

Agenda

Health and Wellbeing Board

Date: **Monday 26 June 2023**

Time: **2.00 pm**

Place: **Conference Suite, Herefordshire Council Offices,
Plough Lane, Hereford, HR4 0LE**

Notes: Please note the time, date and venue of the meeting.

For any further information please contact:

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Agenda for the Meeting of the Health and Wellbeing Board

Membership

Chairperson	Councillor Carole Gandy	Cabinet Member Adults, Health and Wellbeing, Herefordshire Council
Vice-Chairperson	Jane Ives	Managing Director, Wye Valley NHS Trust
	Ross Cook	Corporate Director Economy and Environment, Herefordshire Council
	Anna Davidson	Assistant Director (Prevention), Hereford & Worcester Fire and Rescue Service
	Darryl Freeman	Corporate Director for Children and Families, Herefordshire Council
	Hayley Allison / Julie Grant	Assistant Director of Strategic Transformation / Head of Delivery and Improvement at NHS Improvement, NHS England
	Hilary Hall	Corporate Director Community Wellbeing, Herefordshire Council
	Dr Mike Hearne	Managing Director, Taurus Healthcare
	Councillor Jonathan Lester	Leader of the Council, Herefordshire Council
	David Mehaffey	NHS Herefordshire and Worcestershire Integrated Care Board
	Matt Pearce	Director of Public Health, Herefordshire Council
	Councillor Ivan Powell	Cabinet Member Children and Young People, Herefordshire Council
	Christine Price	Chief Officer, Healthwatch Herefordshire
	Simon Trickett	Chief Executive/STP ICS Lead, NHS Herefordshire and Worcestershire CCG
	Superintendent Helen Wain	West Mercia Police
	Mark Yates	Chair of Herefordshire and Worcestershire Health and Care NHS Trust

Agenda

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THE PUBLICS RIGHTS TO INFORMATION AND ATTENDANCE AT MEETING		
1.	APOLOGIES FOR ABSENCE To receive apologies for absence.	
2.	NAMED SUBSTITUTES (IF ANY) To receive details of any member nominated to attend the meeting in place of a member of the board.	
3.	DECLARATIONS OF INTEREST To receive any declarations of interests of interest in respect of schedule 1, schedule 2 or other interests from members of the board in respect of items on the agenda.	
4.	MINUTES To approve and sign the minutes of the meeting held on 27 April 2023.	9 - 16
5.	QUESTIONS FROM MEMBERS OF THE PUBLIC To receive any written questions from members of the public. For details of how to ask a question at a public meeting, please see: www.herefordshire.gov.uk/getinvolved The deadline for the receipt of a question from a member of the public is 21 st June at 9.30 am. To submit a question, please email councillorservices@herefordshire.gov.uk	
6.	QUESTIONS FROM COUNCILLORS To receive any written questions from councillors. The deadline for the receipt of a question from a councillor is 21 st June at 9.30 am, unless the question relates to an urgent matter. To submit a question, please email councillorservices@herefordshire.gov.uk	
7.	BETTER CARE FUND (BCF) YEAR END REPORT 2022-2023 To review the better care fund (BCF) year-end 2022-2023 report, as per the requirements of the programme.	17 - 38
8.	CHILDREN'S SERVICES IMPROVEMENT PLAN To provide an update on progress against the children's services improvement plan.	39 - 138
9.	ONE HEREFORDSHIRE PARTNERSHIP UPDATE To provide members of the Health and Wellbeing Board (HWB) an update to the One Herefordshire Partnership.	139 - 160
10.	JOINT LOCAL HEALTH AND WELLBEING STRATEGY To update the Health and Wellbeing Board on the implementation of the new	161 - 166

Joint Health and Wellbeing Strategy

11. WORK PROGRAMME

To consider the work programme for the committee.

12. AOB

Any other business.

13. DATE OF NEXT MEETING

The next scheduled meeting is 25th September 2023, 14:00-17:00.

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The chairperson or an attendee at the meeting must take the signing in sheet so it can be checked when everyone is at the fire assembly point.

**The Seven Principles of Public Life
(Nolan Principles)**

1. Selflessness

Holders of public office should act solely in terms of the public interest.

2. Integrity

Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships.

3. Objectivity

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.

4. Accountability

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.

5. Openness

Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.

6. Honesty

Holders of public office should be truthful.

7. Leadership

Holders of public office should exhibit these principles in their own behaviour and treat others with respect. They should actively promote and robustly support the principles and challenge poor behaviour wherever it occurs.

Minutes of the meeting of Health and wellbeing board held in Herefordshire Council Offices, Plough Lane, Hereford, HR4 0LE on Thursday 27 April 2023 at 2.00 pm

Board members present in person, voting:

Councillor David Hitchiner	Leader of the Council, Herefordshire Council
David Mehaffey	Executive Director of Strategy and Integration, NHS Herefordshire and Worcestershire Integrated Care Board
Matt Pearce	Director of Public Health, Herefordshire Council
Christine Price	Chief Officer, Healthwatch Herefordshire
Councillor Diana Toynbee	Cabinet Member - Children and Families, Herefordshire Council

Board members in attendance remotely, non-voting:

Ross Cook	Corporate Director Economy and Environment
Darryl Freeman	Corporate Director for Children and Families
Superintendent Helen Wain	Superintendent for Herefordshire, West Mercia Police

Note: Board members in attendance remotely, e.g. through video conference facilities, may not vote on any decisions taken.

Others present in person:

Stephen Brewster		VCS
John Coleman	Democratic Services Manager	
Mary Knowler	Public Health Programme Manager	
Gillian Pearson	PCN Development Manager	Taurus Healthcare
Alfred Rees-Glinos	Democratic Services Support Officer	Herefordshire Council

Others in attendance remotely:

Simon Cann	Democratic Services Officer	Herefordshire Council
Alan Dawson	Chief Strategy and Planning Officer	Wye Valley NHS Trust
Samantha Evans	Acting Head of Law and Business Partner – Community Wellbeing	
Dr Frances Howie	Public Health Consultant	Herefordshire Council

1. INTRODUCTION

In the absence of the chair and vice-chair, the constitution makes provision that a chairperson can be created for just this meeting. It was therefore proposed and seconded that Councillor David Hitchiner chair the meeting.

The chair welcomed board members and attendees to the meeting.

2. APOLOGIES FOR ABSENCE

Apologies were received from: Mandy Appleby, Councillor Pauline Crockett, Hilary Hall, Susan Harris, Mike Hearne, Jane Ives, Amy Pitt, and Simon Trickett.

3. NAMED SUBSTITUTES (IF ANY)

Gillian Pearson acted as a substitute for Mike Hearne from Taurus Healthcare.

4. DECLARATIONS OF INTEREST

There were no declarations of interest.

5. MINUTES

The board approved the minutes of the meeting of the 13th March 2023.

6. QUESTIONS FROM MEMBERS OF THE PUBLIC

No questions received.

7. QUESTIONS FROM COUNCILLORS

No questions received.

8. DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

Matt Pearce (Director of Public Health) provided an overview of the DPH Annual Report for 2022. The focus of the report was on healthy and sustainable food and to highlight the key challenges facing the county with recommendations for actions that may want to be considered as part of the report. The principal points included:

1. As part of the report, the Director of Public Health wants to celebrate the great things that are going on in Herefordshire in promoting healthy and sustainable food.
 - a. For example, the Herefordshire Food Alliance (HFA) is a key partnership of stakeholders from the public, private and voluntary sectors to look at how this agenda can be driven forwards.
2. Food and diet are associated with developing chronic diseases with cancer and diseases of the circulatory system (such as heart disease and stroke) the leading causes of premature deaths in Herefordshire.
3. Herefordshire has a higher prevalence of child and adult obesity compared to the national average.
4. In addition, the environmental impact is significant and having a healthy environment is beneficial to people's health and lifestyles.
5. A shift to plant-based diets, sustainable, seasonal and locally sourced foods and a reduction of food waste can greatly reduce carbon emissions from this sector.
 - a. Farming is an essential part of rural life and of Herefordshire communities' prosperity, with 77% of Herefordshire land farmed.
6. In Herefordshire, more than a third of black bin rubbish is food waste and its packaging. From 2022, local analysis found that 70% of food thrown away in Herefordshire was considered avoidable.
7. Food insecurity is another key challenge to healthy and sustainable food with multiple factors affecting national food security and the resilience of food supply chains.
 - a. Price and affordability are major determinants of the food that people choose to purchase, particularly for people on low incomes.

8. In Herefordshire, there has been a 100% increase in the use of food banks over the last 12 months, reflecting the impact that the cost of food has had on residents.
9. The Director of Public Health noted the opportunities that exist to promote healthy and sustainable food across the course of one's life.
10. In some of the studies, it has been found that more work needs to be done to support the eating habits of young children.
11. There is good work ongoing with Herefordshire Council participating in the national School Food Standards pilot with work being done in order to raise the quality of food being delivered in schools across the county.
12. The Healthy Start programme provides food for women who are pregnant and children up to the age of four, who are eligible. In Herefordshire, only 61% of eligible families claim the Healthy Start food vouchers, meaning that annually £154,000 of funds are going unclaimed.
13. The proportion of adults in Herefordshire meeting the recommended 5-a-day is higher (62.7%) than rates in West Midlands (52.6%) and England (55.4%). However, 40% of our populations is still not meeting current guidelines.
14. Herefordshire has high employment rates in the food sector, which may well contribute to the high number of households in fuel/food poverty due to low wages.
15. The food manufacturing and processing sector's high employment concentration in Hereford is almost four times as concentrated as the national average and accounted for 43% of all employment for this sector in the Marches area (consisting of Herefordshire, Shropshire and Telford and Wrekin).
16. Herefordshire's Big Economic Plan includes reference to supporting sustainable food, with the 2050 plan including the ambition to transform land management and farming practices to support sustainable food production.
17. There are a number of case studies which highlight the good work ongoing across the county, including Soil From the City and; Ross Community Garden.
18. As part of the report, the Director of Public Health presented some of the recommendations he felt the board may wish to consider. The recommendations include:
 - a. Work in partnership
 - b. Deliver good food education
 - c. Support healthy food for all
 - d. Enable local food procurement
 - e. Consider the effect food has on the environment
 - f. Access healthy food where we grow, live and work
 - g. Play your part

The Chair thanked the Director of Public Health and asked members for questions and comments on the report.

Councillor Diana Toynbee thanked the Director of Public Health and praised the focus on healthy and sustainable food, as set out in the report. Councillor Toynbee noted her particular interest in how Herefordshire could be a leader in food standards within schools, however, did raise concern about the need for more to be done in secondary schools, and the need to promote food voucher uptake among families.

David Mehaffey (Executive Director of Strategy and Integration) referenced Section 2.1 of the report that highlights that £6.5 billion is spent annually by the NHS on obesity-related diseases and that 31% of Herefordshire's adult population which is obese, compared to the national average of 25%. David Mehaffey asked the Director of Public Health, therefore, if it was known what is being spent locally relative to the national expenditure in tackling obesity-related diseases.

The Director of Public Health accepted that this would be useful to quantify as a way of helping prevent obesity but suggested that it may be difficult to achieve and that the last time estimates were based upon local authority obesity were produced over ten years ago.

The recommendation was proposed, seconded, and approved unanimously.

Resolved:

- a) That the Board note the content of the report, and for board members to share with respective organisations and networks to consider the recommendations contained within.**

9. THE HEALTH AND WELLBEING STRATEGY

The Director of Public Health provided an overview of the strategy and highlighted some of the key retentions and changes from the draft. The principal points included:

1. There has been a strengthening of the type of community that is envisioned for Herefordshire to be in ten years and elaborated on the four ambitions to do this.
2. The strategy maintains the same principles that the board previously agreed on prevention and health inequalities.
3. The strategy strikes the right balance between the two core priorities – ‘best start in life’ and ‘good mental wellbeing throughout life’ – and supporting priorities including wider determinants such as housing, economy, and the environment.
4. A framework for delivery has been added towards the end of the strategy which sets out a systematic process that can be utilised to work in collaboration with communities to design the intervention.
5. A set of indicators have been added which are aligned with the integrated care strategy in order to monitor change from some of the outcomes and priorities identified in the Health and Wellbeing strategy.

The Director of Public Health also noted that as part of next steps for the strategy is the development of action plans which will be delegated to different partnership groups. One recommendation is that One Herefordshire owns the coordination oversight of the two core priorities. Additionally, ‘best start in life’ can be delivered through the Children and Young People Partnership and ‘good mental wellbeing throughout life’ can be supported by several groups including the Mental Health Collaborative and Adult Mental Health group. The intention therefore is to delegate those partnerships to develop those action plans and bring them back to the board in three-to-four months’ time.

Mary Knowler (Public Health Programme Manager) acknowledged the incorporation of all the issues that the strategy covers and noted the future launching of the strategy at a formal event.

David Mehaffey praised the alignment of the strategy with the integrated care strategy. On the ‘best start to life’ it was asked whether there should be a broader time period as opposed to the five year period as stated in the strategy.

The Director of Public Health argued that the current five-year period should be retained because intervention within the first five years helps produce better longer-term outcomes.

Alan Dawson (Chief Strategy and Planning Officer) expressed his support for the strategy and noted that through the One Herefordshire partnership, a number of stakeholder organisations have come together to help co-design this work, both looking

at the proposals around priorities and the outcome framework. The Wye Valley Trust have committed to include these priorities within the work plan of the One Herefordshire partnership which will form a key part of the Trust's work over the next year.

The Chair noted the challenges surrounding dental hygiene and how the strategy confronts this issue.

The Director of Public Health acknowledged the issue of dental hygiene as a priority that falls under the strategy's 'best start in life' priority in terms of up-stream prevention. Access to services is a supporting priority in the strategy, especially as this came up as a matter of importance to people in the consultation phase of the strategy.

David Mehaffey pointed out that responsibility for commissioning dental services was transferred to the ICB from NHS England from the 1st April. This means that the ICB now have more local control of dental services. A key priority of the ICB is to ensure that a fair share of allocation that was spent regionally before responsibility was transferred.

Stephen Brewster (Voluntary Community Sector) asked about the development of the action plans and the need to consider what the role of the voluntary sector in the delivery of those plans.

The Director of Public Health agreed that the voluntary sector need to be an equal partner and acknowledged that work needs to be done on how individual partnerships, tasked with delivering the strategy's priorities, work with the voluntary community sector.

The recommendations were proposed, seconded, and approved unanimously.

Resolved:

- a) That the Health and Wellbeing Board endorse the Herefordshire Joint Local Health and Wellbeing Strategy 2023 – 2033.**
- b) That the development of an action plan is delegated to the One Herefordshire Partnership and associated partnership groups to oversee, with a view to bringing the action plan back for agreement.**
- c) The Board to note the alignment with the Integrated Care System (ICS) Strategy in terms of the broad ambitions and partnership approach to delivery.**

10. SEXUAL VIOLENCE STRATEGY

Dr Frances Howie (Consultant in Public Health) provided an overview of the Sexual Violence Strategy. The report is the work of the Herefordshire Community Safety Partnership (CSP) and various statutory partners have worked alongside the CSP including the police, probation, and the NHS, in addition to working with non-statutory partners including the Herefordshire Women's Equality group. The strategy covers a five-year period and has an action plan which works with partners across the system in the implementation of the strategy. The principal points included:

1. Sexual violence is an activity that is mostly perpetrated by men on women.
 - a. 98% of people who report sexual violence report that the perpetrators are male.
2. Sexual violence is an underreported crime in terms of it going through to the criminal justice system.
3. Data shows that reported offences are still higher post-Covid than pre-Covid.
4. There is evidence that shows what works in tackling sexual violence, including working with perpetrators to change their behaviour.

5. The strategy sets out a common vision where everyone lives free of the fear, threat, or experience of sexual violence.
6. There are three areas of focus: prioritising prevention; supporting victims and survivors and pursuing perpetrators.
7. In taking this forward, there is a commitment to:
 - a. Working together to prevent sexual violence.
 - b. Increasing community awareness of sexual violence, challenging victim blaming language and behaviours and believing victims and survivors.
 - c. Challenging attitudes that lead to sexual violence (e.g. gender inequality) by working with community settings such as schools and businesses.
 - d. Listening to victim and survivor voices to inform development and delivery of services.
 - e. Ensuring that all victims and survivors can, and know how to, access specialist support when and where they need it. Lifelong support should be available and responsive to triggering life events.
8. The next steps for the strategy are to actively manage the action plan; the Sexual Violence Sub-group of the CSP has now moved to a quarterly basis; and remaining committed to the vision where everyone lives free of the fear, threat, or experience of sexual violence.

Councillor Diana Toynbee praised the work of the strategy and acknowledged the concern that sexual violence is underreported. It was noted that there is concern with relation to the police, particularly in response to recent news stories, and it is important to keep holding police colleagues to account. Furthermore, involvement with schools was emphasised in order to teach about related issues to have appropriate training and guidance. There also needs to be some focus on the ways in which roles need to be filled and what resources are needed to help reduce waiting lists that victims and survivors face.

The Director of Public Health thanked Dr Howie and the CSP for the work and noted that within the new Health and Wellbeing strategy under mental health, one of the outcomes is for people to feel safe from harm in their communities. Relating to schools, the Director of Public Health noted a whole schools approach which covers a range of important issues including food, physical activity, and sexual violence. The Chair acknowledged the importance of the first priority area of prevention as sexual violence involves long-term difficulties.

Dr Frances Howie noted the issue of corporate social responsibility in which if higher visibility in anchor institutions around sexual violence could be promoted amongst their workforce, this would help raise awareness of the issue. The roll-out of bystander training and educational videos could also promote positive action in tackling sexual violence. Regarding the police, there has been consideration of recommendations from a report written by DCC Maggie Blyth which can be included into the strategy's action plan, and an additional member of the police from the vulnerability unit has joined the CSP, in addition to Ross Jones, helping to strengthen representation from the police.

The Chair asked about how quickly 'an audit of processes currently in place in schools to understand what is being implemented to protect and support victims' (p30 of strategy) will be conducted in helping to tackle peer-on-peer abuse.

Dr Frances Howie pointed out that the Sexual Violence Sub-group is working to put dates against the action plan and peer-on-peer is a priority for the group. Funding for training in education settings derives from the criminal justice system through the Safer Streets Fund.

The Chair referred to enforcement and bringing more cases before the courts which also reflected a wider national issue.

Dr Frances Howie praised the work of the police and has positive experience with the police in tackling the issue of sexual violence.

Superintendent Helen Wain noted that she was pleased that engagement with the police was positive and that efforts are ongoing to avoid this type of offending and bring offenders to justice.

The recommendations were proposed, seconded, and approved unanimously.

Resolved that:

- a) **The Board notes the Herefordshire Sexual Violence Strategy**
- b) **The Board support and facilitate further development and delivery of the action plan.**

11. HEREFORDSHIRE AND WORCESTERSHIRE INTEGRATED CARE SYSTEM - UPDATE ON THE INTEGRATED CARE STRATEGY AND NHS JOINT FORWARD PLAN

David Mehaffey provided an update on the Integrated Care Strategy and NHS Joint Forward Plan. The Integrated Care Partnership (ICP) met and approved the Integrated Care Strategy on 26th April for publication, with minor amendments to be made. Publication will not take place until after the elections in accordance with NHS guidance. The principal points included:

1. The strategy is strongly aligned with the Health and Wellbeing Strategy with a 'best start in life' priority present in the Integrated Care Strategy.
2. Best start to life covers living, ageing, and dying well, in addition to preventing ill health, premature death, and vulnerable causes.
3. Mental health and wellbeing, the second core priority of the Health and Wellbeing Strategy, runs through all of the priorities in the Integrated Care Strategy.
4. Mental health covers mental health in children, adults, and preventing suicides.
5. The ICP meeting on the 26th April raised the importance on mental health and the new collaborative and focusing on the relationship with the voluntary sector and the change in the way of commissioning to attempt to move away from a purely medical model.
6. The Joint Forward Plan (JFP) is a single document that is jointly owned by the ICB and the three NHS Trusts in the ICS area. This will form the response to the Integrated Care Strategy.
7. The Health and Wellbeing board will be asked to consider the JFP in a development session at the end of May with a substantially complete document provided by 19th May.
8. The specific request of the board will be to form an opinion on the extent to which the JFP addresses the priorities set out in the Health and Wellbeing Strategy.
9. The JFP will consequently be marked and reviewed by NHS England as part of an assurance process.

The Chair asked about the inclusion of waiting lists in the update report and whether it will be covered in the future.

David Mehaffey confirmed that specific trajectories are in place to cut waiting lists with the intention to tackle the long waits that some people have had to experience. The next phase is to bring down 78 week waits to 65 week waits and to get back to 18 week waiting lists in the long-term future.

Councillor Diana Toynbee asked what the relationship is between the ICB, NHS England, and the Department of Health and how accountability works.

David Mehaffey stated that the Department of Health is the government department that allocates resources to NHS England. NHS England then allocates the vast majority of its resources to the 42 ICBs across the country but retains some services itself for things that are best managed on a national scale including some very complex surgeries and military health, for example. Accountability, locally, for NHS services, is the ICB and elected members who then have an accountability to NHS England in the Midlands region who in turn are held accountable by the national NHS for their regional performance. The Secretary of State holds the NHS England Chief Executive to account through the NHS mandate.

The recommendation was proposed, seconded, and approved unanimously.

Resolved that:

a) The Health and Wellbeing Board considers the report at Appendix 1.

12. HWB WORK PROGRAMME 2023-24

The board had no proposals.

13. DATE OF NEXT MEETING

The next scheduled meeting is 26 June 2023, 14:00-17:00.

The meeting ended at 3.19 pm

Chairperson

Title of report: Better Care Fund (BCF) year end report 2022-2023

Meeting: Health and Wellbeing Board

Meeting date: Monday 26 June 2023

Report by: Integrated Systems Lead, Community Wellbeing

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose

To review the better care fund (BCF) year-end 2022-2023 report, as per the requirements of the programme.

Recommendation(s)

That:

- a) **The Better Care Fund (BCF) 2022-2023 year-end template at appendix 1, as submitted to NHS England, be reviewed and the board determine any further actions necessary to improve future performance.**

Alternative options

1. There are no alternative options. The content of the return has already been approved by the council's Corporate Director for Community Wellbeing and Herefordshire & Worcestershire Integrated Care Board's (HWICB) accountable officer and submitted prior to the meeting of the board, in accordance with national deadlines. However this gives the board an opportunity to review and determine any further actions necessary to improve future performance.

Key considerations

2. A key principle of the BCF is to use a pooled budget approach in order for health and social care to work more closely together. As the population ages, the need for integrated care to improve people's experience of health and social care, the outcomes achieved and the efficient use of

Further information on the subject of this report is available from
Marie Gallagher, Tel: 01432 260435, email: Marie.Gallagher1@herefordshire.gov.ukl

resources has never been greater. Within the overall One Herefordshire approach, the BCF plays a key enabling role in delivering our system-wide vision.

3. The National BCF team determines national reporting requirements on the overall BCF programme, which for 2022-23 was limited to an End of Year (EOY) return only.
4. The EOY template requires confirmation that the BCF national conditions continued to be met throughout the year, confirmation of actual income and expenditure in BCF section 75 agreements for 2022-23 (covering the whole of the BCF plan including the Adult Social Care Discharge Fund monies), details of significant successes and challenges during the year. This year's template also requires all local systems to provide details on actual numbers of packages and actual spend in relation to the Adult Social Care Discharge Fund.
5. The national submission deadline for the year end 2022-2023 performance return has already passed (23 May 2023) and therefore the board is requested to note the completed data, attached at appendix 1, following its submission to NHS England.
6. Herefordshire has reported that all of the national conditions, as listed below, have been met:
 - A plan has been agreed for the Health and Wellbeing Board area that includes all mandatory funding and this is included in a pooled fund governed under section 75 of the NHS Act 2006;
 - Planned contribution to social care from the NHS minimum contribution is agreed in line with the BCF policy;
 - Agreement to invest in NHS commissioned out of hospital services; and
 - Plan for improving outcomes for people being discharged from hospital.
7. The EOY 2022-23 performance data shows that Herefordshire was classed as not on track to meet the target for avoidable admissions to hospitals (unplanned hospitalisation for chronic ambulatory care sensitive conditions). The planned performance at year-end was 1106 against a metric of 605.0
8. A programme of admission avoidance including Virtual Ward and Urgent Care Response programmes will be starting and the development of an approach to integrated long term conditions management is envisaged to improve future performance.
9. The discharge to normal place of residence (percentage of people who are discharged from acute hospital to their normal place of residence) metric of 91.6% was not met, with data showing a year-end total of 90%. Lack of capacity within Herefordshire's reablement and home care market and the ability to discharge patients home from acute beds in a timely manner has seen patients being transferred to Community Hospital beds or Discharge to Assess (D2A) beds, in order to release acute bed capacity.
10. Recruitment to vacancies within Home First, the reablement service provided by Hoople, has increased and at the latter end of 2022-23, system support increased the WVT Hospital @ Home service to help bridge the gap within Home First; seeing a slight increase in the number of individuals supported to return to their own home.
11. Covid, flu and Strep A, along with increased staff absence, over the winter period saw the volume of inpatient escalation beds and bed occupancy over 100% for significant periods of time which led to a stretched workforce with a lower capacity to perform pre-discharge assessments and set up discharge plans.

12. The EOY 2022-2023 performance report shows that Herefordshire was classed as on track to meet the target for admissions to residential and care homes. Older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population target for 2022-23 was 493; data shows this target was met showing a year-end total of 517.6 (265 admissions).
13. Whilst there has been an increase this financial year there has not been any significant change from 2021-22. There was a reduction in admissions during Covid and the current rate is still below pre-pandemic levels (for example 2019-20 it was 587.42). This is a positive figure though, given the demand for residential and nursing care beds through discharge pathways.
14. Whilst we are meeting the target, we remain mindful of the limited capacity in the care market for complex cases, such as people with more challenging behaviours and system partners continue to work together, including service providers, to address these gaps. The introduction of the new D2A CAAST team (Care Act Assessment Team) has been instrumental in assessing people into the right services following discharge.
15. The effectiveness of reablement (proportion of older people still at home 91 days after discharge from hospital into reablement or rehabilitation) metric shows Herefordshire did not meet the target, showing a figure of 70.8% against a target of 80.0%.
16. The CQC Registered reablement service was transferred from Herefordshire Council to Hoople Ltd in June 2022. Some reporting issues were experienced due to staff changes, which has now been addressed. Recording improved from Q2 of 2022/23. From Q2 onwards the percentage of individuals who remain at home 91 days after leaving the service has averaged around 78% but the issues in recording in Q1 has impacted on the overall year percentage. There are some nuances with regards to obtaining accurate data out of 91 day or reablement reports as the complexity and acuity of patients being taken on by Home first has changed.
17. During 20223-23, the Improved Better Care Fund (iBCF) has been invested in a number of services to help improve the health and wellbeing of people in Herefordshire, by enabling people to take greater control over their own health and the health of their families, and helping them to remain independent within their own homes and communities.
18. Talk Community continues as one of the council's primary approaches to demand management and admission prevention.
 - The Talk Community Directory provides information, advice and signposting and contains over 800 organisations and over 390 events listed each month. Website hits have increased from 69k to 107k this last year, with 250k page views and an average of over 6k users each month.
 - 73 Talk Community Hubs are located across Herefordshire providing a safe place where local people can access information, services, groups and activities to support their wellbeing and independence.
 - Monthly Community Network meetings are held in each of Herefordshire's PCN areas, bringing together community, third sector and statutory services to connect with peers and share ideas and experiences and identify local issues.
 - Co-ordination of bi-monthly cost of living summits, to review and scope the system response to the crisis, working jointly to consider what we can do to protect people against higher costs, targeting help at those facing the most complex challenges. Strong link with our cost of living response alliance, meeting monthly with food banks, community debt centres and third party organisations to ensure help is provided to those who need it most

19. The DFG is a capital grant pooled into the BCF to promote joined-up approaches to meeting people's needs to help support more people of all ages to live in suitable housing so they can stay independent for longer.
20. Herefordshire Council's allocation for 2022/23 was £2,268m and the overall budget £3.469m after £0.54m was reprofiled to 2023/24. There was a significant underspend of £1.223m on Disabled Facilities Grants (DFG) during 2022/23, mainly due to £1.289m being carried forward from 2021/22. So the starting budget for 2023/24 is £4.031m, which includes the new allocation of £2.268m for 2023/24, plus the £1.223m carry forward and the £0.54m reprofiled from 2022/23.
21. The target set was to complete 200 mandatory DFG grants and 20 discretionary DFG or assistance grants in the financial year; a year-end total of 165 DFG/RRO grants were completed. In addition there are 51 DFGs/RROs in progress as at 31 March 2023 (active building work underway/a design and grant agreed and a contractor appointed). There are also 225 DDGs/RROs actively under consideration (adaptation being designed with OT and surveyor: discussed/ agreed with the applicant, financial assessment underway to identify size of grant/client contribution etc.).
22. The overall delivery of the BCF in Herefordshire for 2022/23 has had a positive impact on integration. Through the BCF pooled funds, the NHS funded an increase in community based resource to support the council's reablement team. The teams work together to provide a joint approach with the outcome being improved flow within the reablement team, which in turn supports better outcomes, by maximising reablement capacity.
23. The local system continues to have a number of joint roles that work across health and social care, particularly in community services/hospital discharge.
24. There continues to be challenges across the health and social care system in Herefordshire. Capacity remains an issue for the care market particularly around home care in specific geographical areas and recruitment into care roles continues to impact the local system.
25. The Adult Social Care Discharge Fund provides funding to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care and reducing the number of bed days lost to delayed discharges. The focus is on (but not limited to) a 'home first' approach and discharge to assess (D2A). This additional funding will be distributed to both local authorities and integrated care boards (ICBs) to pool into the local Better Care Fund (BCF).
26. The Department of Health and Social Care provided this funding to enable more people to be discharged to an appropriate setting, including from mental health inpatient settings, with adequate and timely social care support as required; prioritise those approaches that are most effective in freeing up the maximum number of hospital beds and reducing bed days lost within the funding available; and boost general adult social care workforce capacity through recruitment and retention, where that will help to reduce delayed discharges. This could include, but is not limited to, measures which: increase hours worked by existing workforce; improve retention of existing workforce; provide additional or redeployed capacity from current care workers; or support local recruitment initiatives

Community impact

27. The BCF plan is set within the context of the national programme of transformation and integration of health and social care. The council and HWICB continue to work together to deliver on the key priorities within the plan to achieve savings and improve the delivery of services in order to achieve the priorities of the health and wellbeing strategy in the most cost effective way.

Environmental Impact

28. Herefordshire Council provides and purchases a wide range of services for the people of Herefordshire. Together with partner organisations in the private, public and voluntary sectors we share a strong commitment to improving our environmental sustainability, achieving carbon neutrality and to protect and enhance Herefordshire's outstanding natural environment.
29. Whilst this is a report regarding programme delivery and will have minimal environmental impacts, consideration has been made to minimise waste and resource use in line with the Council's Environmental Policy.

Equality duty

30. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:
A public authority must, in the exercise of its functions, have due regard to the need to –
 - a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
31. It is not envisaged that the recommendations in this report will negatively disadvantage the following nine groups with protected characteristics: age, disability, gender, reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
32. The BCF programme aims to deliver better outcomes for older and disabled people and supports the council in proactively delivering its equality duty under the act. This is through improving the health and wellbeing of people in Herefordshire by enabling them to take greater control over their own homes and communities. There are no negative impacts for looked after children or with respect to the council's corporate parenting role.
33. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. The Sustainability and Transformation Partnership (STP) is developing a more joined up approach to its equality duties, and has an STP equality work stream which is developing a robust and uniform approach to equality impact assessment across Herefordshire and Worcestershire which the BCF will be included.
34. Where appropriate, an Equality Impact Assessment (EIA) is undertaken for separate schemes and services that are within the BCF. Where large changes are planned via the BCF an EIA will be completed.

Resource implications

35. The table below shows the summary of the Final out-turn expenditure variances to plan resolved as set out in schedule 4 (Risk Share) of the s75 agreement. A more detailed forecast for each pool within the section 75 agreement is available upon request.
36. Pool 2- Intentionally blank- formally 'Additional Voluntary Contributions to BCF' currently no additional contributions.
37. Pool 4- Intentionally blank- formally 'Winter Pressures Grant' realigned into iBCF at a national level.
38. Pool 5 (Children's Services and Pool 6 (ICES) are part of the s.75 agreement but not part of the BCF plan reporting.

Section 75 Agreement- Summary of Pool Balances	Annual Plan	Actual Out-turn	Final Over / (Under) Spend	% Over / (Under) Spend	Risk Share Adjustment	Revised Out-turn after Risk Share Adjustment	Revised Over / (Under) Spend	Revised % Over / (Under) Spend
	£,000	£,000	£,000		£	£	£	
Total Pool One- Mandated Revenue & Capital Contributions	17,400,612	17,841,235	440,624	2.5%	(440,623)	17,400,612	0	(0.0%)
Total Pool Three- Improved Better Care Fund	6,782,552	7,032,376	249,824	3.7%	(249,824)	6,782,552	0	0.0%
Total Pool Five- Children's Services	5,560,894	5,921,563	360,669	6.5%	(360,669)	5,560,894	0	0.0%
Total Pool Six- Integrated Community Equipment Store (ICES)	1,854,219	1,695,372	(158,846)	(8.6%)	158,846	1,854,219	0	0.0%
Total Pool Seven- Adult Social Care Discharge Fund	1,291,812	1,291,812	0	0.0%	0	1,291,812	0	0.0%
Total Section 75 Agreement Funding	31,598,277	32,490,547	892,270	2.8%	(892,270)	31,598,277	0	(0.0%)

Legal implications

39. The Care Act 2014 amended the NHS Act 2006 to provide the legislative basis for the BCF. It allows for the Mandate to NHS England to include specific requirements to instruct NHS England over the BCF, and NHS England to direct Integrated Care Boards to pool the necessary funding. The council is legally obliged to comply with grant conditions, which have been complied with.
40. Health and wellbeing boards are responsible for encouraging integrated working between health and social care commissioners, including partnership arrangements such as pooled budgets, lead commissioning and integrated provision.
41. Their purpose is to establish collaborative decision making, planning and commissioning across councils and the NHS, informed by the views of patients, people who use services and other partners.
42. Overseeing the deployment of BCF resources locally is a key part of their remit. BCF plans have to be signed off by the health and wellbeing board as well as the HWICB, which represents the NHS side of the equation.

Risk management

43. The board is invited to review the content of the performance template, which is based on statistical and financial information and therefore the risk is minimal.
44. Monitoring the delivery of the Herefordshire BCF Plan is undertaken by the council and HWICB. The Integrated Systems Lead monitors a risk register and escalates to the directorate risk register where necessary. Higher risks will also be escalated to the council's corporate risk register in accordance with the council Risk Management Plan.

Risk / opportunity	Mitigation
Targets not being met	Partners will continue to work together to address demands and continue with a programme of improvements and regular monitoring

Consultees

45. The year-end report received input from financial, operational and strategic stakeholders from the council and HWICB.

Appendices

Appendix 1 – Better Care Fund 2022-2023 year end national performance template.

Background papers

None

Report Reviewers Used for appraising this report:

Please note this section must be completed before the report can be published

Governance	Sarah Buffrey	Date 13/06/2023
Finance	Karen Morris/Judith Tranmer	Date 07/06/2023
Legal	Sam Evans	Date 07/06/2023
Communications	Luenne Featherstone	Date 05/06/2023
Equality Duty	Harriet Yellin	Date 13/06/2023
Procurement	Lee Robertson	Date 09/06/2023
Risk	Jo Needs	Date 05/06/2023

Approved by [Click or tap here to enter text.](#) Date [Click or tap to enter a date.](#)

Please include a glossary of terms, abbreviations and acronyms used in this report.

Acronym	Description
BCF	Better Care Fund
iBCF	Improved Better Care Fund
HWICB	Herefordshire & Worcestershire Integrated Commissioning Board
EIA	Equality Impact Assessment
EOY	End of Year
D2A	Discharge to Assess
DHSC	The Department of Health and Social Care
DFG	Disabled Facilities Grant

Better Care Fund 2022-23 End of Year Template

1. Guidance

Overview

The Better Care Fund (BCF) reporting requirements are set out in the BCF Planning Requirements document for 2022-23, which supports the aims of the BCF Policy Framework and the BCF programme; jointly led and developed by the national partners Department of Health (DHSC), Department for Levelling Up, Housing and Communities, NHS England (NHSE), Local Government Association (LGA), working with the Association of Directors of Adult Social Services (ADASS).

The key purposes of BCF reporting are:

- 1) To confirm the status of continued compliance against the requirements of the fund (BCF)
- 2) To confirm actual income and expenditure in BCF plans at the end of the financial year
- 3) To provide information from local areas on challenges, achievements and support needs in progressing the delivery of BCF plans
- 4) To enable the use of this information for national partners to inform future direction and for local areas to inform improvements

BCF reporting is likely to be used by local areas, alongside any other information to help inform HWBs on progress on integration and the BCF. It is also intended to inform BCF national partners as well as those responsible for delivering the BCF plans at a local level (including ICB's, local authorities and service providers) for the purposes noted above.

BCF reports submitted by local areas are required to be signed off by HWBs as the accountable governance body for the BCF locally. Aggregated reporting information will be published on the NHS England website in due course.

Note on entering information into this template

Throughout the template, cells which are open for input have a yellow background and those that are pre-populated have a grey background, as below:

Data needs inputting in the cell

Pre-populated cells

Note on viewing the sheets optimally

To more optimally view each of the sheets and in particular the drop down lists clearly on screen, please change the zoom level between 90% - 100%. Most drop downs are also available to view as lists within the relevant sheet or in the guidance tab for readability if required.

The row heights and column widths can be adjusted to fit and view text more comfortably for the cells that require narrative information.

Please DO NOT directly copy/cut & paste to populate the fields when completing the template as this can cause issues during the aggregation process. If you must 'copy & paste', please use the 'Paste Special' operation and paste Values only.

The details of each sheet within the template are outlined below.

ASC Discharge Fund-due 2nd May

This is the last tab in the workbook and must be submitted by 2nd May 2023 as this will flow to DHSC. It can be submitted with the rest of workbook empty as long as all the details are complete within this tab, as well as the cover sheet although we are not expecting this to be signed off by HWB at this point. The rest of the template can then be later resubmitted with the remaining sections completed.

After selecting a HWB from the dropdown please check that the planned expenditure for each scheme type submitted in your ASC Discharge Fund plan are populated.

Please then enter the actual packages of care that matches the unit of measure pre-specified where applicable.

If there are any new scheme types not previously entered, please enter these in the bottom section indicated by a new header. At the very bottom there is a totals summary for expenditure which we'd like you to add a breakdown by LA and ICB.

Please also include summary narrative on:

1. Scheme impact
2. Narrative describing any changes to planned spending – e.g. did plans get changed in response to pressures or demand? Please also detail any underspend.
3. Assessment of the impact the funding delivered and any learning. Where relevant to this assessment, please include details such as: number of packages purchased, number of hours of care, number of weeks (duration of support), number of individuals supported, unit costs, staff hours purchased and increase in pay etc
4. Any shared learning

Checklist (2. Cover)

1. This section helps identify the sheets that have not been completed. All fields that appear as incomplete should be complete before sending to the BCF Team.
2. The checker column, which can be found on the individual sheets, updates automatically as questions are completed. It will appear 'Red' and contain the word 'No' if the information has not been completed. Once completed the checker column will change to 'Green' and contain the word 'Yes'
3. The 'sheet completed' cell will update when all 'checker' values for the sheet are green containing the word 'Yes'.
4. Once the checker column contains all cells marked 'Yes' the 'Incomplete Template' cell (below the title) will change to 'Template Complete'.
5. Please ensure that all boxes on the checklist are green before submission.

2. Cover

1. The cover sheet provides essential information on the area for which the template is being completed, contacts and sign off.
2. HWB sign off will be subject to your own governance arrangements which may include a delegated authority.
3. Question completion tracks the number of questions that have been completed; when all the questions in each section of the template have been completed the cell will turn green. Only when all cells are green should the template be sent to:
england.bettercarefundteam@nhs.net
(please also copy in your respective Better Care Manager)
4. Please note that in line with fair processing of personal data we request email addresses for individuals completing the reporting template in order to communicate with and resolve any issues arising during the reporting cycle. We remove these addresses from the supplied templates when they are collated and delete them when they are no longer needed.

3. National Conditions

This section requires the Health & Wellbeing Board to confirm whether the four national conditions detailed in the Better Care Fund planning requirements for 2022-23 (link below) continue to be met through the delivery of your plan. Please confirm as at the time of completion.

<https://www.england.nhs.uk/publication/better-care-fund-planning-requirements-2022-23/>

This sheet sets out the four conditions and requires the Health & Wellbeing Board to confirm 'Yes' or 'No' that these continue to be met. Should 'No' be selected, please provide an explanation as to why the condition was not met for the year and how this is being addressed. Please note that where a National Condition is not being met, the HWB is expected to contact their Better Care Manager in the first instance.

In summary, the four national conditions are as below:

National condition 1: Plans to be jointly agreed

National condition 2: NHS contribution to adult social care is maintained in line with the uplift to NHS Minimum Contribution

National condition 3: Agreement to invest in NHS commissioned out-of-hospital services

National condition 4: Plan for improving outcomes for people being discharged from hospital

4. Metrics

The BCF plan includes the following metrics: Unplanned hospitalisation for chronic ambulatory care sensitive conditions, Proportion of discharges to a person's usual place of residence, Residential Admissions and Reablement. Plans for these metrics were agreed as part of the BCF planning process.

This section captures a confidence assessment on achieving the plans for each of the BCF metrics.

A brief commentary is requested for each metric outlining the challenges faced in achieving the metric plans, any support needs and successes that have been achieved.

The BCF Team publish data from the Secondary Uses Service (SUS) dataset for Discharge to usual place of residence and avoidable admissions at a local authority level to assist systems in understanding performance at local authority level.

The metrics worksheet seeks a best estimate of confidence on progress against the achievement of BCF metric plans and the related narrative information and it is advised that:

- In making the confidence assessment on progress, please utilise the available metric data along with any available proxy data.
- In providing the narrative on Challenges and Support needs, and Achievements, most areas have a sufficiently good perspective on these themes and the unavailability of published metric data for one/two of the three months of the quarter is not expected to hinder the ability to provide this useful information. Please also reflect on the metric performance trend when compared to the quarter from the previous year - emphasising any improvement or deterioration observed or anticipated and any associated comments to explain.

Please note that the metrics themselves will be referenced (and reported as required) as per the standard national published datasets.

5. Income and Expenditure

The Better Care Fund 2022-23 pool constitutes mandatory funding sources and any voluntary additional pooling from LAs (Local Authorities) and NHS. The mandatory funding sources are the DFG (Disabled Facilities Grant), the improved Better Care Fund (iBCF) grant, minimum NHS contribution and additional contributions from LA and NHS. This year we include final spend from the Adult Social Care discharge fund.

Income section:

- Please confirm the total HWB level actual BCF pooled income for 2022-23 by reporting any changes to the planned additional contributions by LAs and NHS as was reported on the BCF planning template.
- In addition to BCF funding, please also confirm the total amount received from the ASC discharge fund via LA and ICB if this has changed.
- The template will automatically pre populate the planned expenditure in 2022-23 from BCF plans, including additional contributions.
- If the amount of additional pooled funding placed into the area's section 75 agreement is different to the amount in the plan, you should select 'Yes'. You will then be able to enter a revised figure. Please enter the **actual income** from additional NHS or LA contributions in 2022-23 in the yellow boxes provided, **NOT** the difference between the planned and actual income.
- Please provide any comments that may be useful for local context for the reported actual income in 2022-23.

Expenditure section:

- Please select from the drop down box to indicate whether the actual expenditure in your BCF section 75 is different to the planned amount.
- If you select 'Yes', the boxes to record actual spend, and explanatory comments will unlock.
- You can then enter the total, HWB level, actual BCF expenditure for 2022-23 in the yellow box provided and also enter a short commentary on the reasons for the change.
- Please include actual expenditure from the ASC discharge fund.
- Please provide any comments that may be useful for local context for the reported actual expenditure in 2022-23.

6. Year End Feedback

This section provides an opportunity to provide feedback on delivering the BCF in 2022-23 through a set of survey questions

These questions are kept consistent from year to year to provide a time series.

The purpose of this survey is to provide an opportunity for local areas to consider the impact of BCF and to provide the BCF national partners a view on the impact across the country. There are a total of 5 questions. These are set out below.

Part 1 - Delivery of the Better Care Fund

There are a total of 3 questions in this section. Each is set out as a statement, for which you are asked to select one of the following responses:

- Strongly Agree
- Agree
- Neither Agree Nor Disagree
- Disagree
- Strongly Disagree

The questions are:

1. The overall delivery of the BCF has improved joint working between health and social care in our locality
2. Our BCF schemes were implemented as planned in 2022-23
3. The delivery of our BCF plan in 2022-23 had a positive impact on the integration of health and social care in our locality

Part 2 - Successes and Challenges

This part of the survey utilises the SCIE (Social Care Institute for Excellence) Integration Logic Model published on this link below to capture two key challenges and successes against the 'Enablers for integration' expressed in the Logic Model.

Please highlight:

4. Two key successes observed toward driving the enablers for integration (expressed in SCIE's logic model) in 2022-23.
5. Two key challenges observed toward driving the enablers for integration (expressed in SCIE's logic model) in 2022-23?

For each success and challenge, please select the most relevant enabler from the SCIE logic model and provide a narrative describing the issues, and how you have made progress locally.

[SCIE - Integrated care Logic Model](#)

1. Local contextual factors (e.g. financial health, funding arrangements, demographics, urban vs rural factors)
2. Strong, system-wide governance and systems leadership
3. Integrated electronic records and sharing across the system with service users
4. Empowering users to have choice and control through an asset based approach, shared decision making and co-production
5. Integrated workforce: joint approach to training and upskilling of workforce
6. Good quality and sustainable provider market that can meet demand
7. Joined-up regulatory approach
8. Pooled or aligned resources
9. Joint commissioning of health and social care



Better Care Fund 2022-23 End of Year Template

2. Cover

Version 1.0

Please Note:

- The BCF end of year reports are categorised as 'Management Information' and data from them will be published in an aggregated form on the NHSE website. This will include any narrative section. Also a reminder that as is usually the case with public body information, all BCF information collected here is subject to Freedom of Information requests.
- At a local level it is for the HWB to decide what information it needs to publish as part of wider local government reporting and transparency requirements. Until BCF information is published, recipients of BCF reporting information (including recipients who access any information placed on the BCE) are prohibited from making this information available on any public domain or providing this information for the purposes of journalism or research without prior consent from the HWB (where it concerns a single HWB) or the BCF national partners for the aggregated information.
- All information will be supplied to BCF partners to inform policy development.
- This template is password protected to ensure data integrity and accurate aggregation of collected information. A resubmission may be required if this is breached.

Health and Wellbeing Board:	Herefordshire, County of	
Completed by:	Marie Gallagher and Adrian Griffiths	
E-mail:	Marie.Gallagher1@herefordshire.gov.uk	
Contact number:	01432 260435	
Has this report been signed off by (or on behalf of) the HWB at the time of submission?	No	
If no, please indicate when the report is expected to be signed off:	Mon 26/06/2023	<< Please enter using the format, DD/MM/YYYY

Checklist
Complete:
Yes
Yes
Yes
Yes
Yes
Yes

Question Completion - when all questions have been answered and the validation boxes below have turned green you should send the template to england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. This does not apply to the ASC

Please see the Checklist on each sheet for further details on incomplete fields

	Complete:
2. Cover	Yes
3. National Conditions	Yes
4. Metrics	Yes
5. Income and Expenditure actual	Yes
6. Year-End Feedback	Yes

[<< Link to the Guidance sheet](#)

^^ Link back to top

Better Care Fund 2022-23 End of Year Template

3. National Conditions

Selected Health and Wellbeing Board:

Herefordshire, County of

Confirmation of Nation Conditions		
National Condition	Confirmation	If the answer is "No" please provide an explanation as to why the condition was not met in 2022-23:
1) A Plan has been agreed for the Health and Wellbeing Board area that includes all mandatory funding and this is included in a pooled fund governed under section 75 of the NHS Act 2006? (This should include engagement with district councils on use of Disabled Facilities Grant in two tier areas)	Yes	
2) Planned contribution to social care from the NHS minimum contribution is agreed in line with the BCF policy?	Yes	
3) Agreement to invest in NHS commissioned out of hospital services?	Yes	
4) Plan for improving outcomes for people being discharged from hospital	Yes	

Checklist

Complete:

Yes

Yes

Yes

Yes

Better Care Fund 2022-23 End of Year Template

4. Metrics

Selected Health and Wellbeing Board:

National data may be unavailable at the time of reporting. As such, please utilise data that may only be available system-wide and other local intelligence.

Challenges and Support Needs Please describe any challenges faced in meeting the planned target, and please highlight any support that may facilitate or ease the achievements of metric plans

Achievements Please describe any achievements, impact observed or lessons learnt when considering improvements being pursued for the respective metrics

Metric	Definition	For information - Your planned performance as reported in 2022-23 planning	Assessment of progress against the metric plan for the reporting period	Challenges and any Support Needs	Achievements
Avoidable admissions	Unplanned hospitalisation for chronic ambulatory care sensitive conditions (NHS Outcome Framework indicator 2.3i)	605.0	Not on track to meet target	1106 - Delays to Virtual Ward and Urgent Care Response programmes starting and the Integrated long term conditions projects still in early stages.	A programme of admission avoidance starting and developing an approach to integrated long terms conditions management.
Discharge to normal place of residence	Percentage of people who are discharged from acute hospital to their normal place of residence	91.6%	Not on track to meet target	90% - Lack of capacity within pathway 1 and the ability to discharge patients home from acute beds in a timely manner has seen patients being transferred to Community Hospital beds or DZA beds in order to release acute bed capacity. Covid and Flu and StrepA, along with increased staff absence, over the winter period saw the volume of inpatient escalation beds and bed occupancy over 100% for significant periods of time which led to a stretched workforce with a lower capacity to perform pre-discharge assessments, set up discharge plans, and coordinate post-discharge care etc.	HomeFirst increased recruitment to vacancies. Latter end of the year system support to increase WVT Hospital@Home team to bridge gap between within HomeFirst establishment - did not start to deliver until March 23 [in small numbers]

Checklist Complete:
Yes
Yes

Residential Admissions	Rate of permanent admissions to residential care per 100,000 population (65+)	493	On track to meet target	Whilst we are meeting the target, we remain mindful of the limited capacity in the care market for complex cases, such as people with more challenging behaviours and we continue to work with our system partners to address these gaps.	517.6 residential admissions. While we have seen an increase this year we would hesitate to say there has been any significant change. There was a reduction in admissions during Covid; there is a slight increase in percentage which still does not exceed the pre-covid levels (for example 2019-20 it was 587.42) but is positive given the number of people that enter into residential care (and nursing) in receipt of D2A pathway 2 and 3. The introduction of the new D2A team (CAAST - Care Act Assessment Team) has been instrumental in assessing people into the right services following discharge.
Reablement	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	80.0%	Not on track to meet target	70.8% - Reablement service was outsourced to Hoople Cares in June 2022. Some reporting issues were experienced due to staff changes, which has now been addressed. Recording improved from Q2 of 2022/23. From Q2 onwards the percentage re-abled and still at home after 91 days has averaged around 78% but the issues in recording in Q1 has impacted on the overall year percentage. There are some nuances with regards to obtaining accurate data out of 91 day or reablement reports as the complexity and acuity of patients being taken on by Home first has changed. While the number of permanent placements is as cited above - the cost of placements and the availability of placements at council funded rates continues to be a significant concern.	Continue to support a suite of actions to encourage recruitment and retention of Home First staff including additional pay for staff and an improved offer of training.

Yes

Yes

Better Care Fund 2022-23 End of Year Template

5. Income and Expenditure actual

Selected Health and Wellbeing Board:

Herefordshire, County of

Income		2022-23	
Disabled Facilities Grant	£2,268,653		
Improved Better Care Fund	£6,782,841		
NHS Minimum Fund	£15,131,958		
Minimum Sub Total		£24,183,452	
	Planned		Actual
NHS Additional Funding	£0		Do you wish to change your additional actual NHS funding? No
LA Additional Funding	£0		Do you wish to change your additional actual LA funding? No
Additional Sub Total		£0	

	Planned 22-23	Actual 22-23
Total BCF Pooled Fund	£24,183,452	£24,183,452

ASC Discharge Fund		Planned		Actual	
LA Plan Spend	£733,845			Do you wish to change your additional actual LA funding? No	
ICB Plan Spend	£557,967			Do you wish to change your additional actual ICB funding? No	
ASC Discharge Fund Total		£1,291,812			£1,291,812

	Planned 22-23	Actual 22-23
BCF + Discharge Fund	£25,475,264	£25,475,264

Please provide any comments that may be useful for local context where there is a difference between planned and actual income for 2022-23

Expenditure

	2022-23
Plan	£24,183,452

Do you wish to change your actual BCF expenditure? No

Actual

	ASC Discharge Fund
Plan	£1,291,812

Do you wish to change your actual BCF expenditure? No

Actual

Please provide any comments that may be useful for local context where there is a difference between the planned and actual expenditure for 2022-23

Checklist

Complete:

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Better Care Fund 2022-23 End of Year Template

6. Year-End Feedback

The purpose of this survey is to provide an opportunity for local areas to consider and give feedback on the impact of the BCF. There is a total of 5 questions. These are set out below.

Selected Health and Wellbeing Board:

Part 1: Delivery of the Better Care Fund
Please use the below form to indicate to what extent you agree with the following statements and then detail any further supporting information in the corresponding comment boxes.

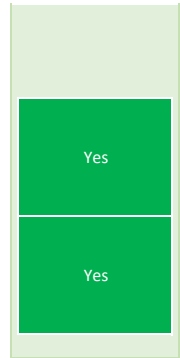
Statement:	Response:	Comments: Please detail any further supporting information for each response
1. The overall delivery of the BCF has improved joint working between health and social care in our locality	Agree	Joint working with each member taking responsibility for delivery of schemes or projects that they are leading on. Communications into and across organisations in order to ensure effective understanding of the planned activity and outcomes.
2. Our BCF schemes were implemented as planned in 2022-23	Agree	A number of schemes are funded through the BCF in Herefordshire. Throughout the year all schemes have been implemented.
3. The delivery of our BCF plan in 2022-23 had a positive impact on the integration of health and social care in our locality	Agree	Our shared intent, as detailed in the BCF plan is to continue to develop services in an integrated way. Redesigning services around the needs of individuals in a locality/place. The system aim is to continue to provide sufficient support in the community to enable people to remain independent in their own homes for longer and live longer in good health.

Part 2: Successes and Challenges
Please select two Enablers from the SCIE Logic model which you have observed demonstrable success in progressing and two Enablers which you have experienced a relatively greater degree of challenge in progressing. Please provide a brief description alongside.

4. Outline two key successes observed toward driving the enablers for integration (expressed in SCIE's logical model) in 2022-23	SCIE Logic Model Enablers, Response category:	Response - Please detail your greatest successes
Success 1	8. Pooled or aligned resources	MHS funded via Better Care Fund to increase community teams to support council reablement team. The teams works together to provide a joint approach with the outcome being improved flow within reablement team, which in turn supports better outcomes, by maximising reablement capacity.
Success 2	2. Strong, system-wide governance and systems leadership	The system have a 'One Herefordshire' forum with all providers meeting to provide governance, learning and leadership. Decision are made as a system and are focused on outcomes. Membership is extended to include care home providers from 2023.

Checklist Complete:
Yes
Yes
Yes
Yes
Yes

5. Outline two key challenges observed toward driving the enablers for integration (expressed in SCIE's logical model) in 2022-23	SCIE Logic Model Enablers, Response category:	Response - Please detail your greatest challenges
Challenge 1	6. Good quality and sustainable provider market that can meet demand	Capacity remains an issue for the market particularly around domiciliary care in specific areas.
Challenge 2	5. Integrated workforce: joint approach to training and upskilling of workforce	Our system is keen to proceed with a joint approach to training and upskilling the workforce, plans to deliver this are slow to progress. Wye Valley Trust have extended access to any existing in-house training programmes requested by care workers to be delivered free of charge to support upskilling. This is a key objective for 23/24 and plans are in place to proceed with this area of development.



Footnotes:

Question 4 and 5 are should be assigned to one of the following categories:

1. Local contextual factors (e.g. financial health, funding arrangements, demographics, urban vs rural factors)
 2. Strong, system-wide governance and systems leadership
 3. Integrated electronic records and sharing across the system with service users
 4. Empowering users to have choice and control through an asset based approach, shared decision making and co-production
 5. Integrated workforce: joint approach to training and upskilling of workforce
 6. Good quality and sustainable provider market that can meet demand
 7. Joined-up regulatory approach
 8. Pooled or aligned resources
 9. Joint commissioning of health and social care
- Other

Better Care Fund 2022-23 End of Year Template

ASC Discharge Fund

Selected Health and Wellbeing Board:

Herefordshire, County of

Please complete and submit this section (along with Cover sheet contained within this workbook) by 2nd May

For each scheme type please confirm the impact of the scheme in relation to the relevant units asked for and actual expenditure. Please then provide narrative around how the fund was utilised, the duration of care it provided and any changes to planned spend. At the very bottom of this sheet there is a totals summary, please also include aggregate spend by LA and ICB which should match actual total prepopulation.

The actual impact column is used to understand the benefit from the fund. This is different for each scheme and sub type and the unit for this metric has been pre-populated. This will align with metrics reported in fortnightly returns for scheme types.

1) For 'residential placements' and 'bed based intermediary care services', please state the number of beds purchased through the fund. (i.e. if 10 beds are made available for 12 weeks, please put 10 in column H and please add in your column K explanation that this achieve 120 weeks of bed based care).

2) For 'home care or domiciliary care', please state the number of care hours purchased through the fund.

3) For 'reablement in a person's own home', please state the number of care hours purchased through the fund.

4) For 'improvement retention of existing workforce', please state the number of staff this relates to.

5) For 'Additional or redeployed capacity from current care workers', please state the number of additional hours worked purchased through the fund purchased.

6) For 'Assistive Technologies and Equipment', please state the number of unique beneficiaries through the fund.

7) For 'Local Recruitment Initiatives', please state the additional number of staff this has helped recruit through the fund.

If there are any additional scheme types invested in since the submitted plan, please enter these into the bottom section found by scrolling further down.

Scheme Name	Scheme Type	Sub Types	Planned Expenditure	Actual Expenditure	Actual Number of Packages	Unit of Measure	Did you make any changes to planned spending?	If yes, please explain why	Did the scheme have the intended impact?	If yes, please explain how, if not, why was this not possible	Do you have any learning from this scheme?
D2A Beds	Bed Based Intermediate Care Services	Step down (discharge to assess pathway 2)	£347,109	£337,032	71	Number of beds	No		Yes	Scheme enabled commissioning of additional discharge capacity	Acquiring capacity in the market with short-term funding allocated at short notice impedes longer-term service planning and leads to higher prices for care
Home Care Contracts	Home Care or Domiciliary Care	Domiciliary care to support hospital discharge	£336,736	£324,013	58	Hours of care	No		Yes	Scheme enabled commissioning of additional discharge capacity	Acquiring capacity in the market with short-term funding allocated at short notice impedes longer-term service planning and leads to higher prices for care
Home Care Hours	Reablement in a Person's Own Home	Reablement service accepting community and discharge	£108,211	£0		Hours of care	Yes	Implementation of new service took longer than anticipated- now live from April 2023	No	Scheme did not begin by 31/03/2023	Providers are not interested in delivering new services at short-notice with short-term funding
Nursing Home Beds	Residential Placements	Nursing home	£386,632	£192,919	35	Number of beds	Yes	Relative split of activity funded between nursing and residential care changed	Yes	Scheme enabled commissioning of additional discharge capacity	Acquiring capacity in the market with short-term funding allocated at short notice impedes longer-term service planning and leads to higher prices for care
Residential Care Home Beds	Residential Placements	Care home	£63,124	£437,847	71	Number of beds	Yes	Relative split of activity funded between nursing and residential care changed, and funding released by slippage in other schemes diverted into residential care	Yes	Scheme enabled commissioning of additional discharge capacity	Acquiring capacity in the market with short-term funding allocated at short notice impedes longer-term service planning and leads to higher prices for care
Voluntary Sector Community Support	Other		£50,000	£0		N/A	Yes	Implementation of new service took longer than anticipated- now live from April 2023	No	Scheme did not begin by 31/03/2023	Mobilisation of new services at short notice is very challenging, even with a willing delivery partner

Schemes added since Plan											
	Local recruitment initiatives										
	<Please Select>										

Planned Expenditure	£1,291,812
Actual Expenditure	£1,291,812
Actual Expenditure ICB	£733,845
Actual Expenditure LA	£557,967

Title of report: Children's Services Improvement Plan

Meeting: Health and Wellbeing Board

Meeting date: Monday 26 June 2023

Report by: Corporate Director - Children & Young People

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose

To provide an update on progress against the children's services improvement plan.

Recommendation(s)

That:

- a) **The Health and Wellbeing Board note the progress reported on the children's services improvement plan and recent feedback from Office for Standards in Education, Children's Services and Skills (Ofsted) following the first Monitoring Visit since the inspection in summer 2022.**

Alternative options

1. The Health and Wellbeing Board could choose not to consider this update report, however given the importance of the subject matter it is presented to this meeting. This is not recommended. A key remit of the Health and Wellbeing Board is to encourage those who arrange the provision of any health or social care services in Herefordshire to work in an integrated manner for the purpose of advancing the health and wellbeing of the people of Herefordshire

Key considerations

2. On September 21 2022 Ofsted published a [report](#) rating Herefordshire Council children's services as inadequate following an inspection that took place between 19 and 29 July 2022 and the council was given three months to prepare an improvement action plan in response.
3. Following the publication of the Ofsted report a [statutory direction](#) was issued by the Secretary of State to Herefordshire Council and Eleanor Brazil was appointed as Commissioner for Children's Services in Herefordshire.
4. The [Children's Services Improvement Plan](#) was updated setting out how the council is addressing each of the areas identified for improvement by Ofsted and a tenth area identified during a recent Local Government Association Special Educational Needs and Disabilities Peer Review.
5. Having been presented to [Scrutiny Committee on 13 December](#), [Scrutiny Committee recommended](#) for Cabinet to endorse the Improvement Plan and for Cabinet to authorise for the Improvement Plan to be submitted to Ofsted.
6. The Improvement Plan was endorsed by [Cabinet on Thursday 15 December](#) and submitted to Ofsted on 20 December. The Plan aims to improve the outcomes for children and young people across the county.
7. Progress against the improvement plan is overseen by the Improvement Board, chaired by Gladys Rhodes White (Department for Education Improvement Advisor). The Board meets on a six-weekly basis and has adopted a thematic approach in its focus on areas of the overall plan.
8. The most recent progress report submitted to the Board for its meeting on 7 June is shared with the Health and Wellbeing Board as Appendix 1 and Appendix 2 for information.
9. The Improvement Plan is wide-ranging and progress should be noted in a broad range of improvement plan actions with a shift now in progress from measuring activity to measuring impact. Activity is driven through a number of programme boards.
10. Ofsted also monitor progress against the improvement plan and conduct a series of monitoring visits following an inadequate inspection judgement. The first monitoring visit to Herefordshire children's services took place in March 2023 and the feedback letter will be presented to Cabinet on 22 June 2023. The second monitoring visit is expected later in June and will focus on children in need and child protection activity.
11. It is expected that work with a long-term (2yr) improvement partner, funded and supported by the Department for Education (DfE) will also commence in June.

Community impact

12. The Ofsted inspection judgement of 'Inadequate' has a direct and indirect effect on the lives of both current and future children and families in Herefordshire.

Environmental Impact

13. There are no specific implications for the environment arising from this report.

Equality duty

14. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to –

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
16. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.
17. There are no equality issues arising from this report.

Resource implications

18. There are no resource implications associated with this report. The resource implications of any recommendations supported by the HWB will need to be considered by the responsible party in response to those recommendations or subsequent decisions.

Legal implications

19. There are no direct legal implications as a result of this report. The improvement as described is a necessary response to the requirements of the Statutory Direction and Ofsted findings.

Risk management

20. There are no new risk implications identified emerging from the recommendations in this report.

Consultees

21. None.

Appendices

- Appendix 1 Improvement Board cover report
- Appendix 2 Improvement Board progress report

Background papers

None identified.

Report Reviewers Used for appraising this report:

Please note this section must be completed before the report can be published		
Governance	John Coleman	Date 16/06/2023
Finance	Click or tap here to enter text.	Date Click or tap to enter a date.
Legal	Sean O'Connor	Date 16/06/2023
Communications	Click or tap here to enter text.	Date Click or tap to enter a date.
Equality Duty	Click or tap here to enter text.	Date Click or tap to enter a date.
Procurement	Click or tap here to enter text.	Date Click or tap to enter a date.
Risk	Click or tap here to enter text.	Date Click or tap to enter a date.
Approved by	Darryl Freeman	Date 16/06/2023

Please include a glossary of terms, abbreviations and acronyms used in this report.

HEREFORDSHIRE COUNTY COUNCIL

CHILDREN'S IMPROVEMENT BOARD 7 JUNE

IMPROVEMENT PLAN PROGRESS UPDATE COVER REPORT

1.0 Introduction

1.1 This cover report addresses the progress updates that have been added to the Improvement Plan for consideration at the June 2023 Improvement Board. These updates are based on information outlined in the Transformation Programme Delivery Dash Boards, feedback from Project Managers, Senior Responsible Officers and Service Leads as well as quality assurance and performance reporting. The Improvement Plan reflects the most up to date data and information for the month of May 2023.

2.0 BRAG Breakdown

2.1 Overall, the general direction of travel continues to be positive in respect of progressing agreed improvement priority actions as the majority of these continue to remain on track. Of the 64 priority improvement actions, 32 (50%) are now BRAG rated Blue which reflects a positive shift towards 'business as usual'. When adding the Green BRAG rated priority improvement actions, this figure increases to 43 (67%).

2.2 The overall improvement activity and impact summarised below:

	Previous Improvement Activity	Previous Improvement Impact	Current Improvement Activity	Current Improvement Impact
Grey	1 (1.53%)	33 (49.23%)	0	29 (45.31%)
Blue	28 (46.66%)	0	32 (50%)	0
Red	8 (13.33%)	1 (1.53%)	2 (3.13%)	2 (3.13)
Amber	4 (6.15%)	20 (30.76%)	18 (28.13%)	22 (34.37%)
Green	24 (36.92%)	11 (16.92%)	12 (18.75%)	11 (17.19%)
Total	65	65	64	64

2.3 Whilst improvement actions remain broadly on track the impact of these is not yet being reported on a consistent basis. Overall, the impact of improvement activity is broadly the same as previously reported to the Improvement Board in April 2023. A key reason for this is that impact measures have not been agreed for all priority improvement actions yet. Whilst most activity has been progressed or completed it is not always clear what difference this has made and whether children, young people and families are better off as a result. This highlights the need to ensure that impact measures are agreed as a matter of priority and routinely reported to future Improvement Boards, starting at the July 2023 Board. It is anticipated that the review proposals outlined below in section 4 will assist.

2.4 Another issue concerning the BRAG ratings relates to a number of priority improvement deadlines which, upon reflection, may have been overly optimistic when they were first set, particularly given the low base for many of these. Having said this, all priority improvement actions have now started and an increasing proportion are now progressing well or have already become business as usual, as indicated by the Green and Blue BRAG ratings. The pace of improvement will however remain a key concern and it is important that the service, council and wider partnership continue to build and maintain focus and momentum moving forward.

2.5 Overall, the number of Red BRAG rated priority improvement actions has decreased from 8 to 2 and in terms of impact this has increased from 1 to 2. The details of the Red BRAG rated improvement activity and impact are outlined below:

#	Improvement Activity	Commentary	Deadline
2.1	Impact of workforce strategy to recruit social work practitioners and managers	Despite the improvement activity undertaken to date, the impact of this has not had desired effect. The recruitment of new permanent social work practitioners and team managers remains very low. Reporting for the past period indicates 0 appointments and 2 conversions from agency to permanent contracts. The DCS has escalated this with the Corporate Leadership Team.	March 2023
2.4	Foster carer recruitment campaign	Improvement activity and impact of this are both RAG Rated Red. Improvements in the Fostering Service have been focused on rebuilding the trust and confidence of current foster carers. Following the recent appointment of the new Marketing Officer the launch of the Foster Carer Recruitment Campaign can now begin. This will be further strengthened and supported by the recent developments in respect of the Communications Strategy which will address priority improvement campaigns, including the Foster Carer Recruitment Campaign.	March 2023
7.5	Care experienced young people's health histories	To date, there is no evidence that this priority improvement action has been progressed. Some health related priority actions (7.1 and 7.2) have however been scoped. More focused work is underway but not reported yet. Following consultation with the Improvement Board Chair, it is proposed that Health partners are asked to present a report to the next Improvement Board in July 2023 to outline the improvement activity that has been progressed and the impact this is having, including 7.1, 7.2 and 7.5 regarding health histories.	March 2023

3.0 Top 5 Improvements

3.1 The top 5 improvements was introduced for the first time in the previous Improvement Board. This development has not yet been fully embraced by the delivery boards, which have been slow at identifying areas of improvement to highlight and celebrate. This will hopefully become more of a focus as more impact measures are developed and as a result of the proposed changes that are set out in section 4 below.

3.2 The top 5 improvements for this Improvement Board are SEND related and are set out below:

#	Improvement activity	Improvement Impact
1	SEND Strategy (10.1)	Setting priorities - Children and families report being clearer about Herefordshire’s priorities and how these respond to what they have said about what needs to change and improve.
2	SEND strategic oversight and direction for improvement (10.2)	Performance - The Strategic Board report confidence in the SEND Action Plan which is gaining traction. For example, EHC plans issued within 20 weeks = 100% in April 2023. Plus the LGA (April 2023) follow up to review focusing on the quality of completed EHC plans reported positive findings: <i>‘We were impressed with the professional and dedicated team of case workers who were appreciative of the demands placed on other agencies but determined to complete the ECHPs. The common theme was the safety of children, their well-being and the opportunity to develop to their full potential.’</i>
3	SEND partnership (10.3)	Co-production with children and young people - Work to develop engagement and participation is a particular priority with children and young people’s views informing and shaping the focus of the SEND Strategy
4	SEND offer (10.4)	Parent Carer feedback – parents and carers report that the offer adaptations are easier to navigate and improves access to information.
5	SEND sufficiency (10.7)	Sufficiency – sufficiency planning for September 2023 is on track to open: <ul style="list-style-type: none"> ➤ 4 new mainstream Autism bases (2 x Primary & 2 x Secondary) offering 24 additional places ➤ New Satellite Hub for SEMH

		<p>➤ School's Re-Building Programme - Westfield Special School will be prioritised for re-building</p> <p>Pupils with SEND will now be able to access suitable local education provision to meet their assessed needs and be supported to reach their potential.</p>
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4.0 Improvement Board Infrastructure Review and Rationalisation

4.1 Since the last Improvement Board in April 2023, there has been a review to rationalise the improvement infrastructure. The review was undertaken by Gladys Rhodes White, Gail Hancock and Joni Hughes and proposes a number of recommendations to streamline and coordinate improvement activity in order to improve accountability and pace.

4.2 The proposals have been shared and agreed with all Senior Responsible Officers and, subject to feedback from Improvement Board members, the proposed way forward will hopefully mark a step change in current arrangements.

4.3 A summary of the review proposals is as follows:

- a) The seven transformation programme delivery boards will be reduced to three and will include: Practice and Service Delivery; Workforce; and, Commissioning and Resources.
- b) Each delivery board will have nominated senior responsible officers as Chair and Vice Chair. They will possess the relevant technical knowledge, skills and experience and have the necessary leadership to drive improvements forward.
- c) The four key partnership boards will become directly responsible for progressing relevant priority improvement actions and will be asked to report directly to the Improvement Board.
- d) The four partnership boards will include; the Herefordshire Safeguarding Children's Partnership; the Children and Young People's Partnership; the Corporate Parenting Board; and, the SEND Strategic Board.
- e) The Project Management resources will be reconfigured to continue supporting the three delivery boards and also provide additional support to the four partnership boards
- f) All existing priority improvement actions contained in the Children's Improvement Plan will be assigned to the appropriate delivery or partnership board

4.4 The senior responsible officers, who will be the chairs and vice chairs for the delivery boards are as follows:

- Practice and Service Delivery (SROs: Rachel Gillott / Gail Hancock)
- Workforce (SROs: Tracey Sampson / Darryl Freeman)
- Commissioning and Resources (SROs: Hayley Doyle / Victoria Gibb)

4.5 The senior responsible officers, chairs and service lead for the four partnership boards are as follows:

- Herefordshire Safeguarding Children's Partnership (HSCP) (SRO: Kevin Crompton)
- Corporate Parenting Board (CPB) (Chair: Councillor Ivan Howell, SRO: Victoria Gibb and Service Lead: Julie Mepham)
- Children and Young People Partnership (CYPP) (SRO: Matt Pearce), and the;

- SEND Strategy Board (SRO: Liz Farr).

4.6 There will be an expectation that Quality Assurance and Performance reporting will be core for all partnership boards, although the Children’s Services SRO, Victoria Gibb, who is the new incoming permanent Service Director starting on 4 June 2023, will continue to oversee the reporting of the established monthly auditing and performance reports for Children’s Services.

4.7 A standard agenda and reporting template have been developed to ensure a comprehensive and consistent approach. The Improvement Board will receive delivery board reports at every board meeting. The Improvement Board will receive Partnership reports every other board meeting and will adopt the following pairing and reporting pattern set out below:

- HSCP and CPB – starting with reports to the 19 July and then 11 October Improvement Boards
- CYPP and SEND Board – starting with reports to the 30 August and then 22 November 2023 Improvement Boards

5.0 Summary of Board Requests:

- a) To endorse the review proposals, as outline in section 4
- b) To endorse the proposal to seek a Health report at the next Board, as outlined in section 2.5

6.0 Arrangements for presenting this report

5.1 Due to annual leave, this cover report will be presented by Bart Popelier, Improvement Lead. Gladys Rhodes White, DfE Independent Improvement Board Chair, will address section 4 which relates to the review of the Improvement Board infrastructure and related proposals.

Gail Hancock

Interim Service Director (Improvement)

1 June 2023



Herefordshire Children's Services Improvement Plan
7 June 2023 Improvement Board
Progress Update Report for May 2023

Version control:

<i>Author Name and Role</i>	Darryl Freeman, Director of Children's Services
<i>Date Created</i>	24/11/2022
<i>Date Issued</i>	20/12/2022
<i>Description</i>	Finalised Improvement Plan
<i>File Name</i>	Herefordshire Children's Services Improvement Plan v3.0
<i>Format</i>	MS Word
<i>FOI Disclosure</i>	
<i>Geographic Coverage</i>	Herefordshire
<i>Group Access</i>	Participants in Improvement planning
<i>Master Location</i>	Improvement Board
<i>Security Classification</i>	Open
<i>Status</i>	Final
<i>Subject</i>	Children's Services improvement
<i>Title</i>	Herefordshire Children's Services Improvement Plan
<i>Type</i>	Improvement Plan incorporating Progress Report

<i>Version</i>	<i>Status</i>	<i>Date</i>	<i>Description of change</i>	<i>Pages affected</i>	<i>Review date due</i>
0.01	Draft	24/11/2022	Draft for Operational Board		28/11/2022
0.02	Draft	28/11/2022	Draft for Corporate Leadership Team		01/12/2022
0.03	Draft	01/12/2022	Draft for Improvement Board	Appendix A and B	11/01/2022
0.04	Draft	15/12/2022	Draft for Cabinet	Pages 9, 22 & 24	20/11/2022
3.0	Final	19/12/2022	Final version for Ofsted	Pages 7, 9, 15, 22, 24, & 25	11/01/2023
3.1	Final/update	11/01/2023	Improvement Board Progress Report Update	All pages from 10 to 39	01/03/2023
3.2	Final/update	01/03/2023	Improvement Board Progress Report Update	All pages from 10 to 39	19/03/2023
3.3	Final/update	19/04/2023	Improvement Board Progress Report Update	Pages 6 & 7 plus 10 through to 70 and page 72	07/06/2023
3.4	Final/update	07/06/2023	Improvement Board Progress Report Update	All pages from 10 to 39	19/07/2023

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1: Corporate responsibility for the help and protection of children and those in care and care leavers, so this is prioritised and embedded across the council and partnerships.....	10
3: The timely and robust identification and multi-agency response to children and young people who are at risk of harm, including, but not limited to, the response to pre-birth children and babies, 16- and 17-year-olds who present as homeless, children living in private fostering arrangements and children who go missing from home and care.	31
4: The quality of practice including assessments, plans, planning and purposeful visits that are responsive to risk and need.	38
6: Monitoring and tracking to prevent drift and delay. This includes the monitoring and tracking of children in the public law Outline (PLO), permanence planning, children subject to deprivation of liberty orders and those placed in unregistered children’s homes.....	54
7:The availability of support and services to meet children and young people’s needs, including timely access to therapeutic interventions, access to dentistry, life-story work, emotional and mental health support, help for young people to support transitions into independence and sufficient suitable accommodation.	62
8: Management oversight and grip across the service to include clear structures and service pathways, and regular and effective supervision.	68
10: Services to support children and young people with Special Educational Needs and / or a Disability (SEND)	80
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Background

Children’s Services were inspected by Ofsted in July 2022 under the Inspecting Local Authority Children’s Services (ILACS) framework.

The inspection report was published on 21 September 2022 and is available on the Ofsted website¹.

The overall judgement was that Herefordshire Children’s Services are ‘inadequate’. The judgements contributing to this outcome are as follows:

Judgement	Grade
The impact of leaders on social work practice with children and families	Inadequate
The experiences and progress of children who need help and protection	Inadequate
The experiences and progress of children in care and care leavers	Inadequate
Overall effectiveness	Inadequate

Following the inspection, we have moved openly and swiftly to acknowledge the key areas for improvement, many of which we had already identified and incorporated into our existing Transformation Programme. We have taken immediate action to increase capacity where it was needed to strengthen our MASH (Multi-Agency Safeguarding Hub) and other frontline services for children and young people.

At the time of the inspection, we were already developing a number of practice priorities within the service and were focussing on addressing some wider systems issues. We have increased the pace of this activity and we know that in order to realise our vision and aspiration for improved children’s outcomes, a comprehensive transformation of our service is required to achieve the long-term and sustainable changes that local children, young people and families in Herefordshire need, deserve and expect.

This high-level Improvement Plan has been prepared in collaboration with a range of stakeholders including children, young people, parents and carers, our workforce and our multi-agency / cross sector partners. Some of this engagement has been very challenging, particularly given the impact and legacy of inadequate service delivery. It has been necessary to do this however so that we can confront and abate the current problems and make improvements as quickly as possible. We intend to continue engaging with our stakeholders to further develop a local conversation whereby we will listen, address feedback and take appropriate action as an integral part of our improvement journey as we move forward.

¹ <https://files.ofsted.gov.uk/v1/file/50192875>

Our transformation programme

Our plan sets out the first phase of our post-inspection improvement activity as a direct response to receiving the inspection feedback and report. Having accepted the service's shortcomings, we are focusing on what we need to do to deliver safe and effective core services as quickly as possible. It focuses on the next 12-18 months although the transformation activity will necessarily take longer than this and the plan will be reviewed, refreshed and further developed as required. This builds upon the activity undertaken before the inspection to diagnose the extent of existing weaknesses and is followed up with a focus on strengthening core systems, clearing backlogs, securing thresholds and stabilising the service. We will continue to work at pace to problem solve and assure the quality of our practice moving forward.

The plan carries forward the key elements of the previous plan and reflects changed priorities following the recent Ofsted inspection. Our transformation programme has a number of Projects, including Workforce, Service and Practice Development, Performance and Quality Assurance, Commissioning Resources, Early Help and Partnerships, Corporate Parenting and Special Educational Needs and / or Disabilities (SEND). Improving outcomes for children with Special Education Needs and/or Disability is not restricted only to the SEND work stream and is included in each of the work streams. Each work stream has a member of the Corporate Leadership Team as the Senior Responsible Officer (SRO)

The corresponding project plans have all been reviewed and aligned to address the high level actions for each of the priority improvement areas identified by Ofsted inspection, and the LGA peer review of SEND services. A diagram outlining the governance arrangements is included at Appendix A and outlines the relationship between the Projects, the plan, and the Improvement Board.

For ease of accountability, responsible leads are primarily senior officers of the council but there is an increased focus on partnership working reflected in the various task and finish groups and in the project plans that sit behind this high-level plan.

Our improvement activity will be supported and driven by strengthened performance management and quality assurance arrangements, with clear lines of accountability that are overseen by single and multi-agency governance arrangements reporting into our Improvement Board, which is independently chaired by our Department for Education (DfE) Improvement Advisor.

We will be reflective and embrace the learning opportunities that are afforded to us from working in partnership with our Commissioner, Sector Led Improvement Partners and through an open dialogue with support and challenge provided by our colleagues in the DfE and Ofsted.

How we will achieve success

Success is dependent upon a county-wide approach working together with the Service, the Council and all stakeholders, including working in partnership with parents and carers and taking full account of children and young people's voices.

High support and high challenge will be essential, backed by robust governance arrangements and effective partnerships. In addition to the work of the Improvement Board, key partnerships including the Herefordshire Safeguarding Children Partnership (HSCP), Corporate Parenting Board, Children and

Young People’s Partnership, SEND Partnership Group, Health and Wellbeing Board and Community Safety Partnership will each have a significant contribution to make to deliver improved services and achieve better outcomes for children, young people and families in Herefordshire.

Our workforce

Our workforce is our greatest asset and we are building an organisational culture characterised by strong relationships, high support and high challenge. We are committed to working with our workforce and have established a Staff Reference Group, have appointed a Principal Social Worker and developed other engagement fora, to ensure our workforce has a voice that is championed to inform and influence our improvement activity. The Staff Reference Group meets monthly and their representation is heard at the Improvement Board.

Evidencing Improvement Activity and Impact

Improvement priorities set out in this plan will be measured in terms of progressing the pace of improvement activities as well as the impact that these are having on outcomes for children, young people and families. The progress reporting will provide a BRAG rating to determine if the progress of improvement activity is on track as well as BRAG rating the impact it is having. BRAG Ratings will be informed by the Transformation Programme Delivery Dash Boards, including consultation with Senior Responsible Officers and Service Leads as well as analysing quality assurance reporting about the standard of practice and performance reporting in respect of management information data.

Impact ‘BRAG’ rating guide:

The BRAG ratings will report on the status of both the improvement activity (the tasks/actions) and the overall impact and outcome of these in respect of improving outcomes with children, young people and their parents, carers and families. This will show the status of the activity being undertaken both in terms of its timeliness and progress as well as confirming if it is having the desired impact to deliver improved outcomes. Details of the BRAG descriptors are as follows:

Blue ratings in terms of improvement activity will indicate when activity has been completed according to agreed plans. In terms of impact, the improvement activity delivers a consistently good or better impact on practice and performance that is secure, embedded and improves outcomes for all/vast majority of children.

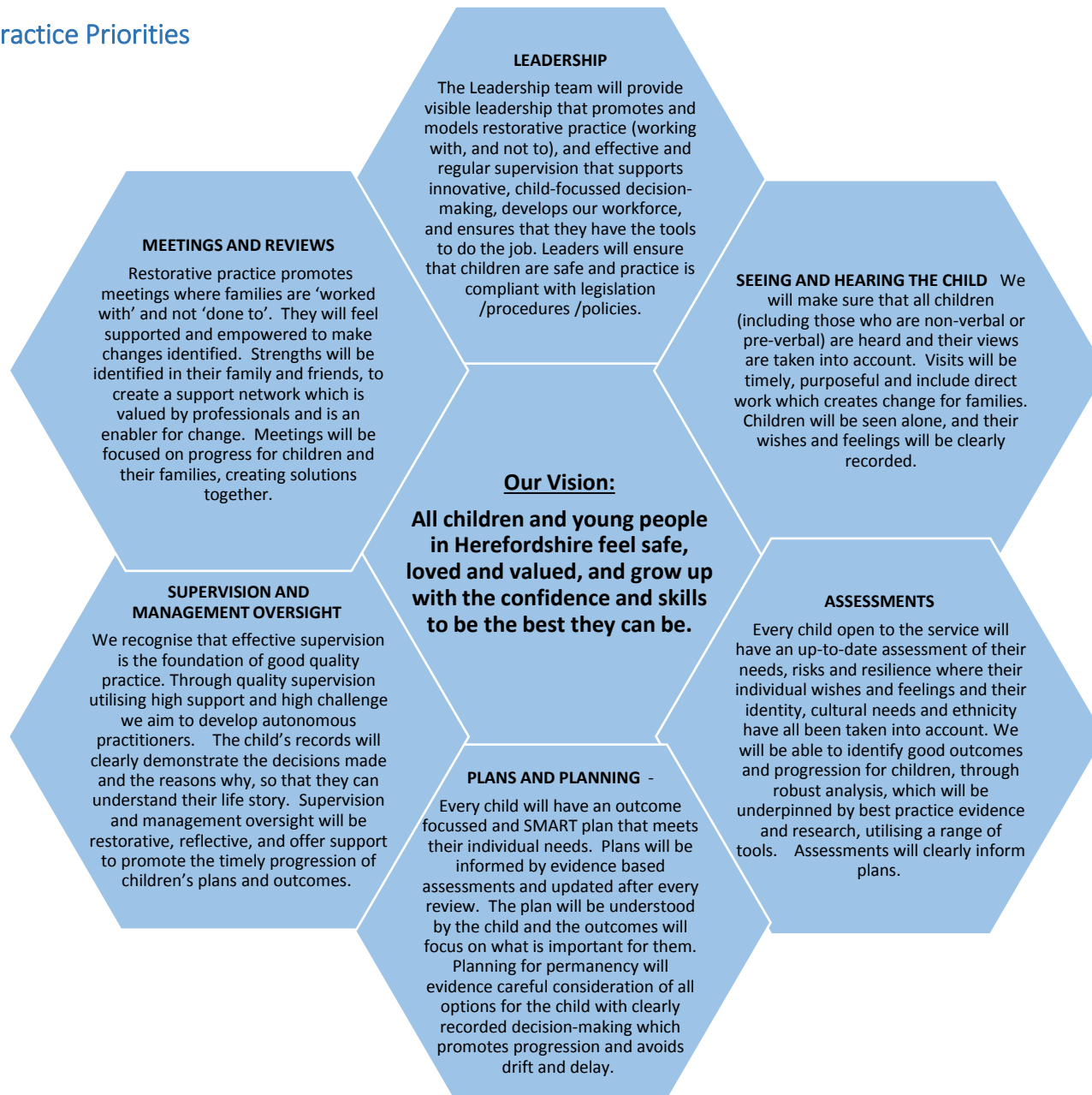
Red ratings in terms of improvement activity will indicate where activity has not started, has stalled or stopped due to unresolved issues which are preventing progress, causing delay and presenting significant risks. Inevitably, this has an adverse impact so children, young people and their parents/carers experience very limited or no positive outcomes.

Amber ratings in respect of improvement activity will indicate where activity has started and although some issues have been identified these are being dealt with but are causing some delay. In terms of impact, an Amber BRAG rating indicates that whilst there is some positive impact this is not yet consistent or widespread for all/most children.

Green ratings in terms of improvement activity will indicate when activity has started, is on track and progressing according to agreed plans. In terms of impact, a Green BRAG rating indicates that this is impact is positive with most children and young people experiencing a consistently good service that improves outcomes.

<p>Activity/Impact Key</p>	<p>Activity Not yet due to start Impact Activity not started/too early to measure impact yet</p>	<p>Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people</p>	<p>Activity Started with some issues/delay Impact Some positive impact but this is variable and does not consistently improve outcomes for children and young people</p>	<p>Activity Not on track and at risk Impact Very limited or sporadic impact on improving outcomes for a few children and young people</p>	<p>Activity Completed and now 'business as usual' Impact Achieves consistently good and better impact that delivers improved outcomes for children and young people</p>
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Our Practice Priorities



Areas for Improvement

The Ofsted inspection report identifies the following nine improvement areas which provide the framework for this high level Herefordshire Children's Services Improvement Plan:

1. Corporate responsibility for the help and protection of children and those in care and care leavers, so this is prioritised and embedded across the council and partnerships.
2. The sufficiency and stability of staff across the workforce, including sufficient numbers of foster carers, so children receive a timely response to having their needs identified and met across the service.
3. The timely and robust identification and multi-agency response to children and young people who are at risk of harm, including, but not limited to, the response to pre-birth children and babies, 16- and 17-year-olds who present as homeless, children living in private fostering arrangements and children who go missing from home and care.
4. The quality of practice including assessments, plans, planning and purposeful visits that are responsive to risk and need.
5. Timely and effective multi-agency arrangements to ensure children are protected and enter care when required.
6. Monitoring and tracking to prevent drift and delay. This includes the monitoring and tracking of children in the Public Law Outline (PLO), permanence planning, children subject to deprivation of liberty orders and those placed in unregistered children's homes.
7. The availability of support and services to meet children and young people's needs, including timely access to therapeutic interventions, access to dentistry, life-story work, emotional and mental health support, help for young people to support transitions into independence and sufficient suitable accommodation.
8. Management oversight and grip across the service to include clear structures and service pathways, and regular and effective supervision.
9. Performance and quality assurance arrangements to support and test service improvements.

In addition to the nine improvements areas outlined above, the plan also includes a tenth improvement area that focuses on Special Educational Needs and/or Disabilities (SEND). This improvement priority has been included following a SEND Peer Review undertaken by the Local Government Association (LGA) in October 2022.

1: Corporate responsibility for the help and protection of children and those in care and care leavers, so this is prioritised and embedded across the council and partnerships.

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
1.1 Allocate additional corporate resources with dedicated project management support to strengthen strategic and operational planning for the improvement and transformation activity.	Director of Programme Management Office & Performance	October 2022	<ul style="list-style-type: none"> Post-inspection, Corporate Senior Responsible Officers and Service Leads were aligned with the Transformation Programme Delivery Boards Programme Management Officer resources were allocated New Improvement Director appointed (October 2022) These corporate/service enablers and activities has largely addressed the 2022 inspection concerns that “Improvement planning requires further strengthening to provide strategic cohesion and detailed operational plans, with clear timescales to inject pace, prioritisation and accountability.” (pg. 9) Greater pace is required to address improvements. The March 2023 Ofsted monitoring visit letter stated: “While leaders understand the scale of improvement, and have started to implement a comprehensive improvement plan the pace of improvement is too protracted.” 		

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Activity/Impact Key	Activity Not yet due to start Impact Activity incomplete/too early to measure impact	Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people	Activity Started with some issues/delay Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people	Activity Not on track and at risk Impact No/very limited impact on improving outcomes for children and young people	Activity Completed and now ‘business as usual’ Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people
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			<ul style="list-style-type: none"> • A stock take of the Improvement Board proposed changes to streamline, coordinate, improve accountability and add pace – completed May 2023 • Proposals are outlined in the Improvement Plan cover report for the June Improvement Board • Proposed changes to be made with immediate effect in advance of the next Improvement Board in July 2023 		
1.2 Introduce trauma awareness training as part of the Children’s Service learning and development offer for all relevant staff and members of the council so they can be signposted when appropriate.	Service Director (Improvement) **	April 2023	<ul style="list-style-type: none"> • Scoped transactional options for trauma awareness raising training, including adverse childhood experiences, (ACES), including partnership consultation with Police and Health to collaborate about a joined up multi-agency approach • Task & Finish Group convened with Social Care Academy, Council OD and HSCP to explore and agree tiered approach. • Identified an e-learning modular programme commissioned by the OPCC West Midlands (WM) and funded by the Home Office Early Intervention Fund in partnership with Barnardo’s • Other local authorities and safeguarding partnerships in the WM region are already hosting this programme which includes the following: <ul style="list-style-type: none"> ○ Brain Development in Early Years 		

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			<ul style="list-style-type: none"> ○ The Impact of Childhood Adversity ○ Social, Health and Community Impacts of ACEs Early Trauma ○ Protective Factors ○ Looking at ACEs through a Trauma Informed Lens ○ Building Resilience ● Identified local learning platform solution with funding and technical options being decided. Estimated time line of up to 3 months (for September 2023) ● Scope of Tier 2 options being explored with local partners. Potentially looking at a conference with local and guest presenters and workshops facilitated by local presenters/leads. Task and Finish Group meetings on-going. ● ** Following consultation with the HSCP Chair – this improvement priority action will be progressed under the auspices of the HSCP to reflect the partnership focus 		
1.3 Re-establish the Children and Young People’s Partnership (CYPP) to create a multi-agency/cross sector forum to develop an Early Help offer with families	Director of Public Health	March 2023	<ul style="list-style-type: none"> ● CYPP Board and Terms of Reference (TOR) completed with revision of membership due 27 February 2023 - completed ● First Board meeting took place on 28 November 2022 - completed 		

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			<ul style="list-style-type: none"> • Board Workshop scheduled for 30 March 2023 to review CYPP Action Plan - completed • CYPP Action Plan to be presented at subsequent Board Meeting on 24 April 2023 • CYPP now established with TOR, membership and plan. • Impact measures are being progressed as part of the implementation of the new health and wellbeing strategy. Public health are currently working with analysts to develop a shared outcomes framework focusing on the best start in life and good mental wellbeing following a logic model/theory of change approach that will go on to inform meaningful actions to deliver against the two health and wellbeing board priorities. To include: <ol style="list-style-type: none"> i. Children enjoy good health and wellbeing For example, we will reduce the levels of obesity and improve the oral health of children ii. Children are protected from harm at home and in their community For example, we will develop and broaden access to our early help and prevention offer across our communities iii. Children are able to achieve their early development milestones For example, children achieving good communication skills and in receipt of their full early years entitlements 		
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			iv. Parents are well-supported during pregnancy and post-birth and able to access appropriate information, resources and services For example, a greater proportion of pregnant women have a healthy pregnancy and are supported in relation to stopping smoking and being a healthy weight		
1.4 Work quickly and collaboratively with the community and voluntary sector to utilise assets and increase capacity for undertaking Early Help assessments and providing family support.	Head of Service (Early Help)	March 2023	<ul style="list-style-type: none"> • Engagement event held and baseline position established • Early Help & Prevention Strategy completed and presented to SMT 14 February and DLT on 20 February in time for CYPP Board on 27 February 2023 - completed. • Working Group established to implement Early Help and Prevention Plan • Early Help assessment training already provided to identified partners and monitoring underway to analyse performance and impact • EHA demand fluctuates (124 March & 66 April 2023) but the proportion of completed remains fairly static with 49% completed by Children’s Services and 51% by partners, including; <ul style="list-style-type: none"> ○ Education Primary ○ Education Secondary ○ Health Visitor ○ Housing 		

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<p>1.5 Review the work of the Corporate Parenting Board (CPB) and the local offer for care experienced young people, including access to education, employment and training</p>	<p>Head of Service (Corporate Parenting)</p>	<p>March 2023</p>	<ul style="list-style-type: none"> • Impact measures tbc • CPB TOR and membership agreed • Review of Corporate Parenting Strategy including review of a refreshed Care Leaver’s offer completed • Engagement with care experienced young people to establish the Child in Care Council to inform and strengthen the relaunch of the Care Leaver’s Offer • Corporate Parenting Strategy, Action Plan and Care Leaver’s Offer presented to CPB 15 February. To be presented to DLT 5 June 2023. • Change request of formal launch deadline to July 2023 to take account of election period. • Recent elections held and Cllr Ivan Howell identified as Lead Member & Chair of the CPB. Councillor representation from each party yet to be announced. • LGA Member Training to be undertaken for CPB. • Impact measures and progress updates to be reported directly to the Improvement Board. 	<p>Yellow</p>	<p>Grey</p>
<p>1.6 Corporate Leadership Team (CLT) to identify a corporate lead as a council-wide ‘champion’ for corporate parenting.</p>	<p>Chief Executive</p>	<p>September 2022</p>	<ul style="list-style-type: none"> • Corporate Director (Community Wellbeing) appointed as council-wide lead • Corporate Parenting Staff Group being developed with support from OD to establish mechanism for promoting corporate parenting across the Council. 	<p>Blue</p>	<p>Grey</p>

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			<ul style="list-style-type: none"> Departmental membership, focus and progress to be decided and reported to future Improvement Boards in line with the CPB activity 		
1.7 Ensure multi-agency governance arrangements provide a clear framework for decision making and accountability, specifically in relation to the Improvement Board and the Herefordshire Safeguarding Children's Partnership (HSCP), but also in relation to other key partnerships.	Corporate Director for Children and Young People	March 2023	<ul style="list-style-type: none"> Mapping process with relevant HSCP Sub Group Chairs completed HSCP Business Plan developed to align with the Children's Improvement Plan as it relates to HSCP priorities – completed March 2023 Improvement Board stock take proposes HSCP to be directly accountable for identified improvement actions – see cover report. Impact measures and progress updates to be reported directly to the Improvement Board by the HSCP 		
1.8 Implement a Communication Strategy so 'Messages that Matter' are disseminated clearly and regularly to all key stakeholders.	Service Director (Improvement)	February 2023	<ul style="list-style-type: none"> Provisional scoping of the strategy completed in accordance with the existing Corporate Communication Strategy – completed November 2022 Joint meeting with Corporate Communications Team held January 2023 with funding identified to appoint dedicated children's improvement communication lead as SPOC for internal & external messages and campaigns. 		

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			<ul style="list-style-type: none"> • Two consecutive recruitment campaigns identified candidates who initially accepted but subsequently declined the role due to the location of Herefordshire. • New interim Service Director now appointed and convened joint meeting with 'Be Bold' external PR and Media Company in April 2023 to commission outstanding communications strategy as a service priority. • Consultation with 'Be Bold' scoped new comms strategy/plan to address Children's internal and external improvement messaging plus priority improvement campaigns. Draft signed off May 2023 • Preliminary meeting held to identify priority developments and associated comms priorities including Ofsted monitoring visit letter, publication of the Independent Panel report, Commissioner's stock take and first review and long term Practice Improvement Partnership developments • Post-board comms – Chair's letter to continue to be published following each Improvement Board 		
1.9 Launch a Leadership Pledge to communicate the purpose, values, strategy and goals for improving outcomes for local children and young people.	Corporate Director for Children and Young People	January 2023	<ul style="list-style-type: none"> • To be launched as part of Communication Strategy (see above) and relationship with Leeds • Revision of approach to encompass new 'restorative' Practice Framework. 		

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			<ul style="list-style-type: none"> • Long term practice improvement partnership with Leeds has been agreed (subject to final sign off form Minister) • Leeds improvement partnership activity has begun and includes: <ul style="list-style-type: none"> ○ On site joint audit activity 12 – 14 June ○ Staff focus groups ○ ECHO service development consultation ○ Supervision consultation ○ DLT development 		
1.10 Ensure there are strong and effective arrangements in place to address identified concerns about multi-agency safeguarding practice/arrangements which includes escalation to the Herefordshire Safeguarding Children Partnership (HSCP) for swift resolution when required.	Herefordshire Safeguarding Children Partnership (HSCP) Independent Scrutineer	January 2023	<ul style="list-style-type: none"> • Review of HSCP arrangements and development work approved by Executive Partnership Group. • Independent Scrutineer completed an assessment and presented recommendations in November 2022, including a recommendation for a HSCP Workshop to scope Business Plan • Confirmation from HSCP Scrutineer: <ul style="list-style-type: none"> ○ Escalation policy, with learning guide, available via HSCP website ○ All escalation notifications received by HSCP Business Unit ○ 2022 data reports x 5 escalations ○ 2023 YTD data reports x 3 escalations ○ Recent Level 4 escalation identified issues with the process which resulted in delay 		

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			<ul style="list-style-type: none"> ○ HSCP Quality & Effectiveness Sub Group standard agenda item – update report due at next Improvement Board in July 2023 		
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Expected Outcomes (how we will know)
<ul style="list-style-type: none"> • Elected Members and the Corporate Leadership Team (CLT) will take timely and necessary action, supported by accurate data that makes a difference for children and young people. (Performance data and records of decisions) • Multi-agency partners will hold equal responsibility and accountability for children who are identified at risk. This success will be seen in the reduction of children on repeat child protection plans and children requiring court intervention. (Performance data and quality assurance activity) • All of those with corporate parenting responsibilities will have sufficient understanding of their role to offer robust challenge to ensure positive outcomes for children in our care and those that we have previously looked after. (Feedback)

Measures that Matter
<ul style="list-style-type: none"> • Percentage and number of care experienced young people aged 19 – 21 in education, employment and training (higher is good) 16/83 (19%) • Percentage and number of Early Help assessments completed by services other than the Herefordshire Council Early Help Team 28/36 (78%)

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2: The sufficiency and stability of staff across the workforce, including sufficient numbers of foster carers, so children receive a timely response to having their needs identified and met across the service.

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
2.1 Reinvigorate our Workforce Strategy, informed by a comprehensive workforce profile, by increasing our recruitment and retention activity so there is an increasingly stable, permanent, skilled and experienced workforce providing continuity of support and intervention with children, young people and families	Director of Human Resources & Organisational Development and Deputy Chief Executive (Children’s Improvement)	March 2023	<ul style="list-style-type: none"> • Draft strategy and implementation plan now led by the Deputy CEx (Children’s Improvement) in consultation with Director of HR and OD • Recruitment microsite launched November 2022 • Dedicated Recruitment Team established October 2022 • Workforce profile completed • Workforce data update 17 May 2023: <p>Social workers</p> <ul style="list-style-type: none"> ○ 65 Permanent Social workers required ○ 0 Permanent social workers recruited in month to date ○ 2 agency conversions to date <p>Wider directorate</p>		

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			<ul style="list-style-type: none"> ○ 83 Vacancies (16 vacant & 67 filled with agency) 		
2.2 Refresh and relaunch induction arrangements for new starters so they receive a comprehensive Herefordshire welcome, orientation and introduction to our practice priorities and ways of working with local children, young people and families	Principal Social Worker (PSW)	March 2023	<ul style="list-style-type: none"> ● New permanent Principal Social Worker appointed November 2022 ● Refresh of induction arrangements completed December 2022 ● Consultation with staff in January/February 2022 ● Relaunch children’s social care induction March 2023 ● New starter’s induction to include: <ul style="list-style-type: none"> ○ Day 1 Corporate Induction ○ Day 2 MOSAIC training ○ Day 3 Service’s new starter induction ○ Half Day 4 Service’s new manager induction ○ Plus core foundation CPD 4 x 2.5 hour modules re: Practice priorities, standards and principles 		

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			<ul style="list-style-type: none"> • Evaluation process due to obtain feedback from new starters. • Need to explore and build resilience through Social Care Academy to support PSW delivery 		
2.3 Develop the Academy’s continuing professional development (CPD) offer and progression pathway for professionals working directly with children, young people and families to ensure it is aligned with our priorities and their learning needs.	Principal Social Worker (PSW)	March 2023	<ul style="list-style-type: none"> • New Social Worker’s Career Progression Pathway approved and launched with 2 SWs progressed at first panel. • Future panels now scheduled. • 2022/23 Qtr 4 Social Care Academy (SCA) CPD – completed • Core Foundation Training (4 x 2.5 hour modules) for all existing social care staff was launched January to March 2023. Evaluation report due April 2023 for DLT. • 2023/24 SCA CPD programme for launch in April 2023, including: <ul style="list-style-type: none"> ○ Induction (PSW to facilitate, as outlined above) ○ Core Foundation Programme x 4 modules (SCA/PSW) 		

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			<ul style="list-style-type: none"> ○ Supervision (Dr Anna Harvey & Associates, tbc) ○ Restorative Practice (Leeds LT Improvement Partner, introductions June 2023) ○ Trauma informed/ACES aware (see above) ○ HSCP multi-agency training ○ Aspirant Team Manager Development Programme (Ingsons) ○ ASYE (SCA learning & support programme) ○ Apprenticeship Programme (Regional bid tbc) ○ Practice Educators (Regional bid tbc) ● Social Care Academy to evaluate each component of the CPD ● Exercise to undertake visits to performing Social Care Academies to scope and develop best practice in HCC 		
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<p>2.4 Review the Fostering Service capacity and capability to support Herefordshire’s foster carers and launch a new Campaign to recruit more local foster carers.</p>	<p>Head of Service (Fostering, Adoption & Placements)</p>	<p>March 2023</p>	<ul style="list-style-type: none"> ● Recruitment to build officer capacity to provide assessment and support remains a challenge <ul style="list-style-type: none"> ○ Rolling advert has yielded no permanent SWs. ○ Successful recruitment of agency SWs is on-going. ○ The Assessment Team has 3 SW vacancies being recruited to, 2 SWs identified and interviews for 3rd SW is on-going. These vacancies are due to 2 agency SWs who joined and left within a few days. ○ The Fostering Support Team is fully staffed ○ The Permanence Support Team is fully staffed. ○ Service and Permanence Support Manager vacancies are out to advert with no applicants to date. ○ Recruitment of a clinical therapist is out for advert with 5 applications received. ● Stakeholder engagement events with foster carers initiated in 		
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			<p>early November 2022 proved very challenging.</p> <ul style="list-style-type: none"> ○ There continue to be monthly meetings with HC reps association and bi monthly meetings with all foster carers. ○ There are less complaints and good engagement with the reps regarding co-production to help develop the service. Minutes and actions of meetings sent out to all foster carers ● One to one consultations and remedial / reparatory action to retain existing foster carer households continues to rebuild trust and relationships: <ul style="list-style-type: none"> ○ HOS has undertaken over 25 x 1 to 1 visits with foster carers with specific worries. ○ 2 x All Foster Carer Meetings have been convened, with one attended by Service Director ○ From June 2023, monthly All Foster Carer Meetings are 		
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			<p>scheduled in addition to monthly meetings with identified Reps.</p> <ul style="list-style-type: none"> ○ A number of LADO/Standard of Care concerns have been resolved by the Service Manager and HOS. ○ HC Fostering Reps escalate matters to Service Manager and HOS appropriately when required ● Foster Carer fees and allowances uplift: ○ Paper due back for DLT consideration on 5 June 2023 ● Fostering cost of living and fees benchmarking exercise: ○ Completed and to be considered by DLT on 5 June 2023 (represents a £327,000 budget pressure) ● Training Needs Analysis ○ Completed by Fostering Network in January 2023 and proposal approved ● Foster Carer recruitment and retention: ○ Recruitment Strategy and Action Plan agreed by SMT and DLT (NB: 		
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			<p>slight revision required for 2023/2024 following discussions regarding sufficiency and recruitment of Marketing Officer halfway through the year).</p> <ul style="list-style-type: none"> ○ On Friday 26 June, DfE launched and invited bids for Fostering Cluster Groups (of between 7 to 12 LAs in one cluster group with one host LA plus one recruitment 'front door' - impact on our recruitment to be considered). ○ Part 2 of the DfE initiative is inviting funding bids for the Mockingbird to commence/expand this programme. The HOS recommends applying for the Mockingbird funding. This is 2 year funding at which point the service will need to mainstream the costs into the budget. ● Marketing Officer - now appointed and due to start on 2 June 2023 		
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<p>2.5 Review our Sufficiency Strategy to increase the availability and choice of homes, including foster homes, to meet the needs of children and young people in our care</p>	<p>Service Director (All-Age Commissioning)</p>	<p>March 2023.</p>	<ul style="list-style-type: none"> • Interim Commissioner appointed to review Sufficiency Strategy - review complete • New Home Finding Team (HFT) recruitment campaign completed and HFT permanent staff in post • 903 placement data project to cleanse and correct placement data - completed • Children in Care needs profile - completed. • Options appraisal to scope children’s residential accommodation placement options - completed • Further draft of Sufficiency Strategy completed - to be presented to DLT 5 June 2023 • Cabinet member decision (non-key decision) planned for post-election due July 2023 	<p style="background-color: yellow;"></p>	<p style="background-color: lightgrey;"></p>
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Expected Outcomes (how we will know)

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- Workforce profiling data, average caseload data, and improving performance data will together evidence increased capacity to implement and achieve improvement at pace, supported by strong leadership. (Performance data)
- Children and young people will experience minimal changes in allocated worker. (Performance data and feedback)
- All new starters will have a meaningful induction on joining children’s services to ensure that our workforce understand what is expected of them, what support is available, and key systems and processes. (Performance data, and feedback)
- More families will be supported to continue caring for their own children and young people where this is safe and in their best interest to do so (Performance data, and feedback)
- More foster carers will be recruited and retained to provide local placements for local children and young people when they are unable to remain living with their own family (Performance data)

Measures that Matter

- The proportion of the established workforce that is permanent (increasing and high is good) **69%**
- Average social worker caseloads (excluding Newly Qualified Social Workers (NQSW)) (target range 16-20 children) **16.7**
- Number of social workers with >24 children allocated (zero or low is good) **7**
- Number of in-house foster care households and the number of placements offered (increasing is good) **tbc**
- Proportion of available in-house fostering capacity utilised. (high is good) **tbc**

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3: The timely and robust identification and multi-agency response to children and young people who are at risk of harm, including, but not limited to, the response to pre-birth children and babies, 16- and 17-year-olds who present as homeless, children living in private fostering arrangements and children who go missing from home and care.

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Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
3.1 Confirm Information Sharing Protocols and issues of consent with the partnership to ensure there are no barriers to safeguarding children and young people in a timely and informed way	Service Director (Safeguarding and Family Support)	January 2023	<ul style="list-style-type: none"> Partnership leads have met to agree way forward Original MASH information sharing protocol signed off in November 2021 and updated by at the MASH Strategic Board on 16 February 2023 Issues of consent resolved Ofsted monitoring visit letter March 2023: "Parental consent for agency checks are routinely gained." (pg. 2) 		
3.2 Accelerate the co-location of agencies in the Multi-Agency Safeguarding Hub (MASH) to improve the multi-agency identification and response to risk	Service Director (Safeguarding and Family Support)	August 2022	<ul style="list-style-type: none"> MASH Co-location complete and operating from Plough Lane offices Ofsted monitoring visit letter March 2023: "Appropriate consideration is given to 		

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			historical information, strengthened by the co-location of key partners in the MASH which enables timely analysis and recommendations.(pg. 2)		
3.3 Urgently refresh arrangements for identifying, assessing and responding to the needs, risks and circumstances of unborn babies in collaboration with relevant Health partners	Head of Service (MASH & Assessment)	March 2023	<ul style="list-style-type: none"> Refreshed handbook and guidance agreed by Herefordshire Safeguarding Children’s Partnership – completed December 2022 Pre-birth pathway - Completed September 2022 New multi-agency Panel in place – Completed October 2022 Pre-birth tracker in place Reviews of pre-birth process completed December 2022 and February 2023 Impact: The MASH identifies the needs, risks and circumstances of all unborn/new born babies to ensure they, and their parents, receive the right help at the right time so the risk of likely significant harm is managed effectively and unborn/new born babies are safer. 		

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<p>3.4 Develop promotional material and collaborate with the Herefordshire Safeguarding Children Partnership (HSCP) to promote awareness about Private Fostering across Herefordshire so notifications, assessments and support are timely and responsive to need.</p>	<p>Head of Service (Fostering, Adoption & Placements)</p>	<p>February 2023</p>	<ul style="list-style-type: none"> • Update of information leaflet to raise awareness completed and signed off by HSCP December 2022 • The PSW presented to the Practitioner Forum 24 March 2023 • Promotional material circulated to partner organisations to deliver internally to their own staff. • HSCP partners identified upcoming staff forums, networking events, newsletters that can be used for implementation • Roll out of awareness raising campaign due from April – October 2023 – communication plan developed to be supported by HSCP • Private Fostering - quick guide added to Tri.x • Current PF arrangements = 0 • Impact measures tbc (including number of PF notifications from HSCP, assessments and overall PF arrangements) 		
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<p>3.5 Revise and relaunch our joint protocols for safeguarding and supporting 16 and 17 year old young people who present as homeless</p>	<p>MASH Head of Service / Head of Service (Strategic Housing Manager)</p>	<p>March 2023</p>	<ul style="list-style-type: none"> • Final Protocol complete • Protocol launched for implementation following a table top ‘walk through’ exercise • Number of vulnerable homeless 16/17 yo referred and subject assessment since launch of protocol = 1 • Service Lead confirming impact measures with Housing Lead 	<p style="background-color: #00aaff; color: white; text-align: center;">On Track</p>	<p style="background-color: #cccccc;"></p>
<p>3.6 Work collaboratively with safeguarding partners to strengthen multi-agency contextual safeguarding arrangements to identify and manage risk outside of the home</p>	<p>Service Director (Safeguarding and Family Support)</p>	<p>April 2023</p>	<ul style="list-style-type: none"> • Service Director appointed as HSCP Sub Group Chair - September 2022 • Scoping of Contextualised Safeguarding models complete October 2022 • Review of response to young people and care experienced young people undertaken October/November 2022 • HSCP Sub Group agreed recommendation for the ‘Get Safe’ model and ‘Get Safe Plus’ model to support children as victims of exploitation 	<p style="background-color: #00a651; color: white; text-align: center;">Completed</p>	<p style="background-color: #cccccc;"></p>

<p style="background-color: #4b0082; color: white; text-align: center;">Activity/Impact Key</p>	<p style="background-color: #cccccc; text-align: center;">Activity Not yet due to start Impact Activity incomplete/too early to measure impact</p>	<p style="background-color: #00a651; color: white; text-align: center;">Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people</p>	<p style="background-color: #ffcc00; color: black; text-align: center;">Activity Started with some issues/delay Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people</p>	<p style="background-color: #ff0000; color: white; text-align: center;">Activity Not on track and at risk Impact No/very limited impact on improving outcomes for children and young people</p>	<p style="background-color: #00aaff; color: white; text-align: center;">Activity Completed and now ‘business as usual’ Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people</p>
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			<ul style="list-style-type: none"> • Report to HSCP December 2022 with agreement to establish Task and Finish Project Group which is now in place • Implementation of Get Safe/Get Safe Plus is scheduled for June with delivery of partnership training programme • Conference to launch Get Safe/Get Safe Plus is scheduled for September/October 2023 and the OPCC has agreed to contribute funding for this • HSCP impact measures tbc 		
3.7 Revise and relaunch multi-agency protocols for safeguarding and supporting children and young people who go missing from home and care and improve the quality of return interviews by exploring 'push-pull' factors and using available intelligence to support effective planning.	Service Director (Safeguarding and Family Support)	July 2023	<ul style="list-style-type: none"> • The missing annual report is due by the end of June 2023 • All missing Return Home Interviews are reported and reviewed on a weekly basis. • Feedback from the 1st Ofsted monitoring visit was positive; 'Return home interviews when children are missing from home are used well to enhance plans to help keep children safe and enable 		

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			<p>an effective response if they go missing again.’ (pg. 3)</p> <ul style="list-style-type: none"> • West Mercia Police are leading on the consultation and launch of the new draft missing procedures • These went to the Strategic MASH Board on the 18 May and the Child Exploitation Strategic Group on the 22 May for consultation and are scheduled for discussion at the next two strategic meetings. • The Philomena Protocol is in place (this is a national scheme encouraging agencies, carers, guardians, families and friends to record vital information which can be used in the event of a vulnerable young person going missing). • Refresh of impact measure tbc in line with launch of new missing procedures 		
3.8 Review, relaunch and then evaluate the impact of the multi-agency Neglect Strategy	HSCP Independent Scrutineer	April 2023	<ul style="list-style-type: none"> • Interim Neglect Strategy and Delivery Plan are in place 		

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			<ul style="list-style-type: none"> ○ Review of Graded Care Profile 2 (GCP2) - The GCP2 review has been completed and HSCP now needs to consider the implications of the review. ○ The partnership has renewed its commitment to review the impact of the Neglect Strategy during 2023/2024 and it will be part of the Business Plan due for sign off on the 14 June. ○ Whilst a data set has been developed for the partnership work on a neglect scorecard still need to be resourced and completed. 		
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Expected Outcomes (how we will know)	
<ul style="list-style-type: none"> • The MASH is high performing with capacity and capability to manage the nature and level of demand and complexity so children and young people have their needs identified and responded to efficiently and effectively. (Performance data, and feedback) • Partners work well together and in partnership with parents to safeguard children and young people in a timely and effective way so they are safe, well and able to fulfil their potential throughout their childhood and beyond. (Performance data, quality assurance activity, and feedback) 	

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- The Herefordshire Safeguarding Children Partnership has strong and effective arrangements in place to safeguard children and young people at risk of harm from a range of different presenting circumstances (Performance data, quality assurance activity, and feedback)

Measures that Matter
<ul style="list-style-type: none"> • % of child and family assessments completed within timescales (high is good) 142 / 183 (77.6%) • % of strategy meetings initiated at the right time (high is good) 149 / 153 (97.39%) • % of Initial Child Protection Conferences convened within 15 days (of the strategy discussion at which the need for child protection enquiries was agreed) (high is good) 20 / 22 (90.9%) • % of return interviews which took place within 72 hours of the missing episode ending (high is good) 3 / 5 (60%)

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4: The quality of practice including assessments, plans, planning and purposeful visits that are responsive to risk and need.

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
4.1 Review and refresh our Academy learning and development offer to ensure a clear focus on our practice priorities, principles and standards including practice guidance and tools.	Principal Social Worker (PSW)	April 2023	<ul style="list-style-type: none"> • Practice Priorities, Standards and Principle Tools developed - December 2022 		


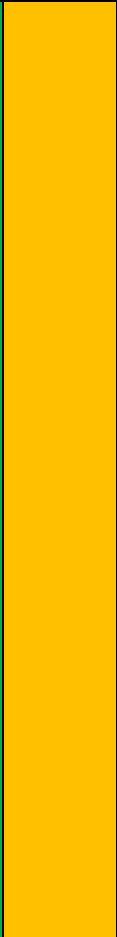
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			<ul style="list-style-type: none"> • Quarter 4 of 2022/23 Social Care Academy (SCA) Continuing Professional Development Programme refreshed • Core Foundation Programme facilitated by Practice Development Leads on 17 January 2023 to end of March 2023 • Evaluation report prepared for DLT April 2023 • Core Foundation Programme to be incorporated into all new starter’s induction programme and delivered by the Social Care Academy and PSW 		
4.2 Develop and implement a service wide Engagement and Participation Strategy to ensure children and young people’s voices are heard and taken into consideration.	Head of Service (Corporate Parenting)	July 2023	<ul style="list-style-type: none"> • Draft Engagement and Participation Strategy is in draft format and will be presented to SMT and DLT by end June 2023 • Engagement and participation staffing - participation worker post will be advertised week beginning 12 June. The TM post and apprentice post need a business case to secure funding and is scheduled for 30 June 2023 • Engagement and participation activity 		




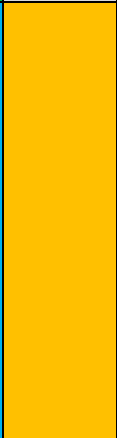
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			<ul style="list-style-type: none"> ○ Initiated and being led by PAs with young people in care. The participation group is looking at plans for care leaver’s week, safety planning documents, new pathway plan format. ○ Activities include a reading group, CV writing group and a weekly parent and child group is also up and running. ○ The football team are holding a regional event in the coming weeks. There was also an event with the Army on 31 May 2023. ● Child in Care Council / Your Voice Matters Group: <ul style="list-style-type: none"> ○ Co-production meetings have started and the activity is underway but not yet finalised ● Consultation - Service Lead met with the previous consultant who undertook the detailed scoping for children’s engagement and participation – completed and informing plans 		
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<p>4.3 Champion the voice of the child to take account of their views, wishes and feelings by promoting direct work skills and purposeful visiting so this remains a central feature of our engagement and relationship with them.</p>	<p>Principal Social Worker (PSW)</p>	<p>July 2023</p>	<ul style="list-style-type: none"> • Direct work practice guidance finalised by Principal Social Worker and Permanence Champion • Review of direct work tools / resources completed December 2022. • Funding to order direct work tool kits for teams / services - agreed January 2023 and delivered February 2023 • Core foundation training Qtr. 4 2023/23 includes new practice principles including 'purposeful visiting' and 'voice of the child' • Direct work tools/resources have been distributed to all teams and service areas • Direct work Champions to be identified in teams/service areas to support practice development and use of tools and resources • Core Foundation CPD to continue for all new starters plus refresher sessions to include direct work, purposeful visiting and voice of the child • Social Care Academy to develop direct work learning and development workshop with Direct Work Champions 		
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<p>4.4 Revise, develop and launch our practice model to emphasise the importance of relationships, respect and restorative practice for how we will work <i>with</i> children, young people and parents/carers, especially where this may not have been their experience previously.</p>	<p>Corporate Director for Children and Young People</p>	<p>March 2023</p>	<ul style="list-style-type: none"> • DLT completed provisional position statement regarding practice model – March 2023 • Further development due in line with the long term practice improvement partnership with Leeds the introduction to restorative/relational practice will begin in June/July 2023 as part of the preliminary consultation and development work with DLT. 		
<p>4.5 Strengthen quality assurance activity in accordance with the re-launch of the Quality Assurance Framework to provide robust assurance that the quality of practice is improving.</p>	<p>Service Director Improvement</p>	<p>December 2022</p>	<ul style="list-style-type: none"> • Revised QAF complete November 2022 • Re-launch in December 2022 • First monthly QAF report to January Improvement Board, and to every subsequent Board, including: <ul style="list-style-type: none"> ○ QA highlight report ○ QA compliance report ○ Quality Matters summary report ○ Best Practice Briefing • First report of ‘Good’ moderated audits • Spring review completed – May 2023 		

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Expected Outcomes (how we will know)
<ul style="list-style-type: none"> • The Academy promotes and supports continuous learning and development that is evidence based, research informed and makes a demonstrable impact on improving practice. (Performance data, quality assurance activity) • Practitioners and managers know what is expected of them, are supported to practice confidently and capably and are increasingly more restorative in their approach which builds trust and strong relationships. (Quality assurance activity and feedback) • The needs of children and young people are of paramount importance, their voices are championed and they report feeling safe, well and able to meet their full potential (Quality assurance activity and feedback) • Practice is routinely audited against best practice standards and evidences increasingly good and better practice that improves outcomes for children and young people (quality assurance activity)

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Measures that Matter
<ul style="list-style-type: none"> • Overall number and % of outstanding, good, requires improvement and inadequate audit grades each month

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Grades / Months	November 2022	December 2022	January 2023	February 2023	March 2023	April 2023
Inadequate	4 (40%)	16 (48.48%)	16 (51.61%)	6 (40%)	6 (50%)	3 (21.43%)
Requires Improvement	2 (20%)	14 (42.42%)	10 (32.26%)	6 (40%)	4 (33.33%)	8 (57.14%)
Good	4 (40%)	3 (9.09%)	5 (16.13%)	3 (20%)	2 (16.67%)	3 (21.43%)
Outstanding	0	0	0	0	0	0
Total Audits	10	33	31	15	12	14

5: Timely and effective multi-agency arrangements to ensure children are protected and enter care when required.

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Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
5.1 Re-launch and embed the partnership thresholds to improve awareness, understanding and application in relation to decision making across the child’s pathway from needing to receiving support, protection and care	HSCP /Corporate Director for Children and Young People / Independent Scrutineer	February 2023	<ul style="list-style-type: none"> Audit referral activity to analyse evidence and feedback to partners about the application of thresholds and the effective use of the Multi Agency Referral Form (MARF) HSCP ‘Right Help, Right Time’ Partnership Network Meeting to inform next steps 		
5.2 Review and address MASH social work capacity and management decision making capability to ensure there are consistent responses to concerns that evidence professional curiosity and analysis	Service Director (Safeguarding and Family Support)	March 2023	<ul style="list-style-type: none"> MASH diagnostic completed w/commencing 6 February 2023. Review and analysis of diagnostic report to inform ‘next steps’ and preparation for \Ofsted monitoring visit. Impact - Ofsted monitoring visit March 2023 letter: “Since the last inspection the functioning of the MASH has significantly improved from a very low base, meaning that most children's needs are now promptly identified and responded to when referrals and contacts are 		

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			made. Effective systems have been established along with increased capacity to gather the information required to decide what is the right level of support to offer children and families.”		
5.3 Review and adjust the interface between Early Help and the Multi Agency Safeguarding Hub (MASH) to ensure robust screening arrangements with a clear and effective pathway are in place to ensure needs are addressed promptly.	Service Director (Safeguarding and Family Support)	July 2023	<ul style="list-style-type: none"> • Refreshed guidance to clarify Early Help / MASH relationship, roles, responsibilities and expectations about decision making complete • Step Up / Step Down audit with refreshed protocols and pathway completed and agreed • EH Pilot with additional resources in place to strengthen triage and pathway to services • CHAT helpline relaunched January 2023 • February 2023 MASH diagnostic to be reviewed to inform ‘next steps’ and Ofsted monitoring visit preparation • Impact - Ofsted monitoring visit March 2023 letter: “The interface between early help and the MASH has been strengthened. A 		

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			children’s help and advice team has been relaunched which provides a timely and helpful advice service, signposting families promptly to universal and targeted services, making sure that children and families receive the help they need before needs escalate.”		
5.4 Work collaboratively with the partners to ensure there are always appropriate resources to convene child protection strategy meetings when required so these are timely, involve all relevant partners and protect children at the point they are referred and when they are already known to the service and subject to existing support, protection or care plans.	Service Director (Safeguarding and Family Support) & Detective Superintendent, West Mercia Police	December 2022	<ul style="list-style-type: none"> • Police action during the inspection has provided additional resources and built capacity • Audit activity October 2022 indicated improvements in MASH / Assessment which are largely secure now • Audit activity October 2022 indicated delays still evident in other teams elsewhere in the service • Change request from December 2022 to end of March 2023 to further review the timeliness of strategy meetings across the whole service 		

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			<ul style="list-style-type: none"> Impact – Ofsted monitoring visit March 2023 letter: “When children are at risk of immediate significant harm multi-agency strategy meetings within the MASH are held promptly. Managers in the MASH chair all strategy meetings which provides oversight and understanding of the most vulnerable children, which informs immediate planning to safeguard children.” (pg. 3) 		
5.5 Re-establish and strengthen multi-agency arrangements to improve safety planning and risk management arrangements whenever child protection enquiries are being undertaken.	Service Director (Safeguarding and Family Support)	March 2023	<ul style="list-style-type: none"> Impact - Ofsted monitoring visit March 2023 letter “Safety planning within strategy meetings is limited to immediate safety and there is an over-reliance on police action to prevent alleged perpetrators from having access to children and adult victims. There is insufficient consideration of future risk and how this can best be mitigated in the longer term, when police action such as bail conditions expire. 	✓	

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			<ul style="list-style-type: none"> • Risk Assessment and Safety Planning Pilot launched on 22 May with review in 6 weeks • Young people’s feedback has been ascertained to inform the draft safety plans and will be included in the review 		
5.6 Develop a multi-agency/cross sector ‘Edge of Care’ offer supported by the existing Edge of Care and Home (ECHO) Team and other allied services that build on family strengths and resources so children and young people are able to remain with their families where it is safe and appropriate to do so	Service Director (Safeguarding and Family Support)	April 2023**	<ul style="list-style-type: none"> • Scope of proposed service expansion and redesign of ECHO and FGC agreed • Additional budget approved and scoping of new service structure drafted • ECHO criteria to focus on: <ul style="list-style-type: none"> ○ <u>Prevention</u> of reception into care ○ <u>Reunification</u> home from care for children who are subject to Placement with Parents Regulations and those ‘potentially suited’ • Leeds long term practice improvement partner is embarking on service consultancy and design 		

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			<p>to support the ECHO service developments – June 2023</p> <ul style="list-style-type: none"> Extended deadline to September 2023** to allow for the next phase of the recruitment process 		
5.7 Develop and launch a Family Group Conference model of approach to engage, support and promote family based arrangements to address identified needs, risks and circumstances and ensure there is robust decision making for children entering care when all family options have been exhausted.	Service Director (Safeguarding and Family Support)	April 2023	<ul style="list-style-type: none"> Allocated funding and resources identified in January 2023 Two additional ECHO FGC Coordinators recruited – completed April FGC training for FGC Coordinators with the Family Rights Group – completed May Additional FGC capacity available through spot purchase arrangements established through All Age Commissioning - completed Leeds long term practice improvement partner is embarking on service consultancy to support the ECHO service developments – June 2023 Impact 		
5.8 Take action to strengthen risk management arrangements with disabled children and young	Service Director (Safeguarding	November 2022	<ul style="list-style-type: none"> Additional social work Service Manager appointed into Children 		

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<p>people so their additional needs, risks and circumstances are appropriately addressed.</p>	<p>and Family Support)</p>		<p>with a Disability (CWD) team to strengthen safeguarding arrangements.</p> <ul style="list-style-type: none"> • There has been an increase in children being referred to CWD, 18% increase between January 2023 – May 2023 and caseloads are higher as a result. • The service is recruiting an additional Managing Practitioner, to provide additional supervisory capacity and build resilience • An additional SW has also been recruited. • Working in consultation with the Social Care Academy, the service took on 3 x NQSWs last month • The Short Break assessment template is working well from a SW perspective now and consultation is now underway to co-produce parent carer views • Practice Standards have been reviewed and tweaked to ensure reporting data is correct to include all children having a short break 		
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			<p>whether this is under s17 or s20 (CA 1989) or s2 (CSDPA, 1970).</p> <ul style="list-style-type: none"> • Working with commissioners is underway to improve the provision of short breaks - evaluations of tenders are underway with moderation due for group activity providers. • Consultation and co-production with Parent Carer Voice is on-going in relation to this activity • CWD and SEND currently work together to approve and provide targeted short breaks. • Work has begun to address the quality of EHCPs • The service has identified that some planning has been based on a resource led assessment. The 6 month data about unmet need is being collated as part of the review process to inform a meeting with All Age Commissioning on 1 June 2023. 		
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			<ul style="list-style-type: none"> Targeted activity is underway to address MOSAIC systems and data reporting developments 		
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Expected Outcomes (how we will know)	
<ul style="list-style-type: none"> Thresholds are well understood and applied consistently across the partnership so children and young people are identified and have their assessed needs, risks and circumstances responded to in a timely manner so they are supported, protected and cared for. (Quality assurance activity, feedback) Children, young people and families are provided with the right help at the right time. (quality assurance activity, feedback) Safety planning and risk management arrangements engage all partners to work well together so children and young people are protected from the risk of harm. (quality assurance activity, feedback) 	

Measures that Matter	
<ul style="list-style-type: none"> Number of Family Group Conferences (FGC) (when established) (increasing and high is good) 5 	

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6: Monitoring and tracking to prevent drift and delay. This includes the monitoring and tracking of children in the public law Outline (PLO), permanence planning, children subject to deprivation of liberty orders and those placed in unregistered children’s homes.

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
6.1 Review all Public Law Outline (PLO) pre-proceedings and on-going care proceedings with Legal Services to establish a clear position across all teams and services and continue to track and report this on a monthly basis to achieve and maintain compliance with national standards.	Service Director (Safeguarding and Family Support)	January 2023	<ul style="list-style-type: none"> Review baseline position for all children subject to PLO process complete August/September 2022 PLO process reviewed and updated See PLO/Care Proceedings report for the Improvement Board 7 June <p>Summary of PLO pre-proceedings data for April 2023:</p> <ul style="list-style-type: none"> 31 children (22 families) subject to PLO proceedings, an increase of 5 from the previous month 2 Children entered PLO in the month 5 children exited PLO in the month All children where the decision to enter PLO was made in March had their initial PLO meeting with parents within 10 working days. This is the second consecutive month where this has been achieved. 		

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Activity/Impact Key	<p>Activity Not yet due to start</p> <p>Impact Activity incomplete/too early to measure impact</p>	<p>Activity Started and on track</p> <p>Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people</p>	<p>Activity Started with some issues/delay</p> <p>Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people</p>	<p>Activity Not on track and at risk</p> <p>Impact No/very limited impact on improving outcomes for children and young people</p>	<p>Activity Completed and now 'business as usual'</p> <p>Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people</p>
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			<ul style="list-style-type: none"> The average time in pre-proceedings for all children was 10.2 weeks with the shortest being 1 week and the longest being 24 weeks. The target is 16 weeks. Pre-proceeding over 16 weeks - relates to 3 children (10% of the total) in 2 families. Pre-proceedings over 25 weeks - due to complexity. The progress is being monitored through compliance panel and HOS oversight. Pre-proceedings over 20 weeks – a very young child with complex assessments required that could not be progressed until 6 weeks following birth Pre-proceedings outcomes - 5 children exited pre-proceedings and 100% were stepped down due to progress being made with the threshold for issuing care proceedings no longer being met <p>Summary of Care Proceedings data for April 2023:</p> <ul style="list-style-type: none"> There were 59 children (from 50 families) subject to care proceedings in 		
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			<p>This is unchanged from the previous month</p> <ul style="list-style-type: none"> • Timeliness - The national target is 26 weeks, with a local target of 16 weeks • 30 children (50.8% of the total cohort) were subject to care proceedings lasting 16 weeks or over. This was 40% in the previous month. • 5 children (8.5%) are significantly over the National Target of 26 weeks. • Causes of excessive delay/cohort outliers; <ul style="list-style-type: none"> ➤ 2 siblings at 60 weeks where there are complex evidential and medical issues concerning possible NAI that are causing necessary but prolonged delay. Final hearing due 19 May 2023 ➤ 1 child at 46 weeks with possible NAI. Conflicting medical evidence and need for a re-assessment of injuries is causing delay. The court has been requested to timetable to IRH on 3 July 2023 subject to the medical evidence being available. ➤ 2 siblings at 33 weeks where the 		
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			independent social worker’s report was not completed within the timescale leading to the proceedings being extended for 8 weeks. Final hearing scheduled from 2 to 4 May 2023.		
6.2 Establish improved leadership and management oversight of PLO practice to address any drift or delay, ensure families are effectively engaged where there are concerns that may lead to court proceedings and so children receive legal protection when required.	Service Director (Safeguarding and Family Support)	July 2023	<ul style="list-style-type: none"> • Further reviews of PLO practice and progress due February 2023 and July 2023 • Action to repair and strengthen relationship with the judiciary commenced and is on-going via the court user group. • ‘Learning together’ sessions focusing on the quality of Social Work Evidence Template (SWET) and collaboration with Legal Services reviewed in January 2023 with on-going improvement practice underway: <ul style="list-style-type: none"> - TOR for Legal Gateway Panel - Letter before Proceedings - FAQ and leaflet for parents - Web link from HCC to Family Rights Group website 		

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			<ul style="list-style-type: none"> • Managerial improvements in collaboration with Legal Services include reviews of; <ul style="list-style-type: none"> - Use of s20 - Short notice hearings - Refreshing the Legal Gateway Planning Meeting Process • See PLO/Court Proceedings report presented to 7 June Improvement Board 		
6.3 Information for families with children subject to Public Law pre-proceedings will be added to the Council’s website so that they are properly informed about Public Law pre-proceedings meetings and proceedings.	Service Director (Improvement)	January 2023	<ul style="list-style-type: none"> • Digital link to the Family Rights Group website and the Council’s website was established February 2023 • Additional ‘family friendly’ information has been developed to include: <ul style="list-style-type: none"> - PLO Leaflet - Frequently Asked Questions - Plus a revised ‘Letter before Proceedings’ to share directly with parents • The digital link has been built, tested and can be accessed as a new page in the following section on the website: https://www.herefordshire.gov.uk/social-care-support/corporate-parenting with a 		

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			<p>link to it from the children’s improvement page: https://www.herefordshire.gov.uk/social-care-support/childrens-services-improvements</p> <ul style="list-style-type: none"> Action being taken to report on number of ‘hits’ to the website pages More targeted QA user feedback to be ascertained from parents/carers whose child/ren are subject to PLO/court proceedings 		
6.4 Increase the leadership and management oversight for any child placed in an unregistered setting and publish revised guidance for our staff to ensure there is a clear understanding of what is a placement unregulated by Ofsted and what is an unregistered placement.	Service Director (All Age Commissioning)	February 2023	<ul style="list-style-type: none"> No child to be placed in any unregistered placement without the authority of the Corporate Director for Children’s Services Revised guidance published Full review of the Home Finding Team underway to strengthen leadership, capacity and capability with interviews completed December 2022 and all staff in post for February 2023 Head of Service developing a Service delivery plan to complete an end to end review of home finding policies, procedures and processes by new team 		

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			<ul style="list-style-type: none"> There is 1 child currently placed in an unregistered placement as at 31.05.2023. There were 0 children at the last Board. 		
6.5 Revise the Permanence Policy and Procedures to achieve legal, emotional and placement permanence with children and young people as soon as possible.	Service Director (Safeguarding and Family Support)	March 2023	<ul style="list-style-type: none"> Draft Permanence Policy completed by Permanence Champion February 2023 SMT consultation and sign off Formatting and branding being finalised Implementation March 2023 		
6.6 Develop and implement a reunification framework to assess and support children and young people who are able to return home to the care of their parents/families when it is safe and in their best interest to do so.	Service Director (Improvement)	March 2023	<ul style="list-style-type: none"> Draft Reunification Guidance completed December 2023 Consultation with SMT/ DLT completed Launch of guidance in March 2023 with 6 month pilot with cohort children subject to Placement with Parents regulations and those 'potentially suited' to reunification with their birth families Two supernumerary social workers are appointed to provide challenge and support to progress permanence planning Fast track legal/court process agreed to discharge care orders 		

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			<ul style="list-style-type: none"> • All permanence time scales to be reviewed, reset (where necessary) and confirmed asap with children and families • Weekly panel chaired by HOS and weekly progress reporting to Service Director in place • Impact and progress updated to be reported to the next Board 		
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Expected Outcomes (how we will know)	
<ul style="list-style-type: none"> • Parents with children subject to PLO pre-proceedings are helped to appreciate the concerns about their parenting and supported to make changes in a timely manner so their children remain safe and well g and Family Support for so that care proceedings are not necessary. (quality assurance activity, feedback) • Families are encouraged and supported to come together to explore opportunities, problem solve, plan and makes decisions that promote family based solutions to address identified concerns for children and young people. (Performance data, feedback) • Where parenting concerns persist and children continue to be at risk of significant harm they will be safeguarded and legally protected so that alternative permanent care can be achieved in a timely manner. (Performance data, quality assurance activity) • Plans are reviewed over time to make sure that if and when circumstances change there are opportunities for children and young people to return to the care of their parents and family, so long as this is safe and is in their best interest (Performance activity, quality assurance data) 	

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Measures that Matter
<ul style="list-style-type: none"> • % of children for whom PLO pre-proceedings were completed within 16 weeks (Rolling Year) 2 (33%) • Number of children in unregistered provision, including where the Corporate Director’s oversight and decision is recorded on the child’s record 0 • Number of children subject to Deprivation of Liberty (DoL) including the % of these children where DoL has been in place for 6 months or more 4 (50%)

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7: The availability of support and services to meet children and young people’s needs, including timely access to therapeutic interventions, access to dentistry, life-story work, emotional and mental health support, help for young people to support transitions into independence and sufficient suitable accommodation.

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
7.1 Work with the Director of Public Health and with the Integrated Care Board to review the availability, accessibility and quality of support in Herefordshire	Corporate Director Children and	March 2023	<ul style="list-style-type: none"> • Round table strategic scoping meeting scheduled with Health stakeholders due 27 February 2023 		

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<p>to provide services that make a difference for children and young people in need of support, protection and care</p>	<p>Young People / Director of Public Health</p>		<ul style="list-style-type: none"> • Outcome of scoping to establish the position and necessary activity was due March 2023 however meeting postponed due to NHS strike action and needs to be re-scheduled • Consultation has taken place with Health partners who are leading on identified work streams • Health report to future Improvement Board proposed 		
<p>7.2 Complete a partnership mapping exercise to establish the availability of local services and publish this with clear pathways to ensure children and young people in care and preparing to leave care are supported to access timely and appropriate multi-agency support and, where identified, address any gaps.</p>	<p>Head of Service (Corporate Parenting)</p>	<p>March 2023</p>	<ul style="list-style-type: none"> • Corporate Parenting Board has convened and agreed partnership contributions in October 2022 • Draft Care Leaver’s Offer prepared and presented to Corporate Parenting Board on 15 February • Details of Offer being produced in a young person friendly format for launch and dissemination • Care Leaver’s pathway being reviewed with the MOSAIC systems team • All care experienced young people due to have an up to date Pathway 		

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			<p>Plan to take account of the refreshed Offer</p> <ul style="list-style-type: none"> • Pathway Planning training has been delivered in April 2023 • Corporate parenting health report proposed for future Improvement Board 		
7.3 Ensure there is sufficient support and provision in place to meet the demand for high quality life story work with children and young people	Service Director (Improvement)	July 2023	<ul style="list-style-type: none"> • Life story work task and finish group in place to develop this practice • Life story best practice guidance developed • Newly appointed Principal Social Worker (PSW) to champion implementation of best practice guidance alongside Permanence Champion • Permanence Champion completed scoping of children in care needs in March 2023 • Scoping of resource implications to address legacy, current and future demands for life story work based on outcome of above Child in Care review of needs. Further analysis 		

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			required to confirm nature and extent of the need in June 2023.		
7.4 Review, refresh and publish our Sufficiency Strategy to increase the choice and availability of suitable accommodation for children and young people.	Service Director (All Age Commissioning)	July 2024	<ul style="list-style-type: none"> Specialist children’s commissioner appointed to refresh the Sufficiency Strategy 1st review complete October 2022 2nd draft complete and presented to DLT & Commissioning & Resources Board December 2022. DLT recommended SEND accommodation and transition to Adult Services to be incorporated into the Sufficiency Strategy Further draft of Sufficiency Strategy being shared with CPB, SMT and DLT in May / June 2023 		
7.5 Ensure that care experienced young people are provided with their health histories with all the essential information they need to become an independent young adult.	Head of Service (Corporate Parenting)	March 2023	<ul style="list-style-type: none"> This requires co-production with Designated / Named Health leads for care experienced young people Consultation with care experienced young people also required Sample health history to be developed in collaboration with care leavers 		

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			<ul style="list-style-type: none"> • Model of implementation to be proposed in consultation with Health • Change request from March 2023 to May 2023 to ensure task and finish group to prioritise this priority action • To be addressed in proposed Health report to future Board 		
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Expected Outcomes (how we will know)	
<ul style="list-style-type: none"> • Children and young people in need of support, protection and care have a range of suitable therapeutic, emotional and mental health support services and receive priority access so their needs can be assessed and supported without delay. (Performance data, quality assurance activity, feedback) • The partnership is increasingly knowledgeable, skilled and experienced at working together to identify the range of local services and pathways so children and young people receive prompt support that addresses their needs effectively. (Quality assurance activity, feedback) • The choice and number of available accommodation is suitable to meet the assessed needs of young people so they are settled and secure. (Performance data, quality assurance activity) 	

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Measures that Matter
<ul style="list-style-type: none"> • % of children in care with an up-to-date initial health assessment 38 / 57 (67%) • % of children in care with an up-to-date dental check 133 / 297 (45%) • % and number of children in care for 6 months or longer who have a life-story book <i>tbc</i> • % and number of care leavers aged 19 -21 who live in suitable accommodation 76 / 81 (94%)

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8: Management oversight and grip across the service to include clear structures and service pathways, and regular and effective supervision.

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
8.1 Review the structure of the Directorate Leadership Team and the Heads of Service Group to ensure there is sufficient capacity and capability to lead and manage the service.	Corporate Director for Children and Young People	October 2022	<ul style="list-style-type: none"> Structure reviewed and recruited to with interim Heads of Service. 		
8.2 Review supervision and management oversight to ensure it is regular, reflective and well recorded so those working directly with children, young people and families receive clear direction and support.	Service Director (Safeguarding and Family Support)	July 2023	<ul style="list-style-type: none"> Supervision audit of 70 records completed December 2022 with findings and proposals to support review of policy completed Audit summary with options appraisal for 1:1 supervision (and reflective case discussion model of supervision, see below) proposed to inform review and refresh of Supervision Policy Revised draft Supervision Policy completed for SMT consultation with SMT February 2022 with DLT endorsement to follow 		

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			<ul style="list-style-type: none"> Proposed Morrison 4x4x4 supervision model agreed with SMT Social Care Academy is pursuing a training provider (Dr Harvey & Associates - DfE subject expert for Practice Supervisor Development Programme) Joint meeting between Dr Anna Harvey and Associates and Leeds Improvement Partner to confirm focus and approach Procurement underway ready for pre-summer induction/introduction – June/July 2023 		
8.3 Introduce a reflective case discussion model of group supervision to create emotionally informed thinking and promote respectful uncertainty and healthy scepticism.	Service Director (Safeguarding and Family Support)	July 2023	<ul style="list-style-type: none"> Audit completed (as above) with summary report and options appraisal for reflective case discussion model of supervision proposed to inform review and refresh of Supervision Policy December 2022 Revised draft Supervision Policy completed for SMT / DLT consultation – completed February 2022 		

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			<ul style="list-style-type: none"> Proposed Reflective Case Discussion Model of Group Supervision by Professor Gillian Ruch (2007) Refer to 8.3 above 		
8.4 Review and adjust where required the service structure and pathways to ensure these are clear, responsive and support practice and service delivery.	Service Director (Improvement)	March 2023	<ul style="list-style-type: none"> End to end service review of the child’s pathway through the service to explore options to streamline and rationalise internal transitions and ‘hand offs’ ‘Walk through’ Workshop completed with Heads of Service and MOSAIC systems lead - completed. Progress noted in several areas but areas of most concern relate to pathways for: <ul style="list-style-type: none"> Children with Disabilities Service Corporate Parenting Service Home Finding Team Position statements being completed to summarise the nature and extent of the issues in order to inform next steps 		

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<p>8.5 Review and relaunch policies and procedures on tri.x (commissioned company) to ensure these are up to date and fit for purpose.</p>	<p>Policy & Procedures Lead</p>	<p>April 2023</p>	<ul style="list-style-type: none"> • Appointment of interim lead completed October 2022 • Review of tri.x local procedures completed November 2022 • Detailed programme of remedial action underway November 2022 • Detailed work with individual Heads of Service and Lead Officer underway • Report to DLT prepared February 2023 • Business as usual (BAU) updating and review to be established for end of March 2023 		
<p>8.6 Re-launch the Independent Reviewing Officer Dispute Resolution Protocol (DRP) to address the needs of children where there are concerns</p>	<p>Head of Service (Safeguarding & Review)</p>	<p>December 2022</p>	<ul style="list-style-type: none"> • Revised DRP is now in place for IROs and Child Protection Chairs, having been re-launched in mid-January 2023. • A new escalations tracker has been in place from February 2023 and Service Managers for IROs and CP Chairs review this weekly. • Escalations and CP Chair oversights are reported monthly at Performance Meeting. 		

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			<ul style="list-style-type: none"> • There are 13 DRPs open in the IRO Service. These are concerned with drift and delay in care planning; delays in children achieving permanence and recommendations from Reviews not being progressed. • There are 4 DRPs open from the CP Service. As before, these are concerned with poor quality of reports; reports not being shared with families 48 hours before Conferences; and lack of evidence of child's voice in assessments. • The Service Managers monitor the DRP Trackers weekly and escalate unresolved issues to senior managers as required. Work continues to take place with teams to ensure that escalations are responded to within timescale. 		
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Expected Outcomes (how we will know)

- The workforce is sufficient, stable, skilled and experienced to lead, manage and respond to the nature and level of service demands so practice and performance improves, is in line with established best practice standards and in accordance with legislation and statutory guidance. (Performance data)
- Supervision routinely provides high quality management, development, support and mediation to ensure children and young people receive the best support possible and staff have the knowledge, skills and support they need to undertake their role confidently and competently. (Performance data, quality assurance activity, feedback)
- The service structure and pathways are enablers to achieving good outcomes with children and young people and support staff to undertake their role efficiently and effectively. (Quality assurance activity, feedback)
- As an employer of choice, the conditions within which staff are undertaking their roles, and the resources that are available to them, in Herefordshire are conducive to supporting and promoting consistently good quality practice and performance. (feedback)

Measures that Matter

- % of allocated children who have an up-to-date (within the past month) supervision completed on their record **477 / 1001 (47.7%)**
- Number and % of concerns raised and resolved at stage one of the Dispute Resolution Protocol **1 / 2 (50%)**
- The number of unallocated cases in the service (snapshot at month end) **12**

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9: Performance and quality assurance arrangements to support and test service improvements.

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
9.1 Launch and publish a revised Quality Assurance Framework (QAF) that will test practice by analysing all available evidence, including practice performance and improvement activity, and take into account what relevant stakeholders, including children, young people and parents/carers, are telling us.	Service Director (Improvement)	December 2022	<ul style="list-style-type: none"> Refresh of the QAF completed November 2022 with DLT sign off Formatting and design completed ready for launch in December 2022 Publication and launch January 2023 Schedule of QA launch activity January – February 2023 First monthly QA reporting completed for presentation to the Improvement Board January 2023, and each Board thereafter, including: <ul style="list-style-type: none"> Highlight report Compliance report 'Quality Matters' summary 7 minute thematic best practice guide QAF Spring review and draft report completed 14 April 2023 for DLT 		

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			<p>consideration with recommendations about:</p> <ul style="list-style-type: none"> ○ Achieving and sustaining compliance and quality – committing to do fewer but better quality audits with protected time, buddying and a moderation process that engages the Auditor in the process ○ Auditors working <i>with</i> allocated SWs and TMs to review practice ○ Ascertaining views of children, young people and parents/carers as part of the audit process <ul style="list-style-type: none"> ● Leeds long term Improvement Partner on site from 12 – 14 June to undertake joint audits as part of their preliminary review 		
9.2 Decide on a performance reporting framework and deliver a timely and accurate monthly performance and management data report with	Corporate Director for Children and Young People	January 2023	<ul style="list-style-type: none"> ● Performance reporting framework agreed and built for December 2022 ● Regular monthly reporting due for January / February 2023 		

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analysis to support management and drive improvement			<ul style="list-style-type: none"> • First monthly Performance reporting for presentation to Improvement Board January 2023 • Measures that Matter report completed for March 2023 Improvement Board • PowerBi performance reporting being further developed across the service • Recent discrepancy in performance reporting identified by the service and subject to urgent review by the performance team to seek assurance about the QA verification processes. Corrections made and republished. 		
9.3 Review and address the MOSAIC system changes to ensure it is fit for purpose, user friendly and supports the service’s workflow and reporting requirements	Corporate Director Children and Young People	July 2024	<ul style="list-style-type: none"> • Scope of preliminary issues completed with timeline to complete project plan – this is continually reviewed and updated in light of progress evaluation of emerging pressures and priorities • To date, actions completed include: Contact & Referral; Assessment; 		

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			<p>Assessment visit; CIN plan; CIN review; and CIN Visit</p> <ul style="list-style-type: none"> • Current focus includes: Early Help and CIC and Care Leavers (including decision to accommodate; placement request; home finding work flow; CIC visit; CIC review' SW report for CIC review; health assessments; and Pathway Plans) which are due to be completed in August 2023. • Next steps to include: Child protection; Supervision; and request to convene a meeting. 		
9.4 Develop and launch refreshed recording standards setting out clear expectations about what good quality children's records and reports look like and including 'Language that Cares' guidance used with and about children and young people is appropriate	Service Director (Improvement)	March 2023	<ul style="list-style-type: none"> • Review of recording standards policy, including Language that Cares – complete • Fit for purpose and not requiring a change or refresh • Instead, draft Practice Guidance has been prepared ready for SMT consultation and sign off - June 2023 		
9.5 Work collaboratively with other agencies across the safeguarding partnership to develop and publish	Herefordshire Safeguarding Children's	April 2023	<ul style="list-style-type: none"> • Scoping and development of multi-agency data set in conjunction with Worcestershire SCP – complete 		

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<p>a quarterly multi-agency data set to safeguard children and young people.</p>	<p>Partnership / Independent Scrutineer</p>		<ul style="list-style-type: none"> • HSCP meeting to consult on proposal - April 2023 • HSCP meeting to agree a targeted data set - June 2023 • HSCP to confirm regular reporting 		
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<p>Expected Outcomes (how we will know)</p>
<ul style="list-style-type: none"> • The quality assurance and performance frameworks and the system that supports them are robust, reliable and routinely provide evidence and analysis to support and drive continuous improvement and assurance. (Performance data, quality assurance activity) • The day to day management of operational practice and performance is supported by quantitative data, information and intelligence that is readily available and easy to access so practitioners and managers have a clear view and appreciation of what this shows and what it means for them and the children, young people and families they are supporting at an individual, team and service level. (quality assurance activity, feedback) • The focus, findings and follow up to quality assurance activity provides a shared narrative based on qualitative evidence of what the service has done, how well it has done it and what is required to address recommendations and remedial action to improve outcomes for children and young people (Performance data, quality assurance activity) • The partnership achieves and maintains a shared appreciation of quantitative and qualitative data, information and intelligence to fulfil its statutory functions to assess the effectiveness of help being provided to children and families, whether partners are fulfilling their obligations, assure the quality of joint practice and identify lessons, as well as monitoring and evaluating the effectiveness of training.

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Measures that Matter
<ul style="list-style-type: none"> Number and % of children’s file audits completed each month by Managers, Child Protection Conference Chairs and Independent Reviewing Officers 15 / 37 (41%) Number and % of children’s file audits moderated each month by senior leaders (Heads of Service, Service Directors and Corporate Director). 15 (100%) Number of outstanding priority actions on the audit tracker following an inadequate audit outcome where concerns were escalated about the likelihood of significant harm (zero or low is good) 6

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10: Services to support children and young people with Special Educational Needs and / or a Disability (SEND)

Action	Lead	Deadline	Progress	Activity BRAG	Impact BRAG
10.1 Relaunch the revised Special Education Needs and / or disability (SEND) Strategy across the local area, with co-production at the heart	Service Director (Education, Skills and Learning)	January 2023	<ul style="list-style-type: none"> SEND Strategy is now on the Council’s Cabinet forward plan Political Consultation completed April 2023 Strategy, SEF and action plan agreed and signed off by SEND Assurance Board April 2023 Easy read SEND Strategy document completed for children and YP April 2023 Roadshows planned for Autumn term to engage stakeholders in the launch of the new SEND Strategy SEND strategy priorities underpin the SEND Action Plan & team leads for each work stream are 		





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			<p>regularly reporting into the partnership.</p> <ul style="list-style-type: none"> Impact: Children and families report being clearer about Herefordshire’s priorities and how these respond to what they have said about what needs to change and improve 		
10.2 Establish the SEND Strategic Board with appropriate representation from each sector to provide strategic oversight and direction for improvement.	Corporate Director for Children and Young People	December 2022	<ul style="list-style-type: none"> TOR and membership proposed for first meeting set for January 2023 TOR and membership revised at January 2023 SEND Strategic Board and due for sign off at the February 2023 SEND Strategic Board Impact: The Strategic Board report confidence in the SEND Action Plan which is gaining traction e.g EHC plans issued within 20 weeks = 100% in April 2023 		

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<p>10.3 Strengthen the SEND Partnership Group with current participants from the strategy group.</p>	<p>Service Director (Education, Skills and Learning)</p>	<p>November 2023</p>	<ul style="list-style-type: none"> Partnership has met and has full representation Chairing now by Service Director Partnership is receiving regular and good quality reports for all key stakeholders Representation from Schools has increased Impact: Work to develop engagement and participation is a particular priority with children and young people’s views informing and shaping the focus of the SEND Strategy 		
<p>10.4 Review the graduated response with a focus on early identification of support for children and young people with SEND.</p>	<p>Service Director (Education, Skills and Learning)</p>	<p>January 2023 (Amended via Change Request to April)</p>	<ul style="list-style-type: none"> Working party established to agreed follow up with draft presented to partnership group in the autumn term School survey now developed to establish feedback about the current use of the graduated pathway to inform next steps. 		



<p>Activity/Impact Key</p>	<p>Activity Not yet due to start Impact Activity incomplete/too early to measure impact</p>	<p>Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people</p>	<p>Activity Started with some issues/delay Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people</p>	<p>Activity Not on track and at risk Impact No/very limited impact on improving outcomes for children and young people</p>	<p>Activity Completed and now ‘business as usual’ Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people</p>
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			<ul style="list-style-type: none"> • Survey will become digital 22.02.2023 for dissemination after half term. • Change request from January to April 2023 to review School survey responses and address feedback about the graduated pathway • Responses have been reviewed and graduated response adapted. • Impact: The All Age Graduated Response Guidance is now published with the local offer – 47 responses have been received from schools and most reported positively that the Graduated Response is useful • Impact: Parent Carer feedback reports that the offer adaptations are easier to navigate and improves access to information. 		
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Activity/Impact Key	Activity Not yet due to start Impact Activity incomplete/too early to measure impact	Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people	Activity Started with some issues/delay Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people	Activity Not on track and at risk Impact No/very limited impact on improving outcomes for children and young people	Activity Completed and now 'business as usual' Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people
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<p>10.5 Review the Education, Health and Care (EHC) planning process and establish a procedure with a clear pathway that is understood by all so all Education, Health and Care Plans (EHCP) are within timescale, high quality and include contributions from all partners</p>	<p>Service Director (Education, Skills and Learning)</p>	<p>Spring 2023</p>	<ul style="list-style-type: none"> • LGA (April 2023) follow up to review of quality of completed EHC plans and reported positive findings: <i>‘We were impressed with the professional and dedicated team of case workers who were appreciative of the demands placed on other agencies but determined to complete the ECHPs. The common theme was the safety of children, their well-being and the opportunity to develop to their full potential.’</i> • 100% of new EHC plans are issued within statutory 20 week timescales (above national performance) • Over 90% of phase transfer annual reviews were completed prior to admissions deadlines. 		
<p>10.6 Develop a Preparing for Adulthood Strategy for young people with additional needs to receive timely and well-coordinated transitional arrangements and support</p>	<p>Service Director (Education, Skills and Learning)</p>	<p>December 2022</p>	<ul style="list-style-type: none"> • The Preparing for Adulthood strategic approach is incorporated into the new SEND Strategy • <i>Change request</i> to incorporate 10.6 into 10.1 above and close 		

<p>Activity/Impact Key</p>	<p>Activity Not yet due to start Impact Activity incomplete/too early to measure impact</p>	<p>Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people</p>	<p>Activity Started with some issues/delay Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people</p>	<p>Activity Not on track and at risk Impact No/very limited impact on improving outcomes for children and young people</p>	<p>Activity Completed and now ‘business as usual’ Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people</p>
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<p>10.7 Add Review and develop a SEND Sufficiency Plan</p>	<p>Service Director (Education, Skills and Learning)</p>	<p>July 2023</p>	<ul style="list-style-type: none"> • <i>Change request</i> – this is not a strategy but an addendum plan to the existing and up-to-date capital SEND Strategy • Impact: Sufficiency planning for September 2023 is on track to open: <ul style="list-style-type: none"> ➤ 4 new mainstream Autism bases (2 x Primary & 2 x Secondary) offering 24 additional places ➤ New Satellite Hub for SEMH ➤ School’s Re-Building Programme - Westfield Special School will be prioritised for re-building <p>So pupils with SEND will be able to access suitable local education provision to meet their assessed needs and be supported to reach their potential.</p>		
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Expected Outcomes (how we will know)

<p>Activity/Impact Key</p>	<p>Activity Not yet due to start Impact Activity incomplete/too early to measure impact</p>	<p>Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people</p>	<p>Activity Started with some issues/delay Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people</p>	<p>Activity Not on track and at risk Impact No/very limited impact on improving outcomes for children and young people</p>	<p>Activity Completed and now ‘business as usual’ Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people</p>
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- SEND Strategy is shared publically and with all stakeholders; Strategy widely supported and used to shape/complement other areas of work supporting children and young people. (feedback)
- Data dashboard in place and all partners/service providers provide timely and accurate information; Each sector has a clear data matrix which defines the specific measures being used to evaluate individual success of the strategy
- Pathways identified on the Local Offer and can be easily found and understood by families and young people. (Feedback)
- Graduated approach co-produced and published
- Phase transfers are completed within statutory timescales ensuring that children / young people have an updated Education, Health and Care Plans for their next setting and parents are assured where their child / young person will be attending.(Performance data, quality assurance activity, feedback)
- There is an increase in the proportion of Education, Health and Care Plans published within statutory timescales. (Performance data)

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Measures that Matter

- Ratings of EHCPs under Quality Assurance process (agreed QA process)
- Timeliness of education, health and social care assessments (completing / updating EHCPs) (to be covered in new performance report)
- Timeliness of EHC plan issue **(90% of plans are issued within statutory timeframes, in January 2023 at 70% which is above the national and West Midlands average)**

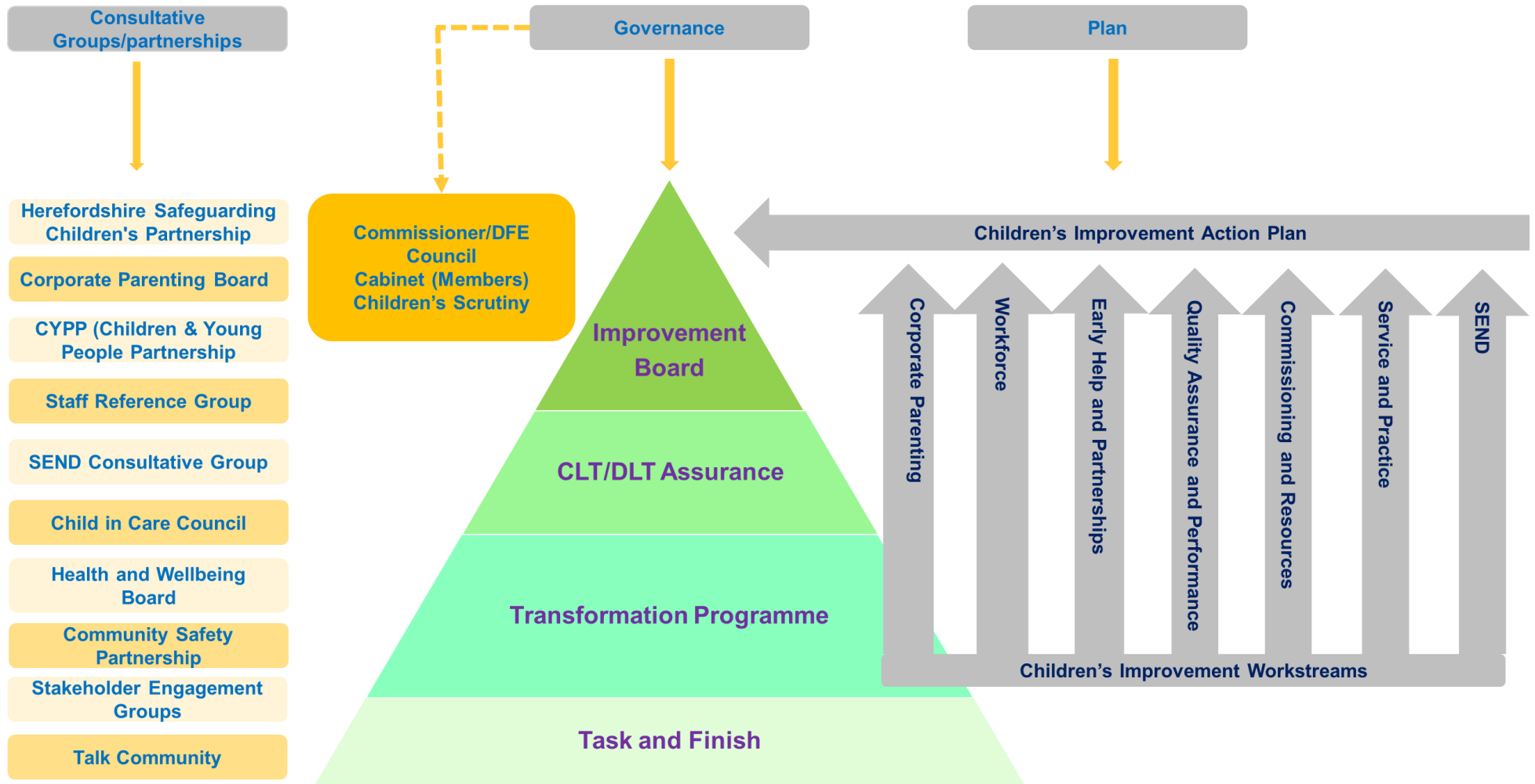
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- Timeliness of EHC annual review process (**90% EHC planned phase transfers and annual reviews are completed on time – in January 2023 on track for March 2023 to review all Year 6 and 11 pupils with SEND due to have a school transfer**)

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Activity/Impact Key	Activity Not yet due to start Impact Activity incomplete/too early to measure impact	Activity Started and on track Impact Mostly positive and consistent impact which delivers improved outcomes for children and young people	Activity Started with some issues/delay Impact Some positive impact but this is variable and not yet consistent enough to improve outcomes for most children and young people	Activity Not on track and at risk Impact No/very limited impact on improving outcomes for children and young people	Activity Completed and now 'business as usual' Impact Achieved consistently good and better impact that delivers improved outcomes for children and young people
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Appendix A – Herefordshire Children’s Services Improvement Plan Governance



Appendix B - Glossary of Roles with Names:

Chief Executive	Paul Walker
Corporate Director for Children and Young People	Darryl Freeman
Director of Human Resources and Organisational Development	Tracey Sampson
Head of Chief Executive's Office	Joni Hughes
Director of Public Health	Matt Pearce
Detective Superintendent, West Mercia Police	Jon Roberts
Head of Service (Corporate Parenting)	Julie Mephram
Head of Service (Early Help)	Nicky Turvey
Head of Service (Fostering, Adoption & Placements)	Robina Khan
Head of Service (MASH & Assessment)	Denyse Wellington
Head of Service (Strategic Housing Manager)	Hayley Craine
Herefordshire Safeguarding Children Partnership Independent Scrutineer	Kevin Crompton
Policy and Procedures Lead	Michael Nugent
Principal Social Worker	Kerry Oddy
Service Director (All-Age Commissioning)	Ewen Archibald
Service Director (Education, Skills and Learning)	Liz Farr
Service Director (Improvement)	Gail Hancock
Service Director (Safeguarding and Family Support)	Rachel Gillott



Title of report: One Herefordshire Partnership Update

Meeting: Health and Wellbeing Board

Meeting date: Monday 26 June 2023

Report by: Democratic Services Officer

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose

To provide members of the Health and Wellbeing Board (HWB) an update on the One Herefordshire Partnership.

Recommendation

That:

- a) **The Health and Wellbeing Board considers and notes the presentation at Appendix 1.**

Alternative options

1. The HWB could choose not to consider this briefing. This is not recommended. A key function of the health and Wellbeing Board is to encourage those who arrange the provision of any health or social care services in Herefordshire to work in an integrated manner for the purpose of advancing the health and wellbeing of the people of Herefordshire. It is a function of the HWB to consider briefings from the One Herefordshire Partnership.

Key considerations

2. The One Herefordshire Partnership produced the attached presentation in June 2023. The presentation is for the board to consider and take account of.

Community impact

3. In accordance with the adopted code of corporate governance, the council achieves its intended outcomes by providing a mixture of legal, regulatory and practical interventions. Determining the right mix of these is an important strategic choice to make sure outcomes are achieved. The council needs robust decision-making mechanisms to ensure its outcomes can be achieved in a way that provides the best use of resources whilst still enabling efficient and effective operations and recognises that a culture and structure for scrutiny are key elements for accountable decision making, policy development and review.

Environmental Impact

4. There are no general implications for the environment arising from this report.

Equality duty

5. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to –

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
6. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. Our Health providers will be made aware of their contractual requirements in regards to equality legislation.

Resource implications

7. There are no resource implications associated with this report. The resource implications of any recommendations made by the HWB will need to be considered by the responsible body or the executive in response to those recommendations or subsequent decisions.

Legal implications

9. Health and wellbeing boards are responsible for encouraging integrated working between health and social care commissioners, including partnership arrangements such as pooled budgets, lead commissioning and integrated provision.

- 10 Their purpose is to establish collaborative decision making, planning and commissioning across councils and the NHS, informed by the views of patients, people who use services and other partners.
- 11 The functions of the Health and Wellbeing Board are set out in paragraph 3.5.24 of the constitution. There are no specific legal implications arising from the proposed Terms of Reference.

Risk management

- 12 There are no risk implications identified emerging from the recommendation in this report.

Consultees

None

Appendices

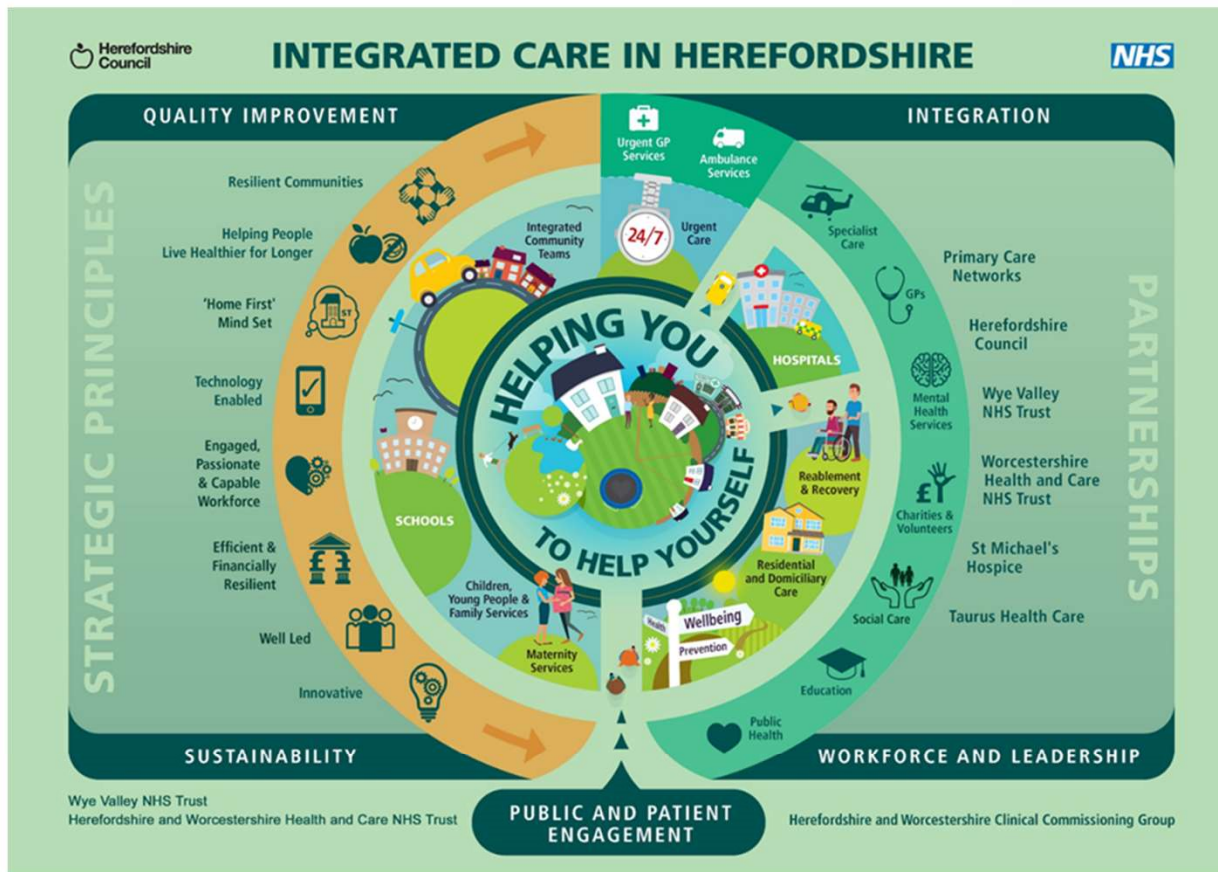
Appendix 1 – One Herefordshire Partnership presentation June 2023

Background papers

None identified.

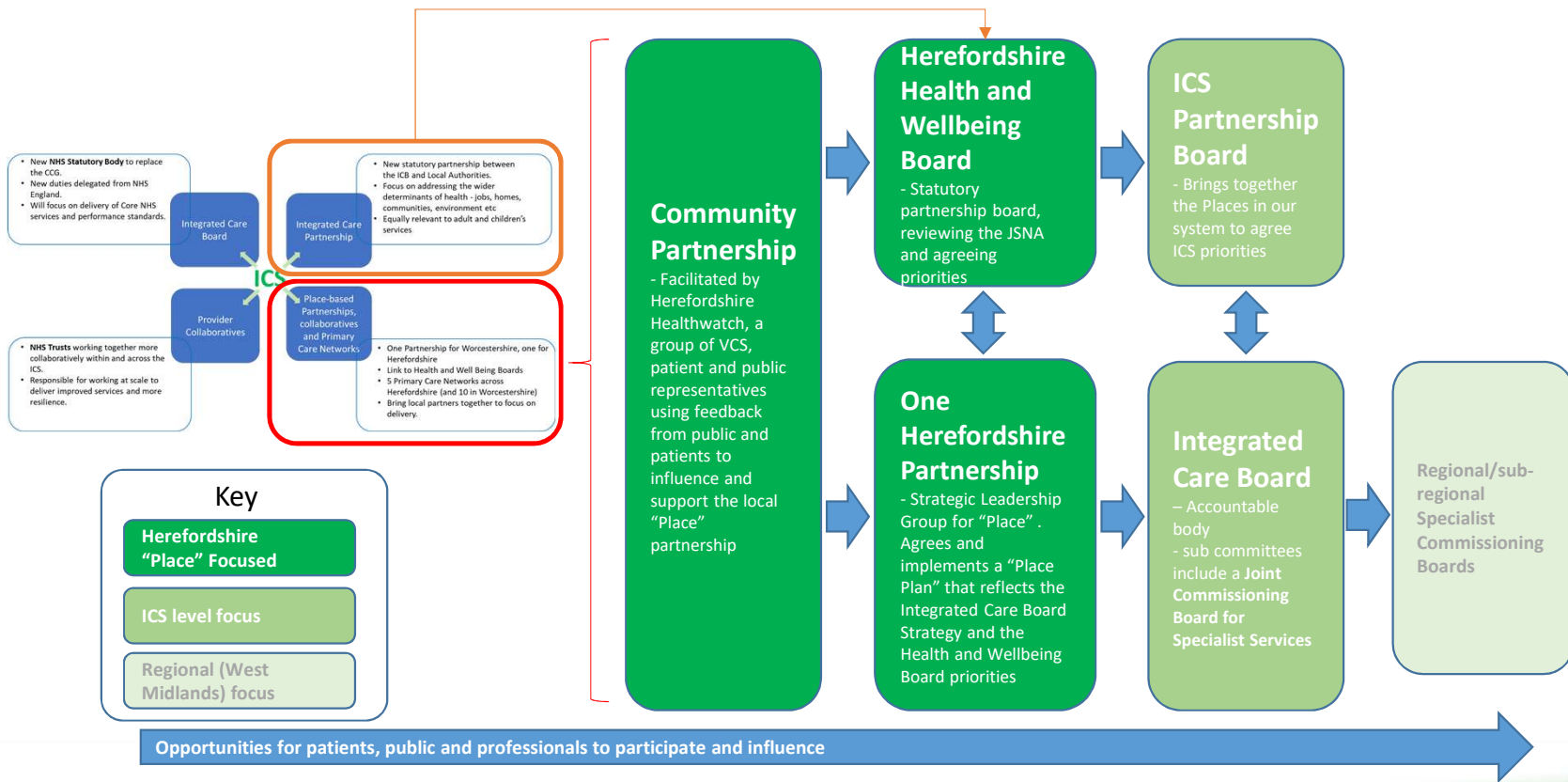


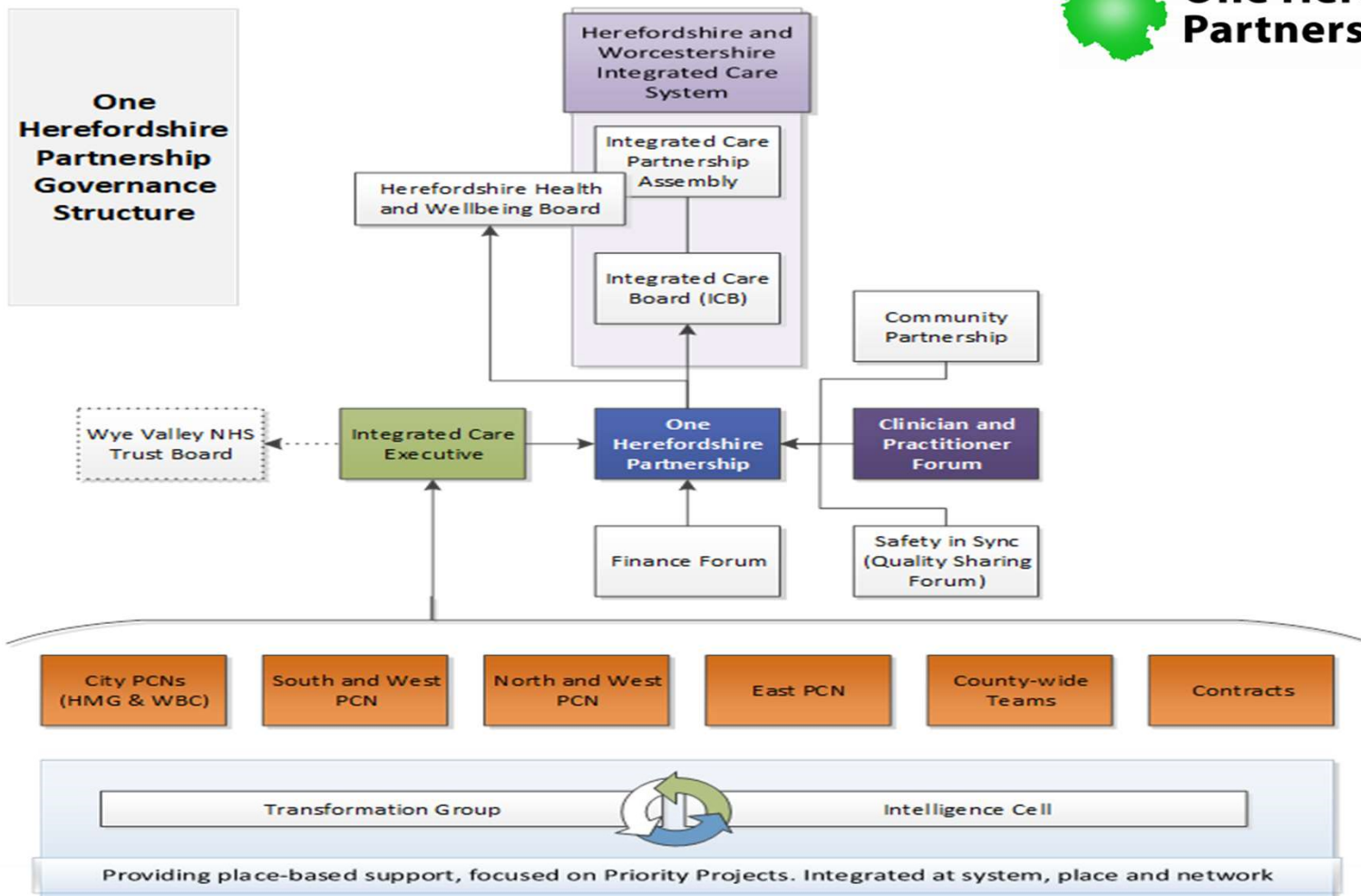
**Heath and Wellbeing Board Update
June 2023**



What is the One Herefordshire Partnership?

How the Integrated Care System looks in Herefordshire





What happens where?



One Herefordshire Partnership

- Strategic decision maker
- Translating strategy into a Place Plan
- Approving priorities
- Approving objectives & KPIs
- Ensuring engagement & co-production

Clinician & Practitioner Forum

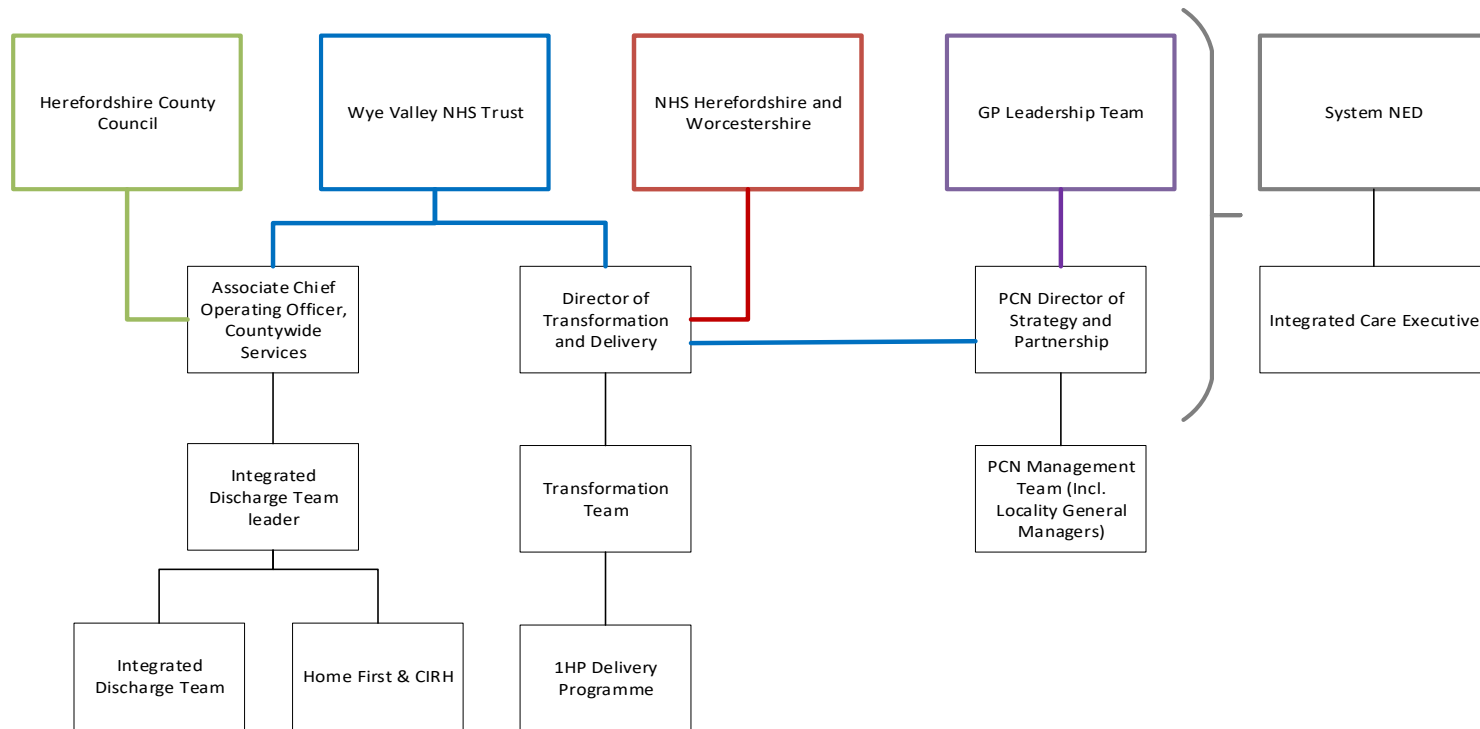
- Transformational leadership
- Defining priorities using evidence base
- Authorising care pathway changes
- Problem solving
- Co-ordinating clinical/practitioner approach
- Learning & education

Integrated Care Executive

- Business as usual
- Delivery against plan
- Focus on performance
- Holding to account within parameters
- Providing support and assistance to Networks
- Development of Networks

Community Partnership – engagement underpinning our work

Joint Appointments - Real Partnerships



One Herefordshire Partnership

- Achieving better outcomes at better value
- Building on what we have learnt from Covid
- Genuine partnership working
- Developing a culture of integration that benefits patients and service users
- Clinical and practitioner decision making at its heart
- ‘Learn by doing’ philosophy
- Phased approach
- Laying down a foundation that is fit for purpose now **and** in the future as the scope broadens

Things we are proud of

- Joint appointments – form following function
- Voting with our feet – attendance and engagement
- Learning by doing – Transformation Tuesday and Safety in Sync
- Approach to Local Enhanced Services design
- Community Partnership
- Delivery of improvements
- Embedding 1HP within the wider governance structures within the Herefordshire system, such as HWBB
- Memorandum of Understanding to devolve responsibility and accountability to 1HP

What has the One Herefordshire Partnership achieved?

One Herefordshire Partnership



Some of the 2022-23 achievements

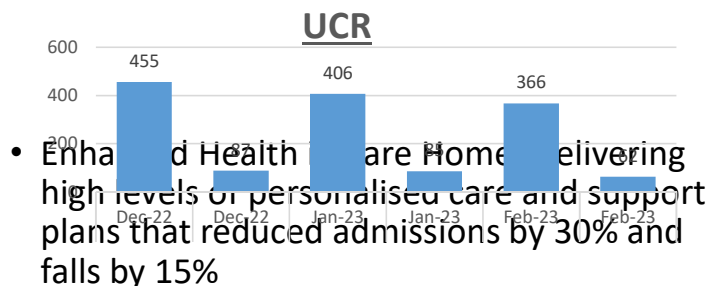
Integrated Primary & Community Care

- Virtual GP/CIRH integrated service delivering 2-hour response – supporting circa 500 patients a month and preventing 160 ambulance conveyances over the 3 months of Winter

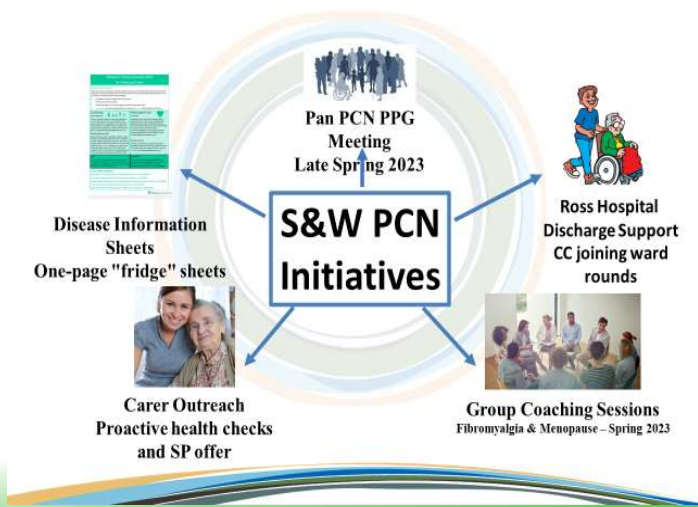
Numerous PCN Developments, for example...

Health inequalities priorities eg: adverse childhood experiences, cancer screening, vaccine hesitancy, childhood obesity, fibromyalgia

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- Enhanced Health Care Home delivering high levels of personalised care and support plans that reduced admissions by 30% and falls by 15%



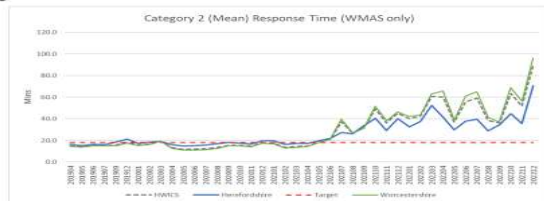
Urgent Care Redesign

- Same Day Emergency Care consistently over 40%
- Integrated urgent care redesign plan agreed and drafted
- 20 bed virtual ward (Frailty/Acute Med) opened in April 23

System working delivered a material benefit in ambulance turnaround times over the Winter

Ambulance turnaround data – was it worth it?

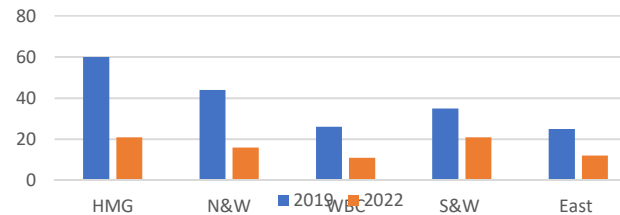
25 minutes quicker category 2 ambulance response for Herefordshire residents



Long Term Conditions

- Managing Heart Failure @home – successful bid to become early adopter and accelerator site.
- Diabetes – MDT working delivered across the county more than halving referral to secondary care
- Long term condition workshops scheduled for the next few months to pull together clinically owned strategies.

Referrals to 1st Consultant appointments for Diabetes





Quality Improvement and Learning

- 'Safety in Synch' in place and working well
- 'Transformation Tuesday' continues
- Lower leg wound national exemplar (87% 12 weeks healing rate)
- New approach to delivery of Spirometry a reducing duplication

Financial Strategy

- Regular Place CFO meeting established with agreed Terms of Reference
- Herefordshire Place Core Financial Principles developed and agreed
- Focus on areas of opportunity for better use of resources, e.g. support to development of system approach to Phlebotomy, and financial efficiency opportunities that span partners

Joint roles

Workforce partnership working

- WVT & Hoople Together Herefordshire support worker programme

Across home first and WVT vacancies nearly halved from 115 to 61 by December 2022

- Support worker career development framework
- One Herefordshire Pharmacy project
- Apprenticeship levy gifting and placements
- Health & wellbeing programmes
- Learning & development e-learning programmes

Job Role	Employer	Comments
Operations manager	WVT	Jointly funded post Managing ARRS Staff in the S&W PCN with Taurus. Commenced employment May 2023
Trainee Nurse Associate	Taurus Healthcare	WVT Hosting our apprentice
Overnight Nurse	WVT	Provides cover for the Overnight Service Nurse rota
Lead for One Herefordshire Pharmacy	WVT	One Herefordshire Pharmacy is the a virtual group of pharmacy leads for WVT, HWHCT (Herefordshire), Herefordshire PCNs and Herefordshire Community Pharmacy via the Local Pharmaceutical Committee
Workforce Development Lead Pharmacist (One Herefordshire)	WVT	To develop and manage cross sector training pre and post qualification roles across Herefordshire and develop more integrated working opportunities across One Herefordshire Pharmacy as well as linking to Universities and colleges
PCN Lead Pharmacist role	WVT / Taurus	To develop the PCN pharmacist workforce and acting as professional lead to the Pharmacists (50/50 funded by HW ICS Primary Care Training Hub/Taurus)
PCN Lead Pharmacy Technician role	WVT	To develop the PCN pharmacy technician workforce and acting as professional lead to the Pharmacy Technicians
HW ICS strategic AHP workforce role	WVT	2 years of HEE funding
First Contact Practitioners (MSK)	WVT	To explore joint roles and upskilling the relevant workforce
OTs and Dietitians	WVT	Explore feasibility of supporting staff wellbeing for partners

What are One Herefordshire Partnership priorities for the coming year?



One Herefordshire Priorities

Core Priorities	Cross-Cutting	Underpinned by
<p>Integrated Primary & Community Care</p> <p>Urgent Care Redesign</p> <p>Elective Care Recovery</p>	<p>Children & Young People</p> <p>Mental Health and Wellbeing</p> <p>Health Inequalities & Prevention</p>	<p>Quality Oversight & Assurance</p> <p>Financial Strategy</p> <p>Data and Digital Strategy</p> <p>Workforce Strategy</p> <p>Community Engagement</p>

Developing the One Herefordshire transformation approach

2023/24 Priorities

Project/Priority	Narrative
PCN Development (including Fuller recommendations)	Development of PCN 'team of teams' <ul style="list-style-type: none"> • Population Health Management • Health Inequalities • Personalisation, Prevention and Well Being
Integrated Urgent Care	<ul style="list-style-type: none"> • GP Out of Hours Procurement • Implementing the 'blueprint'
Health and Wellbeing Strategy Priorities *	<ul style="list-style-type: none"> • Best start in life • Mental Health and Wellbeing
Planned Care	<ul style="list-style-type: none"> • Long term conditions (Diabetes, HF, COPD) • Making Every Referral Count
Workforce	<ul style="list-style-type: none"> • Public Sector recruitment • Joint roles and Careers
Working with Communities	<ul style="list-style-type: none"> • Community Paradigm
Working Well Together	<ul style="list-style-type: none"> • Delivering against the secondary care asks identified in the Primary Care Recovery Plan

Questions?



Title of report: Joint Local Health and Wellbeing Strategy

Meeting: Health and Wellbeing Board

Meeting date: 26 June 2023

Report by: Director of Public Health

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose:

To update the Health and Wellbeing Board (HWBB) on the implementation of the new Joint Health and Wellbeing Strategy

Recommendation(s):

1. The Board to note progress to date on work to deliver the strategy

Alternative options

2. For the HWBB to not consider this strategy. This is not recommended. It is a function of the committee to prepare a health and social care joint strategic needs assessment (Understanding Herefordshire) for the county and to prepare a health & wellbeing strategy to meet those needs.

Key considerations

3. The Joint Local Health and Wellbeing Strategy was endorsed by the Health and Wellbeing Board on 27 April 2023.
4. The new strategy and the accompanying engagement report have been uploaded to the council's website and can be accessed [here](#). An easy read version of the strategy is currently being developed and will be uploaded to the Council's website once completed.
5. Over the last two months, work has been undertaken to share the new strategy with stakeholders and commence the process of developing the delivery plans for the two core priorities and clarify the governance arrangements. A summary of the progress to date is detailed below:
6. Best start in life
 - I. The Children and Young People Partnership (CYPP) will be accountable for developing a delivery plan against the best start in life priority. The CYPP are currently reviewing the existing Children and Young People Action Plan that was developed in 2019 and needs to be updated. A CYP workshop is taking place on 19 June where work will commence on developing the action plan.
 - II. Further work is being undertaken to understand the CYP governance landscape. This includes the interface with the work of the Children Improvement Board which recently agreed to reduce the number of transformation programme delivery boards from seven to three, recognising the role of existing and newly established partnership boards (Herefordshire Safeguarding Children's Partnership; the Children and Young People Partnership; the Corporate Parenting Board; and, the SEND Strategic Board) in delivering improved outcomes for children and young people.
7. Mental Wellbeing across the lifetime
 - I. The governance around mental wellbeing is less straight forward. At present there is a system wide ICS mental health collaborative with two place based mental health partnerships in Herefordshire. This includes the Children Emotional Health and Wellbeing Partnership Board and the Adult Mental Health Partnership.
 - II. At a meeting on 1 June 2023, the Adult Mental Health Partnership agreed to review their terms of reference and provisionally agreed to become more 'action orientated' with a greater focus on delivery. The group agreed to hold a workshop, which has been scheduled for 6 July to progress this further

- III. On 22 June, the Mental Health Collaborative Executive will consider a report whereby the ICB are proposing to fund a new Suicide Prevention role that will be located within Herefordshire Public Health Team. Having a dedicated suicide prevention worker across Herefordshire will greatly enhance the work that has already taken place and help deliver against the core priority. The role will continue to ensure close work with Worcestershire and continue the work that was previously delivered through the Suicide Prevention Team
8. Work has commenced on the development of an outcomes framework for these two core priority areas. This is following a 'logic model approach' that will aid the formulation of actions against the four high level outcomes identified against each core priority. Logic models provide a useful method to understand the shared relationships among the resources, activities, outputs and desired outcomes. It is anticipated that the Health and Wellbeing Board will use the framework to measure progress across the two priority areas on a quarterly basis
9. A formal launch of the new strategy is scheduled for 12 July 2023 and will be held at the Shell Store, Hereford. Invitations have gone out to members of the health and wellbeing board, as well as key public sector leaders and representatives from organisations that support individuals focusing on our the core priorities – best start in life and mental health across the lifetime. The launch event will celebrate our achievements to date, sharing details on the new strategy and considering how we can best deliver our shared priorities together

Community Impact

10. The purpose of the strategy is to help improve the health and wellbeing of Herefordshire residents and reduce inequalities. One of the key principles upon which the strategy has been developed is that of community empowerment, which in practice means that we must continue to involve our communities in any action that is taken, so that the community own it and the impact on that community is maximised.

Environmental Impact

11. There are no general implications for the environment arising from this report; however the health and wellbeing strategy features the reduction in our carbon footprint as one of its priorities, therefore further along in the delivery of the strategy it is expected that there could be some environmental impact. There will also be co-benefits to the environment through ambitions to reduce levels of obesity, eat more healthily and increase levels of physical activity through active travel.

Equality duty

12. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to –

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c) Facilitate good relations between persons who share a relevant protected characteristic and persons who do not share it.

13. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.

14. The principles of equality and the reversal of health inequalities are key strands of the strategy.

15. To be effective in delivering good population outcomes and helping those most in need, the strategy calls for intervention by working together at system, place, and community levels to tackle issues reflecting whole system priorities as well as specific concerns at the right scale.

16. An equalities impact assessment has been undertaken alongside the development of the strategy.

Resource implications

17. There are no resource implications associated with this report. However, the development of the delivery plans may lead to resource implications.

Legal implications

18. Health and wellbeing boards are responsible for encouraging integrated working between health and social care commissioners, including partnership arrangements such as pooled budgets, lead commissioning and integrated provision.

19. Their purpose is to establish collaborative decision making, planning and commissioning across councils and the NHS, informed by the views of patients, people who use services and other partners.

20. The functions of the Health and Wellbeing Board are set out in paragraph 3.5.24 of the constitution.

21. As per the Health and Social Care Act 2012, the production of a Joint Local Health and Wellbeing strategy is a statutory requirement and therefore its endorsement and support is required.

Risk management

22. There are no risk implications identified emerging from the recommendations in this report

Consultees**Appendices**

Health and Wellbeing Board Forward Plan 2023/24

AGENDA ITEM	REPORT FROM	FREQUENCY	PURPOSE	ACTIONS
12 December 2022 – Public Board				
Joint Strategic Needs Annual Update	Charlotte Worthy	Ad-hoc	Information	
Mental Health and Suicide Update	Darryl Freeman/Matt Pearce	Ad-hoc	Information	
Joint Health and Wellbeing Strategy Update	ICS	Ad-hoc	Information	
Winter Plan/BCF	Ewen Archibald	Ad-hoc	Information	
Health Inequalities Plan	Frances Howie/Alan Dawson	Ad-hoc	Information	
Integrated Care Strategy Update	David Mehaffey	Ad-hoc	Information	
11 January 2023 - Private Development Session				
Herefordshire Health and wellbeing strategy	Lucky Beckett/Matt Pearce	Ad-hoc	Information	
Adult Safeguarding Thematic Review	Ivan Powell/Anne Bonney	Ad-hoc	Information	
Project Brave	Ewen Archibald/Lucy Beckett	Ad-hoc	Information	
13 March 2023- Public Board				
Joint Health and Wellbeing Strategy (Draft)	Matt Pearce	Ad-hoc	Decision	
Health Inequalities Plan	Alan Dawson	Ad-hoc	Decision	
Health Protection Assurance Group	Rob Davies	Ad-hoc	Information	
Adult Safeguarding Thematic Review / Project Brave	Ivan Powell	Ad-hoc	Information	
Child Death Overview Annual Report	Elizabeth Altay	Ad-hoc	Information	
Community Paradigm	Amy Pitt	Ad-hoc	Information	
27 April 2023 – Public Board				
DPH Annual Report	Matt Pearce	Annually	Information	
Joint Health and Wellbeing Strategy (Sign-off)	Matt Pearce	Ad-hoc	Decision	
Sexual Violence Strategy	Frances Howie	Ad-hoc	Decision	
Integrated Care Strategy update	David Mehaffey	Ad-hoc	Information	
14 June 2023 - Private Development Session				
Joint Forward Plan discussion	David Mehaffey/Alison Roberts	Ad-hoc	Information	
26 June 2023 – Public Board				
Children’s Services Improvement Plan	Darryl Freeman	Ad-hoc	Information	
One Herefordshire Partnership Update	Chair of One Herefordshire Partnership	Annually	Information	
Better Care Fund End of Year 2022/23 report	Marie Gallagher	Annually	Information	

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AGENDA ITEM 11

Joint Local Health and Wellbeing Strategy Update	Matt Pearce	Ad-hoc	Information	
July 12th 2023 – HWB Strategy Launch Event				
August 2023 - Private Development Session TBC				
25 September 2023 - Public Board				
Health and Wellbeing Board Delivery Plans	Matt Pearce	Quarterly	Information	
Mental Health Strategy/Mental Health Collaborative	ICS	Annually	Information	
Domestic Abuse Strategy 2021-24	Kayte Thompson-Dixon	Ad-hoc	Decision	
Community Paradigm	Hilary Hall	Ad-hoc	Information	
Community Safety Partnership Update	Adrian Turton	Ad-hoc	Information	
Better Care Fund Plan 2023-25	Marie Gallagher	Ad-hoc	Decision	
November 2023 - Private Development Session TBC				
4 December 2023 – Public Board				
Health and Wellbeing Board Report	Public Health	Quarterly	Information	
11 March 2024 – Public Board				
10 June 2024 – Public Board				
16 September 2024 – Public Board				
9 December 2024 – Public Board				