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Brent

MINUTES OF THE COMMUNITY AND WELLBEING SCRUTINY COMMITTEE Tuesday 22 November 2022 at 6.00 pm Held as a hybrid meeting

PRESENT: Councillor Ketan Sheth (Chair), Councillor Collymore (Vice-Chair), and Councillors Afzal, Akram (substituting for Councillor Moeen), Begum, Ethapemi, Fraser, Kansagra (substituting for Councillor Mistry), Matin, and Smith

In attendance: Councillor Gwen Grahl, Councillor Neil Nerva

1. **Apologies for absence and clarification of alternate members**

Apologies were received from:

- Councillor Mistry, substituted by Councillor Kansagra
- Councillor Moeen, substituted by Councillor Akram
- Co-opted member Mr Simon Goulden
- Co-opted member Mr Alloysius Frederick

2. **Declarations of interests**

Personal interests were declared as follows:

- Councillor Sheth – Lead Governor of Central and NWL NHS Foundation Trust and governor of a number of education settings detailed in the [register of interest form](#)
- Councillor Matin – employed by NHS
- Councillor Collymore – member of palliative care and end of life steering groups
- Councillor Ethapemi – spouse employed by NHS
- Councillor Smith – employed by NHS

3. **Deputations (if any)**

There were no deputations received.

4. **Minutes of the previous meeting**

The minutes of the meeting on 22 September 2022 were approved as an accurate record of the meeting..

5. **Matters arising (if any)**

There were no matters arising.

6. **Brent Safeguarding Adults Board Annual Report 2021-22**

Fran Pearson (Independent Chair, Safeguarding Adults Board) introduced the report, which presented the Brent Safeguarding Adults Board (SAB) annual report covering the period from April 2021 to March 2022. She highlighted that she started in the role of Independent

Chair on 1 April 2022, following the departure of Michael Preston-Shoot, and therefore would be presenting a report for a year for which she was not present. She expressed thanks for the years of service the previous Chair had provided to Brent.

In introducing the report, Fran Pearson drew the Committee's attention to the similarities between the Adult's and Children's safeguarding arrangements, which involved the role, commitment and accountability of the three statutory partners to the Board – Sue Sheldon on behalf of the Integrated Care Board (ICB), Barry Loader on behalf of the Metropolitan Police, and Claudia Brown (Director Adult Social Care, Brent Council) and Phil Porter (Corporate Director Adult Social Care and Health, Brent Council) on behalf of the local authority. The principle of those three statutory partners being central and equal to each other remained the same for both the children's and adult's arrangements. She concluded by noting that insights and thoughts from previous Scrutiny Committee's had helped inform, shape and make richer the Board's annual report.

Barry Loader (Acting Borough Commander, NWL BCU – Metropolitan Police) agreed with Fran's initial oversight of the cohesiveness of the partnership, and felt the partnership was lucky to have benefited from longstanding membership of each of the statutory partners which was rare amongst safeguarding partnerships. This allowed the partners to have challenging conversations with each other and move forward strategy plans to improve outcomes for victims and vulnerable members of the community. He added that safeguarding adults covered a large age range from 18 until death, and the partnership now saw more cases of younger vulnerable adults. This was attributed to the impact of the cost of living and people living longer. He expressed a commitment to continue identify vulnerable individuals going forward, while highlighting the high demand on the service.

Sue Sheldon (Assistant Director for Safeguarding Adults and Children, NHS NWL) echoed the previous remarks in relation to partnership working. She advised that, following the transition from the Clinical Commissioning Group (CCG) into the Integrated Care Board (ICB), there had been a concern that safeguarding would be lost, but assured the Committee that the ICB were still very committed to safeguarding both adults and children.

In concluding the introduction, Councillor Nerva (Cabinet Member for Public Health and Adult Social Care) highlighted that the report was extensive in detailing the work that the SAB had achieved over the year, and there was now a need to look at the future, ensuring adult safeguarding was not lost amongst NHS re-organisations, which he would be maintaining focus on going forward.

The Chair thanked councillors and officers for their introduction and invited the Committee to raise comments and questions, with the following issues raised:

The Committee asked Fran Pearson, upon reflecting on her first 100 days in post, what issue was most prominent that she would want to build on going forward. Fran Pearson advised that she would like to focus on the future, and ensure that the Board was agile and reflected context. The SAB had discussed cuckooing as an emerging issue, and were in the process of shaping the priorities for the upcoming year. One priority was self-neglect, including reflecting on the need to be agile, such as considering whether the character of self-neglect had changed, and there was a 2-3 year work programme being put together in relation to that priority. A second priority would be around substance misuse and housing insecurity which would be scoped in the December SAB meeting. She highlighted the importance of not duplicating work already going on, as there were a number of working parties, groups and multi-agency pieces of work being done and the SAB needed to remain high level and strategic.

The Committee asked what had been particularly surprising to Fran Pearson as she started working with the partnership, to which she responded stability. In SABs in other localities,

she had experienced 50% of SAB memberships changing over the course of a year, compared to Brent where there had been longstanding membership, a strong level of consistency, and high levels of trust amongst the partners. Going forward, she would like to further understand the population in a fuller context, including hard to reach communities and issues being faced by Brent's. For example, when looking at self-neglect and hoarding, environmental health colleagues had described them as being owner occupiers, which helped to further understand their lifestyle. In order to do that, triangulation of data from partners was needed and she would look to bring that in where possible.

Responding to the challenges that the SAB foresaw, Fran Pearson highlighted the cost-of-living crisis, which was a live situation impacting on self-neglect and different types of financial exploitation. Fran was keen to carve out time for the SAB to reflect on issues in depth and hear different perspectives on the issues. As Chair, she had introduced executive meetings with the statutory partners, giving them the opportunity to do that reflection and consider possible actions going forward.

Noting the increase in incidents of cuckooing, the Committee queried whether the 25 cases in 2022 also included the 13 cases from 2021. Carolyn Downs (Chief Executive, Brent Council) advised that she would be concerned if the 13 cases from 2021 had not been resolved. She was pleased that the SAB were taking a focus on cuckooing, as it was an extremely complex issue and it was important to take a multi-agency approach in these cases. Often, the cases related to an acute mental health issue and therefore had cross cutting implications for mental health teams, housing, police, and community safety. She hoped that, moving forward, the partnership would approach cases of cuckooing collaboratively. The Committee asked for a case study on cuckooing showing the cross-partnership approach.

In relation to the percentage figures for domestic abuse, self-harm, sexual abuse, exploitation, Female Genital Mutilation, forced marriage and modern slavery, the Committee highlighted they were very low, and asked why that was. Phil Porter (Corporate Director Adult Social Care and Health, Brent Council) advised members that the figures included in the report were in relation to only those adults who had a care and support need as defined by the Care Act, and not the general adult population. There would be higher percentages of those incidences in the adult population that would not be captured in the figures presented to the Committee. Fran Pearson added that it was a particular challenge trying to elicit from those with complex needs what was happening to them and building that relationship with individuals in order to receive that information. The report detailed the need for further communications about referrals in order to reach all sections of Brent's communities, as anyone could refer someone, including the person themselves, and there were underrepresented communities in the figures. Officers were working with the Brent Health Matters team through their close community connections to get that message out, and councillors could also help with that message.

In response to further queries around some of the data in the report, including the pie chart, Fran Pearson advised that they could think about the narrative alongside the data for future iterations of the annual report. The difficulty was that the annual report was only a snapshot of information, with one year of data, therefore she felt it would be useful to look back at trends over a longer period of time to understand if things were going in the right direction. In comparison to other boroughs, she did not think Brent were outliers in terms of 'self-neglect, psychological and emotional abuse' being the largest categories of abuse. Alongside a more detailed narrative, it was agreed that future reports should have firmer details about equalities data, as well as a narrative of what 'other' as a category of abuse meant. In addition, members asked for the details of referrers, such as by agency.

Continuing to consider the data, the Committee queried whether it was possible that there was underreporting due to current service demands and the cost-of-living crisis. They were advised that the report reflected the previous year's data, so any impact from current service demand and cost-of-living would be reflected in next year's report. Barry Loader felt that, in the current context, there were challenges for all public sector services, and reminded the Committee that this data did not include the volume of referrals from outside of Adult Social Care, which was significant. The Police did a lot of training around identification of vulnerability and had a framework for reporting. Phil Porter advised that they had not seen any decline in agencies referring, so there was not evidence to suggest that services were too overwhelmed to refer. In relation to the referral rate and subsequent conversion rate into an enquiry, Brent were not outliers in the numbers, so there was some reassurance in the levels of referrals and concerns.

In relation to the increase of safeguarding concern numbers coming from extra care, the Committee were advised this was because Adult Social Care had increased the volume of individuals in extra care, meaning there would be an increase in safeguarding referrals and as a result an increase in the number of referrals leading to an enquiry.

Members asked how far the zero tolerance to behaviour policy had impacted self-referring. They were concerned that if someone wanted to refer themselves but were not able or willing to articulate their circumstances, or did not approach it with the right attitude, their issues might not be picked up. Phil Porter highlighted the need to push the message that it was safe to refer in, and any referral would be treated anonymously and confidentially.

The Committee asked whether specialists were involved in strategy meetings where agencies decided whether a referral should become an enquiry. Claudia Brown informed the Committee that the strategy meeting included reviewing whether the client was known to any other services, and there would then be a discussion about the best place to move that case forward.

The Committee queried whether the number of bed ulcers being referred as a safeguarding issue was unusual, and Claudia Brown (Director Adult Social Care, Brent Council) advised that this was not unusual. Sue Sheldon added that pressure ulcers were monitored very closely in both a hospital and community setting, and there was work being done across North West London currently looking at pressure ulcers. The increased number of referrals meant that professionals were raising the issue, but they were being screened and did not meet the safeguarding criteria for an enquiry.

In concluding the discussion, the Committee asked how each statutory partner felt the relationship was working. Claudia Brown reflected that there was a general understanding of safeguarding across the partnership, and ongoing improvement in relation to the partnership. Barry Loader felt that all partner agencies needed to be constantly horizon scanning to be aware of emerging issues and the ways vulnerable people could be exploited. Sue Sheldon agreed, highlighting that the ability to discuss and challenge understanding was important for the partnership.

The Chair thanked those present for their contributions and drew the item to a close. He invited the Committee to make recommendations, with the following RESOLVED:

To recommend the following key areas for improvement:

- i) That a narrative is further developed to compliment safeguarding data within future Safeguarding Adults Board annual reports, including additional equalities data and referrer data.
- ii) That there continues to be extensive training on adult safeguarding issues amongst partner organisations to improve standards.

- iii) That there be an outline of what successful partnership working might look like, and details on how partners work to improve safeguarding processes in individual agencies in future annual reports.
- iv) That information is shared on areas of improvement for the Brent Safeguarding Adults Board, including the action plan to address those areas.

7. **Brent's Multi-Agency Safeguarding Arrangements for Children**

Carolyn Downs (Chief Executive, Brent Council) introduced the report, which focused on the multi-agency safeguarding arrangements for children in Brent and partner activity over the past year. She explained that, following a review by Sir Alan Wood, all local authority areas were now required to have statutory partners responsible for safeguarding children. In Brent, an Executive Group brought together those statutory partners – Barry Loader as the NWL BCU Borough Commander for the Metropolitan Police, Jennifer Roye as the Chief Nurse for North West London Integrated Care System (ICS), and Carolyn Downs as the Chief Executive of the Local Authority. In attendance at those Exec meetings was also Nigel Chapman as the Director for Children's Services, Councillor Gwen Grahl as the Cabinet Member for Children, Young People and Schools, Mike Howard as the Independent Convener for the Safeguarding Children Forum, Councillor Muhammed Butt as the Leader of the Council, and Wendy Marchese as the Partnership Lead for Safeguarding Children. She advised the Committee that the Executive Group was well supported by Mike Howard and Wendy Marchese and had been in place for some time. The report showed that the group had focused on a large number of rapid reviews throughout the year which had put a large amount of resource pressure on colleagues, but that colleagues had responded well to the challenge.

Mike Howard (Independent Convener, Brent Safeguarding Children Forum) added to the introduction, explaining that the annual report presented to the Committee aimed to illustrate the breadth and complexities of the work the safeguarding partners and forum members undertake. Section 3 of the report was a new section added to show the areas of focus for the Executive Group, Safeguarding Children Forum, and the Case Review Group over the year. He highlighted that there had been a number of extraordinary Forum meetings in the reporting year, focussed on the high profile child deaths of Arthur Labinjo-Hughes and Star Hobson, in order for Forum members to assure themselves of their own safeguarding practices in response to cases of neglect. This had included reviewing the National Panel review of the cases and the Joint Targeted Area Inspection (JTAI) in Solihull. He explained the need for the Forum to be flexible and aware that a safeguarding issue could arise on a national scale that may need to be responded to. In relation to the executive partnership, Mike Howard felt fortunate that, in Brent, there was very stable membership of the partnership, with each partner understanding each other's roles and approaching cases with the right attitude and without defensiveness or judgement. He felt confident that policies and procedures had been put in place following rapid reviews to ensure partners learned lessons, and reassured that the partners worked hard to reduce the likelihood of child death or injury in Brent.

The Chair thanked officers for the introduction and invited comments and questions from those present, with the following issues raised:

The Committee highlighted the recent media coverage of a child in Rochdale who had died as a result of damp and mould, and queried where a case like that would fall within safeguarding criteria as Brent understood it, and what the response across partners would be if this were to happen in Brent. Nigel Chapman (Corporate Director Children and Young People, Brent Council) advised the Committee that if this case was reported to the Brent

Family Front Door (BFFD), it would rely on either a Housing Officer or Health Visitor in the community recognising it as a safeguarding issue first. He would expect that if this was referred to early help, there would be an early help assessment conducted with any serious issues within the housing environment escalated to the relevant housing provider by the early help officer. At the present time, the details of the Rochdale case were not known. Mike Howard added, that because there were questions over what happened in Rochdale, Brent would want to assure themselves that their response would be what the partners would expect should anything similar happen. Due to the age of the child, health visitors may have been involved and so he would expect questions to be directed to the health visitor service around how they were ensuring a safe environment. Sue Sheldon (Assistant Director for Safeguarding Adults and Children, NHS NWL) added that health professionals did enter people's homes and wrote housing letters where necessary.

In response to the Rochdale death, the Regulator for Social Housing had written to all registered social housing landlords in order to seek assurances about damp and mould and whether appropriate action was being taken. Carolyn Downs had asked colleagues in housing to bring a report to informal Cabinet and Scrutiny on the issue of damp and mould and how housing dealt with those issues, in order to get a full and in-depth look at the issue. She had questioned why the case in Rochdale had not been treated as a safeguarding issue and the child taken out of the home, but there was not a full response from Rochdale yet on the further details.

The Committee asked whether, as a consequence of the Rochdale case, there was a need for any additional partners. They were advised that the government had stipulated who the three statutory partners should be via the Care Act which was enshrined in law, but were assured that colleagues with particular knowledge and expertise would be involved in rapid reviews in Brent, such as people from the voluntary sector, British Transport Police, Home Office workers, and specialist health providers. Mike Howard highlighted that this was a particular strength of the process as it helped to go in depth in the case with people who were specialist. Since the case in Rochdale occurred, Mike Howard had spoken with Carolyn Downs about having housing colleagues at the Forum, which would be looked at going forward to ensure the right housing colleagues were attending those meetings.

In relation to staff support, the Committee asked how partners ensured the mental health and wellbeing of staff was looked after. Carolyn Downs advised the Committee that appropriate welfare support was in place. For example, there were mental health champions within each directorate in the Council workforce and an Employee Assistance Programme. She acknowledged that housing officers were dealing with cuckooing cases and finding it stressful and resource intensive, so she highlighted the importance of managers being aware and alert to the fact colleagues could be finding those cases very difficult on a personal level. In response, the Committee asked whether services were being stretched too far for staff to be able to perform their duties fully. Carolyn Downs highlighted that if there was a children's safeguarding issue, every member of staff knew there was a need to refer and escalate that issue and it would be dealt with, including money spent, to resolve. If there was a need to overspend this would be done through reserves to ensure a child was no longer at risk.

The Committee asked how the outcomes of rapid reviews informed future practice to ensure any incident did not happen again. Nigel Chapman advised that, from a local authority perspective, the learning from rapid reviews was fed into children and young people services, with a quality assurance programme of learning and training. The annual report then demonstrated that learning and how it had been put into practice. For example, as a result of learning from rapid reviews, it was now common practice that, wherever possible, health or education colleagues attended strategy meetings which were convened for urgent cases. This helped give a much stronger picture of each case.

Regarding how partners held each other to account, Mike Howard confirmed this was done on a regular basis. For example, during a recent rapid review, the police had expressed concerns about the way a particular case had been dealt with, which was escalated and satisfactorily resolved in a mature way where officers accepted where things could have been done differently. As a result, he felt this was one of the best rapid reviews Brent had conducted. He highlighted the close working of partners, and drew the Committee's attention to page 20 of the report which detailed the learning of partners from multi-agency case reviews, rapid reviews and audits.

The Committee queried how the performance of partners working together was measured. Nigel Chapman explained that each partner agency had its own regulatory and inspection frameworks for performance measuring, and needed to meet certain criteria as part of those inspection processes. In relation to measuring the partnership as a whole, he explained that there were actions attached to the outcomes of rapid reviews, which each partner agency signed up to, and the progress of those actions was measured at the Case Review Group. The partnership was only able to measure activity and output, but hoped that by working together they could reduce the likelihood and risk of Brent children being adversely affected. An example that showed the partnership worked was a recent rapid review where a child had been harmed by mother and stepfather. The case went to prosecution and the child taken into care, however, mother was pregnant with another child, therefore the partnership wrote to the Crown Prosecution Service to outline concerns that they were not taking enough action against the parents of a future child. Police colleagues had helped to apply pressure to the court and eventually those parents were remanded and put in jail, and the new child was taken into care when born. It was felt this demonstrated the difference working as partners could make.

The Committee asked what strategies were in place to avoid children falling through the net, for example as a result of cultural beliefs, religion or home life. It was highlighted that some people may not report domestic abuse to the police which could impact a child living in the same environment. In response, Nigel Chapman highlighted that safeguarding was everyone's responsibility, and it was important that everyone who worked for children and young people in every single agency should have training to ensure they recognised the signs of abuse and neglect and referral mechanisms for that. He was confident that Brent was recognising abuse and neglect due to the large number of cases referred to the Brent Family Front Door (BFFD) in the past year.

Regarding responsibility for a child when they moved between boroughs, Nigel Chapman advised that there were London Child Protection Procedures covering all London Boroughs. If a child was known to services and receiving services in one borough and the parents moved to another borough, there were clear processes in place to make sure that case transferred to the new authority.

In relation to how the voice of children and young people shaped the direction of priorities and improvements within the partnership, the Committee's attention was drawn to the notes underneath rapid review 1 in the report, which showed there was good evidence the child's views were documented, heard and responded to within interventions. The partnership was keen to ensure the child was heard, and Mike Howard also highlighted the phenomenon of 'invisible fathers'. Brent tried to ensure that wherever possible the father was considered in cases, and some of the rapid reviews recently conducted looked at the father's involvement in the process and how that could be increased.

The Committee queried how the partnership heard the voice of faith communities, highlighting that one delegate from a faith setting had attended multi-agency training. Mike Howard advised that one of the lay members of the forum, who attended as a local resident, was a member of a faith community with strong connections with a local church.

He was confident that with the breadth of representation on the Forum there was engagement as far as possible with various communities, and acknowledged there was always room for improvement.

The Chair thanked those present for their contributions and brought the discussion to an end. The Committee RESOLVED:

- i) To recommend that more information on the partnerships key achievements is included within future Brent Safeguarding Children Partnership Annual Reports.
- ii) To recommend that more information and details on how learnings from rapid reviews are incorporated into future working of the partnership.

8. Transitional Safeguarding Scrutiny Task Group 6 Month Update

Councillor Gwen Grahl (Cabinet Member for Children, Young People and Schools) introduced the report, which provided an update on the work across the council and with partner agencies on transitional safeguarding.

The Chair thanked Councillor Grahl for the introduction, and invited comments and questions from the Committee, with the following issues raised:

In response to a query, the Committee were advised that any child in care was classed as a child in care up to the age of 18, after which the council had leaving care responsibilities to care leavers up to the age of 25. The Corporate Parenting Committee oversaw those arrangements.

The Committee highlighted section 4.20 of the report, which detailed an overlap between the Exploitation, Violence and Vulnerability Panel (EVVP) and Community MARAC, and asked whether there were any proposals to stop that overlap. Kibibi Octave (Head of Community Safety and Prevent, Brent Council) advised that both panels currently sat within different directorates and had different focuses. With Community MARAC, there was a very heavy anti-social behaviour element, looking at cases where the person was a risk to both themselves and potentially others. These cases were not bound by age limits, with many cases involving those able to have their own tenancy, shared accommodation or who were owner occupiers. In comparison, the EVVP had a different focus on the younger cohort, looking at criminal and sexual exploitation. When looking at the 18+ year old cohort, officers often dealt with integrated offender management cohorts which included those who were persistent perpetrators as well as people who may be transitioning. Those people may not have a criminal record but were vulnerable and had the potential to be pulled into violent crime and exploitation. For those reasons, she felt the differences between the panels were quite nuanced and that they needed to remain separate.

The Committee asked what officers perceived to be the biggest barrier in transitional safeguarding and in the transition to adult life. Phil Porter (Corporate Director Adult Social Care and Health, Brent Council) felt the biggest barrier was a lack of definition of the cohort involved. Some work had started to address that, with Nigel Chapman and Sonya Kalyniak (Head of Safeguarding and Quality Assurance, Brent Council) analysing the people coming through to understand the risks prior to 18, which would help ensure the support offered met those needs. Sonya Kalyniak added that, from a children's perspective, the more that could be done to support young people as they prepared for turning 18, the more knowledge they would have about the resources they could access post-18.

The Committee highlighted that children leaving care were seen as a vulnerable cohort and asked how they were assisted into adult life. Councillor Grahl explained that the Council

had more statutory obligations that the Council had towards care leavers than some other vulnerable young people. There was a good package of support for care leavers including housing support, employment support and a personal advisers co-designed with children and young people through the Corporate Parenting Committee and Care in Action / Care Leavers in Action. The Committee's attention was brought to the fact that there were many other young people accessing council services, for example those with a Disability or Education Health and Care Plan (EHCP), who had not been in care and did not have the same amount of statutory support from the Council. The report attempted to highlight that large umbrella of different organisations who would try to follow those young people to ensure they had the right support.

The Committee queried whether the voice of young people was extended to those who had transitioned into adulthood already, as the problems young people faced now while transitioning to adulthood may be different from 20 years ago. Phil Porter advised the Committee that the Young Brent Foundation had been commissioned to work with the Council on this aspect of transitional safeguarding, who were proposing to go quite broad with engagement to get the broadest sense of that cohort and look at health and wellbeing, safety and security, education, employment and training, and youth participation and citizenship.

Councillor Nerva (Cabinet Member for Public Health and Adult Social Care) added that he would want confidence that the organisations working with people on transitional safeguarding knew who was in the system and who might be of concern, particularly those who may fall through the gaps.

In concluding, the Chair asked officers how the recommendations from the Task Group report were progressing. Phil Porter advised the Committee that the Council agreed with all recommendations and were progressing all of them, with some more progressed than others. The recommendations would form the core part of the plan going forward, with actions against each recommendation.

Having considered the report, the Committee RESOLVED:

- i) To recommend that the Black Community Action Plan (BCAP) Team are consulted about the transitional safeguarding approach to ensure that the voices of young Black people are reflected in the Council's approach.

9. **Any other urgent business**

None.

The meeting closed at 8:13 pm
COUNCILLOR KETAN SHETH, Chair

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