



Community and Wellbeing Scrutiny Committee

Tuesday 30 June 2026 at 6.00 pm

Conference Hall - Brent Civic Centre, Engineers Way,
Wembley, HA9 0FJ

Please note that this will be held as an in person physical meeting which all Committee members will be required to attend in person.

The meeting will be open for the press and public to attend or alternatively can be followed via the live webcast. The link to follow proceedings via the live webcast will be made available [HERE](#).

Membership:

Members

Councillors:

Madabhushi (Chair)
Alexandre
Bajwa
Chadha
Clinton
Ibrahim
Malonga
McLeish
De Souza
Thomas
Unger

Substitute Members

Councillors:

Ahmed, Anderson, Blackman, Burn and Dar

Councillors:

Chowdhury and Do Rosario

Councillors:

Lorber and Mulaisho

Councillors:

Mitchell and Ryan

Co-opted Members

Alloysius Frederick, Roman Catholic Diocese Schools
The Venerable Catherine Pickford, Archdeacon of Northolt/Willesden Area, Church of England Faith Schools
Sayed Jaffar Milani, Muslim Faith Schools
Rachelle Goldberg, Jewish Faith Schools
Vacancy, X2 parent governors

Observers

Brent Youth Parliament, Observer
Jenny Cooper, NEU and Special School observer

Lucy Cox, NEU Observer

For further information contact: Hannah O'Brien, Senior Governance Officer
hannah.o'brien@brent.gov.uk

For electronic copies of minutes, reports and agendas, and to be alerted when the minutes of this meeting have been published visit: www.brent.gov.uk/democracy

Notes for Members - Declarations of Interest:

If a Member is aware they have a Disclosable Pecuniary Interest* in an item of business, they must declare its existence and nature at the start of the meeting or when it becomes apparent and must leave the room without participating in discussion of the item.

If a Member is aware they have a Personal Interest** in an item of business, they must declare its existence and nature at the start of the meeting or when it becomes apparent.

If the Personal Interest is also significant enough to affect your judgement of a public interest and either it affects a financial position or relates to a regulatory matter then after disclosing the interest to the meeting the Member must leave the room without participating in discussion of the item, except that they may first make representations, answer questions or give evidence relating to the matter, provided that the public are allowed to attend the meeting for those purposes.

***Disclosable Pecuniary Interests:**

- (a) **Employment, etc.** - Any employment, office, trade, profession or vocation carried on for profit gain.
- (b) **Sponsorship** - Any payment or other financial benefit in respect of expenses in carrying out duties as a member, or of election; including from a trade union.
- (c) **Contracts** - Any current contract for goods, services or works, between the Councillors or their partner (or a body in which one has a beneficial interest) and the council.
- (d) **Land** - Any beneficial interest in land which is within the council's area.
- (e) **Licences**- Any licence to occupy land in the council's area for a month or longer.
- (f) **Corporate tenancies** - Any tenancy between the council and a body in which the Councillor or their partner have a beneficial interest.
- (g) **Securities** - Any beneficial interest in securities of a body which has a place of business or land in the council's area, if the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body or of any one class of its issued share capital.

****Personal Interests:**

The business relates to or affects:

- (a) Anybody of which you are a member or in a position of general control or management, and:
 - To which you are appointed by the council;
 - which exercises functions of a public nature;
 - which is directed is to charitable purposes;
 - whose principal purposes include the influence of public opinion or policy (including a political party or trade union).
- (b) The interests a of a person from whom you have received gifts or hospitality of at least £50 as a member in the municipal year;

or

A decision in relation to that business might reasonably be regarded as affecting the well-being or financial position of:

- You yourself;
- a member of your family or your friend or any person with whom you have a close association or any person or body who is the subject of a registrable personal interest

Agenda

Introductions, if appropriate.

Item	Page
1 Apologies for absence and clarification of alternate members	
2 Declarations of interests	
Members are invited to declare at this stage of the meeting, the nature and existence of any relevant disclosable pecuniary or personal interests in the items on this agenda and to specify the item(s) to which they relate.	
3 Deputations (if any)	
To hear any deputations received from members of the public in accordance with Standing Order 67.	
4 Minutes of the previous meeting	1 - 28
To approve the minutes of the previous meeting as a correct record.	
5 Matters arising (if any)	
6 Brent Safeguarding Adults Board (Multi-agency safeguarding arrangements) Annual Report April 2025 - March 2026	29 - 72
To consider the Brent Safeguarding Adults Board (SAB) Annual Report covering the period from April 2025 to March 2026.	
7 Brent Safeguarding Children Partnership (Multi-agency safeguarding arrangements) Annual Report April 2025 - March 2026	73 - 110
To Consider the Brent Safeguarding Children Partnership Annual Report covering the period from April 2025 to March 2026.	
8 Community and Wellbeing Scrutiny Committee Recommendations Tracker	111 - 134
To receive the Scrutiny Recommendations Tracker.	
9 Any other urgent business	

Notice of items to be raised under this heading must be given in writing to the Deputy Director – Democratic and Corporate Governance or their representative before the meeting in accordance with Standing Order 60.

Date of the next meeting: Wednesday 16 September 2026



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- The meeting room is accessible by lift and seats will be provided for members of the public on a first come first serve basis. Alternatively, it will be possible to follow proceedings via the live webcast [HERE](#).

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LONDON BOROUGH OF BRENT

MINUTES OF THE COMMUNITY AND WELLBEING SCRUTINY COMMITTEE Held in the Conference Hall, Brent Civic Centre on 4 March 2026 at 5:15PM

PRESENT: Councillor Ketan Sheth (Chair), Councillor Afzal (Vice-Chair) and Councillors Clinton, Ethapemi and Mistry.

ALSO PRESENT: Co-opted members Archdeacon Catherine Pickford, Rachelle Goldberg, and Alloysius Frederick

1. Apologies for absence and clarification of alternate members

Councillor Ketan Sheth (as Chair) welcomed members of the Scrutiny Committee to the meeting.

Apologies for absence were received from Councillors Mahmood, Aden and T. Smith.

2. Declarations of Interests

Personal interests were declared as follows:

- Councillor Ketan Sheth – Lead Governor of Central and North West London NHS Foundation Trust.
- Councillor Ethapemi – Spouse employed by NHS.

3. Deputations (if any)

No deputations were received at the meeting.

4. Minutes of the previous meeting

It was **RESOLVED** that the minutes of the previous meetings held on Monday 19 January 2026 be approved as a correct record.

5. Matters arising (if any)

There were no matters arising raised at the meeting.

6. Reduction in operating hours at the Urgent Treatment Centre located at Central Middlesex Hospital

Prior to the consideration of the item, the Chair agreed to consider a request which had been received to speak under item 6, in relation to the Urgent Treatment Centre at Central Middlesex Hospital, from a member of the public, Amandine Alexandre, who highlighted the following points:

- Amandine Alexandre began by stating that, from the 1 February 2026, the Urgent Treatment Centre at Central Middlesex Hospital had ceased operating between 9pm and midnight. It was emphasised that this had constituted a significant alteration to the service, yet patients had not been informed of the change before the reduction in opening hours had taken effect. The speaker reported that they had become aware of the new hours only through a photograph that had been posted on Facebook on the 2 February 2026.
- The speaker believed that this absence of communication, prior to the introduction of new operating hours, represented very poor practice on the part of London North West University Healthcare NHS Trust. It was further stated that this lack of communication had nevertheless been entirely in keeping with the consultation process undertaken by the Trust in October of the previous year.
- Amandine Alexandre recalled that the consultation had been extremely brief, lasting only a couple of weeks at most. It was stated that this had predictably resulted in a very limited number of responses from patients, with only 42 participants. The speaker contrasted this with the 570 signatures that had been collected for a petition hosted on the Council's website earlier in the year.
- The speaker advised that there was considerably more to be said about both the decision itself and its consequences for patients. The speaker stated that the Trust had encouraged patients to make use of community pharmacies and their GP practices as a mitigation for the loss of the late evening service at the Urgent Treatment Centre. The speaker reported that they had identified only one pharmacy within 2.5 miles of their home that remained open until 10pm.
- Amandine Alexandre also referred to the difficulties encountered when attempting to access their general practitioner services and cited the example of being required to complete a form described as Patches. It was stated that each use of the form had caused them to feel as though they were being cross examined by a barrister in relation to an offence they had not committed.

- In concluding their presentation to the Committee, Amandine Alexandre encouraged the Committee to remind London North West University Healthcare NHS Trust of the standards that patients were entitled to expect. It was further emphasised that the NHS existed to serve patients and should not implement significant changes to services without appropriate consultation and without ensuring that patients were properly informed. Amandine Alexandre described the request as simple but important and expressed the hope that the Committee would take action.

The Chair thanked Amandine Alexandre for addressing the Committee and then invited Pippa Nightingale (Chief Executive Officer, London North West University Healthcare NHS Trust) to deliver a briefing in relation to the Urgent Treatment Centre at Central Middlesex Hospital.

In presenting the briefing, members noted that the Urgent Treatment Centre (UTC) at Central Middlesex Hospital had reduced its opening hours from 8:00am - 00:00pm to 8:00 am - 21:00pm, with the final patient registration at 20:00pm. The Committee were informed that the London North West University Healthcare NHS Trust (LNWH) currently operated 3 urgent care centres - namely, Central Middlesex Hospital, Ealing Hospital and Northwick Park Hospital. Members heard that data collected by the Trust had demonstrated that between 21:00 and 00:00 significantly fewer patients were attending the Central Middlesex Hospital site. It was explained that the urgent care service during this period had been staffed by a minimal clinical team, consisting of 1 doctor and 2 nurses. The Committee were advised that, in light of the very low numbers of patients presenting in those hours, this staffing model had not represented an efficient use of resources. Pippa Nightingale then outlined operational issues that had arisen at the Central Middlesex Hospital site prior to the change. Members were informed that patient pathways had become disjointed, with some individuals using the facility for urgent care needs that would have been more appropriately addressed through alternative clinical routes. It was reported that the service had been seeing between 40 and 50 patients who, as a consequence of the disjointed pathways and limited diagnostic availability in the late evening, experienced extended waiting times and, in many cases, required transfer to different sites to complete their care. The Committee were further advised that following the revisions to the operational model and opening hours, there had been a marked improvement in performance. It was stated that the Trust had achieved 100% compliance with patients being seen within 4 hours at the Central Middlesex Hospital Urgent Treatment Centre. Members were informed that this outcome represented the intended improvement in patient flow and clinical pathway efficiency arising from the revised operating hours.

In continuing the presentation to the Committee, Pippa Nightingale reported that a comprehensive public engagement process had been undertaken. This included two engagement events held both in person and online attendance. It was further stated that a questionnaire had been disseminated through all patient communication channels and that engagement levels had been good. Members were advised that the feedback received indicated that there would be minimal impact on patients as a result of the revised operating model. It was noted that the Ealing site had been used as a point of comparison in understanding urgent care usage and patient behaviours. It was emphasised that urgent care attendance was distinct from attendance at a GP or a pharmacy, and that the changes had been configured to signpost patients to the right service in the right place. The Committee were further advised that, through the transition to the revised hours, no complaints had been received from patients.

The Chair thanked Pippa Nightingale for her presentation to the Committee and then moved on to invite members to ask questions in relation to the information presented, with the following being noted:

- As an initial question, members noted that the reduction in operating hours represented a significant change from the previous year. Concern was expressed regarding the distance between the Trust's three hospital sites and the potential impact on transfer times. Reference was made to winter pressures, during which large numbers of patients required triage and were often waiting in corridors. Views were sought on what would happen in circumstances where an individual had suffered a stroke and was not receiving timely care. In response, Pippa Nightingale (Chief Executive Officer, London North West University Healthcare NHS Trust) clarified that an individual experiencing a stroke would not attend an Urgent Treatment Centre but would instead be taken directly to an Accident and Emergency (A&E) Department. Members were advised that the Urgent Treatment Centre focused on minor illnesses and injuries. The importance of ensuring that patients entered the correct clinical pathway from the outset was emphasised so that they received the appropriate level of care.
- In sharing a personal experience of attending the Urgent Treatment Centre, a member stated that there was a significant assumption that members of the public knew where they should go in an emergency, yet even as a councillor they had not been aware of the correct point of access during their own emergency visit. The member reported that they had queued for a long period before being referred elsewhere and had then waited an additional hour to be seen. It was questioned why services appeared so determined to direct patients to Northwick Park Hospital and whether the Trust was satisfied that this model was functioning effectively. In response, Pippa Nightingale (Chief

Executive Officer, London North West University Healthcare NHS Trust) conveyed that national promotion was needed to encourage patients to use the correct triage routes in an emergency, including the use of NHS 111. The need to promote the Talk Before You Walk initiative was emphasised to ensure that patients received the correct clinical advice and were directed to the appropriate site. It was additionally stated that ensuring patients were routed to the correct pathway was essential to improving patient care and achieving more effective clinical outcomes.

- Members noted that when the NHS initiated a reduction in operating hours for the Urgent Treatment Centre at Central Middlesex Hospital, residents often feared that services would eventually disappear altogether. Assurance was sought that the Urgent Treatment Centre itself would not be removed in the future. In response, Pippa Nightingale (Chief Executive Officer, London North West University Healthcare NHS Trust) advised that Central Middlesex Hospital had more services than ever before and that it was regarded as one of the best hospital estates in London. It was stated that significant elective and specialist services had been introduced, including a new endoscopy suite. Members were further advised that the Trust was making maximum use of the available facilities. It was additionally stated that the reduction in Urgent Treatment Centre hours was not driven by financial considerations but by the need to allocate resources where demand existed and where patients were presenting.
- Concern was expressed that approximately 40 people had taken part in the engagement exercise, stating that this represented a very small proportion of the population served by Central Middlesex Hospital. Details were sought on what more could have been done to secure a higher response rate. In response, Pippa Nightingale (Chief Executive Officer, London North West University Healthcare NHS Trust) explained that the Trust always sought to engage as widely as possible, although engagement activity had to be undertaken within specific timeframes. It was further explained that the change in opening hours had to be implemented before the winter period, which was the busiest time of year for the service. Members were advised that engagement had been carried out through all the Trust's communication channels, which were described as proactive channels with strong user voices. It was stated that engagement levels often varied depending on the nature of the proposed change. In this case, usage during the affected hours had been extremely low, meaning that relatively few individuals were impacted.
- Questions were raised around whether the engagement process had been sufficiently comprehensive, particularly in terms of the number of individuals

who had been consulted and who had responded. It was noted that data indicated that a petition containing 570 signatures had been submitted opposing the reduction in hours. Members queried whether the petition had been considered by the Trust before implementing the change and whether an Equality Impact Assessment had examined the demographic composition of individuals who might require access to the Urgent Treatment Centre. In response, Pippa Nightingale (Chief Executive Officer, London North West University Healthcare NHS Trust) advised that the exercise undertaken had been an engagement process rather than a formal consultation and that the changes did not meet the NHS threshold for a statutory consultation. It was reported that engagement activity had taken place and that written and verbal feedback from both face to face and virtual sessions had been collected and analysed. It was noted that the petition had not been submitted until after the change had been implemented. Engagement had commenced in October 2025, the revised hours had taken effect in February 2026, and the petition had been received subsequent to that date. Members were further advised that the Trust continued to monitor the situation and had not received any complaints or identified any clinical issues arising from the change. Members heard that feedback had been positive in terms of staff being able to see patients more efficiently.

- Members expressed concern about pressure on Northwick Park Hospital, which was described as extremely busy and were keen to seek details on why the reinstatement of two A&E Departments was not being considered. Members further expressed a desire to see a holistic service provision across the borough. It was also questioned whether the Trust believed that the right facilities were located in the right places. In response, Pippa Nightingale (Chief Executive Officer, London North West University Healthcare NHS Trust) highlighted that this issue formed part of a wider strategic discussion across London regarding A &E services. It was also noted that consideration of Office for National Statistics (ONS) population data, including evidence that populations had shifted from inner to outer boroughs, had informed service planning, including additional capacity that had been introduced at Northwick Park Hospital over the previous 2 months to manage increased demand.

The Chair thanked Pippa Nightingale for responding to the Committee's questions and then moved on to invite her to provide an update on the position at Northwick Park Hospital in relation to sickle cell and the hydrotherapy pool:

- In providing an update, Pippa Nightingale (Chief Executive Officer, London North West University Healthcare NHS Trust) advised members that the hydrotherapy pool at Northwick Park Hospital had closed in August 2025. It was explained that, following the closure, the Trust had worked with Local

Authorities and local sports centres to ensure that hydrotherapy facilities continued to be available within the community. It was reported that provision had been established within approximately 2 to 3 sports centres, supported by staff from London North West University Healthcare NHS Trust but operated by Local Authority-run facilities. It was confirmed that patients had been accessing those facilities successfully. Members were further advised that direct referral pathways were in place to the Hospital in Stanmore, and that this arrangement was functioning smoothly, with no recent concerns raised regarding patient experience or service capacity.

- Turning to sickle cell services, Pippa Nightingale described the programme as a progressive plan that had been developed with extensive patient engagement, particularly from the sickle cell community in Brent. Members were informed that significant improvements had been made and that the response from patients had been very positive. It was reported that a 24/7 tertiary access centre had opened in Hammersmith, specialising in haematology and sickle cell care. Patients were able to contact the centre directly, and paramedics were able to convey patients there during a crisis. This ensured that all patients had access to a tertiary facility when in the most acute stages of illness. The centre had been operational since January 2026. As part of Phase II, the Dedicated Sickle Cell Day Service had now opened at the Central Middlesex Hospital site. It was explained that the previous medical day service had been moved because sickle cell patients had reported anxiety when sharing clinical space with patients who were attending to receive antibiotics or who had active infections. The medical day service had therefore been relocated to Ealing Hospital, where demand was highest, and the day service at Central Middlesex Hospital was now fully dedicated to sickle cell patients and staffed by specialist clinicians. It was confirmed that this change had been well received by the sickle cell patient community. With regard to Phase III, Pippa Nightingale informed members that the next stage of the programme was to extend the opening of the Dedicated Sickle Cell Day Service to 7 days per week, as it was currently operating 5 days per week. Members were informed that the Trust aimed to deliver this within the next 6 months. Pippa Nightingale concluded by noting that Brent had one of the largest sickle cell populations in the country and that the borough now had an exemplary sickle cell pathway in place.

In seeking to bring consideration of the item to a close, the Chair thanked Pippa Nightingale and members for their contributions towards scrutiny of the briefing on the 'Reduction in operating hours at the Urgent Treatment Centre located at Central Middlesex Hospital'. As a result of the outcome of the discussion, the following recommendations were AGREED:

RECOMMENDATIONS

- That the reduction in operating hours be reconsidered on the basis of a more comprehensive engagement exercise, enabling a wider range of service users and stakeholders to contribute to the assessment.

- That population growth data be provided, together with analysis to identify the broader strategic context for service provision and to determine whether any gaps in provision existed.

7. Housing Management: Tenant Satisfaction Measures and Brent Housing Management (BHM) Performance

Councillor Donnelly-Jackson (Cabinet Member for Housing) was invited to introduce the Housing Management: Tenant Satisfaction Measures and Brent Housing Management (BHM) Performance Report. In presenting, it was stated that housing remained one of the defining issues for Brent, and that the quality of housing management was central to how residents experienced their council. It was noted that the Council continued to face a significant level of challenge arising from rising homelessness and structural financial constraints. It was emphasised that the Council remained fully committed to delivering safe, secure and decent homes for all residents who relied upon its services. Reference was made to the broader national context following the tragedy at Grenfell Tower, the death of Awaab Ishak which had led to the introduction of Awaab's Law, and the strengthening of building and fire safety requirements. It was stated that it was essential that tenants were placed at the centre of everything the Council did in this area. It was observed that safe, secure and decent homes were a foundation for a fair and thriving borough and were not optional for any responsible housing authority. Members were informed that the report before the Committee set out an overview of the Tenant Satisfaction Measures and the performance of Brent Housing Management. It was explained that the Tenant Satisfaction Measures provided one of the core mechanisms through which the Council assessed tenant views and their experience of the housing service.

In continuing the presentation, Tom Cattermole (Corporate Director Residents and Housing Services) added that current performance was not always at the level that residents expected and that such a position was not tenable. It was stated that the report represented a transparent and accurate account of the issues, the improvements achieved to date, and the changes being delivered. The measures put in place to address the issues identified were outlined. It was confirmed that a Housing Tenant Satisfaction and Improvement Programme had been established, chaired by the Chief Executive, providing clear governance, delivery oversight, grip and accountability in respect of the required improvements. Members were further advised that resident scrutiny had been strengthened through the Housing Management Advisory Board, chaired by Dawn Martin. Several key areas of focus within housing management were highlighted. The first related to voids, where the backlog was reducing. The second concerned compliance, where improvements were being made although data systems continued to be stabilised, with supporting information technology systems forming part of the ongoing improvement work. The

third area was repairs, where significant improvement had been recorded since autumn 2025, although capacity remained tight. The final area related to complaints, where volumes continued to rise. It was stated that this reflected both service issues and increased resident awareness, with learning being embedded as part of the system. It was noted that void losses and arrears had a direct impact on the Housing Revenue Account (HRA) and that improved performance in these areas was essential, as had been reported to the Resources Scrutiny Committee in the previous week. In concluding the presentation, it was emphasised that the approach remained honest about current weaknesses, focused on residents, and underpinned by strong governance, accurate data and political and organisational leadership. The Chair thanked Councillor Donnelly-Jackson and Tom Cattermole for their presentation to the Committee and then moved on to invite members to ask questions in relation to the information presented, with the following being noted:

- As an initial query, members queried why data quality and reporting issues had been a recurring theme in the report and sought clarification on what action was being taken to resolve these issues holistically. In response, Tom Cattermole (Corporate Director Residents and Housing Services) noted that a comprehensive improvement project had been established to address these matters. Spencer Randolph (Director Housing Services) further added that the core challenge in housing management had been the historic use of systems that were not fit for purpose. It was stated that the principal system used within housing management was NEC, which was an industry standard system but had not received required investment over the previous 8 years. It was explained that attempts had been made to build a dynamic system over the NEC platform, but this had not integrated effectively with NEC despite significant investment. Members were advised that two further systems were also used within housing management. The first, True Compliance, supported compliance workstreams such as gas safety, fire safety and electrical safety. This system had been introduced approximately two and a half years previously but had not been implemented or used correctly. The second system, Lifespan, supported decency and housing condition management and worked satisfactorily but did not integrate with the other systems. It was reported that the NEC structure was now being rebuilt and would become the predominant housing management system. It would act as the single source of information, with True Compliance and Lifespan integrated within it to enable full data consolidation. Members heard that this project had been underway for approximately 6 months and that the first phase was expected to be introduced by May or June 2026. The overall programme was anticipated to take approximately 18 months. It was additionally mentioned that the Council managed approximately 12,500 council and leasehold properties. It was noted that some leaseholders did not reside in their properties and therefore additional addresses were required on the system, with an estimated total of between 20,000 and 25,000 addresses. It was reported that approximately 900,000 individual address related data had required cleansing within NEC. It was confirmed that the Council was nearing completion of the data cleansing process, particularly for True Compliance, with completion anticipated by May 2026. It was further

stated that validation of properties was ongoing and that officers were now confident that all properties requiring a fire risk assessment were recorded on the system. Contractors were undertaking outstanding assessments. Members were informed that the same validation processes were underway for gas, electrical safety, legionella and asbestos. It was emphasised that the scale of the project was considerable but essential, as the system established would be used to manage the housing stock for the next 20 years.

In noting the response received, members suggested that a full report be provided to the Committee on the operation of the housing management systems, setting out how the previously separate systems were being integrated into the rebuilt NEC system to ensure that all systems used within Housing Management were being brought together effectively.

- Details were sought on the reasons for the increase in disrepair cases. In response, Spencer Randolph (Director Housing Services) explained that repairs and maintenance related to day-to-day repair work, most of which was reactive. Disrepair, by contrast, concerned legal claims brought by tenants alleging that the Council had failed to undertake necessary repairs, often in relation to damp and mould. It was stated that there had not been a substantial increase in repair requests, with approximately 27,000 cases per year remaining typical. However, there had been an increase in completed repairs, largely due to the move from a single repairs contractor, Wates, to a dual contractor model. Since October, Mears had covered the east of the borough and Wates the west. Legacy repair cases resulting from the transition had been cleared, resulting in higher completion numbers. It was noted that the housing stock was ageing and that limited capital investment in recent years had contributed to increased repair needs. Work was underway to reestablish capital investment priorities based upon decency standards and identified need. It was highlighted that increased reporting of damp and mould reflected both evolving circumstances and improved resident awareness resulting from communications activity. It was emphasised that while some increase had occurred, the Council did not expect numbers to exceed the approximate 27,000 annual repair cases.

Councillor Donnelly-Jackson (Cabinet Member for Housing) added that while legitimate disrepair claims should never be minimised, the Minister for Housing had issued a call for evidence in February 2026 regarding whether claims farming was contributing to rising national disrepair claims. Reference was made to the prevalence of no win no fee arrangements and referral fees. Members noted that the Council did not know the extent to which any local increase was attributable to claims farming, but that the issue was recognised nationally. It was reaffirmed that residents with legitimate claims should always be supported to bring them, particularly in the context of Awaab's Law.

Tom Cattermole (Corporate Director Residents and Housing Services) further added that increased regulatory expectations had arisen following Grenfell and Awaab's Law. Reference was made to section 11 of the committee report, which explained that complaints had increased due to

residents being encouraged to complain and having higher expectations of the complaints process.

Councillor Donnelly-Jackson (Cabinet Member for Housing) additionally mentioned that complaints were essential in supporting service improvement. Reference was made to the recent deep dive review undertaken by Elizabeth Skillen (Quality Assurance and Standards Manager) and emphasised the importance of distinguishing between service requests and complaints, noting that these could sometimes become blurred. It was stated that the Council sought not to avoid complaints but to treat them appropriately so that learning could be embedded. It was emphasised that complaints should be acted upon promptly, resolved at the first possible point of contact, and handled in a respectful manner that placed tenants at the centre of service delivery. It was stressed that complaints were not the responsibility of Brent Housing alone, but required a whole Council approach, ensuring that any issue raised at any point of contact was captured and addressed.

- Members were keen to seek details on how complaints relating to antisocial behaviour were being addressed. In response, Spencer Randolph (Director Housing Services) highlighted that there had been some improvement in the perception of how antisocial behaviour was being managed. It was confirmed that officers were bringing forward a new Anti-Social Behaviour Strategy and were working across departments, including with the antisocial behaviour team, to consider how additional officer capacity could be funded to take a more proactive approach in relation to council housing. It was noted that antisocial behaviour constituted a significant proportion of the complaints received and included issues such as fly tipping, the dumping of rubbish and nuisance neighbours.

Councillor Donnelly-Jackson (Cabinet Member for Housing) added that antisocial behaviour was an issue raised across various estates and that the Council listened carefully to those concerns. It was stated that improved coordination with the community safety team had been necessary, which had informed the development of the upcoming Anti-Social Behaviour Strategy. It was confirmed that the strategy would be subject to consultation, allowing tenants, leaseholders and other residents to contribute. Further reference was made to the Brent Joint Action Group (BJAG) meetings, where the police, Brent Housing Management, housing associations and other partners met directly to discuss approaches to addressing antisocial behaviour on estates. It was acknowledged that further improvement in this area was required.

- Co-opted members made reference to the detail provided on page 42 of the committee report which concerned satisfaction with the landlord's approach to handling complaints. It was observed that only 24.6% of respondents appeared to be satisfied and members questioned whether further information was available to explain such a low figure. In response, Spencer Randolph (Director Housing Services) emphasised that the sector as a whole experienced low satisfaction levels in this area. It was acknowledged that Brent was in the lower quartile and accepted that improvement was required.

It was reported that improvements were being observed and that these were likely a result of measures introduced to strengthen complaint handling. It was noted that the Tenant Satisfaction Measures included perception-based questions and that it could be difficult to determine what residents were thinking when responding. It was confirmed that, in the most recent Tenant Satisfaction Measures survey, supplementary questions had been included to enable further analysis. The report from that exercise was awaited and would enable deeper understanding of the responses. It was added that local authorities performing better across the Tenant Satisfaction Measures often had newer housing stock or more established engagement approaches. It was further explained that the questions were prescribed and asked in a standard format, but that the additional supplementary questions would help officers identify areas requiring improvement.

- Co-opted members then referred to paragraph 6.20 within the committee report and questioned how many staff were within the temporary lettings team. In response, Tom Cattermole (Corporate Director Residents and Housing Services) indicated that the team consisted of 4 staff members.
- Following on from the previous question, co-opted members further asked whether financial or regulatory constraints were preventing an increase in staffing, noting that the team would likely be required to undertake additional deployments. In response, Tom Cattermole (Corporate Director Residents and Housing Services) stated that as tenants moved into new build properties, the Council received additional rental income and increased council tax, which supported the service. It was explained that the pressure placed on the new team of area tenancy managers, when combined with the introduction of 892 new build properties within the year, had been significant. It had therefore been necessary to introduce temporary resourcing to support the increased workload.
- Representatives of the Brent Youth Parliament referred to new legislation arising from Awaab's Law and noted that a significant proportion of Brent residents did not have English as their first language. The representatives highlighted that opportunities for parents to access learning spaces had reduced since the Covid period and questioned what steps the Council was taking to ensure that migrant communities were fully informed of their enhanced rights and of the risks associated with substandard housing. In response, Tom Cattermole (Corporate Director Residents and Housing Services) confirmed that the Council was fully committed to ensuring that information was accessible. The Committee heard that all published communications could be translated online using the Council's translation tool. It was also noted that the contact centre included staff who could speak many of the approximately 100 languages represented in Brent. It was added that area tenancy management teams were also multilingual. Reference was additionally made to Brent Hubs, which formed part of resident services, and it was noted that many residents used the hubs as a first point of contact, where staff held a diverse range of language and advice skills.

Councillor Donnelly-Jackson (Cabinet Member for Housing) additionally mentioned that in addition to multilingual staff, officers frequently used tools such as Google Translate and that translation support was also available through the DA Languages service. The importance of ensuring that residents received information in the languages most useful to them was emphasised.

Tom Cattermole (Corporate Director Residents and Housing Services) further added that many partners within the hub network and the housing team worked with community organisations such as SAAFI and organisations representing Portuguese, Brazilian and Romanian communities. These organisations regularly advocated on behalf of tenants.

- Further details were sought on how repair performance had improved over the last 2 years. Members also raised concerns regarding new build properties and referred to complaints relating to Roy Smith Court concerning the entry door system, refuse chutes and access to the car park. On the South Kilburn Estate, there had been complaints about dumping and, more recently, a boiler breakdown. It was questioned whether contractors responsible for constructing the properties were required to rectify such issues or whether the costs fell to the Council. In response, Councillor Donnelly-Jackson (Cabinet Member for Housing) noted that both Mears and Wates had attended the Housing Management Advisory Board, which included tenant representatives, to present their performance. It was stated that the Council was scrutinising the contracts closely and that tenants had provided direct and candid feedback. It was confirmed that the Council was ensuring that contractors were fully accountable for repairs.

Spencer Randolph (Director Housing Services) further added that improvements in repairs performance could be attributed to the introduction of the new contractors and stronger contract management arrangements. It was noted that the presence of two contractors had created a degree of competition which had been beneficial. It was further reported that additional officer capacity had been introduced, enabling more inspections and verification of completed works. With regard to new builds, it was explained that issues were addressed within the defect liability period and the latent defect period, during which the Council could refer matters back to the main contractor if faults were attributable to installation or construction matters. It was noted that properties cited had not been built by the Council but had been procured during construction, after specifications had already been agreed. Where faults occurred, the Council sought to manage and resolve them as quickly as possible for residents.

- Clarification was sought on who was responsible for costs associated with decanting residents into temporary accommodation where defects occurred. In response, Spencer Randolph (Director Housing Services) advised that responsibility depended on the cause of the defect. Where defects were attributable to the main contractor, the Council would seek to recover costs. It was confirmed that there had been very few instances requiring decant as a result of new build defects. It was noted that issues such as breakdowns in

central heating systems could have large impacts where a central system served a large number of flats.

- Questions were raised around the financial impact of void properties, including the effect on lost rent and council tax liability, and members sought clarification on whether sufficient resources were being dedicated to addressing the issue of voids. In response, Spencer Randolph (Director Housing Services) explained that the void loss rate was approximately 4%, and that the service aimed to reduce this to approximately 2.5% by the end of the following year. It was stated that a significant programme of work had been undertaken to return void properties to use. A new team had been established, comprising 5 officers dedicated to void management and bringing properties back into use. It was confirmed that 2 contractors, Wates and a second contractor named Greyline, had been appointed specifically to undertake void works. Members were advised that approximately £5 million was expected to be spent during the current year on returning void properties back into use. It was stated that although progress had been made, officers continued to work through a legacy of longstanding voids. It was explained that returning those older voids, which required more extensive work, had negatively affected the average void turnaround time, despite the underlying improvement in performance. It was confirmed that the investment being made was substantial and that the service was focused on reducing void times in order to limit rent loss.

Councillor Donnelly Jackson (Cabinet Member for Housing) further added that when residents were moved from overcrowded or unsuitable accommodation into new build homes, properties were freed up behind them. Those vacated homes often required work before they could be relet. It was stated that although this created temporary voids, it was a positive outcome because families were moving into homes that better met their needs. Satisfaction was expressed that performance data indicated that the new team was on track, that performance was improving and that progress was moving in the right direction.

- Further questions were raised by members on whether the service had set a target for the void rate and turnaround time. In response, Spencer Randolph (Director Housing Services) noted that officers sought to reach a position by the summer in which almost all legacy voids had been returned to use. Members noted that a small number of legacy voids might remain due to the extensive works required, for example in cases involving subsidence or fire damage. It was stated that by the summer, the service intended to be dealing only with day-to-day voids arising from routine circumstances such as tenant moves, deaths or transfers, each of which required void works before the property could be relet.

Tom Cattermole (Corporate Director Residents and Housing Services) added that the financial impact of voids included lost rental income, council tax charges and increased spending on temporary accommodation. It was stated that officers would provide the Committee with the relevant figures, following the meeting.

Councillor Donnelly Jackson (Cabinet Member for Housing) further advised the Committee that, based on current performance taken from the Full Council budget, voids represented 5.07% of social and formula rent properties, resulting in an estimated rental income loss of approximately £3 million in the financial year 2025 to 2026. It was noted that peer authorities reported a median void loss rate of 2.2% and that a 1% reduction in void losses would generate approximately £0.6 million in additional annual income.

- Queries were raised on whether there was a proactive strategy to undertake planned repairs so as to minimise the likelihood of repairs escalating into larger issues. In response, Spencer Randolph (Director Housing Services) highlighted that historically the Council had not undertaken sufficient planned works. It was stated that provisional work had been carried out and that a strategy was being developed focusing on disrepair and decency. It was explained that the intention was to undertake proactive renewal of kitchens, heating systems and bathrooms once they reached a certain age, rather than waiting for failures. It was reported that the strategy was expected to be completed within the next 2 months and would inform the programme of planned works for the forthcoming year. Members were advised that approximately £16 million had been set aside for capital works during the next year. It was further reported that when the Council had referred itself to the Regulator, a key criticism had been the lack of comprehensive stock condition information. At that time decency levels of approximately 92% were being reported, although this figure had been based on only 40% of the stock having been surveyed within a five-year period. It was confirmed that the survey programme had been accelerated and that by the end of the financial year 70% of properties would have been surveyed. By the same time the following year 100% of properties would have undergone stock condition surveys. It was stated that the survey data would feed into the housing management systems, enabling accurate planning of maintenance and investment. It was confirmed that despite the significant increase in surveys undertaken, decency levels remained approximately 92% but without investment these levels would decline.
- Members sought clarification regarding voids arising from the allocation of new build homes. It was observed that although the Council had a long housing waiting list, some new build homes were being allocated to existing tenants, resulting in additional voids requiring turnaround work. It was questioned why new applicants were not being placed directly into new builds in order to avoid additional voids. Tom Cattermole (Corporate Director Residents and Housing Services) responded that the majority of residents moving into new build properties were coming from temporary accommodation.

Spencer Randolph (Director Housing Services) further mentioned that allocation of new build properties occurred through several mechanisms including direct offers, choice based lettings through Locata and transfers from overcrowded properties. It was emphasised that not all new build

allocations resulted in a vacated property but that a proportion did contribute to the void figures.

- Members observed that it was concerning that the process could result in the creation of additional voids at a time of significant housing need. In response, Councillor Donnelly Jackson (Cabinet Member for Housing) referred to paragraph 6.3 of the committee report, which described short term increases in void numbers as a result of the handover of 450 new homes. There was felt to be a need to see a more frictionless process, including earlier preparation for subsequent allocations when families moved into new build properties. It was noted that although voids were sometimes extended because applicants declined properties following viewings, choice remained a necessary part of the process. It was further mentioned that improving the efficiency of the process remained a priority.

Tom Cattermole (Corporate Director Residents and Housing Services) further added that approximately 70% of new builds were allocated to homeless households in temporary accommodation, 20% were allocated to transfer cases and 10% were allocated through the Homeseekers Private Rented Sector route.

- Representatives of the BYP referred to paragraph 12.9 of the committee report which indicated that Copilot AI was being used to support new recruits. The representatives questioned what environmental considerations had been taken into account in relation to the increased use of AI. In response, Councillor Donnelly Jackson (Cabinet Member for Housing) highlighted that AI had considerable potential to support public services. It was stated that the question of the environmental impacts such as water usage in data centres was an issue requiring consideration at national level. It was further explained that AI represented a whole Council approach rather than an issue specific to housing management. It was acknowledged that although AI had been referenced within housing reports, environmental considerations were a broader Council matter.

In seeking to bring consideration of the item to a close, the Chair thanked officers and members for their contributions towards scrutiny of the Housing Management: Tenant Satisfaction Measures and Brent Housing Management (BHM) Performance Report. As a result of the outcome of the discussion, the following recommendations and information requests identified were AGREED:

RECOMMENDATIONS

- That a full report be provided to the Committee on housing management systems, including a clear plan setting out how these are being integrated into the new NEC suite ensuring all systems used within Housing Management for gas safety, fire safety, electrical safety, housing decency and wider housing condition systems are being brought together effectively.

- That the development of a Repairs Preventative Strategy be explored and formalised.

INFORMATION REQUESTS

- That data be provided on the financial impact of void properties, including an assessment of rent arrears associated with void periods, income lost through missed rental collection, and any council tax liabilities arising during the vacancy of properties.
- That information be provided on key performance indicators, benchmarked against performance measures from other London borough

8. Area Tenancy Management Model

Tom Cattermole (Corporate Director Residents and Housing Services) was invited to introduce the Area Tenancy Management Model Report. In presenting, it was highlighted that Shanice Low (Area Tenancy Manager) and Georgia Gallagher (Area Tenancy Manager) were two of the Council's area tenancy managers, covering the areas from Willesden to Kensal Green and Kilburn. It was outlined that the area tenancy management model had been introduced in June 2024 in response to fragmentation between teams, weak handover processes, data quality issues and limited continuity in resident relationships. It was explained that the new model consolidated responsibilities into a single accountable role. Each Area Tenancy Manager, referred to as an ATM, was responsible for lettings, income collection, tenancy management, estate presence, early intervention and safeguarding from end to end. Members noted that the model remained relatively new and that recruitment and induction had taken time to complete. However, early evidence of positive impact was being observed, including increased tenancy audits, improved estate visibility and strengthened income performance during late 2025.

In presenting to the Committee on her role and the nature of cases she managed, Shanice Low (Area Tenancy Manager) informed the Committee that she had extensive experience within the Council. Prior to the restructure, she had worked solely as an income officer, focusing primarily on rent collection. Following the restructure, her role now encompassed income, tenancy management, lettings and acting as the first point of contact for prospective tenants. She reported that, upon taking up her new role, she had sent an introductory letter to every household within her management to inform residents of her role and provide her contact details. She then provided an example of a case relating to a resident referred to as Miss B, who was a management transfer moving from one area to another. She described how she had attempted to contact Miss B by email and telephone to arrange a viewing but had initially been unable to reach her. She subsequently received a response from Miss B's support worker advising that Miss B had significant vulnerabilities.

She explained that, after two cancelled viewings due to Miss B being hospitalised, Miss B eventually attended a viewing and expressed interest in the property but requested the installation of a wet room. Shanice Low (Area Tenancy Manager) contacted the occupational therapy team, who carried out an assessment and agreed to make the necessary adaptations. The sign up was coordinated and Miss B attended with her mother and support worker. Shanice Low advised that, because Miss B was hospitalised again following the sign up, she was unable to return the keys for her former property for approximately 6 weeks. As a result, Miss B incurred rent and council tax liabilities at both properties. Shanice Low explained that because she had established a relationship with Miss B's support worker, she had been able to coordinate communication and support arrangements to minimise the impact. She described how she had suggested a dual Discretionary Housing Payment application to assist Miss B in covering the rental charges associated with one of the properties. She further reported ongoing liaison with the allocations team to ensure that Miss B's interest in the property was understood despite her vulnerabilities and repeated cancellations. She also maintained contact with the occupational therapy team to confirm when the adaptations could be completed after the system was updated to show that Miss B had moved in. In concluding her presentation to the Committee, Shanice Low highlighted that her knowledge of Miss B's vulnerabilities enabled her to take a holistic approach to the tenancy, ensuring that issues related to lettings, rent and support needs were understood together. It was explained that without this integrated approach, the missed viewings or rent arrears might otherwise have been misinterpreted as a lack of engagement or non-payment rather than as consequences of Miss B's health and vulnerabilities.

In continuing the presentation to the Committee, Georgia Gallagher (Area Tenancy Manager) noted that she had joined the Council after the restructure in December 2024. She reported that she, too, had issued introductory letters to all residents within her management, setting out her role and contact details. She explained that she managed a high-rise block in Kilburn and had received a significant number of antisocial behaviour complaints relating to a particular property. Following inspections and checks, she discovered that the resident of that property was vulnerable and was a victim of cuckooing, whereby individuals involved in county lines activities took over the homes of vulnerable residents. She stated that she had submitted a safeguarding referral and worked closely with the antisocial behaviour team and the police. She undertook joint visits to the property with the police and social services and discussed the possibility of a management move. However, due to the level of community support the resident received from a neighbour, a move was considered inappropriate at that time. She therefore explored alternative safeguarding measures, including the use of closure orders. She explained that the block had wider issues including abandoned and vandalised vehicles and graffiti. Over the course of the year, she worked jointly with the repairs team, the compliance team and Vehicle Estate Services to address these issues. She sought 2 partial

closure orders: one to safeguard the vulnerable resident by providing police with enhanced powers of arrest in the event of unauthorised entry by non-tenants, and another to address the behaviour of a second tenant whose actions were contributing to the antisocial behaviour within the block. She informed the Committee that she had received excellent feedback from residents during the 3-month period in which the closure orders were in place. The closure orders had created a period of respite which enabled contractors to improve security measures, remove graffiti, and remove abandoned vehicles. She also reported that estate walkabouts had identified additional measures to prevent future antisocial behaviour. In concluding her presentation to the Committee, Georgia Gallagher highlighted that the work she had described had taken approximately one year and that she would next be focusing on engaging residents across the entire block through engagement events and other initiatives.

The Chair thanked Tom Cattermole, Shanice Low and Georgia Gallagher for their presentation to the Committee and then moved on to invite members to ask questions in relation to the information presented, with the following being noted:

- Members reported, specifically in relation to Clearwater House, that based on feedback received at a recent meeting, residents had raised concerns that complaints were not being responded to and that their housing point of contact within Brent Council appeared to change repeatedly. Residents felt that responsibility for their issues was being passed between different teams without accountability. It was stated that the information provided to residents when moving in, setting out who to contact for different matters, had been described as unhelpful. Members queried whether officers were aware of these concerns and what steps were being taken to address them. In addressing the issues highlighted, Councillor Donnelly Jackson (Cabinet Member for Housing) noted that a new case management tool had been implemented to support better identification and monitoring of learning from complaints. Members were advised that a full review of complaints handling had been launched in October 2024. With regard to Clearwater House specifically, officers undertook to examine the matter further. It was explained that, for some new build schemes, residents had been provided with guidance packs and that area tenancy managers had held meetings with residents, supported by other staff, to explain processes.

Kate Daine (Head of Housing and Neighbourhoods) confirmed awareness of issues at Clearwater House and explained that some difficulties had arisen across new build blocks where approximately 700 properties had been let. It was noted that many of the new build blocks were mixed tenure and involved mixed management arrangements, which made issues more complex and required officers to adapt as the service developed its approach. Kate Daine accepted the feedback provided and undertook to progress the matter

following the meeting. It was stated that officers would ensure that communication improved, that residents were clear about their points of contact and that complaint escalation routes were properly understood and responded to.

- Details were sought on whether the Council, together with the police, used any form of Section 7 eviction notice for individuals who should not be residing in properties. In response, Georgia Gallagher (Area Tenancy Manager) highlighted that, in broader situations involving closure orders, a full closure order could be sought. It was explained that when a full closure order was granted, the property was closed and all individuals were required to vacate, with the tenant being decanted elsewhere temporarily. This could then lead to eviction where the tenant was responsible for serious antisocial behaviour, or to safeguarding interventions where the tenant was vulnerable. It was noted that closure orders could be used where individuals engaging in antisocial behaviour were accessing the property, and that closure orders provided a faster means of regaining control of a property pending possession proceedings.
- Members sought clarification on how long a property remained closed when a closure order was in place. In response, Spencer Randolph (Director Housing Services) indicated that where a partial closure order was issued, the tenant could remain in occupation but named individuals or any other persons who were causing issues were prohibited from entering. Any breach of the order could result in arrest and prosecution. In the case of a full closure order, the order normally lasted between 3 and 6 months. A further closure order could be applied for if required. It was emphasised that closure orders were interim measures, aimed at stabilising the situation and protecting residents. It was noted that tenants retained their tenancy during the closure order period, but if the tenant had been responsible for antisocial behaviour, the period could be used to progress ending the tenancy. It was clarified that the property could not be relet while the closure order remained in place.
- Members questioned whether the police were still utilising Section 7 eviction notices for individuals who should not be residing in properties. In response, Kate Daine (Head of Housing and Neighbourhoods) highlighted that the Council worked closely with Legal Services and the Community Protection Service to ensure that the most effective and timely legal route was taken in each case. It was further stated that public sector equality duty assessments were undertaken to ensure that any action taken was appropriate for vulnerable residents. It was emphasised that the Council always sought the most suitable and proportionate option for the resident affected.

- In noting that the current debt position was over £7 million and significantly above that of most London boroughs, members questioned what actions were being taken to address the issue. In response, Kate Daine (Head of Housing and Neighbourhoods) highlighted that the area tenancy managers, including Shanice Low (Area Tenancy Manager) and Georgia Gallagher (Area Tenancy Manager), had achieved excellent performance in respect of Patches rates, both achieving rates of 100%. It was stated that the next priority was to substantially improve debt collection. It was confirmed that a small team of 4 temporary staff was being recruited. Members noted that the first phase of the NEC remediation project was focused on rent collection and data improvement, and that officers anticipated improved performance in the next financial year as this work progressed.
- Members queried the effectiveness of estate walkabouts in achieving tangible improvements and shared learning. In response, Tom Cattermole (Corporate Director Residents and Housing Services) emphasised that estate walkabouts had been highly effective. It was expressed that he had gained significant insight from attending walkabouts with councillors and with staff on the ground. It was noted that residents engaged openly and readily, raising concerns and also complimenting their area tenancy managers.
- Further clarification was sought on what mechanisms were in place to ensure that issues identified during walkabouts were followed up, resolved and communicated back to tenants. In response, Kate Daine (Head of Housing and Neighbourhoods) shared with the Committee that improvements had been made following the appointment of new technical officers within Property Services. Previously, officers had struggled to coordinate estate level repairs and maintenance. It was stated that Property Services now attended almost all walkabouts and were able to log repairs immediately. It was confirmed that action plans were in place for each estate and that Property Services now held responsibility for progressing repairs and providing meaningful updates before the next walkabout. It was further highlighted that tangible improvements were beginning to be seen.
- Co-opted members expressed that they were pleased to hear the personal relationships described by officers and by the letters sent to residents, which were perceived as approachable. A question was then posed to officers on what single issue tenants most often raised based on officers' experience on the ground. In response, Georgia Gallagher (Area Tenancy Manager) shared that, when beginning her role, many residents had not seen an officer for a long period of time. It was explained that residents often experienced frustration when using the contact centre and welcomed in-person contact. It was noted that tenants did not always feel heard. It was also explained that

area tenancy managers often acted as a point of contact between different departments and that tenants sometimes assumed responsibility lay solely with the Area Tenancy Manager. Georgia Gallagher reported that her repairs were being completed more quickly and that escalation through area tenancy managers had enabled fast tracking of some cases.

Shanice Low (Area Tenancy Manager) further added that previously many complaints related to residents not knowing who their housing officer was, as well as complaints about repairs. It was highlighted that clarity around points of contact had improved, though repairs continued to account for a significant proportion of complaints.

- A Member recognised the value of estate walkabouts and of the engagement they facilitated but questioned how walkabouts were planned and scheduled. The Member noted that they had received invitations for some estates within their ward but not others, and that walkabouts were sometimes scheduled without checking availability. The Member additionally questioned whether, after one year of operation, the number and size of Patches managed by area tenancy managers remained appropriate. In response, Kate Daine (Head of Housing and Neighbourhoods) assured the Member that she would review the scheduling arrangements. It was explained that walkabouts were placed in diaries and relevant councillors were invited but acknowledged that adjustments might be required for estates with only a small number of street properties. She invited the Member to contact her regarding specific areas. It was additionally stated that the Council attempted to reschedule walkabouts where councillors could not attend. It was further explained that Patches were designed based on geography, levels of antisocial behaviour, rental arrears, turnover of properties and other factors. It was acknowledged that the role of Area Tenancy Manager was busy and reactive but emphasised that processes would become easier as improvements continued across policies, repairs and systems. It was confirmed that Patch sizes remained under review.

In seeking to bring consideration of the item to a close, the Chair thanked officers and members for their contributions towards scrutiny of the Area Tenancy Management Model Report. As a result of the outcome of the discussion, the following recommendation was AGREED:

RECOMMENDATIONS

- That communications with residents at Clearwater House be improved with clear updates and to inform them with details of an accountable point of contact be following resident complaints that they were not receiving responses, that their housing point of contact changed repeatedly, and that cases were passed between teams without clear accountability.

9. Temporary Accommodation, Supported Exempt Accommodation and Homelessness Prevention

Councillor Donnelly-Jackson (Cabinet Member for Housing) was invited to introduce the Temporary Accommodation, Supported Exempt Accommodation and Homelessness Prevention Report. In presenting, it was stated that the report had been presented against the backdrop of a severe housing crisis. Members were advised that the Council had experienced a 21% increase in homelessness presentations, with cases expected to reach just under 9,000 by the end of the 2025 to 2026 financial year. It was further reported that the number of households placed in temporary accommodation had risen. It was emphasised that a significant amount of work was being undertaken in this area.

In continuing the presentation to the Committee, Tom Cattermole (Corporate Director Residents and Housing Services) added that the direction of travel within this important area of work was focused on reducing reliance on nightly paid placements, which were the most expensive form of temporary accommodation, and securing more stable accommodation for residents. It was stated that efforts were also directed towards strengthening quality assurance processes. It was highlighted that the Council was required to balance its statutory duties, the wellbeing of residents and the financial sustainability of the local authority.

The Chair thanked Councillor Donnelly-Jackson and Tom Cattermole for their presentation to the Committee and then moved on to invite members to ask questions in relation to the information presented, with the following being noted:

- Representatives of the Brent Youth Parliament began by questioning whether more specific data was available on the age profile of those placed in temporary accommodation. The representatives noted that the age range of 0 to 17 years was broad, encompassing a wide range of different needs and issues, and asked whether a more granular breakdown existed. In response, Laurence Coaker (Director Housing Needs and Support) indicated that a full breakdown of age groups was available and that officers were able to break down the age range in any form required.
- As a further issue highlighted, the Brent Youth Parliament representatives further stated that young people were particularly vulnerable, as referenced in paragraph 9.3 of the committee report and expressed concern that the report lacked clear actions regarding how young people could be safeguarded while living in temporary accommodation. It was noted that family wellbeing centres and Brent Hubs had been referenced as sources of support for families with young children. However, the representatives highlighted that a significant proportion of households were being placed

outside the borough or beyond the M25, raising concerns about whether comparable support was available for those placed at a distance from Brent. In response, Komal Samra (Head of Accommodation Services) highlighted that officers were working closely with colleagues across multiple service areas. An example was provided relating to public health, noting that regular visits were being arranged to temporary accommodation sites such as Anansi House and Knowles House. These visits were intended to ensure that young applicants received wraparound support and were signposted to relevant health services. The importance of face-to-face contact to avoid residents having to rely solely on email or contact centre channels to access holistic support was also emphasised.

- Following on from the previous question, the Brent Youth Parliament representatives queried what measures were in place to ensure that households placed at considerable distances, including locations such as Hartlepool, received equivalent support. The representatives highlighted that families placed far from Brent often faced barriers to education and that parents who did not speak English as a first language were likely to face additional difficulties accessing support services. In response, Tom Cattermole (Corporate Director Residents and Housing Services) highlighted that any resident, regardless of whether they lived within the borough, was able to access Brent Community Hubs. It was confirmed that residents placed outside the borough could contact the hub support service by telephone and access the full range of assistance provided by the hubs.

Komal Samra (Head of Accommodation Services) further added that when the Council placed a young person outside the borough, it had a duty to notify the receiving local authority. This ensured that the receiving authority was aware of the placement and that any relevant vulnerabilities could be addressed through appropriate service links. It was stated that significant work was underway to identify individuals who should not have been placed out of the borough and to prioritise moving them back into the borough or into more suitable locations.

- Representatives of the Brent Youth Parliament were also keen to seek details on whether the Council intended to incorporate examinations and key educational milestones into its placement framework. In response, Komal Samra (Head of Accommodation Services) noted that the Council's temporary accommodation placements policy, which was published online, required the Council to avoid placing young people sitting examinations at a considerable distance from the borough and ensured that placements remained within an acceptable travel distance. It was acknowledged that there were occasions when families remained in out of borough placements

for longer than intended. In such cases, the Council maintained a priority list to facilitate moves back into the borough or into closer locations. It was stated that the forthcoming supply of new leased temporary accommodation would assist in reducing these pressures.

- Members cited paragraph 4.1.5 of the committee report, which stated that the Council wished to undertake further work with institutional investors to secure long term low cost leased accommodation and requested an update on progress, the reasons for delays and what more could be done to accelerate this work. In response, Laurence Coaker (Director Housing Needs and Support) noted that a report would be presented to Cabinet in April 2026 and advised that the Council had identified four or five providers with a pipeline totalling approximately 360 suitable units for potential inclusion in long term leases of ten years or more. It was explained that progress had been slow because of the risks involved. Providers typically sought leases of over forty years and required index linked rent increases. The Council's income, however, was tied to the Local Housing Allowance, which did not rise annually and could remain frozen for several years. The Corporate Director Finance and Resources had therefore been clear that the Council could not enter into forty-year leases or index linked arrangements, as these would create long term financial pressures. It was reported that there had been a recent shift in the market. The Council had engaged Greenlight Commercial and Consulting to provide expertise in evaluating proposals, identifying credible providers and developing a shortlist to be presented to Cabinet in April 2026.
- Members referred to recent media reports involving a private landlord who had evicted tenants in order to relet the properties to a council as temporary accommodation. Assurance was sought that Brent Council would not enter into arrangements with such providers. In response, Laurence Coaker (Director Housing Needs and Support) assured the Committee that the Council would not knowingly enter into any arrangement with providers engaging in such practices. It was stated that many institutional investors were large pension funds seeking stable returns and that their business models were based on responsible investment. An example was provided in relation to Civic Nest, which worked constructively with Ealing Council to support residents to move on from temporary accommodation. It was further stated that Greenlight had extensive knowledge of the sector and was able to identify reputable providers and exclude those seeking to exploit the housing crisis.
- Members reported concerns that residents had raised regarding being in temporary accommodation for extended periods, including cases of

households remaining in such accommodation for 20 years. It was stated that some families were living in unsuitable conditions, including shared facilities, and children faced difficulties travelling to school when placed outside the borough. Questions were raised on how the Council addressed such cases. In response, Laurence Coaker (Director Housing Needs and Support) emphasised that the Council no longer had families living in shared accommodation or bed and breakfast accommodation. It was reported that during the summer the Council had approximately 20 households living in shared accommodation or bed and breakfast accommodation, but that this number had now reduced to 1, with the remaining family having accepted an offer of social housing pending resolution of a minor issue. It was stated that the new supply of leased accommodation, expected to begin arriving from September 2026, would assist significantly. The duty to notify receiving authorities when placements were made outside the borough was reiterated and it was stated that the Council continued intensive work to identify families who should be moved back into Brent or into more suitable locations. The risks associated with families remaining in leased accommodation for many years and not bidding on Locata properties because they were waiting for an ideal property which rarely became available were highlighted. It was emphasised that the Council encouraged all households in temporary accommodation to bid proactively.

- Members queried why empty void properties could not be used as temporary accommodation. In response, Laurence Coaker (Director Housing Needs and Support) explained that void properties could not be used because they required extensive repairs and would take many months to bring up to a habitable standard.
- Supplementary queries were raised regarding what mechanisms were in place to ensure that temporary accommodation was suitable and appropriate for residents. In response, Laurence Coaker (Director Housing Needs and Support) noted that approximately 60% of families were in nightly paid temporary accommodation, with the remainder in longer term leased accommodation. It was further noted that long term leased accommodation tended to be of higher quality. Where disrepair arose in leased accommodation, the Council's officers or housing providers, depending on the lease scheme in question, were responsible for resolution. It was stated that the most significant challenges were within nightly paid accommodation. Brent participated in the Setting the Standard pan London inspection regime, under which London council officers inspected and graded properties. It was added that the Council retained the ability to decant residents and refuse further use of particular providers until issues were addressed.

- Views were sought on how confident officers were that the Council was not applying a one size fits all approach to applicants. In response, Laurence Coaker (Director Housing Needs and Support) expressed that the Council operated within the statutory framework, which required accommodation offers to be suitable. It was stated that no two families were the same and that officers considered each household's circumstances, including support needs, vulnerabilities and mobility requirements. Affordability was also a significant factor.
- Councillor Donnelly Jackson (Cabinet Member for Housing) additionally noted that legislation required the Council to produce a personalised housing plan for each homeless applicant. It was reported that the Council had commissioned Bridges Outcomes Partnerships to examine temporary accommodation suitability for neurodiverse children. It was stated that suitability continued to be challenged and scrutinised and that the ongoing work to improve outcomes for vulnerable households was welcomed.

In seeking to bring consideration of the item to a close, the Chair thanked officers and members for their contributions towards scrutiny of the Temporary Accommodation, Supported Exempt Accommodation and Homelessness Prevention Report. As a result of the outcome of the discussion, the following information request was identified and AGREED:

INFORMATION REQUESTS

- That further data be provided to the Committee and Brent Youth Parliament setting out a more detailed breakdown of temporary accommodation figures by age group, as members of the Brent Youth Parliament noted that the current category encompassing all individuals aged 0 to 17 years was too broad and did not sufficiently distinguish between the differing needs and issues affecting children and young people within that wide age range.

10. Community and Wellbeing Scrutiny Committee Work Programme 2025-26

Having reviewed the work programme report, it was RESOLVED to note the Community and Wellbeing Scrutiny Committee Work Programme for the 2025/26 Municipal Year.

11. Community and Wellbeing Scrutiny Committee Recommendations Tracker

Having reviewed the Scrutiny Committee Recommendations Tracker, it was RESOLVED to note the progress of the previous recommendations, suggestions for improvement, and information requests of the Committee.

12. Exclusion of the Press and Public


There were no items that required the exclusion of the press or public from the meeting.

13. Any other urgent business

No items of urgent business were identified.

The meeting closed at 8pm.

COUNCILLOR KETAN SHETH
Chair

 <p>Brent</p>	<p>Community and Wellbeing Scrutiny Committee 30 June 2026</p>
	<p>Report from the Brent Safeguarding Adults Board</p>
	<p>Lead Cabinet Member – Cabinet Member for Adult Social Care (Cllr Muhammed Butt)</p>
<p>Brent Safeguarding Adults Board (Multi-agency safeguarding arrangements) Annual Report April 2025 - March 2026</p>	

Wards Affected:	All
Key or Non-Key Decision:	Non-key
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
List of Appendices:	Appendix 1 – Brent Safeguarding Adults Board Annual Report 2025-26
Background Papers:	None
Contact Officer(s): <small>(Name, Title, Contact Details)</small>	Kayliegh-Ann Creamer Strategic Partnership Lead for Safeguarding Adults Brent Civic Centre Kayliegh.creamer@brent.gov.uk

1.0 Executive Summary

1.1. To enable members of the Community and Wellbeing Scrutiny Committee to consider the Brent Safeguarding Adults Board (SAB) annual report covering the period from April 2025 to March 2026. The SAB is an independent partnership Board that oversees the work and progress of safeguarding adult arrangements for partners in Brent. The annual report is produced to provide an update on work and progress of the Board and its member agencies over the year.

2.0 Recommendation(s)

2.1 The Community and Wellbeing Scrutiny Committee is asked to note the contents of the Safeguarding Adults Board (SAB) annual report (Appendix A).

3.0 Detail

3.1 Contribution to Borough Plan Priorities & Strategic Context

The SAB work has connections to the following outcomes within the Borough Plan:

A Healthier Brent – The SAB has links to various health forums, including the Drug and Alcohol Related Death Panel and inputs into Domestic Homicide Reviews & Offensive Weapon Homicide Reviews being undertaken. This enables members to be aware of the wider work being undertaken that also informs Board decisions and direction. One of Boards new strategic priorities focuses on Mental Health & Suicide prevention and is actively working with partners to ensure that policies and measures are in place to support and safeguards residents.

Thriving Communities – The SAB incorporates community engagement through its voluntary community sector members. The SAB has engaged with community groups to better understand their experience of safeguarding and is looking for practical approaches to incorporate lived experience in to it's assurance work. Community safety is also a standing member of the SAB, and there is representation from the SAB at the Safer Brent Partnership.

Prosperity and Stability in Brent – The SAB considers the impact on communities during a cost-of-living crisis and works with agencies such as housing and voluntary community sector members to have insight into the evolving landscape.

3.2 Background

3.2.1 Brent Safeguarding Adults Board is (SAB) a statutory multi-agency partnership board consisting of senior leaders from a range of organisations that deliver services to adults in the London Borough of Brent. It is chaired by an Independent Chair. The SAB is a wider partnership forum accountable to the Executive Group.

3.2.2 The SAB has a number of subgroups, details of their function and activity can be found noted in the annual report.

3.2.3 The objective of the SAB is to ensure that adults at risk are able to live their lives free from abuse and neglect. The way in which a Safeguarding Adults Board must seek to achieve its objective is by co-ordinating and ensuring the effectiveness of what each of its members does.

3.2.4 SAB members represent their organisations at the Board. The SAB is made up of statutory partners and non-statutory partners. It also has an independent chair. The statutory partners of the SAB are;

- Brent Council
- Metropolitan Police
- NHS West and North London Integrated Care Board

The non-statutory partners who attend the SAB include;

- London Ambulance Service
- London Fire Brigade
- London Northwest NHS University Hospital Trust
- Central and Northwest London NHS Foundation Trust
- Healthwatch Brent
- Voluntary organisations
- London Probation Service
- Public Health representation.

3.2.5 In order to provide oversight, the SAB must be independent of the council and its partners. There is an Independent Chair, Nicola Brownjohn, who assumed post in January 2024. The Chair holds all member agencies to account. The Independent Chair is held to account for effective working of the SAB by the Chief Executive of Brent Council.

3.2.6 The SAB has the freedom to put in place anything it deems necessary to achieve its objectives. This may include raising awareness of adult safeguarding or learning and development in relation to a particular area of practice.

3.2.7 The SAB should be assured that partners are putting systems in place to protect adults at risk in the area for which it is responsible. Including people with additional needs and under-served communities.

3.2.8 All SAB members have an obligation to provide the board with resources to support its functions. This includes having a representative present at the Board and where applicable, at its sub-groups. It may also include contributing financially and/or providing relevant information to the Board.

3.2.9 Brent's safeguarding partnership arrangements –

Brent's Board arrangements consist of a three-tier structure:

- Tier 1 – The Joint Partnerships Executive Group - provides high-level strategic leadership from the three statutory safeguarding partners.
- Tier 2 - Brent Safeguarding Adults Board - diverse and wider-ranging partnership group
- Tier 3 - Delivery focussed sub-groups - responsible for carrying out specific statutory duties of the partnership, these include:
 - Case Review Group
 - Performance & Audit group
 - Themed/focused Task & Finish groups as and when required

3.2.10 Partnership support staff arrangements - Support staffing arrangements for the SAB are funded and resourced by Brent Council.

3.2.11 The Strategic Partnerships Team is responsible for leading the coordination of the arrangements and is managed by the Strategic Partnerships Manager. The team is based in the Children, Young People and Community Development Directorate.

3.2.12 Alongside the SAB arrangements, the Strategic Partnerships Team also currently coordinates activities for other strategic partnerships in Brent including Brent Safeguarding Children's Partnership, Brent Health and Wellbeing Board and Brent Children's Trust.

3.2.13 This staffing structure enables stronger strategic coordination between the strategic partnerships in Brent to both avoid duplication and develop joint initiatives. It also successfully facilitates a level of independence from the operational safeguarding activity of the council.

3.2.14 The Brent Council Governance Team provide some administration support for both the Executive Group and Safeguarding Board meetings (approximately 1 day a month).

3.2.15 The Safeguarding Adults Board has a responsibility under the Care Act 2014 to produce an annual report each year that outlines the work and progress of the Board and its member agencies. This report must be signed off by the Board and is published on the Brent Safeguarding Partnerships website upon sign off agreement.

3.2.16 **Key activities** – During 2025–26, the Brent Safeguarding Adults Board (BSAB) delivered significant multi-agency improvements across its core priorities of self-neglect, housing need, substance misuse, and learning from Safeguarding Adults Reviews (SARs). Key achievements included:

- The development and launch of a comprehensive Self-Neglect Toolkit and associated training resources
- Stronger governance and data oversight through the new Performance & Audit subgroup, and improved multi-agency approaches to complex risks such as cuckooing, homelessness, mental health, and exploitation.
- The Board strengthened system learning by embedding SAR findings into workforce training, introducing short-form learning briefings and the "Safe-Tea" podcast series
- Modernising governance through task-and-finish groups to accelerate improvement activity
- The Board also approved a new strategic plan for 2026–28, setting renewed priorities around safeguarding adults with complex needs and preventing harm earlier, underpinned by a stronger emphasis on community engagement, workforce effectiveness, and responding to emerging digital risks

3.2.17 **Identifying and addressing key priorities**

The SAB has agreed its strategic plan for 2026-2028 consisting of the following priority areas:

- Safeguarding those with complex care and support needs (Mental health and suicide and Homelessness linked to safeguarding)
- Prevention of harm for those with care and support needs

The Safeguarding Adults Board annual report (Appendix A) contains the detail of the priorities and the plan for the Board to progress them. [REDACTED]

3.2.18 Partnership Working – Key Board member organisations provide support and input across the Brent Safeguarding Adults Board system via the Boards regular subgroups, Task and Finish, project groups and via routine updates. This ensures there is both assurance and a rounded input on important pieces of work that require multi-agency input to develop and improve safeguarding processes In Brent.

3.2.19 National, Regional and local learning

The Board is connected to the National Safeguarding Adults Board and Chair networks to stay abreast of emerging national themes. This creates opportunities for the Brent SAB to identify and link learning with other SAB's across the UK. The Chair has now set up a regional London SAB Chairs group, which will be merging with colleagues to align with the new ICB footprints.

In response to the newly published Pan London Safeguarding Procedure policy guidance, the Board has an active task and finish group exploring what this means for Brent and where more work may need to be done to align with these regional guidelines. The group are working together to ensure that Brent is working within the guidance and looking at areas where this may need to be strengthened.

The Board has also responded to the ministerial letter in light of safeguarding responses to homelessness deaths and has worked with partners to implement and embed a review process to better share learning and create a clearer line of assurance to the Board when such incidents occur.

3.2.20 Forward planning - The Board is in 'phase one' of its new 2-year strategic priorities focus, which will be reviewed and amended at the end of 26/27 and new goals be set for the second half of the period.

4.0 Stakeholder and ward member consultation and engagement

4.1 The newly appointed Lead Cabinet Member for Community Health & Wellbeing, Councillor Butt will be included as a member of the Safeguarding Adults Board and will be given the opportunity to attend key meetings to input to the work of the partnership.

5.0 Financial Considerations

- 5.1 For the 2025/26 financial year, the SAB had an annual budget of £68,415 excluding staff costs. The budget is made up of contributions from the three statutory partners; Local Authority 54.1%, ICB 38.6% & Metropolitan Police 7.3%. A full breakdown of the budget is included in in the annual report (please see Appendix A).
- 5.2 As the SAB unusually incurred no SAR reviewer fees in in 25/26, there was an underspend and funds not spent were moved to reserves. The reserves will be drawn upon to cover the costs of the independent reviewers commissioned to undertake reviews where the budget in any given year is insufficient to cover the costs incurred. This will ensure that the Board is able to continue meeting its statutory requirements going forward.
- 5.3 Aside from administration and completion of mandatory Safeguarding Adult Reviews, the budget is predominantly spent on the SAB Chair fees, learning events and running a joint Learning and Development offer with the Children's Partnership.
- 5.4 The local authority makes additional contributions in the form of staffing costs to support the running of the SAB.

6.0 Legal Considerations

- 6.1 The Care Act 2014 directs local authorities to set up a SAB covering their area with core membership from the local authority, the Police and the NHS and the power to include other relevant bodies.
- 6.2 The Care Act places a requirement on SABs to; publish an annual report and strategic plan and to hold partner agencies to account for how they work together to protect adults from neglect or abuse. The Act states that partner agencies and services must work together to implement strategies to protect adults at risk of abuse and neglect locally.
- 6.3 The Care Act 2014 also requires the SABs to commission Safeguarding Adult Reviews under Section 44 where the threshold is met. The Care Act 2014 requires partners to cooperate with the review process and Section 45 of the Care Act 2014 requires partners to supply relevant information to enable the Review to take place.

7.0 Equity, Diversity & Inclusion (EDI) Considerations

- 7.1 In carrying out its functions, the SAB will adhere to general equalities duties namely, eliminate unlawful discrimination; harassment and victimisation; to advance equality of opportunity between people who share a protected characteristic and those who do not; and to foster good relations between people who share a characteristic and those who don't.
- 7.2 The three Statutory Safeguarding partners have a shared and equal duty to make arrangements to work together to safeguard and promote the welfare of Adults in Brent. In discharging their duty safeguarding partners must be assured

by member agencies in the borough that multi-agency services are accessible, inclusive, and responsive to the diverse needs of Adults in Brent.

7.3 The Safeguarding partners also ensure that services are culturally aware and skilled in identifying, assessing, and meeting the individual needs of Adults in Brent.

7.4 The SAB has a responsibility to consider and implement recommendations in regard to EDI, where such themes present as part of a Safeguarding Adults Review. It also has discretion to carry out work outside of formal recommendations where it sees fit and aims to drive positive system changes and improved resident experiences.

8.0 Climate Change and Environmental Considerations

8.1 This report has no direct impact on the Council's environmental objectives and climate emergency strategy.

9.0 Human Resources/Property Considerations (if appropriate)

9.1 This report does not relate to any HR or property related issues.

10.0 Communication Considerations

10.1 This is not within the scope of consideration.

Report sign off:

Nicola Brownjohn
Brent Safeguarding Adults Board
Independent Chair

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BRENT SAFEGUARDING ADULTS BOARD ANNUAL REPORT

25-26

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Foreword

Brent Safeguarding Adults Board Independent Chair



I am particularly mindful of the growing challenges for the Brent communities and services working with them. As I commend this annual report in relation to the work achieved over the year in Brent, I know that the national and international issues are seeping into our communities. We need to be supporting each other and speaking up to protect those who are unable to do so for themselves.

My highlight of 2025-2026 was getting out into the community to hear from people with care and support needs, their carers, or as carers. The conversations I had have stayed with me and direct me when I am talking to those leading the agencies serving Brent communities.

During 2025-2026, the Brent Safeguarding Adults Board (BSAB) worked to complete the strategic plan (2024-2026). The priorities focused on self-neglect, housing need and substance misuse and learning from Safeguarding Adults Reviews. There have been substantial improvements in the three areas. Although these priorities are now completed, there is continuing work to do to ensure that there are sustainable improvements and positive impact. There is a plan for these areas to take forward.

The new strategic plan was approved by the Brent SAB in March 2026. We decided to have a short-term plan, just for a year. This acknowledges that there are external issues and most services are at points of considerable change. This does not reduce the impact I expect for the communities we serve.

The new strategic priorities will focus on:

1. Safeguarding those people with complex care and support needs- specifically focusing on mental health and homelessness issues linked to safeguarding.
2. Prevention of harm of those with care and support needs- we will be looking at how agencies strengthen their responses to people who are at the early stages of needing help to prevent harm occurring.

Additionally, we have shaped three golden threads which we will be looking for across the multi-agency system:

- Community Engagement
- Digital World
- Effective workforce for the Brent population

The BSAB has set clear areas of focus to ensure that there is evidence of the impact of the work of the priorities and golden threads.

My focus this year will be on particularly challenging the BSAB members on their data, visiting member agencies and continuing to hear from communities to help shape the BSAB work.

Do take care and support each other.

Nicola Brownjohn
Independent Chair for Brent Safeguarding Adults Board

02 BOARD ARRANGEMENTS

Brent Safeguarding Adults Board (SAB)

The Brent Safeguarding Adults Board is a partnership made up of statutory (as outlined in legislation) and non-statutory partners. The purpose of the Board is to be assured the organisations that deliver public and voluntary services to residents in Brent are compliant and proactive in their approach to safeguarding vulnerable residents.



The statutory partners are:

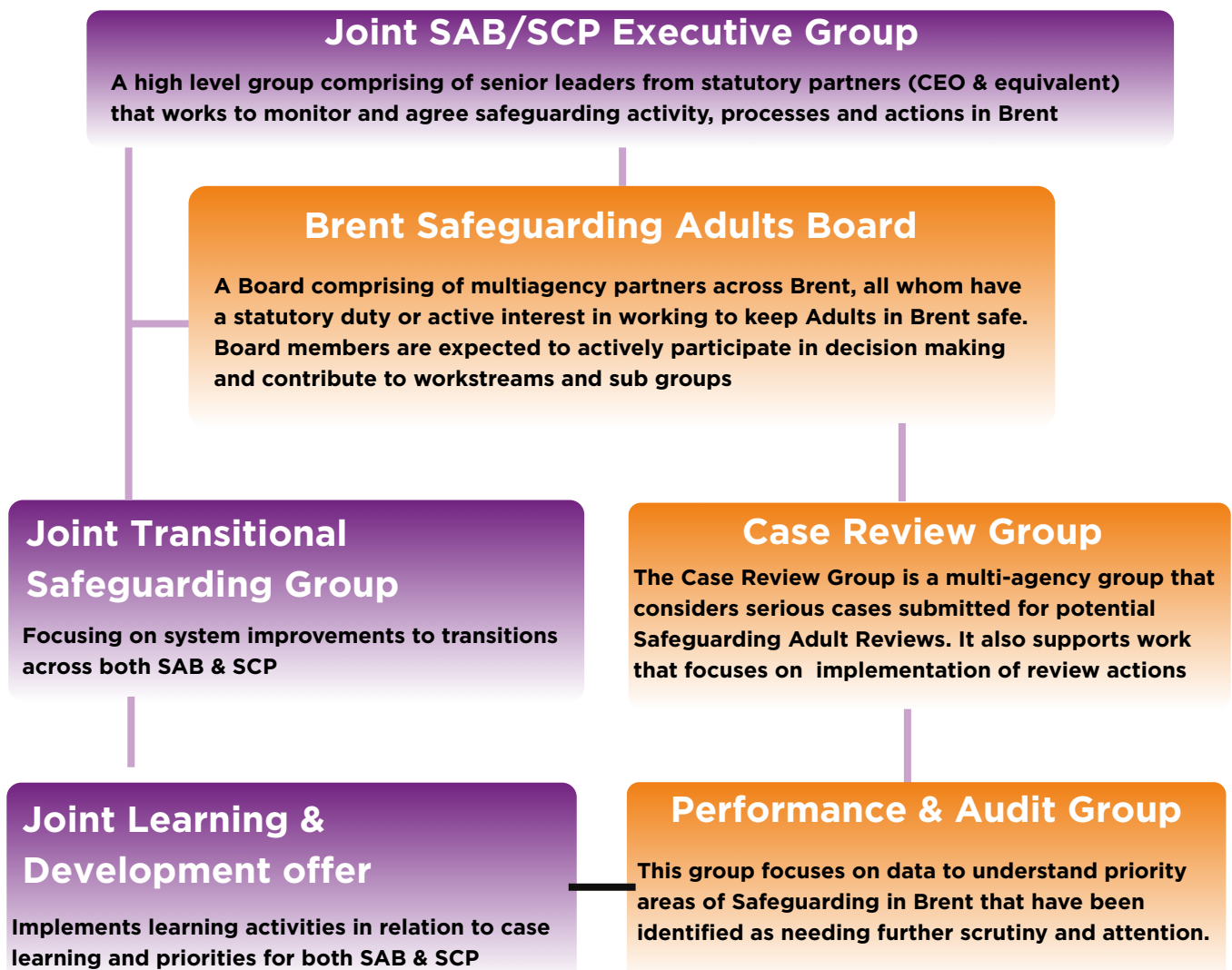
- Brent Council
- The Metropolitan Police
- Northwest London NHS Integrated Care Board

There are also many non-statutory partners who provide a valuable contribution to. At present, the Board meets bi-monthly.

Role of the SAB

The SAB is a strategic Board which provides oversight and direction to help partners work better together to achieve the co-produced strategic priorities in line with the Board's strategic plan. It also works to seek assurance from partners that sound systems are in place to effectively manage safeguarding concerns. It does this via reviews, audits and various sub-group activities

Brent Safeguarding Adults Board (SAB) Structure



02 BOARD ARRANGEMENTS

Who are our Partners?

Brent Safeguarding Adults Board Partners span a multitude of functions, many within the Local Authority, but also a wide range of public and voluntary services, with a shared commitment to protect vulnerable residents from harm, abuse and neglect.

As Board members, these organisations collectively guide and contribute to the work of the Board and its sub-groups. Below is a summary of the Board's current partners, and what services they deliver to Brent residents.

Partner	What service to they provide for our residents?
Brent Adult Social Care (LA)	Supports adults with care and support needs due to disability, illness, mental health or old age, including assessments, home care and safeguarding.
North West London Integrated Care Board	Plans and funds NHS health services in North West London and works with partners to improve health and reduce inequalities
Metropolitan Police	Prevents and investigates crime, responds to emergencies, protects vulnerable people and works with communities to keep London safe
Central London Community Healthcare NHS Trust	Provides community health services such as nursing, health visiting, school nursing and therapy in homes and local clinics.
Central and North West London Foundation NHS Trust	Provides mental health, learning disability, community health and addiction services for children, adults and older people
London North West University Healthcare NHS Trust	Provides hospital services including A&E, maternity care, surgery, outpatient clinics and emergency care.
Imperial College Healthcare NHS Trust	Provides hospital and specialist healthcare services including emergency care, surgery, cancer care, and research-led treatment across several London hospitals
Brent Probation Services	Supervises people serving criminal sentences in the community and works to reduce reoffending and protect the public

Partner	What service to they provide for our residents?
London Ambulance Service	Responds to medical emergencies, provides urgent care and transports patients to hospital when needed.
Brent Community Safety (LA)	Works with partners to reduce crime, anti-social behaviour and harm, including domestic abuse and violence prevention.
Via - New Beginnings / Brent Public Health (LA)	Provides drug and alcohol support services and works to improve health and wellbeing across Brent.
Brent Housing (LA)	Manages council housing, homelessness services, housing applications and support for people at risk of homelessness.
Brent Regulatory Services (LA)	Protects public health and safety through environmental health, food safety, licensing, trading standards and enforcement.
CRISIS	A charity supporting people experiencing homelessness with housing advice, education, employment and crisis support.
Department for Work and Pensions	Provides benefits, pensions and employment support, including disability benefits and help to find work.
London Fire Brigade	Responds to fires and emergencies and provides fire safety checks, prevention work and community safety education
Brent Healthwatch	Represents the public voice in health and social care, gathers feedback and helps improve local services.

03 BUDGET, INCOME AND EXPENDITURE

Financial Contributions

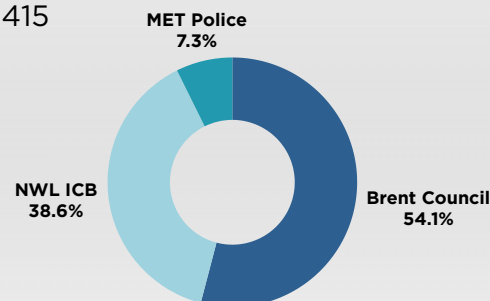
It is the responsibility of all Statutory Partners to ensure the Board is effectively established and supported, including through financial contributions. The Safeguarding Adults Board budget is therefore made up of monetary contributions from each Statutory Partner.

In 2025-2026 these have remained fairly stable year on year, 2026-2027 will see a much welcomed confirmed increase in funding contributions from the Metropolitan Police.

The Board is required to have an Independent Chair and Scrutineer to oversee, direct and be a critical friend in regards to opportunities for improvements in safeguarding activity in Brent. This vital position is funded via the collective Statutory Partners contributions.

This financial year the Board received the following contributions from Statutory Partners:

- **Brent Council:** £37,000
- **MOPAC:** £5,000
- **NWL ICB:** £26,415



These contributions also support in funding the cost of statutory reviews, learning and development activity and any technical and administrative overheads associated with discharging Board duties and activity.

Board resources

Board Partners play an essential part in carrying forward the work of the Board, but capacity to plan, monitor and execute the various statutory functions of the Board would prove extremely challenging for partners given their existing capacity and responsibilities.

Therefore, in line with standard practice across safeguarding partnerships nationally, the Local Authority provides additional funding to support staffing capacity, ensuring the effective management and delivery of Board activity, in addition to the financial contributions outlined above.

Staffing
1 full time Strategic Partnerships Lead (SAB Business Manager)
1 full time Strategic Partnerships Manager - Shared with SCP
1 part time Joint Learning and Development Officer - Shared with SCP (0.8 FTE)

As the independent Chair is only contracted to complete **30 days a year** for Brent (split over the year as approximately **2.5 days a month**) the Partnerships team are crucial in co-ordination and progress of workstreams identified by members around the priorities and system learning.

The Safeguarding Partnerships Team manage all aspects of the Boards work including:

- Managing and monitoring statutory processes, such as case reviews, statutory reviews, reporting and strategic planning.
- Scheduling, planning and executing all Board and subgroup meetings.
- Supporting partners to collaborate and complete both statutory and discretionary pieces of work.

Expenditure

This year, the majority of the Board expenditure was allocated to Chair fees including additional hours invested for community engagement work. There was also no payment this year due for our learning management system, as this is paid bi-annually.

Our Safeguarding Adults Reviews this have been light touch and proportionate, so have not attracted substantial reviewer fees as would normally be seen. Payment for this work will follow in 2026-2027.

During this financial year, the contribution included the set up costs for the launch and implementation of the Podcast project, which has required additional IT solutions. Next year we anticipate this may extend to speaker fees where beneficial.

Expense	Value (£)
Independent Chair Fees (plus additional hours)	24,375
Information systems development	391
Meeting & Event costs	714
Safeguarding Adult Review (SAR) fees	0
Learning and Development programme	618
Total	26,098

04 TIMELINE OF ACTIVITY

MONTH	ACTIVITY
May 2025	<p>15/05 - Performance & Audit subgroup: The data reviewed highlighted gaps in referral feedback, recurring cuckooing and housing challenges, and rising substance-misuse and homelessness needs.</p> <p>20/05 - SAB: The Board endorsed the Annual Report, received updates on the MASH review and community engagement work, and agreed actions to strengthen multi-agency safeguarding processes amid system pressures and forthcoming strategic changes.</p>
June 2025	<p>03/06 - Case review group: The group received updates on national review processes, explored learning from the Offensive Weapons Homicide Review pilot, and heard one case that did not meet SAR criteria, but identified potential learning around hidden populations and bariatric care.</p> <p>17/06 - Joint Executive: The group reviewed safeguarding updates across children's and adults' partnerships, discussed system pressures including ICB reforms, agreed actions on national audit recommendations and transitional safeguarding, and highlighted the need for stronger data, governance, and multi-agency coordination.</p> <p>25/06 - Joint L&D group: This was the final group, agreeing to a reformat of the Partnerships L&D approach, which will focus more on a more responsive, wider format offer that aligns closer to priorities.</p>
July 2025	<p>08/07 - SAB: The Board reviewed progress on strategic priorities, including transitional safeguarding, community engagement, and governance improvement. It agreed actions to strengthen multi-agency coordination, assurance and attendance as part of ongoing system-wide safeguarding development.</p> <p>15/07 - Performance & Audit subgroup: The self neglect data showed higher conversion rates than other concerns, and data highlighted a need for improved referral tracking, clearer criteria, deeper analysis of repeat cases, and reinstated cross-agency discharge meetings.</p>
Sept 2025	<p>09/09 - Case review group: The group reviewed two cases, while SAR criteria were not met, significant learning was required to strengthen communication, and use of escalation processes.</p> <p>16/09 - SAB: The Board reviewed LeDeR report findings, approved the new L&D and Pan-London safeguarding policies, and signed off the updated self-neglect toolkit, while progressing work on strategic priorities and system-wide safeguarding improvements.</p>
Oct 2025	<p>30/10 - Performance & Audit subgroup: The meeting reviewed audit arrangements, data gaps, and rising safeguarding issues while agreeing steps to improve oversight and data quality.</p>
Nov 2025	<p>18/11 - SAB: The Board received assurance updates, including the LAS annual report, community engagement learning, and progress on autism, toolkit implementation, and governance actions and agreed to adopt the Multi-Agency Audit Framework while highlighting the need for stronger cross-agency collaboration, relational practice, and improved referral pathways</p> <p>25/11 - Case review group: The group reviewed 1 case, not meeting criteria and reviewed discussion on a case from the prior meeting where there was agreement to commission a proportionate discretionary SAR, and set the key lines of enquiry.</p>
Dec 2025	<p>02/12 - Joint Executive:</p> <p>16/12 - Performance & Audit subgroup: The meeting reviewed ASC referral data, highlighted rising concerns and conversion-rate challenges across key abuse categories, discussed system and categorisation limitations, and agreed actions to improve data quality, trend analysis, and future safeguarding reporting.</p> <p>17/12 - Extraordinary case review group: The group unanimously concluded that the case did not meet SAR criteria, finding no evidence of abuse, neglect, or multi-agency failure.</p>
Jan 2026	<p>20/01 - SAB Development Day: An interactive workshop was held, inviting all Board member to contribute to co-production of the new SAB Strategic Priorities.</p>
Feb 2026	<p>10/02 - Case review group: The group heard one case for consideration, where they agreed that it did not meet the criteria. They also reviewed progress in moving forward discretionary SAR actions.</p> <p>17/02 - Performance & Audit subgroup: This meeting, they reviewed 5-year historical data to consider patterns and what areas require further scrutiny. The group agreed to explore working towards a joint dashboard.</p>
Mar 2026	<p>24/03 - SAB - The Board received updates from the statutory partners around activity and organisational changes. They also approved the new Strategic Plan for 2026-2028, and discussed how they would like to approach a refresh of the Information sharing agreement.</p>

05 LEARNING FROM DATA

The Performance and Audit group

The introduction of this sub group has helped the Board to accelerate it's understanding of what data exists across partners, and how this can start to be used to develop a clearer picture of what safeguarding looks like in Brent, and therefor decide what actions could drive improvements. The group operates in accordance with a themed work plan, structured around priorities areas and emerging safeguarding concerns.



This approach enables the systematic review of data held by partner agencies to enhance understanding and inform more effective action and outcomes.

To date, the group has examined data relating to the High-Risk Panel, agency-held figures around safeguarding concern categories and referral volume, and local intelligence concerning housing and substance misuse. In November 2025, the group convened to review and agree a focus from the findings of all the themed datasets presented to the members since inception

The following key issues were identified for further exploration:



- Absence of LGBTQ+ referrals recorded within Adult Social Care (ASC) data.
- Low levels of modern slavery referrals, highlighting the need to develop a more comprehensive understanding of the Brent context.
- Referral-to-enquiry conversion rate within ASC of approximately 25-30%.
- Need for improved feedback mechanisms to ensure that referrers receive appropriate updates regarding outcomes or subsequent actions. This was also present in the 'Indira' SAR recommendations.
- A lack of data available to the Board around suicides in Brent and what prevention policies are in place.

To address these findings, the following actions were agreed:

- Development of two seven-minute briefings for professionals on Modern Slavery and Cuckooing, in response to low referral rates and to promote greater awareness and understanding as well as a need for further scrutiny of how modern slavery issues are recorded to establish how this needs to be addressed. These have been produced and published for professionals to access. Further learning resources will be produced in 2026, including a Podcast and Lunch and Learn sessions. The Board will support and encourage awareness of the Cuckooing policy that is currently in development by Community safety colleagues.
- An planned audit in 2026 to review cases of abuse occurring in individuals' own homes and care home settings, analysing data by abuse type, ethnicity, and age, in line with trends identified in abuse location reporting.
- Work to be undertaken by the Boards new Pan London Policy task and finish group to improve feedback loops when cases are referred for a safeguarding enquiry, so partners feel more assured of progress and know how to progress work with those who are at risk
- There is also a planned audit to be undertaken of multi-agency High-Risk panel cases to review it's effectiveness at move forward and progressing complex cases towards positive outcomes.
- Increased awareness tools developed to improve understanding of suicide prevention, including a Podcast and multi-agency learning Briefing. Prevention strategy and data monitoring has been carried forward as an area of focus on the nee Strategic plan.



06 SYSTEM PROGRESS

In the past year, what have partner organisations achieved in safeguarding adults who reside in Brent?

Brent Adult Social Care (ASC)

Despite substantial increases in demand, Brent Adult Social Care (ASC) delivered significant system improvements, supported by a 36-action Safeguarding Improvement Plan and strengthened governance arrangements.

Strengthened Governance & Leadership

- Daily senior oversight at the Front Door ensures consistent screening and threshold decisions.
- Safeguarding model redesign improved workflow clarity, triage escalation, and team roles between Front Door, locality teams and Safeguarding Adults and DoLs Unit.
- Proposed new restructure of Service Managers to consolidate leadership and improve operational grip.

Workforce Capability & Competency

- Safeguarding skills audit completed for all Safeguarding Adults Managers and targeted coaching and mentoring underway.
- Safeguarding Competency Framework was updated
- Weekly safeguarding clinics, reflective sessions, lunch & learn sessions and targeted legal literacy training delivered.
- Increased Best Interest Assessor capacity to improve Mental Capacity Assessments and Deprivation of Liberty Safeguards quality.

Quality Assurance & Audit

- A new safeguarding audit template was introduced, including EDI, Making Safeguarding Personal, risk planning and Mental Capacity Act decision-making.
- Weekly timeliness audits, KPI breach reviews and thematic reviews increasingly embedded.

Provider Concerns & Market Oversight

- Multi-agency intelligence improved escalation and performance management for several providers under concern.
- The provider concerns process is now aligned with revised Pan London procedures and improved commissioning oversight.

Metropolitan Police

Workforce Capability & Competency

Officers that encounter adults at risk within Brent identify safeguarding needs and complete an 'adult come to notice' report which is reviewed by the Brent MASH Team and shared with relevant partners.

Safeguarding adults is embedded in mandatory training for frontline officers and public protection staff.

Over the last year, **23,000 frontline officers** have received training focused on the safeguarding risks associated with Domestic Abuse and Serious Sexual Assault.

North West London Integrated Care Board (ICB)

Over the past 12 months, the ICB has delivered a rolling programme of level 3 safeguarding adults training with a specific focus on domestic abuse. This has enabled Brent GPs and other primary care clinicians to access up-to-date guidance and knowledge and strengthen their ability to safeguard patients within a primary care setting. As a commissioning organisation, the ICB is not primarily patient-facing. Its safeguarding role therefore primarily focuses on gaining assurance from provider organisations and building institutional capacity across the wider health safeguarding system.

This has included the development and delivery of the aforementioned training offer, the dissemination of key safeguarding material and updates aimed at enhancing safeguarding practice across the wider health ecosystem (this includes community care, inpatient care and across and between other health partners). Key areas of focus have included the Mental Capacity Act, alongside the regular dissemination of updates on emerging safeguarding issues and best practice.

For example, recent work has involved collaboration with the Police, to share intelligence and guidance on initiatives such as "The Com," which targets vulnerable young adults.

The Designated Lead for Safeguarding Adults has also provided specialist input into a number of primary care forums on a monthly basis, offering expert advice, guidance, and supervision to clinicians.

In addition, significant efforts have been made to strengthen safeguarding capacity within Continuing Healthcare services. Alongside this, in response to workforce pressures across partner agencies, the ICB has played a key system leadership role by chairing several Brent High Risk Panel meetings in recent months, ensuring continuity in case review and multi-agency oversight.

Imperial College NHS Healthcare Trust (ICHT)

The ICHT safeguarding team have had a service review and are working with our transformation team to see how any redesigns could improve capacity and release resources. Our internal Safeguarding Committee frequency has increased to bi-monthly for increased oversight. We have also strengthened the section 42 process and are ensuring learning is transferrable across the organisation.

The team have also contributed to bariatric guidance and worked to extend criteria for which staff receive safeguarding adults training and mental capacity training.

06 SYSTEM PROGRESS

Central London Community Healthcare NHS Trust (CLCH)

Key achievements over the period include the following:

- CLCH is an active member in multiagency audits that have been completed to both demonstrate good practice and areas for focus.
- Good examples of partnership working in cases where self-neglect identified and Brent social care delivered a training session to Community nursing staff re: “what makes a good safeguarding referral” and feedback from practitioners indicated more confidence in their risk assessments and making referrals.
- Established improved communication across the multi-agency teams and more frequent MDT meetings are held with Brent social care to enable case discussion.
- Organisational Incident Decision Making meetings include safeguarding representatives
- The CLCH Safeguarding conference in September 2025 included themes such as trauma informed approach, working with alcohol dependent people and homelessness using case examples delivered by frontline practitioners.
- Examples of ‘think family’ working across CLCH adult and children’s services are reflected within monthly and quarterly reporting.
- CLCH is signed up to the NHS sexual safety charter and reviews complaints and incidences as guided by NHS England.
- Mental Capacity Act audit completed and lessons shared, with a planned roll out of Mental Capacity Act competencies across the borough teams within the Brent bedded units.
- An Introduction of a dip sample audit tool for inpatient bedded units that is being piloted.
- Safeguarding supervision audit was undertaken and a review of supervision offer across adult teams within Brent resulted in increased visibility of safeguarding across all Brent teams each month.
- Resignation and recruitment to the named nurse post in Brent have been successful
- A Weekly case review with named nurse in attendance and the Safeguarding ‘single point of contact’ line accessible to all staff.

Central & North West London Foundation NHS Trust (CNWL)

Brent CNWL has provided a number of reflective sessions focused on lessons learned from incidents. These have included a recently delivered workshop on risk assessments and on engaging with individuals who may present as challenging to engage with or who are disengaging from services. This work follows lessons learned from Immediate Learning Reviews.

The organisation adopts a “you said, we did” approach to engaging with learning from complaints and incidents. Over the past 12 months, this has contributed to a reduction in the use of physical restraints on wards, alongside the development and launch of an assertive outreach project within Stonebridge. This project works to engage patients who have presented in crisis and who may have been previously unknown to services. It supports earlier identification of potential safeguarding issues and provides opportunities for staff to escalate and address safeguarding concerns earlier in patients’ journeys.

In addition, we have developed a weekly high-dependency service user meeting that focuses on the most complex cases, where there are potential risks including disengagement and/or safeguarding concerns. This meeting is attended by the Borough Director and Clinical Director, and each patient discussed has a universal care plan put in place to ensure continuity and consistency of information sharing across the system.

CNWL convened a joint Social Work conference with Brent in March 2025. A primary focus of this conference was on issues affecting radicalised communities. Both services gained significant benefits from this event, which is expected to foster a more comprehensive understanding and support for diverse and multicultural communities in Brent.

Finally, the Safeguarding Adults team supported the Park Royal In-patient Team to submit a National Referral Mechanism referral, and the experience underlined a need for staff to better recognise and understand the signs of Modern Slavery and how best to protect patients. Support has been offered to the in-patient teams for further reflective and learning sessions.

Brent Probation Services

Over the past year, our organisation has demonstrated a strong commitment to safeguarding adult residents in Brent through several key initiatives and collaborative practices. Timely completion of risk assessments has ensured a heightened awareness of safeguarding needs, enabling us to identify and address risks promptly. Where necessary, we have utilised risk escalation processes to safeguard individuals facing increased vulnerability.

We have actively facilitated referrals to Adult Social Care (ASC), as well as to substance misuse services including Forward Trust (CRS), VIA and Change Grow Live, both of which are local authority partners. Referrals to the Community Mental Health Team (CMHT) have also been made to support those in need of specialist mental health interventions. Additionally, personal wellbeing referrals via and housing referrals have been actioned to promote holistic support and stability for those at risk.

Our approach has been firmly rooted in partnership working with agencies such as MAPPA, IOM, EVVP, and MASH. This collaborative ethos has strengthened our safeguarding responses and ensured information sharing across key stakeholders. We have made use of interpretation services for individuals facing language or communication barriers, thereby ensuring inclusivity and accessibility.

The adoption of PowerBI, an internal data system, has allowed us to improve both the timeliness and accountability of our safeguarding interventions. By leveraging this technology, we have enhanced our monitoring and reporting capabilities, ensuring that safeguarding practices are both responsive and transparent.

06 SYSTEM PROGRESS

London North West University Healthcare NHS Trust (LNWH)

LNWH continues to fulfil its statutory duties under the Care Act 2014, working in close partnership with Brent Council and the Brent Safeguarding Adults Board. The Trust provides acute hospital services across multiple sites and plays a key role in identifying, responding to, and escalating safeguarding concerns affecting adults with care and support needs resident in or presenting from the London Borough of Brent.

Key themes during the year included:

- Sustained high volumes of referrals to Brent Adult Social Care
- Increased identification of self-neglect, domestic abuse, and neglect/acts of omission
- Continued emphasis on Making Safeguarding Personal (MSP), including follow-up on outcomes for individuals referred
- Ongoing delivery of the “How Safe Do You Feel?” Domestic Abuse Routine Enquiry Campaign, supported by an extensive Spotlight Series (**25 sessions delivered in 2025/26**), including topics relevant to vulnerable adults
- Continued management of increasing workload and complexity across safeguarding activity
- A successful Safeguarding Adults Week (November 2025), raising awareness across the organisation
- Contribution to the White Ribbon Campaign and 16 Days of Activism, including delivery of a “Community for Change – Ending Violence Against Women and Girls” presentation for Brent.
- Introduction of a Decaf Drinks Initiative (2025) aimed at reducing falls risk, supporting patient safety
- Introduction of “Purple Folders” across wards and departments (ongoing), providing a single, accessible resource for staff on adult safeguarding processes, learning disabilities and autism, falls, and dementia. These have been well received, with a formal launch planned during Dementia Action Week (May 2026)

The Safeguarding Adults Team has maintained close liaison with Brent Local Authority safeguarding teams, including the Hospital Discharge Team, to support timely information sharing, feedback, and outcome monitoring. Monthly meetings have historically supported this collaboration; however, these have reduced in frequency due to Local Authority restructuring.

The Trust remains keen to re-establish regular engagement and strengthen communication pathways.

As the acute provider based in Brent, the Trust manages allegations relating to organisational practice, including concerns regarding discharge and Person in Position of Trust (PiPoT) matters, and works closely with the Local Authority to ensure appropriate investigation and feedback.

The Trust Safeguarding Team actively contributes to the Brent Safeguarding Adults Board, its subgroups, and the High Risk Panel. This supports shared learning from Safeguarding Adult Reviews, development of action plans, and strengthening of local safeguarding policies and procedures. The Trust also welcomed visits from the SAB Independent Chair and Board Manager during the year, which further strengthened partnership working and provided assurance around safeguarding practice.

An All-Age Advanced Safeguarding Practitioner is embedded within Emergency Departments at Northwick Park Hospital (2–3 days per week), providing real-time support to frontline staff. This includes advice on safeguarding concerns, domestic abuse pathways, and application of the Mental Capacity Act and Deprivation of Liberty Safeguards, while promoting a Think Family / Think Household approach.

Brent Regulatory Services

Our Trading Standards team continue disrupt and deter criminals, by providing a rapid response service, when information is received of vulnerable resident being targeted for unnecessary building work or repairs or other doorstep criminality.

The National Trading Standards (NTS) Scams team has been working closely with The Royal Mail to intercept and stop mail which is designed to defraud unsuspected victims out of their money. There are various types of scams, but the most common are fake lotteries, deceptive prize draws, get-rich-quick schemes, investment scams, miracle cures, and clairvoyant/spiritual scams.

The Trading Standards team has received referrals from the NTS Scams team of residents who have responded to such mail and in some cases enclosed a cash payment in response to either one or more of these which have been intercepted, cheques totalling up to £300, have been received to date, all victims have been contacted, advised and where possible their monies were returned to them in the form of a cheque from NTS to be paid into their accounts. The team is set to receive up to **10 referrals a month**.

The Trading Standards team has officers who are Friends Against Scam ‘SCAM Champions’ and can therefore provide training on how to support and reduce the chances of being a scam victim. In July 2025, officers provided training as part of a Safeguarding Partnership, to practitioners who are entering resident’s homes to given then guidance on recognising the signs of possible financial frauds and scams.

London Ambulance Service (LAS)

At LAS, we have continued to maintain our high standard of safeguarding practice across the London boroughs. As part of our commitment to Brent and the surrounding boroughs we have an assigned North West London Safeguarding Specialist, who engages with our safeguarding partners to support learning, development and improvements in safeguarding practice. This includes participating in statutory reviews, learning events and dissemination of learning to LAS and specifically our Brent ambulance stations.

In 2024–25 pan-London LAS completed **59,479 referrals** (inclusive of child and young people referrals). For the borough of Brent and its residents who used our services, we completed **1152 adult referrals** (inclusive of safeguarding and welfare concerns).

06 SYSTEM PROGRESS

VIA New Beginnings

The organisation has developed a Safeguarding Competency Framework, a combination of knowledge skills and behaviours that inform safeguarding practice. The framework supports the organisation to use identifiable standards to measure the competencies of staff, record appropriate evidence, and identify areas for development. The idea being that every relevant job role has a set of safeguarding standards to work within.

In 2025 - 2026 the service submitted **30 safeguarding referrals/notifications**, this includes referrals into adult and child safeguarding teams, DV and Community MARAC, Police notifications and referrals into DVA services. Not all safeguarding cases supported through the service result in referrals, many individuals are already known to safeguarding teams at point of engagement with our services. All safeguarding cases are tracked using our internal safeguarding tracker, as of December 2025 the adult safeguarding tracker had **58 individual active cases**.

In the Summer of 2025, the service launched the EVE project, an additional arm of the adult New Beginnings service, focussed at supporting women involved in sex working in Brent, through engagement in the community, outside of normal service opening hours. Since go live the EVE service has referred **5 women** into structured treatment and engaged with a significant number more.

As of 01 December 2026, the Brent New Beginnings service opened to provide 5 Female only SWEP night beds at the Cobbold Road site, opening on 4 occasions during the 2025 - 2026 Winter period the service received and **accepted referrals for 4 women**. Unfortunately, none of the active referrals attended during the SWEP nights however the service intends to reopen for the whole period of SWEP in Winter 2026 - 2027.

Brent Community Safety Team

Our organisation has successfully supported vulnerable adults across Brent through the Community Multi-Agency Risk Assessment Conference (CMARAC) framework. This coordinated approach brings together professionals and support services to address complex safeguarding concerns and achieve meaningful progress outcomes for those vulnerable and at risk. Overall, the key achievements are the cases managed through coordinated active collaboration with key partners.

Looking at the year 2025, we discussed and **supported 74 cases** across the three Brent localities. Of the **32 active cases** receiving support, **42 have been successfully closed** with a positive or clear outcome. Overall, the average risk reduction was **43.34% across all cases**. All case closures are based on demonstration of risk reduction and sustainable support arrangements.

The CMARAC panel coordinated support for adults presenting with multiple and complex vulnerabilities and disadvantages, including cuckooing, mental health, exploitation, particularly targeting individuals with substance misuse, the elderly, those who are isolated or with a cognitive dysfunction. Including vulnerable individuals in situations of homelessness, housing instability, hoarding, crime and repeated victimisation all manifest through antisocial behaviour.

We organised over **25 case conferences** to thoroughly address the complexities involved and ensure effective, professional collaboration. There were over **12 escalated concerns** that required intervention or an immediate safeguarding response, to senior managers and heads of services. In cases where a single-agency approach was insufficient, a collaborative multi-agency strategy was prioritised for an effective response. This approach involved a thorough assessment of risks and support needs, along with the implementation of appropriate intervention strategies.

In our monthly CMARAC meetings, we have discussed and coordinated several positive outcomes aimed at supporting and reintegrating vulnerable individuals who are not eligible for assistance. Our efforts focus on helping them reconnect with mental health and substance misuse services and find suitable accommodation if their needs change. In addition, we've seen successful outcomes that include the enforcement against perpetrators and the disruption of exploitation and criminal activities.

Accounting for a **total of 42 cases closed** with a positive outcome or reengagement. The effective collaboration of key partners and the coordination of joint efforts and visits have significantly contributed to achieving favourable results for these individuals, who are often facing multiple disadvantages and vulnerabilities, and without this coordination would fall through the net and negatively impact the community.

Another positive outcome was the implementation of the fortnightly cuckooing meeting with police, CMARAC, Anti-Social Behavior (ASB) team and Adult Safeguarding team that specifically focuses on identifying cuckooing cases earlier and having a robust and coordinated approach in safeguarding these individuals, accounting for over **17 meetings** which established a dynamic and effective relationship with key professionals and teams which has been instrumental in refining early intervention strategies. This led to the development of a cuckooing protocol, which should be signed off on in mid-2026 after consultation with key stakeholders.

Each core member has contributed to MARAC's strategic goals in different ways, such as collaboration with the police in providing intelligence for risk assessments. Increased initiative-taking interventions in ASB hotspots, leading to a reduction in incidents.

Safeguarding input provides expert assessment and recommendations for high-risk cases. CMARAC has supported around **3 cases from safeguarding referrals**. Housing continues to assist with emergency housing or housing transfers for victims of ASB through the Turning point on shared expertise at the meetings, and through implemented tenancy support for individuals identified through the CMARAC panel. Community Mental Health Team facilitated access to mental health support or medical reviews and developed joint protocols for individuals with complex needs.

The CMARAC has formed a robust collaboration with the safeguarding team and enhanced safeguarding tools through training initiatives. This is reinforced by the weekly Safeguarding clinic and the coffee-and-catch-up sessions for safeguarding leads, which the CMARAC coordinator attends, providing a platform to discuss safeguarding issues and processes to ensure that no safeguarding opportunities are missed and that referrals for collaborative work with partners to protect individuals are effectively executed. There are also opportunities where MERLIN police reports are evaluated to avoid recurring missed chances for prompt joint intervention.

06 SYSTEM PROGRESS

What have been the barriers to being able to deliver safeguarding duties effectively and how will these be mitigated for 2026-27?

MET Police

There are ongoing concerns with officers identifying a safeguarding risk and the need to complete an 'adult come to notice' report. We have identified this through SAR's where, for example, a person has come to notice to police on six occasions but an 'adult come to notice' report was only completed on four occasions.

Mitigation (2026-27)

The Metropolitan Police Service is rolling out trauma informed training for all officers which will assist with identifying risk. The Central Safeguarding Adult's Team is looking at how to improve completing of the safeguarding reports.

Brent Adult Social Care (ASC)

Key Barriers faced by Brent ASC this year included:

- Triage pressures: high volume and complex needs impact 24-hour KPI compliance
- Threshold variability linked to uneven experience and legal literacy across teams
- Fragmented management oversight across teams
- Provider market instability contributes to service quality risks
- Workforce skill variation in the Mental Capacity Act, risk planning, defensible recording and Making Safeguarding Personal

Mitigation (2026-27)

- Implement redesigned leadership model with dedicated safeguarding managers
- Embed new safeguarding interface pathway, Standard Operating Procedures, and flowcharts by March 2026
- Extend senior presence at peak Front Door periods to strengthen decision-making
- Launch new Power BI dashboard for real-time monitoring of risk, drift and timeliness
- Expand coaching on thresholds, Making Safeguarding Personal, Mental Capacity Act and defensible recording.
- Strengthen provider oversight through commissioning-Safeguarding Adults & DoLS Unit (SADU) structures and joint visits.

London Ambulance Service (LAS)

LAS have experienced no specific barriers, however remain aware of the feedback from our local authority partners following the introduction of our electronic referrals systems. We are listening to the feedback and have a number of future changes that aim to improve the quality.

North West London Integrated Care Board (ICB)

The main challenge faced by the ICB over the past 12 months has been a more limited ability to develop medium to longer-term plans (12-24 months). This has been largely due to organisational uncertainty arising from the merger and restructure, which has made it difficult to anticipate the future shape and capacity of the ICB.

In this context, ICB activity over the past year has primarily focused on delivering against long established priorities. These have included fulfilling statutory safeguarding responsibilities, alongside maintaining a rolling programme of safeguarding adults training, supervision, and other core functions. Notwithstanding this uncertainty, the ICB has remained committed to fulfilling its statutory safeguarding responsibilities.

Brent Regulatory Services

Trading Standards is a small team with many consumer and business protection priorities. Greater resources would provide for dedicated member of staff to expand our work preventing financial abuse, to engage with people's lived experience, carry out preventative work and investigate thoroughly complaints that the service received regarding doorstep and other scams. Currently, we seek to prioritise financial abuse as a subject area and will allocate the best available resources, when incidents are reported to us.

There has been a lack of understanding of the legal procedures and enforcement powers available to Environmental Health officers, particularly efforts to gain access to properties to assess self-neglect and public health risks. Engaging with people who do not wish to engage, can be time consuming and challenging. We are seeing to mitigate this by working with mental health practitioners' to carry out joint visits and ideally, conduct 'Capacity Assessments' (adequately assessing vulnerable persons mental capacity) although securing this resource is not always possible.

Central & North West London Foundation NHS Trust (CNWL)

Over the past 12 months, we have identified disengagement as a potential issue for our services. In response, we have implemented a number of measures to ensure this is effectively managed, including:

- The development of a weekly high-dependency service user meeting.
- The development of an escalation tool based on System One, enabling us to identify more complex and higher-risk service users who can be targeted within individual caseloads. This ensures we are proactively identifying and reaching out to our more vulnerable patients
- Annual reflective practice meetings and workshops.
- Risk assessments for adults at heightened risk of disengagement.

Changes in senior personnel across all agencies have resulted in a loss of some organisational memory, but connections are being established within local networks at ground level to enhance working relationships. This has also caused delays in acquiring feedback on completed safeguarding referrals, which has in some cases affected patient outcomes: a plan for improvement of the Safeguarding Pathway is now in place, which involves both providing feedback and escalating issues via the specialist Safeguarding Adults team.

06 SYSTEM PROGRESS

London North West University Healthcare NHS Trust (LNWH)

Variation in safeguarding knowledge, confidence, and application across the workforce continues to present a challenge. While compliance with core safeguarding training remains strong, translating learning into consistent practice, particularly in complex areas such as self-neglect, the Mental Capacity Act (MCA), Deprivation of Liberty Safeguards (DoLS), and domestic abuse can be more difficult, especially for staff who encounter these issues less frequently.

In addition, the increasing complexity of patient presentations, including co-existing mental ill-health, substance misuse, homelessness, self-neglect, and complex family dynamics has required more intensive safeguarding input and multi-agency coordination. This is particularly evident in discharge planning, where risk, capacity, and family dynamics must be carefully balanced to ensure safe and proportionate outcomes.

Workforce capacity and resource pressures within the Safeguarding Adults Team have also impacted the ability to deliver safeguarding supervision consistently across all areas. While the team continues to provide bespoke training, contribute to departmental teaching, and deliver joint sessions with the Safeguarding Children Team to maintain visibility and support staff, a more structured and consistent approach to supervision is required.

Mitigation for 2026-27:

- Implementation of the revised Safeguarding Supervision Policy, with a focus on embedding a consistent, accessible supervision model across the Trust
- Continued expansion of targeted training and reflective learning opportunities, particularly in complex safeguarding themes such as MCA/DoLS, self-neglect, and domestic abuse
- Strengthening multidisciplinary and “Think Family / Think Household” approaches to support staff managing complex cases
- Ongoing focus on staff support and wellbeing through supervision and reflective practice
- Continued collaboration with partner agencies to support safe, timely, and coordinated discharge planning

VIA - New Beginnings

A barrier across all services can be working in partnership to get the right services in place for individuals particularly for identified care and support need assessments. Thresholds for accessing services can result in some individuals not receiving a service at the right time. Via will continue to develop local pathways by attending partner agencies team meetings and discussing how we can collaboratively work together to identify and respond to the care and support needs of people who use our services.

Pathways and access to mental health provision are frequently challenging for our vulnerable adult service users with their drug and or alcohol use affecting their ability to engage in assessments and interventions. In addition, our service users mental health issues/concerns/presentations are frequently reported to be wholly as a result of their drug and alcohol use, with frequent case closures stating that individuals need to reduce their drug and alcohol use before they will be assessed. With drug and alcohol use often being used as a tool to ‘self-medicate’ for mental health difficulties/issues this reduction before accessing interventions for their mental health is often a vicious cycle. The Brent New Beginnings service now has a dedicated Dual Diagnosis team who are working with mental health services to support those most in need to access both services, helping to overcome some of the pathway challenges faced by our service users.

Stigma can often be a significant barrier for our service users accessing other services, including safeguarding services, with professionals asserting that entrenched drug and most commonly dependent alcohol use is an unwise decision, ‘lifestyle’ choice, rather than recognising the real impact that dependence on alcohol and drug use can have on an individual’s capacity to make decisions

Central London Community Healthcare NHS Trust

The main barriers experienced by CLCH over the last year have been:

- Workloads and complexity of cases can often increase demand on the team, and impact attendance at training/ updates, so alternative means and sources must be explored.
- Increase in number of social care requests for information (S42), but no significant increase in referrals from CLCH
- Embedding the Mental Capacity Act (MCA) consistently across all teams, ensuring that assessments are completed whenever a need is identified. This includes applying MCA principles in practice,
- Workforce skill variation in MCA, risk planning, defensible recording and Making Safeguarding Personal and MCA competencies developed which will support this.
- Access to patients, especially when they have capacity and decline health care or disengage, whilst also ensuring staff respond appropriately, by escalating concerns promptly and in a timely manner and use ‘Right care Right person’ guidance, when unable to gain access to a patient as expected.

Mitigation (2026-27)

- Further embedding and ensuring that MCA assessments are completed when a need is identified.
- Named nurse post has been recruited to, and staff member will commence in Brent Q1
- Planned audit of safeguarding referrals, both quality of information and reasons for referral. The findings will support updating of staff and learning from social care training session, monitored locally and through safeguarding committee.
- The ‘No Access’ Policy remains an area of focus, alongside considerations related to “right care, right person” practices and when escalation is required. There is on-going work across CLCH to update and address clinical concerns as the policy is updated to include both staff and patients voices and will be finalised and signed off at Clinical Reference group, the work also entails reviewing pathways for diabetes care who can have significantly higher risks.
- Use of Power BI dashboards for real-time monitoring of safeguarding KPI’s and to monitor any risk timeliness are being explored and developed.
- Multiple media techniques used for sharing information with staff- training, 7-minute briefings, posters, webinars, and newsletters.

06 SYSTEM PROGRESS

Brent Probation Services

High workload and reduced workforce capacity have limited opportunities to complete home visits, which are essential for identifying safeguarding concerns within the home environment. High volumes of weekly contacts for individuals presenting significant risk have, at times, affected professional curiosity, with some contacts becoming briefer than desired for meaningful engagement.

Mitigation for 2026-27

To strengthen capacity and support professional curiosity, we are prioritising home visits for individuals with known safeguarding vulnerabilities, ensuring that risks are identified within the home environment at the earliest opportunity. This is complemented by embedding reflective practice, regular supervision and coaching to promote deeper enquiry into safeguarding concerns. Alongside this, ongoing recruitment and retention activity continues to help stabilise staffing levels and improve overall resilience across the service.

Changes in staffing across the service can create natural variations in continuity when cases move between practitioners. During these periods of transition, it can be more difficult to maintain consistent oversight of important changes in an adult's presentation—such as shifts in mental health, substance use or emerging disability-related needs. Strengthening handover processes and improving information continuity remain key priorities for the year ahead.

Mitigation for 2026-27

To strengthen continuity during staffing changes, we are enhancing our internal handover processes, ensuring clearer information flow when cases transfer between practitioners. We are also embedding consistent use of structured case summaries and ensuring that key safeguarding information is visible and accessible at transition points. Continued emphasis on reflective supervision, quality practice hubs and multi-agency information-sharing will further support practitioners to identify changes in an adult's presentation promptly, even during periods of organisational change.

Delayed or limited responsiveness from key partner agencies

Probation has experienced inconsistent responsiveness from Adult Social Care, the Community Mental Health Team and housing services following referrals. In some cases, actions agreed within multi-agency meetings have not progressed for extended periods, requiring repeated escalation.

Mitigation for 2026-27

To support more consistent multi-agency safeguarding practice, we will work with Adult Social Care, the Community Mental Health Team and housing services to agree clearer escalation pathways, ensuring that concerns can be progressed swiftly when risks increase. We will also request that multi-agency actions are time-bound and routinely reviewed, promoting shared accountability and improving the pace and oversight of joint safeguarding activity.

Information-sharing gaps

Probation is not always informed when individuals are referred to Adult Social Care, the Community Mental Health Team or housing by other agencies, nor when significant changes occur. Although information-sharing legislation may restrict detail, a lack of basic awareness can impede effective risk management.

Mitigation for 2026-27

Encouraging agencies including Adult Social Care, Community Mental Health Team and housing services to share risk and need related information where consent allows, and at the earliest opportunity.

Limited Police information for lower-risk cases

Police updates about lower-risk individuals—particularly where there have been emergency call-outs or police-led referrals to social care or mental health services—have not been shared consistently, reducing opportunities for early identification of safeguarding need.

Mitigation for 2026-27

We are strengthening our partnership with local Police by developing a consistent information-sharing process so that incidents involving adults supervised by probation are communicated promptly and appropriately.

Imperial College Healthcare NHS trust (ICHT)

Core challenges for the trust have been the level of activity vs resources. To mitigate this, a service review and transformation work will take place. The current ICB restructure has also added an additional lever of uncertainty. Suitable actions will be taken once this has been finalised.

Additionally, a struggle has been the volume of meeting it is required that we attend. As a result, all meetings requests are now reviewed and only accepted where it adds value to the work we do. We also experience complex thresholds across different boroughs. To manage this, we still submit referrals and await the outcomes from the borough and convene professional meetings as required.

Brent Community Safety Team

Over the past year, the CMARAC Panel identified systemic barriers affecting the effective safeguarding of vulnerable adults. Key issues include:

- Inconsistent professional curiosity, delayed escalation, and incomplete medical histories, resulting in missed risk indicators and limited contingency planning, particularly for individuals who disengage or experience repeated crises.
- Unclear oversight from Adult Social Care (ASC) on whether cases remain open, leading to lost opportunities for early intervention and increased risk of relapse, anti-social behaviour or repeated victimisation.
- Fragmented safeguarding decisions, where cases are passed between teams without clear timelines, follow-up, or accountability.
- No information on mental health diagnosis, in circumstances where the individual disengages from the community mental health services and is discharged back to the care of his GP with no other intervention or support and no action is recorded.
- The need for consent to refer individuals to support services where the vulnerable individual lacks capacity to make a decision because they are under duress or influence, trauma-based or faced with multiple disadvantages.

06 SYSTEM PROGRESS

Mitigation Actions for 2026-27

Strengthening Safeguarding Processes

- Continue the weekly safeguarding clinic and maintain the appointed safeguarding led to support timely escalation.
- Structure a clear pathway for triaging police Merlin reports through Adult Safeguarding, Adult Social Care and other teams, such as the ASB Team, including standardised recording of outcomes and timeframes for allocating social workers where necessary.
- Improve liaison and documentation between Adult Social Care and the Community Mental Health Team (CMHT) on high threshold cases.
- Ensure that the Adult social care/Mental health team follows up on periodic case reviews for individuals with recurrent mental health episodes and expand contingency planning for those who are known to disengage.
- CMARAC will request full access to Mosaic records to have oversight on the relevant actions and care plan, especially where the ASB team is involved in cases such as closure orders, cuckooing, or vulnerable individuals causing ASB.

Improving Mental Health Escalation

Referrers report difficulty accessing mental health support, resulting in cases looping between the Community Mental Health Team and General Practitioners, which end up falling through the system. Slow responses impact individuals affected by other factors, such as substance misuse and self-neglect, which is expressed in Antisocial behaviour. This is a pattern of bouncing between systems has been identified in the CMARAC referrals, making it difficult to support the individual.

We proposed:

- A simplified mental health escalation pathway and case-specific plans for high-risk cases with the Community Mental Health Team Senior Leadership Team.
- Encourage consistent Community Mental Health Team attendance and require clear reasons for declined referrals and propose solutions.
- Promote earlier referrals to appropriate panels where non-engagement is a risk factor.

Strengthening Adult Social Care Case Closure

Cases are sometimes closed without a clear rationale, next steps, or mitigation strategy of duress, trauma-based, fluctuating capacity, or coercive control. Some assessments are completed by phone despite complexities, with no visibility of risk factors and environmental circumstances. Premature closures result in repeated referrals, increased antisocial behaviour, unclear risk ownership and serious safeguarding concerns.

Mitigation:

- Introduce a standardised case-closure template requiring rationale, risk assessment, and signposting evidence.
- Request for Adult social care to have a trauma-informed practice and avoid mislabelling individuals as making “poor lifestyle choices.”
- CMARAC has raised concerns about better assessment practice, including Care Act assessments, Mental Capacity assessments that reflect fluctuating capacity to be completed face-to-face.
- Request for social services to implement multiple attempts contact protocols, which should include face-to-face or exploration of joint visits with other partners known to be working with the vulnerable individual.
- Promote a “no wrong door” approach to prevent case bouncing between services under the Adult Social Care umbrella.

Cuckooing and Exploitation

Barriers have included inconsistent use of terminology (e.g., misuse of “cuckooing”) which results in misclassification and causes delays in intervention and increases the risk of vulnerability, exploitation and harm.

Housing partners sometimes prioritising an enforcement approach over vulnerability assessment and Police restructuring has disrupted the scheduled cuckooing meetings.

Mitigation:

- Maintain CMARAC and other agency training, presentations, and workshops to continue exploring the cuckooing topic and its layers.
- Require vulnerability checks with all housing referrals.
- Integrate cuckooing oversight into CMARAC with consistent police attendance and intelligence sharing.
- A Cuckooing Protocol is in draft to be signed off by mid-2026 to coordinate swift multi-agency action.

Cases with Limited Engagement

Barriers here include presence of experienced trauma, neurodiversity, and mental health conditions being missed or under-assessed. Cases are closed due to non-engagement from the vulnerable individual despite high ongoing risk.

Mitigation:

- Incentive use of assertive outreach, joint visits, and trauma-informed engagement techniques and training.
- Promote CMARAC and early referrals to the CMARAC panel when cases need a multi-agency approach.
- Promote shared organisational responsibility rather than vulnerable individuals being blamed for non-engagement.

Summary of Mitigation Themes for 2026-27

- Clearer and stronger escalation pathways across mental health and adult social care.
- Improved cross-agency communication, transparency, and case-closure standards.
- Consistent use of vulnerability assessments.
- Integrated multi-agency approach to cuckooing and exploitation within the CMARAC framework.
- Encourage thorough assessments that genuinely capture changing abilities and the real-life experiences of individuals.
- Promote and expand training to strengthen professional curiosity and accurate terminology.
- Encourage early referrals for intervention to prevent escalation to crisis.

06 SYSTEM PROGRESS

What work have Partners undertaken to engage with people who have a lived experience of services, in particular adults with protected characteristics or under-represented communities?

Brent Adult Social Care (ASC)

Brent ASC continues to strengthen engagement with people who use services, particularly adults with protected characteristics and under-represented communities, through several initiatives:

- Making Safeguarding Personal outcome letters and questionnaires are being embedded to ensure people can express desired outcomes and reflect on whether these were achieved.
- Equality, Diversity & Inclusion reviews and audits of Section 42(1) and (2) closures help identify disproportionality and ensure equitable safeguarding responses.
- Strengthened engagement with carers and under-represented communities, including targeted outreach through community groups and voluntary sector partners.
- Themes from engagement feed directly into workforce training, audit activity, and pathway redesign, ensuring that lived experience shapes practice improvement.
- Accessible safeguarding information, including easy-read materials and translated resources tailored to high-risk communities.
- Feedback loops through provider concerns and safeguarding enquiries, ensuring that learning from people receiving care in regulated services informs our commissioning and practice improvements.
- Use of advocacy services, ensuring that people who may lack capacity or have communication barriers are supported to express their views throughout the safeguarding process.

VIA - New Beginnings

The organisation has developed its Volunteering and Participation Team with a focus on developing on our work to ensure that lived experience underpins everything we do. In particular the women's safe space has continued to develop over the last year, allowing for more women to enter treatment and remove the barriers associated with accessing treatment services.

Additionally, in early 2026 the organisation launched a survey of people who use our services nationally to understand what people value and what we could do better. At time of writing the survey has had **over 1000 responses** and the findings will be used to inform service development.

New Beginnings works closely with B3, Brent Service User council to ensure the lived experience voice is strong in-service development and day to day service delivery. B3 are hosted from the Cobbold road site and use this space to provide safe Saturday and Sunday services to Brent residents, providing 7 days a week provision from the Treatment and Recovery site. B3 is a model of best practice in Brent.

B3 volunteers support goes beyond providing lived experience voice. Coproduction with service users and those with lived experience is possible and active in Brent with many B3 volunteers actively supporting New Beginnings to deliver services. For example, dedicated outreach volunteers that support the EVE project, volunteers that provided night shifts to support SWEP provision, and additional capacity for those exiting prison.

Central & North West London Foundation NHS Trust (CNWL)

Within Brent CNWL, we hold a monthly Patient Care Race Equality meeting, chaired by the CNWL Director for Brent. The meeting brings together partners from the voluntary, social enterprise, and third sectors. We review local demographic data and information related to areas such as admission rates for acute mental health conditions into CNWL acute services. Brent mental health services have also established a Health Inequalities Team that collaborates with the Brent Health Matters service to reach previously unreached communities.

We also agree and review community engagement activities. This has included engaging with communities across Brent in a variety of settings, including temples and mosques, as well as working with community leaders. In addition, we have developed a programme to train spiritual leaders in mental health to support acute services. As part of this, CNWL commissions the Somali Advice and Forum of Information (SAAFI), which entails advice, information, and guidance; addressing health and social inequalities, such as health, education, and employment; facilitating skills development and training for employment and self-employment; advocating on matters affecting mothers and their children, such as unemployment, health, education, housing, immigration, and benefit cuts; and organising cultural events, exhibitions, and arts activities to celebrate heritage, fostering self-esteem and confidence within the community.

London Ambulance Service (LAS)

To help ensure we deliver the best possible care for our patients and their families, we work with a wide number of patient groups and charities to seek their advice and input into the decisions we make.

In June 2020, we launched the London Ambulance Service Public and Patients Council, which brings together a wide range of patients and the public representatives from across London at regular intervals to provide feedback on the care we provide and to help shape the way care is delivered.

The Council provides a voice for patients, the public and carers in the design, development and delivery of Trust services and advises on ways to gain broader engagement, as necessary. Our Learning Disabilities and Vulnerabilities Lead, has also set up a Learning Disabilities and Autism specific patient council that engages with those with lived experience from these patient groups to ensure that they can shape the services that they receive.

MET Police

The Metropolitan Police Service is rolling out trauma informed training for all officers which will assist in recognising protected characteristics, under-represented communities and repeat trauma through lived experiences

06 SYSTEM PROGRESS

Central London Community Healthcare NHS Trust (CLCH)

The CLCH Equality Strategy sets out how the Trust engages with our patients (and staff) to support engagement from all communities. The CLCH Patient Advisory and Liaison Service (PALS), complaints and complements team seek feedback from those accessing our services, which is then reported at Board level and learning /changes in practice are put in place.

Each year we invite people who have had lived experience of services to our annual safeguarding conference to share their experiences for us to learn from and CLCH have an active Patient engagement team with co-production initiatives in place. Patient stories are collated and presented at divisional meetings. Alongside this, the recruitment to managerial and frontline positions frequently includes interview panel members who are carers or patients

CLCH is committed to working in partnership with patients and the public and actively seeks patient representation to help design safe and accessible services. We use advocacy services, ensuring that people who may lack capacity or have communication barriers are supported to express their views throughout the safeguarding process.

A shared governance model includes patient representatives, complaints and investigation for consideration, being open culture.

Sub-groups progress board priorities and key work in relation to protected characteristics

The CLCH Learning Disability Group includes carers with lived experience and includes feedback from the NWL ICB regarding data relating to death reviews of people with learning disability and autism (especially those from BAME communities) and share learning from Learning from Lives and Deaths - People with a Learning Disability and Autistic People Reviews (LeDeR).

Staff complete Oliver McGowan Autism awareness training to further develop and strengthen understanding of Learning disabilities.

Brent Community Safety

Over the past year, CMARAC has strengthened how it incorporates the lived experience of adults, particularly those with protected characteristics and individuals from marginalised or under-represented communities, into its safeguarding practice.

A key part of this CMARAC has been working closely with trusted partner organisations that can represent the individual's voice and rights in the panel, despite their level of engagement. Galop is a core CMARAC partner and plays a vital role in ensuring that LGBTQ+ adults' experiences are accurately represented.

CMARAC partners also help represent the experiences of adults facing multiple disadvantages. Were young adults with multiple complex needs have been concerned, work in partnership with personal advisers, who have been able to provide insight enabling professionals to shape a more supportive and realistic plan tailored to individuals circumstances.

To ensure that individuals' voices meaningfully shape decision-making, CMARAC routinely collaborates with:

- Independent advocacy services, including women and girls network services
- Mental health and learning disability services
- Homelessness and rough sleeper outreach teams
- VIA the substance misuse services
- Department of working pensions

These organisations help communicate the lived experiences of people who may struggle to engage due to disability, trauma, language barriers, neurodiversity, mental ill-health, social isolation, multiple disadvantages or distrust of statutory agencies.

Insights from partner agencies about individuals' priorities, fears, barriers, and unmet needs directly inform multi-agency risk assessments and action plans. Themes emerging from lived experience—such as stigma, difficulty accessing mental health support, fear of enforcement-led responses, or cultural misunderstandings—are fed back to services to improve professional curiosity, training, accessibility, and fairness.

This continuous feedback loop strengthens safeguarding practice and ensures adults with complex needs or protected characteristics are understood, supported, and empowered in the decisions that affect them.

All these processes under the Community MARAC panel are upheld by the Sharing Agreement agencies in Brent, outlining fair practices applicable to all individuals, regardless of gender, disability, nationality, race, age, religion, or sexual orientation, under relevant laws, including the Antisocial Behaviour Crime and Policing Act 2014 and the Human Rights Act.

Imperial College NHS Healthcare Trust (ICHT)

Measures the Trust implement include:

- All referrals have mandatory section to be completed around Making Safeguarding Personal (MSP)
- The Trust has an Independent Mental Capacity Advocate (IMCA) on one site one day a week
- We have Increased communications around use of Independent Mental Capacity Advocates and also use of Mental Capacity assessments
- It is standard process that Equality Impact Assessments are completed on all policies introduced in the Trust.
- Reasonable adjustments made as required, which application continues to be strengthened

06 SYSTEM PROGRESS

North West London Integrated Care Board (ICB)

The ICB works closely with operational partners to ensure that the lived experiences of individuals with protected characteristics, as well as those from underrepresented communities, are reflected in commissioning decisions. As part of its wider commissioning role, the ICB routinely engages with community organisations and key stakeholders when developing services to meet the needs of local residents. This engagement takes a variety of forms, including collaboration with patient representatives, community roadshows, and other targeted outreach activities designed to inform the design and delivery of health services.

In addition to gathering insight from local communities, the ICB works with regional and national health partners to ensure that the latest intelligence and research are incorporated into service development. This includes collaboration with organisations such as NHS England, as well as specialist clinical and research networks and charities (for example, in areas such as homelessness, domestic abuse, or diabetes and cardiology), to ensure that newly commissioned services reflect current evidence, innovation, and best practice in healthcare delivery. The NWL ICS Learning from Lives and Deaths Panel for People with LD and Autism, has a core membership of two Designated Nurses for Safeguarding Adults to ensure safeguarding issues are recognised and referred to the appropriate Safeguarding Adult Board. There have been a number of referrals for consideration of a Safeguarding Adult Review (SAR) or shared learning. Learning across the health economy is regularly shared through training and supervision.

London North West University Healthcare NHS Trust (LNWH)

The Trust recognises the importance of engaging with people who have lived experience of health and care services, particularly adults with protected characteristics and those from under-represented or marginalised communities. This is essential to ensuring safeguarding practice is equitable, person-centred, and responsive to individual needs. Safeguarding training across the organisation encourages staff to reflect on discrimination, unconscious bias, and the lived experiences of individuals with protected characteristics. This supports a culture where staff are better equipped to listen, recognise structural inequalities, and tailor safeguarding responses to meet cultural, communication, and accessibility needs.

Key areas of work include:

John's Campaign and Carer Passport: The Trust has implemented John's Campaign, a national initiative that promotes the involvement of families, carers, and loved ones as partners in care, particularly for people living with dementia, older adults, and other vulnerable groups. This includes flexible visiting arrangements, enabling carers to remain with patients outside standard visiting hours where clinically appropriate, supporting continuity, reassurance, and improved patient outcomes.

Learning Disability and Autism Support: The Trust's Learning Disability Nurses provide both clinical and strategic leadership to ensure that adults with a learning disability and/or autism receive safe, equitable, and person-centred care. They work directly with patients with complex needs, offering specialist advice, advocacy, and support to ensure reasonable adjustments are identified and implemented across both emergency and planned care pathways. Initiatives such as the use of calm bags in high-pressure environments, particularly Emergency Departments, help reduce distress and improve patient experience. The team also supports a network of Learning Disability Champions to embed best practice at ward level and improve staff confidence.

Domestic Abuse: The Trust has also developed a Domestic Abuse Staff Toolkit and an Easy Read Domestic Abuse Guide for patients with learning disabilities and/or autism, ensuring that support is accessible and inclusive, and enabling individuals to better understand and disclose their experiences safely.

Patient and Carer Engagement: The Dementia Matron and Lead Nurse for Learning Disabilities actively contribute to a multi-agency Patient and Carer Steering Group across Brent, Harrow and Ealing. This forum, led by the Trust's Head of Patient Experience, focuses on strengthening collaboration with community and voluntary sector partners, improving support for carers, and gathering feedback on patient and carer experience.

In addition, the Trust facilitates an internal Patient and Carer Participation Group, ensuring that lived experience directly informs service development and improvement.

Brent Regulatory Services

The Trading Standards team has officers who are Friends Against Scam 'SCAM Champions' and can therefore provide training on how to support and reduce the chances of being a scam victim. In July 2025, as part of the Brent Safeguarding Partnerships, an officer assisted in presenting to practitioners who are entering resident's homes, guidance in recognising the signs of possible financial frauds and scams.

Brent Probation Services

The Probation Service continues to strengthen its engagement with people who have lived experience of the criminal justice system, recognising the value their insight brings to service improvement and inclusion. Nationally and across London, several initiatives support meaningful involvement. These include peer mentoring programmes, and the Going Forward into Employment (GFIE) scheme, which recruits individuals with criminal records into government roles. These programmes ensure that people with lived experience have opportunities to influence practice, contribute to service design, and move into sustainable employment.

Locally, we support initiatives such as the recruitment of Peer Mentor Coordinators—roles specifically designed for individuals with lived experience of probation or custody. Staff are encouraged to share these opportunities with people on probation who may be well-placed to contribute their insight and experience to the service. Through these mechanisms, the organisation is continuing to broaden representation, amplify lived-experience voices and ensure that service developments reflect the diverse needs of under-represented communities and individuals with protected characteristics.

06 SYSTEM PROGRESS

What measures are being taken to embed the London Safeguarding Adults Policy and Procedures?

Brent Adult Social Care (ASC)

A multi-team workshop in December 2025 formally introduced the refreshed London Multi-Agency Safeguarding Adults Policy and Procedures across ASC, ensuring all teams understood the updated statutory expectations and practice standards. Internally, local safeguarding standard operation procedures, including Section 42(1) and 42(2) enquiries, provider concerns, and threshold guidance have been rewritten and aligned directly to the London procedures.

Case management software safeguarding workflows are being updated to incorporate London-aligned requirements, including outcome letters, strengthened evidence capture, and consistent recording templates.

Additionally, all safeguarding training delivered through the ASC Skills Academy is being refreshed to reflect the updated London Policy and Procedures, ensuring staff apply consistent thresholds, use MSP effectively, and follow statutory guidance in their enquiries.

Further embedding work continues through supervision, audit feedback and safeguarding clinics, where application of the London procedures is routinely reinforced and monitored in live casework.

Central London Community Healthcare NHS Trust (CLCH)

In CLCH, the London Multi-Agency Adult Safeguarding Policy and Procedures are embedded through trust-wide safeguarding policies and standard operating procedures, shared, referenced, and promoted via safeguarding supervision sessions with staff.

Mandatory role specific staff training is delivered via induction, e-learning, and face to face updates via a clearly defines pathway aligned to the Care Act 2014 principles. Safeguarding assurance frameworks are reflected within quarterly reports to the ICB alongside mid-year and annual reports.

Safeguarding concerns are escalated through line management and the Trust safeguarding teams with referrals made to the local authority in line with multi-agency procedures and any discordance or ongoing concerns are then escalated through the Brent High-Risk panels and local escalation pathways.

CLCH is an active member in multi-agency partnership working, ensuring proportionate, timely, and accountable responses to safeguarding concerns

VIA - New Beginnings

The Via Safeguarding Adults at Risk policy and procedures are reviewed annually and aligned with the Pan London Safeguarding Adults policy. All changes are shared with the safeguarding leads who disseminate to local teams to ensure that teams know and understand the changes to policies.

During service audits adherence to policy and procedure is reviewed and reported back to managers. Elements of policy and procedure are frequently agenda items at the organisation wide safeguarding leads forum. Additionally, key messages and topics from these meetings are cascaded to local safeguarding meetings. For example, we recently spent time looking at effective working with pregnant clients and ensuring safeguarding procedures are understood and being appropriately used.

The organisation does an audit every two years (based on Section 11, but for all safeguarding) where services self-assess. This is used to both inform where training and support would be beneficial and to pull together a Via wide action plan. The National and Quality Team safeguarding leads also met with each service individually to discuss anything relevant to their specific service. The Brent S11 audit action related to the roll out of Trauma Informed Care training, alongside partners CNWL, for staff, this has been completed and is a mandatory requirement for all staff.

MET Police

The Metropolitan Police Service implements this policy by:

- Embedding Pan-London procedures into local policing practice
- Identifying and safeguarding adults at risk alongside investigations
- Working in partnership with safeguarding agencies
- Applying trauma-informed, person-centred approaches
- Learning from SARs and continuous improvement processes

Central & North West London Foundation NHS Trust (CNWL)

Our Named Professional for Safeguarding Adults and the Mental Capacity Act is a member of the task and finish group commissioned by the Brent Safeguarding Adults Board, and this group is currently reviewing and implementing local safeguarding policy to ensure compliance with the London Safeguarding Adults Policy and Procedure.

Our own Safeguarding Adults policy is also under review to reflect the London Policy and to embed learning from Safeguarding Adults Reviews.

06 SYSTEM PROGRESS

London North West University Healthcare NHS Trust (LNWH)

The Trust's Safeguarding Adults Policies and practice are aligned with the London Multi-Agency Adult Safeguarding Policy, Practice, Guidance and Procedures, ensuring a consistent and coordinated approach to safeguarding across partner agencies.

Embedding of the London framework is supported through a number of key measures:

- **Training and Workforce Development:** The Trust maintains high standards of safeguarding training in line with the Intercollegiate Document for Healthcare Staff. This includes Level 3 safeguarding training, which incorporates the six safeguarding principles outlined in the Care and Support Statutory Guidance and promotes consistent application in practice.
- **Making Safeguarding Personal (MSP):** A strong emphasis is placed on person-centred practice, ensuring that adults are involved in decisions about their safety wherever possible. Staff are supported to balance risk, autonomy, and protection, in line with MSP principles.
- **Multi-agency Working and Section 42 Enquiries:** The Trust works closely with partner agencies to prevent and reduce abuse and neglect, contributing to effective multi-agency safeguarding arrangements. This includes active participation in Section 42 enquiries, strategy discussions, and safeguarding investigations.

Policy Framework and Specialist Safeguarding Areas

The Trust has a robust policy framework supporting key safeguarding areas, including:

- Persons in Positions of Trust (PiPoT)
- Safeguarding and pressure ulcers
- Responding to adults experiencing homelessness
- Recognition of emerging risks, including online abuse
- Transitional Safeguarding

The Trust has established a Transitional Safeguarding Board to support young people moving into adulthood, recognising the additional vulnerabilities associated with transition and ensuring continuity of safeguarding support across services.

A revised Domestic Abuse Policy, underpinned by a clear "golden thread" of Recognising, Responding, Supporting and Preventing Harm, ensuring a consistent and structured approach across services.

The Trust is committed to being a safe place for adults, where safeguarding is recognised as everyone's responsibility. This is supported through clear policies, accessible guidance, and ongoing visibility of safeguarding across clinical and non-clinical services.

The Trust has also contributed to national work through participation in the NHSE Safeguarding Adults National Network (SANN) Task and Finish Group, which developed an All-Age Professional Curiosity Rapid Read Practitioner Briefing. This resource has been shared with partner agencies supporting wider system learning and strengthening professional curiosity in safeguarding practice, including Brent, where it informed the development of a local 7-minute briefing to support practice. Embedding is further supported through ongoing learning from safeguarding reviews and local partnership activity

North West London Integrated Care Board (ICB)

The ICB continues to play a central role in coordinating the health system's approach to safeguarding adults across its partner organisations. This includes regular engagement with contracted providers, such as primary care services, acute and inpatient services, and community services, including mental health services, continuing healthcare, and district nursing. The ICB also works directly with services commissioned through pan-London arrangements, such as the London Ambulance Service.

The ICB's ability to coordinate policy responses is delivered via established reporting mechanisms and multi-agency forums, through which the ICB works to align safeguarding practice and promote consistent implementation of the London Safeguarding Adults Policy and Procedures.

The ICB maintains a quarterly reporting process through the Safeguarding Health Outcomes Framework (SHOF). In addition, it further strengthens oversight and harmonisation of policies and procedures via a rolling quarterly "hot topic". This enables the ICB to better calibrate how health providers deliver against specific safeguarding issues, with partners asked to provide targeted assurance and evidence of practice.

For example, a recent "hot topic" focused on carers' assessments. Learning from local Safeguarding Adults Reviews and Domestic Homicide Reviews has highlighted the need to improve awareness of carers' assessments across multi-agency services, with concerns that opportunities to identify carers are sometimes missed during care delivery. In response, partner organisations were asked to demonstrate:

- How they promote carers' health and social wellbeing as part of patient care and treatment.
- Whether there is a clear policy and/or pathway in place for carers' assessments.
- How referrals to local authorities for carers' assessments are identified and recorded.
- How a "whole-family approach" is embedded in assessment and support, particularly in relation to young carers and their families.

Imperial College Healthcare NHS Trust

ICHT has updated internal policies to reflect the updated procedures and made amendments to training content offered so that it aligns with the Pan London Policy. The Policy itself has been added to our internal safeguarding intranet pages as a resource.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 1 – SELF NEGLECT

What has the Board achieved?



The Brent Self-Neglect Toolkit and associated resources were developed collaboratively with Board Partners to strengthen local practice and consistency in responding to self-neglect. This priority has persisted due to the continued prevalence of self neglect in both Safeguarding Adult Reviews and case referrals, highlighting a need to ensure competence in how practitioners approach and support those who need it.

The Toolkit provides a combination of theory, signposting to essential resources and templates to support practitioners with how to approach and support those who self neglect. It includes helpful topics such as:

- Challenges with engagement
- Legal literacy
- Homelessness & self neglect
- Fire risks & Hoarding
- Assessing decisional & executive capacity

These documents were formally approved by the Board and successfully launched at a live event hosted by the Board Chair in October 2025, which was attended by **53 professionals** from across the Brent Partnership.

In response to positive feedback from event attendees, the introduction session has since been adapted into a stand-alone webinar, which is hosted online to allow colleagues to access the material flexibly at their convenience.

The core toolkit is further supported by the following resources:

- A published **'Process Flowchart'** providing clear guidance on key steps and responsibilities.
- A template **assessment form** for hoarding, designed to support practitioners in conducting structured and comprehensive assessments.
- Ongoing access to the **recorded webinar**, ensuring sustained availability for practitioners across the partnership.

The impact of implementation and usage of the toolkit will need to be tested in 2026/27, and amended to reflect feedback received from practitioners. Partners will share further in the report how the toolkit has started to be introduced and used across the system.

In the coming year, the Board will look to seek further assurance on what impact this has had in how practitioners approach working with self neglect and hoarding cases. A 7 minute briefing has also been produced and published in regard to self neglect,

In addition to the above resources, the Board launched its first **'Safe-Tea' podcast**, hosted by the Brent Safeguarding Adults Board Independent Chair, with the inaugural episode focused on prevention in self neglect work and how practitioners can take realistic steps to help prevent escalation.

It is hoped this new approach will provide a more flexible and reflective method of learning, that breaks away from 'theory' and focuses on hearing about practice examples and experiences that can be adopted and applied. As of March 2026, this episode has been listened to **85 times**.



06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 1 – SELF NEGLECT

What have Partners achieved?

Brent Adult Social Care (ASC)



The self-neglect toolkit produced by the Brent Safeguarding Adults Board is now routinely applied across triage, safeguarding clinics, supervision, and case audits, ensuring consistent assessment of risk and executive functioning.

Staff have received targeted safeguarding training aligned to Pan-London procedures, with specialist mental health and threshold training scheduled for March 2026. Weekly reflective sessions and coaching reinforce learning from SARs and complex cases.

Joint safeguarding clinics and stronger cross-team coordination have improved consistency, reduced repeat referrals for high-risk individuals, and enabled earlier joint interventions in complex self-neglect cases. Strengthened governance and learning from SARs have improved defensibility.

North West London Integrated Care Board (ICB)



the ICB delivers its safeguarding responsibilities primarily through its oversight of contracted operational partners. This includes promoting the use of established mechanisms such as the self-neglect toolkit and other offers such as a rolling programme of training, and other system-wide resources designed to support best practice.

From a commissioning standpoint, the ICB holds providers to account where such measures are not effectively implemented. The ICB routinely monitors training compliance and other performance data in addition to other safeguarding KPIs – including: trends in the number and nature of safeguarding concerns raised within specific areas, such as self-neglect, domestic abuse or acts of omission.

Where persistent issues or gaps are identified, these are escalated with providers and addressed through contractual and performance management processes.

Metropolitan Police



Use of the Toolkit

The Police are not using the tool kit routinely at present.

Workforce Training

There has been no training on the tool kit or self-neglect at present. However, the tool kit has been shared with the neighbourhood policing teams Inspectors for Brent for them to review, and any training requests will be followed up.

Central & North West London Foundation NHS Trust (CNWL)

The Self-neglect Toolkit has been distributed to all services and put into practice. We have collected solid evidence of its practical use when considering raising safeguarding concerns. This has strengthened our approach through multi-agency safeguarding meetings, promoting early identification and intervention for at-risk individuals.

Practice has been discussed during safeguarding supervision and reflective sessions and has become a fundamental part of every safeguarding discussion or consultation, and the Self-neglect Tool has been incorporated into safeguarding and MCA training to increase staff awareness.

CNWL's Brent Borough Director and the Brent Lead Occupational Therapist are developing a pathway for practitioners dealing with low-level self-neglect/hoarding cases that do not meet the threshold for multi-agency intervention. This issue was also highlighted in recent fatal fire death reviews.

Our Safeguarding Adults team has circulated the new Self-Neglect and Hoarding Toolkit in clinical areas. They also promoted the 'Safe Tea' podcast to local teams, where the SAB Chair discusses current issues. Recently, the SAB Chair issued a statement on the importance of MCA in practice with the Deputy Safeguarding Head at CNWL. Initial feedback from practitioners has been positive regarding the themed podcasts.

Imperial College Healthcare NHS Trust (ICHT)

IN ICHT, the Brent self-neglect toolkit has been shared across safeguarding committee representatives for wider cascade to teams who would benefit from it and added to our internal Safeguarding intranet pages. The toolkit is also referenced in training.

We are seeing safeeguarding referrals increasing around self-neglect presentations and undertaking discussions within safeguarding supervision

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 1 – SELF NEGLECT

What have Partners achieved?

Central London Community Healthcare NHS Trust (CLCH)

Self-neglect remains the highest criteria for referral to social care and is often the areas staff find most difficult, especially when patients have capacity.

Complex cases are discussed in two weekly case discussion that all staff can refer into, discussion helps identify cases where early intervention and support may be required and we use this to agree next steps for clinicians.

CLCH cover self-neglect and abuse during safeguarding adults training at all levels and encourage practitioners to discuss cases with the safeguarding team. We make risk assessment tools readily available for staff and discuss them during all training.

We have noticed a better awareness around the links between Hoarding, Self-neglect, and Fire risk – increased use of clutter rating scale and fire risk assessment

Staff training

- The Brent toolkit was recirculated across all Brent teams and staff are encouraged to use the guidance
- SAB training is shared with staff and teams across Brnet, and self-neglect and hoarding is incorporated into staff mandatory training Levels 1-3.
- Two Weekly case discussion and reflection reinforce learning from SARs and complex cases.

Multi-Agency Work has resulted in stronger links with social care and early multi-agency meetings have helped develop more consistency, especially when also discussing case at complex case meetings.

Going forward, teams would benefit from earlier or prompter update to cases from social care in relation to actions and support put in place. This would allow for continued improvements to outcomes.

London North West University Healthcare NHS Trust (LNWH)

The Trust continues to support the Brent Safeguarding Adults Board priority on self-neglect through active engagement in multi-agency forums, workforce development, and safeguarding practice.

A Trust representative regularly attends the Brent High Risk Panel, where complex self-neglect and hoarding cases are discussed. Where individuals are admitted to hospital, the Trust contributes to multi-agency planning, supporting coordinated actions and facilitating safe and appropriate discharge arrangements. This reflects strong partnership working across Brent.

Within the organisation, self-neglect is recognised as a complex safeguarding issue requiring a coordinated and proportionate response.

Staff are supported to:

- Identify and escalate safeguarding concerns appropriately
- Seek advice from the Safeguarding Adults Team to support decision-making
- Recognise cumulative and escalating risks, including environmental hazards and fire risk
- Apply the Mental Capacity Act as a central component of assessment and risk management

The Trust works collaboratively with partner agencies where adults with capacity remain at high risk, contributing to the development of shared risk management plans that balance autonomy and protection.

While the statutory duty to undertake safeguarding enquiries sits with the Local Authority, the Trust fully cooperates with Section 42 enquiries, ensuring timely information sharing and contribution to safeguarding decision-making.

The Brent Self-Neglect Toolkit is being incorporated into Level 3 safeguarding training to strengthen workforce understanding and application. However, consistent use of the toolkit in practice remains a challenge due to clinical pressures and competing demands within acute settings.

Brent Probation Services

Practitioners have been supported to improve identification and escalation of self-neglect through reflective supervision, quality practice hubs and increased awareness of local pathways.

This has contributed to more consistent use of multi-agency forums—including multi-agency safeguarding hubs, Integrated offender management, Multi-agency public protection arrangements, and Exploitation, violence & vulnerability panels—to monitor risk, share information and agree coordinated actions for adults with intersecting vulnerabilities.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 1 – SELF NEGLECT

What have Partners achieved?

Brent Regulatory services

Our Environmental Health participate in multi-agency meetings to assess self-neglect cases and hoarding behaviour, agree action plans including enforcement actions to tackle public health risks and nuisance arising from this kind of behaviour.

In appropriate cases legal enforcement notices have been issued, ahead of the council utilising its powers to carrying out works in default.

Where cases require a multi-disciplinary approach, they are referred to the 'High Risk Panel' to be assessed by Safeguarding, ASC, Community Mental Health and the GPs to try and effect a programme of resolutions. These cases are referred through the 'Self-neglect Toolkit' (which was introduced by the Safeguarding team) by officers from EH, PRS, ASC and other units.

VIA - New Beginnings

From an organisational perspective during 2025 – 2026, Via has seen an increase of referrals submitted to local authorities due to complexity of self-neglect and have continued to support individuals who may refuse a statutory intervention.

The ongoing challenge is when referrals are not accepted, as individuals may not meet threshold and their behaviours can be seen as an unwise decision and that the person referred is making a lifestyle choice.

While an individual may not be deemed to meet the threshold their needs and potential risks are still more significant than can be addressed by a community drug and alcohol service in isolation.

Brent New Beginnings has a comprehensive Outreach Team and during 2025 - 2026 delivered a number of key objectives in line with our published Outreach Strategy. This outreach enables the team to identify those in the community most at risk of self-neglect and harm.

The comprehensive Outreach Team also supports the facility of home visiting which allows professionals, including clinicians and Dr's to see individuals in their home.

Identifying care and support and particular issues in relation to self-neglect. During 2025 - 2026 the outreach service carried out a minimum of **281 home visits** (at time of writing, reporting for March 2026 is not yet finalised.)

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 2 - HOUSING NEED AND SUBSTANCE MISUSE

What has the Board achieved?

In July 2025, the Chair met with key points of contact responsible for various existing panels and review processes across the Brent system, including Drug and Alcohol Related Death reviews, Domestic Abuse Related Death Reviews, Offensive weapon Homicide reviews & Homelessness Mortality reviews to start to establish a clearer way forward, with tighter governance and assurance.

The Mortuaries team also attended to speak on what data they have access to and collate in regards to deaths, that may have not come through a review process.

The following was agreed:

- Once processes are established, to meet every 6 months to check in report into the SAB around data and outcomes from the various existing panel processes.
- Development of an internal triage process for SARs, DARDs & OWHRs to ensure they follow the most applicable and effective review process, without duplication.

The first stage of this improvement work commenced by convening a dedicated meeting with Housing Providers servicing Brent to gauge their understanding of their statutory duties around reporting homelessness deaths.

The aim was to co-produce an established process to improve their awareness of their responsibilities and to improve compliance and reporting.

Following a successful initial meeting, this resulted in the development of:

- 2 process guidance documents, 1 for Providers and 1 outlining the wider process.
- An accompanying reporting form was developed to standardise responses.
- A dedicated presentation session held in December 2025 to launch these tools with the relevant Providers and start to embed the process
- A consideration of a wider 'launch' event to be held 2026 to look at National & local cases and start to test out and improve effectiveness of the process.

There has since been an expansion on reach after recognition that Supported Exempt Accommodation Providers should also be included in the process. Approved in December 2025 and launched, the Brent Housing Team moving forward will be able to better assure the Board around figures and actions undertaken regarding homelessness deaths.

Further work will follow around the other panels and exploration in to how we can streamline triaging, clearer referral pathways for the system and develop better routine reporting into the Board.

The final outcome will be that the Board will be assured of solid processes across the various death related panels and receive regular 6 monthly updates. Homelessness will continue to be a strategic priority over the 2026-2028 period.



Brent Homelessness Mortality Reviews

Understanding the comprehensive process for addressing homeless mortality in our community

01

Notification

Death is reported to the Housing Provider for a review to be initiated.

02

Level 1 Review

The Housing Provider collects relevant information and identifies key learning before submitting the findings report form to the Brent Director of Housing.

03

Level 2 Review

The Director convenes a multi-agency panel to analyse the death and identify significant themes for further action.

04

Reporting

The Director reports findings to the BSAB CRG to ensure ongoing learning and improvement, and consideration of a Care Act s44, if appropriate

05

Continuous Improvement

The Director submits an annual report on learning outcomes from the homeless mortality reviews to the BSAB.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 2 - HOUSING NEED AND SUBSTANCE MISUSE

What have Partners achieved?

Brent Adult Social Care (ASC)



Staff confidence in working with people who misuse substances

Staff confidence has strengthened through targeted safeguarding training, weekly reflective clinics, and updated legal-literacy sessions focused on mental health, substance misuse and risk planning. These improvements form part of the wider workforce development programme and safeguarding clinics reinforced in 2025-26.

Staff awareness of referral routes to drug and alcohol services

There are clear referral pathways into Change Grow Live (CGL) and homelessness services have been widely disseminated across teams through updated standard operating procedures and supervision discussions. This ensures practitioners understand how to refer, escalate and coordinate multi-agency responses when substance misuse is a factor.

Organisational response to cuckooing and home invasion

ASC follows the Brent Multi-Agency Cuckooing Protocol, ensuring immediate risk assessment, joint visits with Housing and Police, and safeguarding referrals where exploitation is suspected. Indicators of cuckooing and home invasion are also captured through strengthened provider-concerns oversight and multi-agency intelligence, enabling earlier detection and coordinated intervention.

Strengthened multi-agency coordination

ASC has enhanced joint working through:

- SMART24, which provides rapid multi-agency decision-making on adults at risk with overlapping needs such as substance misuse, homelessness and exploitation.
- Regular Housing Clinics, jointly chaired by ASC Mental Health Team and Housing, enabling coordinated risk planning, earlier intervention and consistent escalation pathways for adults experiencing housing insecurity and substance-related harm.

These structures help ensure shared risk ownership, faster problem-solving, and more consistent safeguarding responses across agencies.

The ICB fulfils its safeguarding responsibilities by seeking assurance from its contracted partners. Where concerns arise, it holds providers to account through established mechanisms, including performance and assurance reviews.

In this context, significant issues — such as emerging trends indicating a failure to respond appropriately to risks such as cuckooing/home invasion, or substance misuse — these are identified through routine monitoring and escalated via contractual performance processes.

This ensures that concerns are addressed promptly and that providers are supported and challenged to improve practice where required.

North West London Integrated Care Board (ICB)



Metropolitan Police



Staff confidence in working with people who misuse substances

Brent neighbourhood policing teams work very closely with VIA, who are commissioned by Brent Council for drug and alcohol misuse.

Staff awareness of referral routes to drug and alcohol services

Project ADDER (Addiction, Diversion, Disruption, Enforcement and Recovery) within the Metropolitan police service, allows police to complete a referral for anyone that needs support. Prior to this, police would refer direct into VIA.

Organisational response to cuckooing and home invasion

Inspector Zhang, Brent NPT, is in regular contact with the head of service for public health. They information share and feed into each other's plans. For examples, police can direct VIA outreach into area with Class A use. SNT sergeants will attend the monthly Community MARAC meetings.

It's at these CMARAC meetings that cases of cuckooing are discussed. Information is shared with Adult Social Care, Public Health and Police. There are **currently 9 live cases with about 60 cases dealt with** in the last year. Between the partners on the CMARAC an action plan will be formulated, normally consisting of police attendance to confirm welfare of subject and dealing with any criminal offences.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 2 - HOUSING NEED AND SUBSTANCE MISUSE

What have Partners achieved?

Central London Community Healthcare NHS Trust (CLCH)

Strengthening staff confidence when dealing with patients who misuse substances is an ongoing priority for the coming year. Staff will bring cases to complex case meetings and supervision for discussion and recognise impact these risks can have on patient recovery and care. Future updates from substance misuse services will be planned in 26/27.

This year's CLCH safeguarding conference was titled: See Me, Hear Me - Make the Difference and included discussion presentations on considering executive function and included presentations from Professor Michael Preston Shoot.

Multi-exclusion homelessness (MEH) is included in training re: risk and seeing MEH as a safeguarding concern. The CLCH homeless health team held a conference which included a session on safeguarding adults delivered by a member of the Safeguarding team, the team are also available to advice and guide clinicians.

Staff are aware of referral routes to drug and alcohol services and there are clear referral pathways into services, which are shared across Brent teams.

Cuckooing is an ongoing area of concern for staff; work is ongoing re: recognising cuckooing by being professionally curious and escalating concerns promptly. We have seen escalations over the last year and more curiosity. This work also incorporates importance of staff safety and lone working policies. The SAB 7-minute briefing has been shared across teams. Indicators of cuckooing and home invasion are also captured through early case discussion and escalation and incorporated into training across the Trust.

Central & North West London Foundation NHS Trust (CNWL)

Local CNWL services are, together with the local authority, running substance misuse services and are aware of the referral pathways and processes involved. Substance misuse and dependency are assessed as a part of routine initial assessments and documented and referrals to substance misuse services are offered where there are identified challenges or issues in relation to substance misuse.

In 2025 a meeting was held with service managers for substance misuse services and mental health services promoting a better understanding of referral pathways and processes relating to substance misuse and relevant presentations were provided to local teams.

CNWL is a core member of the High Risk Panel, addressing health-related concerns and implementing interventions as needed. We also contribute to general discussions when the Multi-disciplinary Team agrees on the best course of action. The High Risk Panels meet weekly.

Cuckooing/home invasion has long been part of our standard safeguarding training, and learning from a recent SAR with a large element of cuckooing in another London Borough has been shared with clinical teams. This included responding to indicators, and these are linked in to local procedures and pathways.

VIA - New Beginnings

The Brent New Beginnings service is available to provide training and support including 1:1 case support for case discussion. This support is available 24/7 through the New Beginnings helpline which is available 24hrs a day every day of the year.

The Brent New Beginnings service is available to support referrers with any queries; referrals can be made online or in person by professionals. Individuals can be supported to complete referrals over the phone, as above this facility is available 24/7.

The organisational procedure is that all victims of cuckooing / home invasions are placed on the service safeguarding tracker for ongoing monitoring and management oversight and that services follow their local referral pathway.

Brent Probation Service

Practitioners have benefited from high levels of support and visibility from local substance misuse partners, including VIA and Forward Trust, who provide regular office-based sessions and swift pathways into treatment. This improved accessibility has enabled earlier intervention, more coordinated care planning and increased engagement from individuals with complex needs. In relation to housing, practitioners have continued to make timely referrals to Brent Housing, St Mungo's and Commissioned Rehabilitative Service for accommodation support, ensuring individuals at risk of homelessness or unsafe living environments receive specialist assessment and intervention.

Routine use of personal wellbeing assessments and joint working with the Community Mental Health Team has further strengthened our response to adults where self-neglect, mental health decline or hoarding behaviours present safeguarding concerns.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 2 - HOUSING NEED AND SUBSTANCE MISUSE

What have Partners achieved?

London North West University Healthcare NHS Trust (LNWH)

The Trust continues to support the Brent Safeguarding Adults Board priority on housing need and substance misuse through targeted pathways, partnership working, and staff support. The Trust has a dedicated Homeless Pathway Team, which supports patients who are homeless or have no fixed abode. The team works with individuals during admission to complete relevant assessments, establish eligibility for housing, and liaise with Local Authority housing services, supporting safe and appropriate discharge planning.

In relation to substance misuse, staff are supported through established referral pathways and partnership working. Emergency Departments and inpatient wards can refer directly to the Alcohol Liaison Nurse Service (provided by CNWL), and there are well-established links with local substance misuse services, including VIA, enabling timely referral with patient consent.

Staff confidence in working with individuals who misuse substances is supported through safeguarding training, access to specialist advice (including the Safeguarding Adults Team and liaison services), and multidisciplinary working. However, as with other complex safeguarding themes, confidence may vary depending on staff experience and exposure, and this remains an area for continued development through training and reflective practice.

Staff are made aware of referral pathways through training, clinical guidance, and support from specialist teams, ensuring that individuals can be signposted or referred to appropriate local services.

In relation to cuckooing and home invasion, the Trust responds in line with safeguarding procedures under the Care Act 2014. Where concerns are identified, safeguarding referrals are made to the relevant Local Authority, and immediate risks are assessed, including the safety of discharge arrangements.

The Trust works collaboratively with partner agencies, including Local Authority safeguarding teams, housing services, and the police, recognising that these situations require a coordinated multi-agency response. Where appropriate, cases are escalated to multi-agency high-risk forums to support effective risk management and safeguarding planning.

Imperial College Healthcare NHS Trust (ICHT)

At ICHT, alcohol services are embedded in emergency departments and patients are tracked across the Trust to give assistance to patients in community and whilst as an in-patient.

Safeguarding supervision is available for all staff and we have also commenced an audit around alcohol use and safeguarding response. Cases will be brought to safeguarding supervision and/or to the safeguarding team for advice. Following this, safeguarding referrals will be submitted and/or professional meetings will be held.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 3 – LEARNING FROM SARS

What has the Board achieved?

Mental Capacity

Born from an action in the 'Indira' Safeguarding Adults Review recommendations, and that Mental Capacity Act has arisen as a repeat theme in review cases, a multi-agency task and finish group was set up to review learning needs across the system and consider potential solutions.

The Mental Capacity Task and Finish group successfully concluded in June 2025, with the following outputs:

- Development and collation of responses to a multi-agency survey of professionals speaking on their experience and knowledge around mental capacity, with an aim to identify knowledge and process gaps in the Brent system.
- Publication on the Safeguarding Partnerships website of a practical case study resource, based on Brent cases, for Brent professionals that can be used as training material or reflective practice tool.
- Their experience and knowledge around mental capacity, with an aim to identify knowledge and process gaps in the Brent system.

Learning theme briefings

In response to other emerging case themes and SAR learning, the Board has produced topical 7-minute learning briefings that are publicly available for professionals on the following:

- Self neglect
- Professional curiosity
- Trauma informed Practice
- Substance misuse
- Suicide Prevention
- Modern slavery
- 'Cuckooing' or 'Home invasion'

In addition, The Chair has committed to hosting monthly 'Learning from SARs' lunch & learn sessions, focusing on local and national SAR learning,



Feedback loops

A learning point featured in the 'Indira' SAR was a need for improvement in feedback loops, this has been echoed through work in the Performance and Audit group and also in the Pan London policy task & finish group.

An action was set for a clear policy to be drafted, that would outline for referring partners what the process should be in terms of what feedback they should receive and what detail they will get. This can then be tested for compliance in application, and assurance can be sought from agencies as to what they do next when a referred case is not taken forward.

Governance changes

There was a recognition that recommendations and actions from SARs in the past have taken too long to address, leaving plans active for much longer than they should be. The Board has now agreed to move towards a 'task and finish' approach when it comes to addressing review actions.

This method has helped to expedite work around learning and partners have initially fed back that it has helped to keep them more accountable in seeing recommendations through. The task and finish model is something that the Board looks to use increasingly in the coming year, as it's approach appears to be a more focused and outcome orientated than relying on routine meetings.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 3 - LEARNING FROM SARs

What have Partners achieved?

Brent Adult Social Care (ASC)



Learning from local and national SARs has directly informed updated to safeguarding standard operating procedures, decision-making guidance, audit tools and training content.

Themes from the Adult H SAR—including escalation, chronologies, advocacy, Making Safeguarding Personal and Mental Capacity Act have been embedded into practice, risk planning approaches and quality assurance processes.

SAR learning has been shared through Lunch & Learn sessions, management briefings and reflective practice forums.

messages have been incorporated into induction, supervision templates, coaching sessions and audit feedback loops, ensuring SAR themes are consistently applied across teams and integrated into everyday practice.

The ICB's multi borough footprint means it is uniquely positioned to disseminate safeguarding learning at scale across North West London. This reach ensures the ICB has the ability to drive consistency, reduce variation in practice, and embed safeguarding standards across a complex health economy. In this context, the ICB plays a critical system leadership role to ensure that learning from Safeguarding Adults Reviews other safeguarding intelligence is translated into practice.

North West London Integrated Care Board (ICB)



This is achieved through a structured approach to information sharing and partner engagement, including multi-agency forums such as the quarterly North West London Safeguarding Leads Meeting, primary care and GP safeguarding leads interface meetings, and wider place-based network arrangements. These forums provide a tried and tested vehicle for both cascading information, and professional challenge, reflective learning, and the triangulation of safeguarding themes across and between health partners.

In addition, the ICB actively signposts partners to relevant safeguarding boards and sub-groups across the North West London safeguarding system, ensuring alignment with local priorities. Key lessons are further reinforced through contractual and performance management processes that enable the ICB to seek assurance that providers have embedded recommendations from reviews into policy, training, and practice.

New contracts are routinely reviewed against current safeguarding legislation, policy, and emerging best practice, ensuring that safeguarding requirements are explicit, measurable, and enforceable. This enables the ICB to utilise its contractual weight not only to hold providers to account but also drive improvement and a culture of proactive rather than reactive safeguarding

Metropolitan Police



Changes made in response to SARs

Learning from local and national SARs has directly informed updates to safeguarding Standard Operating Procedures, decision-making guidance, audit tools and training content.

How learning has been disseminated and embedded

SAR learning is being shared through the teams via their managers at team meetings. Presentations have been given to response officers when they parade for duty.

Brent Probation Service

Probation have actively strengthened practice in line with themes arising from the Indira SAR and the current learning emerging from the HR SAR. Our focus has been on embedding learning that improves professional curiosity, the use of interpreters, information-sharing and the timely escalation of safeguarding concerns.

Quality Practice Hubs have supported this by increasing opportunities for face-to-face skills development, case discussion and peer learning. These hubs have helped reinforce practitioners' confidence in recognising safeguarding indicators, understanding referral pathways and escalating risk where concerns persist. This aligns directly with SAR themes relating to multi-agency communication, coordinated risk management and clarity of professional roles.

In addition, annual safeguarding training—delivered both online and in person—continues to be mandatory for all staff, with follow-up monitoring to ensure completion. This has strengthened practitioner understanding of self-neglect, hoarding, substance misuse and mental-health-related vulnerabilities, alongside reinforcing responsibilities under the Care Act. Regular refreshers ensure that learning from SARs is embedded consistently across the team. Together, these improvements have enhanced our ability to identify, respond to and escalate safeguarding concerns at an earlier stage, supporting safer and more coordinated practice across Brent's multi-agency safeguarding system.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 3 - LEARNING FROM SARs

What have Partners achieved?

Central London Community Healthcare NHS Trust (CLCH)

Learning from local and national SARs has informed updates to safeguarding standard operating procedures, decision-making guidance, audit tools, and training content. Themes are also discussed within Safeguarding committee and incorporated within the Safeguarding annual workplan.

Themes from the Adult H SAR, included escalation, chronologies, advocacy, making safeguarding personal and the mental capacity act, all of which are ongoing areas of discussion with staff and cases, and we continue to embed into practice, risk assessments, and quality assurance.

SAR learning has been shared through Lunch & Learn sessions, briefings, and reflective practice forums. Key messages are incorporated into induction, supervision templates, and audit feedback, ensuring SAR themes are consistently applied and integrated into everyday practice.

The annual CLCH safeguarding conference agenda uses the preceding year's themes and topics from SAR's to reflect and update about National policy and guidance and encourages professional curiosity to challenge and ask questions.

This year's conference was titled: CLCH Safeguarding Conference 2025 - See Me, Hear Me - Make the Difference and included discussion presentations on considering executive function / the Mental Capacity Act in decision making, and working with families when access to a vulnerable patient is blocked or there is a breakdown in relationships.

CLCH and system-wide webinars have been delivered on trauma-responsive services, drawing on learning from the Stephen SAR and associated 7-minute briefing, as well as sessions covering self-neglect, no access, and the Mental Capacity Act (MCA).

In addition to the above, the following SAR-driven activity has taken place:

- An online seminar presented by Alex Ruck Keene (Mental Capacity legal expert) was promoted across teams.
- The Associate Director of Safeguarding has delivered webinars / training on SARs.
- Fire Deaths: Survey completed, and fire risk included in training. Evidence of referrals to fire and rescue services
- Multi-exclusion homelessness-(MEH): Included in training re: risk and seeing MEH as a safeguarding concern.
- CLCH homeless health team held a conference which had a session on safeguarding adults delivered by a member of the Safeguarding team.

CLCH has delivered a quarterly journal club webinar that have included topics:

- Was not brought/ No access
- Restrictive Intervention
- PIPOT/Lado
- Fire Review
- Escalation

Central & North West London Foundation NHS Trust (CNWL)

Learning recommendations from various SARs are included in each quarterly divisional report to promote learning and raise awareness among management and staff. The main themes this year have been:

- Inconsistent use, recording, and application of the Mental Capacity Act
- Complex self-neglect that is not adequately recognised, addressed, and escalated when necessary;
- Carers are not recognised as carers, nor offered assessments or support, which may lead to carers' stress contributing to increased risk and harm;
- Fragmented multi-agency working, with information not shared appropriately;
- Hidden exploitation of adults with care and support needs, and misinterpretation of "lifestyle choice" where coercion is involved, including cuckooing/home invasion.

We have implemented key recommendations from recent SARs by enhancing information-sharing protocols and reinforcing professional curiosity during case reviews. Safeguarding training now includes SAR learning modules that focus on systemic issues and improving safeguarding decision-making. To improve staff knowledge and expertise in applying the Mental Capacity Act, as it is a recurring theme in SAR recommendations, a week of Mental Capacity Act awareness activities was organised in May, featuring various workshops, presentations, and case discussions, and a second week is planned for May 2026 as well.

Imperial College Healthcare NHS Trust (ICHT)

Strengthening learning around Mental Capacity Act, advocacy, making safeguarding personal, fatal fire work continues, in addition to safeguarding and mental health concerns, professional curiosity and difficult conversations.

Learning is shared across the ICT safeguarding committee to divisional representatives who will take key information back for wider cascade. The Trust participated in safeguarding adult week with training and learning from SARs that included sessions on 'Today I Learnt Something' and 'Back to the Floor and In the Know' sessions. SAR learning is used with safeguarding training and safeguarding supervision presentations.

06 STRATEGIC PLAN PROGRESS 24-26

Brent's progress on agreed priorities in 25/26

PRIORITY 3 - LEARNING FROM SARs

What have Partners achieved?

London North West University Healthcare NHS Trust (LNWH)

The Trust has continued to strengthen its approach to learning from both local and national Safeguarding Adult Reviews (SARs), ensuring that learning is translated into practice and embedded across the organisation.

SAR findings and recommendations are systematically reviewed by the Safeguarding Adults Team and escalated through internal governance structures, including the Safeguarding Adults Committee, Integrated Safeguarding Board, and relevant training forums. This ensures organisational oversight and accountability for implementation.

Learning from the Adult G SAR and another local SARs informed a targeted audit of the use of the Safeguarding Adults Decision Guide for Patients with Pressure Ulcers. This provided assurance around practice and identified areas for improvement in the recognition and escalation of safeguarding concerns related to tissue viability.

In response to SAR learning, the Trust delivered multi-agency "lunch and learn" sessions for both LNWH staff and community partners. These sessions, delivered jointly by the Safeguarding Adults Team and the Trust Consultant Tissue Viability Nurse (TVN), focused on the identification, classification, and management of pressure ulcers, as well as when concerns should be escalated as safeguarding issues.

Learning from SARs is also embedded within safeguarding training programmes and wider educational activity, supporting staff to reflect on practice, strengthen professional curiosity, and improve decision-making in complex safeguarding situations.

This approach supports a culture of continuous learning and improvement, ensuring that safeguarding practice evolves in response to both local and national learning.

VIA - New Beginnings

Via commissioned and delivered the Domestic Abuse Routine Enquiry (DARE Toolkit) training following a review which focused on working with individuals who cause harm. This was rolled out to all safeguarding leads.

A key change being implemented for couples in treatment is the importance of reviewing them in multi-disciplinary teams as a couple as well as reviewing their individual needs, this is particularly pertinent when there are concerns of possible domestic abuse and violence in their relationship

On completion of external reviews, any learning and recommendations are presented at the quarterly safeguarding committee meeting and service safeguarding leads are required to share the learning within their local team meetings to ensure lessons are learnt.

08 LEARNING & DEVELOPMENT

BRENT SAFEGUARDING PARTNERSHIPS MULTI-AGENCY LEARNING

New Learning & Development Strategic Plan

The new Brent Safeguarding Partnerships Learning and Development Strategic Plan has been developed in response to feedback and recognition that the prior approach to the Partnerships learning strategy- led by a sub group, was not as effective at addressing learning and driving system improvements as it should be. The group, whilst well established, did not always have the right voices or knowledge in the room to help move forward the learning priorities..

It was recognised that different strands of work and subject areas often require a broader and more diverse range of expertise than the current sub-group structure allows. It was also acknowledged that, while face-to-face training can be valuable in certain contexts and for specific topics, it is not always the most effective or efficient method for disseminating learning across the wider Brent system.

The new strategy seeks to strengthen the multi-agency learning and development offer for both the Safeguarding Children Partnership and the Safeguarding Adults Board. It sets out an expanded vision to diversify learning methods, with a clear ambition to enhance the reach, quality, and impact of learning across the partnership.

The development of the new strategy was led by Independent Scrutineer Keith Makin and outlines a more flexible approach to developing and coproducing learning solutions. This will be supported by the development of an implementation plan to start to embed the new approach.

Approach

Multi-agency safeguarding learning and development

Brent Safeguarding Partnerships recognise that learning extends beyond formal training courses. Meaningful development happens through everyday work including structured training, on-the-job experiences, Supervision, collaboration, coaching, self-directed learning, and knowledge sharing.

Delivering Learning

To support workforce demands and learning styles, an increasing variety of approaches are offered. Each is designed to build skills, strengthen knowledge, promote collaborative multi-agency working and improve practice across Brent.

<p>Self-directed learning</p> <p>Curated resources (such as newsletters and best practice guidance), briefings, e-learning, podcasts and webinars that support flexible and accessible learning</p>	<p>Collaborative learning</p> <p>Policy and toolkit launches, reflection sessions, live audits, and game-based learning and events that strengthen joint working, support reflective practice, and encourage an understanding roles and responsibilities across sectors</p>	<p>Structured Multi-Agency Training</p> <p>Facilitator-led, topic-specific sessions to build shared understanding and consistent practice, embedding learning from multi-agency reviews, audits and case studies</p>
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Evaluation, impact and attendance of trainer-led sessions



Most sessions result in an average gain of two learning points, in some cases three, which for context is above average for Safeguarding Partnerships who use the same learning management platform.

The overall response rate of Learning Gain evaluations completed post-course is **38%**

Of those who respond, the average learning gain for learners attending courses across the whole multi-agency structured training programme is **22.3%**, demonstrating that both confidence in knowledge and how to work with others is improved by engaging with the Partnerships Learning & Development offer.

Learning from SARs sessions

In support of our strategic priority, the Chair held monthly 'learning from SARs' sessions to help strengthen how the system learn from, and respond to, SAR learning this is how attendees have responded:

Learning translated into practical safeguarding actions

Participants identified actions aimed at improving safeguarding practice and continuity of care.

"Updating my Safeguarding Lead & Team."

"I will try to ensure that a named person will review the patient once discharged from hospital."

Overall delivery was positively received

Most participants rated the training delivery as **excellent or good**, reflecting strong facilitation and subject expertise.

"Very informative, and the statistics and research analysis were very helpful."

Demand for practical examples and interaction

Feedback highlighted a desire for more **SAR case examples** and interactive discussion to support application to practice.

"The theory was clear, but the session would have benefited from some real-life case examples."

09 NEW STRATEGIC PLAN

Brent SAB new focuses for 26/28

In addition to producing an annual report, the SAB is required to periodically set strategic priorities to focus and guide its work. Brent opts to set its priorities bi-annually.

When developing the priorities that form the new strategic plan, the Board Chair held a Development Day on 20 January, 2026. This was an interactive day where members from partner agencies were invited to attend and participate in a collaborative workshop, with the goal of co-producing the new Board priorities for 2026-2028.

The following priorities are what members collectively agreed should be the Boards main ongoing focus for the next two years:



PRIORITY 1 - SAFEGUARDING THOSE PEOPLE WITH COMPLEX CARE AND SUPPORT NEEDS

Part A - Mental health and suicide

Why is it important:

There are currently between 15-20 suicides a year in Brent, yet there is no clear system-wide response to suicide, no clear understanding of the causes of suicide occurring in Brent, or what support was offered to those who took their own lives.

What Improvements the Board would like to see:

The Board would like to be more assured that professionals know how to respond when someone is displaying suicidal intent.

What will the Board do:

- Expects the multiagency partnership to develop a Suicide Prevention Strategy and Plan, will seek assurance about the work being done to prevent suicides
- Promote suicide awareness training for the workforce and agencies will be required to report on the impact of the training in supporting staff to talk to people with suicidal intent

Part B - Homelessness linked to safeguarding

Why is it important:

The Board consider that there remains insufficient links between housing and safeguarding. There are concerns that there is silo working in the system.

What Improvements the Board would like to see:

A better understanding of housing and homelessness issues across Brent and ways to find a more flexible approach to working with people who are homeless.

What will the Board do:

- Gain assurance through monitoring the deaths of those living on the streets, through the mortality panel report.
- Will be informed by the 'Built for zero' work on how street homelessness is being reduced

PRIORITY 2 - PREVENTION OF HARM OF THOSE WITH CARE AND SUPPORT NEEDS

Why is it important:

Many case examples and reviews highlight how those who 'fall through the cracks' in regards to meeting thresholds around risk at earlier stages of receiving care and support, can escalate towards serious safeguarding concerns when left unchecked.

What Improvements the Board would like to see:

A stronger focus on those people who would not meet the criteria for a section 42 safeguarding enquiry, but where there are some growing concerns that they are at risk of harm.

What will the Board do:

- Commission a multi-agency audit of s42 referrals for people in their own homes to explore what interventions are taken for those who do not meet the criteria for a s42 enquiry
- Seek assurance on how members work with people with care and support needs to undertake risk assessments and safety planning & work with those who seem 'hard to reach'



09 NEW STRATEGIC PLAN

Brent SAB new focuses for 26/28

GOLDEN THREADS

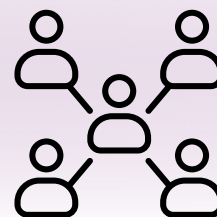
Alongside the new priorities, the following **3 golden threads** were also identified and will help to drive the focus of the Brent Safeguarding Adults Board in how it conducts it's work over the next two years.

The golden threads are not so much themes that have arised as learning from case review, but things that it is felt that we should continue to be mindful of when working to deliver effective and inclusive safeguarding solutions.

They should underpin and be considered when developing policies, procedures and practice regardless of the concern.

Community engagement

The Chair led a project during 2025 to look at how the Board can engage with the community more effectively. This work including visiting community groups in Brent to talk about safeguarding and culminated in a workshop for the SAB in November 2025 led by the Brent Co-Production Team where they heard a first hand account from an individual who had experienced Brent Safeguarding processes first hand.



It was agreed that a formalised approach needs to be embedded into the Board. The Board will work with the co-production team in 2026 to look at how it can receive more direct and regular feedback from residents. Therefore, this will be taken forward as a continuing golden thread in the strategic plan for 2026-2028.

Digital world



It is recognised that the digital world is advancing rapidly. It can be extremely helpful in connecting the public to services, and in how the services manage their work.

However, this has the risk of excluding those who cannot use computers, smart phones and artificial intelligence. Tjis is particulaty true of those who are elderly or for those who struggle to speak/read in English.

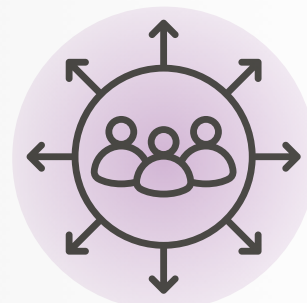
With technological developments, there also comes the emergence of new ways to both perpetrate and experience abuse, so it is essential that the Board stay in-touch with these as they emerge, and be proactive to build a plan on how they can collectively safeguarding against them.

Effective workforce for the Brent population

It is acknowledged that the good safeguarding needs an effective workforce across the system, from senior leaders to the practitioners working directly with people with care and support needs.

In recent years, the recruitment and retention of staff working across both health and social care has been a national challenge. Alongside this, the Board is aware of some significant structural staffing changes that have or are coming to effect across it's statutory partners.

With this in mind, the Board will monitor change and support collaborative ways to adapt and ensure services are still prioritising users safety.



 Brent	Community and Wellbeing Scrutiny Committee 30 June 2026
	Report from the Safeguarding Children Partnership
	Lead Cabinet Member – Cabinet Member for Children's Services, Employment & Climate Action (Cllr Jake Rubin)
Brent Safeguarding Children Partnership (Multi-agency safeguarding arrangements) Annual Report April 2025 - March 2026	

Wards Affected:	All
Key or Non-Key Decision:	Non-Key
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
List of Appendices:	Appendix 1 - Annual Report 2025-2026
Background Papers:	None
Contact Officer(s): <small>(Name, Title, Contact Details)</small>	Zoe Tattersall Strategic Partnership Lead for Safeguarding Children zoe.tattersall@brent.gov.uk

1.0 Executive Summary

- 1.1. This report presents the Brent Safeguarding Children Partnership (BSCP) Annual Report for the period April 2025 to March 2026 to the Community and Wellbeing Scrutiny Committee. It provides members with an overview of the partnership's activity, progress, and impact in strengthening safeguarding arrangements for children and young people in Brent.
- 1.2. The BSCP is an independent, multi-agency partnership responsible for overseeing the effectiveness of local safeguarding arrangements. The Annual Report sets out how statutory partners and relevant agencies have worked together over the reporting period to safeguard and promote the welfare of children, highlighting key achievements, learning, and areas for further development.
- 1.3. The report outlines progress against local safeguarding priorities, including efforts to strengthen multi-agency practice, and improve outcomes for vulnerable children and young people. It also demonstrates how learning from reviews, audits, and partnership activity has informed continuous improvement.

2.0 Recommendation(s)

- 2.1 The Community and Wellbeing Scrutiny Committee is invited to review and note the contents of the BSCP Annual Report (Appendix A) and consider how scrutiny can support the ongoing effectiveness and accountability of safeguarding arrangements in Brent.

3.0 Detail

3.1 Contribution to Borough Plan Priorities & Strategic Context

- 3.1.1 The BSCP work has connections to the following outcomes within the Borough Plan:

Prosperity and Stability in Brent – The BSCP considers the impact on communities during a cost-of-living crisis and works with agencies such as housing and voluntary community sector members to have insight into the evolving landscape.

Thriving Communities – The BSCP incorporates community engagement by including a Lay Member alongside representatives from the voluntary and community sector. The Lay Member plays a key role in engaging Brent's residents and local groups, helping to promote community cohesion. In addition, the BSCP remains committed to amplifying the voice of children and young people within its work and has begun work to recruit Young Scrutineers who will be represented within the Delegated Safeguarding Partners Group. Expanding this reach is a key priority for the next 12 months.

A Healthier Brent – The BSCP works to address health inequalities in the context of safeguarding children and recognises that children's wellbeing and mental health is a safeguarding priority. Multi-agency auditing is carried out with all statutory partners to monitor and review the safeguarding provision in Brent.

3.2 Background

- 3.2.1 The Brent Safeguarding Children Partnership (BSCP) is the statutory multi-agency body responsible for overseeing local safeguarding arrangements to protect and promote the welfare of children and young people in Brent. It brings together the three safeguarding partners; the Local Authority, Integrated Care Board (ICB), and the Police, who share equal and joint responsibility for ensuring effective safeguarding practice across the borough.
- 3.2.2 The BSCP was established in line with the Children and Social Work Act 2017, which introduced a system of locally determined safeguarding arrangements. These arrangements are underpinned by the statutory guidance *Working Together to Safeguard Children*, which sets out how agencies must collaborate to safeguard children effectively.

3.2.3 The partnership provides strategic leadership, scrutiny, and challenge to ensure that safeguarding arrangements are robust, responsive, and continuously improving. It monitors the effectiveness of local services, promotes multi-agency learning, and ensures that the voices of children and families inform practice and service development.

3.2.4 Since December 2024, the BSCP has operated in full compliance with the requirements of Working Together to Safeguard Children (2023), including strengthened governance arrangements. This includes the introduction of Lead Safeguarding Partners to provide enhanced strategic oversight and a greater emphasis on the role of education as a 'forth partner' within safeguarding arrangements. It should be noted that this guidance has since been superseded by Working Together to Safeguard Children (2026), which now provides the current statutory framework.

Safeguarding Partners

3.2.5 The responsibility for the strategic oversight of this join-up locally rests with the three safeguarding partners (Brent Council, Metropolitan Police and West and North London Integrated Care Board) who have a shared and equal duty to work together to safeguard and promote the welfare of all children in Brent.

Independent Scrutiny

3.2.6 The role of independent scrutiny is to provide assurance in judging the effectiveness of multi-agency arrangements to safeguard and promote the welfare of all children in Brent, including arrangements to identify and review serious child safeguarding cases. Independent scrutiny is part of a wider external inspection system administered by Ofsted, CQC and HM Inspectorate of Constabulary.

3.2.7 The decision on how best to implement a robust system of independent scrutiny is made locally and Brent safeguarding partners should ensure that the scrutiny is objective, acts as a constructive critical friend and promotes reflection to drive continuous improvement.

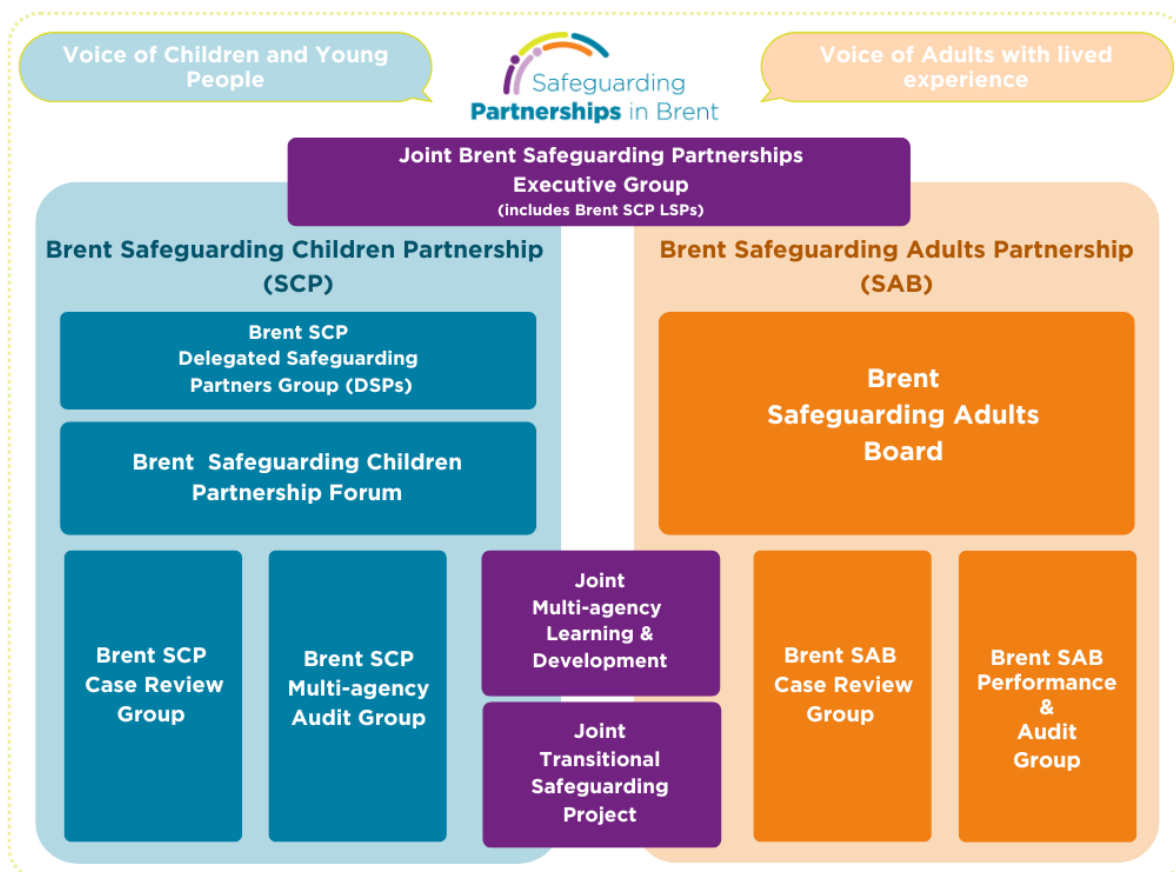
3.2.8 In Brent, the Safeguarding Partners work closely with the Independent Scrutineer. The Independent Scrutineer should consider how effectively the arrangements are working for children and families as well as for practitioners, and how well the safeguarding partners are providing strong leadership.

Brent's safeguarding partnership arrangements

3.2.9 Brent's safeguarding children partnership arrangements consist of a four-tier structure:

- Tier 1 - The Joint Partnerships Executive Group - provides high-level strategic leadership across both the Safeguarding Children Partnership and Safeguarding Adults Board and fulfils the local Lead Safeguarding Partner role as required in Working Together 2026.
- Tier 2 - The Delegated Safeguarding Partners Group - provides high-level strategic leadership
- Tier 3 - Brent Safeguarding Children Forum - diverse and wider-ranging partnership group

- Tier 4 - Delivery focused sub-groups - responsible for carrying out specific statutory duties of the partnership, these include:
 - Case Review Group
 - Joint partnerships (Safeguarding Children Partnership and Safeguarding Adults Board) Learning and Development Programme
 - Multi-agency Audit Group
 - Joint Transitional Safeguarding Project
 - Themed/focused Task & Finish groups as and when required



- 3.2.10 Support staffing arrangements for the SCP are funded and resourced by Brent Council.
- 3.2.11 The Strategic Partnerships Team is responsible for leading the coordination of the arrangements and is managed by the Strategic Partnerships Manager. The team is based in the Children, Young People and Community Development Directorate.
- 3.2.12 Alongside the SAB arrangements, the Strategic Partnerships Team also currently coordinates activities for other strategic partnerships in Brent including Brent Safeguarding Children’s Partnership, Brent Health and Wellbeing Board and Brent Children’s Trust.
- 3.2.13 This staffing structure enables stronger strategic coordination between the strategic partnerships in Brent to both avoid duplication and develop joint initiatives. It also successfully facilitates a level of independence from the operational safeguarding activity of the council.

Key activities

3.2.14 During 2025–26, the BSCP made measurable progress in strengthening multi-agency safeguarding arrangements and improving outcomes for children and young people.

3.2.15 The main achievement has been the advancement of key strategic priorities, particularly in relation to online safety, transitional safeguarding, and children's social care reform.

- The partnership completed a borough-wide schools mobile phone survey, aligning with national trends and directly informing local policy development. This has been complemented by the development of the *Always Online Together* guidance, aimed at improving awareness and understanding of digital safeguarding risks among parents, carers, and professionals. These initiatives demonstrate a proactive and preventative approach to emerging safeguarding risks in an increasingly digital environment.
- The BSCP has also played a central role in supporting the Families First Partnership Programme, contributing to the transformation of early help and social care services. This has included the establishment of governance arrangements and the submission of formal updates to the Department for Education, ensuring that Brent is well-positioned to deliver national reforms locally.
- A key achievement this year has been the strengthening of transitional safeguarding arrangements. The establishment of a joint Transitional Safeguarding Group with the Safeguarding Adults Board has improved oversight of the needs of young people aged 14–25. Initial workshops identified both strong practice and areas requiring improvement, particularly the need for earlier and more consistent planning for transition into adult services. This work represents a step towards addressing a historically challenging area of safeguarding practice.
- The partnership has continued to demonstrate strong multi-agency governance, leadership, and accountability. The established four-tier structure, including the Joint Executive Group and Delegated Safeguarding Partners Group, has ensured clear strategic oversight, effective challenge, and shared ownership of safeguarding priorities. This has supported improved collaboration between statutory partners and strengthened links with education, health, police, and the voluntary sector. Evidence of improved joint working includes enhanced information-sharing arrangements, such as collaboration between police and the local authority to improve responses to domestic abuse incidents affecting children.
- Significant progress has also been made in embedding a culture of learning and continuous improvement across the partnership. The multi-agency safeguarding learning and development offer has undergone a comprehensive review, resulting in a more strategic and flexible approach to delivering learning.

- The existing multi-agency learning and development programme has seen increased engagement across agencies and an evidenced impact on practice, with an average reported learning gain of 22.3% by delegates and evidence that learning is being applied in frontline safeguarding work.
- The BSCP has maintained a robust approach to audit, scrutiny, and learning from practice. Multi-agency audits have been undertaken across key safeguarding themes, including serious youth violence, domestic abuse, and child sexual abuse, providing valuable insight into the effectiveness of multi-agency practice and identifying areas for improvement. The introduction of a “Case of Concern” process represents an important innovation, enabling the partnership to capture and respond to learning from near-miss incidents, thereby strengthening early identification of risk and improving system responsiveness.
- Another key area of achievement has been the partnership’s focus on amplifying the voice of children and young people. Participation has been embedded across a range of partnership activities, including through engagement with Brent Youth Parliament and the co-production of the Brent Youth Strategy 2025–2028. Children and young people are increasingly influencing service design and strategic priorities, with plans underway to further strengthen this through the recruitment of Young Scrutineers to participate in governance and decision-making processes.
- Finally, the partnership has strengthened safeguarding responses for vulnerable groups, including children at risk of exploitation, those experiencing extra-familial harm, and children with neurodiverse needs. Improved joint working, targeted training, and enhanced understanding of vulnerability have contributed to more effective identification of risk and more coordinated interventions. The positive findings from Ofsted in relation to children in care further demonstrate the impact of strengthened practice across the system.

Key Challenges

3.2.16 The report also highlights a number of key challenges facing the partnership including:

- the complexity of safeguarding risks in a digital environment
- increasing demand and pressure on services
- systemic challenges such as delays in specialist provision for vulnerable children, including those with neurodiverse needs.
- ensuring effective transition from children’s to adult services remains an area requiring continued focus.

3.2.17 The BSCP continues to respond to these challenges through strengthened partnership working, improved data sharing, targeted audit activity, and a renewed focus on learning and development. By maintaining strong governance, promoting innovation, and embedding learning across the system, the partnership is working collectively to ensure safeguarding arrangements remain effective, responsive, and focused on improving outcomes for children and young people in Brent.

Priorities for 2026/2027

- 3.2.18 Looking ahead to 2026, the partnership will focus on key priorities including:
- strengthening the multi-agency response to neglect, which has been identified as a significant and often under-recognised safeguarding issue,
 - further embedding the voice of children and young people through the recruitment of Young Scrutineers and increased participation in strategic governance.
 - the continued implementation of the Families First Partnership Programme will also be a central area of work, supporting earlier intervention, whole-family approaches, and improved multi-agency collaboration.

4.0 Stakeholder and ward member consultation and engagement

- 4.1 The Cabinet Member for Children's Services, Employment & Climate Action is a core member of the Safeguarding Children Forum with oversight of wider partnership activity for the BSCP and regularly attends key meetings and inputs to the work of the partnerships.

5.0 Financial Considerations

- 5.1 The safeguarding partners agree the partnership financial funding to support the local arrangements on an annual basis, and the financial year runs from the 1 April to the 31 March the following year.

- 5.2 For the 2025/26 financial year, the Safeguarding Children Partnership had an annual budget of £65,576.45 excluding staff costs.

- 5.3 The contributions that make up the safeguarding partnership budget are:

- | | |
|---|------------|
| • Metropolitan Police | £5,000 |
| • NWL Integrated Care Board | £45,941 |
| • Probation Service | £3, 635.45 |
| • London North West University Healthcare NHS Trust | £11,000 |

- 5.4 The Local Authority makes additional contributions in the form of staffing costs to support the running and coordination of the safeguarding partnership arrangements.

- 5.5 A full breakdown of the budget is included in in the annual report (please see Appendix A).

6.0 Legal Considerations

- 6.1 The Brent Safeguarding Children Partnership (BSCP) exercises its functions in accordance with the statutory framework set out in the Children and Social Work Act 2017, which places a duty on safeguarding partners to make arrangements to work together to safeguard and promote the welfare of children.

- 6.2 The statutory guidance *Working Together to Safeguard Children* provides the overarching framework for local safeguarding arrangements, setting out the

roles and responsibilities of safeguarding partners and relevant agencies in delivering effective multi-agency safeguarding practice.

- 6.3 The Child Safeguarding Practice Review and Relevant Agency (England) Regulations 2018 set out the duties of local authorities to notify the Child Safeguarding Practice Review Panel of serious child safeguarding incidents that meet the prescribed threshold. The Regulations also define the responsibilities of safeguarding partners to undertake local child safeguarding practice reviews, ensuring that learning is identified and effectively disseminated across the partnership to improve multi-agency systems, practice, and outcomes for children.

7.0 Equity, Diversity & Inclusion (EDI) Considerations

- 7.1 The multiagency safeguarding children partnership arrangements in Brent have been jointly developed by Brent Council, West and North London Integrated Care Board and the North West London Basic Command Unit, Metropolitan Police.

- 7.2 The three safeguarding partners have a shared and equal duty to make arrangements to work together to safeguard and promote the welfare of all children in Brent. In discharging their duty safeguarding partners must be assured by partner agencies in the borough that multi-agency services are accessible, inclusive, and responsive to the diverse needs of Brent's children and young people, including those with additional needs and/or vulnerabilities.

- 7.3 The safeguarding partners also ensure that services are culturally aware and skilled in identifying, assessing, and meeting the individual needs of Brent children and their families.

8.0 Climate Change and Environmental Considerations

- 8.1 This report has no direct impact on the Council's environmental objectives and climate emergency strategy

9.0 Human Resources/Property Considerations (if appropriate)

- 9.1 This report does not relate to any HR or property related issues.

10.0 Communication Considerations

- 10.1 Following consideration by the Community and Wellbeing Scrutiny Committee, the annual report will be published and made accessible on the Brent [Safeguarding Partnerships website](#).

Report sign off:

Nigel Chapman

Corporate Director of Children, Young People and Community Development

Named Delegated Safeguarding Partner for Brent Safeguarding Children Partnership

BRENT SAFEGUARDING CHILDREN PARTNERSHIP ANNUAL REPORT

25-26

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Foreword by the Delegated Safeguarding Partners of the Safeguarding Children Partnership (SCP)

During this reporting period, the Safeguarding Children Partnership strengthened its work across both digital safeguarding, transitions and children's social care transformation.

Progress towards the priority of Online Safety included the completion of the school mobile phone survey, which aligned with national trends and informed Brent Council's policy development. We also advanced the 'Always Online Together' guidance to address knowledge gaps among parents, carers, and practitioners, with the first version for children aged 3-13 now drafted and moving toward publication.

Alongside this, the partnership continued to support the wider social care reform through the Families First Partnership Programme. A dedicated stakeholder group provides governance and strategic oversight, supported by a phased delivery plan. The first formal submission was completed in December 2025, with further monitoring updates due to the Department for Education in April 2026.

This year also saw the creation of a joint Transitional Safeguarding Group in collaboration with the Safeguarding Adults Board to strengthen support for vulnerable young people aged 14-25. Initial workshops highlighted strong practice but identified a need for earlier, more consistent transition planning. In place of the planned case audit, a discretionary Safeguarding Adults Review was considered, with findings expected in spring 2026 to guide system-wide improvements. Together, these developments reflect our continued commitment to strengthening safeguarding practice and improving outcomes for children, young people, and families across Brent.

At the time of writing Working Together to Safeguard Children 2026 was published but for the purposes of this annual report Working Together 2023 will be referenced as the base for partnership activity in this reporting cycle.

Comment from the SCP Independent Scrutineer

The Annual Report for 2025/6 highlights the progress made by the three statutory partners, alongside the wider partnership, in keeping children safe in Brent. During this period, the partnership has navigated a range of challenges, including responding to new Government guidance and requirements that signal a significant shift in how services are organised and delivered. Partners have supported the renewed focus on placing "families first," with the safeguarding partnership playing a central role in driving this approach.

While the reorganisation of the Integrated Care Board (ICB) has presented challenges, safeguarding children has remained a clear priority across the borough, supported by continued strong collaboration between the Police and partner agencies.

The Safeguarding Children Forum continues to play a key role as a space for discussion, challenge, and development. It has identified emerging priorities, including the growing influence of social media on children's safety and wellbeing, and the need for a coordinated partnership response. The Forum has also led a review of the learning and development offer, resulting in a refreshed strategy that strengthens the alignment between identified learning needs and the delivery of targeted, responsive training.

Working Together to Safeguard Children 2023 (Now 2026) is issued under the Children Act 2004 and the Children, Social Work Act 2017 and Children’s Social Care National Framework 2023. The guidance outlines that local organisations and agencies have a duty to ensure that they consider the need to safeguard and promote the welfare of children when carrying out their functions. In addition, there is also a shared responsibility between organisations and agencies to safeguard and promote the welfare of all children in a local area.

The responsibility for the strategic oversight of this join-up locally rests with the three Statutory Safeguarding partners, who have a shared and equal duty to arrange to work together to safeguard and promote the welfare of all children in a local area.

Working Together to Safeguard Children 2026 further emphasises the critical role of education settings within local safeguarding arrangements, recognising them as a key safeguarding partner alongside the statutory agencies. Schools, early years settings, and further education providers play a vital role in identifying concerns early, providing support, and acting as consistent points of contact for children and families. As such, they are increasingly regarded as a ‘fourth partner’ within safeguarding arrangements, with an expectation of meaningful involvement in governance, decision-making, and information sharing.

The three safeguarding partners in relation to a local area in England are defined as:



1. The Local Authority
2. The Integrated Care Board
3. The Police

The three safeguarding partners must:

- agree on ways to co-ordinate their safeguarding services
- act as a strategic leadership group in supporting and engaging others, including relevant agencies
- take decisions on behalf of their organisation or agency and commit them on policy, resourcing, and practice matters
- hold their own organisation or agency to account on how effectively they participate and implement the local arrangements
- implement local and national learning including from serious child safeguarding incidents

03 BRENT MULTI-AGENCY SAFEGUARDING CHILDREN ARRANGEMENTS

The purpose of the local arrangements is to support and enable local organisations and agencies to work together in a system where:

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

To fulfil this role, the three Statutory Safeguarding partners have set out jointly how they work together and with other relevant agencies in the Brent Multiagency Safeguarding Partnership Arrangements (MASA).

Brent's MASA was first published on the Brent Safeguarding Partnerships website in June 2019 and implemented on 30 September 2019. The published arrangements were reviewed, updated and published by the Partnership in January 2025 in order to achieve compliance with Working Together to Safeguard Children 2023.

Brent's Safeguarding Children Partnership arrangements operates a four-tier structure:

Tier 1 - The Joint Executive Group - Safeguarding Children Partnership - Lead Safeguarding Partners (LSPs) and Safeguarding Adults Board Leadership Group are representative of the local LSP requirement.

Tier 2 - The Delegated Safeguarding Partners Group (DSP) - high-level strategic leadership group.

Tier 3 - Brent Safeguarding Children Forum - diverse and wider-ranging partnership group.

Tier 4 - Delivery focussed sub groups - responsible for carrying out specific statutory duties of the partnership, these include:

- Case Review Group
- Multi-agency Audit Group
- Task and Finish Groups

03 BRENT STRATEGIC PARTNERS - JOINT EXECUTIVE GROUP

The Joint Executive Group fulfilled the objectives, functions and responsibilities set out in Working Together 2023 to safeguard and promote the welfare of all children in Brent by:

- Setting the strategic direction, vision, and culture of the local safeguarding arrangements, including agreeing and reviewing shared priorities and the resource required to deliver services effectively.
- Leading their organisation’s individual contribution to the shared priorities, ensuring strong governance, accountability, and reporting mechanisms to hold their delegates to account for the delivery of agency commitments.
- Reviewing and sign off key partnership documents: published multi-agency safeguarding arrangements, including plans for independent scrutiny, shared annual budget, yearly report, and local threshold document.
- Providing shared oversight of learning from independent scrutiny, serious incidents, local child safeguarding practice reviews, and national reviews, ensuring recommendations are implemented and have a demonstrable impact on practice (as set out in the yearly report).
- Ensuring multi-agency arrangements have the necessary level of business support, including intelligence and analytical functions, such as an agreed data set providing oversight and a robust understanding of practice.
- Ensuring all relevant agencies, including education settings, are clear on their role and contribution to multi-agency safeguarding arrangements.

The Joint Executive Group membership includes:

Brent Council	<ul style="list-style-type: none"> • Chief Executive • Corporate Director of Children and Young People • Corporate Director of Service Reform and Strategy • Director of Adult Social Care
North West London Integrated Care Board (ICB)	<ul style="list-style-type: none"> • Chief Executive • Chief Nursing Officer • Assistant Director for Safeguarding
Metropolitan Police	<ul style="list-style-type: none"> • Borough Commander NW BCU
Independent Chair and Scrutineer	<ul style="list-style-type: none"> • Independent Scrutineer of Brent Safeguarding Children Partnership • Independent Chair of Brent Safeguarding Adults Board

03 BRENT DELEGATED SAFEGUARDING PARTNERS GROUP (DSP)

The DSP Group fulfilled the objectives, functions and responsibilities set out in Working Together 2023 to safeguard and promote the welfare of all children in Brent by:

- agreeing the overarching strategic vision and local priorities for safeguarding children
- challenging and holding the Safeguarding Forum to account
- agreeing, publishing, and reviewing the safeguarding oversight arrangements
- monitoring serious child safeguarding cases which raise issues of importance
- ensuring that the arrangements to work together to identify and respond to the needs of children in the area are effective and robust
- identifying any new safeguarding issues and emerging threats
- making strategic links with other Brent partnerships
- making provision for independent scrutiny of the safeguarding arrangements

The DSP Group membership includes:

Brent Council	<ul style="list-style-type: none">• Corporate Director of Children and Young People• The Leader Member for Children, Young People and Schools
North West London Integrated Care Board (ICB)	<ul style="list-style-type: none">• Chief Nursing Officer• Assistant Director for Safeguarding
Metropolitan Police	<ul style="list-style-type: none">• Detective Superintendent for Public Protection NW BCU
Independent Scrutiny	<ul style="list-style-type: none">• Independent Scrutineer for Brent Safeguarding Children Partnership

The Brent Safeguarding Children Forum is a broad multi-agency partnership, accountable to the DSP Group and chaired by the Independent Scrutineer. It provides strategic oversight of safeguarding arrangements in line with Working Together 2023.

The Forum drives delivery of local safeguarding priorities, strengthens relationships across strategic partnerships, schools, and the community, and seeks assurance that agencies are meeting their safeguarding responsibilities. This includes scrutinising information-sharing, safeguarding policies, and multi-agency practice through audits and challenge.

Key functions include maintaining the Brent Thresholds document, overseeing the interagency learning and development programme, and ensuring learning from local and national child safeguarding cases informs practice. The Forum also undertakes Local Learning Reviews, considers emerging risks, and incorporates the voices of children and families into safeguarding processes.

It monitors multi-agency performance through regular analysis of management information and annual reports, supports the resolution of escalated inter-agency disputes, and ensures partners follow London Safeguarding Children Procedures. The Forum remains responsive to new and emerging safeguarding issues, promoting consistent learning and effective partnership action across Brent.

The Brent Safeguarding Partners appoint relevant agencies and organisations to the Brent Safeguarding Children Forum, selecting those that provide essential strategic and operational insight into safeguarding children across the borough. These agencies form the Forum's core membership.

Forum members are expected to actively engage in partnership work, influence strategic planning within their organisations, provide timely information to support multi-agency safeguarding activity, and ensure Forum decisions are implemented internally, escalating any barriers to the DSP Group. Members also play a key role in communicating partnership priorities and learning within their agencies.

Recognising the value of community involvement, the Safeguarding Partners have appointed a lay member to the Forum, with plans to expand lay representation. The lay member helps strengthen links with Brent's communities, promotes safeguarding awareness, represents community perspectives in Forum discussions, and supports wider community cohesion.

The Forum maintains strong engagement with early years providers, schools, and the Further Education College, reflecting the significant safeguarding role of the education sector. Attendance at Forum meetings is monitored, and any concerns regarding member engagement are addressed directly with the relevant agency and escalated to the DSP Group where necessary.

The membership of the Forum includes representation from the following partners, relevant agencies and a lay member:

Safeguarding Partners	
North West London ICB	Designated Safeguarding Children Professionals for Brent Assistant Director for Safeguarding Named GP for Safeguarding, Brent
Brent Council	Statutory Lead Member for Children's Services (Safeguarding, Early Help and Social Care) Children and Young People Housing Needs Safeguarding Adults Public Health Community Safety
Metropolitan Police	North West Basic Command Unit (BCU) Public Protection

Agency/Organisation	
Education establishments	College of North West London / United Colleges Group Alperton Community School Lyon Park Primary School The Village and Woodfield Special Schools Kingsbury High School Preston Manor School
Central London Community Healthcare NHS Trust (CLCH)	
Central North West London Mental Health Foundation NHS Trust (CNWL)	
Children and Family Court Advisory and Support Service (CAFCASS)	
London Ambulance Service (LAS)	
London North West University Healthcare NHS Trust (LNWUHT)	
Probation Service	

The Case Review Group is critical to the work of the Safeguarding Partners in Brent. It is the key mechanism for carrying out reviews of serious safeguarding cases that meet the criteria set out in Working Together 2023.

The Case Review Group meeting is led Chaired by the Independent Scrutineer and is responsible for:

- considering all serious incident cases in Brent and making recommendations to the Safeguarding Partners for determination if the learning review criteria has been met to refer a case to the National Panel.
- identifying recommendations for any lessons to be learnt from serious incidents in Brent coordinating the arrangements on behalf of the Safeguarding Partners for commissioning and publishing local child safeguarding practice reviews
- developing the terms of reference, monitoring progress developing improvement plans coming for each local review
- making recommendations for multi-agency learning events based on the findings arising from case reviews and what the process is for undertaking them
sharing examples of good practice to develop understanding of what works well.

The Case Review Group has a fixed core membership drawn from the statutory safeguarding partners and relevant agencies. It has the flexibility to invite other relevant professionals to discuss certain cases as and when appropriate (including Rapid Reviews).

In recognition of the sensitive and confidential nature of business, all agency representatives/members must sign a confidentiality agreement, which includes the requirement to appropriately share and securely store information.

The Case Review Group also ensures that where possible and appropriate to do so, children, young people and families are involved in Local Child Safeguarding Practice Reviews (LCSPR)

During this reporting year, one Rapid Review was undertaken following an incident of serious youth violence. The salient learning points were on the following areas:

- Parental Engagement, Cultural Context and Family Dynamics
- Assessment Quality, Follow-Through and Professional Curiosity
- Information Sharing and Multi-Agency Coordination
- Opportunities for Early and Preventative Support
- Child's Voice and Safety
- System Pressures

There were two Serious Incident Initial Fact-Finding discussions. One regarding a young person who died after a fall. The second was a baby with suspected 'shaken baby' injuries; following robust dialogue and identified learning partners agreed that this case did not meet the criteria for a Rapid Review.

In the interests of quality assurance and following the limited number of Rapid Reviews over the past twelve months, a 'Case of Concern' process has been introduced. This mechanism is designed to provide an additional layer of oversight in circumstances where a near-miss safeguarding incident has occurred. It ensures that multi-agency learning is identified, applied, and embedded promptly, strengthening collective accountability and improving practice across the partnership.

During this reporting period one case was received which subsequently led to a Serious Incident Fact Finding Discussion.

Multi-agency audit activity evaluates the effectiveness of agencies, individually and together, to improve the wellbeing of children, including ensuring that children and young people get the right help and protection at the right time.

During this reporting year the Multiagency Audit Group has undertaken audits on the following themes: Serious Youth Violence, Domestic Abuse and Child Sexual Abuse . It has also successfully supported the Local Authority in a Ofsted inspection of SEND and a London Innovation and Improvement Alliance - Police Stop and Search audit.

The Multi-agency Audit Group meeting is chaired by Brent Council Head of Safeguarding and Quality Assurance and is responsible for;

- Developing a good oversight of multi-agency practice through audit activity.
- reviewing how agencies work together to create the right conditions for effective practice evaluating how and where improvements are needed
- developing and implementing a programme of multi-agency audits to establish that appropriate safeguarding activities are being undertaken and that effective procedures and practices are in place
- conducting multi-agency audits, making multi-agency practice recommendations, and disseminating learning
- monitoring implementation of multi-agency recommendations and actions arising from audits and consider what difference these have made
- testing and monitoring multi-agency compliance with Section 11 of the Children Act 2004 requirements

The Multi-agency Audit Group has a fixed core membership drawn from the statutory safeguarding partners and relevant agencies. It has the flexibility to invite other relevant professionals to participate in certain audits as and when appropriate.

The core membership of the Multi-agency Audit Group includes representation from the following partners, relevant agencies, and organisations;

Safeguarding Partners	
North West London ICB	Designated Safeguarding Children Professionals for Brent Named GP for Safeguarding, Brent
Brent Council	Children and Young People
Metropolitan Police	North West Basic Command Unit (BCU) Public Protection

Agency/Organisation
Central London Community Healthcare NHS Trust (CLCH)
Central North West London Mental Health Foundation NHS Trust (CNWL)
London North West University Healthcare NHS Trust (LNWUHT)
Education representatives (Designated Safeguarding Lead - Preston Manor School)

The Safeguarding Partners agreed that the Safeguarding Forum is led by an Independent Chair, who also undertakes the role of the Independent Scrutineer.

The Independent Chair's role includes:

- appropriately challenging partner agencies and professionals for the purposes of safeguarding and promoting the welfare of children and young people in Brent
- providing direction to the Safeguarding Forum and ensuring statutory obligations and local priorities are being delivered
- overseeing the progression case reviews to ensure they meet required timescales
- ensuring that key local issues and national developments are considered by the Safeguarding Forum
- challenging and monitoring the performance and participation of partners in the work of the Safeguarding Forum
- chair and agree the record of rapid reviews and oversee the implementation of recommendations and learning

OFFICER SUPPORT ARRANGEMENTS

Support staffing arrangements for the Brent safeguarding children partnership arrangements are funded and resourced by Brent Council.

The Strategic Partnerships Team is responsible for leading the coordination of the arrangements and is managed by the Strategic Partnerships Manager. The team is based in the Children, Young People & Community Development Team of the Council.

Alongside the safeguarding children partnership arrangements, the Strategic Partnerships Team also coordinates activities for other strategic partnerships in Brent including; Brent Safeguarding Adults Board, Brent Health and Wellbeing Board, Integrated Care Partnership Board and Brent Children's Trust.

This staffing structure enables stronger coordination between the strategic partnerships in Brent to both avoid duplication and develop joint initiatives. It also successfully facilitates a level of independence from the operational safeguarding activity of the council.

The staffing provision within the Strategic Partnerships Team that coordinate the safeguarding children arrangements include;

- A full time Strategic Partnerships Manager
- A full time Strategic Partnerships Lead
- A part time Strategic Partnerships Learning and Development Officer

The Brent Council Governance Team provide some administration support for both the DSP Group and Safeguarding Forum meetings (approximately 1 day a month).

The safeguarding partners agree the partnership financial funding to support the local arrangements on an annual basis and the financial year runs from the 1 April to the 31 March the following year.

Safeguarding Partnership Contributions

Brent Council

Brent Council's contribution consists of the officer support staffing/resource arrangements for the partnership. The substantial level of this expenditure means no additional contributions have been made towards the partnership arrangements.

Metropolitan Police

In 2024 as part of their commitment to the Children's Strategy the budgetary contribution from the Metropolitan Police, agreed centrally by MOPAC was set at £5,000 and to remain unchanged until at least 2029. However, in February 2026 Safeguarding Partnerships were notified of an increase in this contribution to £25,000 from April 2026.

North West London ICB

NWL ICB financially contribute towards the partnership financial arrangements, this is a continuation of the contribution previously made by Brent ICB and is set at £45,941 for this financial year.

Relevant Agency Contributions

Between 1 April 2025 and 31 March 2026 Brent Safeguarding Children Partnership also received financial contributions from the following relevant agencies:

National Probation Service	£ 3635,45
London North West University Healthcare Trust	£ 11,000

Financial Contribution	Amount £
Metropolitan Police	5,000
NWL ICB	45,941
Probation Service	3,635.45
London North West University Health Care NHS Trust	11,000
TOTAL	65,576.45

Expenditure

Below is a summary of Partnership expenditure covering the financial period since the last annual report:

Expense	Amount £
Independent Scrutineer fees	22,500
Learning Management System (LMS) and website contributions	1,500
External facilitators for multi-agency training	8,200
Events	5,000
Community and Engagement	300
Total	37,500

The partnership recognises that there has been an underspend in this financial year which has been impacted by a number of factors including:

- The partnership has not seen any expenditure against Child Safeguarding Practice Reviews.
- There has been a focus on strengthening the existing multi-agency learning and development programme with a view to developing a richer and broader programme during the next financial year.

As a result, this underspend will be carried over into next year's reserves and it is projected that the partnership spend will increase during the next financial year through the activities associated with this including Section 11 audits and the recruitment and retention of young scrutineers.

MONTH	KEY AREAS OF FOCUS
<p>June 2025</p>	<p>JOINT EXECUTIVE GROUP</p> <ul style="list-style-type: none"> • Safeguarding Partnership updates - including the Casey Audit • Learning and Development programme update • Transition Safeguarding Group • Annual reports and preparation for Brent Community and Wellbeing Scrutiny Committee <p>DSP GROUP</p> <ul style="list-style-type: none"> • Presentation on the initial set up and implementation of the Families First Partnership Programme • Update on the changes to the ICB • Discussion on The Child Safeguarding Practice Review Panel - “Its Silent” Race, Racism and Safeguarding Children. <p>SAFEGUARDING CHILDREN FORUM</p> <ul style="list-style-type: none"> • Online Safety Task and Finish Group update addressing the work plan and proposed themes. • Children’s Wellbeing and Schools Bill and what it means for the Partnership <p>CASE REVIEW GROUP</p> <ul style="list-style-type: none"> • Notification of Care Leaver Death. Pathway plans for Care Leavers to be reviewed • Presentation on serious violence incident involving 5 young people which resulted in a Multiagency Audit agreed for September 2025
<p>September 2025</p>	<p>DSP GROUP</p> <ul style="list-style-type: none"> • Presentation of the BFFD Annual Report. • Update on Hillingdon’s JTAI and the implications for Brent. • Police update on Local Missing Hubs • Sign off on the Families First Partnership Programme Governance Arrangements. <p>SAFEGUARDING CHILDREN FORUM</p> <ul style="list-style-type: none"> • Private Fostering and LADO annual reports reviewed • Youth Select Committee Report on Youth Violence and Social Media was presented by representation from Brent Youth Parliament.
<p>November 2025</p>	<p>CASE REVIEW GROUP</p> <ul style="list-style-type: none"> • Update from Multiagency Audit on Domestic Abuse. Positive feedback on trauma informed schools. Assurances sought from CLCH on school nursing and community development around understanding of the cultural lens. • Introduction of Case of Concern process. • Multiagency Audit on serious violence Incident paused at the request of Police. • Draft Brent Thresholds Guidance shared for review and feedback.

MONTH	KEY AREAS OF FOCUS
<p>December 2025</p>	<p>JOINT EXECUTIVE GROUP</p> <ul style="list-style-type: none"> • Safeguarding Partnership Updates • Update on Transitional Safeguarding Project • Partnerships Learning and Development Review <p>DSP GROUP</p> <ul style="list-style-type: none"> • Matters arising from the Joint Executive Group • Multiagency Audit Group - Action plan and themes agreed. • Update from Independent Scrutiny - Key areas of focus: Housing in a safeguarding context, engagement with <p>SAFEGUARDING CHILDREN FROUM</p> <ul style="list-style-type: none"> • Learning and Development update on proposed changes to the delivery of multiagency training and the new strategic plan. • Online Safety focus of 'Com' Networks. <p>MULITAGENCY AUDIT GROUP</p> <ul style="list-style-type: none"> • Carried out an audit on Child Sexual Abuse.
<p>February 2026</p>	<p>CASE REVIEW GROUP</p> <ul style="list-style-type: none"> • Update from Multiagency Audit on Child Sexual Abuse - Key recommendation around strengthening information sharing pathways with Police. • Rigorous discussion around govement paper on the Multiagency Response to children who are victims of domestic abuse and reflections for Brent.
<p>March 2026</p>	<p>DSP GROUP</p> <ul style="list-style-type: none"> • Executive summary of the thematic JTAI on Domestic Absue and Independent Scrutiny reflections. • Strategic oversight of the Philomena Protocol • Update on the Pan-London Lead Safeguarding Partners meetings • ICB update <p>SAFEGUARDING CHILDREN FORUM</p> <ul style="list-style-type: none"> • North West London Local Authorities update on CSA • Dicussion on the Mulitagency Response to domestic abuse - Thematic Review. • Metropolitan Police presentation on the Philomena Protocol • Presentation Children Missing from Care Homes • Update on the Families First Partnership Programme

NORTH WEST LONDON INTEGRATED CARE BOARD



The NWL ICB Safeguarding team have worked collaboratively with partner agencies and are committed to developing positive professional relationships whilst supporting professional challenge. The ICB Safeguarding team have attended and contributed to Safeguarding Children Partnership meetings throughout this reporting period.

The Designated Nurse, Head of Safeguarding and a senior representative from the Police now meet quarterly to discuss safeguarding issues and cases to improve communication across the agencies.

The Designated Nurse Safeguarding Children has worked together with Children's services to improve staff understanding of each other's roles.

The vulnerability of children looked after is recognised by the ICB Safeguarding and Children Looked After team who work collaboratively to ensure the safety of this vulnerable group.

The issue of young people waiting for a suitable placement in the Emergency Department and paediatric wards places pressure on the young person, the hospital and staff. Professionals from all agencies have worked together to find the best outcome for the young person. There is a national shortage of specialist placements and NHS England is informed about escalated cases.

There is a robust pathway for escalation of cases/professional challenges by the Designated Nurse to the Head of Safeguarding in CSC, with timely and effective actions.

Online Safety

The NWL ICB Safeguarding team provide oversight to ensure online safety is considered as a contextual safeguarding issue for Brent children and young people.

Consideration is given to online harm, particularly for adolescents and young people with additional vulnerabilities when providing advice and supervision regarding cases to professionals in provider health organisations. It is also covered in level 3 Safeguarding training sessions to raise awareness of issues such as grooming, online bullying and radicalisation.

Developing Data Collection, Use and Analysis

Each health provider organisation submits a quarterly Safeguarding Health Outcome Framework (SHOF) to the ICB Safeguarding team.

The SHOF submissions provide the ICB with assurance in regard to health providers and their safeguarding governance, policies, practice and activity. It also keeps them abreast of new initiatives and developments in their Safeguarding service.

It provides data for all boroughs allowing some data comparison and identifying themes and trends across the NWL footprint. The analysis of the data can highlight new areas of concern or recognise areas of improvement.

NORTH WEST LONDON INTEGRATED CARE BOARD



Capturing the Voice of Young People

The ICB Safeguarding team provide expert advice and supervision to staff working in health provider organisations. The need to listen and engage with children and young people is explored routinely as part of this process.

When engaging in multiagency audit the voice of the child within the records is sought, it is not only if the voice is recorded but if they are appropriately heard and responded to. The voice of the child is sought within statutory health assessments for children looked after. This is monitored by the Designated Nurse for Children Looked After when IHA/RHA Audits are completed.

How the voices of preverbal, non-verbal and SEND children are heard is explored during advice giving and supervision.

Neurodiversity

The ICB recognises the safeguarding risks associated with unmet neurodiverse need and the importance of coordinated multi-agency pathways. There are several early interventions, and prevention offers alongside more universal and specialist support for neurodiverse children and young people:

- Positive Behaviour support to children who are on the dynamic risk register
- CAMHS offer assessment and interventions
- Centre for ADHD and Autism
- Mental Health Support Teams in Schools
- Partnerships for Neurodiversity in Schools
- CAMHS under 5's service

The ICB with partners supports neurodiverse and SEND children at risk of harm via: The dynamic support register across health, education, and social care systems to support children and young people with ASD and/or LD who are most at risk of hospital admission. The Designated Nurse will support this process when there are safeguarding concerns and potential escalation concerns. Support is also provided to the Children and Young People's Mental Health and Neurodevelopmental Steering Group if needed.

Challenges include the continued pressure of wait times for assessment and diagnosis

Transitional Safeguarding

The Safeguarding Adult Board is leading a discretionary SAR regarding the transition of young people's transition from children's to adult services.

Members of NWL ICB Safeguarding team attended workshops regarding this work stream. Designated Professionals for Safeguarding Children, Children Looked After and Adults are involved with supporting cases where there are concerns about the transition period to support smooth transitions and identify gaps.

INTEGRATED CARE BOARD



Evidence of Impact, Learning and Improvement

Learning from local and national reviews, and audits is shared via safeguarding training provided by the Safeguarding team, as well as through advice and supervision with professionals in health provider organisations.

The Northwest London ICB has successfully co-ordinated and delivered a comprehensive safeguarding training programme meeting the training needs of the Designated Professionals, Named Professionals, and the wider Northwest London Children's workforce. The core safeguarding training offer in 2025/26 included Safeguarding Children (Level 3) and Safeguarding Adults (Level 3). These are full day training courses delivered online by the NWL ICB Safeguarding Team.

In addition to the core training offer other training courses were commissioned in 2025//26:

- Level 3 Children Looked After and Care Leavers - new training package

- Domestic Abuse - new training package

- Perinatal mental health and safeguarding Level 3, delivered with CLCH and Health Visitor colleagues for primary care (over 100 attended)

- Safeguarding standards in primary care Level 3 for primary care (88 attended)

- VTS training Level 3 safeguarding (over 90 attended).

A Section 11 audit was completed and summarised to primary care with evidence of good safeguarding practice, awareness and professional curiosity.

The risk to young babies from crying potentially resulting in shaking is being addressed by the ICB with the ICON programme being rolled out across NWL. This is included in the Level 3 Safeguarding Children training package as well as provider training packages. Keeping Babies Safe training was delivered by the Designated Nurse, with the session including ICON / Safe Sleeping and MMR.

All Rapid Reviews and Child Safeguarding Practice Reviews are added to the NHS England tracker. This provides both a local and National picture of themes, which support information shared during training and supervision. Regular updates from the Tracker are shared with the ICB Safeguarding team by the two Designated Nurses who lead on this work, and the wider ICS Safeguarding meeting.

Priorities and Forward Look for 2026-27

NWL ICB merged with NCL ICB on 1st April 2026 to form the West and North London ICB, which nationally is the largest one, covering 13 London Boroughs. As a new organisation there will be a period of significant change and new ways of working which have to be embedded.

During this time, the commitment to safeguarding and the Partnership continues, but the new arrangements will require understanding and support from Partners as we navigate the new health and safeguarding landscape. Decisions regarding future priorities for 2026-27 will be determined once the reorganisation is complete.

METROPOLITAN POLICE



Operation Encompass (the sharing of DA incidents with relevant children's schools) is now a statutory duty. There have however been barriers to success with this as school details are not always provided by parents (As there is no obligation), or they are not asked. Establishing the correct school subsequently has been a large barrier to this obligation which is designed to safeguard children after there has been DA reported in the household.

An initial trial with another of our Boroughs proved extremely successful in carrying out these obligations. This saw the local authority open their schools data to a limited number of MASH officers. This in conjunction with a specific data search for the police MASH to identify the incidents, then establish the relevant schools has proven that with these tools, officers have had an extremely high compliance rate (Those missed are largely down to off Borough schooling or EHE children).

Brent have now opened their data portal to the Brent MASH (pending sufficient training on the system), which is a very positive step in safeguarding children affected by DA, and an excellent example of our agencies working together collaboratively in safeguarding.

Online Safety

The MPS in recognising online harms has formulated a strategic response led by Central Specialist Crime to handle and contain the threats involved, including from such 'Com' group offending. (The strategic paper is not available for dissemination). This response sees the MPS coordinating with the NCA and has some examples of cases identifying online harms and actions taken to date. An MPS lead officer has been identified specifically for COM offending and work will progress in this area across the MPS both within specialist crime, cyber crime units, Met Intelligence and BCUs.

Developing Data Collection, Use and Analysis

Since the introduction of new MPS systems on the 'Connect' platform, the MPS has overcome the initial hurdles to access data, and made improvements with Connect, giving the ability to gather data to support performance and quality assurance.

NW BCU are now gathering data for two of the three Boroughs at their request for specific data, which is accompanied by appropriate context for scrutiny meetings in a multi agency data dashboard. Brent have yet to request data for this purpose, but when the request is made, it can be returned with appropriate data.

Capturing the Voice of Young People

MPS Child Strategy

Children are disproportionately affected by crime in London, both as victims and perpetrators and if the MPS develop better relationships with children we will solve and prevent more crime.

METROPOLITAN POLICE



New Met for London has committed to making a meaningful difference to how we police children, and over recent months we have been working to develop a Children's Strategy for the MPS, which recognises that children are different to adults: they have different needs and vulnerabilities. A key part of this strategy is to set out where the police can add most value in keeping children safe and where there are other duties which our safeguarding partners are better equipped and trained to deliver. The strategy sets out a series of actions or commitments, to ensure that we keep children in London safe, build their trust and bring to justice those who abuse and exploit them.

- **More Trust:** We will reset our relationships with London's children, building positive and trusted relationships and a renewed confidence in policing.
- **Less Crime:** We will increase our efforts to prevent and reduce crime committed against children, and we will be more precise and proactive in identifying abusers of children and bringing offenders to justice.
- **High Standards:** We will ensure our officers have the capacity, capability and cultural competence to safeguard children and we will improve our partnership working setting out clearly the role of the police in keeping children safe.

The strategic objectives are underpinned by 36 specific actions to enable the outcomes desired. The most recent MPS wide training for all officers includes the rollout of the MPS Child Strategy.

To ensure all officers within the Metropolitan Police Service understand the Child Strategy, this subject (amongst other topics listed below), have been the subjects of the second phase of the 'New Met for London' (NMfL) training that is mandatory for all officers up to the rank of Inspector. More details on this are in section 2 - learning.

Neurodiversity

The MPS has devised neurodiversity training for officers and staff, for a range of situations, including in the workplace, and others for investigators aimed at obtaining the best evidence from suspects, witnesses and victims with neurodiversity.

Partnership reviews (one recently in relation to child death) will take into account neurodiversity issues for both children involved and parents, which all seeks improvements to service to improve the lives of children. Where appropriate (As recently), actions are set as a multi agency partnership to review services and improve.

Transitional Safeguarding

The MPS works to legal standards of children and adults, and as such has different powers available with those over the age of 18 years of age.

METROPOLITAN POLICE



The MPS has recently changed its approach to Child Exploitation. The CE team were previously engagement, rather than criminal investigation. The CET will have all Police Constable posts replaced by Detective Constables who will also all be trained to the same standard as the Child Abuse detectives. Their aim now is to identify perpetrators of exploitation of children, arrest and prosecute them for a range of possible offences. This approach since late 2025 has seen the successful charging of multiple suspects of child exploitation, and also had a positive impact on some of the children being exploited.

The emerging challenges is a gap between engagement and the perpetrator focussed response by police. To this end, the engagement will remain with Social Care rather than police, and officers will step in to ensure victim contact with the children, and ensure the child's voice is captured during their investigations.

Evidence of Impact, Learning and Improvement

The recommendations from the stop and search audit are awaited, which is expected in 2026.

The NW BCU Local Missing Hub coordinator has carried out multi agency enquiries with regards the effective use of the Philomena protocols and good levels of standards. The work has established gaps in the use of the provision which are now being worked on with statutory partners to address and improve.

Priorities and Forward Look for 2026-27

1. The MPS has a strategic objective to ensure offenders are managed effectively to safeguard the vulnerable members of the community, including children - whether from risks inside or outside the home. Locally on NW BCU work has commenced to more closely align the Child Exploitation Team with the Local Missing Hub, recognising the considerable cross over between missing and exploited children and ensure that a prompt and effective response is given on each occasion concerns are raised. This work combines with strengthening of Philomena protocols being undertaken by the NW BCU Missing coordinator.

2. As the MPS designs an appropriate and effective response to online harms, this remains an area of risk which is still being addressed to ensure an appropriate policing response.

BRENT CHILDREN YOUNG PEOPLE AND COMMUNITY DEVELOPMENT

The CYP Corporate Director's expanded remit now includes Community Development. This has created the opportunity for stronger links between children's services, community safety, and employment support, ensuring coordinated, whole-family approaches to improving outcomes. This allows for greater cohesion in areas that relate to children's services including Community Safety and Brent Start. Over the past year work has taken place to understand synergies and integrate Community Development into CYPCD. One example of the impact of this work is a more cohesive offer of services for children at risk of harm outside the home.



In anticipation of the Family First Partnership Programme, Phase 1 of service redesign in Early Help and Social Care was implemented in June 2025. This redesign integrated targeted early help and child in need support for families into Family Support Teams. Child Protection/ Court Teams reduce transitions for children, enable seamless targeted early help and social care interventions, and ability for team managers to maintain stronger management oversight of the child's journey. Family Support Workers are integrated into Family Support Teams, working alongside social workers to provide family support. All staff in Family Support and Child Protection/Court Teams have participated in 2 12-week implementation training programme with topics including assessments, court work, addressing neglect and direct work with children. A new Targeted Prevention Hub brings together a range of interventions to wrap around children and families, including gangs work, mentoring and return home interviews. The Targeted Prevention Hub also includes a Family Group Conference Service, a further development of the Families First Partnership Programme, and this service enhances early intervention and adolescent support and promotes families taking the lead in their support plans where they are able to do so. Formal governance structures involving health, police, and schools are now embedded to lead Phase 2 of the Families First Partnership programme reforms.

In November 2025, an Ofsted Inspection of Local Authority Children's Services focussed visit took place, looking at Brent's arrangements for children in care. The findings of this visit demonstrated strong practice for children in Brent's care, with recommendations to improve life story work and the response to children who go missing from care. An improvement plan was developed following the inspection to address these areas.

In April 2026 an Ofsted ILACS inspection took place, the details of which can be found a here: [London Borough of Brent - Ofsted ILACS Inspection - April 2026](#)

Online Safety

It is recognised that online safety is an ongoing priority across work with children and families in Brent. Progress within CYPCD includes:

- Online Safety is being built into the revised Family Support Assessment Template that will launch in early 2026/27
- Training on online safety is available for all practitioners.

BRENT CHILDREN YOUNG PEOPLE AND COMMUNITY DEVELOPMENT

- The Brent schools Designated Safeguarding Leads (DSL) conference on safety in February 2025, and the continuing drive to recognise online risk and share resources across the DSL Network. The impact of this conference influenced the development of a Brent School Commitment: The PHONE Pledge for schools to sign up to.



To develop the Brent PHONE pledge, the local authority has worked with a group of primary and secondary headteachers from across Brent to explore how we could respond to these concerns. Through this, the Brent PHONE Pledge was created to support schools in managing children's use of mobile phones. The Pledge is made up of five clear principles: P - Protect; H - Help; O - Observe; N - Nurture; E - Educate.



Recent Department for Education guidance states that all schools should be “mobile phone-free environments by default”, but the Brent Pledge intentionally goes further than simply restricting mobile phone use. It supports schools to consider the safe and purposeful use of all smart technologies, ensuring: consistency across classrooms and spaces; safeguarding against the broader risks posed by connected devices; clarity for pupils, staff, and families; and high expectations for learning behaviours and digital responsibility.

Developing Data Collection, Use and Analysis

Power BI dashboards are routinely used in CYPCD to identify trends, monitor performance and inform service development. This information is used for both management oversight and quality assurance initiatives. Power BI dashboards allow for an integrated approach to understand vulnerability, including for children with an Education Health and Care Plan and those who are Electively Home Educated. This has led to joint audit initiatives over the past year from both a Children's Social Care and an Inclusion Service Perspective. This has led to better joint working across two directorates and a broader understanding from front line practitioners about elective home education.

BRENT CHILDREN YOUNG PEOPLE AND COMMUNITY DEVELOPMENT

Capturing the Voice of Young People



The CYPCD ways of capturing the voices of children and young people are incorporated into the CYPCD Participation Strategy and in other specific strategies such as the Brent Youth Strategy and Inclusion strategy. Examples of listening and acting upon the voices of children and young people include:

- Through Brent Care Journeys (now known as BCJ Empire), care experienced children and young people directly influence service priorities, participation models, and strategic decisions, including attendance in the Corporate Parenting Committee meetings. Children and young people provide direct feedback on their experiences and influencing the Council's statutory responsibilities, which has led to 'Care Experience' becoming a protected characteristic in Brent. A member of Brent Care Journeys represents Brent on the national Family Justice Young People's Board and ensures that messages from the national group feed back to Brent and vice versa.
- Young people's voices have been central to the co-production of the refreshed Brent Youth Strategy 2025–2028, resulting in clearer, child-friendly language, digital accessibility, and a stronger sense of youth ownership. Ongoing governance arrangements ensure young people remain actively involved in delivery. Young people were part of the selection process for capital funding allocations to providers for youth projects to support better youth provision facilities.
- The CYP case file audit programme includes gaining feedback from children and parents/carers that is triangulated with a review of the case file and a conversation with the lead practitioner, and where possible with the child and family. This allows for a holistic understanding of a child's lived experience to inform improvements for the family and for the service. Direct quotes are shared with senior leaders in the quarterly Quality Assurance report.
- Brent Youth Parliament actively campaigns on areas that are important to them, including campaigns on anti-vaping, Period Poverty and serious youth violence. The actively contributed to initiatives on climate change including the Roots of Brent film project and contributing to Brent's climate strategy. A member of BYP as part of her role on the UK youth parliament was elected to sit on the Youth select committee where she led an enquiry investigating links between social media and youth violence the following link is to the report published [Youth Violence and Social Media](#). This young person presented the findings from this work to the Safeguarding Children Forum.

Neurodiversity

The theme of safeguarding children who are neurodiverse had been developed within CYPCD over the past year. This includes:

- Stronger working relationships across services working with children and young people with Special Educational Needs and Disability, Inclusion, specialist services for children on the autistic spectrum and frontline practitioners. Through joint audit activity and shared learning and development opportunities, there is greater understanding of safeguarding needs.
- The Brent Schools Designated Safeguarding Leads Annual Conference was a full day focused on neurodiversity and safeguarding. This included specialist sessions focussed on the specific needs of children with neurodiversity, methods of communication and safeguarding tools. The Contextual Safeguarding Lead focussed on how some children with neurodiverse needs are more vulnerable to extra-familial harm.

BRENT CHILDREN YOUNG PEOPLE AND COMMUNITY DEVELOPMENT

The day concluded with reflective case discussions with DSLs, social workers and those working in specialist services to help DSLs reflection on children with neurodiverse needs and safeguarding.



Transitional Safeguarding

Ongoing progress has been made to ensure young people are safeguarded as they transition to adulthood. The key ways of doing this are:

- The Exploitation, Violence and Vulnerability Panel is CYPCD's key way to monitor transition from children's services to adult's services at the age of 18. This panel responds to the needs of children at risk of extra-familial harm. An adults portion of the panel covers those over the age of 18. Many of the services commissioned for young people at risk of harm are up to the age of 25, covering the transition period to adults.
- Care experiences young people who meet criteria for care leaving services have an allocated personal advisor. These personal advisors receive training on extra-familial harm and vulnerability in early adulthood.
- In the Children with Disabilities Team, young people receive support from the same team until the age of 25.
- CYPCD is contributing to Safeguarding Adult Reviews across CYPCD and ASC to understand transitional safeguarding and gather a fuller understanding of what is needed to support young people moving to adulthood.

Evidence of Impact, Learning and Improvement

There is a strong and robust quality assurance system in place in CYPCD that includes responding to learning from rapid reviews and audit activity. This includes:

- Regular training by the Head of Safeguarding and QA on learning from serious cases – including national learning, local rapid reviews and multi-agency audits
- Learning from quality assurance activity is shared with managers and practitioners to support practice improvement. This learning informs the Learning and Development offer and is tracked through the Practice Improvement Plan to support ongoing development.

Priorities and Forward Look for 2026–27

There is a focus on the different reform programmes across the CYPCD directorate to ensure implementation of reforms is cohesive and incorporated across all services for children and families. This includes ongoing Best Start in Life reforms and SEND reforms. In Early Help and Social Care, the focus for 2026/27 will be on driving reforms under the Family First Partnership Programme, including embedding the redesigned practice model, piloting the new Family Support Assessment and strengthening cross-borough collaboration to improve commissioning, practice consistency, and service impact.

06 MULTIAGENCY LEARNING AND DEVELOPMENT STRATEGIC PLAN

During this reporting year, the multi-agency Learning and Development (L&D) offer has undergone significant review and change. The focus has been on reducing duplication between the joint safeguarding partnerships' training and individual agencies' programmes.

The new Brent Safeguarding Partnerships Learning and Development Strategic Plan has been developed in response to feedback and recognition that the prior approach to the Partnerships learning strategy, led by a sub group, was not as effective at addressing learning and driving system improvements as it should be. The group, whilst well established, did not always have the right voices or knowledge in the room to help move forward the learning priorities.

It was recognised that different pieces of work and different topics would often require a more diverse range of input and subject matter knowledge than the sub-group could allow in it's present format. It was also recognised that face to face training, whilst valuable in the right setting, for the right topic, is not always the best or most effective way to disseminate learning to the wider Brent system.

The new strategy aims to enhance the multi-agency learning and development programme for both the Safeguarding Children Partnership and the Safeguarding Adults Board. It sets out an expanded vision to diversify learning formats with an ambition to also strengthen impact of the learning.

The development of the new strategy was led by Independent Scrutineer Keith Makin and outlines a more flexible approach to developing and coproducing learning solutions. This will be supported by the development of an implementation plan to start to embed the new approach.

Learning and Development Approach



Our approach to multi-agency safeguarding learning and development

The Safeguarding Partnerships recognise that learning extends beyond formal training courses. Meaningful development happens through everyday work including structured training, on-the-job experiences, collaboration, coaching, self-directed learning, and knowledge sharing.

Delivering Learning

To support this approach, a variety of learning methods are offered to meet different needs and contexts. Each method is designed to build skills, strengthen knowledge, promote collaborative multi-agency working and improve practice across Brent.



Self-directed learning

Curated resources (such as newsletters and best practice guidance), briefings, online libraries, e-learning, podcasts and webinars that support flexible and accessible learning



Collaborative learning

Policy and toolkit launches, reflection sessions, live audits, game-based learning, and events that strengthen joint working, support reflection on practice, and encourage learning across all sectors



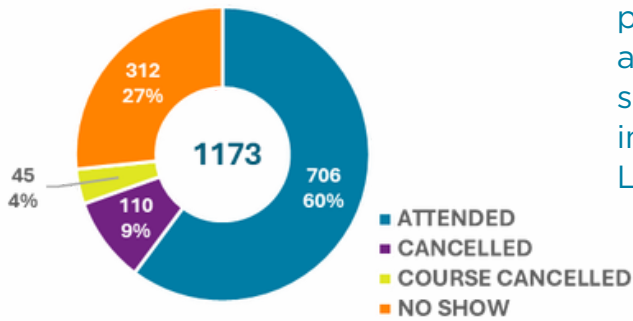
Structured Multi-Agency Training

Facilitator-led, topic-specific sessions to build shared understanding and consistent practice, embedding learning from multi-agency reviews, audits and case studies



Trainer Led Sessions Attendance

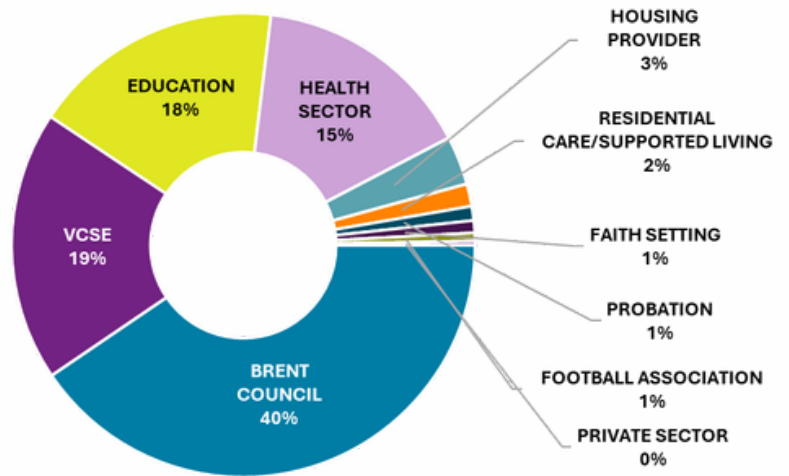
PROGRAMME ATTENDANCE RATE 2025/2026



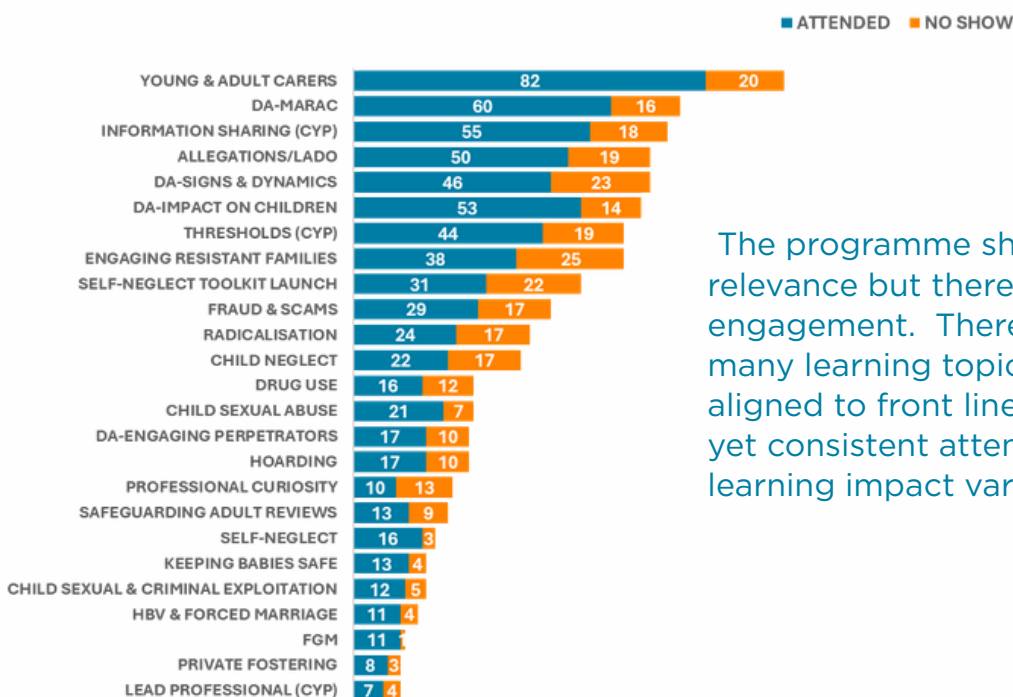
Programme performance is currently stable with participation generally exceeding cancellations and no-shows. However, there is scope to strengthen consistency and overall impact, including aligning delivery more closely with the Learning & Development (L&D) Strategic Plan.

The increased attendance from education and VCSE organisations is positive and reflects the targeted efforts made to strengthen reach. These partners now form a significant proportion of multiagency participation demonstrating commitment to safeguarding practice.

ATTENDANCE BY SECTOR



COURSE ATTENDANCE BREAKDOWN



The programme shows strong breadth and relevance but there are uneven levels of engagement. There is a high interest across many learning topics, particularly those aligned to front line safeguarding practice, yet consistent attendance and sustained learning impact vary by course topic.



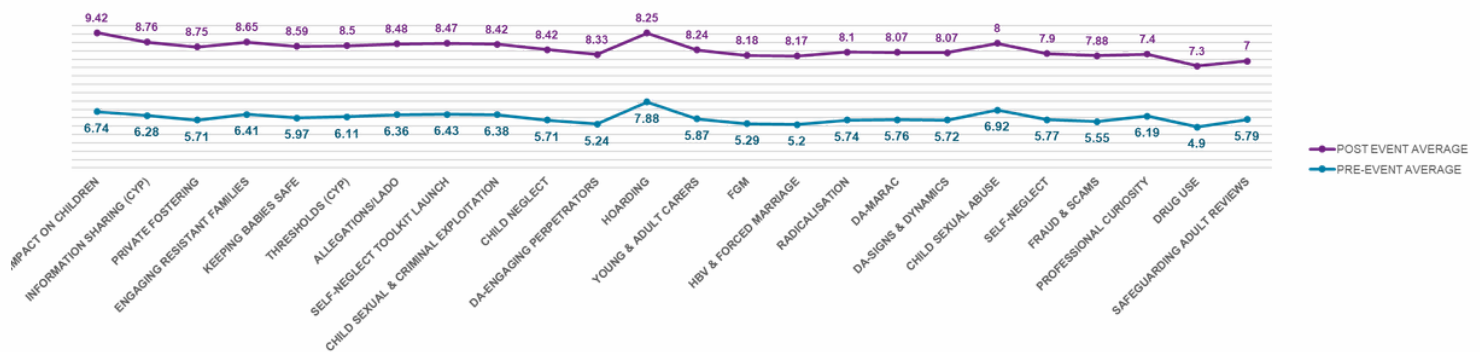
Evaluation and Impact

The Safeguarding partnerships use a Learning Management system to manage the end to end process of multiagency training in Brent.

Part of this system includes a learning outcomes evaluation tool to measure the impact of training on professional practice.

Feedback demonstrates a clear improvement in understanding, knowledge and confidence, with an average learning gain in across the whole multiagency training programme as 22.3%.

LEARNING GAIN



Evaluation feedback shows the multi-agency training programme has been consistently well received, with most participants rating delivery as good or excellent. Delegates particularly valued the engaging facilitation and use of case studies to bring complex safeguarding issues to life.

Value of multi-agency training

"The course content was good and there was good discussion with other professionals which added value."

Delivery and use of real life case studies

"Excellent delivery, very interesting and informative."
"The case studies were excellent... 10/10."

Increased confidence in safeguarding practice and multiagency working

"I feel more confident responding to safeguarding concerns in a multiagency context"

Increased confidence in multi-agency working

"I feel more confident responding to safeguarding concerns in a multi-agency context."

Learning translated into practical safeguarding actions.

"I will use the knowledge to complete my current child and family assessments"

Participants felt the training met expectations and aligned closely with their roles, while strengthening confidence in recognising and responding to safeguarding concerns within a multi-agency context.

There is clear evidence that learning has been applied in practice, with delegates identifying tangible changes in their work.

Overall, feedback provides strong assurance that the programme is a high-quality that is enhancing professional confidence and strengthening multi-agency working across the partnership.

NEXT TWELVE MONTHS

Over the next year Brent Safeguarding Children Partnership will prioritise the below key areas of focus:



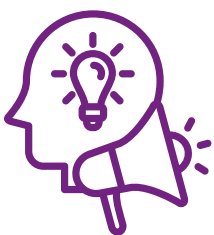
Neglect - has been identified as a priority focus in line with the London Safeguarding Children Partnership (LSCP) due to its limitations in recognition and recording and the significant, long-term impact it can have on a child's development, health, and wellbeing.

Strengthening our approach to recognising, assessing, and intervening in cases of neglect will ensure that children receive timely, coordinated support and consistent practice across the partnership.



Families First Partnership Programme - Supporting the implementation of the Families First Partnership Programme is a key strategic priority, recognising its focus on earlier intervention, whole-family support, and strengthened multi-agency collaboration through Multiagency Child Protection Teams.


Provide effective strategic oversight via the Stakeholders Board group, maintaining clear governance, robust performance monitoring, and shared accountability across agencies.



Capturing the Voice of Young People - remains a central priority, recognising the importance of their lived experience in shaping effective safeguarding practice.

The recruitment of Young Scrutineers to participate in DSP group meetings, alongside involvement in BSCP Task and Finish Groups, strengthens our commitment to meaningful youth engagement at a strategic level.

By creating structured opportunities for young people to contribute to scrutiny, planning, and service development, we will ensure their perspectives inform decision-making, challenge existing practice, and support the development of services that better meet their needs.

	<p align="center">Community and Wellbeing Scrutiny Committee 30 June 2026</p>
	<p align="center">Report from the Deputy Director, Democratic and Corporate Governance</p>
<p>Scrutiny Recommendations Tracker</p>	

Wards Affected:	All
Key or Non-Key Decision:	Non-Key Decision
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
List of Appendices:	One Appendix A – Scrutiny Recommendations Tracker 2025-26
Background Papers:	None
Contact Officer(s): <small>(Name, Title, Contact Details)</small>	<p>Chatan Popat Strategy Lead - Scrutiny, Democratic and Corporate Governance chatan.popat@brent.gov.uk</p> <p>Amira Nassr Deputy Director, Democratic and Corporate Governance amira.nassr@brent.gov.uk</p>

1.0 Executive Summary

1.1 The purpose of this report is to present the Scrutiny Recommendations Tracker to the Community and Wellbeing Scrutiny Committee.

2.0 Recommendation(s)

2.1 That the progress of any previous recommendations, suggestions for improvement, and information requests of the Committee be noted (Appendix A).

3.0 Detail

3.1 Contribution to Borough Plan Priorities & Strategic Context

3.1.1 Borough Plan 2023-2027 – all strategic priorities

3.2 Background

3.2.1 The Recommendations Tracker tabled in Appendix A relates to the previous municipal year (2025/26). These responses will remain on the tracker for ongoing monitoring with some further updates expected in upcoming meetings throughout this municipal year and next.

3.2.2 In accordance with Part 4 of the Brent Council Constitution (Standing Orders of Committees), Brent Council scrutiny committees may make recommendations to the Full Council or the Cabinet with respect to any functions which are the responsibility of the Executive, or of any functions which are not the responsibility of the Executive, or on matters which affect the borough or its inhabitants.

3.2.3 The Community and Wellbeing Scrutiny Committee may not make executive decisions. Scrutiny recommendations therefore require consideration and decision by the appropriate decision maker; the Cabinet or Full Council for policy and budgetary decisions.

3.2.4 The Scrutiny Recommendations Tracker provides a summary of any scrutiny recommendations made in order to track executive decisions and implementation progress. It also includes suggestions for improvement and information requests, as captured in the minutes of the committee meetings.

3.2.5 Recommendations are removed from the tracker when they have been rejected or when implemented successfully and the review date has passed. This is the same for suggestions of improvement and information requests.

4.0 Procedure for Recommendations from Scrutiny Committees

4.1 Where scrutiny committees make recommendations to the Cabinet, these will be referred to the Cabinet (and/or relevant cabinet member) requesting an Executive Response. If relevant, the item will be published on the Council's Forward Plan.

4.2 Regarding recommendations to Full Council (e.g. in the case of policy and budgetary decisions), the same process will be followed, where a report containing the scrutiny recommendations will then be forwarded to Full Council alongside the Cabinet's responses to those recommendations.

4.3 Where scrutiny committees have powers under their terms of reference to make reports or recommendations to external decision makers (e.g. NHS bodies), the relevant external decision maker shall be notified in writing, providing them with

a copy of the respective Committee's report and recommendations, and requesting a response.

5.0 Stakeholder and ward member consultation and engagement

5.1 None for the purposes of this report.

6.0 Financial Considerations

6.1 There are no financial implications for the purposes of this report.

7.0 Legal Considerations

7.1 Section 9F, Part 1A of the Local Government Act 2000, *Overview and scrutiny committees: functions*, requires that Executive arrangements by a local authority must ensure that its overview and scrutiny committees have the power to make reports or recommendations to the authority or the executive with respect to the discharge of any functions which are or are not the responsibility of the executive, or on matters which affect the Authority's area or the inhabitants of that area.

7.2 Section 9FE, *Duty of authority or executive to respond to overview and scrutiny committee*, requires that the authority or executive; -
(a) consider the report or recommendations,
(b) respond to the overview and scrutiny committee indicating what (if any) action the authority, or the executive, proposes to take,
(c) if the overview and scrutiny committee has published the report or recommendations, publish the response within two months beginning with the date on which the authority or executive received the report or recommendations.

8.0 Equity, Diversity & Inclusion (EDI) Considerations

8.1 There are no EDI considerations for the purposes of this report.

9.0 Climate Change and Environmental Considerations

9.1 There are no climate change and environmental considerations for the purposes of this report.

10.0 Human Resources/Property Considerations (if appropriate)

10.1 There are human resources or property considerations for the purposes of this report.

Report sign off:

Amira Nassr

Deputy Director, Democratic and Corporate Governance

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**Community and Wellbeing Scrutiny Committee (CWBC)
Scrutiny Recommendations and Information Request Tracker 2025-26**

The Recommendations Tracker is a standing item on committee agendas, and documents the progress of scrutiny recommendations, suggestions for improvement, and information requests made by the Community and Wellbeing Scrutiny Committee at its public meetings and as part of task and finish group reviews. Scrutiny recommendations, suggestions for improvement, and information requests will not be removed from the tracker until full responses have been provided to the Committee by either the Cabinet, council departments, and/or external partners.

Recorded Recommendations to Cabinet from CWBC

Meeting date and agenda item	Scrutiny Recommendation	Cabinet Member, Lead Officer, and Department	Executive Response	Implementation Status	Review date

Recorded Recommendations to external partners from CWBC

Meeting date and agenda item	Scrutiny Recommendation	External partner	Response	Status
04 March 2026 – Reduction in operating hours at the Urgent Treatment Centre located at Central Middlesex Hospital	1) That the reduction in operating hours be reconsidered on the basis of a more comprehensive engagement exercise, enabling a wider range of service users and stakeholders to contribute to the assessment. 2) That population growth data be provided, together with analysis to identify the broader strategic context for service provision and to determine whether any gaps in provision existed.	London North West University Healthcare NHS Trust	 Response to CWBC.pdf	

Recorded suggestions for improvement from CWBSC to Council departments/partners

Meeting date and agenda item	Suggestions for improvement	Council Department/External Partner	Response	Status
02 July 2025 - Brent Safeguarding Adults Board (SAB) Annual Report (2024/25)	To co-produce a SAB priority with those with lived experience.	Children, Young People and Community Development Brent Safeguarding Adults Board Independent Chair	The Board is underway with a community engagement project that will conclude in November. Our new Strategic priorities are due to be drawn up in January 2026, so we should be able to draw on learning from the project when setting new priorities.	
02 July 2025 - Brent Safeguarding Adults Board (SAB) Annual Report (2024/25)	To commission a multi-agency safeguarding awareness campaign	Children, Young People and Community Development Brent Safeguarding Adults Board Independent Chair	National Safeguarding Adult week occurs every year in November, where a lot of awareness and training is run and accessible to professionals supporting learning and awareness around keeping adults safe. Budget and resource constraints would not allow the Brent SAB to fund a stand-alone campaign.	
02 July 2025 - Brent Safeguarding Adults Board (SAB) Annual Report (2024/25)	To recommend future reports list learnings and how they had been addressed.	Children, Young People and Community Development Brent Safeguarding Adults Board Independent Chair	This will be considered within the format and structure of next year's report.	
02 July 2025 - Brent Safeguarding Adults Board (SAB) Annual Report (2024/25)	To recommend future reports reflect on national reviews and how they impact locally.	Children, Young People and Community Development Brent Safeguarding Adults Board Independent Chair	The Board does this informally via agenda items through the routine Board meetings that will touch on address national themes. We will work to indicate more explicitly in the narrative what these may be.	

02 July 2025 - Brent Safeguarding Children Partnership Report (2024/25)	To recommend that the Committee have sight of the work being done around online safety.	Children, Young People and Community Development Brent Safeguarding Children Partnership Independent Scrutineer	<p>Work on the Online Safety Task and Finish Group commenced April 2025. It has representatives from:</p> <ul style="list-style-type: none"> • London Borough of Brent: Adult Social Care • London Brough of Brent: Children Service • Secondary school education leader • Primary school education leader • Independent Scrutineer: BSCP • Young Person TBC <p>The work plan focuses on the following themes:</p> <ul style="list-style-type: none"> • Mobile phone usage in schools • Review of knowledge gaps for professionals • Neurodiversity pathways for exploring the online world • Knife crime awareness • Voice of the child and managing transitions <p>Findings and recommendations to be finalised December 2025 and a report shared with the Safeguarding Children Forum.</p>	
02 July 2025 - Brent Safeguarding Children Partnership Report (2024/25)	To receive a future report looking at how services are supporting young people from a transitional safeguarding perspective who are vulnerable but don't meet ASC threshold.	Children, Young People and Community Development Brent Safeguarding Children Partnership Independent Scrutineer	<p>The Safeguarding Children Partnership and The Safeguarding Adults Board established a Transitional Safeguarding Project in May 2025. This joint initiative will assess and strengthen safeguarding or young people aged 14-25. Three cohorts have been identified:</p> <ul style="list-style-type: none"> • Additional needs • Care experienced • Exploitation <p>Two workshops to be held: 1: What works well and what needs to be strengthened 2: Live case audits.</p> <p>Project outputs:</p> <ul style="list-style-type: none"> • Complete a final report for the Joint Safeguarding Partnerships Executive Group with recommendations on how to ensure that 	

			<p>children and young people in the 3 cohorts, with care and support needs, are supported through their transition to adulthood.</p> <ul style="list-style-type: none"> • Develop a delivery plan for 2026 across SAB/SCP subgroups and member agencies • Continued work with young adults to hear views on progress of changes <p>The Safeguarding Children Partnership are also looking at new processes for Cases of Concern for those young people who do not make thresholds for review.</p>	
02 July 2025 - Brent Safeguarding Children Partnership Report (2024/25)	To recommend an improvement in safeguarding support for youth organisations.	<p>Children, Young People and Community Development</p> <p>Brent Safeguarding Children Partnership Independent Scrutineer</p>	<p>Support is currently and will continue to be offered through the partnerships multiagency training programme.</p> <p>The Independent Scrutineer to meet with Young Brent Foundation</p>	
02 July 2025 - Brent Safeguarding Children Partnership Report (2024/25)	For the Independent Scrutineer to contact Healthwatch to see how they can support the work of the partnership.	<p>Children, Young People and Community Development</p> <p>Brent Safeguarding Children Partnership Independent Scrutineer</p>	Independent Scrutineer to set up a meeting with Healthwatch to discuss collaboration with the partnership.	
02 July 2025 - Brent Safeguarding Children Partnership Report (2024/25)	Recommendation by Brent Youth Parliament – for the partnership to stretch out to different youth and community groups alongside schools.	<p>Children, Young People and Community Development</p> <p>Brent Safeguarding Children Partnership Independent Scrutineer</p>	Independent Scrutineer to meet with BYP and explore appropriate youth organisations.	

02 July 2025 - Brent Safeguarding Children Partnership Report (2024/25)	For future reports to include more data and KPIs.	Children, Young People and Community Development Brent Safeguarding Children Partnership Independent Scrutineer	New commissioned software via PHEW in place to support with this. Section 11 audit to be actioned.	
17 September 2025 – The Impact of Youth Justice Service Delivery in Brent	The service should strengthen and expand partnerships with boxing clubs, music groups, and similar community-based initiatives that promote rehabilitation, foster pro-social identity, reduce the risk of reoffending, and help individuals remain engaged and focused on their future.	Children, Young People and Community Development	Brent YJS works with a range of community-based initiatives. These include St. Giles Trust mentoring, the <i>I Am Brent</i> consortium, Raheem Sterling Foundation, and the <i>Engage</i> Programme - youth work support in Police custody suites. A briefing paper outlining progress made to increase pathways to community based, voluntary sector and partner agency initiatives will be presented to CWBSC in March 2026.	
17 September 2025 – The Impact of Youth Justice Service Delivery in Brent	For the Youth Justice Service to consider engaging with Wembley Stadium to explore potential employment pathways in the security and hospitality sectors, aimed at supporting young people transitioning out of the YJS and reintegrating into the community.	Children, Young People and Community Development	Brent YJS will explore the development of Wembley Stadium employment pathways with Community Development colleagues. This work will seek to complement existing Employment, Training and Education (ETE) support provided to YJS from the Shaw Trust, and from Plias Resettlement. Both Services are co-located within the YJS and provide ETE mentoring and counselling support to children involved in Brent Youth justice System.	
17 September 2025 – The Impact of Youth Justice Service Delivery in Brent	The Youth Justice Service should strengthen collaboration with Brent's partners and the voluntary sector. As the current report did not focus on this area in detail, the Committee requests a future update outlining	Children, Young People and Community Development	Brent YJS works closely with voluntary sector and youth justice partners. These include <i>Via</i> substance misuse support, the Young Brent Foundation, Probation Service, CAMHS, and the Police. A progress update on the entirety of this work will be included in the briefing paper presented to CWBSC in March 2026.	

	any progress made in developing these partnerships.			
17 September 2025 – Children's Oral Health	To get a strong message out to Brent parents, carers and communities via tools such as the Brent Magazine, Brent Health Matters, Libraries, Hubs, Family Wellbeing Centres and schools, focusing on areas with poorer oral health outcomes, about the use of fluoride on teeth.	Service Reform and Strategy	<p>76% of settings that we have approached are successfully delivering the Supervised Toothbrushing Programme. However, we have only been able to reach just under 50% of the 314 settings in the borough. Since October, we have contacted 15 settings from IMD 1 and 2 and seven have agreed to sign up. Therefore, we will need to expand our reach and thus will appreciate the support and input from the council's corporate communications team in centring oral health for families.</p> <p>We will draft a paragraph for Brent magazine encouraging parents to ensure their children are brushing their teeth twice a day, specifically focusing the messaging on the role fluoride in toothpastes play in preventing decay. Also, encouraging visiting the dentist regularly who are able to provide high-strength fluoride varnish applications for children and greater risk of tooth decay.</p>	
17 September 2025 – Period Dignity	To develop a plan to incentivise private sector organisations to offer similar products and information	Service Reform and Strategy	We will seek to work with colleagues both within and outside of the council to establish a plan. An example of how this could be established is through current activity to update our approach to Social Value i.e. encouraging our contractors and providers to provide free products	
17 September 2025 – Period Dignity	In developing projects and policies, to ask young people for their opinion, not just through BYP but other youth groups in the area.	Service Reform and Strategy	During the development phase of future projects and policies related to Period Dignity we will engage with young people, beyond BYP.	
17 September 2025 – Period Dignity	For any future report on pilots, to ensure a more structured way of evaluating the pilot, what the learning was, and what would be done for the future.	Service Reform and Strategy	The report presented does this to an extent, but we will make this clearer and more robust in the future.	

<p>19 November 2025 – Response to Housing regulator findings and Brent graded at C3</p>	<p>To ensure continual monitoring of the data to ensure similar issues do not happen again.</p>	<p>Resident and Housing Services</p>	<p>There has been a intense period of data cleansing undertaken and we have realigned compliance programs.</p> <p>True compliance (IT System) has been rebuilt using cleansed data and Housing Mgt report monthly to The Regulator of Social Housing and compliance board and CMT.</p> <p>New policies and Processes are being developed, and we will be using an independent company to check our compliance monthly.</p>	
<p>19 November 2025 – Response to Housing regulator findings and Brent graded at C3</p>	<p>To fast-track the timeline for stock condition surveys and data reconciliation.</p>	<p>Resident and Housing Services</p>	<p>We have secured the budget to expedite the SCS program.</p> <p>We expect 100% of surveys not older than 5 years by March 2027.</p> <p>We will then profile the program to ensure we can commit to 20% yearly.</p>	
<p>19 November 2025 – Response to Housing regulator findings and Brent graded at C3</p>	<p>To provide reassurance to residents through appropriate communication channels, such as through a safety dashboard, so that residents had visibility of performance.</p> <p>This communication should be direct and easy to understand.</p>	<p>Resident and Housing Services</p>	<p>We successfully delivered the Annual Report to residents in December 2025, providing a transparent overview for Residents and Tenants of performance across key service areas including repairs, complaints and neighbourhood management.</p> <p>In terms openness and regular communication, we also use the notice board newsletter, which is issued regularly, to ensured residents were kept informed of our regulatory position.</p>	
<p>19 November 2025 – Response to Housing regulator findings and Brent graded at C3</p>	<p>To ensure Housing Management are listening to how residents felt about the grading and whether they felt the improvements being put in place were having an impact.</p>	<p>Resident and Housing Services</p>	<p>As a standing agenda item, the Housing Management Advisory Board receives regulatory updates, including reports and data submitted to the Regulator.</p> <p>This enables the Board to scrutinise progress and question officers directly, they are also able to request for the provision of information in an agreed format.</p>	
<p>19 November 2025 – Update from the Housing</p>	<p>To ensure the Housing Management Advisory Board utilised all possible sources of data</p>	<p>Resident and Housing Services</p>	<p>HMAB is provided with a comprehensive range of both qualitative and quantitative reports that contains data / information on performance / service delivery to support its oversight role.</p>	

Improvement Board	to inform its work, including member casework.		This includes Tenant Services Management (TSM) returns, as well as analysis of internal performance data and resident perception surveys.	
19 November 2025 – Update from the Housing Improvement Board	To review the current structure of the Board and process of appointment at the next revision of the Terms of Reference.	Resident and Housing Services	We are working with the Chair to review the Board's structure to ensure it remains fit for purpose. A discussion will take place at the next Board meeting to agree the recruitment and appointment process for the vacant resident member role to ensure that it aligns with the Terms of Reference.	
19 November 2025 – Update from the Housing Improvement Board	For future iterations of the report, to model the template on the independent safeguarding annual reports received by the Committee, incorporating data, KPIs, priorities, activity of the Board, areas for improvement, areas working well, and case studies in an easy to understand digestible format.	Resident and Housing Services	To be actioned.	
19 November 2025 – Update from the Housing Improvement Board	To publish a clear roadmap of achievements the Board wanted to see in relation to Housing Management KPIs, with accompanying timelines.	Resident and Housing Services	A HMAB Service Plan for 2026/27 will be developed, detailing areas of work the Board will be focusing on and feed into the roadmap of achievements. To be discussed at the next board meeting on 26 Feb 2026	
19 November 2025 – Update from the Housing Improvement Board	To strengthen and structuralise the tenant voice, including the creation of a resident association in every Council estate in the borough.	Resident and Housing Services	There are currently 16 active Residents' Associations on estates and across the borough. We hold an RA Chair Seminar every two months where all RA elected committee members are invited to attend, we discuss and share information. Brent Council provides support to groups who want to establish a new Residents' Association.	

04 March 2026 - Housing Management: TSM and Brent Housing Management Performance	That a full report be provided to the Committee on housing management systems, including a clear plan setting out how these are being integrated into the new NEC suite ensuring all systems used within Housing Management for gas safety, fire safety, electrical safety, housing decency and wider housing condition systems are being brought together effectively.	Resident and Housing Services	Accepted by the department at the meeting. An update on the system integration will be included with the next report to the CWBSC on Brent Housing Management.	
04 March 2026 - Housing Management: TSM and Brent Housing Management Performance	That the development of a Repairs Preventative Strategy be explored and formalised.	Resident and Housing Services	Provisional work had been carried out and that a strategy is being developed focusing on disrepair and decency. The strategy is expected to be completed within the next few months and would inform the programme of planned works for the forthcoming year.	
04 March 2026 - Area Tenancy Management Model	That communications with residents at Clearwater House be improved with clear updates and to inform them with details of an accountable point of contact be following resident complaints that they were not receiving responses, that their housing point of contact changed repeatedly, and that cases were passed between teams without clear accountability.	Resident and Housing Services	The department are aware of issues at Clearwater House and that some difficulties have arisen across new build blocks. Many of the new build blocks are mixed tenure and involve mixed management arrangements, which make issues sometimes more complex to address. Officers will ensure that communication is improved, that residents are clear about their points of contact and that complaint escalation routes are properly understood and responded to within corporate timescales.	

Information requests from CWBSC to Council departments/partners

Meeting date and agenda item	Information requests	Council Department/External Partner	Response
17 September 2025 – The Impact of Youth Justice Service Delivery in Brent	As agreed by the Corporate Director, the Committee requests an explanatory note detailing the methodology used to produce the 2024/25 data presented in the report.	Children, Young People and Community Development	<p>The report: <i>The Impact of Youth Justice Service Delivery in Brent</i>, contains seven statistical tables. The accuracy of four of these tables was questioned during the Community and Wellbeing Scrutiny Committee meeting on 17 September 2025. Below are detailed responses to each of these questions:</p> <p>Data source and counting methodology Every quarter, all Youth Justice Services in England and Wales submit case level data to the Youth Justice Board (YJB). This information is uploaded from local authority youth justice case management systems. Information is collated by the YJB. This is done in adherence to YJB counting rules that are applied consistently to all Youth Justice Services to allow comparative analysis at a national, regional and local level. This data is then published by the YJB and includes rate of reoffending, rate and number of reoffending, number of children remanded into custody, and the number of children sentenced to custody.</p> <p>Re-offending The narrative and data provided in <i>The Impact of Youth Justice Service Delivery in Brent</i> follows: <i>“Re-offending rates are prone to fluctuation and tracked over a period of 18-months. The low rates of reoffending that Brent has experienced in recent years is likely to have been influenced by the considerable programme of preventative work undertaken at this time.”</i></p> <p>Table 3: Brent youth reoffending rates, October 2018 to June 2023</p>



Early Help response

A cohort of “repeat offenders” is identified every quarter, then tracked for a period of eighteen-months to determine the cohorts rate of reoffending. The results are published three-months later, meaning data relates to a period of analysis commencing 21-months earlier.

Table 3 shows that the Brent rate of reoffending decreased sharply in the period January to March 2021, increased sharply six-months later, fell sharply in the period January to March 2022, before increasing gradually in the five quarters that followed. There is however reason to be cautious about the accuracy of this data as it was counted during the height of the Pandemic. During this time crime statistics were affected by factors including restrictions on social movement, and the slow progression of cases through the judicial system which ultimately created a backlog of juvenile cases waiting to be administered.

It may never be understood whether Brent’s performance was exceptional during the time or a biproduct of COVID-19. This question was posed to the YJB throughout this time; the response was limited to the possibility that due to pandemic related

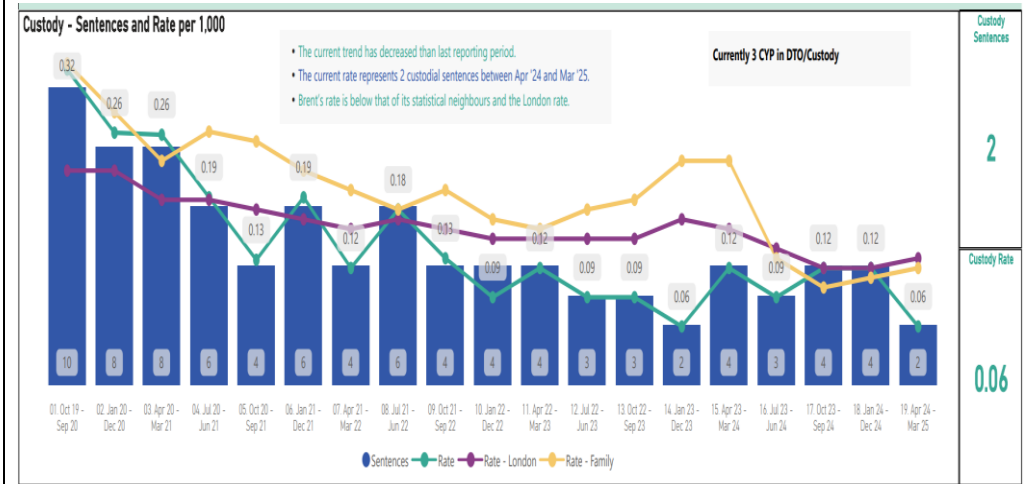
staffing issues affecting YJB data officers, Brent's data may not have been processed as thoroughly as usual. The "low rate of offending Brent has experienced in recent years" is referenced to the most recent rate of reoffending (33.3%) being almost half of that recorded in the period October to December 2019 (63.3%), when Brent's rate of reoffending was significantly higher than the London and Family Group rates – it is currently marginally higher than both.

The complex nature of reoffending data warranted further explanation than that outlined in *The Impact of Youth Justice Service Delivery* report. Future reports will ensure this level of detail is provided.

Custody

The narrative and data provided in *The Impact of Youth Justice Service Delivery in Brent* included: "Brent's custodial population is lower than both our statistical neighbours and the London average."

Table 4: Brent youth custody rate and numbers, October 2019 to March 2025



Custody Sentences
2
Custody Rate
0.06

Early Help response

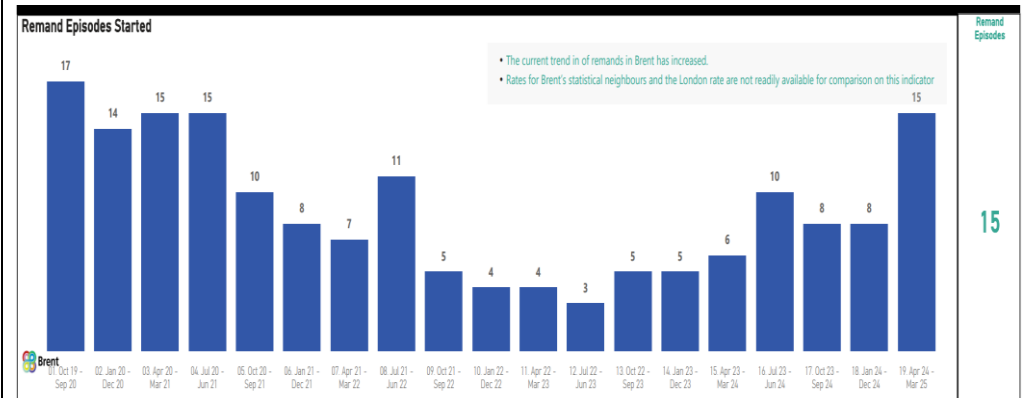
The rate and number of Brent children sentenced to custody has fallen significantly since analysis within Table 4 commenced in the 12-month period October 2019 to September 2020 (0.32 children per thousand – 10 children) and ended in the period April 2024 to March 2025 (0.06 children per thousand – 2 children. It is currently well below both the London and family rate.

Remands

The narrative and data provided in *The Impact of Youth Justice Service Delivery in Brent* included:

“...the number of remands has increased by three compared to the previous year (five) to total eight in 2024/25. This increase is attributed to two serious incidents involving eight children in 2024/25.”

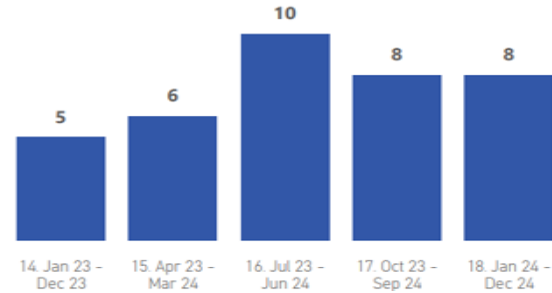
Table 5: Brent youth remand numbers, October 2019 to March 2025



Early Help response

“...the number of remands has increased by three compared to the previous year (five) to total eight in 2024/25. This increase is attributed to two serious incidents involving eight children in 2024/25.”

This statement mistakenly refers to the 2024/25 financial year. It is in fact a correct comparison of the calendar years 2024 and 2025:



A correct explanation of the reason why the number of children on remand increased significantly is provided. However, there is an absence of an explicit reference to the 15 children who were remanded into custody in the period April 2024 to March 2025.



A clearer narrative to provide context is as follows:

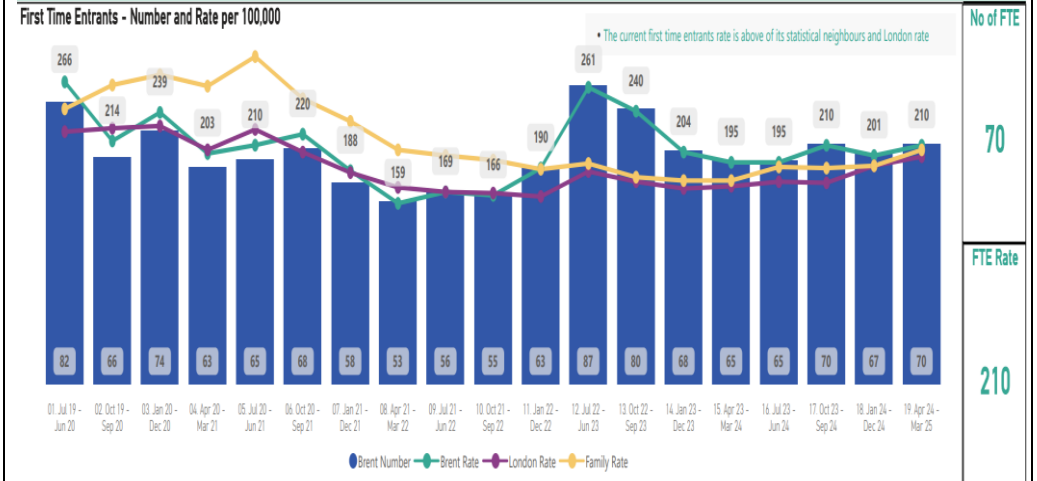
...the number of remands in the 2023 calendar year was five. This figure increased to eight in the 2024 calendar year. In the twelve-month period ending March 2025, 15 children received custodial remands. This increase is attributed to two serious incidents involving eight children.

First-time entrants to the Youth Justice System (FTEs)

The narrative and data provided in *The Impact of Youth Justice Service Delivery in Brent* included:

“The number of children entering the Youth Justice System has also been falling for more than a decade, at a national and local level.”

Table 6: Brent first-time entrants to the youth justice system, July 2019 to March 2025



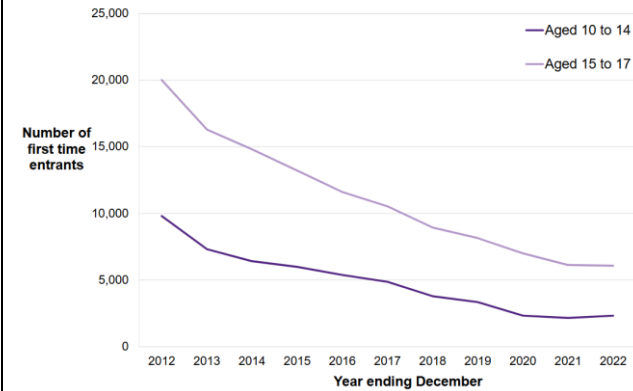
Early Help response

More context was needed to support this statement: YJB Accredited official statistics provided in

Youth Justice Statistics: 2022 to 2023, [Youth Justice Statistics: 2022 to 2023 \(accessible version\) - GOV.UK](#)

Published on 25 January 2024, show that the national number of FTEs has fallen sharply since 2012.

Figure 2.2: Number of child first time entrants by age group, England and Wales, year ending December 2012 to 2022



The number of FTEs in Brent in 2012 cannot be provided due to changes in case management systems that occurred at this time. It does however roughly correlate to the decline experienced nationally. A central government FTE target for Brent in the late noughties was approximately 400.

Although the dataset provided in Table 6 cannot be extended to include this period, more explanation is needed. Future narratives of first-time offending will afford equal attention to recent change. In this way, the narrative relating to the period contained in *The Impact of Youth Justice Service Delivery in Brent*, will include additional information as follows:

“The number of children entering the Youth Justice System has also been falling for more than a decade, at a national and local level.” In Brent, a historical low of 53 FTEs was recorded in the twelve-month period between April 2021 to March 2022. This increased to 87 in the period July 2022 to June 2023, before falling to 68 between January and December 2023. The number of FTEs plateaued at this time and most recently totalled 70 in the period April 2024 to March 2025. This is marginally higher, and comparable, than both our Family and the London rate of FTEs.

17 September 2025 – Children's Oral Health	For the Committee to be provided with the response made to the NHS Dentistry Contract consultation, and any follow-up responses made as a result of the findings of the consultation.	Service Reform and Strategy	<p>Brent Council worked in collaboration with NWL dental liaison group to respond to the survey questions that formed the NHS Dentistry Contract consultation, and we will request for a local summary of the responses to the questions.</p> <p>NHS Dentistry Contract consultation which closed in August 2025, and the findings are being considered. However, the DHSC expects that the proposals package may start to be implemented from April 2026. We will share any information from the implementation of the proposal with the committee when this happens.</p>
17 September 2025 – Period Dignity	To provide the list of schools that had confirmed they were providing free period products.	Service Reform and Strategy	<p>Between 2020-2024, the schools listed below have provided free products (this list does not necessarily mean the schools provided products every year). More comprehensive insights are available via the Department for Education: Period product scheme: management information - GOV.UK</p> <ul style="list-style-type: none"> • Newman Catholic College • Skills Training UK • JFS • Capital City Academy • Ark Academy • Ashley College • E-ACT Crest Academy • Claremont High School • Kingsbury High School • Saint Claudine's Catholic School for Girls • Wembley High Technology College • Queens Park Community School • Alperton Community School • Sudbury Primary School • Preston Manor School • Salusbury Primary School • Woodfield School • Gladstone Park Primary School • Ark Elvin Academy

- Michaela Community School
- St Andrew and St Francis CofE Primary School
- St Gregory's Catholic Science College
- Oakington Manor Primary School
- Furness Primary School
- Manor School
- Braintcroft E-ACT Primary Academy
- The Kilburn Park School Foundation
- Chalkhill Primary School
- Mitchell Brook Primary School
- Newfield Primary School
- The Stonebridge School
- Preston Park Primary School
- Northview Junior and Infant School
- Lyon Park Primary School
- Leopold Primary School
- Uxendon Manor Primary School
- Harlesden Primary School
- Brentfield Primary School
- Anson Primary School
- St Joseph's Roman Catholic Primary School
- Our Lady of Lourdes Catholic Primary School
- St Joseph's Catholic Junior School
- Fryent Primary School
- Oliver Goldsmith Primary School
- Wykeham Primary School
- Barham Primary School
- Kingsbury Green Primary School
- Islamia Primary School
- Sinai Jewish Primary School

			<ul style="list-style-type: none"> • St Mary's CofE Primary School • Princess Frederica CofE Primary School • John Keble CofE Primary School • Christ Church CofE Primary School • Roe Green Junior School • Mount Stewart Junior School • Wembley Primary School • Phoenix Arch School • Byron Court Primary School • St Mary's RC Primary School • St Robert Southwell Catholic Primary School • The Village School • Our Lady of Grace Catholic Junior School • St Margaret Clitherow RC Primary School
04 March 2026- Housing Management: TSM and Brent Housing Management Performance	That data be provided on the financial impact of void properties, including an assessment of rent arrears associated with void periods, income lost through missed rental collection, and any council tax liabilities arising during the vacancy of properties.	Resident and Housing Services	Accepted by the department at the meeting. An update on the financial impact of rent arrears associated with void properties will be included in the next report to the CWBSC on Brent Housing Management and to the Budget Scrutiny Task Group.
04 March 2026- Housing Management: TSM and Brent Housing Management Performance	That information be provided on key performance indicators, benchmarked against performance measures from other London boroughs	Resident and Housing Services	Benchmarking data comparing Brent's performance against other London Authorities and statistical neighbours will be provided as soon it is available.

<p>04 March 2026- Temporary Accommodation, Supported Exempt Accommodation and Homelessness Prevention</p>	<p>That further data be provided to the Committee and BYP setting out a more detailed breakdown of temporary accommodation figures by age group, as members of the Brent Youth Parliament noted that the current category encompassing all individuals aged 0 to 17 years was too broad and did not sufficiently distinguish between the differing needs and issues affecting children and young people within that wide age range.</p>	<p>Resident and Housing Services</p>	<p>Accepted by the department at the meeting. A further, more detailed data set regarding 0-17 year olds will provided to the CWBSC and BYP once the data has been analysed.</p>
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