

Health and Care Overview and Scrutiny Committee

Monday 11 April 2022

10:00

Council Chamber, County Buildings, Stafford

The meeting will be webcast live which can be viewed at any time here:

<https://staffordshire.public-i.tv/core/portal/home>

John Tradewell
Director of Corporate Services
1 April 2022

A G E N D A

1. **Apologies**
2. **Declarations of Interest**
3. **Minutes of the last meeting held on** (Pages 1 - 10)
4. **Cannock Minor Injuries Unit (MIU) Update**
Clinical Commissioning Group to provide a verbal update
5. **Care Home Update** (Pages 11 - 16)
6. **NHS approach to Climate Change - Staffordshire and Stoke on Trent Integrated Care System (ICS) Plan** (Pages 17 - 30)
Report of the North Staffordshire Combined Healthcare NHS Trust and Staffordshire and Stoke on Trent ICS
7. **Spotlight Review of Sexual Harassment in Schools Draft Report** (Pages 31 - 58)
Report of the Spotlight Review of Sexual Harassment in Schools Working Group
8. **District and Borough Activity Update** (Pages 59 - 64)
Report of the District and Borough Representatives

9. **Work Programme 2021- 22**

(Pages 65 - 70)

Report of the Scrutiny and Support Officer

10. **Exclusion of the Public**

The Chairman to move:-

That the public be excluded from the meeting for the following items of business which involve the likely disclosure of exempt information as defined in the paragraphs Part 1 of Schedule 12A Local Government Act 1972 (as amended) indicated below.

Membership

Jak Abrahams	Barbara Hughes
Charlotte Atkins	Thomas Jay
Philip Atkins, OBE	Janet Johnson
Martyn Buttery	David Leytham
Rosemary Claymore	Paul Northcott (Vice-Chairman (Overview))
Richard Cox	Jeremy Pert (Chairman)
Ann Edgeller (Vice-Chairman (Scrutiny))	Janice Silvester-Hall
Keith Flunder	Colin Wileman
Phil Hewitt	Ian Wilkes
Jill Hood	

Notes for Members of the Press and Public

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**Minutes of the Health and Care Overview and Scrutiny Committee
Meeting held on 15 March 2022**

Present: Jeremy Pert (Chairman)

Attendance

Philip Atkins, OBE	Barbara Hughes
Martyn Buttery	Thomas Jay
Richard Cox	David Leytham
Ann Edgeller (Vice- Chairman (Scrutiny))	Paul Northcott (Vice- Chairman (Overview))
Keith Flunder	Janice Silvester-Hall
Phil Hewitt	Colin Wileman

Also in attendance:

Marcus Warnes, Accountable Officer, Staffordshire and Stoke-on-Trent Clinical Commissioning Groups (CCG)

Alec Dobney, Head of Unit, UK Health Security Agency (UKHSA)

Britta Gadeberg, Toxicology Consultant, UKHSA

Emma Sandbach, Consultant in Public Health, SCC

Katie Spence, Local Deputy Director, UKHSA

Jenny Fullard, Communications and Engagement Service Partner, NHS Midlands and Lancashire Commissioning Support Unit

Helen Slater, Transformation Manager, CCG

Emily Doorbar, Covid Lead SCC

Dr Richard Harling, Director Health and Care SCC

Julia Jessel – Cabinet Member Health and Care, SCC

Apologies: Charlotte Atkins, Rosemary Claymore, Jill Hood, Janet Johnson and Ian Wilkes

Substitute: Cllr Julie Cooper substituted for Cllr Wilkes

PART ONE

65. Declarations of Interest

Councillor Ann Edgeller declared an interest as Partner Governor of the Midlands Partnership Foundation Trust (MPFT).

66. Minutes of the last meeting held on 31 January 2022

The minutes of the meetings held on 31 January 2022 be approved and signed as a correct record.

67. Walley's Quarry Landfill Site - Health Implications Update

The Head of Unit UKHSA provided a detailed report and presentation relating to the health risk assessment for Walley's Quarry Landfill Site. He advised that the odours within Silverdale and the surrounding areas continued to be a complex and long running incident for UKHSA.

The Chairman welcomed the quality of the assessment and data in the report and presentation which was based on the monthly UKSHA risk assessments of the site. The report considered air quality data and health data going back to the inception of this incident and presentation slides further detailed the position of the mobile monitoring stations around the Landfill Site and data from the monitoring stations.

The Committee noted that high concentrations of hydrogen sulphide (H₂S) were first recorded in March 2021, levels of H₂S had decreased monthly towards December 2021 and at that time there was anticipation that the measures put in place were having the desired effect. However, UKHSA informed Committee that increases in concentration of H₂S were recorded in December 2021 and January 2022 with the highest concentrations of H₂S recorded at station MMF9 located in the Galingale residential area. This had raised new concerns that some of the measures on site were not continuing to have the desired effect. UKHSA reported concern for the toxicological effect on individuals' physical health and also the psychological effect on residents. It was explained that only the Environment Agency (EA) could determine the effectiveness of the interventions on the site.

It was explained that from January 2022 onwards, UKHSA was only comparing the monitoring results with the United States Environmental Protection Agency long-term (lifetime) health based guideline (2 µg/m³).

- (MMF1 and MMF2) concentrations were below the long-term (lifetime) health based guidance value, as they have been since June/July 2021
- (MMF6) concentrations have been below the long-term (lifetime) health-based guidance value since July 2021, In January 2022, showed a slight exceedance; the overall cumulative average is below the long-term (lifetime) health-based guidance value
- (MMF9), concentrations in January 2022 remained above the US EPA RfC. In this location concentrations were also above the World Health Organisation(WHO) odour annoyance guideline value for 16% of the time.

At MMF9, located in the Galingale residential area, concentrations had remained above the recommended guideline value for the duration of the incident and currently, whilst any risk to long-term (lifetime) physical

health is likely to be small, UKHSA could not exclude long term health impact if they remained so.

The Committee noted the following comments and responses to questions:

- Data measurement – concerns were raised that monitoring data would not show seasonality without a full year monitoring data. Assurance was provided that monitoring data went back to March 2021 and would be in place until December 2022 and there would be more than a years' worth of data to compare.
- Concerns were highlighted about H2S concentration levels at MMF9 in the residential area and the health impact on people who lived there. Psychological impact, although not in the risk assessment of air quality data, was also being taken into account. The figures did not show that the remedial work going on to date had been successful.
- Levels of other substances monitored on the site were not of concern at this time from the data presented.
- UKSHA could not respond to questions about the effectiveness of remedial work on site, the EA had provided a briefing paper on regulatory action taken to date, the latest measures to improve control of H2S emissions and a link to the plan to reduce H2S emissions from Walley's Quarry. UKHSA could only interpret the EA's monitored levels of H2S concentration coming off site. The only way UKHSA could determine if the work was effective was if levels fell in the monitoring data provided by EA.
- UKHSA had seen evidence of levels decreasing and had seen some differences caused by atmospheric conditions, but essentially EA was responsible for monitoring concentrations outside of the site and provided monitoring data to UKHSA. UKHSA was independent of the EA rather than contracted to the EA.
- Concern was raised about the impact of materials deposited in the landfill site on the water course. It was confirmed that the EA was responsible for monitoring the water and had a duty to make UKHSA aware of any issues. At this time no concerns had been reported.
- Members stressed that residents across Staffordshire had suffered long enough but there was no clear point of resolution for residents. Committee were advised that residents continued to be extremely annoyed about the odour, the impact on them, and that the situation had gone on for over 15 months. Residents continued to report a range of problems - foul odour, headache, nausea and respiratory symptoms irritation around eyes and throat which correlated with HS2 concentrations. Mechanisms were in place for residents to report symptoms.

- Members were disappointed that the EA had not been able to send a representative to respond to questions and determined to send a strong letter to Government to express this.
- Committee heard that in autumn 2021 Public Health was reasonably optimistic that there was a clear improving trend, but now were not confident having seen a spike in levels of H₂S on the site. There was concern that there was not a clear plan to assure residents of what was promised to them in Parliament a year ago and concerns to the health of residents as the incident endures.
- Committee was assured that NHS had set up a dedicated mental health support facility and residents could access support and advice on health issues through their general practice GP.
- Activity on the site was due to end in 2026 when the contract ended, monitoring of the landfill site would have to continue even when activity ended, and the site was capped. Remediation of the site would be part of any Government action.

The Chairman thanked representatives from UKHSA and Dr Richard Harling for presenting the updates and for responses to questions at the meeting.

The Chairman summarised that the incident at Walley's Quarry had been an ongoing matter, since 2020, this committee had met in July 2021 to discuss the health implications and residents were still looking for a resolution to the problem in March 2022. The committee had heard that the longer this incident goes on, without a timeline to resolve the issue, the risks to long term health because of H₂S concentrations could not be excluded and there was an impact on residents' mental health. The committee stressed the need to send a clear message to the Government for a decisive and urgent solution to the problems at Walley's Quarry Landfill Site, with the concentrations of H₂S escape and in the absence of a clear plan there was a need to discontinue operations and close the site.

Resolved:

1. That the Health and Care Overview and Scrutiny Committee Chairman write to the Secretary of State for Environment, Food and Rural Affairs to express the committees' disappointment that the Environment Agency West Midlands Area chose not to attend committee to respond to questions on specific actions and about the plan to reduce hydrogen sulphide emissions at Walley's Quarry Landfill Site, Silverdale, Newcastle under Lyme, Staffordshire.
2. That the Health and Care Overview and Scrutiny write to HM Government to request that it intervene directly to resolve the situation at Walley's Quarry Landfill Site, using emergency powers if necessary to discontinue operations and close the site.

3. That the responses to the letters to HM Government be circulated to members as soon as received, and if no progress has been made to resolve the situation, request a further report to Health and Care Overview and Scrutiny Committee in two months.

68. Transformation Programme Update

The Accountable Officer, the Head of Transformation at Staffordshire and Stoke on Trent CCGs and the Communications and Engagement Service Partner NHS Midlands and Lancashire Commissioning Support Unit were in attendance to provide an update report and presentation on the system-wide transformation programme. The Accountable Officer also gave a verbal update on the Cannock Minor Injuries Unit (MIU).

The Cannock MIU was closed temporarily at the start the pandemic and was yet to re-open. Members were assured that the CCG was fully committed to re-opening Cannock MIU and was considering options. The Royal Wolverhampton Trust was not in a position to resume staffing it and a procurement exercise would be required to find a provider. CCG had faced challenges because there were widespread workforce issues due to Covid sickness and the skill set required to staff MIU's was in short supply and in great demand. CCG aimed to re-open Cannock MIU in June 2022, Members noted that the future of all Urgent and Emergency Care Services would be consulted on later in the year. An update report would be provided to the next meeting 11 April 2022.

In terms of the system wide transformation programme, an update was provided and detail about the processes and timelines were shared. Committee understood that since reporting on involvement activity Autumn 2021 there had been further changes to the transformation programme:

- As a result of new Government guidance, development of community diagnostic centres had been added and residents had been engaged.
- Some projects had been uncoupled from the programme to enable them to progress.
- Some projects were still paused
- Some projects were being sense checked to ensure consultation feedback from July 2019 was still relevant post Covid, that new guidance had been taken into account and that feedback on changes during Covid was included.

The Committee noted the following comments and responses to questions:

- Members felt that the number of consultation responses were relatively low. CCG advised that it was working to encourage better

uptake and that digital and social media involvement activity would be taken forward. Also, that CCG aimed to work with Healthwatch and voluntary organisations and welcomed suggestions from members for other methods to encourage uptake, including the suggestion to engage service users.

- In terms of the Urgent and Emergency Care Programme all emergency care portals would be considered as part of the options appraisal.
- Members highlighted the need for mental health providers to share details of pathways, to signpost where to access mental health support both direct and via voluntary sector support.
- The Case for Change (2019) set out the clinical model for Integrated Care Hubs (ICH) which were focussed on long term conditions. Consultation on ICHs in North Staffordshire was starting soon.
- It was understood that good community involvement required a connection to trusted voices in communities. During the pandemic community leaders had been working closely with partners. CCG was exploring with HW and VSCE colleagues both how to connect with communities and how to identify funding to set up surveys and engagement activities.
- Members were assured that there were pilot schemes and discussions underway to build alliances and long-term relationships between HW, VAST, Support Staffordshire and the Integrated Care System (ICS). Members expressed they wanted to be involved in supporting ICS in communities to link to community leaders as part of the process.
- Members highlighted the importance of reliability and value of data in the options appraisal to inform decision making for the George Bryan Centre. Assurance was given that the information gathering process was the same as used in other work, and that a range of evidence and impact assessments had been taken into account in the development of proposals. The stakeholder session to consider the proposal for the George Bryan Centre later that day would provide a sense check and would take into account the findings. The business case would go through an assurance process and be reported to committee in Summer 2022.
- Members understood that local intelligence and knowledge of trusted voices in the community was the best way to reach out and were assured that links were being built in to processes to speak to all communities.
- In relation to difficult decisions, committee were assured that a consistent approach would be taken across Staffordshire for residents of all geographical areas. CCG gave assurance that national and local guidance was referred to and kept up to date to ensure prioritisation and clarity of key design criteria. It was confirmed that health inequalities and the equality duty were taken into account. There was

consistency of approach in terms of service provision and being mindful in terms of access to services.

The Chair thanked presenters for the update.

Resolved:

1. That the Health and Care Overview and Scrutiny Committee received the reports of findings in the Transformation Programme update report and requested a report to a future meeting to consider the final proposals.
2. That an update report relating to Cannock MIU be provided to the next meeting of the Health and Care Overview and Scrutiny Committee.

69. Performance Overview

The Accountable Officer and Transformation Manager, CCG presented a report and performance dashboard to provide an overview of CCG performance against key constitutional standards and targets. The report updated committee on referral to treatment times, diagnostic test waiting times, cancer waits, accident and emergency provider and general practice.

The Accountable Officer advised that the high level of infections and staff absence across the winter months of late 2021 and early 2022 had been a particular challenge. He indicated that many of the targets on the dashboard were not being hit and were showing as a red rating.

Members were advised that there was an increase in numbers of people in hospital with Covid, over 8,000 in hospital in March 2022 which was a 20% increase since February 2022. In many cases Covid was not the reason for admission, many were testing positive after being hospitalised with a different condition. The high Covid numbers in hospitals had put significant pressure on the recovery programme.

Committee noted the following comments and responses to questions:

- Concern was raised about monitoring Covid cases once restrictions were lifted. Members were advised that during the pandemic only 1 in 6 lateral flow tests (LFT) had been reported, indicating that only a proportion of positive cases were reported. It was confirmed that the Office for National Statistics (ONS) data across the Country showed that 1 in 25 people were testing positive and data gathered would also show any new variants.

- Covid was considered endemic, there were still high numbers, but the population would need to follow Government guidance on 'Living with Covid'.
- Concerns were highlighted about breast cancer; histopathology testing and diagnostic waits which were longer than desired. There were also issues for rectal and skin diagnostic waits. Staffing was identified as a big problem which could not be resolved by additional funding, there were just not enough trained clinicians to carry out diagnostic tests and procedures in certain specialisms; and there was a shortage of trained clinicians to recruit. The Chairman advised that workforce issues would be looked at in the work programme for 2022-23.
- Members were concerned that it would take years not months to work through the backlog lists and address staffing resources. Members were re-assured that CCG was making some progress to reduce the backlog, but people were still presenting to add to the list.
- CCG was mindful that the consequences go far beyond the dashboard rating, this was about real people with real lives that were being affected by the long wait times and whilst dealing daily with the symptoms of their condition.
- CCG indicated that although changes were being made to areas of the pathway, when a redesign could make a difference, this was not going to resolve the bigger issues.
- CCG advised that it would take a long time to train people in clinical roles, and with more people were leaving the NHS than were joining it there was a need to retain people and make the NHS a place where people wanted to work. It was stressed that the last two years had been exhausting for the workforce and the challenge was not just about recovering elective timelines, but that the workforce needed time to recover as well.
- Members highlighted the importance of learning from good practice and the need to look at the six areas to identify where recovery had gone well so that good practice and learning could be shared across the system and with neighbouring ICS colleagues.
- The Chairman thanked all staff in the system for all the work they do.

The Chairman welcomed the detail in the report and presentation and indicated that key themes of concern from residents were access to GP surgeries and the backlog of elective surgeries. He clarified that committee maintained regular overview of the Primary Care Access Plan and also that a report on the backlog of elective surgeries was scheduled to committee in the work programme.

Resolved:

- 1) that Committee note the report and request a further monitoring report to a future meeting.

70. Covid-19 Update

The Covid Defence Lead provided an update report. She advised that the 'Living with Covid' paper was announced 21 February 2022, there were two significant changes one relating to the legal duty to isolate following a positive Covid test was replaced with guidance to limit contact from 24 Feb. The second was the intention to cease pre-public testing from 1 April 2022.

Main messages from the presentation were:

- That activities will focus on supporting high risk settings.
- A Covid helpline would be retained.
- Case rates were starting to rise. All age groups were rising but most increase was in the 35-39 age group.
- Hospitalisation rate was steadily reducing.
- Death rates remained below average.
- Vaccination drives continued. There was a significant increase in 12-16 year old take up of second doses.

Committee noted the following comments and responses to questions:

- The 'Living with Covid' paper focussed on an individuals' personal responsibility and personal accountability. The new local outbreak plan encompasses the paper but also looks at how to support local businesses to encourage public to take responsibility.
- The Lateral Flow Test (LFT) free public tests would cease from 1 April 2022.
- A review of the outbreak management response was taking place and communities that were considered to be at risk were being looked at to consider how to support them when free public testing ceased. A community impact assessment would be completed as part of review to understand who would be affected and how to support them.
- Members welcomed the success of the vaccination programme and indicated it was key to get back to normal with people taking personal responsibility. When assessing the effectiveness of some of the precautions during Covid restrictions they would be a need to look at the negative impact on mental health, the economy and take a balanced approach. They would continue to get the vaccination message out to public to be vaccinated and to get the message out.
- 119 system was a health number and could not be confirmed how long that would be in place. Assurance was provided that the Staffordshire County Council SCC Covid helpline would remain and would be manned until March 2023.
- New entrants entering from abroad were able to help them enter safely and to get support and be tested.

The Chairman concluded that as Covid was now classed as endemic in the environment there would be no requirement for a regular update on each agenda moving forward. The Chairman thanked the Covid Lead for attending committees and for her input over the duration of the pandemic. He asked that should any situation emerge that required a report to committee the Covid Lead would be invited to update the Committee.

Resolved:

1. That the update report be received and noted

71. District and Borough Updates

District and Borough representatives presented update reports and highlighted the following matters being considered at District and Borough meetings.

East Staffordshire Borough Council representative offered to send links to a scrutiny review report submitted to Cabinet on 14 March 2022, relating to Engaging and Supporting Communities. The Chairman welcomed sharing best practice between District and Borough Councils.

Staffordshire Moorlands meeting for 9 March had been postponed to Thursday 17 March 2022.

Resolved:

1. That the District and Borough Updates be noted.

72. Work Programme 2021-22

The Chairman introduced the work programme.

The wider determinants of health session led by Vice-Chair Scrutiny had been delayed to enable attendance of the new Public Health Consultant who joins Staffordshire County Council in April 2022.

The Mental Health Support Team report led by the Vice-Chair Overview had been delayed to 30 May 2022 to enable key witnesses to attend and to take account of the Draft Mental Health Strategy which was delayed to Spring 2022. Members were assured work was progressing.

The next meeting of the Committee takes place 11 April 2022.

1. That Committee note the work programme update

Chairman

Local Members Interest
N/A

Health and Care Overview and Scrutiny Committee - Monday 11 April 2022

Care Home Update

Recommendations

I recommend that the Committee consider the ongoing challenges and support to care homes, and longer-term commissioning initiatives.

Report of Cllr Julia Jessel, Cabinet Member for Health and Care

Summary

1. Care homes have faced a number of challenges during the Covid pandemic, and the Council has provided a range of support. Longer term the Council has a range of commissioning initiatives underway in order to achieve our strategic objectives. This report provides Overview and Scrutiny with a further update on the care home sector following the last update in January 2021.

Overview

2. There are 249 care homes registered with the Care Quality Commission (CQC) with 7882 beds in Staffordshire. The Council funds just under 3,000 care home placements, just over 1,700 in residential homes and under 1,100 in nursing homes, and around 80% of these are within Staffordshire. The remaining beds in county are commissioned by the NHS, other local authorities, or occupied by self-funders. A breakdown of Council funded placements by client group and location is shown in Table 1.

Table 1: Council funded care home placements

Location	In county	Out of county	Total
Older people	1,855	360	2,215
Physical disability	69	37	106
Learning disability	235	159	4394
Mental health	59	30	89
Total	2218	586	2,804

Challenges of Covid

3. Care homes have faced a range of challenges to maintaining care and financial sustainability during the pandemic:

a. **Management of Covid outbreaks.** Government guidance for management of outbreaks has been updated. As part of the Living with Covid announcements, the government confirmed there will continue to be precautions for both staff and visitors to adult social care settings, with new infection prevention control guidance to be published by 1 April 2022. There are 33 care homes in Staffordshire who were subject to COVID stoppages on 30 March 2022. At present, care homes continue to adhere to guidance specifically in respect of:

- i. Management of exposed staff and residents – including persons who are identified as contacts of Covid 19 cases and those who test positive for Covid 19
- ii. Personal Protective Equipment requirements (determined by task)
- iii. Regular asymptomatic Covid 19 testing regimes for both staff and residents
- iv. Care home visiting guidance
- v. General infection prevention control measures including hand hygiene, enhanced cleaning, ventilation, cohorting of staff (and limiting movement) and social distancing
- vi. The use of designated settings if Covid 19 is acquired in a clinical setting

b. **Recruitment and retention of staff.** This was a challenge prior to Covid and has been exacerbated by the pandemic, as well as by national workforce shortages. The requirement for vaccination as a condition of deployment was rescinded on 15 March. 98.8% of care home staff have had two doses of vaccination and 55.1%% have had a booster dose. Recruitment and retention remain challenging, with care homes reporting few applicants for posts.

c. **Reduction in staffing levels** due to the requirement to isolate. Government guidance for isolation of staff has been updated. The legal duty to self-isolate has been removed, however adult social care staff are required to remain away from the setting in the following circumstances:

- i. Being identified as a contact of a Covid 19 case – fully vaccinated staff members are required to receive a negative PCR test result before returning to work, meaning their absence could be 24-72 hours in duration. Those who have tested positive for Covid 19 in the last 90 days are not required to receive a negative PCR test. In both circumstances, the setting must complete a risk assessment (and give consideration to redeployment as appropriate) and the

- staff member must LFD test daily. If a staff member is not fully vaccinated, the DHSC recommends they do not return to the setting for 10 days.
- ii. Testing positive for Covid 19 – staff members can commence LFD testing on day 5 (noting the day of test is referred to as day 0); if they receive 2 negative LFD tests taken 24 hours apart, they can return to the workplace. If a staff member does not receive a negative test result in the initial 10 day, they could be absent for a maximum of 14 days, subject to the risk assessment of the setting. In addition, the setting is required to complete a risk assessment (and give consideration to redeployment as appropriate) and the staff member needs to meet the improvement criteria and continue to LFD test daily.
- d. **Reduced occupancy.** Care Homes are reporting occupancy levels of 80.2% as at March 2022.
- e. **Increased operating costs.** Care homes face increased operating costs due to inflation, the need to pay competitive wages in the context of recruitment and retention challenges, and enhanced infection prevention and control standards. During the pandemic these have been met by a series of non-recurrent grants from Government, as set out in Table 2.

Table 2: non-recurrent funding from Government grants

Grant	Amount (£m)
Emergency funding	7.276
Infection Control Fund 1,2,3 & 4	14.811
Community Testing Fund	0.001
Rapid Testing Fund 1,2,3	4.573
Workforce Capacity Grant Mar 21	0.772
Infection Control Fund 5	1.69
Rapid Testing Fund 4	1.5
Vaccination Grant	0.144
Recruitment and Retention Fund	1.83
Omicron Grant	0.5
Total	32.647

4. The Council has supported care homes throughout the pandemic with:
- Advice and guidance, including to support management of outbreaks.
 - Supplies of personal protective equipment.

- c. Infection control expertise and training.
- d. Recruitment resources.
- e. Emergency staffing.
- f. Support to improve quality from our Quality Assurance and Provider Improvement and Response Teams.
- g. Access to mental well-being support; and
- h. Distribution of Government grants.

Discretionary fee review 2022/23

5. The Council is not obliged in contracts to offer fee uplifts to care homes but does have the option for discretionary fee reviews to take into account increases in costs. The Council consults with care homes annually on an appropriate fee uplift for the following year. Consideration of fee uplifts needs to balance the Council's duty under the Care Act 2014 to promote the efficient and effective operation of a market of services to meet care and support needs against the legal requirement to set a balanced budget.

6. The Council has calculated that the actual increase in the costs for residential and nursing Care in 2022/23 is 6.24% and this has been offered to providers with the application of a 3% quality premium for some placements and a 3% productivity saving for others as below. This will reduce the variation in care home fees, which is currently wide, and is therefore consistent with Government's adult social care reforms as set out in "Market Sustainability and Fair cost of Care Fund: purpose and conditions 2022 to 2023" with the requirement to determine and move towards a Fair Cost of Care for each local authority area.

7. Staffordshire has a lower than national average proportion of care homes rated 'outstanding' or 'good' by the Care Quality Commission. There is some association between the price of care and the quality of care, and the fee uplift for 2022/23 includes a quality premium of 3% to be applied to those placements that are lower paid. This comes with an expectation that it would facilitate improvements in the quality of care where necessary.

8. Some placements are already comparatively well remunerated, and the fee uplift for 2022/23 also includes a productivity saving of 3% to be applied to those placements that are higher paid in order to ensure value for money for taxpayers.

9. The County Council Network has published its report conducted with health care market specialists, LaingBuisson, which analyses two key aspects of the government's adult social care reforms: proposals to allow private payers to ask councils to arrange care on their behalf at lower local authority rates and the intention to introduce a new "Fair Cost of Care",

which aims to increase care fees paid by councils to make the care market more sustainable. The report concludes that an extra £854m a year is needed to make the proposals workable and to ensure ongoing investment into the social care sector.

Longer term commissioning initiatives

10. The Council's overall strategic objectives from commissioning care homes are:

- a. **Improving the quality-of-care homes in Staffordshire.** This is primarily measured by the proportion of care homes rated by the Care Quality Commission (CQC) as 'outstanding' or 'good' with a target to reach the England average within the next 3-5 years. Currently 64% for nursing homes and 82% for residential care homes. Compared to the England average of 77% for nursing homes and 83% residential
- b. **Ensuring timely access to care home placements when required.** This is measured by the proportion of placements sourced to timescale with a target of 85% overall. Currently the council is achieving 72% of placements sourced in timescale.
- c. **Ensuring affordability of care home placements,** such that Council is paying a fair price, achieving value for money, and that overall expenditure does not exceed the budget. This is measured by the average price of placements with a target that this increases only by the cost of inflation and that variation in price is reduced. The current average cost for older people placements is £650, for individuals with a learning disability it is £1530 and Mental Health placements average is £1061.

11. A range of commissioning initiatives are underway in order to achieve these:

- a. **Development of additional Council owned nursing home capacity.** The Council will be reviewing the business case for two additional nursing homes, taking into account demand, quality and sustainability of the market in the wake of the Covid pandemic, and as set out in the Cabinet report of February 2022.
- b. **Quality improvement.** The Council is continuing and strengthening quality improvement work, including support for recruitment and retention, working closely with the NHS. Where care homes are repeatedly identified by CQC as below regulatory standards and unable to demonstrate a capacity for sustained improvement despite support, the Council will consider whether it can continue to make

new placements as well as moving residents where this is in their interests on a balance of risks.

- c. **Guide prices.** The Council will develop guide prices to give a clear indication of the price it is prepared to pay for care home placements. These will assist implementation of the Fair Cost of Care required by *People at the Heart of Care: adult social care reform white paper*. The expectation is that these will reduce variance in care home prices.
- d. **Procurement and contracting.** The Council will continue with a dynamic purchasing system (DPS) to make individual placements. However, the expectation is for a phased increase in the number of block booked beds and for the volume of placements made by DPS to decrease. Options for procurement and contracting of complex residential and nursing home placements will be considered.
- e. **Use of technology.** The Council continues to promote innovation including:
 - **Reminiscence Interactive Therapy Activities** which improve the experience of people with dementia and frees-up staff time.
 - **Oxevision** which allows monitoring of multiple rooms at one time, reducing infection risk and freeing-up staff time.
 - **Others** such as pressure and falls mats, iPads, video-calling platforms, electronic care records and electronic assessments.

Link to Strategic Plan

Be healthier and independent for longer.

Link to Other Overview and Scrutiny Activity

Considerations of demand pressures on the NHS.

List of Background Documents/Appendices:

N/A

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Local Members Interest
N/A

Health and Care Overview and Scrutiny Committee Monday 11 April 2022

NHS approach to Climate Change - Staffordshire and Stoke on Trent Integrated Care System (ICS) Plan March 2022.

Recommendation(s)

I recommend that:

- a. Colleagues note the UK Government commitment to reach net zero carbon by 2050 and the two supporting targets for the NHS in achieving that commitment:
 - i. The NHS Carbon Footprint: for the emissions we control directly, to be net zero by 2040
 - ii. The NHS Carbon Footprint Plus: for the emissions we can influence, to be net zero by 2045.
- b. Note the plans the NHS has brought forward to address the challenge of climate change across the areas of focus outlined in this report
- c. Offer feedback to support further development and delivery together with opportunities for Local Authority and NHS ambitions to be jointly pursued.

Report of Name Chris Bird, Director of Partnerships, Strategy and Digital, North Staffordshire Combined Healthcare NHS Trust and Staffordshire and Stoke on Trent ICS Senior Responsible Office for Sustainability.

Summary

What is the Overview and Scrutiny Committee being asked to do and why?

The NHS has ambitious targets to become net carbon zero by 2045 in support the UK Government commitment to be net carbon zero by 2050.

This will require the NHS to adopt a wide-ranging programme of change across several areas which are set out later in this report.

The NHS will not be able to deliver all of these measures in isolation and will require the support of, and ability to work with, a wide range of partners including Local Authorities at both upper and lower tier level.

The Staffordshire & Stoke-on-Trent Integrated Care System (ICS) is required to produce an ICS Green Plan by 31st March 2022. This captures the work that has been done to date, the work currently in progress and the work that will need to be done through collaboration across partners over the coming years.

Report

1 Background

NHS England and NHS Improvement (NHSEI) vision is to deliver the world's first net zero health service and respond to climate change, improving health now and for future generations.

Climate change poses a major threat to our health and planet - the environment is changing, change is accelerating, and this has direct and immediate consequences for our patients, the public and the NHS.

The UK government has made a commitment to reach net zero carbon by 2050 – health and care system contributes c4-5% of the country's carbon footprint and therefore has a major role to play.

The report [Delivering a Net Zero Health Service](#) sets a clear ambition and target for the NHS.

Two clear and feasible targets are outlined:

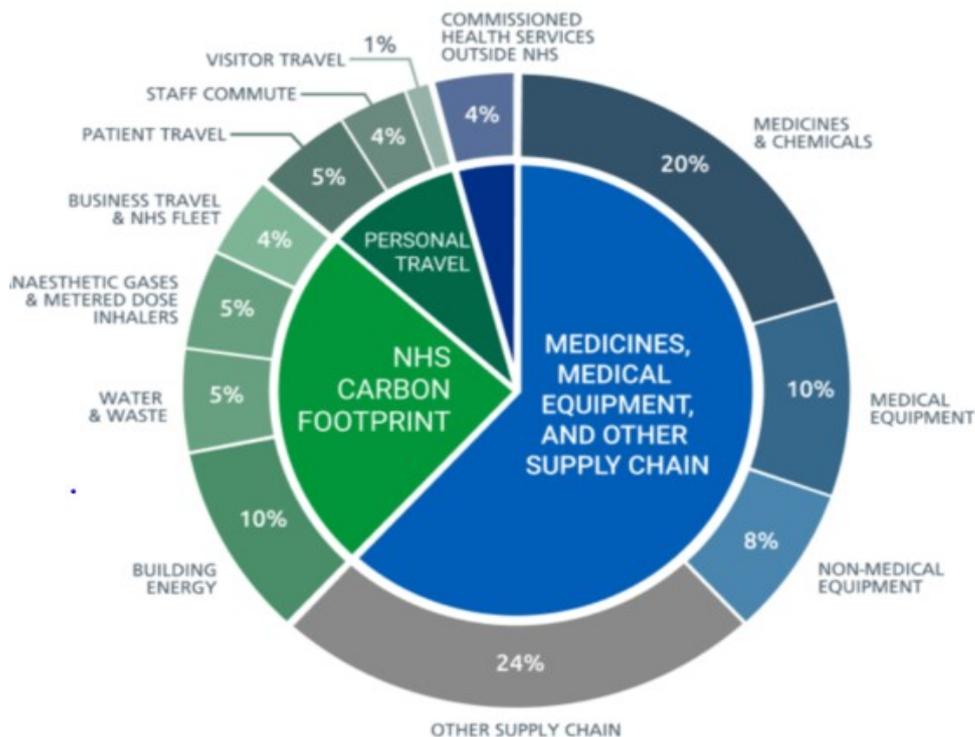
- The NHS Carbon Footprint: for the emissions we control directly, to be net zero by 2040
- The NHS Carbon Footprint Plus: for the emissions we can influence, to be net zero by 2045.

Each NHS Trust has produced a Green Plan and over recent months this has been expanded to include the ambitions and programmes of change that partners across the Staffordshire & Stoke-on-Trent geography have developed. This is captured in the ICS Green Plan which will be published on 31st March 2022.

2 The Carbon Footprint of the NHS

The health and care system contributes c4-5% of the country's carbon footprint and the carbon footprint of the NHS can be summarised in the schematic below:

The Carbon footprint of the NHS



In order to address the challenge of climate change and deliver reductions in the carbon footprint, a number of programmes of change have been developed:

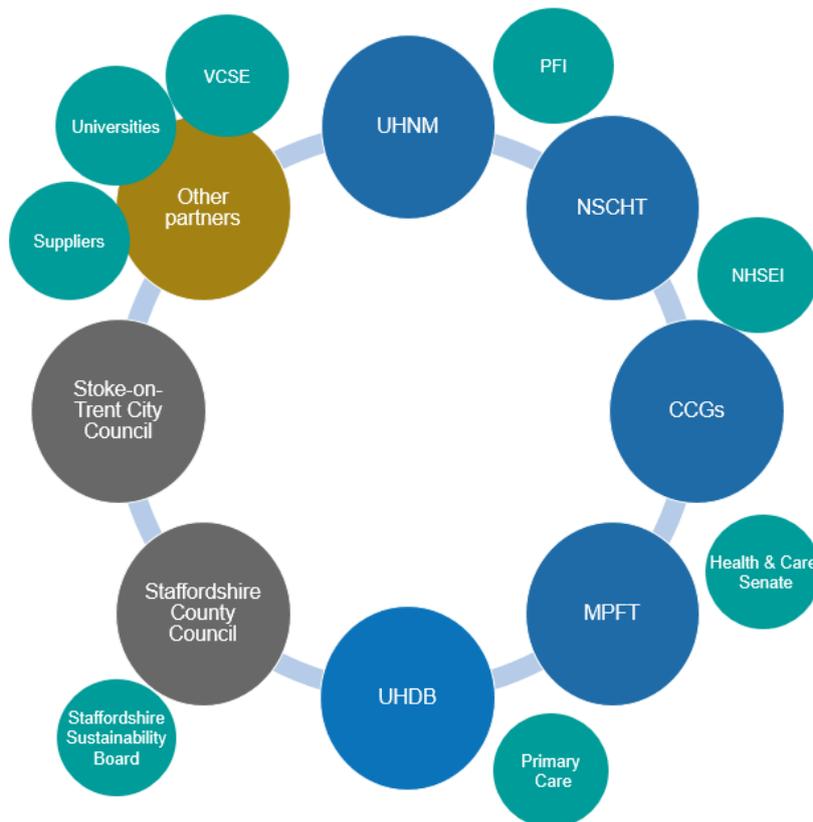
- Awareness raising and training via carbon literacy
- Promotion of active travel options
- ULEV/ZEV vehicles – fleet and lease
- Reducing Desflurane usage (an anaesthetic gas)
- Reducing pressure metered dose inhalers and inhaler recycling
- Reducing medicines waste
- Energy efficiency / renewable energy via energy audits
- Net Zero Supplier roadmap - procurement frameworks and work with suppliers of goods and services
- NHS Plastics Pledge / PPE
- Sustainable models of care (including digital transformation)
- Adopt 'Anchor Institution' type approach – promote connection to local communities.

3 Working in Partnership

The nature and scale of the change required to achieve the net zero carbon targets is too broad and deep to be coordinated through a single officer and will require senior, expert input from a broad range of disciplines and functions and organisations.

The SSOT Greener NHS Group was established in Autumn 2021 to coordinate the production of NHS Trust Green Plans and has since been expanded to include representation from a wide range of partners to help coordinate the ICS Green Plan and support delivery of the ambitions set out within that Plan.

The schematic below shows the membership of the Group and associated interdependencies.



4 Case Study

The ICS Green Plan builds on some of the great work already being delivered by partner organisations, an example of this is the **Keep well, Keep warm** project delivered through University Hospitals North Midlands (UHNM).

Designed to prevent hospital readmissions of vulnerable patients whose health conditions could be made worse through living in cold/damp homes it is an example of partnership working across NHS, Voluntary Sector and local industry to provide direct benefit to local communities.



In essence, the installation of solar panels across UHNM estate provides UHNM with lower cost, more resilient supply of energy. As well as reducing UHNM demand on the National Grid it also generates a return to private industry together with a surplus which accumulates into a community fund.

The community fund resources 'Beat the Cold' to help alleviate fuel poverty in Staffordshire. Referrals to 'Beat the Cold' come, in part, from UHNM clinicians whose patients are presenting with health conditions linked to their home environments. Colleagues from 'Beat the Cold' then work with those individuals to help identify options for improving those environments and so reducing the risk of exacerbations in their care needs and representation to emergency care portals.

Contact Details

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System approach to climate change

Developing a Staffordshire and Stoke-on-Trent Integrated Care System (ICS) Green Plan

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April 2022

Chris Bird

Director of Partnerships, Strategy and Digital – North Staffordshire Combined Healthcare NHS Trust

Staffordshire and Stoke-on-Trent ICS Senior Responsible Officer
for Sustainability

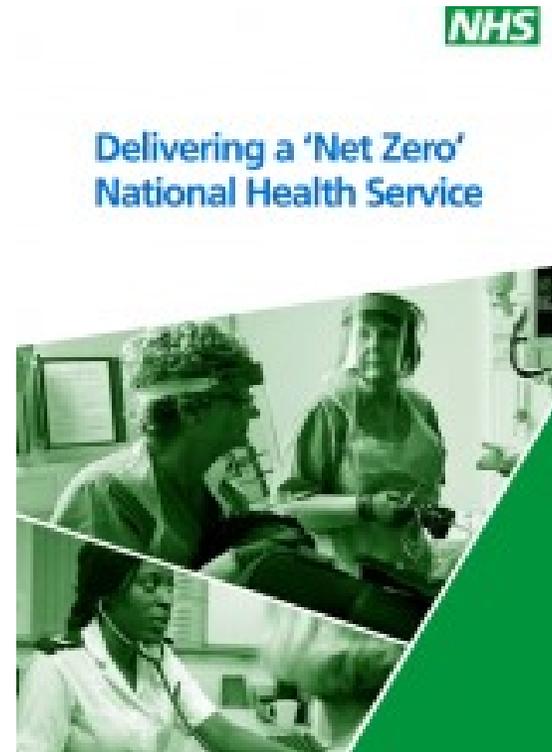


National Policy Environment

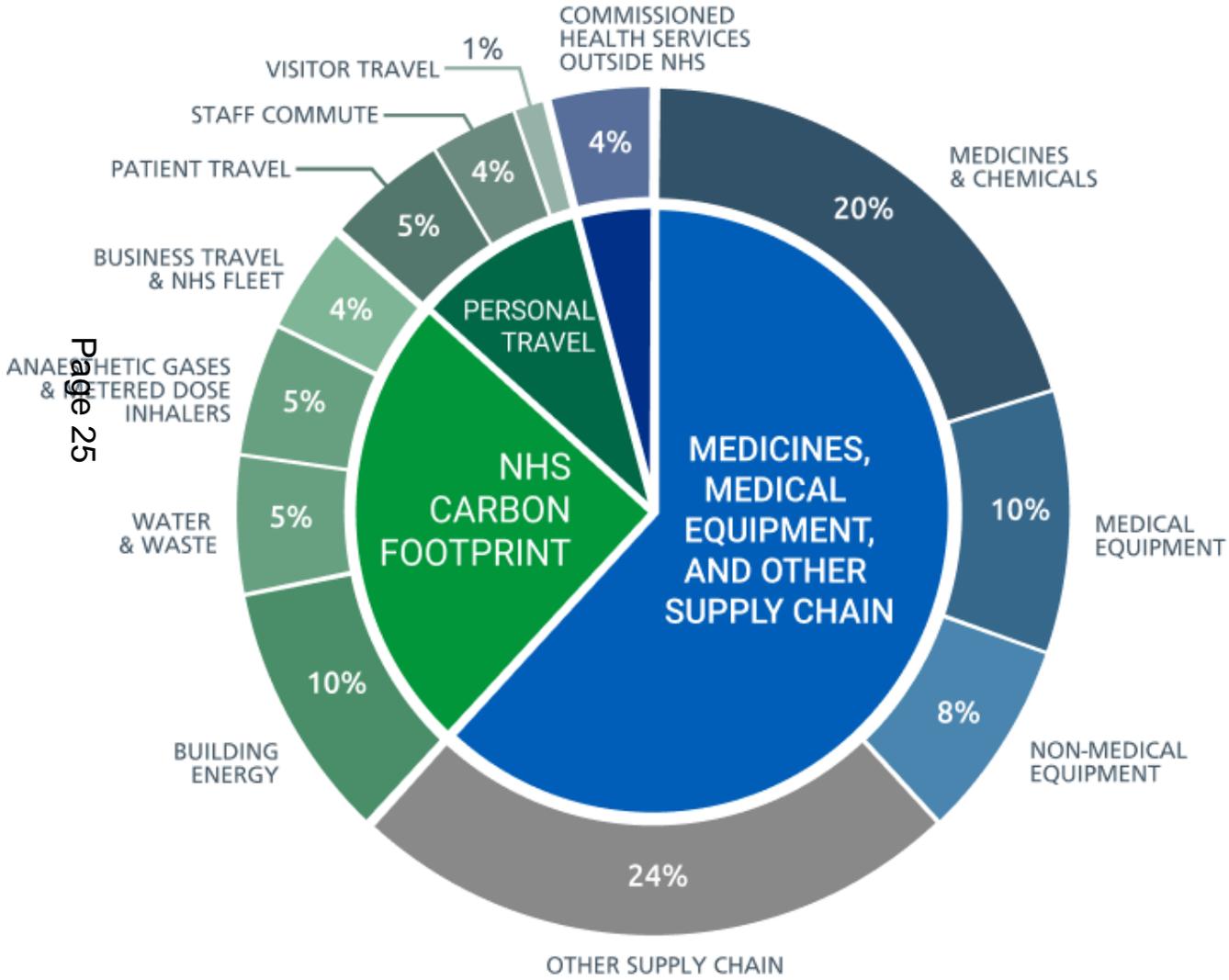
NHS England and NHS Improvement (NHSEI) vision: to deliver the world's first net zero health service and respond to climate change, improving health now and for future generations.

- Climate change poses a major threat to our health and planet - the environment is changing, change is accelerating, and this has direct and immediate consequences for our patients, the public and the NHS.
- UK government has made a commitment to reach net zero carbon by 2050 – health and care system contributes c4-5% of the country's carbon footprint and therefore has a major role to play.
- The report Delivering a Net Zero Health Service sets a clear ambition and target for the NHS.
- Two clear and feasible targets are outlined:
 - The NHS Carbon Footprint: for the emissions we control directly, net zero by 2040
 - The NHS Carbon Footprint Plus: for the emissions we can influence, net zero by 2045.

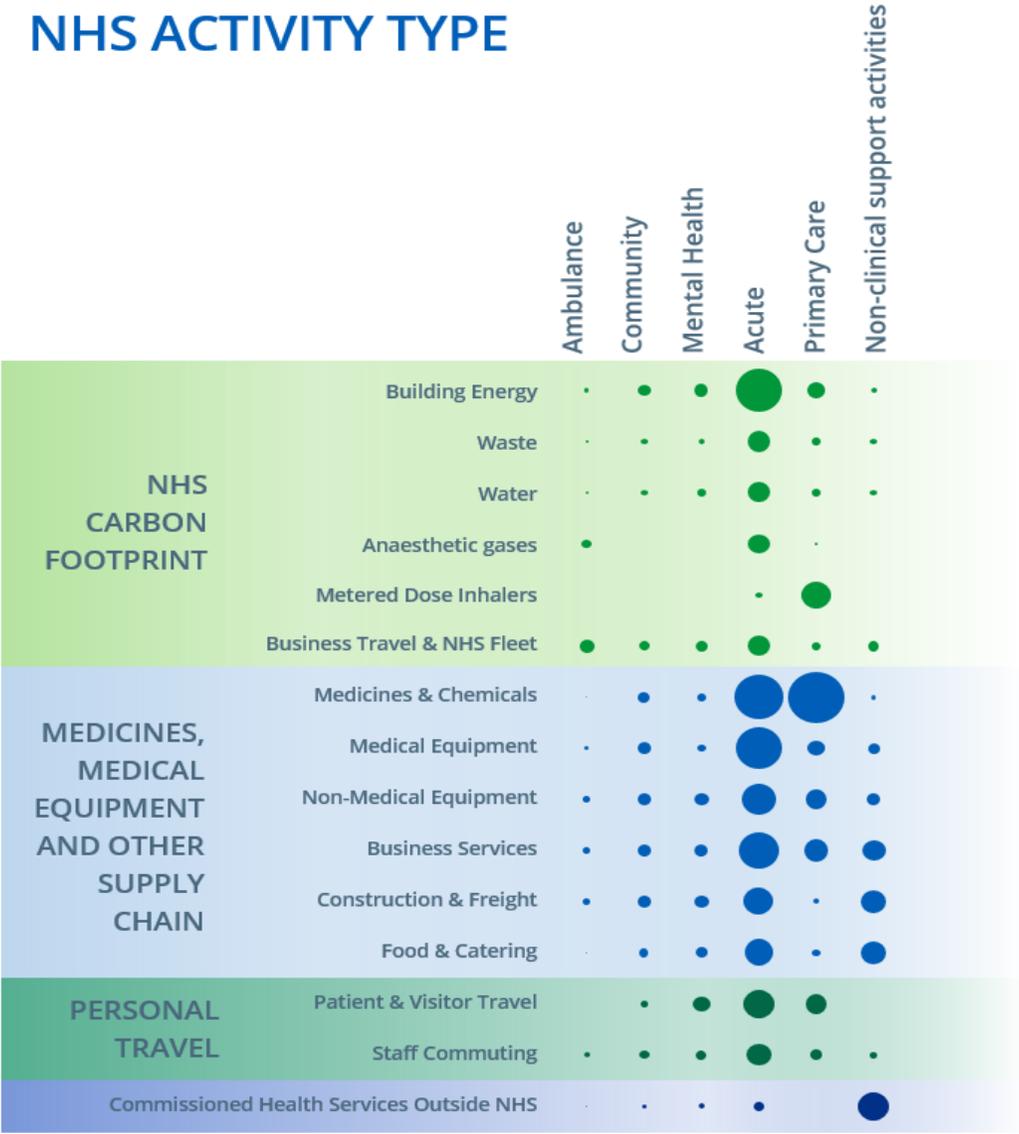
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The Carbon footprint of the NHS

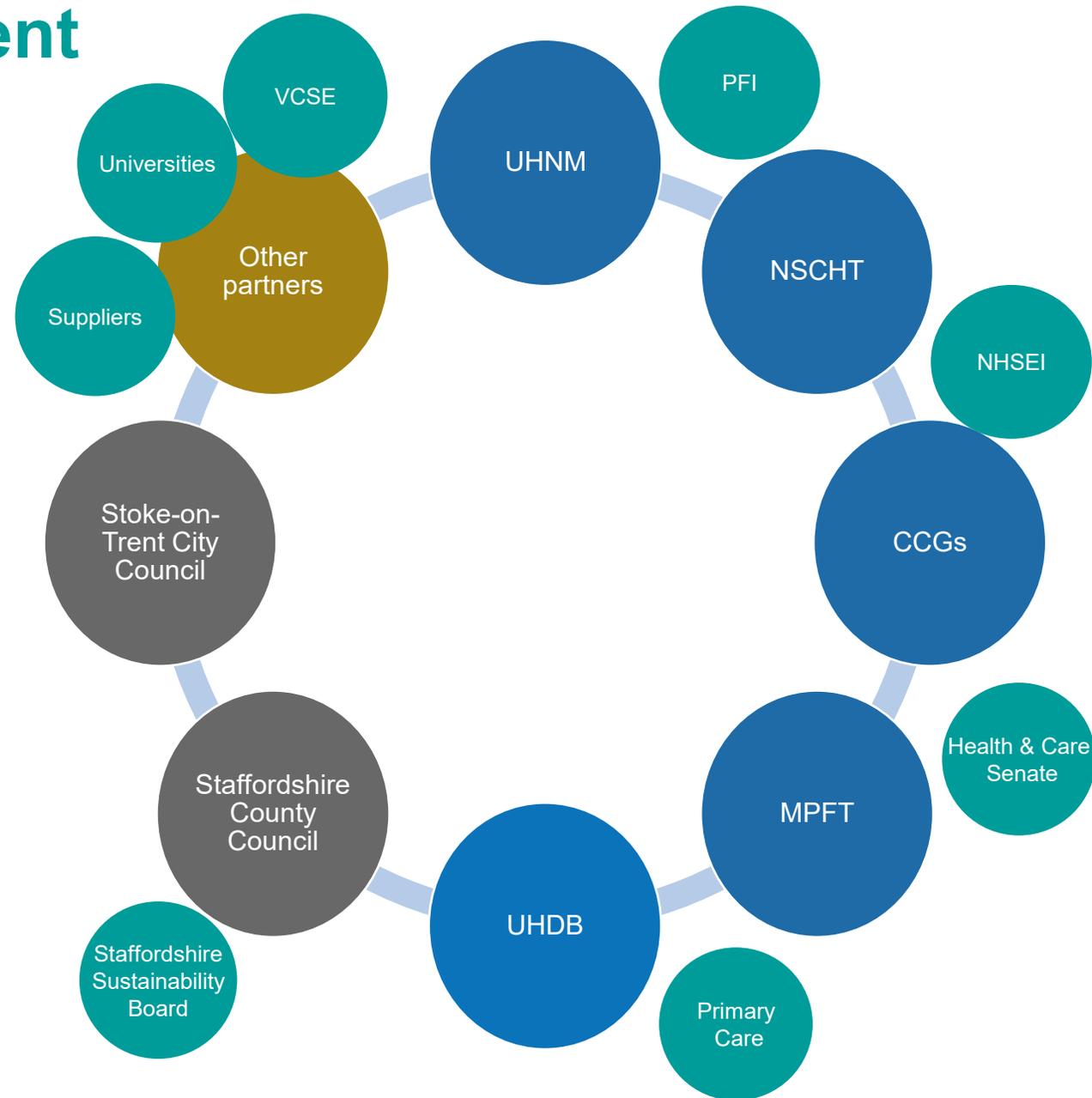


NHS ACTIVITY TYPE



Staffordshire and Stoke-on-Trent (SSoT) Sustainability Group

- Nature and scale of the Greener NHS agenda is too broad and deep to be coordinated through a single officer and will require senior, expert input from a broad range of disciplines and functions.
- Providing system oversight for the achievement of the carbon reduction targets against both the NHS Carbon Footprint and the NHS Carbon Footprint Plus, as specified in 'Delivering a Net Zero NHS', as well as monitoring progress against expected trajectories.
- Coordinate production of NHS organisational 3 Year Green Plans (2022/23 – 2024/25) and the subsequent translation of those Green Plans into an ICS Green Plan – this includes:
 - Workforce and leadership
 - Sustainable models of care
 - Digital transformation
 - Travel and transport
 - Estates and facilities
 - Medicines
 - Supply chain and procurement
 - Food and nutrition
 - Adaptation (EPRR).



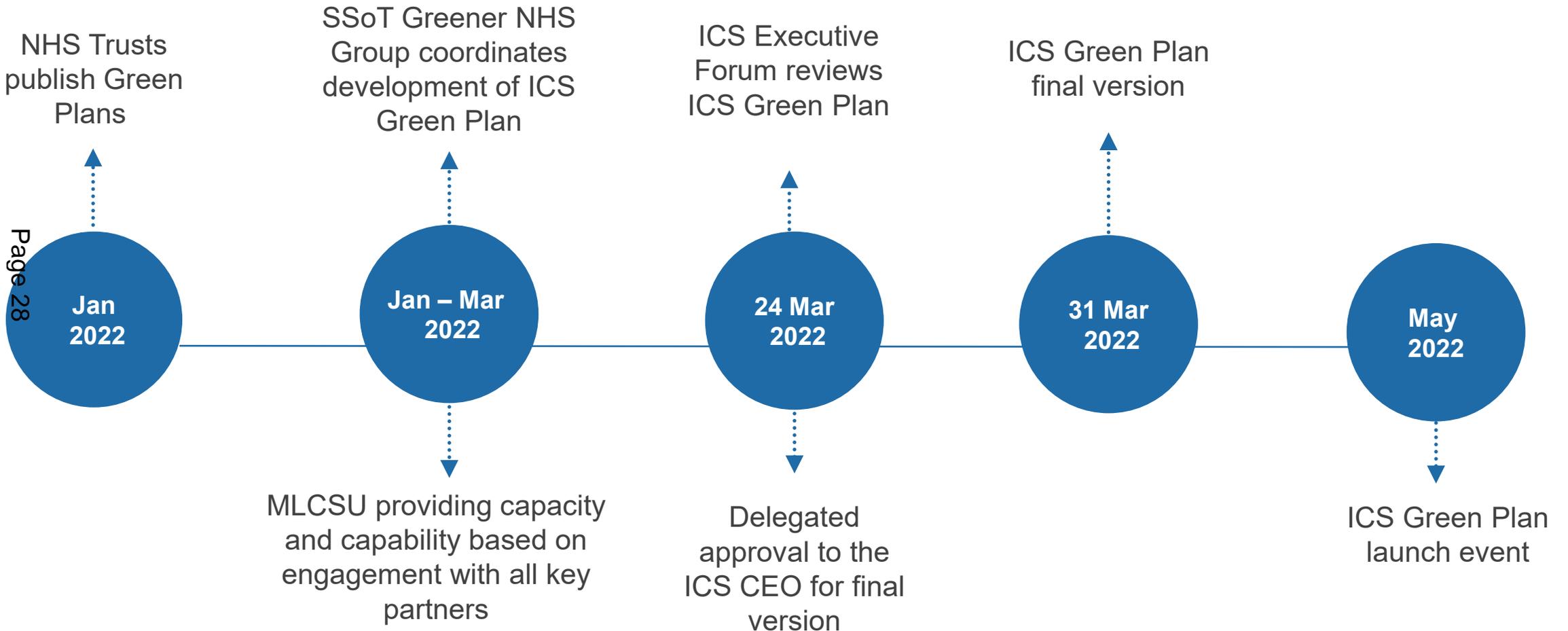
Areas of focus

- Awareness raising and training via carbon literacy
- Promotion of active travel options
- ULEV/ZEV vehicles – fleet and lease
- Reducing Desflurane usage (an anaesthetic gas)
- Reducing pressure metered dose inhalers and inhaler recycling
- Reducing medicines waste
- Energy efficiency / renewable energy via energy audits
- Net Zero Supplier roadmap - procurement frameworks and work with suppliers of goods and services
- NHS Plastics Pledge / PPE
- Sustainable models of care (including digital transformation)
- Adopt 'Anchor Institution' type approach – promote connection to local communities.



Green Plan Timeline

Key milestones in development of the ICS Green Plan



Case Study – keep well, keep warm

- Designed to prevent hospital readmissions of vulnerable patients whose health conditions could be made worse through living in cold/damp homes
- Partnership of NHS / VCSE / Industry / Community
- Installation of solar panels across UHNM estate to provide UHNM with lower cost and resilient supply of energy
- Reduces UHNM demand on National Grid and generates a return to private industry together with a surplus which accumulates into a community fund
- The community fund resources 'Beat the Cold' to help alleviate fuel poverty in Staffordshire
- Referrals to 'Beat the Cold' come, in part, from UHNM clinicians whose patients are presenting with health conditions linked to their home environments.

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Royal Stoke University Hospital rooftops



Questions



Spotlight Review

Sexual Harassment in Schools

**Report
January 2022**

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Chairman's Foreword

Are our children safe? Are the pupils in our schools in Staffordshire safe, particularly in relation to pupil-on-pupil (peer-on-peer) sexual harassment and abuse? These are perhaps unwelcome and uncomfortable questions. Nevertheless, during the last year public awareness of peer-on-peer sexual harassment and abuse among children and young people has grown rapidly across the country, together with a deepening sense of urgency towards addressing the issues involved.

This Report gives an account of the initiative of Staffordshire County Council's Scrutiny Committees in setting up a "Spotlight Review" to examine the situation within the County. Three of the Council's Overview and Scrutiny Committees each nominated a representative to take the Review forward. We have sought to gauge the extent of the problem, to listen to those involved in safeguarding children in schools and other contexts, to evaluate how far and how well schools and safeguarding agencies are taking the issue on board, and to ensure that there is a high level of liaison, coordination and mutual awareness between the various bodies and individuals engaged in safeguarding our children.

Councillor Kath Perry, Councillor Ann Edgeller and I wish to place on record our thanks and appreciation for the informative contributions offered by all those who attended the meeting on January 14th, or who otherwise submitted evidence. We are to a great extent reassured and encouraged by what we have learnt, and warmly affirm the alertness and robustness with which schools and safeguarding teams are already reviewing and updating their policies, their guidance and documentation, and the practical support which is available.

We are in addition very grateful for the invaluable assistance given to the Spotlight Review by Mrs. Helen Phillips, Scrutiny and Support Officer, who both ably facilitated the Review, and who has also drawn up this comprehensive Report of the Review's findings and recommendations.

The 2021 Ofsted work cited in our Report found that as many as 90% of all girls may have experienced some form of peer-on-peer sexual harassment or abuse during their school years or will know someone who has. A smaller but substantial percentage of boys, and of those who do not identify with conventional binary/heterosexual stereotypes, will also be victims of such abuse, or will know someone who is. Such harassment and abuse is so pervasive, and apparently so normalised, that every school should assume it is happening among its pupils.

Older people may well be able to recall instances of abusive name-calling, sexist “banter” and unwanted “laddish” behaviour in their own childhood and adolescence. This is sadly not new. What is new is the greatly increased vulnerability of children to peer-on-peer sexual harassment and abuse through unprotected and unmonitored social media, as well as the prevalence and extent of such abusive behaviour, and the impact on children from an early age of a much more overtly sexualised adult world.

We recognise that we have been engaging with a situation which calls for a major cultural shift in our society, and for the issues to be addressed at all levels and contexts, not just in schools. We recognise equally that much peer-on-peer abuse takes place away from school or beyond the supervision of responsible adults. However, abusers and victims are frequently fellow pupils at the same school, and victims often suffer impairment to their educational performance as well as to their mental health and general wellbeing. The safeguarding duty of schools and other related bodies must surely now include full alertness to the reality of peer-on-peer sexual harassment and abuse, and all that that will entail.

I commend this Report and its Recommendations to the members of the Overview and Scrutiny Committees for their consideration and, if desired, their agreement to its submission to the Cabinet Members for action.

Rev. Prebendary Michael Metcalf,
Spotlight Review Chairman



1. Conclusions and Recommendations

The starting point for this Spotlight Review has been the phenomenon of the Everyone's Invited on-line platform, which has hugely raised the profile of peer-on-peer sexual abuse in educational settings over the last year or so. Much of this abuse happens underneath the official radar and is unreported; it has therefore been difficult to establish an accurate picture of what is happening here in Staffordshire. Nevertheless, we are obliged to acknowledge that such abuse is present extensively across our County, whether this is directly within the school setting or impacting on it.

Referrals to the Education Safeguarding Advice Service (ESAS) and the Staffordshire Youth Offending Service give some indication of the extent of known serious incidents. However, harassment and abuse will be much more extensive than these referrals indicate and will span a breadth of levels and types. The 2021 Ofsted Review concludes that peer-on-peer sexual harassment and abuse is so widespread that all settings should assume it is happening in their school.

One key aspect concerns the establishing of a common understanding of what the term sexual harassment means and communicating this effectively. The DfE document "Sexual Violence & Sexual Harassment between children in schools and colleges" defines this as 'unwanted conduct of a sexual nature' that can occur online and offline and both inside and outside of school/college. One of the recommendations from the Ofsted Review is for Central Government to review and update the definitions of sexual abuse, including peer-on-peer, to better reflect the experiences of children and young people. We support this need for a clearer definition, but there is also a need for children and young people to be aware of, and understand, how to recognise these harmful behaviours.

Schools and partner organisations had been actively developing and updating their safeguarding policies and practices long before the new issue of peer-on-peer sexual abuse emerged, and it is clear that much work has already been taking place to address this new challenge, although the specific approaches vary between settings. From the schools' representatives we spoke to it is evident that the support they receive from the ESAS is invaluable and hugely appreciated. Many examples of great work were shared with us, both within school settings and from partner organisations. We do not underestimate the difficulties in tackling this issue. We also recognize the context within which schools and colleges have been working, particularly over the past two years, that have added pressure and complexity to their safeguarding roles.

Clearly sexual harassment and abuse is a wider societal issue and cannot be addressed by schools in isolation. Of particular concern is abuse through social media as well as inappropriate access to the internet and the affect this has on young people. These issues have a significant impact on schools and their safeguarding roles. Much work is in place to address these issues through on-line safety campaigns, PSHE curriculums, awareness raising via assemblies and others. However, this is clearly an issue that needs addressing more broadly with social media platform providers. The Ofsted Review recommended that Central Government develops the Online Safety Bill, so it can strengthen safeguarding controls for children and young people to protect them from viewing online explicit material and engaging in harmful sexual behaviour using social media platforms. This is something we wholeheartedly support. Conversations around this issue have been happening for some time although very little seems to have changed to date. We therefore **RECOMMEND:** that the Cabinet Members for Education (and SEND) and for Children & Young People join with the three Overview and Scrutiny Committee Chairmen in writing to Central Government, welcoming the valuable work which is taking place to make fit for purpose and to bring into law the Online Safety Bill, and calling on the Government as a matter of urgency to consider what further action should be taken to protect children from online peer-on-peer sexual harassment and abuse.

One of the key issues identified is how to enable children and young people to feel safe in sharing their concerns. There is a need for them to be clear about what should or could happen if they raise concerns, and a reassurance that they will get the right support. Key to this is the culture within a setting and the levels of trust built between students and staff. Whilst there is a wider community/societal aspect to this issue, supporting a change in perceptions, culture and respect when young will help support broader societal change. A culture that is seen as accepting inappropriate behaviour allows these behaviours to become normalized. This includes basic levels of respect and use of banter, through to more overt types of harassment and abuse. Healthy relationship teaching and learning is a positive way to reinforce and recognise good behaviours. This work is already present in schools; however, schools are often developing this in isolation and creating a more consistent approach which reflects what "good" looks like would help build a more cohesive curriculum. We were delighted to note the introduction of the new PSHE coordinator for Staffordshire (funded by the Staffordshire Police, Fire & Crime Commissioner's (the Commissioner) Office). Part of this new role will be to map current PSHE provision and develop a suite of quality assured resources and set of guiding principles for use by schools when delivering PSHE. This will help to enable a consistency around provision and we welcome an opportunity to see how this develops. Whilst this is a very new role in Staffordshire the remit of the post suggests this will address

concerns raised by many we spoke to during the review, supporting a cohesive and coordinated curriculum, identifying best practice and providing a bank of good quality resources that are easily accessible for schools. We **RECOMMEND** that progress with this new initiative is monitored and the impact on schools be assessed in 12 months' time.

Currently there are challenges for schools around awareness of, and easy access to, appropriate and sector specific resources, training and support. The role of the PSHE coordinator in developing a suite of quality assured resources should help with this. From our investigations it is clear that a wide variety of resources, support and training opportunities currently exist, however, not all schools are aware of them. Schools are extremely busy places, and time is of an essence, so searching through web sites and data for specific resources can be an impossible task. Creating an easily accessible bank of specific resources, training and accessible support organisations in one directory, which reflects a differentiation between sectors/age/ability levels, would be hugely beneficial. Whilst this work has been done in pockets (for example a mapping of sexual assault and abuse directory produced by Staffordshire Women's Aid and available on the Commissioners' web pages) we are not aware that any central one stop shop resource and support bank is currently available. We therefore **RECOMMEND:** that a one stop shop resource bank, which includes details of support organisations, training, and teaching resources, be developed.

The nature of peer-on-peer sexual harassment and abuse can vary greatly and responding appropriately can be very difficult. A bank of good practice case studies to help in identifying approaches to specific issues would help headteachers, senior management and Designated Safeguarding Leads (DSLs) in assessing appropriate responses to specific incidents and clearly identifying best practice. We therefore **RECOMMEND:** that a bank of case study good practice examples of how differing specific peer on peer abuse and harassment was dealt with be developed as a resource tool for headteachers, senior management and DSLs. There is also a need to consider the role of Governors and/or School Directors in this, as ultimately school policies are owned by them. Appropriate training is essential to ensure they are able to effectively challenge around policy implementation and the creation of a case study good practice resource bank would help with this.

The opportunity for schools to discuss approaches and responses to safeguarding incidents, and specifically peer-on-peer abuse, sharing experience and best practice, would be beneficial. This approach currently exists within some multi academy trusts. Similar successful initiatives can also be seen with the District Inclusions Boards, where local schools work together around reducing permanent exclusions. A comparable approach

for safeguarding was suggested to us as a way of enabling small groups of headteacher and/or DSLs to support each other in addressing safeguarding incidents, sharing experience and good practice. The ESAS told us that a form of pyramid localized DSL meetings was being considered. These would be an opportunity for schools to be empowered to help each other, sharing good practice and helping to address concerns. We therefore **RECOMMEND:** that the Cabinet Members for Education (and SEND) and for Children & Young People consider the introduction of local DSL meetings as a way of sharing best practice, experience and addressing concerns amongst groups of schools. The development of this approach would also give an opportunity for schools to discuss new regulations, guidance and policies, establishing the changes necessary specific for differing settings and helping appropriate sector specific implementation.

The Staffordshire Safeguarding Children's Board (SSCB) has a role in disseminating the support and training on offer. We are aware that the Board have met with partners to consider how they will respond to the Ofsted report. The Board is considering what "good" looks like for children in Staffordshire, looking at the issue from a good practice perspective to enable them to identify what works well and use this to help address those areas that need improvement. In particular they are looking to identify any gaps in commissioning or services. SSCB has a statutory responsibility to demonstrate that children are safe with the arrangements that exist across all agencies, not just in schools. The Board produces their Annual Report which is scrutinized by the Safeguarding Overview and Scrutiny Committee each year. As part of that scrutiny process, and to help highlight the changes made as a result of the Ofsted Report, we **RECOMMEND:** that a representative from the Health & Care and the Prosperous Overview and Scrutiny Committee be invited to attend and take an active part in the scrutiny of the Annual report for 2022.

We recognise the challenge for schools and partners in responding to the issues of peer-on-peer sexual abuse and harassment. We are also aware of the initiatives already in place to help address these and we hope the recommendations outline above will also help in tackling the identified concerns. To enable us to assess the impact of changes and/or developments we **RECOMMEND:** that the three Overview and Scrutiny Committees consider progress made from these initiatives and the impact for schools in 12 months' time, with consideration that this could be undertaken by the current spotlight review members.

2. Setting the Scene

In June 2020 the Everyone's Invited anti-rape movement created an on-line forum which provided a safe place for survivors of sexual harassment and abuse to share their stories anonymously. It focused on exposing this abusive culture through "conversation, education and support". This forum raised issues of harassment and abuse nationally. Among the multitude of "testimonies" from survivors of sexual harassment and abuse were thousands from children and teenagers. These often cited the name of the school they attended. In many cases the perpetrators attended the same school.

All schools in England are required to have a child protection policy in place, which includes protection against sexual harassment. Regulation and initiatives already exist in Education to safeguard children and young people. These include:

- "Keeping Children Safe in Education", which is the statutory guidance to which all schools and colleges in England must have regard when carrying out their duties to safeguard and promote the welfare of children. The most recent version of this came into force in September 2019.
- Department for Education "Sexual violence and sexual harassment between children in schools and colleges" which sets out advice on how to deal with incidents and allegations.
- Statutory Relationships Education at primary school, and Relationships and Sex Education at secondary level, which became compulsory in all English schools from September 2020.

In March 2021 the Government asked Ofsted to undertake a rapid review of safeguarding policies and of incidents of sexual abuse in schools and colleges with relation to sexual harassment and abuse. The review was published in June 2021, evidencing widespread peer on peer sexual harassment in schools or linked to the school context, and made recommendations for action to schools, government, and Ofsted to combat the problem.

At the beginning of the new municipal year each of the three Overview and Scrutiny Committees raised sexual harassment in schools as an item of concern and something that needed further scrutiny. Each separate Committee included this issue on their work programme. To avoid duplication the Committees agreed a joint piece of work to spotlight the issues and report findings back to their respective parent committees.

Sexual harassment in school is an issue of concern nationally. The “Everyone’s Invited” website gave an indication of the level of the issue and the Ofsted review considered the extent of any problems and gave recommendations for addressing these.

This spotlight review considered the issues highlighted nationally and scrutinised whether they were reflected in Staffordshire Schools, to what extent, and how/whether these were being addressed.

3. Scope of the Work / Terms of Reference

The purpose of this scrutiny review was for Members to:

- investigate the current issue of sexual harassment in schools, considering the national context and recent Ofsted report and recommendations;
- establish the extent of any of these issues within Staffordshire;
- consider what work is already in place to address these, and how successful and well-coordinated this is,
- consider the remit of designated safeguarding leads in schools and how/if they are identifying and addressing sexual harassment;
- identify whether there are any concerns not currently being addressed; and,
- consider the longer-term impact of sexual harassment and what, if any, support is in place for both victims and perpetrators.

4. Membership

It was agreed that one representative from each committee should undertake this work, with agreed membership being:

- Rev Preb Michael Metcalf, Prosperous Staffordshire Overview & Scrutiny Committee (Chairman of this spotlight review)
- Cllr Ann Edgeller, Health and Care Overview and Scrutiny Committee
- Cllr Kath Perry MBE, Safeguarding Overview and Scrutiny Committee

5. Methods of Investigation

Members held a spotlight review on 14 January 2022 to establish how partners across Staffordshire were responding to the Ofsted Review, its key findings and recommendations. They also considered what work was already in place to address areas of concern, how effective this was and how this was evidenced.

Invitees attending the 14 January Spotlight Review to share their expertise were:

- Tim Moss, Assistant Director for Education, Strategy & Improvement
- Viki Hulme, Education Safeguarding Lead
- Simon Scott, Youth Offending Lead (*virtual*)
- Rachel Munday-Crates, The Voice Project
- Sue Barnsley, Staffordshire Safeguarding Children's Board Independent Chair
- Lynne Milligan, Children & Families Partnership Boards Manager
- Cristian Marcucci, SCC Head of Communications (*virtual*)
- DCI Victoria Downing, Head of Child safeguarding, Staffordshire Police
- Steve Bell, CEO Painsley MAC
- Darren Bullock, Painsley Catholic College Designated Safeguarding Officer
- Emily Proffitt, Head Teacher Cooper Perry Primary School
- Clare Evans, Chair of Staffordshire's Primary Heads Forum
- Lesley Morrey, Newcastle & Stafford College Group

Evidence was also gathered from:

- Lesley Beck, Chair of Staffordshire's Secondary Heads Forum
- Natalie McGrath, Staffordshire PHSE Coordinator
- Phil Pusey, Chief Executive, Staffordshire SCVYS
- Sarah Buckley, Service Team Leader, Education and Prevention, the Glow, Newcastle
- Sharon Nahal, Commissioning Officer, Staffs PFCC
- Nicky Jolley, Staffs PFCC lead for victims and witnesses, Manager of the Survive Sexual Abuse Service contract

6. Findings

The "Everyone's Invited" on-line platform has had thousands of contributions, including some 2500 testimonials where individual schools were named, and Staffordshire Schools were amongst these, both primary and secondary. The Ofsted report states that the problem is so widespread and so apparently normalized that an assumption should be made that it is present in every school.

Whilst the Report is welcomed from an educational point of view, with an acknowledgment that there is an issue to address, it should be noted that primary and secondary sectors will have different experiences of this, with some challenges naturally affecting one sector more than another.

There is also some frustration that, whilst the experiences shared on the site are understandably anonymous, schools are unable to gain information on specific issues and are therefore unable to investigate reported incidents and take appropriate action. Schools also have no means of responding to what appears to be an automatic assumption of guilt, which is frankly unjust. Schools have been tackling this issue for some time and have been vigilant around this, well before the website was established. However, despite this vigilance there remains work to be done. This will continue, as the nature of this issue is dynamic and it is embedded in wider societal and cultural connotations.

One of the areas highlighted by the Ofsted report is that children and young people often find it very difficult to share experiences and feelings with responsible adults in school, whether that's safeguarding leads or others, and this may be one reason why there has been an explosion on the website as it allows individuals to retain their anonymity whilst sharing their concerns and experiences. One of the issues therefore is how to encourage children to share sensitive private information in the safest way possible.

Historically it has always been, and remains, an inherently difficult subject for children and young people to discuss and share concerns around sexual harassment, whether this is within or outside of school. Initiatives are in place in individual schools to encourage information sharing and to address issues of harassment, consent, respect and healthy relationships. Good pastoral work supports this.

The extent of peer-on-peer sexual abuse and harassment in Staffordshire schools.

Data showing enquiries to the ESAS

Month	Total No of Enquiries to ESAS	No of Enquiries to SHB	% relating to SHB
September 2020	488	18	4%
October 2020	406	8	2%
November 2020	491	11	2%
December 2020	310	4	1%
January 2021	291	0	0%
February 2021	287	2	1%
March 2021	442	16	4%
April 2021	227	8	4%
TOTAL	2942	67	2%

Sexually Harmful Behaviour (SHB) Enquiries into ESAS September 2020- April 2021

Sexual Violence & Harassment (SV&H) was not a specific recording option until May 2021. Prior to this concerns around SHB were recorded but may not all relate to peer-on-peer SV&H

SV&H Enquiries into ESAS May 2021- December 2021

Month	Total No Enquiries to ESAS	No of SV & H Enquiries	SV & H % relating to SV&H
May 2021	398	12	3 %
June 2021	366	16	4 %
July 2021	297	16	5 %
August	55	1	2 %
September	483	22	5 %
October	402	7	2 %
November	400	18	9 %
December	222	15	7 %
TOTAL	2623	107	4%

For the two eight-month periods analysed above, the total percentage of enquiries relating to SV&H doubled in the second period.

Staffordshire Youth Offending Service (SYOS)

SYOS currently have three streams of work with children who have displayed inappropriate and/or illegal sexualised behaviour towards peers.

- YOS Prevention Offer referrals from professionals and/or families for children and young people who display behaviours that have not yet met the threshold for a formal criminal justice intervention, however their behaviours are of concern and there is evidence that should this behaviour continue, they may go on to commit offences.

Referrals are received for a range of behaviours, including inappropriate sexualised behaviours. The prevention team hold approximately 230 cases at any one time and at the time of writing this report they have 12 cases that have been referred for inappropriate sexualised behaviour towards peers.

Referrals can be made by many different professionals, including from schools, police, early help. All referrals are assessed by SYOS staff to ascertain levels of risk and need and a plan is put in place to ensure that

these needs are addressed. SYOS have a number of prevention staff who are trained in the AIM 3 assessment and intervention tool, and they also utilise the NSPCC pilot (problematic sexualised behaviour resources). SYOS work in partnership with other agencies and families to ensure the best outcomes for all involved.

- Out of Court Disposals (Triage) SYOS work in partnership to deliver Out of Court Disposals (OoCD) with Staffordshire Police. These disposals are given for proven offences committed by children and young people that are not deemed serious enough to warrant a “formal” outcome via the court process. These cases are referred to YOS via police custody using nationally recognised tools to assess the seriousness of the offence. Once referred YOS staff complete an assessment with child and family in order to ascertain areas with the child’s life that need to be addressed to move them away from such behaviours. SYOS Victim Liaison officers attempt to contact all victims of offenses that are referred via this route and the victims wishes and feelings are taken into account. Victims can also be sign posted to support services at this juncture if this is felt appropriate. It is also possible for YOS to facilitate a restorative conference between victim and perpetrator as part of this process.

When all the information is gathered SYOS and Staffordshire Police review the case and make a joint decision on the most appropriate outcome. This can be a Community Resolution, Youth Caution or Youth Conditional Caution. In all three outcomes the YOS will work with the child to address their offending behaviour, utilising the Aim 3 assessment and intervention when appropriate whilst also using the NSPCC pilot material for harmful sexual behaviour. SYOS has very experienced staff working with children who exhibit these types of behaviours who also work closely with partners and families to ensure that any intervention is holistic. At any one-time SYOS has approximately 120 cases via Triage of which currently 6 have been referred for sexualised offences against peers (inappropriate touching, sexualised communication etc.).

- Statutory Cases are cases that meet the more serious offence threshold and are therefore dealt with either through the Youth Magistrates Court or Crown Court. Children and young people can receive one of three outcomes from Court: a Referral Order; a Youth Rehabilitation Order; or they can receive a custodial sentence. SYOS prepare Court reports for all such cases, informed by the ASSETplus assessment. The Aim 3 assessment can also be completed at this juncture if appropriate. SYOS attempt to make contact with all victims of such offences and information is shared with the victim and their thoughts are taken into account within the report for Court. The victim can request some form

of restorative justice and SYOS will try and facilitate this if possible. Victims can also be signposted to specialist support agencies at any point in the process, if require.

Following sentence SYOS work with the child to address the factors that led to their offending, whether they are in the community or in custody. SYOS also work with the family and wider partners to deliver appropriate interventions.

Currently SYOS have 4 cases that have a statutory outcome for peer on peer sexualised behaviours.

Work taking place

Proactive work is evidenced within Staffordshire schools. In particular an example was shared involving students in auditing the extent of the issue within their school and working with them to identify the barriers they feel prevent them from sharing their safeguarding concerns. Once the barriers had been identified an action plan was produced, with strategic meetings held to consider how these barriers could be overcome and students were included in this process. The Pastoral roles as well as the role of Designated Safeguarding Lead (DSL) within school are highlighted as an important part of this work. However, it needs to be acknowledged that the pastoral resources between sectors varies greatly.

Through our discussions with both the Primary and Secondary Heads Forum Chairs a number of other school-based initiatives to support work in addressing peer on peer abuse were shared, including:

- Relationship & Sex Education (RSE) and Safeguarding audits to look at individual school's responses including staff and student voice activities, ensuring different groups of students are represented (LGBTQ+)
- Tracking using CPoms (**CPOMS** is a software solution for monitoring Safeguarding, wellbeing and all pastoral issues) of key issues that are being raised to be used to direct, reshape or respond to emerging concerns

- Work with external agencies to support students as appropriate e.g., New Era¹ and YESS² (funded by the school) and referrals to YOT for students causing a concern as perpetrators
- Continual Professional Development (CPD) sessions with all staff to address the mindset of, 'it could happen here and has happened here', remove the mindset of 'boys being boys', 'it is all part of growing up' and 'banter', explain the reporting procedures for allegations and ensuring staff are vigilant and report 'overheard' conversations
- Planned Sex & Relationship Education (SRE) curriculum where it is reinforced to students that they must report any incidents and that they will be listened to, and they will be believed – schools evidenced students coming forward following SRE lessons
- a dedicated school email address so students can report incidents in a safe environment
- Online safety included as part of the PSHE curriculum
- Procedure for when reports are made regarding sexual violence/sexual harassment, which always involves parents and, on a case-by-case basis, social service and the police
- Information regarding sexual violence and sexual harassment included in a Safeguarding Newsletter which is sent home to parents
- Explicit assemblies delivered to students on the topics of online safety, sexual harassment, sexting and peer on peer abuse.
- Delivery of a bespoke CHARACTER curriculum which incorporates RSHE delivery as well as promoting British values, which includes specific lessons on consent.

From the schools we spoke to within the Primary Sector the relaxed restrictions around numbers of level 2 safeguarding leads in a school has been welcomed. This gives schools the opportunity to have a greater number of safeguarding leads, as appropriate for their setting, and has

¹ New Era is the holistic Domestic Abuse (DA) service operating across Staffordshire and Stoke-on-Trent since 1 October 2018. It offers help to all those affected by domestic abuse in Staffordshire or Stoke-on-Trent, providing free and confidential support for victims, perpetrators and their families and is the service commissioned by the County Council.

² YESS (Your Emotional Support Service), a Mental Health and Well-being Staffordshire based organisation providing emotional support and opportunities for children, young people and adults.

been particularly helpful following the restrictions schools have worked within throughout the Pandemic, enabling pupils to have easy access to safeguarding leads. It also gave a greater resource to undertake safeguarding checks. Whilst this doesn't necessarily mean children are any more likely to disclose their concerns, it does ensure a mechanism through which they can be encouraged to do so.

Examples of other initiatives were shared, including those developed to help overcome concerns with primary pupil verbal communication, with a slot timetabled every day as "connect" time in which pupils are encouraged to discuss news articles, conversations are promoted, and questions asked. This time has also been used to support addressing any safeguarding concerns in a timely and appropriate manner.

Contextualised safeguarding is a key factor, with students' activity outside of the education setting, who they meet, and how their experiences are shared, having a significant impact. With older pupils, particularly at post 16, tutorial work around consent is used as a tool to help promote healthy relationships and give an opportunity for sharing concerns. Work is also undertaken around alcohol and substance misuse as these types of behaviours can have a direct impact on safeguarding students. Student conferences give an opportunity for the enhanced student voice to be heard, encouraging them to talk about these more difficult issues. Such group work must be undertaken mindfully with an age-appropriate focus to avoid students becoming dismissive, disinterested or too uncomfortable that they no longer take part.

Addressing the wider societal issues around sexual harassment cannot be tackled by education settings alone. However, support to change perceptions, culture and lack of respect when young contribute to broader societal change. One concern raised as part of this review is around different perceptions of what is "banter" and the tension between this and what is acceptable language, with schools often faced with parents who have very differing views on this. Such "banter" can often reinforce negative views and values and can have a direct impact on children and young people's perceptions of themselves and others.

Parents can sometimes also be a barrier to the wider education safeguarding work with some parents not wanting to acknowledge or discuss sex education. However, the new DfE Relationships and Sex Education Policy, implemented in schools in 2020, requires them to revisit how they teach sex education, with this being part of the Ofsted schools inspection process moving forward. Time is set aside in the curriculum to cover this work in an age-appropriate way.

Section 175 /157³ audits highlight incidents of child sexual abuse. Staffordshire's Section 175 annual audit is currently under review, with consideration given to how more robust detail can be captured that helps identify training need and informs schools' action plans resulting from their self-audit. Alongside this audit the Education Safeguarding Team visit schools to look at policies, processes, practices and culture. Schools themselves should be looking at refreshing their policies regularly.

Peer on peer harassment and abuse is the focus of the Ofsted Review and schools Safeguarding Policy has always included peer on peer abuse, as well as sexual violence and sexual harassment. This academic year a template for a standalone peer on peer abuse policy was produced, which included sexual violence, and sexual harassment. It is important that within the policy structure schools choose, the coercive control and manipulation element, and bullying around sexual abuse more generally, is not lost.

To support early intervention and prevention work the Office of the Police Fire and Crime Commissioner (the Commissioner) undertook consultation with schools and partners around possible initiatives. As a result of this he commissioned a three-year PSHE Coordinator post, hosted by Staffordshire Council of Voluntary Youth Services (SCVYS) to support formal and informal education providers to improve the quality and consistency of their PSHE offer to local young people.

The coordinator post aims to enhance what is already happening and not duplicate, being responsible for:

- Mapping current PSHE education provision;
- Developing a suite of quality assured resources and set of guiding principles for use by those delivering PSHE
- Engaging with children, young people, parents and professionals about PSHE;
- Supporting organisations to access relevant, good quality training and resources and building and maintaining a network of local contacts to advance PSHE education activity;
- Developing partnership meeting to ensure consistency of key messages and sharing of best practice.

A multi-agency steering group has been established to ensure that all relevant partners are linked in with the work of the coordinator, helping to overcome barriers, avoid duplication and maximise impact.

³ Sections 157 and 175 of the Education Act 2002 places a statutory duty on independent and maintained schools to make arrangements to ensure that in discharging their functions, they have regard to the need to safeguard and promote the welfare of children and that any services they contract out to others are provided having regard to that need.

This work is being piloted in Newcastle, with the choice of pilot being based on analysis of need produced by the JSNA. There are also initiatives from the District Council that align and partner engagement which support this choice. Much of the initial, as well as ongoing work, being undertaken will benefit the whole of Staffordshire, for example developing quality assured resources only needs doing once for the whole County.

An aligned initiative from Newcastle Borough Council is their commissioned service from Glow. Referral levels to the ESAS from Newcastle schools is lower than other Districts and this may be influenced by this commissioned service. Glow addresses relationship abuse, raising awareness and providing education on how to spot and respond to abusive relationships in schools, businesses and communities and work with those responsible. They have a number of preventative and bespoke interventions implemented throughout the Borough, including:

- **relationships without Fear** a bespoke 6-week preventative education programme for primary and secondary schools which provides children and young people with the skills and tools to recognise unhealthy relationships and where to access support. This is a fully evaluated programme that provides schools with data that evidences whether the intervention has worked and what difference it has made, giving details to schools' around differences in gender, and the values and beliefs that underpin our attitudes towards relationships.
- **X-Roads** designed for children and young people in secondary and further education, already on the brink of offending, exclusion or perpetrating abusive behaviours and is an intensive programme designed to divert them from the criminal justice system and provide them with longer term consistent support to do this.
- **1-1 Service** supports children and young people aged 5-19, providing one to one specialist sessions in schools, colleges and academies where they can discuss their thoughts, feelings and experiences. One to one support is tailored around the needs of the young person and includes safety planning, healthy and unhealthy relationships and feelings and behaviours.
- **Young person's violence advisor (YPVA/ISVA)**
The YPVA's/ISVA's are specialist qualified professionals who support young people who are at high risk from domestic abuse either through their family situation or in their own abusive relationship, including those who have experienced sexual violence. The service is for people aged 5-19. YPVAs work in partnership with other agencies to safeguard children

and young people by attending court to support young witnesses, attending and reporting to MARAC and contributing to the development of child protection plans.

The majority of work undertaken by Glow is through education, which the Commissioned Service felt helped to create a joined-up approach with safeguarding and other partners, avoiding waiting lists and enabling consistent support for young people. They work without either a maximum or minimum service length to ensure every intervention is bespoke and the help is there until it is no longer needed.

Newcastle College have relied on this service to hold workshops with vulnerable young people, identified through student welfare officers. A drop-in service that can be accessed by all students is also available.

The work and remit of the DSLs

Every school must have a DSL who should take lead responsibility for safeguarding and child protection (including online safety), with the expected role of the DSL set out in the DfE's "Keeping children safe in education 2021 Statutory guidance for schools and college". Some of the work DSLs undertake in Staffordshire schools includes:

- leading the in-school investigation of sexual harassment/sexual violence to ensure the investigation is conducted properly to a satisfactory end
- ensuring that Social Services and Police involvement takes place whenever necessary
- ensuring incidents are always recorded so that repeat offenders are identified, necessary actions taken and appropriate agencies are involved
- remaining abreast of current documentation e.g., KCSIE – Sep 2021, DfE Sexual violence and sexual harassment between children in schools – Sept 2021, when to call the police – National Police Chiefs' Council, Sharing nudes and semi-nudes – UK Council for Internet Safety
- delivering regular assemblies addressing emerging safeguarding concerns identified through the safeguarding monitoring software used
- meet regularly with the safeguarding team within school to discuss specific safeguarding cases and quality assure the actions taken
- updating the local academy council and/or governing body regularly

- being responsible for Level 1 safeguarding training delivery in full each academic year to all staff
- Online learning opportunities being shared with staff throughout the year.

Identifying areas for further work

Sharing information that is age and ability appropriate is a key concern across all sectors, ensuring resources into settings are specific for the setting's age group and ability range. Where new regulations are introduced, having less generic and more sector specific communications would help schools to more immediately understand the changes necessary for their setting and how to implement these in the most timely way.

Teachers are educationalists rather than safeguarding specialists, and whilst everyone works towards making sure young people are safe and well and can learn, teachers need support in tackling safeguarding issues appropriately and particularly want to ensure that an issue will not be made worse by misguided well intentioned interventions. Good support, effective training and appropriate resources, including lists of organisations that can help with resources and training, are essential and can be cascaded to school DSLs and across the wider school staff to help prevent this. Examples were shared where schools had great difficulty in finding specific and appropriate resources to help tackle issues in a timely and age-appropriate way. Having easy access to a resource bank would help support schools with this.

There is a disparity between the resource available, and the awareness of its availability within schools. For example, the NSPCC has training around harmful sexual behaviours which should be available to schools but which not all those schools we spoke to were aware of. These concerns were mirrored by the Voice Steering Group (part of The Voice project) who felt mapping resources would be an essential toolkit for schools. Some work has already been produced on this, with the Commissioner's Office having commissioned a county wide service through Staffordshire Women's Aid to provide advice and a referral service for children who are victims of sexual abuse and sexual assault. They have produced a directory of services which is available on the Commissioner's website:
<https://staffordshire-pfcc.gov.uk/initiatives/survive/>.

The issue of consent is a key component when considering healthy relationships and can be taught from reception onwards. The focus does not have to consider consent only in relation to sex education. Much broader learning around consent at a young age helps to support learning

to respect and value individuals. Simple examples were shared around pupils asking and waiting for consent to be given before sharing specific items, e.g., a book, pen etc. This is an early opportunity to reinforce positive behaviours of consent and respect. Much work is already done in primary schools on healthy relationship teaching and learning to reinforce good behaviours. However, schools are very much doing this in isolation and developing a framework for this would help give consistency whilst supporting schools sharing of best practice. This would help to alleviate some of the time pressures on schools, ensure support is there for them and help teaching staff in appropriately addressing issues such as power and coercive control.

Ofsted emphasized the importance of hearing the voice of children and young people when considering the extent of peer on peer abuse and the impact of any measures to address concerns. The Voice Project, which is a consultation and participation project working across Staffordshire with vulnerable young people, works mainly through meeting with young people directly. This may be on a one-to-one basis, in groups and focus groups, with the majority of work being with looked after young people and those that are on a safeguarding plan. During a recent forum meeting with young people in care they sought opinions on sexual harassment in schools. Discussion centered around barriers for them seeking support. They instanced young people who may have additional challenges and the need to safeguard the rest of the class as well as the individual. They particularly felt that there was a lack of understanding around what the term "sexual harassment" actually meant, candidly saying that there was no handbook given to help you identify what is and isn't sexual harassment, or to help identify whether what is happening is normal and acceptable. Young people felt that if they didn't understand what the term meant or referred to, then how could they identify whether or not it had happened to them.

Young people in the Project shared previous experiences where concerns had been flagged and yet nothing had changed, or things had changed very little. They also had an understanding that if they say something things change for them but not for others, ie they may have to endure change, changed class, changed school, changed friendship group, so they quickly learn that if they don't want this added uncertainty and disruption to their lives then it's best not to say anything because often as a young person you don't want these things to change, you want things to remain the same but without the horrible element that's destructively impacting your life. Having someone trusted to talk to is key, however expecting young people in care to talk to parents or foster carers when they often have attachment difficulties cannot be taken for granted and in many cases is unlikely. If you have lost trust in people, then even where there are designated safeguarding leads in schools' young people will find it difficult to open up.

This may be another reason for the success of the Everyone's Invited platform, as experiences are shared anonymously without fear of unwanted impacts to themselves. There may also be a release from being able to share this information.

The young people also discussed the stigma associated with reporting incidents, feeling that this may give them a certain label, and as a looked after child they felt they already had a label and didn't want another, you simply want to fit in and feel as though you belong. To help overcome these concerns there is a need for children and young people to be clear about what should or could happen if they raise concerns, i.e., if I do flag this what are the implications for me and what are the implications for those that are doing it to me.

Ofsted recommendations included closer working with Local Safeguarding Partnerships so schools are aware of the range of support available to children and young people who are victims or who perpetrate harmful sexual behaviour. The Staffordshire Safeguarding Children's Board (SSCB), whose safeguarding partners are the Clinical Commissioning Groups (CCGs), Staffordshire Police and SCC, will meet later in January to consider how to respond to this specific recommendation as well as more broadly looking at how agencies are responding to the Ofsted report. The Board is looking for a collective response, both strategically and operationally, and some of that will include the work schools do.

The SSCB stress the need for all agencies, including schools, to be transparent and honest about the culture within their settings. Incidents often happen in social spaces within a school (as well as outside of school) and it is the culture within a school that contributes to this, for example the level of "banter" that's accepted both amongst adults and children sets a tone for the accepted culture within the setting. From reviews undertaken by the SSCB where children and young people have been subject to sexual abuse, they say that they will only disclose their concerns to someone they trust, and part of that trust is based around the culture within the organisation and how it builds relationships. It is therefore essential that the culture within a school enables and fosters that trust to be built.

Some concerns were shared that the recommendations within the Ofsted report promoted a compliance culture whereas what is needed is to see what difference is being made to children, and how better and safer they feel. Particularly where incidents happen that don't necessarily meet a safeguarding or criminal threshold, children still want and need adults to address their concerns and to keep them safe. It is therefore important to consider how children and young people can be given the confidence to know they can talk to staff confidently and securely. There is a need to be

able to evidence the difference being made by the culture fostered, and a need to see actions taken as a result of a disclosure. Children need to feel safe because if they don't feel safe, they won't learn.

The SSCB will be looking at this in more detail over the coming months to understand again from children and from partners what the difficulties are in responding to sexual abuse. Commissioning of services to support children is extremely important, with the Board looking at services for children who are subject to abuse which doesn't reach the criminal threshold.

There was a feeling that whilst the Ofsted report had identified where they felt there were failures or inadequacies in schools across the board, they hadn't addressed the reasons why the system wasn't working. The SSCB is looking to understand the "whys", with a concern that the most stringent policies may be in place but if they aren't working there is a need to understand the reasons for this before a solution can be identified, to highlight what part of the system is creating the failings. If processes aren't working, there is a need to look at the effectiveness of the system used.

District SEN and Inclusions Boards are locally led initiatives giving headteachers or special needs coordinators the opportunity to work cooperatively, sitting together and sharing information, breaking down barriers created by the competitive culture schools have to work within. These work well and consideration was given to whether a similar approach could be developed around safeguarding and sexual harassment in schools, allowing smaller local discussions and sharing of best practice amongst DSLs. This would create an opportunity to share concerns and/or experiences and ask for support without fear of being criticized. It would also provide the opportunity of having safeguarding professionals in the room to help support those discussions and helping to signpost and support teachers in their safeguarding role. This could also be an excellent opportunity to develop a case study resource from schools across the County that can be used as reference to support tackling future incidents and to give greater clarity to policies and practice.

The ESAS was already giving consideration to some sort of pyramid DSL meetings, although this wouldn't necessarily be at a district level. A more formalised method of cooperative learning and sharing information that was more helpful to practitioners was also being considered. The intention is to provide support across schools, empowering them to help and support each other. This also works across multi academy trust structures as the learning can cascade across all schools within that trust. The RC Birmingham Schools Diocesan Commission had similarly looked to share best practice across diocesan schools.

Ensuring the right staff members access appropriate training was an issue highlighted, with schools needing to consider whether this should include non-teaching staff. The SSCB have commissioned Staffordshire Women's Aid to provide training on child sexual abuse, and they will be looking to commission further training if additional need is identified. Training commissioned by the Board is all evaluated and quality assured.

To evaluate impact the SSCB monitors the success of their activity including monitoring the effectiveness of partnership arrangements. The Board talks to children and to practitioners to see what the front line looks like for them and the difference they are making and can make going forward. The SSCB wants to work towards changing from a deficit model to a good practice model, listening to what works well and how this makes a difference to practitioners. One area highlighted in the Ofsted report was practitioners' confidence in dealing with sexual harassment, as well as the need for clarity when certain thresholds are reached in who deals with the issue, whether it remains with the school or moves to a designated professional. SSCB acknowledge that there is further work for them in respect of communication with schools to explain the services available and their accessibility. For example, the range of Tier 2 mental health services commissioned that schools could access. There is a need to look again at the systems in place, as, if the SSCB is providing support and information that is not being accessed because of practical challenges such as a lack of time resource in schools to find available resources, then there is something wrong with the system and way it's designed. A better system is needed to be able to facilitate that engagement with children and practitioners and SSCB advised they will look at this again to identify what improvements can be made to the system to remedy this.

Sexual harassment and abuse clearly has an impact on children and young people's mental health, both the victim and the perpetrator. Wellbeing and mental health is a priority for all schools. Health is a really important aspect of this, with the conduit between health and schools previously having been school nurses. The reduced school nurse capacity is noticeable now and accessing GPs and sharing information without that has become increasingly difficult for schools.

Even where schools have a highly positive culture, and staff who are confident and competent enough to challenge behaviours, post incident management can still be incredibly difficult, whether the incident happened inside or outside of school. Some schools are having to manage situations where children remain in their setting whilst on bail or under bail conditions, sometimes post charge but still attending school. Schools have to manage very complex and highly sensitive situations which are extremely difficult.

This will include managing parents, often of both the perpetrator and the victim, the wider community, and social media elements. It is an enormous responsibility and incredibly challenging. It can also have a huge impact on a school and its wider community. At least every day the SEAS and the Education Safeguarding Lead's will be supporting one Staffordshire school with a risk assessment and that support is invaluable to them. Parents of perpetrators understandably find this difficult and challenging and often schools find themselves in the middle, trying to manage both parties. The demand it takes on schools is not to be underestimated. In many cases the perpetrator may also have been a victim themselves and there needs to be great care taken in how we deal with these young people as they are often some of our most vulnerable children. We need to remember these are children and they all need supporting and providing with the right help.

Children and young people's access to pornography across all settings, including in primary school, is a matter of great concern. Children have their own mobile phones and these aren't always monitored by parents and/or they haven't necessarily got the right parental locks or controls on them. Access to this type of material gives children a very distorted view around relationships and balance. A recent DfE event highlighted cross departmental working within the Government to discuss the social media aspect to this and work with some of the social media giants considering children's access to the internet and the types of information they are able to see there. This is an area of continued concern.

The ESAS held a multi-agency briefing for DSLs in October 2021 with partners attending from YOS, Police and Social Care (the Front Door/First response) to share and explain referral processes and thresholds. This was really well received but the fear is that learning from this session fades once partners return to their incredibly busy "day job" which can then result in a lack of consistency. For example, Schools have a clear document guiding them to when incidents should be referred to the Police and yet these referrals are not always accepted. Consistency in accepting referrals to all partner agencies would be helpful for schools in understanding processes and accessing support.

Problems also sometimes exist with a perception from parents and young people that contacting the police will lead to charges. Any referral to the Police would not be about criminalising children and young people but rather accessing appropriate support. It is not possible to give a clear figure from a Police perspective on the number of sexual harassment and abuse cases relating to Staffordshire Schools as the Police operation system doesn't necessarily capture the location of the incident. Equally some of the harassment and abuse takes place in social settings and/or via social media

so that, whilst schools are impacted by it, the school setting won't necessarily feature in the crime recording.

Community Impact

Resources and Value for Money

Should the recommendations be accepted there is a resource implication in creating a one stop shop resource bank for both training/lesson resource/support and for best practice case studies. There will also be a resource implication in setting up a system of DSL localised meetings.

Equalities and Legal Implications

All schools in England are required to have a child protection policy in place, which includes protection against sexual harassment. It is important that policies and procedures are developed in line with their legal obligations, including the Human Rights Act 1998 and the Equality Act 2010, especially the Public Sector Equality Duty, and their local multi-agency safeguarding arrangements.

Risk Implications

Peer on peer abuse and its impact on both the victim and the perpetrator has the potential to have destructive consequences for their wellbeing and longer-term life chances if not appropriately addressed.

Climate Change Implications

There are no climate change implications.

Acknowledgements

We would like to thank all those who attended the 14 January Spotlight Review and all those who contributed information towards this report. The time pressures these individuals work within show how important they feel this issue is to have given up so much of their valuable time to it, and we greatly appreciate the time they gave. We would like to particularly thank Viki Hulme who has supplied an enormous amount of information and answered our never-ending stream of questions.

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List of Appendices / Background Documents

Review of sexual Abuse in Schools and Colleges Ofsted rapid review June 2021 <https://www.gov.uk/government/publications/review-of-sexual-abuse-in-schools-and-colleges/review-of-sexual-abuse-in-schools-and-colleges>

Keeping Children Safe in Education statutory guidance for schools and colleges September 2021 [Keeping children safe in education 2021 \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101311/keeping-children-safe-in-education-2021.pdf)

Sexual violence and sexual harassment between children in schools and colleges advice from the DfE September 2021 [Sexual violence and sexual harassment between children in schools and colleges \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101311/sexual-violence-and-sexual-harassment-between-children-in-schools-and-colleges.pdf)

Relationships Education, Relationships and Sex Education (RSE) and Health Education Statutory guidance for governing bodies, proprietors, head teachers, principals, senior leadership teams, teacher [Relationships Education, Relationships and Sex Education and Health Education guidance \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101311/relationships-education-relationships-and-sex-education-and-health-education-guidance.pdf)

Draft Online Safety Bill Presented to Parliament by the Minister of State for Digital and Culture by Command of Her Majesty May 2021 [Draft Online Safety Bill \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101311/draft-online-safety-bill.pdf)

The Draft Online Safety Bill and the legal but harmful debate House of Commons Digital, Culture, Media and Sport Committee [Online safety and online harms \(parliament.uk\)](https://www.parliament.uk/business/committees/committees-a-z/commons-select/digital-culture-media-and-sport/committees-publications/committees---digital-culture-media-and-sport/all-reports/the-draft-online-safety-bill-and-the-legal-but-harmful-debate/)

Local Members Interest
N/A

Health and Care Overview and Scrutiny Committee – Monday 11 April 2022

District and Borough Health Scrutiny Activity

Recommendation

I recommend that:

- a. The report be received, and consideration be given to any matters arising from the Health Scrutiny activity being undertaken by the Staffordshire District and Borough Councils, as necessary.

Summary

1. The Committee receives updates at each meeting to consider any matters arising from the Health Scrutiny activity being undertaken by the Staffordshire District and Borough Councils.

Background

2. The Health and Social Care Act 2001 confers on local authorities with social services functions powers to undertake scrutiny of health matters. The County Council currently have responsibility for social services functions but, to manage health scrutiny more effectively, they have agreed with the eight District/Borough Councils in the County to operate joint working arrangements.
3. Each District/Borough Council has a committee in which holds the remit for health scrutiny matters that have a specifically local theme. The Health and Care Overview and Scrutiny Committee will continue to deal with matters that impact on the whole or large parts of the County and that require wider debate across Staffordshire.
4. District and Borough Councils each have a representative from the County Council Health and Care Overview and Scrutiny Committee as a member of the relevant committee with remit for health scrutiny matters. The County Councillors will update the District and Borough Councils on matters considered by the Health and Care Overview and Scrutiny Committee. A summary of matters considered by this committee is circulated to District and Borough Councils for information.

5. It is anticipated that the District and Borough Councillors who are members of this committee will present the update of matters considered at the District and Borough committees to the Health and Care Overview and Scrutiny Committee.
6. The following is a summary of the health scrutiny activity which has been undertaken at the District/Borough Council level since the last meeting of the Health and Care Overview and Scrutiny Committee on 15 March 2022.

7. Cannock Chase District Council

Cannock Chase's Health and Wellbeing Scrutiny Committee last met on 23 March 2022.

Members were advised by the chair that he had been assured the Cannock MIU was to be reopened in June 2022.

Date next meeting: Programme to be finalised after local elections in May.

8. East Staffordshire Borough Council

East Staffordshire Borough Council's Scrutiny Community Regeneration, Environment and Health and Well Being Committee met on 24 March 2022.

The Committee received an update from Beat the Cold - an independent charity working to reduce the incidence of cold related illness and fuel poverty.

The Committee plans to undertake two reviews with regards to health in East Staffordshire:

- Impact on Health of GP Access
- Impact of Covid-19 on Health in East Staffordshire.

Date next meeting: To be arranged

9. Lichfield District Council

Lichfield District Council's Overview and Scrutiny Committee last met on 17 March 2022.

Date of next meeting: 26 May 2022

10. Newcastle-under-Lyme Borough Council

Newcastle-under-Lyme Borough Council's Wellbeing & Partnerships Scrutiny Committee met on 7th March 2022.

The committee received a verbal update at 15 March 2022 meeting from Councillor Julie Cooper of the following matters:

- Delivery of Newcastle Housing Advice Service – the Committee considered a report on the service since it had returned in-house from April 2021. The benefits included access to one Joint Housing register and housing advice being available at the first point of contact with the council.
- How services have managed with winter pressures – the Committee considered a report on how front line services had managed over winter including the additional pressures caused by the Omicron variant of Covid. Members heard that in the first week of January there was a 30% absence among the Recycling and Waste workforce alongside a 50% increased tonnage of recycling collected and a 30% increase in food waste. The service managed to continue with minimal disruption due to the usual suspension of garden waste collections and support from streetscene and agency staff.
- Space Programme – at its previous meeting on 29 November the Committee had received a presentation from Ben Adams, Police, Crime and Fire Commissioner for Staffordshire, who outlined the key points of his Police and Crime Plan, and Fire & Rescue Plan 2021 – 24; and the Committee was invited to ask questions. One project mentioned by Mr Adams was the Space Programme held over the summer holidays to provide activities for young people. Members considered the Evaluation report and agreed a couple of questions to refer back to Mr Adams relating to provision for people with Special Educational Needs and whether there were any learnings or initiatives that hadn't worked well.
- Walley's Quarry Health Impacts – the Committee has been keeping a watching brief on health impacts arising from odours. Members made the following points:
 - Concern about the unknown long term physical impacts on health
 - The ongoing detrimental impact on mental health
 - Concern over whether hazardous waste is being dumped at Walley's Quarry as raised by the local MP in parliament
 - Whether the Posi-shell capping was effective or was it disintegrating?
 - Impact on the watercourse
 - Residents experiencing 'reporting fatigue' and giving up reporting odours on the official channels.

Members were also concerned about traffic issues at the site from HGVs queuing on the highway and difficulties of reporting obstructions via 101 due to long call wait times and asked whether there could be police presence at the site.

Members asked whether the Director of Public Health is aware of any studies looking at the long term impact of odours on health.

Members also noted that supporting the permit variation could be seen as supporting the operation whereas the view of the Council is that the

Quarry operation should be shut down and the permit withdrawn immediately.

- Meeting with the Clinical Commissioning Group – the Committee received notes from the regular meeting between the Chair & Vice Chair, officers and Tracey Shewan of the CCG. The meeting had discussed the current situation with Covid; pressures at Royal Stoke Hospital and the 111 online system.
- Reports from recent meetings of the Police, Fire and Crime Panel
- The Digests outlining the work of recent meetings of the County Health and Care Overview and Scrutiny Committee.
- The Work Programme was discussed and the Committee proposed items for the next meeting on 23 June relating to dementia, safeguarding and emergency planning – impact of climate change/flooding plus the usual item on health impacts from Walley’s Quarry.

Cllr Ian Wilkes, Chair

Date of next meeting: 23 June 2022.

11. **South Staffordshire District Council**

South Staffordshire Council’s Wellbeing Select Committee last met on 8th February 2022 and provided an update to the last meeting.

Date of next meeting: Tuesday 12th April 2022

12. **Stafford Borough Council**

Stafford Borough Council’s Community Wellbeing Scrutiny Committee met on Tuesday 8th March 2022, where the following items were considered:-

- Health and Care Overview and Scrutiny Committee - a report back on previous meetings of the Health and Care Overview and Scrutiny Committee held on 25 October, 29 November and 13 December 2021 and 31 January 2022.
- A Members’ Item relating to NHS Dentistry provision within Stafford Borough.
- Performance Update Report - a detailed analysis of the performance monitoring of those services within the remit of the Scrutiny Committee for the quarter 3 period ending 31 December 2021.
- Work Programme – a report outlining the Committee’s Work Programme for meetings up to March 2023.

Date of next meeting: To be arranged

13. Staffordshire Moorlands District Council

Staffordshire Moorlands District Council’s Health Overview and Scrutiny Panel met on 17 March 2022.

Items for consideration included:-

- NHS’s Approach to Climate Change.
- A members item in relation to the length of time patients were currently waiting for an ambulance to arrive. The Panel decided that a letter would be sent to the Chair of the Health and Care O & S Committee for the matter to be given further consideration.

Date of next meeting: To be confirmed.

14. Tamworth Borough Council

Tamworth Borough Council’s Health & Wellbeing Scrutiny Committee was held on 29 March 2022 - link to [Agenda for Health and Wellbeing Scrutiny Committee on Tuesday, 29th March, 2022, 6.00 pm :: Tamworth Borough Council](#)

Date of next meeting: 21 June 2022 (provisional)

Link to Strategic Plan

Scrutiny work programmes are aligned to the ambitions and delivery of the principles, priorities, and outcomes of the Staffordshire Corporate Plan.

Link to Other Overview and Scrutiny Activity

The update reports provide overview of scrutiny activity across Borough and Districts, shares good practice, and highlights emerging concerns which inform work programmes for Health and Care Overview and Scrutiny Committees across Staffordshire.

List of Background Documents/Appendices:

Council	District/ Borough Representative on CC	County Council Representative on DC/BC
Cannock Chase	Cllr Martyn Buttery	Cllr Phil Hewitt
East Staffordshire	Cllr Colin Wileman	Cllr Philip Atkins
Lichfield	Cllr David Leytham	Cllr Janice Sylvester-Hall
Newcastle	Cllr Ian Wilkes	Cllr Ian Wilkes
South Staffordshire	Cllr Janet Johnson	Cllr Jak Abrahams
Stafford BC	Cllr Jill Hood	Cllr Anne Edgeller
Staffordshire Moorlands	Cllr Barbara Hughes	Cllr Keith Flunder
Tamworth	Cllr Rosey Claymore	Cllr Thomas Jay

Contact Details

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WORK PROGRAMME – 11 April 2022

Health and Care Overview and Scrutiny Committee 2021/22

This document sets out the work programme for the Health and Care Overview and Scrutiny Committee for 2021/22.

The Health and Care Overview and Scrutiny Committee is responsible for:

- Scrutiny of matters relating to the planning, provision and operation of health services in the Authority's area, including public health, in accordance with regulations made under the Health and Social Care Act 2001 and subsequent guidance.
- Scrutiny of the Council's work to achieve its priorities that Staffordshire is a place where people live longer, healthier and fulfilling lives and In Staffordshire's communities people are able to live independent and safe lives, supported where this is required (adults).

Link to Council's Strategic Plan Outcomes and Priorities

- Inspire healthy, independent living
- Support more families and children to look after themselves, stay safe and well

We review our work programme from time to time. Sometimes we change it - if something comes up during the year that we think we should investigate as a priority. Our work results in recommendations for NHS organisations in the county, the County Council and sometimes other organisations about how what they do can be improved, for the benefit of the people and communities of Staffordshire.

Councillor Jeremy Pert

Chairman of the Health and Care Overview and Scrutiny Committee

If you would like to know more about our work programme, please get in touch with Deborah Breedon, Scrutiny and Support Officer on Deborah.breedon@staffordshire.gov.uk

In Staffordshire, the arrangements for health scrutiny have been set up to include the county's eight District and Borough Councils. The Health and Care Overview and Scrutiny Committee is made up of elected County Councillors and one Councillor from each District or Borough Council. In turn, one County Councillor from the Committee sits on each District or Borough Council overview and scrutiny committee dealing with health scrutiny. The Health and Care Overview and Scrutiny Committee concentrates on scrutinising health matters that concern the whole or large parts of the county. The District and Borough Council committees focus on scrutinising health matters of local concern within their area.

Health and Care Overview and Scrutiny Committee Work Programme 2021-22

Date	Topic	Background/Outcomes	
Committee Meetings, Reviews and Consultations			
		Background	Outcomes from Meeting
Monday 7 June 2021 at 10.00 am Scheduled	<ul style="list-style-type: none"> Health Scrutiny Arrangements Work Programme Planning Covid-19 Update 		Awareness of the background, scope and role of health scrutiny in Staffordshire. Work programme items to be prioritised and work programme to be submitted to the meeting on 5 July 2021
Monday 5 July 2021 at 10.00 am Scheduled	<ul style="list-style-type: none"> Restoration and Recovery Access to GP surgeries Future Delivery of Residential Replacement Care Services in Staffordshire (learning disabilities) (21/07/2021) Covid-19 Update 		<p>R&R: highlighted the work carried out through pandemic, noted the progress and risks around R&R and work planned to address current issues and move forward. Requested additional data and actions plans.</p> <p>Access to GP : noted the actions planned and requested detail of process to engage re s106 agreement relating to healthcare and feedback from consultation work with residents and practices on patient preference - perceptions, challenges and barriers.</p> <p>RRCS: Endorsed the commencement of the option appraisal. Pre-decision report requested. Covid update was noted members to share the update and representation of the vaccine programme widely.</p>
Monday 26th July 2021 at 2.00 pm Additional meeting	<ul style="list-style-type: none"> Walleys Quarry Landfill site - Health Implications 		<p>Health and wellbeing implications : Questioning of strategic partners relating to the health and wellbeing implications of odour emissions from Walley's Quarry Landfill Site resulted in a recommendation to write to Government relating to the length of time the issues had been going and the adverse impact on the health and wellbeing of residents in Staffordshire and to request intervention in this matter. Other recommendations related to requests for further information about health and safety of employees, air quality monitoring reports, data relating to mental health impact. Also recommendations to EA to maintain monitoring, share data with PHE and to suggest investigate technical monitoring of emissions at landfill sites and recommendations to CCGs relating to referral pathways for those requiring support for mental health and wellbeing issues associated with Walleys Quarry Landfill Site. EA was requested to provide monthly written briefings of emission levels and a report to this committee in October 2021 to detail the range of works completed.</p>
Monday 9 August 2021 at 10.00 am Scheduled	<ul style="list-style-type: none"> George Bryant Centre Maternity Services Covid-19 Update 	Work planning (7.6.2021) SCC PH	<p>GBC- Endorsed the process., requested additional information re clinical data to include in the business case. Highlighted the importance of the community impact assessment.</p> <p>Healthwatch Staffordshire to support face to face engagement with service users, families and carers. Further report requested following consultation.</p> <p>Maternity Services – endorsed the process and requested further trend data for home births. Healthwatch Staffordshire support to contact user groups. Further report following consultation.</p>

Monday 20 September 2021 at 10.00 am Scheduled	<ul style="list-style-type: none"> Urgent and Emergency Care Programme Difficult Decisions Phase 3 vaccination programmes COVID-19 Update 	Work programme (14.09.2020) Triangulation (2020) & Work planning	Process agreed - Comments re consultation process U&E care programme and Difficult decisions will feed into the consultation process and reports re feedback to future meeting. Phase 3 Vaccination programme – Progress noted, suggestion to include more detail of Flu vaccination programme in Webinar on 29 Sept. Thanked officers for speed of mobilisation. Covid Update- noted increase in case rates, steady take up rate and early winter pressures. To circulate Covid study report. DC/BC requested additional urgent items re GP Access and West Midlands Ambulance Service to be added to work programme.
Thursday 21 October 2021 at 2.00 pm Members Workshop	Introduction to Mental Health workshop <ul style="list-style-type: none"> overview of services from mild to acute provision 	Work Planning (7.6.2021) CS/ASC/CCG	The link to the video for the session was shared with all members and is available on the Health and Care O&S resource page on Mod.gov.
Monday 25 October 2021 at 10.00 am Scheduled	<ul style="list-style-type: none"> Mental health hospitals in Staffordshire Transformation Programme Update ICS Performance Overview Walleys Quarry Update (26/7/21) COVID-19 update (Verbal) 		Assurance given that actions were ongoing to maintain quality assurance and improvements. A lessons learned from Eldertree Lodge report would be circulated. Update noted and CCG to feed back comments relating to need for face to face meetings. The performance update was noted, this will form part of the overall dashboard for Health in Staffordshire. Noted and further update in 3 months including update on impact on residents mental health. Noted and continue to monitor.
Monday 29 November 2021 at 10.00 am Scheduled	<ul style="list-style-type: none"> Overview of public health outcomes and services COVID-19 update 		Committee requested additional information about cessation of services in Haregate street, new monies attained for drug and alcohol services, vaping data, mental health support and & counselling for termination service. Cabinet Member be invited to February Children public health meeting. Obesity and Diabetes and social prescribing be added to the work programme for 2022-23.
Monday 13 December 2021 at 10.00 am Additional meeting	<ul style="list-style-type: none"> GP Access West Midlands Ambulance Service/ ICS/ CCG Home Care Update 		GP Access - Information to be shared as requested – Vaccine plan, PC Strategy, 6 month update and add NHS Estate to the work programme. Urgent and Emergency - System Wide Action Plan to be shared with the members
Monday 31 January 2022 at 10.00 am Scheduled	<ul style="list-style-type: none"> Integrated Care System (ICS) Care Home services (SCC) Integrated Care Hubs (MPFT) Vaccination Programme Covid-19 Update 		ICS progress noted and further update to July 2022. Care Home update noted further update to April 2022. ICH Working group to be formed between Newcastle under Lyme and Staffordshire Moorlands Councillors to feed into the consultation. Vaccination and Covid updates noted progress
Tuesday 15 March 2022 at 10.00 am Scheduled	<ul style="list-style-type: none"> Walleys Quarry Update Transformation Programme update NHS Dashboard Monitoring Covid-19 Update 		Agreed to write to Government re committees concerns. Further update re health implications. Committee considered and noted the performance and transformation programme items recognising the challenges on the system, the process and engagement mechanisms. A brief update on Cannock MIU was noted and a further update to a future meeting.
Monday 11 April 2022 at 10.00 am	Cannock MIU Update Care Home update Green NHS agenda - Climate change Sexual Harassment in Schools Review Report	CCG SCC CCG	

**To Be Scheduled
2022-23**

• Use of advances in technology in Health & Social Care	
• Impact of Long COVID	
• Impact of air pollution on health	
• Workforce Planning Health and Care	25.10.2021
• Acute Trust performance update	25/10/21
• Obesity and Diabetes	29/11/21
• Social prescribing	29/11/21
• General Practice Access be update in 6 months	13/12/21
• NHS estate.	13/12/21
• Healthier Communities - wider determinents of health	May 2022
• Mental Health Support Teams	May 2022
• Changes to the Healthy Communities Service from April 2023	
• End of Life – compassionate communities	

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Suggested Items

The Role of Community Hospitals within the Wider Health Economy (CCGs, MPFT, D&BUHFT)		
Staffordshire Healthwatch Annual Report and Contract (Healthwatch and SCC)	Requested at meeting on 16 March 2021	Briefing circulated August 2021 – schedule early 2022
Going Digital in Health (CCGs)	Requested at meeting on 16 March 2021	To be scheduled
Social Care IT system procurement		To be scheduled
Childrens Dentistry – Keep Stoke Smiling (inc Staffs) Flouridisation/ orthodontic access	(work planning - 07.06.2021)	July 2022 transfer to ICS commissioning
Womens Health Strategy	(work planning - 07.06.2021)	
Application funding for Adult Social Care	(work planning - 07.06.2021)	*

Membership

Jeremy Pert Chairman)
Paul Northcott (Vice-Chairman - Overview)
Ann Edgeller (Vice-Chairman – Scrutiny)

Jak Abrahams
Charlotte Atkins
Philip Atkins
Richard Cox
Keith Flunder
Thomas Jay
Phil Hewitt
Jill Hood
Janice Silvester-Hall
Ian Wilkes

Borough/District Councillors

Jill Hood (Stafford)
Martyn Buttery (Cannock)
Rosemary Claymore (Tamworth)
Barbara Hughes (Staffordshire Moorlands)
Colin Wileman (East Staffordshire)
Joyce Bolton (South Staffordshire)
David Leytham (Lichfield)
Ian Wilkes (Newcastle-under-Lyme)

Calendar of Committee Meetings

at County Buildings, Martin Street, Stafford. ST16 2LH
(at 10.00 am unless otherwise stated)

Monday 7 June 2021 at 10.00 am;
Monday 5 July 2021 at 10.00 am;
Monday 26 July 2021 – Special meeting - Castle House NuLBC
Monday 9 August 2021 at 10.00 am;
Monday 20 September 2021 at 10.00 am;
Monday 21 October at 2pm - Mental Health Workshop;
Monday 25 October 2021 at 10.00 am;
Monday 29 November 2021 at 10.00 am;
Monday 13 December 2021 at 10.00 am special meeting WMAS/ GP Access
Monday 31 January 2022 at 10.00 am;
Tuesday 15 March 2022 at 10.00 am;
Tuesday 19 April 2022 at 10.00 am.

