that ensures that all Derbyshire care leavers will receive 100% Council Tax discount up to the age of 25 and that their local connection (when applying for a council tenancy) will be deemed to be Derbyshire rather than an individual district. However, the Committee feels that there are still opportunities to develop the offer further. For example, there may be scope to expediate the process when at 18, a young person chooses to move directly into independent accommodation. The Committee would also support work to identify ways of ensuring that each young person has the opportunity to build a bond with an additional support worker so that they feel comfortable raising issues and seeking support should their designated support worker not be available. Enabling access to guidance or mentoring beyond the age of 21 is another area of work that Members feel would be beneficial to care leavers.

#### 5. Recommendations

5.1 The Committee commends the partnership working that has led to the countywide improvements to the Derbyshire Care Leavers' Offer. The agreement of all District and Borough Councils within Derbyshire to provide Council Tax discount will bring significant benefits to care leavers up to the age of 25 and will help their transition to independent living. The removal of the local connection from the districts to the whole of Derbyshire will open-up opportunities for care leavers when setting up home and seeking employment or training.

- 5.2 Publicity regarding Council Tax discount for care leavers, that was delayed as a result of the Covid19 pandemic, should be progressed as soon as practicable.
- 5.3 Children's services work in partnership with District and Borough Councils to identify an approach that would enable a care leaver to make an "expression of interest" for a property in sufficient time to allow them to move in when they reached the age of 18.
- In addition to allocating each young person a designated Leaving Care Support Worker, the service explores the feasibility of identifying a second point of contact within the service. This would provide each young person the opportunity to get to know and feel comfortable with another member of staff who would be available for them in the event of their designated support worker being on leave or leaving the Derbyshire service.
- 5.5 The Leaving Care Service explores mechanisms that would facilitate care leavers having access to ongoing guidance or mentoring with a person that they know, beyond the age of 21.

Cllr Gary Musson
Chair of the
Improvement and Scrutiny Committee- People

# DERBYSHIRE COUNTY COUNCIL IMPROVEMENT AND SCRUTINY COMMITTEE – PEOPLE 22 July 2020

# Report of the Chair of the Improvement and Scrutiny Committee- People

#### Review of the Derbyshire Care Leavers Offer - Final Report

#### 1. Purpose of the Report

To inform Members of the outcomes of the scrutiny review of the Derbyshire Care Leaver's Offer

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The review focussed on three discrete aspects of the Derbyshire Care Leaver's Offer: Council Tax, Accommodation and Financial support. During the review a series of working group meetings were held to ensure that Members were kept informed about partnership working undertaken by the Young Peoples Department to develop a more consistent offer throughout Derbyshire. The information gathered at these meetings is set out below.

#### 2.1 Council Tax

- It is not a statutory requirement for care leavers to be exempt from council tax. However, in some parts of the country, for example Nottinghamshire and Surrey, there are policies in place to exempt care leavers from council tax.
- In August 2018, out of a desire to offer similar financial support to Derbyshire care leavers, Cllr Alex Dale (Derbyshire County Council's, Cabinet Member for Young People) wrote to all Derbyshire District and Borough councils to facilitate an in-principle agreement to exempt care leavers from council tax.
- Since that time, regular roundtable meetings have been held with district representatives, culminating in a consistent policy across Derbyshire to offer council tax discount to all Derbyshire care leavers between the age of 18 to 24 (from 1 April 2020).
- To be consistent with tax legislation the preferred terminology is "discount" and not "exemption".
- The discount covers a 100% of the care leavers council tax bill.
- Joint press briefings were planned to raise awareness of this significant change to the Derbyshire Care Leavers Offer but due to priorities emerging from the Covid19 crisis the publicity was been delayed.
- As stated above, similar discounts are not mandated nationally so the policy is not consistent across the East Midlands region or the UK. For example, Nottinghamshire offers a discount to all care leaves regardless of their local connection, whereas Derby City offers a discount to their own Derby City care leavers but not Derbyshire County Council care leavers.

 To ensure all Derbyshire care leavers are treated equitably the County Council has undertaken to pay the council tax of eligible care leavers if they live in an area that doesn't offer a council tax discount.

#### 2.2 Accommodation provision

- The leaving care provisions of the Children's Act require that relevant children are provided with, or maintained in, suitable accommodation unless the local authority is satisfied that their welfare does not require it. To be suitable, accommodation must be reasonably practicable for the young person given their needs and the local authority must be satisfied as to the suitability of any landlord. These arrangements should be detailed in the young person's active pathway plan.
- Accommodation may be available through: Social Housing, Housing Associations, Private Accommodation and Semi-Independent Accommodation Providers. A care leaver may also choose to live with a family member.
- The County Council's role is to work with partners to find suitable accommodation.
- The support that a young person requires is determined by their circumstances. An individual may transfer "seamlessly" from semi-independent living into social housing or there may be more challenging circumstances. For example, a young person may have lost their tenancy due to unacceptable behaviour, in which case the Leaving Care Support Worker may have to present the young person to the district as homeless. On other occasions a young person may not use the district housing service at all and will go into private accommodation.
- Currently the County Council commissions 75 placements in semiindependent accommodation for older children in care and care leavers. The providers work with each young person to help them move on to appropriate long-term housing.
- The 75 placements offering semi-independent living are in significant demand and therefore there is a need to ensure that the flow of young people through this provision remains dynamic and timely.
- District housing departments treat all care leavers between the age of 18 and 24 as a priority group in terms of their duty to assess them.
- An agreement has now been reached that a Derbyshire care leavers local connection will be to Derbyshire as a whole and not to an individual district.
- The removal of the local connection from the districts to the whole of Derbyshire is a significant change that will open-up more possibilities for finding accommodation for care leavers.
- Previously it was difficult for a young person to move to a different part of Derbyshire. For example, a young person who had been living in Bolsover would have been regarded as not having a local connection if they applied to live in Chesterfield, even if they had been successful in securing work in Chesterfield.
- Another significant change is that districts have agreed that they will not
  make a care leaver "intentionally homeless" without having a clear discussion
  with the leaving care service before a decision is made.

- Current performance data shows that 97% of care leavers are in suitable
  accommodation. There are situations when the service struggles to get
  young people into long term sustainable accommodation. A small cohort of
  young people are sofa surfing and a number of care leavers are in custody,
  so by definition are in unsuitable accommodation. Currently the Derbyshire
  Leaving Care Service does not have any street homeless young people.
- The service has been designed to be able to give support to the most vulnerable young people. There is a qualified social worker in each team who is assigned the most vulnerable and hard to reach young people. This is unusual for a Leaving Care Service and has proved successful as there has been a reduction of young people in unsuitable accommodation.
- Providing accommodation support has been challenging during the Covid19 pandemic. District housing departments are not accepting new referrals as readily as they were prior to the pandemic. A challenge for the service is to think creatively to find alternative suitable accommodation.

#### 2.3 Financial sustainability

- Children in care receive financial guidance over an extended period of time and this is reinforced when appropriate situations arise.
- At the launch of the new Leaving Care Service an important change was introduced. Each young person is now allocated their Leaving Care Support Worker at the age of 16. Prior to February 2019 the allocation of a support worker did not occur until the young person was 17 years and 6 months old. The rationale for this policy change is that it allows more time for a good working relationship to develop between the young person and their support worker. It also means that there are more opportunities to offer clear guidance about financial matters and to deliver independence readiness work.
- The effectiveness of this new approach has not been formally evaluated but the general view of staff working within the service is that care leavers are now better prepared to manage financial challenges as they transition to the adult world.
- Staff, however, remain mindful what a huge step it is for care leavers to go from receiving extensive financial support whilst in care to managing their own finances independently and taking personal responsibility for their own budget.
- Leaving Care Workers have monthly supervision, and this provides an opportunity to record what information has been delivered. However, evidencing and recording support is an area that potentially could benefit from improvement
- A publication entitled "Care Leaver's 18-25year olds Financial Entitlements" is available online. It sets out the financial support Derbyshire Care Leavers are entitled to and could receive from Derbyshire County Council. The intention is that this document is shared with all care leavers and the relevant financial entitlements are detailed in each young person's pathway plan. There is a commitment to review this publication annually. The first review has commenced and will seek the opinions of care leavers.

- The new service is aiming to be more flexible, proactive and responsive to allocating discretionary funding to support the employment and training aspirations and endeavours of each care leaver.
- Under the previous commissioning arrangements discretionary funds were allocated in times of crisis for example to cover utility bill arrears. Now discretionary funds are spent on enablers like travel passes and clothing for job interviews. Another example of greater flexibility is the recognition that not all care leavers benefit from the scheme to match fund 10 driving lessons and that a less prescriptive travel fund is more appropriate.
- Not explicit in the financial entitlement booklet (but explained to all young people in their looked after child review from age of 16 1/2) is that the County Council will fund them for the first 5 weeks whilst they are waiting for Universal Credit payments (as Universal Credit is always paid in arrears). It is possible for a young person to apply for a loan from the Department of Works and Pensions (DWP) but this would mean the young person would be starting out their independent living arrangements in debt. The County Council has made the decision to gift the money, provided that the young person engages with the DWP in applying for Universal Credit.
- The DWP give care leavers priority so that that they can prepare their Universal Credit applications in advance and submit them when they become 18. However, the young person still has to wait five weeks before they receive any benefit payments.
- It's a key priority for the service to support care leavers into employment education or training (EET). Currently 57.9% of care leavers are in EET. Although this is likely to drop because of the impact of the Covid19 pandemic.
- The service has been liaising with several large employers (e.g. Morrison's, Amazon, Dunelm Mill) and consequently ten young people have been supported into work.
- Up to the age of 21 care leavers receive birthday money and Christmas money and there are financial incentives for those at university.
- At the start of the Covid19 pandemic the service had to respond quickly to
  put in place additional financial support for care leavers. For example, for the
  75 young people living in semi-independent accommodation, the Council has
  agreed to pay (for a specified time) the service charge that the individuals are
  usually responsible for.

#### 3. First-hand accounts of the Leaving Care Service

Cllr Musson and Cllr George met with two care leavers (Adam aged 21 and Ben 20) to ask about their experiences of the Leaving Care Service. This was an informal meeting held online and their Leaving Care Support Worker (Claire) was present. Whilst the conversation focussed on issues relating to accommodation and financial independence, there was an open invitation to raise any issue and to share suggestions about how the service might be improved.

It is acknowledged that conversations were held with a small sample size, however the Councillors felt the comments made were insightful and for

this reason the Committee would like the opportunity to speak to more care leavers in the future. Below is a summary of reflections from a care leaver's perspective about the Leaving Care Service. To maintain confidentiality the names given are fictious.

Adam talked about his experience of moving from semi-independent accommodation to his own borough council flat. This was a difficult transition and he described the support of his personal adviser as being "massively important". Without her support and knowledge of how to apply, where to apply, and what to apply for, he feels he would not have been able to make the transition to living independently at the time he wanted to do so.

On reaching 18 Adam wished to live independently. He had experienced many moves throughout his lifetime and did not want to have to move again to supported accommodation with a different provider. There was no flexibility for him to extend his stay where he was living, whilst he applied for a council tenancy. Therefore, on his 18 birthday he had to leave his accommodation. He understood this was due to a funding issue. Fortunately, he was able to stay at his partners house for four weeks whilst his housing application was processed. At the time, if Adam hadn't had somewhere else to stay the next step would have been for his Leaving Care Worker to present him to the district council as homeless and he would have been offered interim bed and breakfast accommodation.

Claire clarified that the system works well when, at 18, a young person moves on to semi-independent accommodation (or another type of funded 24hr supported accommodation). However, when a young person (on reaching 18) wishes to move into their own flat and is required to sign a tenancy agreement, this is more complex. It is not possible to start the process of finding independent accommodation until post 18 because the young person cannot be allocated a bidding number that will allow them to submit an expression of interest for a council property. Consequently, this leaves the young person in an uncertain position and feeling unsure about their "Move-on plan". There are now robust mechanisms in place to ensure that the situation that Adam described, of having to move out of his accommodation on his 18<sup>th</sup> birthday, would not arise. Since the new Leaving Care Service was brought in-house procedures have been put in place to ensure that, when required, arrangements are made well in advance to fund post 18 accommodation.

During the conversation a suggestion was made that it would be helpful if care leavers could access a bidding number a few weeks before their 18th birthday so that they could begin the application process. They would still have to wait to be 18 to sign a tenancy agreement but the opportunity to

enter the system and initiate their application in advance would be extremely helpful and would lessen their uncertainty.

Ben explained that when he first met his Leaving Care Worker he was living in a children's home and his plan had always been to move into supported lodgings around his 18<sup>th</sup> birthday. Before this move occurred, Claire offered guidance and encouraged him to budget and he found this work helpful as it "set him up" for when he had to start paying his own bills. After 6 months in semi-independent accommodation with Adullam, he got the keys to his flat and he has now lived there for two years. This was a smooth process thanks to the support he received from Claire and the team at Adullam. He was very glad that Claire was there to guide him through the housing application process. He "understood very little of what the district council was saying" and it was invaluable to have the support of someone who understood the system and could explain the letters that he received.

Both Adam and Ben placed great importance on the strength of their relationship with their Leaving Care Worker. They have been with Claire since the age of 17 and a half years old, and grown to value her reliable and consistent support. They both said that it is beneficial for a young person to get to know there leaving care worker well in advance of leaving care. This view is in-line with the change introduction at the launched of the new Leaving Care Service (in February 2019). Now each young person is allocated their Leaving Care Worker at the age of 16.

Adam said "having one stable and solid person at that vital time in my life when I was transitioning from being a looked after child to having my own place was crucial to gaining my independence. To know that I could rely on Claire to always be there whatever my circumstances was very important".

Both Adam and Ben highlighted that it can be difficult to raise issues and concerns with a member of the Leaving Care Service if you don't have a relationship with them and they don't know your history. They indicated that from their own experience there had been times that they had felt uncertain about reaching out for help when their allocated support worker was not available (because of personal circumstances). They described it as daunting to reach out to somebody that you don't know and implied that there might be a tendency to push things a side at the expense of a person's wellbeing. They suggested that it would be reassuring for the young people within the service if they had a "backup support worker" who also knew them. Although that person wouldn't be able to get to know them in such depth it would bring a sense of stability and security to know

that there was someone else who they felt comfortable raising issues with if their main worker was not available.

Another issue that arose during the conversation was the support available after the age of 21. Ben said that Claire had been his main support since he left the children's home and therefore it feels daunting knowing that regular contact will not take place and his "support bubble" will disappear. There will still be the facility to contact the service by phoning through to the duty worker, but it will be hard to transition to a different level of support that doesn't have the same degree of continuity. It was suggested that having access to ongoing support, from a person that they know, beyond the age of 21 would be beneficial to many care leavers.

#### 4. Conclusions

The Committee acknowledges the significant progress that has been made in the development of the Derbyshire Care Leavers Offer. Members welcome the fact that there is now an equitable approach that ensures that all Derbyshire care leavers will receive 100% council tax discount up to the age of 25 and that their local connection (when applying for a council tenancy) will be deemed to be Derbyshire rather than an individual district. However, the Committee feels that there are still opportunities to develop the offer further. For example, there may be scope to expediate the process when at 18, a young person chooses to move directly into independent accommodation. The Committee would also support work to identify ways of ensuring that each young person has the opportunity to build a bond with an additional support worker so that they feel comfortable raising issues and seeking support should their designated support worker not be available. Enabling access to guidance or mentoring beyond the age of 21 is another area of work that Members feel would be beneficial to care leavers.

### 5. Recommendations

5.1 The Committee commends the partnership working that has led to the countywide improvements to the Derbyshire Care Leavers Offer. The agreement of all District and Borough Councils within Derbyshire to provide council tax discount will bring significant benefits to care leavers up to the age of 25 and will help their transition to independent living. The removal of the local connection from the districts to the whole of Derbyshire will open-up opportunities for care leavers when setting up home and seeking employment or training.

- 5.2 Publicity regarding council tax discount for care leavers, that was delayed as a result of the Covid19 pandemic, should be progressed as soon as practicable.
- 5.3 Children's services work in partnership with District and Borough Councils to identify an approach that would enable a care leaver to make an "expression of interest" for a property in sufficient time to allow them to move in when they reached the age of 18.
- In addition to allocating each young person a designated Leaving Care Support Worker, the service explores the feasibility of identifying a second point of contact within the service. This would provide each young person the opportunity to get to know and feel comfortable with another member of staff who would be available for them in the event of their designated support worker being on leave or leaving the Derbyshire service.
- 5.5 The Leaving Care Service explores mechanisms that would facilitate care leavers having access to ongoing guidance or mentoring with a person that they know, beyond the age of 21.





**Annual report 2019-2020** 

## Making your voice count

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### About us

We are the independent champion for people using local health and social care services. We listen to what people like about services and what could be improved. We share their views with those with the power to make change happen. People can also speak to us to find information about health and social care services available locally.

### Here to make care better

The network's collaborative effort around the NHS Long Term Plan shows the power of the Healthwatch network in giving people that find it hardest to be heard a chance to speak up. The #WhatWouldYouDo campaign saw national movement, engaging with people all over the country to see how the Long Term Plan should be implemented locally. Thanks to the thousands of views shared with Healthwatch, we were also able to highlight the issue of patient transport not being included in the NHS Long Term Plan review, sparking a national review of patient transport from NHS England.

We simply could not do this without the dedicated work and efforts from our staff and volunteers and, of course, we couldn't have done it without you. Whether it's working with your local Healthwatch to raise awareness of local issues, or sharing your views and experiences, I'd like to thank you all. It's important that services continue to listen, so please do keep talking to your local Healthwatch. Let's strive to make the NHS and social care services the best that they can be.



I've now been Chair of Healthwatch England for over a year and I'm extremely proud to see it go from strength to strength, highlighting the importance of listening to people's views to decision makers at a national and local level."



## Message from our chair



John Simmons Healthwatch Derbyshire chair

It doesn't seem seven years since we moved into this new organisation, Healthwatch Derbyshire. Much has happened in those seven years and there have been many areas of success. This year 2019/20, however, has felt really strange.

The year 2019 was very much a 'normal' year with our focus on themed engagement as well as responding to the public's enquiries. Enter and View remained a central part of the activity and the assistance we received from our tremendous group of volunteers, together with the continued commitment of all our staff, enabled the organisation to continue the progress achieved since 2013.

Our priorities continue to be based on the Insight and Intelligence Group who look at the comments and enquiries received together with our direct findings. From this information, 'themes' emerge which form the basis of the agreed direction. It is important to stress here that there is lay representation involved in setting these priorities since we see it as vital that the community is part of the decision making process.

All the issues looked at and reported on are available on our website so I am not going to list them here. However I will highlight two points, firstly the NHS Long Term Plan survey. This was undertaken jointly with Healthwatch Derby which was coordinated by us and all reports were submitted on time! Secondly, we have undertaken a joint exploration of Homelessness and Rough Sleeping with Healthwatch Derby and that report will be out shortly.

So, a successful 2019, but then came 2020. We here, like everywhere else, have been overtaken with the impact of Covid-19. Healthwatch Derbyshire is involved in regular discussions with the local authority and the Derbyshire CCG about the role we can play to help, given that our usual activities have had to be lessened. We remain focussed on signposting and responding to all enquiries and concerns but we also wish to contribute further where appropriate. Also, especially given our continuing contract for Mental Health Together, we are involved in answering concerns and worries held by many. Emotional sustainability is going to be crucial in bringing us through this crisis and we are trying to play a full part.

Finally, as in previous years, I wish to pass on my thanks to our staff, volunteers and Board members, all of whom continue to show massive commitment to the complex tasks we carry out.

Pleasingly, there have not been many changes in either the staff group or Board membership but I would wish to say thanks to anyone who has left in the past year and a big welcome to those who have joined us.

### **Our priorities**

Last year we spoke to 3558 people regarding their local health and social care services. This feedback helped shaped our work priorities for the year and led to the following four pieces of work.



• Engagements with carers to ensure they are listened to by professionals



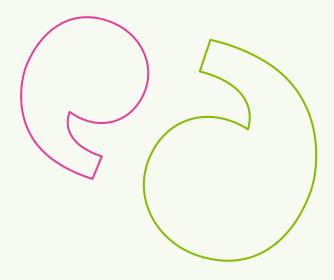
 Continued engagements with individuals in acute mental health units to give them a voice



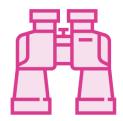
 Raising awareness of Healthwatch and encouraging people to share their views with us



 Utilising our enter and view function to help improve services for people attending hospitals







### Our vision is simple

Health and care that works for you. People want health and social care support that works, helping them to stay well, get the best out of services and manage any conditions they face.



### Our purpose

To find out what matters to you and to help make sure your views shape the support you need.



### Our approach

People's views come first, especially those who find it hardest to be heard. We champion what matters to you and work with others to find solutions. We are independent and committed to making the biggest difference to you.



### How we find out what matters to you

People are at the heart of everything we do. Our staff and volunteers identify what matters most to people by:

- Visiting services to see how they work
- Running surveys and focus groups
- Going out in the community and working with other organisations



Find out more about us and the work we do

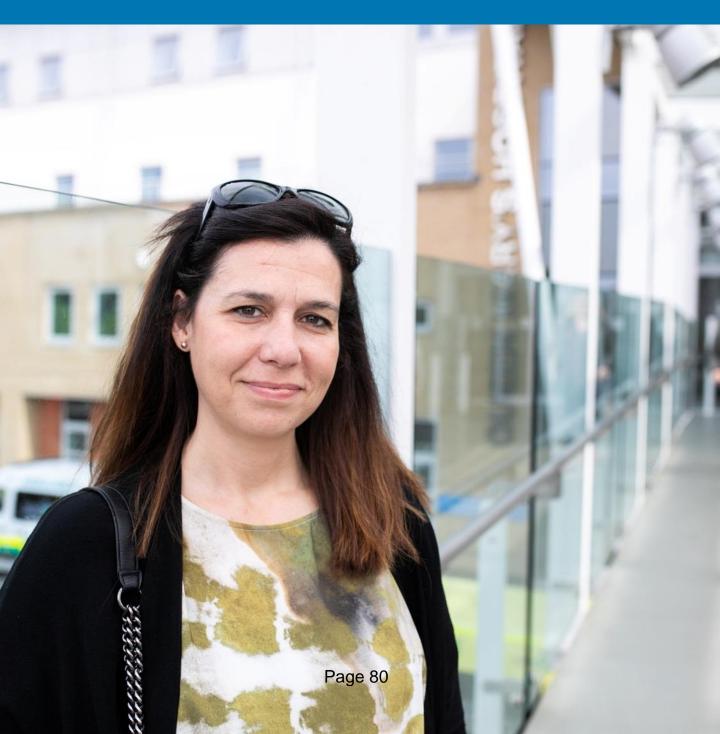
**Website:** www.healthwatchderbyshire.co.uk

Twitter: @HWDerbyshire

Facebook: @HealthwatchDerbyshire

## Highlights from our year

Find out about our resources and the way we have engaged and supported more people in 2019-2020.



### Health and care that works for you



We have

### 56 volunteers

helping to carry out our work. In total, they gave us 2217 hours of their time.

We employed

### 13 staff

We have 10 staff full time equivalent.

We received

### £321,144 in funding

from our local authority in 2019-20, which is unchanged from the previous year.

### Providing support



### **1178** people

shared their health and social care story with us.

### people

accessed Healthwatch advice and information online or contacted us with questions about local support.

### Reaching out



### 32,409 people

A total of 27,732 people engaged with us through our website, 1119 people engaged with us through social media, and 3558 people engaged with us at community events.

### Making a difference to care



We published

### 15 reports

about the improvements people would like to see with their health and social care, and from this, we made 75 AGE mendations for improvement.

## How we've made a difference



### Speaking up about your experiences of health and social care services is the first step to change.

Take a look at how your views have helped make a difference to the care and support people receive in Derbyshire.

### Understanding the quality of life for carers

In 2019, Healthwatch Derbyshire spoke to 428 carers to find out how their role as a carer can impact on their quality of life. We engaged with carers through visiting local groups and events, via telephone calls and through home visits.

Below highlights several issues that were raised and what happened as a result of people sharing their views with us.

### Carers' rights

A large proportion of carers were unaware of their rights and told us they would not know how to find out about their rights.

I would like clearer, simpler information about my rights. I don't want to have to constantly chase and fight for them.'

As a result of this, Derbyshire Carers Association (DCA) told us there would be a local drive to promote carers' rights during Carers Week across the system. Furthermore, new information about carers' rights has since been added to the Carers in Derbyshire website.



Jenny cares for her dad who has dementia. She says that caring can be exhausting, so having a strong support network is essential.

### Time for self and social contact

Carers explained that being a carer is a 24/7 role and many felt they had very little or no time to themselves and were often unable to maintain social contact due to time, finances and unpredictability of the cared for.

I just don't have the time. I don't see how I can find the time. Caring is isolating, it is all-consuming, it's constant.'

As a result, DCA introduced a telephone befriending service. This service allows isolated carers the chance to talk to a volunteer once a week, providing a much-needed opportunity for social contact.

### **Respite**

A very small number of carers had support from family and friends, which enabled them to get a couple of hours per week to themselves. Carers told us it would be helpful if they could have some form of respite once in a while.

I would like a regular break to get myself together and maybe have a coffee with a friend.'

Derbyshire County Council (DCC) has commissioned a service with DCA which provides different opportunities for carers to take a break and provide information about accessing respite for loved ones. They are continuing to explore new ways to provide breaks for carers through technology, partnerships and initiatives.

### **Support and information**

Carers felt they needed more support to effectively care for their loved one and also look after their own health and wellbeing.

The pressure of caring and supposedly knowing everything is often too much to bear.'

DCA has since developed a carer training and learning programme that will include carer resilience and mindfulness for carers.



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### **Derbyshire Healthcare NHS Foundation Trust training** opportunity

Since June 2019, Healthwatch Derbyshire has worked with Derbyshire Community Health Services NHS Foundation Trust as part of their frailty training programme.

We had the opportunity to raise awareness of Healthwatch with their staff and encouraged them to share this information with colleagues and patients.

Over the months, training sessions have taken place with around 100 staff members attending.

People attending the training sessions primarily cared for individuals who are frail and often housebound. Many staff members gave us positive feedback, saying that the opportunity to give feedback anonymously is important to frail and potentially vulnerable people as they have people frequently coming into their home.

These sessions also proved to be useful to staff members who appreciated the opportunity to share their views on how services could be improved in order to improve patient experience.



The collaboration of organisations, including Healthwatch, to deliver learning is time and time again reported back by learners as fundamental and a 'huge' step forward in working and learning together to meet the needs of our patients across Derbyshire & Specialist Lead Trainer - End of life and Dementia



### Healthwatch engagements at the mental health units in **Derbyshire**

Healthwatch Derbyshire, along with Derbyshire Healthcare NHS Trust, believe that it is critical that inpatients at both the inpatient units in Chesterfield and Derby are given regular opportunities to talk about and share their experiences of their time on the mental health wards, and to have these experiences listened to and responded to.

Due to changes in the commissioning of Mental Health Together (MHT) the MHT team and its volunteers were no longer able to carry out this role. HWD did not want to lose this function if possible, and undertook conversations with the head of nursing for the Hartington and Radbourne units to consider the sustainability of engaging with inpatients and how it might be carried forward.

It was agreed that moving forward, Healthwatch would continue to engage with patients at the units, however, the Page 86 method of engagement would change

from ward visits to a regular monthly visit to each of the hubs supported by the recreation staff at the Trust.

Engagements commenced in May 2019 and are delivered as two hour 'craft and conversation' sessions where participants are able to take part in a planned craft activity and, at the same time, share their experience of their time on the ward.

The team have been able to speak to patients about various aspects of life on the wards, including activities, discharge process, environment and cleanliness, privacy, dignity and respect, choice, information, food and much more.

Feedback from the engagements is then shared with the Trust's recreation and nursing staff, enabling issues and feedback received to be acknowledged and, where possible, addressed.



Feedback from the team has supported the Trust to better understand the experiences of patients on the ward and allowed feedback to be delivered to the correct team/individual.

Below are some examples of feedback we received and what happened as a result.

### **Restrictive practices**

**Patient feedback:** Patients talked about their concerns around the use of restrictive practices; issues were raised across both units with ward door, kitchen door locking, etc.

**Trust feedback:** The Trust has introduced a Reducing Restrictive Practice working group which has patient representatives in its membership. The agenda covers a number of restrictive practices and will look at the evidence base, the current practice and how to improve.

### Information and communication

**Patient feedback:** Patients raised concerns around the weekly ward meetings not being well attended or even happening, and the lack of feedback provided at the community meeting from issues raised at previous ones.

Patients also expressed a desire to have more time to talk to the staff and for the staff to be more accessible.

**Trust feedback:** Patient meeting minutes are now displayed on the ward and a copy for the last three months is kept in the nursing office. Senior nurses and matrons audit this. The Trust has introduced a one-out-all-out system whereby all staff members make themselves available on the ward at a set time each week. This initiative is going well and is increasing staff and patient time.

### Privacy, dignity and respect

**Patient feedback:** Concerns were raised by patients around the use of seclusion and making it safer and less distressing for patients and staff.

**Feedback from Trust:** The Reducing Restrictive Practice working group is looking at seclusion as a priority. A monthly audit is now being completed by the head of nursing to identify current practice, themes and areas for improvement.

Safety pods have been purchased to be used proactively with people who are distressed. The pods are specially designed bean bags that allow physical restraint to be carried out safely.



### Share your views with us

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

Website: www.healthwatchderbyshire.co.uk

**Telephone: 01773 880786** 

Email: enquiries@healthwatchderbyshire.co.uk

# erm

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#WhatWouldYouDo

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### **Highlights**







More than 40,000 people shared their views nationally with Healthwatch.

Our network held over 500 focus groups reaching different communities across England.

Healthwatch attended almost 1,000 community events.

### **NHS Long Term Plan**

Following a commitment from the government to increase investment in the NHS, the NHS published the 'Long Term Plan' in January 2019, setting out its key ambitions over the next 10 years. Healthwatch launched a countrywide campaign to give people a say in how the plan should be implemented in their communities.

Here is a summary of our work and what we found:

Working with Healthwatch Derby, we asked people #WhatWouldYouDo to improve the NHS locally. The top issues that people told us they wanted services to focus on are:

- Easy access to health-related information
- Joint decisions to be made between patient and professional
   Page 89

- For people to be able to stay at home as long as possible at end of life
- Strong communication throughout care.

What are we doing about it?

The report was shared with Joined Up Care Derbyshire, Derbyshire and Derby's Sustainability and Transformation Plan (STP). Our report significantly added to their intelligence and the findings were considered by the programme leads to inform their submissions to the refreshed STP plan.

To view the whole report and the Joined Up Care Derbyshire response, please visit:

https://healthwatchderbyshire.co.uk/2020/01/nhs-long-term-plan-for-derby-derbyshire/

## Helping you find the answers

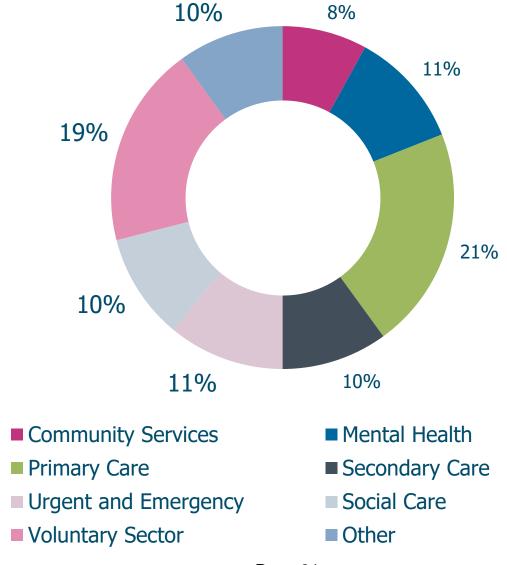


Finding the right service can be worrying and stressful. Healthwatch plays an important role in helping people to get the information they need to take control of their health and care and find services that will provide them with the right support.

This year we helped 3558 people get the advice and information they need by:

- Providing advice and information articles on our website
- Answering people's gueries about services over the phone, by email, or online
- Talking to people at community events
- Promoting services and information that can help people on our social media.

### Here are some of the areas that people asked about:



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### Example story 1:

John was struggling to care for his wife who had recently been diagnosed with dementia and he found it difficult to read information leaflets he had at home. Our engagement officer sent John information on local carers organisations and support groups in large print so he could read them. This gave John the confidence to seek support for himself and he and his wife now attend a local support group. He said it was the first time in a year they had been out of the house together.



### Example story 2:

Sarah felt that there was a barrier to accessing IAPT services as she was only given a telephone number from her GP but felt uncomfortable talking on the phone. Our engagement officer told Sarah that she could apply online to get the help she needed. Since this, Sarah has done the first stage of her assessment. She said she never would have looked at applying online if it wasn't for Healthwatch and is looking forward to starting counselling.



### Example story 3:

David spoke to us regarding a balance problem he had and was concerned about his risk of falling. We signposted him to an appropriate organisation and as a result of this, he had a visit from a community physiotherapist and is now taking an eightweek course on improving and coping with his balance.



### Contact us to get the information you need

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

Website: www.healthwatchderbyshire.co.uk

Telephone: 01773 880786

Email: enquiries@healthwatchderbyshire.co.uk

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## Volunteers



### At Healthwatch Derbyshire we are supported by 56 volunteers who help us find out what people think is working, and what people think should happen to improve services in the community.

### This year our volunteers:

- Acted as networkers to raise awareness of the work we do at events, in the community and with health and care services
- Ran engagement events and used local networks to share our surveys and generate comments and feedback
- Acted as volunteer mystery shoppers observing the quality of publicly funded health and social care services and made recommendations for improvement
- Sat on our Intelligence, Insight and Action (IIA) group to help steer our work priorities
- Undertook various projects observing how services are being delivered with the aim of improving them.

### Volunteers improve patient experience at Chesterfield **Royal Hospital**

Thanks to the hard work of a group of volunteers, instrumental changes have been made to the outpatient department at the hospital.

Our volunteers conducted a mystery shop at Chesterfield Royal Hospital (CRH) testing the journey a patient would follow when being invited to the hospital for an outpatient appointment.

In January 2020, we were able to meet with the hospital in order to discuss progress made towards implementing the recommendations made following the mystery shop.

We were pleased to note that many of these recommendations had been implemented, includina:

- Rest areas in corridors
- Improved signage
- Improved communication over waiting times.



Our volunteers are committed to improving health and social care services

We also suggested a review of the outpatient clinics to ensure patient privacy, adequate space for wheelchairs and to create a better environment for those with a hearing impairment.

The hospital is now undergoing a review of all outpatient reception areas and continues to use the recommendations within our report in the planning and reviewing of these clinics.



### Volunteer with us

Are you feeling inspired? We are always on the lookout for new volunteers. If you are interested in volunteering, please get in touch with us.

**Website**: www.healthwatchderbyshire.co.uk

**Telephone**: 01773 880786

Email: enquiries@healthwatchderbyshire.co.uk

### **Our volunteers**

We could not do what we do without the support of our amazing volunteers. Meet some of the team and hear what they get up to.



### **Sandra**

'I applied to Healthwatch Derbyshire as I felt my knowledge and skills would help with their aim of ensuring local services are provided in the best way possible.

"I am proud to have played a key role in the mystery shop at Chesterfield Royal Hospital which prompted changes to the hospital's outpatients departments and to have worked on a project looking at Home Care Services.'



### Joe

'I started volunteering with Healthwatch Derbyshire as a psychology student at the University of Derby. I feel that volunteering and being part of project planning and focus groups has improved my communication skills and boosted my confidence. It has added to my CV and provided me with a positive work experience.'



### **Shirley**

'I believe that patients/service users are at the centre of all Healthwatch Derbyshire's activities.

Volunteering with Healthwatch is a great opportunity to make a difference and influence the quality of local health and social care services. There is great support for people who volunteer with HWD both from staff members and from fellow volunteers.'

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Our volunteers make such a difference to the work of Healthwatch Derbyshire. They not only increase our capacity, but give us a breadth of skills, experience and expertise that make our Healthwatch a bigger, better, richer and more effective organisation. I want to say a big thank you to every volunteer for every hour committed. Without your input we would not be the organisation we are today.'

### **Helen Henderson-Spoors Healthwatch Derbyshire Chief Executive**



## **Enter and View**



Healthwatch Derbyshire 26

### **Enter and View**

Over the 2019/2020 period, we conducted six Enter & View visits within a range of service settings, including:

- GP practices
- Residential care services
- Mental Health inpatient service units

Across the six visits undertaken, 11 of our authorised representatives interviewed:

- 43 patients/residents
- 27 members of staff
- 5 relatives of those using the service

Enter & View visits are an opportunity to identify and acknowledge good practice and encourage organisations to build on this. Where shortcomings are identified, the recommendations are generally well received. Providers are required to respond to recommendations and return visits to services are made to ascertain how services have changed as a result of the Enter & View visit.

### What did we find?

- The quality and skills of staff were high throughout
- A sense that services were all trying to deliver a user-centered approach
- Service users felt confident with raising concerns if they felt they needed to
- The provision of a range of methods of communication of information to others.



### What did our visits achieve?

#### **GP Practices**

- Enhanced a patient appointment system
- Improved the communication system for making complaints
- Identified the need for ventilation in the waiting area.

#### **Residential Services**

- Identified various environmental hazards needing attention
- Improved the quality of bathroom environments
- Prompted some environmental re-design to benefit residents.

#### **Mental Health Units**

- Prompted the review of visiting times
- Improved communications regarding availability of a dedicated 'family room' for visiting
- Prompted additional monitoring of patients' awareness of their care plans.

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## Mental Health Together



## **Mental Health Together**



### **Mental Health Together (MHT)**

MHT was commissioned in 2017 to give service receivers and carers a greater say in the services they access; ensuring they are listened to and that their experiences are at the heart of service design and delivery.

The service has undergone significant challenges since it was set up in 2017 due to funding cuts and the resulting loss of several workers by the end of 2018. We are now more than a year down the line from those changes and we've survived and have even had some surprise new funding for a special project during this last year.

#### **Experts by Experience**

Our Experts by Experience (EbE) volunteers are vital to the role of MHT and an absolute joy and privilege to work with. We recruited and trained some more people during this past year and now have 26 EbE who have personal experience of living with, or caring for someone with, a mental health condition. Amongst them, they offer a wide range of experience of many different conditions and their insight is invaluable. At MHT, our job is to match up EbE with the opportunities which are out there to shape and influence the mental health and social care agenda.



Niki, Aileen and Kath, our Mental Health Together team

During 2019/20 we have supported EbE to attend a wide range of meetings and forums. This included providing EbE to help review many of the service areas of Derbyshire Healthcare NHS Foundation Trust. A full report on this work was included in our autumn/winter newsletter:

https://healthwatchderbyshire.co.uk/wpcontent/uploads/2019/10/JS1146-MHT-Newsletter-Autumn-Winter-2019.pdf

After 20 years' experience of mental health services, as a person with complex mental health needs and her carer, we were finally able to sit down with clinicians at the same table and talk together.'

## **Severe Mental Illness & Physical Health Project**



In June 2019, we were very fortunate to receive some one-off funding from Health Education England to carry out some in-depth engagement with people who live with a severe mental illness (SMI), for example, schizophrenia or bi-polar disorder. The engagement was specifically about the barriers they experience in relation to staying physically well.

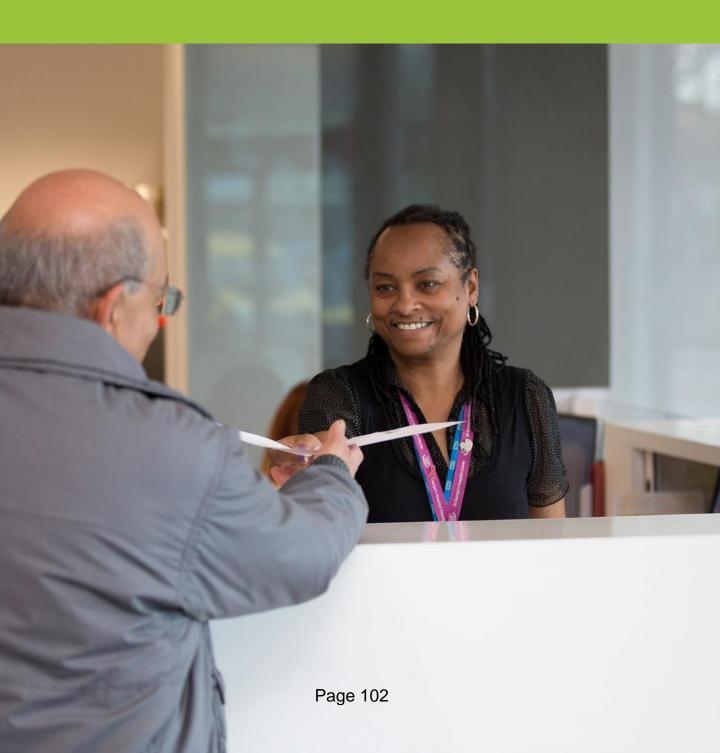
People in these health categories are known to have a significantly shorter life expectancy than average. The funding enabled us to recruit an engagement worker to carry out this work and by December she had spoken to a very large number of people across Derbyshire. An interim report on the findings of this work so far can be read here:

https://healthwatchderbyshire.co.uk/wp-content/uploads/2020/04/Physical-and-Severe-Mental-Illness-Interim-Report-Jan-2020.pdf.

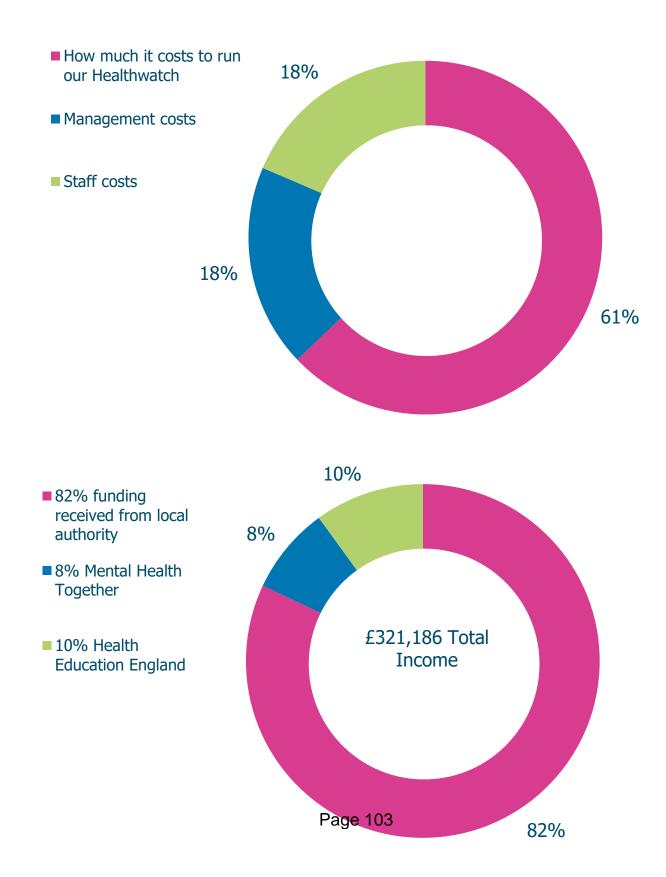
These valuable insights will be used to inform the way in which services support people with SMI to attend their physical health checks, to make lifestyle changes and to access support to improve their physical health.



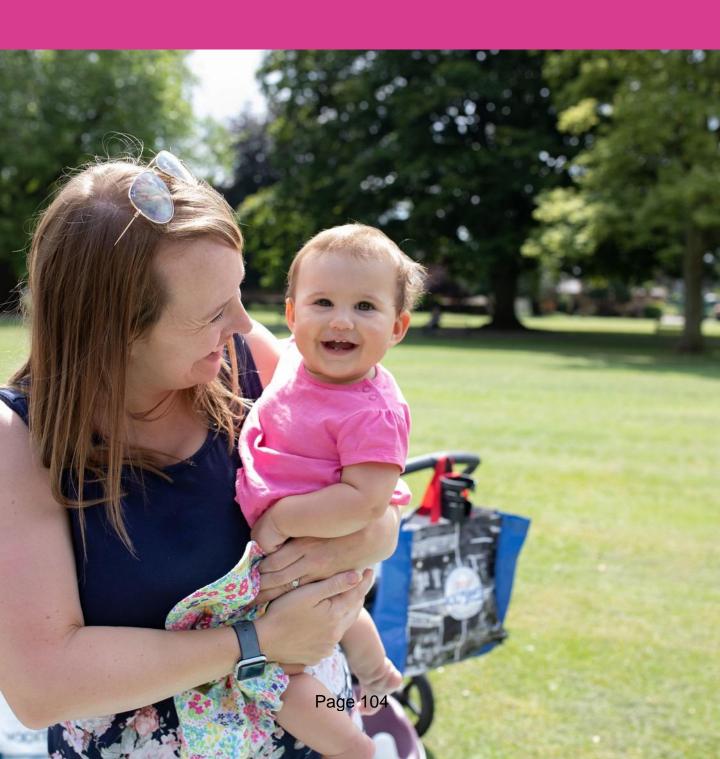
## Finances



We are funded by our local authority under the Health and Social Care Act (2012). In 2019-20 we spent £298,375.



## Our plans for next year



## A message from our CEO

Healthwatch Derbyshire has continued to develop and adapt this year, asserting ourselves as a truly independent champion working to put Derbyshire residents at the heart of local health and social care services.

The work featured in this report is just a selection to highlight the work we have done, the impact we have had and the difference we have made. As Chief Executive, I would like to give my personal thanks to the staff team, Board and all our volunteers for their hard work, commitment and dedication.

Our plans for 2020-2021 clearly must change, as we find ourselves in truly unprecedented times as a result of the Covid-19 pandemic. This clearly has had and will continue to have a significant impact on us as an organisation and how we go about doing our job. So, whilst we are preparing and planning to engage and involve people in a very different way, our mission remains the same, as we respond to the challenges and opportunities of life, work, and the role and function of Healthwatch post Covid-19.



**Helen Henderson-Spoors Healthwatch Derbyshire CEO** 

Helen Henderfon-Spacer

So although our methods must change and adapt, the value of our organisation and the role we have has never been greater, as the independent champion for people who use health and social care services. We're here to find out what matters to people, and help make sure their views shape the support they need. Our sole purpose is to help make care better for

Page 105le.

## Thank you

Thank you to everyone that is helping us put people at the heart of social care, including:

- Members of the public who shared their views and experience with us
- All of our amazing staff and volunteers
- The voluntary organisations that have contributed to our work.



### Contact us

Address of local Healthwatch and contact details of any relevant Healthwatch subcontractors as of 31/03/2020.

**Contact number:** 01773 880786

**Email address:** enquiries@healthwatchderbyshire.co.uk

**Twitter:** @HWDerbyshire

Facebook: Facebook.com/HealthwatchDerbyshire/ Website: www.healthwatchderbyshire.co.uk

Address and contact details of the organisation holding the local Healthwatch contract as of 31/03/2020.

Email address: ruth.caunce@derbyshire.gov.uk

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you need this in an alternative format please contact us.



Register Charity No. 1154278 Registered Company No. 08413881 (England and Wales)



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