

HEALTH AND WELLBEING SCRUTINY COMMITTEE

AGENDA

Meeting to be held on Tuesday, 4th October, 2022 at 5.30pm in Committee Room 1 of the City Hall, Plater Way, Sunderland, SR1 3AA

Membership

Cllrs Ayre, Bond, Butler (Chairman), Chisnall (Vice-Chairman), Heron, Mann, McDonough, Potts, Speding, D. Trueman, Usher and M. Walker

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1.	Apologies for Absence	-
2.	Declarations of Interest (including Whipping Declarations)	-
	Part A – Cabinet Referrals and Responses	
	No Items	
	Part B – Scrutiny Business	
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	Report of the Sunderland Safeguarding Adults Board (copy attached)	
4.	Winter Planning – Sunderland System Winter Plan	38
	Report of All Together Better Sunderland (copy attached)	
Contact:	Joanne Stewart Principal Governance Services OfficerTel: (7919 509 189

Information contained in this agenda can be made available in other languages and formats on request

Email: joanne.stewart@sunderland.gov.uk

5.	Adult Social Care Health Check	49
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	Part C – Health Substantial Variations to Service	-
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	No Items	

E. WAUGH, Assistant Director of Law and Governance, City Hall, SUNDERLAND.

26th September, 2022

SUNDERLAND SAFEGUARDING ADULTS BOARD ANNUAL REPORT

Report of Sunderland Safeguarding Adults Board

1. Purpose of the Report

- **1.1.** It is a Care Act requirement for the Independent Chair of the Safeguarding Adults Board to give an annual account of the work of the Board.
- **1.2.** The annual report, attached for members' information, highlights the current work of Sunderland Safeguarding Adults Board (SSAB) during the year 2021-22.

2. Background

- **2.1.** The workings of the Board and its current sub-committees, and importantly what they have achieved, are shown within the body of the report and also the links the Board has with other strategic partnerships within the City.
- **2.2.** The work of SSAB in 2021-22 focused on the strategic priorities as identified in its Strategic Delivery Plan 2019-24, which were refreshed in 2021 following an exercise to review and follow the data, and refresh performance and assurance frameworks:
 - Prevention
 - Local Areas of Risk:
 - Self-Neglect
 - Mental Capacity
 - Homelessness
 - People at Risk/Vulnerable/Complex Cases (including Substance Misuse) who don't meet statutory thresholds: development of Complex Adults Risk Management (CARM)
 - Domestic Abuse (supporting the work of the lead body, Sunderland Domestic Abuse Board)
 - Suicide Prevention particularly in light of the effects of COVID-19 (supporting the work of the lead bodies, Sunderland City Council's Public Health Team and the Suicide Prevention Action Group)

These priorities informed the Board's local actions to safeguard adults in Sunderland and were underpinned by the Care Act's six key principles of adult safeguarding.

2.3. The report highlights significant progress against its strategic priorities through the work of the SSAB & it's Sub Committees, and through the training offer the SSAB commissions. It also features the Key Achievements; Good Practice,

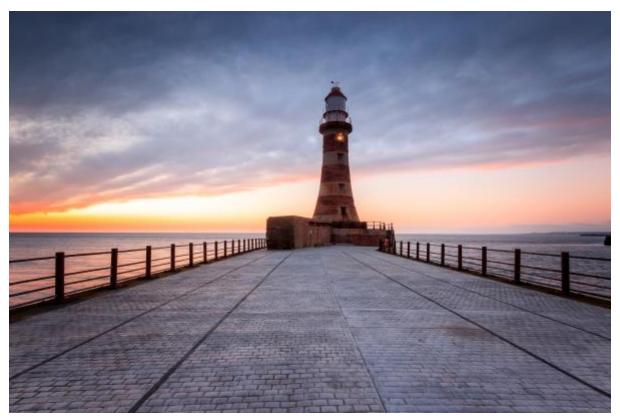
Partnership Working and Making Safeguarding Personal activity undertaken by the SSAB's statutory partners, and a 'Year in Figures' Performance Summary giving the headline activity figures for 2021-22 in relation to the Safeguarding Adults operational process. It also highlights how partners continued to work differently in the 2nd year of the COVID-19 pandemic to enable safeguarding adults activity to still be maintained and progressed.

2.4. The report also sets out the future direction of travel for the Board with regard to work on focusing on recovery following COVID-19, and implementation of the lessons learned from the 'Alan' SAR published in 2021, to ensure key issues and needs are better understood across the health & social care workforce, and good practice and innovation are not lost going forward. In addition, a range of work focusing on the key SSAB priorities of Prevention, Self-Neglect, Mental Capacity and Homelessness, plus prioritising the Service User Voice – continuing to embrace the values of Making Safeguarding Personal. Also, further work to embed the Complex Adults Risk Management (CARM) process for managing the most complex safeguarding adults cases, and evaluating the impact of this; continuing to promote the principles of Professional Curiosity amongst professionals working with people at risk of abuse and/or neglect, including raising awareness of the SSAB's recently-developed Professional Curiosity Guidance resource.

3. Recommendation

3.1. The Scrutiny Committee is asked to note and comment on the content of the Safeguarding Adults Board Annual Report 2021-22.





Sunderland Safeguarding Adults Board: Annual Report 2021 - 2022

Foreword: Vanessa Bainbridge, SSAB Independent Chair

I am pleased to present Sunderland's Safeguarding Adult's Board Annual Report. I hope you find the report interesting and informative. The report includes, in numbers and narrative, the work of the Board and its Members over 2021/22. It was important to Members to include the voice of people, through case studies and quotes, so we always have 'Making Safeguarding Personal' at the heart of what we do.

This is my second Annual Report as the Independent Chair, since joining the Board in December 2020. This has placed me in the privileged position to observe the fantastic work of organisations and individuals, across Sunderland, who have worked tremendously hard, to continue to improve the lives of our most vulnerable residents and safety within our communities. This, during a time,

when organisations and communities have continued to be challenged by the national pandemic. We are only now becoming clear of the impact on individuals and services, which has also resulted in an increase in safeguarding referrals, in all organisations and more concerning, an increase in the complexity of cases, which you will see in our figures, but also in the increased activity and investment to key service areas.

During the year we also made a decision to review our terms of reference and governance, which resulted in including the homelessness agenda more formally into our Board's work. We have also reflected on our sub-committees and the information we collect, improving our ability to identify areas of concern and a more focussed approach to intelligence and learning from reviews and incidents.

In addition, I have worked closely with the Independent Scrutineer for the Sunderland Safeguarding Children Partnership. Together we have held Board to Board events and agreed and implemented deep dives, on areas where the Boards' agenda cross, specifically Domestic Abuse, Suicide Prevention and Exploitation. This has resulted in raising awareness, clarity on actions and more importantly, collectively understanding gaps and organisational responsibilities.

Whilst the Board and I are proud of the many advancements and achievements throughout the last year, we are not complacent. Learning and improvement is key, our sub-committees continue to learn from national Safeguarding Adults Reviews (SARs) and have held events reviewing Sunderland's previous SARs and national themes to build into our quality monitoring.

In this year we have also published our own SAR, resulting from the death of Alan, in early 2020. The themes of the report brought into sharp focus the breadth of the Board's challenges and importance of the interface with wider Council departments, agencies and community members —to identify risk and the subsequent support. The subsequent action plan has resulted in establishing our Complex Adults Risk Management (CARM) process and specific training programmes. This in itself is not the end, we need to continue to be curious about how this is making a difference and what outcomes we achieve. Therefore, we have implemented into our processes the national SCIE Quality Marker scheme to further improve our learning.

As we move into 2022/23 – our focus will be:

COVID recovery

Driving forward the prevention agenda

Continuing to learn from practice

Listening to the voice of the service user and valuing it

We are aware of the new ASC Assurance Framework, that will come live in April 2023 – as Board we need to understand the requirements and asks through the lens of safeguarding and as test of our partnership working.

I recommend this Annual Report to the Sunderland's Safeguarding Adults Board.

Sunderland Safeguarding Adults Board



Sunderland Safeguarding Adults Board (SSAB) is a statutory body which brings together partner organisations in Sunderland to safeguard and promote the welfare of adults at risk of abuse and neglect, and is responsible for ensuring the effectiveness of what partner agencies do. SSAB has a strong focus on partnership working and has representation from the following organisations across the City:

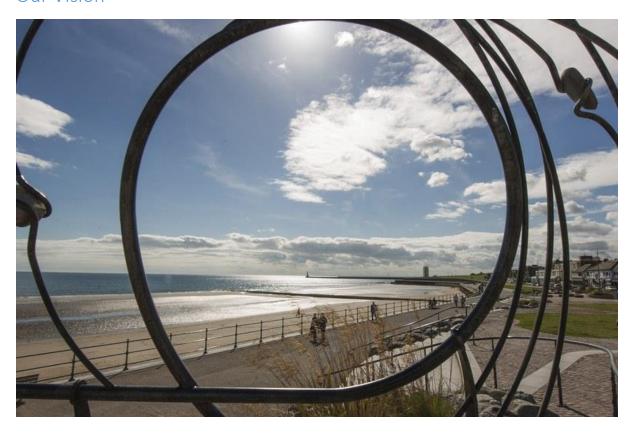
- Sunderland City Council
- Northumbria Police
- Sunderland Clinical Commissioning Group
- South Tyneside & Sunderland NHS Foundation Trust
- Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust
- Healthwatch Sunderland

SSAB works closely with other statutory partnerships in Sunderland, including:

- Sunderland Health and Wellbeing Board (HWBB) responsible for producing the Joint Strategic Needs Assessment (JSNA) and HWBB Strategy. A 'Framework of Cooperation' is in place between SSAB, HWBB and Sunderland Safeguarding Children Partnership, setting out the role and remit of each Board/Partnership and their interrelationship with each other.
- Safer Sunderland Partnership (SSP) SSP and SSAB work in collaboration on cross-cutting themes, including domestic abuse, violence against women and girls, sexual and criminal

- exploitation, migration/asylum and modern day slavery. SSAB receives updates regarding Domestic Homicide Review activity.
- Sunderland Safeguarding Children Partnership (SSCP) SSAB and SSCP have worked jointly on a range of common workstreams, and also hold, or contribute towards, learning events and workshops, highlighting both safeguarding children and adults issues, such as domestic abuse, suicide & self harm, and exploitation.

Our Vision



In order to improve the effectiveness of SSAB in accordance with its statutory responsibilities, the Board has the following vision:

People in Sunderland are able to live safely, free from neglect and abuse

SSAB's vision for safeguarding adults in Sunderland can only be delivered effectively through the support and engagement of a wide range of partner agencies and organisations across the City.

SSAB continues to work toward achieving its vision through the committed local partnership working between a range of organisations that comprise the membership of SSAB, the SSAB Partnership Group and Sub-Committees, working together with common objectives and commitments.

Strategic Delivery Plan



SSAB's <u>Strategic Delivery Plan</u> details key focus areas for the period of 2019-2024, and identifies how SSAB will ensure its statutory responsibilities are met in accordance with the <u>Care Act 2014</u> and embedded in practice across the partnership. The Plan is underpinned by SSAB's <u>Multi-Agency Memorandum of Understanding</u>, which describes the Board's remit and governance arrangements.

SSAB established strategic priorities for 2019 - 2024; these were refreshed in 2021:

- PREVENTION
- LOCAL AREAS OF RISK (identified through local performance data, outcomes from Safeguarding Adults Reviews and emerging issues as a result of Covid-19):
- Self-neglect
- Mental capacity
- Homelessness
- Complex adults risk management (CARM)
- At risk/vulnerable/complex cases (including substance misuse)
- Domestic Abuse (supporting the work of the lead body, Sunderland Domestic Abuse Board)
- Suicide prevention particularly in light of the effects of Covid-19 (supporting the work of the lead bodies, Sunderland City Council's Public Health Team and the Suicide Prevention Action Group)

These priorities inform the Board's local actions to safeguard adults in Sunderland, and are underpinned by the <u>Care Act Statutory Guidance's</u> six key principles of adult safeguarding.

The strategic priorities have been progressed through the work of SSAB's Partnership Group and Learning and Improvement in Practice and Quality Assurance sub-committees.

Progress and Achievements



Prevention

- SSAB held a successful local campaign in line with National Safeguarding Adults Week, including messages on SSAB's Twitter page and networking events (delivered virtually in-line with government advice applicable at the time) and social media messages across the partnership to promote safeguarding adults messages
- Through the continuous development of the SSAB website, the increasing number of recipients of the SSAB quarterly newsletter and other digital means of communication, key safeguarding adults information continue to be shared with partners
- SSAB has produced a Professional Curiosity Guidance document. A themed assurance exercise was undertaken in 2022 to determine how the guidance has been used and shared locally to support the understanding and application of professional curiosity principles and positively influence robust frontline practice. Findings show that the guidance has been widely shared and adopted across the partnership, with internal governance arrangements in place to ensure continued application of the principles promoted in the guidance
- Development of a range of safeguarding adults resources available to public and professionals in various formats, including animations, leaflets, posters and guidance

- Work is underway to review and refresh SSAB's Prevention Strategy
- Other examples from across the partnership include:
- Development of a 'safe discharge' document
- Learning from local, regional and national Safeguarding Adults Reviews
- Review of safeguarding adults policies and procedures

Local Areas of Risk

Self-Neglect

- SSAB's Self-Neglect Guidance and associated resources were re-launched across partner agencies during National Safeguarding Week 2021
- SSAB has participated in North East regional work (through the SAR Champions group, a subgroup of the ADASS North East Regional Safeguarding Leads Network) to develop a suite of Self-Neglect resources, which will be published in 2022. These resources include 7 Minute Briefings on aspects of self-neglect and an animation video aimed at the public, to raise awareness of what self-neglect is, and what people can do if they are worried about someone
- As part of the SSAB training offer for staff who work with adults at risk of abuse and neglect in Sunderland, the *Self-Neglect and Hoarding* trainer-led course was recommissioned
- SSAB's Self-Neglect Practice Guidance and CARM (Complex Adult Risk Management)
 protocol were used to support a presentation given by the Designated Professional
 (Sunderland CCG) at a national conference on the topic of Self-Neglect and Covid Risk
 Management Identification

Mental Capacity

- Mental capacity was a key theme within the 'Alan' Safeguarding Adult Review (SAR) published by SSAB in 2021. A 'Learning from SAR's' Workshop event was held in November 2021 which highlighted the mental capacity theme and the key learning around this
- A new trainer-led training contract was commissioned by SSAB from 1st April 2021. One of the courses that was commissioned is 'How to Assess Mental Capacity' training.
- A new e-learning contract was commissioned by SSAB from 1st January 2022. This offers a range of courses, including a Mental Capacity Act e-learning module.

Homelessness

- SSAB received a presentation from Sunderland City Council's Housing Services regarding the homelessness agenda, which led to a formal decision to include this as a strategic priority
- SSAB has sought assurance on the implementation of the Sunderland Rough Sleeping and Homelessness Prevention Strategy. Regular updates have been provided to SSAB regarding the refresh and relaunch, particularly in light of the effects of the Covid-19 pandemic, which has been supported by SSAB partners
- SSAB has also sought assurance on the work carried out in Sunderland during the pandemic to support people who were homeless/threatened with homelessness

• A Strategic Housing Group has been set up with the invitation extended to SSAB partner agencies, strengthening the partnership work on this issue

Complex Adults Risk Management (CARM)

- The CARM model was developed in response to the recommendations from the Safeguarding Adult Review (SAR) concerning 'Alan', and from a growing number of complex cases arising over the year where individuals have mental capacity but due to their actions and behaviour continue to be at a great risk of serious harm or death. The model was developed and refined in partnership with a range of key agencies and I aunched in early 2022. A referral form and associated guidance documentation have also been developed and are available on the SSAB website
- The application of the model has been shared at local, regional and national forums

Domestic Abuse

- SSAB members were invited to join the Sunderland Domestic Abuse Board and its Operational Group, both of which were newly formed in 2021, strengthening the partnership working on the issue
- A Domestic Abuse Health Advocate Project, funded by Sunderland CCG, was set up to introduce routine enquiry about domestic abuse in primary care. Initially 10 GP practices were enlisted, and training was provided by the Health Advocate from Wearside Women in Need (WWiN) to provide clinical staff in the GP practice with a basic knowledge and understanding about domestic abuse and how to undertake "routine enquiry". A further 16 practices have now been engaged with the project. The Health Advocate provides ongoing support to all staff in the GP practices, including bi-monthly meetings for all Domestic Abuse Champions and undertakes DASH (domestic abuse, stalking and honour-based violence) risk assessments and referrals to MARAC as required for victims of domestic abuse. The project has received national recognition and at an awards ceremony taking place in September 2021 twenty badges were awarded to key professionals involved in the project as well as certification from NHS England. A further project/proposal from Sunderland CCG has been requested by NHS England, indicating that this model may be adopted in regional and national processes.

"Everyone was very kind and accessing support through WWiN really made a difference. I am in a much better place now and would not be here if it wasn't."

- Service User, GP Advocate Service

"I don't know where I would be if I hadn't accessed WWiN. I often talk about how Anne helped me, I know I can call her anytime for advice if I want it."

- Service User, GP Advocate Service

Suicide Prevention

Due to the impact of Covid-19 Sunderland experienced a higher than usual prevalence of suicides across the City, in light of this SSAB included suicide prevention as a local area of risk and supports Sunderland City Council's Public Health Team as the lead for this area.

- SSAB contributes towards suicide reduction by supporting the work of local and regional groups. Regular progress updates regarding the Suicide Prevention Strategy are shared with SSAB
- A joint workshop with Sunderland Safeguarding Children Partnership was held in October 2021 to examine the position in relation to suicide and self-harm for both children and adults in Sunderland. SSAB gained assurance on the positive work of the Public Health-led Suicide Prevention Group to reduce suicide figures in Sunderland, which includes:
- A full menu of proactive interventions carried out considering Real Time Data of Suicides made available by Northumbria Police and the wider system including near misses that occur from places of height
- Two-year action plan to address the risks of suicides has been established following a deep dive of interventions and collaborative approaches. This allowed the consideration of areas of high risk and inequalities that impacted the lives of people, including those affected by suicide. The action plan i based on 'what works' using local, regional and national nest practice
- Stronger coordination of Suicide Prevention Action Group (SPAG) established with stronger system governance, ensuring there is a whole system wide representation, which helps to reduce the prevalence of suicides. Partners whose priority is to reduce self-harm and risky behaviour, and provide rapid intervention to save lives are engaged to collaboratively support the reduction of suicides aiding cross agendas. A coordinator role has been commissioned by Sunderland City Council, which ensures stronger support to the SPAG and focus on results and impacts. Ongoing collaboration with the regional ICS Suicide Prevention Network and the ATB Programme 2 has supported enhanced impact
- Training and opportunity to be self-resilient has been delivered to residents, workplaces, schools, and wider partnerships. This ensures emotional resilience and wellbeing across the life-course. These include:
- Mental Health First Aid Training: 60 courses delivered training to 750 people across the City
- A Life Worth Living: Monthly suicide prevention training to raise awareness and support anyone at risk
- SOS Support on Suicide: An offer to staff who are the first point of contact to customers and patients enabling them to identify suicide ideation and make every contact count
- Reviewed all Samaritan signage on Sunderland bridges and places of height, and a working group established to address near misses from Wearmouth Bridge
- Pilot delivered to establish Mental Health Champions who are supported in population groups identified as experiencing higher mental health inequalities. champions act as a bridge between services and share messages to communities of interest
- In January 2022, it was identified from the Real Time Suicide Date Dashboard, maintained by Northumbria Police, that Sunderland has shown the greatest suicide decrease from all North East local authorities, from 15.12 per 100,000 of the population in 202 to 10.44 per 100,000 in 2021

The Work of SSAB and its Sub-Committees



Governance

- Despite restrictions imposed due to Covid-19, sub-committee meetings continued to be held quarterly and Board meetings twice yearly utilising a virtual platform to ensure meetings could go ahead as planned
- The SSAB Newsletter was published and distributed to a wide range of stakeholders on a quarterly basis as planned during 2021-22. A wide range of key safeguarding messages, service developments and topics were communicated throughout the year
- Continued interface with other statutory processes where required, despite the pandemic
- A review of SSAB's sub-committees and their workstreams was carried out and considered
 the breadth of the sub-committee agendas, the changing landscape of adult safeguarding
 and the need to respond accordingly to the impact of the pandemic, which lead to a review
 of governance arrangements, including the establishment of a Safeguarding Adult Review
 (SAR) sub-committee, which will be implemented in Spring 2022



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Quality Assurance

- Monitored the feedback received on the trainer-led training courses, and the figures for elearning take-up
- Re-tendered the trainer-led training contract, resulting in a new provider being appointed

- Was part of a Sunderland & South Tyneside consortium approach to commissioning a new elearning platform, with a wider offer of safeguarding-related course topics that was available previously
- Maintained the quarterly performance reporting and monitoring schedule, and developed SSAB' partner agencies data input, to enrich the amount and breadth of data received about safeguarding adults in Sunderland
- Maintained and monitored the SSAB Assurance Framework, the mechanism by which the risks associated with the SSAB's priority areas of work are tracked
- Engaged with Safeguarding Adults Week 2021 partner agencies were asked to provide details of their activities, to provide assurance to SSAB that the opportunity to share safeguarding adults messages with staff and public was being maximised
- Multi-Agency Safeguarding Hub (MASH) activity was monitored quarterly through MASHspecific data/performance reports
- Undertook performance audits to examine specific themes arising from the data these covered: increased safeguarding adults concerns for 18-64 year olds; an increase in the numbers of cases that lacked mental capacity; safeguarding adult concerns where the risk was not removed or reduced at the end of the safeguarding process (reasons why)
- Developed 7-minute briefings on safeguarding topics: Good Practice in a Self-Neglect Case;
 'What is the Sunderland Safeguarding Adults Board?'
- Took forward actions from the 'Alan' SAR action plan that were identified for this Sub Committee
- Developed a revised SSAB Partner Agencies Audit Tool to bring it in line with SSAB's new priority areas of work
- Reviewed and revised SSAB's Communications & Engagement Strategy as part of a scheduled review cycle

Learning and Improvement in Practice

- Considered one case against the Care Act Safeguarding Adult Review criteria, whilst the case did not meet the criteria learning from the agency involved was shared with partners
- Published one Safeguarding Adult Review, concerning 'Alan'
- Progressed learning and actions resulting from the 'Alan' SAR
- Kept up-to-date with awaited changes from Deprivation of Liberty Safeguards (DoLS) to Liberty Protection Safeguards (LPS) in preparation for its implementation
- Supported and promoted the development and launch of the CARM model
- Supported newly commissioned training provider to develop course content relevant to Sunderland
- Developed and hosted a SAR learning event
- Considered learning from local and national SARs

Training

SSAB provides multi-agency safeguarding adults training in trainer-led and e-learning formats. Despite the necessary restrictions arising from the Covid-19 pandemic training continued to be provided and accessed across the partnership. As a Board we embraced new ways of working and new technology to support the delivery of adult safeguarding training, moving from classroom-based to virtual trainer-led training. Training content is regularly reviewed and refreshed to ensure that it reflects current themes and trends of adult safeguarding in Sunderland. Over the course of 2021 - 22, 548 delegates received trainer-led training provided by SSAB.

In partnership with Sunderland Safeguarding Children Partnership and South Tyneside Safeguarding Adults and Children Partnership, SSAB have expanded the breadth of safeguarding e-learning courses provided to organisations working with adults and children in Sunderland, the following in particular are in line with SSAB's strategic priorities:

- Self-Neglect and Hoarding
- Understanding the Importance of the Mental Capacity Act and Deprivation of Liberty Safeguards
- Suicidal Thoughts
- Awareness of Domestic Violence and Abuse



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Statutory Partners' Contribution to Safeguarding



Key Achievements

Despite the continued Covid-19 pandemic, SSAB partners continued to support the safeguarding adults agenda, meeting key statutory responsibilities and contributing to the work of the subcommittees and Board. Partners have proactively engaged local and national safeguarding campaigns, and continue to share good practice and learning. Partners undertook regular governance and assurance activities.

South Tyneside and Sunderland NHS Foundation Trust (STSFT)

- Datix continues to be utilised as the Trusts' standardised Informatics Reporting System.
 Throughout 2021/22 a Datix safeguarding dashboard became active, providing safeguarding informatics for internal and external reporting. The Named Nurse Safeguarding Adults has undertaken joint working with Tissue Viability Nurses (TVN) in order to progress TVN Datix dashboards and amend incident reporting parameters to standardise safeguarding threshold assessment. This will further promote a responsive safeguarding culture throughout the organisation
- MCA/DoLS (Mental Capacity Act/Deprivation of Liberty Safeguards) is now integrated into Meditech v6. This has enabled a digital version of DoLS applications to be securely sent to Sunderland and South Tyneside local authorities. This has provided a platform to progress MCA/DoLS performance data on Launchpad for internal and external reporting. The MCA/DoLS Advisor has assisted the Patient Safety Team to include the consideration of mental capacity within fall risk assessment
- A standardised safeguarding assurance template is now in situ. This template is completed by Senior Managers in order to capture their safeguarding activity for presentation at the

- Safeguarding Assurance Group. This enables each Directorate to evidence how their safeguarding activity is aligned to Trust strategic intent
- The Safeguarding Adults Team have continued to work in collaboration with multi-agency
 partners throughout the recovery phase and longer-term impact of the Covid-19 pandemic
 to ensure safeguarding measures are in place and learning is shared to support and protect
 adults at risk and their families. Particular emphasis has been around Making Safeguarding
 Personal, self-neglect and professional curiosity, which has been shared via Champions'
 forums and safeguarding newsletters
- Adult safeguarding supervision sessions have been re-established and each area has now been assigned to a Safeguarding Adults Advisor for group and individual supervision. These have been delivered both via Microsoft Teams and face-to-face
- In preparation for the forthcoming Liberty Protection Safeguards (LPS), the Safeguarding Team have been actively involved in attending LPS regional meetings and have devised a business case to ensure the Trust has the right skill set to robustly implement LPS
- Level 3 adult safeguarding/"Think Family" training compliance has been maintained throughout the pandemic. All training is aligned to both adult and children intercollegiate document and is jointly delivered by the Adult and Children Safeguarding Team to embed the "think family" ethos
- The hospital Independent Domestic Violence Advisor (IDVA) and Domestic Abuse Health Advocate (DAHA) continue to work alongside the Safeguarding Team to support staff in the identification and response to any disclosure of domestic abuse. The DAHA and IDVA are specialists working with victims of domestic abuse, targeting ward areas and the Emergency Department in supporting staff to recognise and respond to domestic abuse. The increased awareness of domestic abuse across the Trust has resulted in a 76% increase in Sunderland referrals (46 referrals in 2020/21 compared to 81 referrals in 2021/22 period)

Sunderland Clinical Commissioning Group (CCG)

- Recurrent funding to support the continued development of the Adult Multi-Agency
 Safeguarding Hub (MASH) was agreed in March 2022, with health staff co-located in an
 integrated MASH Team. The post is operationally managed by CNTW (Cumbria,
 Northumberland, Tyne and Wear NHS Foundation Trust) Crisis Services, with input from
 Northumbria Police and SAT referencing the role development. The role is considered to be
 part of the high-quality developments in this are and reflects national and regional
 developments to improve outcomes for adults at risk via speciality support, awareness and
 training, as well as signposting and liaison with multi-agency services. The post is substantive
 now and active recruitment is in place
- Sunderland CCG approved three-year recurrent funding for three domestic abuse projects in March 2022, facilitated by Wearside Women in Need (WWiN), which will be jointly managed by the CCG/ICS (Integrated Care System) and the local authority. This included:
- Ongoing development of a Trauma-Informed Recovery Unit for women with complex needs
- Community counselling services for domestic abuse victim
- Domestic Abuse Health Advocate role in primary care, providing support to all Sunderland practices. Twenty practices are now signed up to this project, which was recognised by NHS

England as good practice and given a safeguarding award. The project has been presented at national GP Leads meetings and the presentation is on NHS platforms for all professionals to access. This includes training for staff, support for MARAC referral and support to primary care staff who identify victims of domestic abuse. All practices involved have a domestic abuse champion in place, with training and support from WWiN

 Sunderland CCG have funded a Domestic Abuse Health Advocate (DAHA) post, based in STSFT Emergency Department and Maternity Department. This post now has recurrent funding and can conjoin with South Tyneside services to provide robust cover to these areas. STSFT have also match funded the post, bringing the Sunderland post to full-time hours. This post provides essential support and advice to victims of domestic abuse and also liaises with the primary care DAHA services

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)

Following a period of two years non-recurring funding, Sunderland Clinical Commissioning Group has agreed recurring funding for the Adult MASH (Multi-Agency Safeguarding Hub) post in the City. The focus of the role has been agreed as a health navigation role, to support the wider health economy, with CNTW as the lead provider and the post is now progressing to substantive recruitment. CNTW has worked closely with our partner agencies to achieve this and following appointment we will work with other health providers in the locality to ensure we have access to all systems.

Internally, the post will sit within our Access CBU to help facilitate easier access to mental health services and to better support our multi-agency partners.

"[We] felt safe that our relative was being looked after."

- Family member of CNTW service user

"I believe you have my Mam's interests, both safety and health at heart."

- Relative of CNTW service user

"I felt in a safe environment, and felt free to be open and honest about things. I felt able to put trust into the worker I had, which in the past I've struggled with."

- Service user, CNTW

Northumbria Police

Protecting vulnerable people is a force strategic priority. To support this, a Force Vulnerability Strategy was launched this year with four key pillars:

- Working Together
- Our People
- Leadership
- Early Intervention and Prevention

Our ultimate aim is to achieve a safe environment for people, their families and wider communities to thrive without fear of harm, and to ensure perpetrators are identified and targeted with further harm removed or minimised. Harm Reduction Teams are now embedded across the force and will

play a key role in tackling emerging issues identified with vulnerability, working with partners to adopt a problem-solving approach.

Key to our focus on vulnerability is our Early Intervention Strategy, which focusses on prevention and building community resilience. In the past 12 months, in support if this strategy, the force has launched an Adult Out of Court Disposal Team (TREAD). This team looks at opportunities to divert low level offenders from the criminal justice system and focus on the root causes of their offending. The team have developed links with charities and have pathways for support for veterans, female pathways, substance misuse pathways and a specific pathway for support for the 18 - 25 year-old cohort, exploring employment and training opportunities. This team are successfully tackling underlying vulnerabilities which draw individuals into the Criminal Justice System.

To ensure that protecting the vulnerable is front and centre of our force response, force -wide "Vulnerability Matters" training is being rolled out in the first quarter of 2022. This training will support officers to take a trauma-informed approach to dealing with vulnerability and assist officers to identify vulnerable adults in the community. The training focusses on key areas of learning such as, recognition of risk, and the importance of information sharing. Bespoke training sessions are also being delivered to our force control room call takers to enable them to recognise and respond to vulnerability at the first point of contact.

Sunderland City Council

- Significant work has been completed on a new online Portal for safeguarding referrals to be submitted by partners and professionals across the Coty. This will speed up the timeliness of referrals and provide the Safeguarding Adults Team more valuable information in order to assess and offer the necessary support to the named vulnerable adult
- Along with the additional post created for a permanent MASH (multi-agency safeguarding hub) Officer within the Safeguarding Adults Team, further investment has been approved.
 Permission has been granted for the Team to recruit additional Safeguarding Adults Officers following the recognition of the growing demands on the Team and the ever-growing numbers of Safeguarding Adult referrals.
- In 2020-21 the Safeguarding Adults Team dealt with 3.063 Safeguarding Adult Concerns. During the same period, 1st April 2021 31st March 2022, the Team dealt with 4,782 Safeguarding Adult Concerns
- Once again, the levels of service and support have been maintained throughout the course
 of the continued pandemic. Prior to the pandemic, the MASH was receiving approximately
 60 referrals per week. However, during this time, perhaps as a direct consequence of
 predominantly Covid-related reasons, the average number of MASH referrals has continued
 to increase year on year
- During this reporting period the MASH received and triaged 7,459 Police ACNs (Adult Concern Notices), which is an average of 13 per week

Case Study

Sunderland City Council's Safeguarding Adults Team received anonymous referrals via the CQC in relation to a care provider in the City. Concerns were raised regarding alleged financial abuse by

staff. All residents at the service are out-of-city placements, the majority of whom have their finances managed by their local authority with support from staff at the service.

The Safeguarding Adults Team liaised with all 8 managing local authorities and safeguarding meetings were held with all the local authorities involved, Commissioning and CQC to advise them of the concerns and to discuss whether any of the residents had raised any concerns with their individual Social Worker or whether the local authorities had any concerns in relation to the service.

Following safeguarding enquiries an unannounced inspection of the service was completed by the CQC. The outcome of the investigations was that potentially 19 residents at the service had been victims of financial abuse. All managing local authorities visited the service to provide reassurance to the residents and to gather further information in respect of the investigation.

The staff involved are no longer working at the service, and all of the information gathered was passed to the police who are now investigating the case. The Team has worked closely with the residents and the managing local authorities' and Commissioning to ensure that new protocols are put in place to further safeguard the residents.

Good Practice

Examples of good practice across the partnership include attendance at multi-agency safeguarding training and dissemination of learning throughout organisations of local reviews - including news bulletin articles, face-to-face sessions and 7-minute briefings. Assurance of safeguarding compliance is provided through rigorous audit programmes, internal agency reporting mechanisms and regular reporting to commissioners and regulating bodies, such as the <u>Care Quality Commission</u>.

South Tyneside and Sunderland NHS Foundation Trust (STSFT)

- A rigorous programme of safeguarding audits have continued throughout 2021/22 to monitor safeguarding practice across STSFT. These have included MCA/DoLS policy adherence, compliance with safeguarding policy (inclusive of routine and selective enquiry) and self-neglect
- The Safeguarding Team continue to attend the Emergency Department huddles (Monday-Friday), have increased visibility on the wards and departments and have forged strong links with the Alcohol Care Team to share safeguarding practice and provide direct support to Trust practitioners
- The Safeguarding Team undertake an audit of Emergency Department attendances to ascertain if there are any missed opportunities. Any learning to arise from missed opportunities is Incident Reported and shared at Emergency Department Interface meetings and Emergency Department huddles. An annual audit of Emergency Department attendance activity forms part of the safeguarding annual audit cycle
- Safeguarding training compliance has continued to exceed the 90% organisational target and this has been maintained throughout 2021/22. The Trust continues to exceed NHS England's 85% compliance target for WRAP (Workshop to Raise Awareness of Prevent) training and Basic Prevent Awareness Training (BPAT)

- A bi-monthly newsletter is shared with all STSFT employees via both the team brief and through the Safeguarding Champions' forum. This newsletter highlights learning from SARs, DHRs and CSPRS (Safeguarding Adult Reviews, Domestic Homicide Reviews and Children Safeguarding Practice Reviews), and incorporated any regional/local updates inclusive of 7minute briefings. The newsletter is held on the Trust intranet site
- MCA/DoLS is now integrated into Meditech v6 electronic patient records. This enables staff to re-consider MCA/DoLS whilst evaluating patient care

"Thank you to the amazing staff! I haven't been admitted for 6 months but the staff remembered me and remembered my care plan of how to keep me calm and what works for me when I start to struggle with the bad thoughts. I always feel safe when XX is working because I know I can go to her when I'm struggling and she listens and helps me. She always just stays really calm and explains things of [sic] what is happening and why. And thank you to X, X, X (who is new and I don't normally like new people I don't know because it takes me time to trust people but she was really caring, calm and helpful) X and X as well. Because they are all really caring nurses and health cares [sic] who take the time for all the patients and are always smiling and nothing is ever too much for the,. They see me as a person and not as a problem."

- Service user, STSFT

"I feel safe and well cared for in these very challenging times for our NHS staff. Thank you to everyone involved and well done!"

- Service user, STSFT

"They really do go above and beyond. They have saved me in many ways from a physical point of view and more importantly a mental health point of view even though they are not trained in that area. All the staff on that ward has [sic] been through some of the most darkest times in my life and I believe they need to know just how much they are appreciated by myself and more than likely a lot of other people. I really do believe that I couldn't have got through my life changing problems without them. Being there for me, holding me when I was at my lowest and talking me through everything. They honestly do not get the praise they deserve. I feel like this is the only way I could say a big thank you to them. I could never repay them for what they have done for myself and many others."

- Service user, STSFT

Sunderland Clinical Commissioning Group (CCG)

- CCG Safeguarding has a full remote training programme in place for level three safeguarding training across primary care. There is noted to be excellent attendance from primary care staff and analysis of all feedback data informing new sessions. Sunderland CCG provide a yearly agenda for all sessions and also offer Lunch and Learn sessions to practices. The Safeguarding Team also provide (recorded) advice for complex safeguarding or Mental Capacity Act issues to all practice staff where required
- Time in Time out (TiTo) annual safeguarding training level three was delivered to primary care services in March 2022 via Microsoft Teams, with the agenda focussing on advocacy in fatal domestic abuse, lived experience of a survivor of abuse in sports, and fabricated and fictitious illness. The feedback and analysis were exceptional and Sunderland CCG have now agreed that further funding will be available in future to ensure that live speakers with lived experience can be included in the training for primary care services

- Self-neglect training was delivered at a national HCUK (Healthcare Conferences UK)
 conference in April 2021, September 2021 and January 2022 from the Designated
 Professional for Adult Safeguarding and will also be delivered nationally in April and
 September 2022. This has also given a focus to the new CARM (Complex Adult Risk
 Management) process, which has been circulated nationally at the request of attendees, as
 well as a focus to the Self-Neglect Guidance and Professional Curiosity Guidance produced
 by SSAB
- Following the Safeguarding Adults Review (SAR) concerning 'Alan', actions from the report
 have been implemented with the Special Allocations Service, including specialist
 safeguarding supervision and improved communications at multi-disciplinary team meetings
 and exit interviews to support complex patients. There is now a comprehensive audit
 running, which will review all 17 patient cases, supported by the practice Clinical Lead,
 Named GP and Safeguarding Nurse
- The Domestic Abuse Health Advocate Programme has a rolling audit process to monitor
 practice, outcomes and rates of referral. This area also provides ongoing support and advice
 to primary care services, which is monitored and supported by Sunderland CCG Safeguarding.
 As part of the initiative, the use of a domestic abuse template was advocated, and relevant
 read codes were applied. There were 1071 records that recorded routine enquiry about
 domestic abuse and 76 recorded referrals to the practice Domestic Abuse Champion,
 highlighting the continued engagement of GP practices despite the challenges of Covid-19
- After identifying that Sunderland CCG did not have any Domestic Abuse Champions, volunteers were sought and training has now been delivered by Wearside Women in Need (WWiN) for 6 volunteers. Training in domestic abuse awareness is also being offered to all service and line managers in Sunderland CCG. Supervision is available to the volunteers and managers via the Safeguarding Team and WWiN. These roles will be specifically to support any CCG staff who are experiencing domestic abuse and require support, and is in line with recommendations from the Domestic Abuse Act for specialist support in the workplace
- Sunderland CCG Safeguarding have developed the agenda for the regional North Cumbria
 and Northeast Safeguarding Professionals Network meeting, along with South Tyneside CCG,
 and are part of the Chair responsibilities for this newly developed quarterly meeting, which
 incorporated Designated and Names safeguarding professionals across the ICS (Integrated
 Care System) region. The meeting includes national and regional agenda items and has
 learning and development opportunities for all attendees from national cases, such as the
 Norfolk (Cawston Park) Safeguarding Adult Review, Liberty Protection Safeguards
 developments and other complex areas

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)

With the introduction of the nee MASH (multi-agency safeguarding hub) post, the CNTW Safeguarding Adults and Public Protection (SAPP) Team are able to contribute to multi-disciplinary key decision-making around information that comes into the MASH, supporting:

- The navigation of client care around a complex mental health system
- Timely review of care and treatment and support
- The Domestic Abuse agenda

 The beginning of supporting the CARM (Complex Adults Risk Management) process, and offering key clinical advice on complex cases

Northumbria Police

Mental health is often an underlying concern for many adult safeguarding cases, which policing deal with on a day-to-day basis. Northumbria Police are currently working with Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW) and North East Ambulance Service to develop a standard operating procedure for mental health related incidents in the community which involve police and ambulance deployment. This follows learning from incidents where agencies have been in discussion about the correct interpretation of the Mental Capacity Act and Mental Health Act. From reviewing and debriefing incidents with our Street Triage teams we have identified areas to improve practice and understanding for front line practitioners to help keep vulnerable adults safe.

We have also worked with Sunderland Royal Hospital Emergency Department and CNTW on a hospital handover document, which focusses on accurate risk assessment and appropriate information sharing.

As part of the launch of the Missing Adult Protocol, Northumbria Police have enhanced their support to the return home interview process by introducing a pilot which sees out Street Triage service attend and conduct return to home interviews with those adults who have been missing due to a mental health crisis. It is hoped that by providing an early intervention by a mental health specialist we can provide effective signposting and support to prevent future missing episodes and serious harm linked to suicide/self harm.

In keeping with the theme of missing, Northumbria Police have collaborated with Missing People Charity to take advantage of a service which offers missing adults in mental health crisis with early contact and support from the Samaritans. Early analysis of this service shows that 80% of missing adults who are offered an intervention take up the offer of contact and support from the Samaritans. This is in keeping with out multi-agency focus on preventing the harms suffered by missing adults.

Case Study

A 48-year old male from Sunderland contacted the police stating he had taken a quantity of paracetamol tablets. On police attendance the male was drunk, had facial injuries which he could not account for, and there was evidence of self-neglect. Whilst the person agreed to attend hospital, concerns were raised by paramedics regarding his mental capacity. Safeguarding referrals were submitted by both police and paramedics outlining concerns. Research was conducted by the MASH (Multi-Agency Safeguarding Hub), which highlights an escalation of concerning behaviour by the person over the previous 12 months, but specifically 10 referrals in the previous 2 weeks. In light of this consent was overridden to ensure information sharing with partner agencies. Whilst the person was open to a referral to Adult Safeguarding, this action prompted further multi-disciplinary meetings and the agency referrals to support the person and his ongoing health problems. These would otherwise have been dealt with in isolation if police had not recognised wider issues and overridden consent to share information.

Sunderland City Council

The Safeguarding Adults Team continues to address the many elements of the safeguarding adults agenda, directed by the Care Act 2014 and wider safeguarding legislation. For example: Prevent, Modern Day Slavery - dealing with the National Referral Mechanism (NRM), forced marriage, domestic abuse, physical and financial abuse. However, it would be prudent to note that this list is not exhaustive and the Safeguarding Adults Team would assess any request for assistance on an individual basis.

The Strategic Manager for Community Safety and Safeguarding continues to be involved in local and regional forums for Prevent anf many other multi-agency partnerships to ensure Sunderland is informed of and engaged in continual practice development, including review of the training requirement.

In order to continually improve service delivery as a Safeguarding Adults Team an audit of the MASH (multi-agency safeguarding hub) was carried out in February 2022. The audit report highlighted areas of good practice and provided an action plan for future development of quantitative and qualitative performance measures to better reflect or capture the actions taken by the MASH. All Police Concerns are now recorded on LAS - Social Care's client information system, to meet this requirement. Progress against the recommendations will be shared with the SSAB in due to course.

Case Study

Sunderland City Council received a third Prevent referral for 'Lena' centring around ideology and statements of concern. This case did not progress under Prevent procedures as professionals were able to establish how to support Lena with her mental and physical health conditions and support her return to university.

Lena has displayed similar behaviour previously - the comments made are not out of character and are usually made when she is not engaging with Mental Health Services and not taking her medication.

In the past, Lena is known to have suffered torture and as a result she has significant physical and mental health issues that cause constant pain and trauma. Lena is currently a student at a local university, studying bio medicine, and was achieving well however, due to the risk to herself and others she was suspended from her current placement.

Lena has a diagnosis of schizophrenia and is receiving treatment by way of regular depot injections by her Community Psychiatric Nurse (CPN). Her mental health had been relatively stable for the last few years until recently. She has historically experienced detention in psychiatric hospitals in the Middle East and in the UK, and has been open to Prevent in the past.

Lena has arthritis and some other physical health issues, which she reports impact her daily living. Lena also reports psychological distress regarding the use of water (due to her experience of water boarding when in the Middle East) and requires some psychological interventions to assist with her phobia of water. Lena's functional ability was unclear as the CPN's observations differed to Lena's reports, therefore an Occupational Therapy (OT) assessment was required to inform the Social Work assessment and care planning. Lena disputed the outcome of her first OT assessment

and experienced stress and anxiety whilst waiting for a second assessment. She became increasingly frustrated with the assessment process overall and also appeared to have an increasingly challenging relationship with Mental Health Services whilst awaiting therapies, which was further impacting her mental health.

A Safeguarding Adults Meeting was held with professionals from a range of fields, including Adult Social Care, Mental Health Services, Police (Special Branch), University and Lena to agree a way forward. As a result of this multi-agency working:

- The university set up weekly meetings and identified specialist support within the university in partnership with an independent advocate to support Lena to complete her studies and reduce reliance on other services
 - OT assessments were commenced
 - Psychology assessments were arranged
 - Cosmic physical disability support service resurrected
 - Ongoing CPN support for mental health scaffolding

Lena is happy with the support received, she is engaging well and was able to return to university.

Working with Partners

Partners continue to contribute to multi-agency working, in particular by representation at a wide range of multi-agency safeguarding fora, which includes CARM, <u>MAPPA</u> (now <u>MOSOVO</u>), <u>MATAC</u>, <u>MARAC</u>, <u>CONTEST</u> Board and <u>Channel</u> Panel.

South Tyneside and Sunderland NHS Foundation Trust (STSFT)

- The STSFT Safeguarding Team continue to be active members of local partnerships, ensuring representation and contribution across all meetings and groups. This has been essential throughout Covid-19 to enable partner agencies to identify safeguarding themes and trends and work together to improve outcomes for adults
- The Safeguarding Team are active participants within the newly implemented Complex Adult Risk Management (CARM) meetings
- The Safeguarding Team has worked closely with the Local Authority to understand the impact and prepare for the forthcoming implementation of LPS

Sunderland Clinical Commissioning Group (CCG)

Sunderland CCG have actively supported partnership working across a number of keay areas, including:

- Representing the CCG and regional health colleagues at the regional CONTEST Board
- Supporting the development of the combined Channel Pane for Prevent
- Supporting the SSAB Learning and Improvement in Practice (LIIP) sub-committee with the Designated Professional as Chair of the group
- The Designated Nurse Adult Safeguarding, in conjunction with Sunderland City Council's Safeguarding Adults Team Manager, reviewed and developed a framework/protocol for the management of complex cases Complex Adults Risk Management (CARM). The LIIP subcommittee approved a protocol and process, which was presented at the SSAB Partnership Group in March 2021 and agreed as the new framework going forward to support the coordination and management of complex cases. This process has now been approved and embedded in safeguarding processes, co-ordinated by Sunderland City Council's Safeguarding Adults Team ad supported by partners. The Designated Nurse, in conjunction with the Safeguarding Adults Team, facilitates joint fortnightly triage for CARM referrals and co-chairs bi-monthly panel meetings for the CARM framework. Supporting CARM paperwork has also been developed jointly with Sunderland City Council
- Sunderland CCG Safeguarding support the Domestic Abuse Executive Steering Group and Domestic Abuse Operational Group to ensure there is a multi-agency view of domestic abuse strategic developments and commissioning processes
- The Named GP Adult Safeguarding, Designated Professionals Adult Safeguarding and the Safeguarding Nurse all support the Safeguarding Adults Review (SAR), Domestic Homicide Review (DHR), Learning Lessons Review (LLR) processes via the appropriate panel processes, scoping reports, Individual Management Review (IMR) reports and the action and implementation of agreed recommendations from the respective panels. Sunderland CCG also offer administrative support for the collation of reports to SSAB and the CARM process
- The CCG's Safeguarding Adults Team are working collaboratively on a Delivery Plan with the Care Homes Partnership, which will evidence the current situation with regard to safeguarding policy training and process, within care homes in the community. A specialist audit was developed for all care homes across the City and the majority have completed the audit tool. The audit has been analysed and evaluated and is now part of the Delivery Plan. This audit has evidenced understanding and awareness of safeguarding policies and procedure, training and assurance processes in the majority of care homes
- The Designated Professional Adult Safeguarding and Safeguarding Nurse are working with the Housing Department following a funding grant of £150,000 from Sunderland CCG to develop health and social care outreach posts. These two posts have a clear remit to improve health outcomes for the homeless population in conjunction with partner agencies. This includes access to health care, access to vaccination services, access to GP services and GP registration, and improved liaison with health and social care services. The recruitment process has been unsuccessful thus far, but is under review with Sunderland CCG and Housing. The Safeguarding Nurse is part of the Homeless Strategic Group for Sunderland

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)

Throughout the pandemic CNTW SAPP (Safeguarding Adults and Public Protection) team have:

- Maintained its key function and continued to contribute to safeguarding adults reviews, learning events and rapid reviews. The learning is discussed and reflected upon in the organisation and used to support the front-line teams to embed good multi-agency practice, and enhance multi-agency communication in the Trust
- Established a pioneering post within the MASH (multi-agency safeguarding hub) and clearly evidenced how this has improved multi-agency working

"As an organisation Making Safeguarding Personal (MSP) is at the core of what we do and especially around any safeguarding concerns. Safeguarding is weaved into a service user's journey in order to safeguard their experience. When a concern is alerted to our safeguarding practitioners we expect the voice of the service user to be present in the process. To support this we use the MSP document which provides the foundation to our approach and guide to next steps. We keep under review our safeguarding incident data, our analysis and triangulation of this helps identify any key themes. This information is used to support quality improvement plans for our services in order to enhance the lived experience of patients. The introduction of Peer Supporter roles in all of our clinical areas have greatly enhanced the support provided to patients and are a protective factor in regard to how we safeguard their interests. Finally, our processes include a clear commitment to working with our partner agencies and use the MSP narrative to inform out communications."

- Anthony Deery, Group Nurse Director, Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust

Northumbria Police

Northumbria Police's Missing from Home Coordinators have played an active role in multi-agency safeguarding over the past 12 months, in respect of young adults missing through criminal exploitation and county lines. They continue to work closely with Adult Social Care, Health, and accommodation providers to ensure adults at risk of going missing are supported by the Winnie Protocol and all required safeguarding support is provided.

The introduction of a Strategic Exploitation Group in Sunderland, chaired by Northumbria Police, has been a positive move in allowing the sharing and join up of best practice in respect of all forms of exploitation. The police Chair has built links with both the Violence Reduction Unit and the Regional County Lines Coordinator, who can build learning from national and regional practise into the local response. Furthermore, this year has seen the re-launch of the Multi-Agency Exploitation Hubs, which provides a coordinated approach to protect and safeguard vulnerable adults, cognisant of the diverse needs and vulnerabilities of exploited victims.

It is acknowledged that within Sunderland alcohol and drugs misuse are significant factors that are impacting crime and anti-social behaviour. The introduction of the Neighbourhood Priorities programme and monthly multi-agency meetings with Police, Gentoo and Adult Safeguarding will ensure there is a joined-up approach to tackle these problems and make significant improvements for residents within the area.

Case Study

In Northumbria Police's Southern Area Command collaboration was required in respect of a vulnerable male with physical and mental health issues, who was a wheelchair user, lived alone

and was being targeted by local youths who were causing damage to his home. A total of eight crimes were reported to police between July and December, which were identified as hate crimes. Police Neighbourhood Teams adopted a problem-solving approach allocating a SPOC (Single Point of Contact) to liaise with Tyne and Wear Fire and Rescue Service and Gentoo to ensure home safety measures were put in place and submitting a request for a house move. Referrals were submitted to Adult Safeguarding facilitating a re-engagement with the vulnerable adult, who had disengaged due to Covid-19. As a result of multi-agency intervention, the person was prioritised for a house move and is now engaging with agencies and receiving support. Subsequently there have been no further incidents reported to the police and the person is now safeguarded.

Sunderland City Council

- The Safeguarding Adults Team continues to provide information to support a safeguarding and quality discussion with commissioning, CCG and CQC colleagues. Regular information sharing meetings are held with a number of partners, this ensures consistency of quality service, as well as a better understanding of each other professional area of work
- The Strategic Manager for Community Safety and Safeguarding works closely with the police Violence Reduction Unit (VRU) who look to improve lives so we can prevent crime, especially violent crime
- The Safeguarding Adults Team continues to take part in statutory meetings with partners such as, MAPPA, MARAC and others. As a partner of SSAB the Safeguarding Adults Team was involved, along with Sunderland CCG, CNTW and STSFT, in the launch of the CARM (complex adults risk management) process. CARM provides a framework for professionals to facilitate effective multi-agency working with adults at risk aged 18 or over who are deemed to have mental capacity and who are at risk of serious harm or death through self-neglect, refusal of services and/or high levels of risk-taking activity. The CARM Panel meet regularly to discuss the cases that have been referred for consideration. If accepted into the CARM process an action plan is agreed to support the individual

Making Safeguarding Personal (MSP)

Making Safeguarding Personal (MSP) has been actively embraced by partners in Sunderland since its introduction. Partners have taken forward a significant amount of work to incorporate the principles of MSP into their policies and procedures, staff ways of working, staff communications (e.g. newsletters) and single-agency training opportunities.

South Tyneside and Sunderland NHS Foundation Trust (STSFT)

Throughout Safeguarding Adults Week (15th - 21st November 2021), STSFT Safeguarding Team focussed on a different safeguarding theme each day. Day 1 encouraged the creation of cultures where people could be listened to and speak out, advocating Making Safeguarding Personal. MSP was a common thread throughout the week.

STSFT staff embed the principles of MSP by putting the person at the centre of everything we do during a safeguarding enquiry, from the very beginning to the very end. The decision of the adult is respected throughout with key importance placed upon hearing their voice. Safeguarding data is analysed and reported regularly to identify key themes and trends, enabling STSFT staff to adopt preventative approaches to improve the experience of patients within our care, whilst also informing our multi-agency partners of any specific trends that might need to be considered as a

future SSAB priority. Safeguarding Team visibility at Emergency Department huddles and on wards and departments is integral to ensure STSFT staff have continuous support to keep all those in our care safe. This aligns to STSFT's strategic intent.

Sunderland Clinical Commissioning Group (CCG)

Sunderland CCG ha promoted Making Safeguarding Personal throughout the training it provided to practitioners during 2021 - 22, with references to MSP throughout. Training also reflects the requirements to risk assess the MSP process if there are high risks to the individual or others. MSP is embedded in safeguarding policy and procedure, and referenced throughout safeguarding documents. A person-centred approach is encouraged and advised throughout any advice to primary care services, with the emphasis on service-user involvement in the safeguarding process. The Health Advocate role supports a person-centred approach and the CCG-supported Health Navigator role in the Multi-Agency Safeguarding Hub (MASH) has a clear focus on the individuals' needs and rights, involving the service-user throughout the process.

"Patients in primary care benefit from the high level training for practice staff which emphasises the importance of making safeguarding personal and this has helped both staff and patients keep a focus on the patients being the centre of the safeguarding process with their wishes and outcomes always being considered. The CCG safeguarding team offer this response when giving advice to GPs as well as always emphasising the persons rights and consent. The same approach applies to the Domestic Abuse Health. Advocate roles and the Health Navigator post in the adult MASH which has a person centred approach and has evidenced that considering the persons wishes and needs throughout the process of safeguarding can improve outcomes for the individual and direct them to the appropriate services and pathways. The service user survey from the Domestic Abuse Health Advocate service also evidences this approach."

- Ann Fox, Executive Director of Nursing, Sunderland CCG

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)

Our Safeguarding Adults Policy has making safeguarding personal as an appendix for use and when safeguarding concerns are raised by service users, we support our clinicians with the use of this tool in the gathering of information to help ensure the person's voice is heard throughout and allow the Local Authority to make the best decision in relation the case.

We have also strengthened our working with local authorities by having monthly meetings, to improve the quality of information sharing.

Northumbria Police

Northumbria Police actively promote *Making Safeguarding Personal* and this is reflected in our policy and procedures, along with the Victims Code of Practice whereby the views of our victims are considered when decisions are made regarding safeguarding and investigation. The recent force wide *Vulnerability Matters* campaign will increase and improve identification and recognition of all forms of vulnerability ensuring victims' views are captured.

The increase in submission of adult Concern Notifications further supports officer's awareness and understanding of making safeguarding personal, as views of victims around consent to refer to partner agencies is covered but equally occasions where it can be overridden are appropriately identified.

Sunderland City Council

Making Safeguarding Personal seeks to achieve a personalised approach that enables safeguarding to be done with, not to, people. Practice that focuses on achieving meaningful improvement to people's circumstances rather than just on investigation and conclusion. This approach enables practitioners, families, teams and safeguarding adult bards to know what difference has been made. The Safeguarding Adults Team will always have the individual person at the heart of their work.

"[I] couldn't be happier, [I] feel so much safer in this new apartment and attend social events in the complex".

- Mrs A, Service User, Sunderland City Council, commenting on the support she received with her change in accommodation as an outcome of safeguarding intervention

"[We thank to Safeguarding Adults Team for the] peace of mind that our father was in good hands, and he was well looked after".

- Mr M's, Service User, Sunderland City Council, family commenting on the support they received despite living out of the area

"Making Safeguarding Personal means that actions taken should be person-centred and led. In Adult Social Care we promote an approach that requires social workers to maintain a level of professional curiosity and take sufficient time developing a relationship with the individual they are aiming to protect. In practice this means that they should engage with the person at the very start of the process to provide sufficient information and explain processed and procedures sufficiently to enable them to decide what they want to achieve as a result of the intervention, how they want to be best supported through it, as well as how far they wish to be involved in order to ensure that they feel safe.

Social workers aim to work in a collaborative way, informed by processes and agreements in place, but demonstrating sufficient breadth of practice, recognising that each individual's circumstances and experiences are unique and therefore a flexible personalised approach that centres around their expressed wishes is maintained."

- Eirini Zochiou, Principal Social Worker, Sunderland City Council

Case Study

'Mark' is a 32-year-old with a diagnosed mental health condition and history of drug-taking. He lived in a small flat owned by a private landlord. Concerns had been raised by his mother that his accommodation wasn't suitable and often other drug users would attend his property to take drugs, these people would stay at the property and come and go as they pleased. Mark was afraid and wanted to move, he wanted to make changes in his life but didn't know where to start. He recognised he hadn't attended mental health appointments and had not seen his GP for some time. His mother also stated he had lost a lot of weight and his demeanour was poor, she was also concerned for his safety.

A safeguarding meeting was held via Microsoft Teams, and attended by multi-agency partners as well as Mark and his mother. making safeguarding personal (MSP) principles were applied and Mark set out what he wanted to achieve to improve his current circumstances. As a result, a referral was made to Change, Grow, Live, his Community Psychiatric Nurse (CPN) commenced bi-

weekly visits and the Social Prescribing Team supported Mark with benefit claims and identifying new housing options.

A further safeguarding meeting was arranged, again attended by Mark and his mother, to review the agreed actions. Mark had made positive changes, he was engaging well with services and at the time was preparing to move to new accommodation. He had a benefit check and is managing his finances well. Mark said "there has been the odd hiccup", but his life has improved and he is planning to begin a mechanics course at college once he has settled in to his new property. Mark's mother also reported that she felt her son was feeling much better and engaging more with his family.

"Throughout the year we feel that as a positive we are kept up to date with information, e.g. Webinars to join in with specific safeguarding topics".

- VoiceabilityStaff Member

"It would be useful to have feedback from Safeguarding Adults Team regarding Alerts raised".

- Voiceability Staff Member

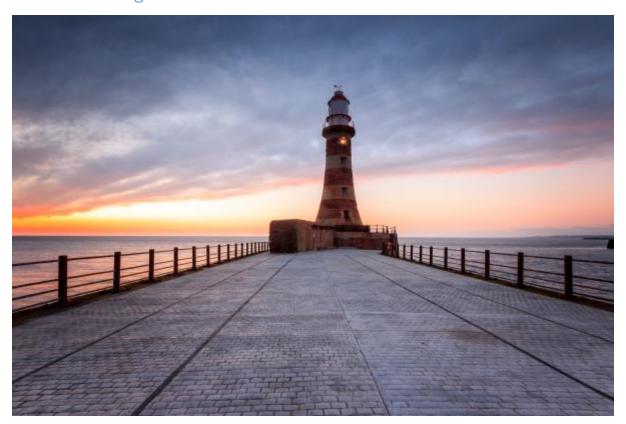
"Over the last Financial year we have raised 69 safeguarding alerts with Safeguarding Adults Team".

- VoiceabilityStaff Member

"Overall from experience of dealing with referrals coming in through Safeguarding Adults Team, we tend to have a good networking system in place to make sure referrals are allocated within a time frame and work commenced straight away".

- VoiceabilityStaff Member

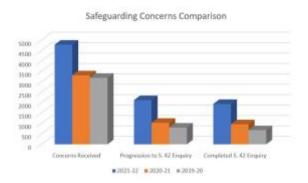
2021 - 22 In Figures





4782 Concerns received, this is a 44.5% increase compared to 3310 concerns received in 2020-21. There has also been an increase in concerns being progressed to Section 42 Enquiries at 44.3% compared to 31.2% in the previous year.

There were 1937 completed Section 42 Enquiries in 2021/22, an increase of 101% on 962 completed in 2020-21.



3 - Click to enlarge



Desired Outcomes

Of those with a completed Enquiry, 69% of individuals or individuals' representatives were asked what their desired outcomes were, of these 65% expressed a desired outcome, 97.6% were either fully or partially achieved



Primary Support Reason

Individuals with physical support needs represented 41% of all concerns received, followed by mental health needs (17%) and learning disabilities (14%)



Mental Capacity

In 45% of completed cases the client was identified to lack mental capacity, 100% of these individuals were supported



Main Location of Abuse

Individuals' own homes: 46%

Residential/Nursing home: 38.5%

Alleged perpetrator's home: 1.4%

Health setting 8%



Main Categories of Abuse

Physical abuse: 35.1%

Neglect: 26.8%

Psychological: 14.1%

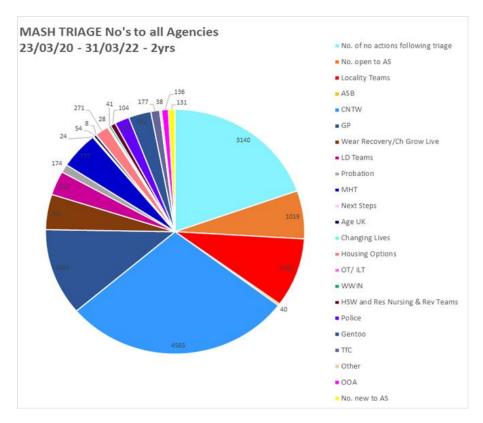
Self-neglect: 18.8%

Financial: 12.2%



Age/Gender

Females account for 57% of all concerns raised, with 46% of these being aged 75+ Males account for 43% of all concerns raised, with 55.5% of these being aged 18 - 64



4 - MASH referrals for 23/03/20 (start of the pandemic) to 31/03/22: 13,167

Learning Lessons



In 2020 the Learning and Improvement in Practice sub-committee undertook a scoping exercise regarding information known to partner organisations in relation to 'Alan'. The exercise concluded that the Care Act criteria to undertake a Safeguarding Adult Review (SAR) had been met.

The review involved a number of partner agencies who operate in Sunderland. As part of the review frontline staff who worked with Alan participated in a workshop, which provided valuable insight and supported the SAR process.

The review resulted in a detailed multi-agency action plan, monitored by the Learning and Improvement sub-committee before being shared with the Quality Assurance sub-committee.

Key Learning

- Those who commission and plan the development of health, social care, criminal justice and housing services need to recognise the specific needs and impacts of chronic, change resistant and dependent drinkers and commission appropriate services to meet those needs
- Improving the care for clients like Alan requires staff to have positive attitudes and beliefs about response
- This positive approach requires organisational and managerial support and a robust governance structure
- All frontline services need to understand that chronic dependent drinkers are generally no longer "choosing their lifestyle"
- The role of brain injury as a driver of presentation of people like Alan needs to be recognised by professionals; particularly in the context of mental capacity assessment
- Self-neglecting drinkers with care and support needs require safeguarding under the Care Act (2014)
- All frontline services need to be aware of the key elements of a good care plan for a chronic drinker
- Adult Social Care and Safeguarding staff need to recognise the need for pro-active/assertive steps to safeguard chronic-dependent drinkers with care and support needs who are at risk of abuse or neglect/self-neglect
- Services need to move away from episodic, crisis-driven responses to people like Alan
- Frontline alcohol services should have the commissioned capacity to undertake assertive outreach with the most challenging chronic dependent drinkers
- Local commissioners and strategic leads may wish to consider setting up a multi-agency group (or nominating an existing group) to manage chronic dependent drinkers
- Frontline services need support to understand how the Mental Capacity Act applies to chronic dependent drinkers
- Relevant frontline services need to ensure that they are appropriately assessing capacity and not just assuming capacity with this complex client group

- Frontline services need support to understand how the Mental Capacity Act applies to chronic dependent drinkers
- Professionals need to consider how the application of the 2nd stage of the mental capacity test applies to a group of people who may be able to understand and retain information but are unable to "use" it in making decisions due to the compulsion associated with alcohol dependency
- Professionals need to understand how the concept of executive capacity applies to this client group
- Local agencies need to recognise that alongside self-neglect this client group are also vulnerable to abuse and exploitation by others

The Review and an accompanying 7 Minute Briefing were published in August 2021.

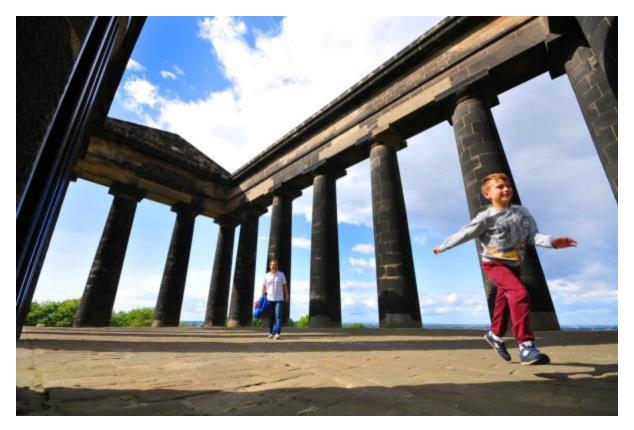
Working Differently during the Covid-19 Pandemic

Throughout the ongoing challenges resulting from the Covid-19 pandemic, the partnership within Sunderland has continued to proved itself to be extremely strong. Covid has crystallised existing collaboration methods and led to the further adaptation of services to mobilise support even more quickly and effectively than was happening previously.

SSAB has demonstrated its adaptability and has embraced new ways of working, which has enabled the work of the Board to continue to progress despite Covid restrictions. Partners continue to offer assurances, present and interrogate data and provide actions that ensure adult safeguarding remains a priority in Sunderland.

As we move towards recovery SSAB will continue to challenge and seek assurance from partners.

What does 2022 - 23 Hold?



SSAB's priorities will continue to be:

- Prevention Continuing to raise awareness with the public about safeguarding, using intelligence to target prevention work
- Self-Neglect Learning from practice, including sharing good practice and changing the thinking and continuing to improve how we learn from Safeguarding Adults Reviews
- Mental Capacity The application of the Mental Capacity Act Code of Practice in the safeguarding arena, and preparation for the implementation of the Liberty Protection Safeguards
- Homelessness SSAB partner agencies will continue to work together on this issue, adhering to the 'Duty to Refer' (where this is a legal requirement for them)
- The Service User Voice continuing to embrace the values of Making Safeguarding Personal
- Implementation of the CARM Process evaluating the success of the process in changing outcomes for vulnerable adults

In addition:

- COVID-19 recovery will be a key consideration agencies' ability to respond, potentially increased demand for support and services, and capacity to deliver.
- Continuing to promote the principles of Professional Curiosity amongst professionals working with people at risk of abuse and/or neglect, including raising awareness of the SSAB's recently-developed Professional Curiosity Guidance resource.

HEALTH & WELLBEING SCRUTINY COMMITTEE

4 OCTOBER 2022

WINTER PLANNING - SUNDERLAND SYSTEM WINTER PLAN

REPORT OF ALL TOGETHER BETTER SUNDERLAND

1. PURPOSE OF THE REPORT

1.1 The presentation attached, for Members' information, provides an overview of All Together Better's winter planning for 2022/23. This includes the context, process and high-level overview of the winter plan for Sunderland.

2. BACKGROUND

- 2.1 The All Together Better Sunderland presentation covers a wide range of issues including:
 - Winter Planning Context 2022/23;
 - Development of winter plans;
 - Assuring the system;
 - Overview of the winter plans;
 - Surge Group.

3. RECOMMENDATION

3.1 That the Health and Wellbeing Scrutiny Committee notes and comments on the content of the presentation and winter plan information provided.

Contact Officers: Philip Foster

Managing Director – All Together Better Sunderland



Winter Planning

Sunderland System Winter Plan

September 2022





Purpose

Purpose of presentation is to provide OSC with:-

- The context of position around winter planning regarding health and social care
- The process taken to develop the Winter Plan
- A high level overview of Sunderland's Winter Plan





Context- Winter 2022/23

- Continued unprecedented challenges in health, social care and community resilience with no opportunity for recovery.
- Impact and consequences of COVID more poorly people presenting for healthcare and needing social care support.
- Impact on personal resilience and mental health
- Impact of the cost of living crisis
- Heightened impact of already significant consequences of inequalities and social deprivation
- Expected increase over winter in flu/respiratory disease/Covid
- Staffing challenges locally and nationally in health and social care





How the plans were developed

- A combined South Tyneside and Sunderland Surge Group has met weekly throughout the Covid pandemic and throughout the last year.
- A number of surge schemes have operated throughout the year, these schemes have been funded through Winter funds
- Both winter plans have been developed based upon:-
 - Learning from Covid pandemic
 - Review of last years winter schemes undertaken in May 2022
 - National and Regional guidance and learning
 - Multi-Agency involvement





Assuring the System

Review of Plans

- ICS and ICP debrief event/learning
- ICS Assurance Self Assessment Review complete and managing RAG status

Integrated Plans

- Flu and Covid Vaccination programmes in place
- Ambulance Handover Plan
- Close working between South Tyneside and Sunderland Place system to share learning, and good practice and understand and manage pressures

Governance and assurance

- Joint Command and Control meeting (multiagency and multidisciplinary)
- Out of Hospital Place based alliance
- Local A&E Delivery Board
- ICB Executive Director of Place





Sunderland Winter Plan-Overview

Project Title	Description	Cost
System Contingency Workforce Fund	Creation of a system fund to which partners can make application in respect of funding for overtime to support staffing pressures as they arise within social work, health, therapies and care and support services.	£200K
Community Beds	Purchase up to 70 additional care home beds- each month from November through to end of March to support hospital discharge	£1.7m
Hospital Transport	Additional transport during day and over night to support discharge	£250K
Primary Care	Funding for additional capacity	£250K
Mental health support	A range of various Mental health schemes aimed at supporting hospital discharge and preventing unnecessary admission into hospital	£200K
Voluntary Sector	To support people being discharged from hospital	£100K
Ambulance Handover schemes	To improve handover of ambulance at ED and ambulance pressures	£150K

Health and care partners working together.





Sunderland Winter Plan-Overview

Project Title	Description	Cost
Discharge Schemes	To improve the flow out of hospital and support patients upon discharge	£250K
Community Equipment	Additional community equipment to support people at home	£150k
Prevention Support	Scheme will follow up for Patients being discharged from hospital or leaving reablement services to prevent readmission etc Links to Cost-of-Living Crisis via access to universal services, VCS, Social Prescribing and community therapies in order to avoid a requirement for other health or social care services	£250K
	Total Cost	£3.5M





Surge Group

- Each Winter scheme, has a plan that sits behind the summary- that sets out the scheme's purpose, expected outcomes and key performance indicators
- Each scheme aims to contribute to managing the anticipated increased demand and pressure across the health and care system over winter
- Each organisational lead for the scheme has indicated they are confident the scheme can be implemented with the required workforce
- The Surge Group will monitor performance of schemes –any slippage will be reinvested.
- Winter plans will also be reviewed in line with changing circumstances throughout the winter period





Any questions?







All Together Better is an alliance of health and care partners in Sunderland working together:

- NHS Sunderland Clinical Commissioning Group (CCG)
- South Tyneside and Sunderland NHS Foundation Trust
- Sunderland Care and Support
- Sunderland GP Alliance
- Sunderland City Council
- Northumberland, Tyne and Wear NHS Foundation Trust
- Voluntary and community sector organisations including Age UK Sunderland, Sunderland MIND and Sunderland Carers Centre
- Other providers NHS contracted services.



HEALTH & WELLBEING SCRUTINY COMMITTEE

4 OCTOBER 2022

ADULT SOCIAL CARE HEALTH CHECK

REPORT OF THE DIRECTOR OF ADULT SOCIAL CARE

1. PURPOSE OF THE REPORT

1.1 The presentation attached, for Members' information, provides an overview of adult social care market in Sunderland.

2. BACKGROUND

- 2.1 The adult social care presentation covers a wide range of issues including:
 - Current position;
 - Hospital discharge;
 - Advocacy;
 - Social Care Reform;
 - Care Quality Commission Assurance Framework.

3. RECOMMENDATION

3.1 That the Health and Wellbeing Scrutiny Committee notes and comments on the content of the presentation and the issues around the adult social care market.

Contact Officers: Ann Dingwall

Head of Commissioning and Market Oversight





Health and Wellbeing Scrutiny Committee 4th October 2022

Ann Dingwall

Head of Commissioning and Market Oversight - Sunderland City

Council

The Social Care Market



- ➤ Care Homes
- >Extra Care
- ➤ Accommodation based Services for people with Learning Disabilities, Mental Health needs and Physical Disabilities
- ➤ Home Care
- ➤ Day Services



Older Person's Care Homes

- > 50 older person's care homes delivering a mixture of general and dementia residential care, general and dementia nursing care, support for younger people with dementia and people with enduring mental health needs.
- Three new Care Homes have opened in the City since October 2021
- Information gathered from the care homes in September 2022 identifies
- 2,236 beds available
- 2020 beds occupied
- Average occupancy of 90%
- 11 operating 100% occupancy.

> CQC Ratings

- 3 homes are rated as overall Outstanding
- 41 homes are rated as overall Good
- 2 homes are rated as overall Requires Improvement
- 4 homes do not currently have a rating due to a change in Provider or being recently opened



Coming out of the Pandemic - COVID-19 is still circulating in the community with COVID-19 outbreaks occurring in care homes. It is therefore essential that efforts are made to prevent transmission.

- ➤ On 31st August 2022 there were changes to the way COVID-19 testing is carried out in care homes. The Government has decided to pause asymptomatic testing in all settings whilst prevalence of COVID-19 is relatively low. This pause applies to staff, visiting professionals and visitors (essential carers).
- ➤ The Council continue to recognise and appreciate the effort and commitment given by service providers and their staff in continuing to provide good quality care throughout the pandemic

Recruitment into the social care sector remains difficult, there are no providers raising concerns about safe staffing levels of service continuity with the Commissioning Team.

➤ The Council is working with North East ADASS to support the national Made with Care campaign for adult social care recruitment. This will see a focus on regional opportunities to support and uplift existing elements under this identity.



Extra Care

- > 12 extra care schemes in the City
- 848 apartments/bungalows for rent, sale, or shared ownership
- Overall occupancy remains consistently high and is 98% as of July 2022

CQC Ratings

- ➤ 1 scheme is rated as overall Outstanding
- > 11 schemes are rated as overall Good

Domiciliary Care

- > 22 Providers delivering domiciliary care to adults aged 18 years and over and
- 20 of these are commissioned by Sunderland Local Authority.

CQC Ratings

- > 16 are rated as overall Good
- 2 are rated as Requires Improvement
- 4 are Not Yet Inspected



Accommodation based Services for people with Learning Disabilities, Mental Health needs and Physical Disabilities

- Various accommodation based services for people including Residential Homes, Supported Living Houses and Hub and Satellite Schemes.
- There are 31 small group residential homes for people with learning disabilities (which are registered with CQC) that are operate in Sunderland. Five are directly commissioned by the Council, including one assessment unit and two short break services. The care and support is delivered by eight social care providers and the homes can accommodate up to 218 people.
- Up to 509 people live in supported living accommodation with support provided by 14 social care providers.

Hospital Discharge



- The hospital discharge process involves and is influenced by Social Work and Therapy colleagues from Adult Social Care.
- Our intention when working within this process is to ensure people are discharged from hospital in a safe and dignified way and have timely access to the right level of care and support in the right community location.

Social Work and Therapy Input to the Hospital Discharge Process

Integrated Hospital Discharge Team

Hospital Social Work team fully integrated with acute nursing and therapy teams facilitating in-patient assessment prior to discharge



Daily Rapid Hospital Discharge Meeting

Hospital Social Work and Community Therapy engage with other members of the IDT to inform MDT decisions in respect of assigning patients to the correct discharge pathway, unblocking any barriers to discharge

Daily Community Bed Allocation Meeting

Community Therapy engagement with providers of community bed based services to ensure the right patient is placed in the right bed and facilitate commencement of immediate rehab input on admission

Pathway 1

Discharge Home with Support

Community Social Work review any services arranged prior to discharge, complete assessment of short and long term needs, implement and review short or long term care plan.

Community Therapies resolve long term access issues, providing equipment, technology or adaptations to property.

Pathway 2

Discharge into a Community Bed Based Service

Community Therapies provide rehab (Occupational Therapy and Physiotherapy) to improve mobility and independence, working in partnership with Community Social Work to develop the right plan for the customer's discharge

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Pathway 3

Discharge into a Temporary Placement in a Care Home

Community Social Work oversee the customer's progress throughout the placement, determining whether the person can return home or requires a permanent admission.

Community Therapies provide rehab and oversee safe discharge plan if the person returns home

Outcomes



Number of hospital discharges to community based services 1065
Pathway 2
Number of discharges from bed based services 996
Number of discharges to bed based services to long term community based 283
services
Number of discharges to bed based services to permanent care 15
Number of discharges to bed based services to temporary placement 196
Number of discharges to bed based services to short term community based 221
services
Pathway 3
Hospital discharge to permanent 24 hour care placement 16
Hospital discharge to temporary 24 hour care placement 225

Challenges



- Sunderland continues to strive to achieve Home First/Discharge to Assess
- Access to short and long term care must be readily available to facilitate this
- Strengths based approach taken to care planning however the increased complexity in customer needs arising from discharge at medical optimisation can impact on the ability of the customer to manage their own needs without formal support
- Customers entering bed based services also have more complex needs resulting in a greater likelihood of requiring formal support on discharge despite progress having been made on discharge
- Difficulty accessing short and long term care packages results in the utilisation of increased bed based care
- Increased use of bed based care creates a requirement for social work and therapies to oversee additional admissions and discharges that would otherwise not have been required and also interferes with the natural progression of the rehab process

Quality Assurance



- The purpose of the **Assurance Framework** is to focus on the quality of care being provided in Services across the city. Providers will be given an action plan based on quality improvements identified following an onsite visit and data analysis. providers will be expected to work cooperatively with the Council to deliver any improvement actions identified
- The framework is flexible and will be reviewed and revised as necessary in order to monitor the quality of service delivery across the full range of service areas.
- On site Quality Assurance visits to all Providers commencing in November 2022 – joint with ICB
- Data collection process, with monthly and quarterly returns to enable Providers to share information with the Commissioning Team

Advocacy



- A tender process has been completed and new contract awarded
- New contract commenced 01.09.2022
- The incumbent provider was the successful bidder
- New contract now includes both Independent Advocacy and NHS Complaints Advocacy

Advocacy Current Activity



The information covers Independent Advocacy for the period from the 1st July 2022- 31st August 2022.

- During this period there were 219 cases opened
- 213 unique clients accessed advocacy services
- 6 cases relating to repeat referrals
- advocates supported 832 cases and delivered 3231 hours
- 214 cases were closed
- Currently there are 618 open/active cases
- 344 support needs were recorded of which the main support needs of clients were identified as Mental Health Condition 113, Dementia 85
- Overall cases were allocated within an average of 1.15 days with all services
- At the end of the quarter there were 71 Relevant Person's Representative (RPR) advocacy cases.
- In relation to those RPR cases the team leader remains in regular contact with the Deprivation of Liberty Safeguards (DoLS) Team and allocates RPR cases whereby there are shorter authorisation dates, or the client is objecting as a matter of priority. The remaining cases are then allocated on a priority basis taking into consideration the end authorisation date and also if the client is assessed as "low- risk".

Social Care Reform Key Changes – October 2023



- Lifetime cap on care costs of £86,000
- Changes to lower and upper capital limits from £14,250-£23,250 to £20,000-£100,000
- Introduction of notional daily living costs for permanent care
- Individuals who have capital above the upper threshold and are in permanent care can ask the LA to meet their needs (only those going in to care after Oct 2023 or have not been in care 6 month prior to start date).
- Use of personal budgets (where LA meets needs) and independent personal budgets (where individual meets own needs)
- Implementation and maintenance of care accounts for customers



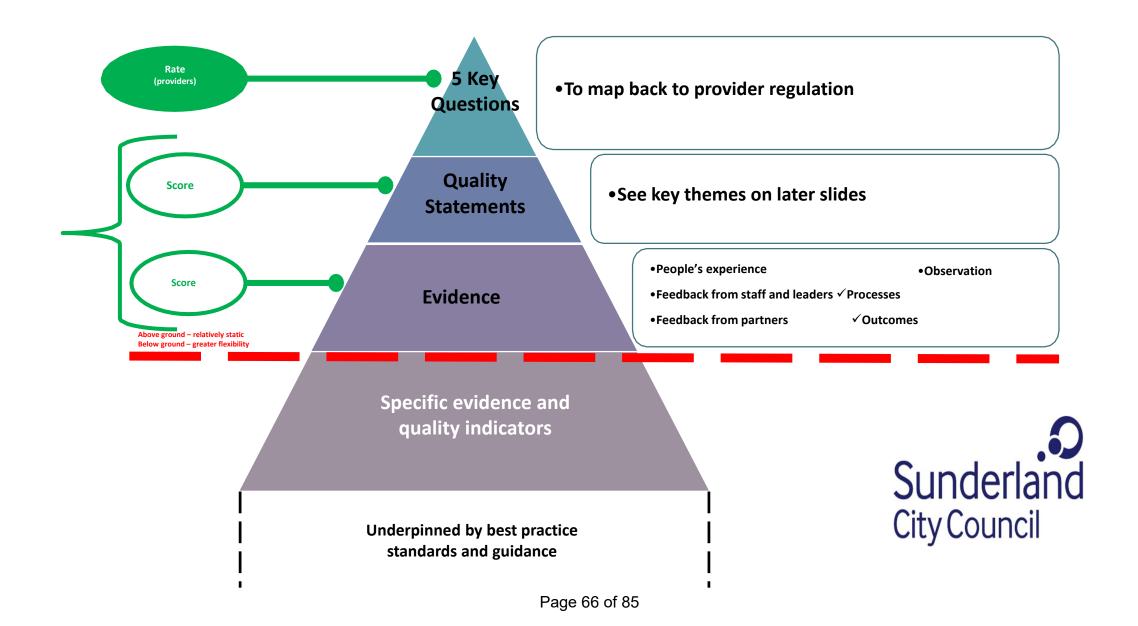


- Implementation timescales in the context of other demands on LA capacity including Covid Recovery, Social Care Reform, CQC Assurance Framework, increased demand for Social Care, workforce shortages
- Require significant increases in operational and administrative teams, and this
 challenge will be compounded by current difficulties in recruitment and retention,
 as well as the impact of a possible increase in complaints and disputes
- Requirement to implement key system changes within a very tight timescale across multiple systems and a reliance on external IT suppliers to do this within the timescales
- Level of funding available for charging reforms would be insufficient, particularly to implement the fair cost of care, and within the context of wider constraints on local authority budgets.

CQC Assurance Framework



- From 2023 CQC will begin to independently review and assess how Local Authorities are delivering their Care Act functions
- A single assessment framework has been developed which will assess providers, local authorities and integrated care systems with a consistent set of key themes
- Preparations for inspection are well underway and a challenge session will be held in December 2022



Key Themes



Working with people (inc unpaid carers) - assessing needs, care planning and review, direct payments, charging policy, supporting people to live healthier lives, prevention, well-being, information and advice

Providing support – market shaping, commissioning, workforce capacity and capability, integration and partnership working

Ensuring safety - safeguarding enquiries, reviews, Safeguarding Adult Board, safe systems and continuity of care, safe systems and continuity of care

Leadership - culture, strategic planning, learning, improvement, innovation, governance, management and sustainability

Each of the themes has several quality statements and 'I' statements within it

Theme 1 Quality Statements



<u>This includes:</u> assessing needs (including unpaid carers), supporting people to live healthier lives, prevention, well-being, information and advice

QS 1. Assessing Needs

- ✓ We maximise the effectiveness of people's care and treatment by assessing andreviewing their health, care, wellbeing and communication needs with them.
- I have care and support that is coordinated, and everyone works well together and with me.
- I have care and support that enables me to live as I want to, seeing me as a uniqueperson with skills, strengths and goals.

QS 2. Supporting people to live healthier lives

- ✓ We support people to manage their health and wellbeing so they can maximise theirindependence, choice and control, live healthier lives and where possible, reduce future needs for care and support.
- I can get information and advice about my health, care and support and how I canbe as well as
 possible physically, mentally and emotionally.

Theme 2 Quality Statements



<u>This includes</u>: market shaping, commissioning, workforce capacity and capability, integration and partnership working

QS 1. Care Provision, integration and continuity

- ✓ We understand the diverse health and care needs of people and local communities, so care is joined-up, flexible and supports choice and continuity.
- I have care and support that is coordinated, and everyone works well togetherand with me

QS 2. Partnerships and communities

- ✓ We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning withpartners and collaborate for improvement.
- Leaders work proactively to support staff and collaborate with partners to deliver safe, integrated, person-centred and sustainable care and to reduce inequalities.

Theme 3 Quality Statements



<u>This includes:</u> safeguarding enquiries, reviews, Safeguarding Adult Board, safe systems and continuity of care, safe systems and continuity of care

QS 1: Safe systems, pathways and transitions

- ✓ We work with people and our partners to establish and maintain safe systems of care,in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.
- When I move between services, settings or areas, there is a plan for what happens nextand who will do what, and all the practical arrangements are in place.
- I feel safe and am supported to understand and manage any risks.

QS 2: Safeguarding

- ✓ We work with people to understand what being safe means to them and work with themas well as our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect, and we make sure we share concerns quickly and appropriately.
- I feel safe and am supported to understand and manage any risks.





<u>This includes</u>: culture, strategic planning, learning, improvement, innovation, governance, management and sustainability

QS 1: Governance, management and sustainability

✓ We have clear responsibilities, roles, systems of accountability and good governance to manage and deliver good quality, Sustainable care, treatmentand support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

QS 2: Learning, improvement and innovation

✓ We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.



Any Questions or Comments?

HEALTH AND WELLBEING SCRUTINY COMMITTEE

WORK PROGRAMME 2022/23

REPORT OF THE SCRUTINY AND MEMBERS' SUPPORT COORDINATOR

1. Purpose of the Report

- 1.1 The report attaches, for Members' information, the current work programme for the Committee's work during the 2022-23 Council year.
- 1.2 The report also provides an update on a number of potential topics as raised by Members, for the Committee's consideration.

2. Background

- 2.1 The work programme is a living document which Committee can develop throughout the year. As a living document the work programme allows Members and Officers to maintain an overview of work planned and undertaken during the Council year.
- 2.2 In order to ensure that the Committee is able to undertake all of its business and respond to emerging issues, there will be scope for additional meetings or visits not detailed in the work programme.
- 2.3 The work programme should reflect the remit of the Committee and the need to balance its responsibility for undertaking scrutiny, performance management and policy review (where necessary).

3. WORK PROGRAMME UPDATE

- 3.1 The Health and Wellbeing Scrutiny Committee raised a number of issues at its work programme development session and a number of these issues have now been programmed into the Committee's work programme for 2022/23.
- 3.2 A number of topics were considered for review and an update on each of these has been provided below for information and further discussion:

Potential Task and Finish work pro	ogramme items
State of Adult Social Care in Sunderland (Sunderland City Council)	The Committee is to look at the state of adult social care in Sunderland and this is the first task and finish working group that is to be established. Terms of reference and scope of the work have been submitted to the Committee for agreement.

Alcohol Strategy (Sunderland City Council)	An opportunity to look at the development of the strategy and ensure it has the right focus and how impact of the strategy will be monitored and measured.
Adult Mental Health Strategy (Sunderland CCG & CNTW)	To look at the progress on the Adult Mental Health Strategy for the City and look to include input from service providers. Potential to look at this from a neighbourhood perspective and how services are accessed.
GP Access in Sunderland	To understand the role of primary care- raising awareness of the new roles and multidisciplinary teams that now make up General Practice (the different roles and what each does) which can offer alternative appropriate appointments for patients to a GP appointment • Access to GP appointments- Face to face / Telephone/ Virtual • Out of Hours provision- to include GP Extended Access and out of hours GP service • Patient experience of using GP and Primary care services

4. Recommendations

- 4.1 That the Health and Wellbeing Scrutiny Committee:
 - (a) notes and comments on the work programme of the committee, including amendments: and
 - (b) notes the update on topics for review during 2022/23.

5. Background Papers

5.1 Scrutiny Agendas and Minutes

Contact Officer: Nigel Cummings

Tel: 07554 414 878

Nigel.cummings@sunderland.gov.uk

HEALTH AND WELLBEING SCRUTINY COMMITTEE - WORK PROGRAMME 2022-23

REASON FOR INCLUSION	5 JULY 22 D/L:24 JUNE 22	27 SEPTEMBER 22 D/L:2 SEPT 22	4 OCTOBER 22 D/L: 23 SEPT 22	1 NOVEMBER 22 D/L: 21 OCT 22	29 NOVEMBER 22 D/L: 19 NOV 22	3 JANUARY 23 D/L: 23 DEC 23	31 JANUARY 23 D/L: 20 JAN 23	28 FEBRUARY 23 D/L: 17 FEB 23	28 MARCH 23 D/L: 17 MAR 23
Policy Framework / Cabinet Referrals and Responses									
Scrutiny Business	Public Health – Annual Report (Gerry Taylor) Dental Services Update (NHS Improvement)	Task and Finish Working (Nigel Cummings)	Winter Planning (ATB/ICB) SSAB Annual Report (Sunderland Safeguarding Adults Board) Social Care Health Check (Graham King/Ann Dingwall)	Elective Surgery – Update (NHS FT) Maternity Services Assurance Update (NHS FT)	Health Protection Arrangements (Public Health)		North East Ambulance Service Update (Mark Cotton)	Annual Report (Nigel Cummings)	
Performance / Service Improvement									
Consultation/ Information & Awareness Raising	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23	Notice of Key Decisions Work Programme 22-23

HEALTH AND WELLBEING SCRUTINY 4 OCTOBER 2022 COMMITTEE

NOTICE OF KEY DECISIONS

REPORT OF THE SCRUTINY AND MEMBERS' SUPPORT COORDINATOR

1. PURPOSE OF THE REPORT

1.1 To provide Members with an opportunity to consider the items on the Executive's Notice of Key Decisions for the 28-day period from 14 September 2022.

2. BACKGROUND INFORMATION

- 2.1 Holding the Executive to account is one of the main functions of Scrutiny. One of the ways that this can be achieved is by considering the forthcoming decisions of the Executive (as outlined in the Notice of Key Decisions) and deciding whether Scrutiny can add value in advance of the decision being made. This does not negate Non-Executive Members ability to call-in a decision after it has been made.
- 2.2 To this end, the most recent version of the Executive's Notice of Key Decisions is included on the agenda of this Committee. The Notice of Key Decisions for the 28-day period from 14 September 2022 is attached marked **Appendix 1.**

3. CURRENT POSITION

- 3.1 In considering the Notice of Key Decisions, Members are asked to consider only those issues where the Scrutiny Committee could make a contribution which would add value prior to the decision being taken.
- 3.2 In the event of Members having any queries that cannot be dealt with directly in the meeting, a response will be sought from the relevant Directorate.

4. RECOMMENDATION

4.1 To consider the Executive's Notice of Key Decisions for the 28-day period from 14 September 2022 at the Scrutiny Committee meeting.

5. BACKGROUND PAPERS

Cabinet Agenda

Contact Officer: Nigel Cummings, Scrutiny Officer

07554 414 878

Nigel.cummings@sunderland.gov.uk

28 day notice Notice issued 14 September 2022

The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012

Notice is given of the following proposed Key Decisions (whether proposed to be taken in public or in private) and of Executive Decisions including key decisions) intended to be considered in a private meeting:-

Item no.	Matter in respect of which a decision is to be made	Decision- maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision- maker in relation to the matter*	Address to obtain further information
220106/682	To give consideration to the Draft Bus Enhancement Partnership Plan and Scheme	Cabinet	Y	13 October 2022	N	Not applicable.	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland .gov.uk
220207/690	To approve the sale of the former Alex Smiles site and to undertake required remedial works.	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

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220207/691	To approve the acquisition of strategic sites in the Commercial Road Area.	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220524/714	To agree to the grant of an option to sell property at Richmond Street, Sheepfolds, Sunderland.	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet Report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

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220712/722	To seek agreement to the proposed development strategy of the Council's Self and Custom Build Sites.	Cabinet	Y	13 October 2022	Y	This report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraph 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report contains information relating to the financial or business affairs of any particular person (including the authority holding that information) The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220719/723	To seek approval for the acquisition of Property at Crowtree Road and to grant a lease of the former Crowtree Leisure Centre	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet Report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

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220808/732	To seek Cabinet approval to the disposal of South West Lodge, Mere Knolls Cemetery, Dovedale Road, SR6 8LW.	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet Report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220621/720	To approve funding options in respect of development at Nile and Villiers Street Sunniside	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

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220720/724	To seek approval to publish the International Advanced Manufacturing Park Area Action Plan (IAMP AAP) Review.	Cabinet	Y	13 October 2022	N	Not applicable	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220815/733	To agree to the sale of land at Commercial Road, Sunderland.	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220822/735	To consider a review completed by Together for Children in relation to Carers Allowances and Capital Adaptations and to approve policy and practice. This relates to carers who obtain either a Special Guardianship Order or a Child Arrangement Order.	Cabinet	Y	13 October 2022	N	Not applicable	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

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220822/736	To update Cabinet on progress of the New Wear Footbridge ("the Scheme") and seek approval to award the main works contract for the Scheme.	Cabinet	Y	13 October 2022	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraphs 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220831/737	To seek approval for the Winter Service Policy 2022/23.	Cabinet	Y	13 October 2022	N	Not applicable.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220804/731	To approve the Budget Planning Framework and Medium Term Financial Plan 2023/24 to 2026/27.	Cabinet	Y	13 October 2022	N	Not applicable.	Cabinet Report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

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220901/739	To approve the Capital Programme Second Review 2022/2023 (including Treasury Management).	Cabinet	Y	13 October 2022	N	Not applicable.	Cabinet Report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220901/740	To approve the Second Revenue Budget Second Review 2022/2023.	Cabinet	Y	13 October 2022	N	Not applicable.	Cabinet Report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
210709/612	To authorise the Executive Director of City Development to deliver the Washington F-Pit Museum Heritage Visitor Centre and Albany Park Improvement project, including the procurement of consultants and contractors.	Cabinet	Y	During the period 13 October to 30 November 2022	N	Not applicable.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

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220628/721	To seek approval to the proposed ECO Flex 4 Criteria and agree to the appointment of local providers to manage delivery of the scheme within Sunderland.	Cabinet	Y	During the period 13 October to 31 December 2022.	N	Not applicable.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220728/726	To adopt a Playing Pitch Plan (PPP) that will be used as a strategic planning document for sport playing pitches in the city.	Cabinet	Y	During the period 13 October to 30 November 2022	N	Not applicable.	Cabinet Report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220819/734	In respect of the Sunderland Heat Network to provide an update and to seek Cabinet approval for change in delivery approach.	Cabinet	Y	During the period 13 October to 31 December 2022.	N	Not applicable.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk
220725/725	To approve the Electric Vehicle Infrastructure Delivery Plan	Cabinet	Y	During the period 13 October 2022 to 31 January 2023.	N	Not applicable.	Cabinet report	Governance Services City Hall Plater Way Sunderland SR1 3AA committees@sunderland .gov.uk

Note; Some of the documents listed may not be available if they are subject to an exemption, prohibition or restriction on disclosure.

Further documents relevant to the matters to be decided can be submitted to the decision-maker. If you wish to request details of those documents (if any) as they become available, or to submit representations about a proposal to hold a meeting in private, you should contact Governance Services at the address below.

Subject to any prohibition or restriction on their disclosure, copies of documents submitted to the decision-maker can also be obtained from the Governance Services team City Hall, Plater Way, Sunderland, or by email to committees@sunderland.gov.uk

*Other documents relevant to the matter may be submitted to the decision maker and requests for details of these documents should be submitted to Governance Services at the address given above.

Who will decide:

Councillor Graeme Miller – Leader; Councillor Claire Rowntree – Deputy Leader & Clean Green City; Councillor Paul Stewart - Cabinet Secretary; Councillor Louise Farthing – Children, Learning and Skills: Councillor Kelly Chequer – Healthy City; Councillor Linda Williams – Vibrant City; Councillor Kevin Johnston – Dynamic City.

This is the membership of Cabinet as at the date of this notice. Any changes will be specified on a supplementary notice.

Elaine Waugh,

Assistant Director of Law and Governance

14 September 2022