



Borough of Tamworth

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HEALTH AND WELLBEING SCRUTINY COMMITTEE

11 October 2021

Dear Councillor

A Meeting of the Health and Wellbeing Scrutiny Committee will be held in **Council Chamber, Marmion House, Lichfield Street, Tamworth, B79 7BZ on Tuesday, 19th October, 2021 at 6.00 pm.** Members of the Committee are requested to attend.

Yours faithfully

A handwritten signature in black ink, appearing to be 'AJS', followed by a long horizontal line extending to the right.

Chief Executive

A G E N D A

NON CONFIDENTIAL

- 1 Apologies for Absence**
- 2 Minutes of the Previous Meeting (Pages 5 - 12)**
- 3 Declarations of Interest**

To receive any declarations of Members' interests (personal and/or personal and prejudicial) in any matters which are to be considered at this meeting.

When Members are declaring a personal interest or personal and prejudicial interest in respect of which they have dispensation, they should specify the nature of such interest. Members should leave the room if they have a personal and prejudicial interest in respect of which they do not have a dispensation.

4 Update from the Chair

5 Responses to Reports of the Health & Wellbeing Scrutiny Committee

(Update on responses to the Reports of the Health & Wellbeing Scrutiny Committee)

6 Consideration of matters referred to the Health & Wellbeing Scrutiny Committee from Cabinet or Council

(Discussion item)

7 Update on health related matters considered by Staffordshire County Council (Pages 13 - 14)

(To receive the Digest from Staffordshire County Council's Health and Care Overview and Scrutiny Committee and an update from County Councillor T Jay)

8 Homelessness and Winter Relief Arrangements (Pages 15 - 30)

(Update from the Assistant Director, Neighbourhoods and Head of Homelessness and Housing Solutions)

9 Safeguarding Children and Adults at Risk of Abuse Report (Pages 31 - 40)

(Report of the Portfolio Holder for Regulatory and Community Safety)

10 Forward Plan

Please see the link to the Forward Plan:

<http://democracy.tamworth.gov.uk/mgListPlans.aspx?RPId=120&RD=0&bcr=1>

11 Health & Wellbeing Scrutiny Work Plan - 2021/22 (Pages 41 - 44)

To consider items for 2021/22 Health & Wellbeing Scrutiny Committee Work Plan

Access arrangements

If you have any particular access requirements when attending the meeting, please contact Democratic Services on 01827 709267 or e-mail democratic-services@tamworth.gov.uk. We can then endeavour to ensure that any particular requirements you may have are catered for.

Filming of Meetings

The public part of this meeting may be filmed and broadcast. Please refer to the Council's Protocol on Filming, Videoing, Photography and Audio Recording at Council meetings which can be found [here](#) for further information.

If a member of the public is particularly concerned about being filmed, please contact a member of Democratic Services before selecting a seat.

FAQs

For further information about the Council's Committee arrangements please see the FAQ page [here](#)

To Councillors: R Claymore, D Maycock, P Brindley, M J Greatorex, J Harper, J Jones, S People, R Rogers, J Wade and County Councillor T Jay

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**MINUTES OF A MEETING OF THE
HEALTH AND WELLBEING SCRUTINY
COMMITTEE
HELD ON 23rd SEPTEMBER 2021**

PRESENT: Councillor R Claymore (Chair), Councillors D Maycock, M J Greatorex, J Harper, J Jones, S Peale and R Rogers

GUESTS Upkar Jheeta, Midlands Partnership Foundation Trust
Susan Unwin, Midlands Partnership Foundation Trust

The following officers were present: Karen Clancy (Partnerships Manager) and Jo Hutchison (Democratic Services, Scrutiny and Elections Officer)

Apologies received from: Councillor(s) P Brindley and County Councillor T Jay

21 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor P Brindley, County Councillor T Jay and Mr Rob Barnes, Executive Director, Communities. The Chair reported that Councillor D Maycock had given apologies for his later arrival to the meeting.

22 MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on 13 July 2021 were approved as a correct record.

(Moved by Councillor J Harper and seconded by Councillor R Rogers)

23 DECLARATIONS OF INTEREST

There were no declarations of interest.

24 UPDATE FROM THE CHAIR

The Chair reported that there would be a Voluntary Sector Members seminar, organised by the Assistant Director Partnerships and the Community Partnerships Manager, to which all Councillors had been invited on 20th October 2021. The

Chair further reported that the Midlands Partnership Foundation Trust had restarted its engagement process on the services previously provided at the George Bryan Centre and the Chair encouraged members as well as members of the public to consider this.

25 MIDLANDS PARTNERSHIP FOUNDATION TRUST PRESENTATION

The Chair welcomed the guests who were attending this meeting from Midlands Partnership Foundation Trust (MPFT); Upkar Jheeta, Head of Primary Care Development & MH Programme Lead (South Staffordshire) and Susan Unwin, Consultant Nurse and Approved Clinician, as well as Karen Clancy, the Council's Community Partnerships Manager.

Councillor D Maycock arrived at 6.22pm.

The Committee considered the NHS Community Mental Health Transformation video and further received an overview of the presentation from MPFT with a focus on:

- The plans to create integrated neighbourhood teams, in this area covering Burntwood, Lichfield and Tamworth, which would form relationships with local partners and work to identify any gaps in local services where funding could be focussed;
- The work with partners to empower people with autism to remain independent and to prevent avoidable hospital admissions;
- The work to ensure mental health teams would be in all A&E hospitals (Core 24) with the specialisms required to address mental as well as physical conditions. Therefore it was reported that at Burton hospital there would be a 24 hour, 7 days a week mental health component which would work in tandem with the physical health team, to support people who presented at A&E in crisis to carry out in depth assessment to make sure that patients would receive rapid access to the correct treatment;
- The work on the pathway which would look at the social barriers following a discharge from hospital and to support patients with their integration back into the community through the support of a recovery worker. This could also include the provision of a communication device. These services were reported to be very broad and flexible, and could support with shopping and reconnecting essential services as well as provision of meals and appliances, and would be tailored to the individuals needs to support them to overcome any barriers following discharge from hospital;
- MPFT reported that additional resources were being focussed to provide support to individuals through a service known as Increasing Access to Psychological Therapies (IAPT) which was a self-referred service for individuals who could need support through counselling with issues surrounding anxiety, bereavement, stress and depression. It was highlighted that there was no requirement for a referral from a GP for individuals to access this service.

The Committee sought and received clarifications in the following areas from the Head of Primary Care Development:

- The importance of partnership working to the success of this transformation process in order to assist health providers in communication with marginalised communities and then working with partners locally who had access with such communities.
- The value of providing a communications device to relevant individuals to support their recovery and reintegration locally and to minimise any relapses on discharge from hospital.
- The Head of Primary Care Development confirmed that this was a three year transformational programme where services would be co-produced and co-designed and services would evolve.
- The extent to which services were provided locally and the importance of that local provision and that provision of services at Burton does not feel local. The Head of Primary Care Development confirmed that provision was to be delivered locally in Tamworth and whilst the MPFT team were based at the Sir Robert Peel, MPFT were working with Officers in the Borough Council to locate services locally and accessibly. In terms of the MPFT team's composition which was grouped to cover Tamworth, Lichfield and Burntwood, the grouping was by population and mental health population numbers and wanted to group sufficient resources locally to ensure there was a sufficient range of specialisms available in each area. Tamworth had the first financial wellbeing adviser at its Citizens Advice and had been identified to pilot the rehabilitation and personality disorder pathways.
- The need to ensure that there was not the perception in the local community that services were geographically distant which could alienate residents from accessing services. It was acknowledged that it would be important to ensure that communications took account of these perceptions and focused on the local service delivery. It was understood that this needed to be communicated as local provision and MPFT wanted these services to be shaped by local people who used and accessed the provision. Consideration could be given to localising the communication plan to specific areas, however, it was also noted that local word of mouth was vital, in addition to the traditional paper based and online communication methods and social media, including postcards and radio.
- In the first year of the transformation of services, four areas were identified as areas to pilot the way services were delivered and Tamworth had been identified as one of those priority areas and a single point of access (telephone number) had been identified for Tamworth and a helpline was also available 24 hours 7 days a week and this would enable service users to be connected with the required services.
- The importance of overcoming the stigma of mental health issues, where it was acknowledged that this could affect individuals accessing help and the importance of working in partnership to engage with communities and break down the stigma and whilst partners would not necessarily provide services they could support local people to navigate to the services and the importance of those who had with lived experience and reflected the local community being involved in navigation.
- The importance of social interventions on discharge from hospital to prevent a service user from relapsing back into hospital where it was confirmed that there would be a broad range of interventions available,

beyond the illustrations given in the presentation, which could include utilisation of grant systems to support people in the community, and that these social interventions would be over and above the commissioned services.

- Whether the system was geared up to people with chronic mental health conditions given the fact that most services seemed to be time limited and whether chronic conditions would be addressed as part of this transformation. It was confirmed that whilst the clinical interventions could come to an end, work was ongoing on how to continue to provide support through a range of services to sustain people living with such conditions.
- The importance of and the role of carers in supporting relatives, where it was confirmed that MPFT worked as closely as possible with carers and would involve them as far as possible.
- The importance of all organisations understanding the work undertaken locally by both service providers and by the voluntary sector and the role of Support Staffordshire in supporting communications.

The Chair thanked the Head of Primary Care Development, Consultant Nurse and Approved Clinician and the Community Partnerships Manager who then left the meeting.

26 RESPONSES TO REPORTS OF THE HEALTH & WELLBEING SCRUTINY COMMITTEE

None

27 CONSIDERATION OF MATTERS REFERRED TO THE HEALTH & WELLBEING SCRUTINY COMMITTEE FROM CABINET OR COUNCIL

None.

28 UPDATE ON HEALTH RELATED MATTERS CONSIDERED BY STAFFORDSHIRE COUNTY COUNCIL

The Committee received the Staffordshire County Council Digest of the July and August Health and Care Overview and Scrutiny Committee meetings and the Chair provided a verbal update from the meeting held on 20th September 2021 which considered the following matters:

- Transforming Urgent and Emergency Care update;
- Difficult Decisions update
- COVID Vaccination update.

29 FORWARD PLAN

No additional items from the Forward Plan were identified which were not already captured on the Committee's work plan.

30 HEALTH & WELLBEING SCRUTINY WORK PLAN - 2021/22

It was noted that the bi-annual updates on safeguarding had been added to the work plan and the Work Plan updated as follows:

Health & Wellbeing Scrutiny Work Plan

Work Plan 2021 – 2022		
Work Area Themes for the Year		
1. Mental Wellbeing		
Topics	Target Meeting	Additional information
Community mental health services transformation – pathways to care in Tamworth	Further date to be confirmed	Invitation extended to Assistant Director Partnership & representative of Midland Partnership Foundation Trust
Leisure Services & Open Spaces	30 th November 2021 & 25 th January 2022	Invitation to be extended to Assistant Director Operations & Leisure
Substance abuse / addiction		
Young people’s experiences in Tamworth		To capture the working groups learnings
Loneliness / isolation		
2. Homelessness		
Topics	Target Meeting	Additional information
Overview of services available to rough sleepers / homeless people in Tamworth		Suggested invitation to representatives of Heart of Tamworth and/ or other relevant voluntary organisations
Housing Allocations Policy – post implementation review		Suggested invitation to Assistant Director, Neighbourhoods
Homelessness Winter Relief Update	19 th October 2021	Invitation to Assistant Director, Neighbourhoods

Other suggested topics for Committee consideration		
Green and open spaces		
Attainment and Skills in Tamworth		
Safeguarding updates (2 per year)	19 th October 2021 & 29 th March 2022	Invitation to Portfolio Holder and Officers
Specific topics to feed in to Staffordshire County Council (separate from main Themes)		
Topic	Date of planned Staffs consideration	Additional information
Wider determinants of health in Tamworth, including diet / food vulnerability / healthy eating / social prescribing		Extend an invitation to voluntary sector to understand current initiatives eg Community Together CIC
Strategic Transformation Programme (STP)		To tie in with County consideration when dates for County consideration known
Possible Working Group topics		
Armed Forces Covenant		Understand the current Staffordshire wide and Tamworth position

Upcoming Health & Wellbeing Scrutiny Committee Meetings
19 th October 2021
30 th November 2021
25 th January 2022
29 th March 2022

Upcoming Relevant County Council Meetings

**Health and Care Overview and Scrutiny Committee – Staffordshire
County Council**

- 25 October 2021
- 29 November 2021
- 31 January 2022
- 15 March 2022
- 19 April 2022

Chair

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**Health and Care Overview and Scrutiny Committee – Monday 20 September 2021
District/Borough Digest**

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach. Therefore, the following is a summary of the business transacted at the meeting of the Health and Care Overview and Scrutiny Committee held on Monday 20 September 2021 - link to Agenda and reports pack:-

[Agenda for Health and Care Overview and Scrutiny Committee on Monday 20th September 2021, 10:00am - Staffordshire County Council](#)

The webcast of the meeting can also be viewed following the above link to mod.gov.

Agenda Item	District(s)/Borough(s)
<p>Health and Care Overview and Scrutiny Committee</p> <p>20 September 2021</p> <p>The Health and Care Overview and Scrutiny Committee considered the following matters:</p> <p>Transforming Urgent and Emergency Care (UEC) update Committee considered and noted the Transforming Urgent and Emergency Care programme and the engagement plan. Members raised matters of concern relating to current pressures, UEC arrangements, patient experiences and joined up processes. Committee was assured that the engagement process would be as wide as possible, it will also look at pathways of care and lessons learned through the pandemic. Committee considered the process to be an opportunity to improve services and patient experience and asked District and Borough Councillors to share the consultation widely to ensure District, Borough and Parish voices are heard. A further report was requested to consider feedback.</p> <p>Difficult Decisions Update Committee considered and noted the Difficult Decisions engagement process regarding five areas of care: assisted conception, hearing aids for non-complex hearing loss (Mild hearing loss only), male and female sterilisation, breast augmentation and reconstruction and removal of excess skin following significant weight loss. They commented on the need to ensure consistency across Staffordshire for residents, the need for service user engagement and to use feedback from engagement to develop processes. A further report was requested to consider feedback.</p> <p>Phase 3 Covid Vaccination Update Committee considered and noted the current position relating to the vaccination programme and take up of vaccinations. There was an increase in Covid case rates across Staffordshire and targeted work is ongoing, alongside campaigns to inform those with concerns about getting vaccinated. There is a good take</p>	<p>All Districts and Boroughs</p> <p>All Districts and Boroughs</p> <p>All Districts and Boroughs</p>

<p>from young people and SCC care home staff, and front facing health and care staff are being encouraged to get vaccinated, although this is not mandated. Members welcomed the progress made and thanked all involved for the fast response. There is an all member seminar to update on Covid-19 on 29 September 2021.</p> <p>Covid-19 Update Committee received a detailed presentation. There is a high case rate however double vaccination cases are mainly symptomatic and death rates are down. Committee concerns related to the early emergence of winter pressures and non-Covid infections that were impacting on the system. They understood the need to vaccinate across all age bands to protect older people and to vaccinate younger people for the protection of the Community.</p> <p>District and Borough Health Scrutiny Updates District and Borough Council representatives reported on matters arising from District and Borough meetings. As a result, two additional items have been added to the Work Programme 2021-22: (i) an update on GP Access, which was requested by more than one district representative; (ii) an invitation to West Midlands Ambulance Service to attend Health and Care O&S Committee.</p> <p>Work Programme 2021-22 Note that the Introduction to Mental Health session is on 21 October 2021. All members are requested to pass details of the Mental Health Survey 2022 to District, Borough and Parish members.</p>	<p>All Districts and Boroughs</p> <p>All Districts and Boroughs</p>
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Their next meeting will be held on Monday 25 October 2021 at 10.00 am, County Buildings, Stafford.

Health & Wellbeing Scrutiny

Homelessness and Winter Relief 21 /22

Tina Mustafa – AD Neighbourhoods & Sarah Finnegan
Head of Homelessness and Housing Solutions
19th October 2021

Outcomes

- Understanding Homelessness
- Sharing Progress on the rough sleeping initiative
- Informing the Winter relief Proposal

Department for Levelling Up, Housing and Communities

- ▶ Parliamentary under Secretary for Rough Sleeping and Housing Eddie Hughes MP– Jan 2021
- ▶ Previous role holders Dame Kelly Tollhurst and Luke Hall MP
- ▶ Responsible for a wide portfolio including: Homelessness, Rough Sleeping, private rented sector, social housing white paper etc...
- ▶ LA's have government HAST advisors they report to and are monitored by.

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<https://www.gov.uk/government/organisations/department-for-levelling-up-housing-and-communities>

HAST (Homelessness advice and support team)
Secretary of state and Minister for Rough Sleeping and Housing



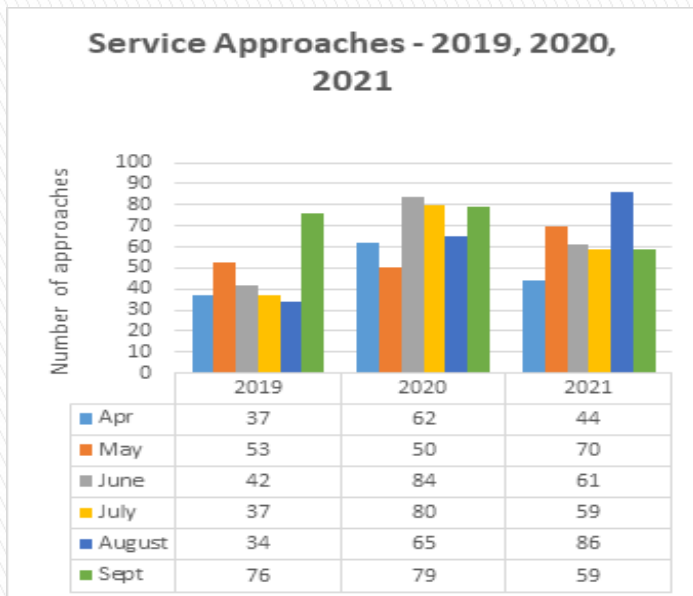
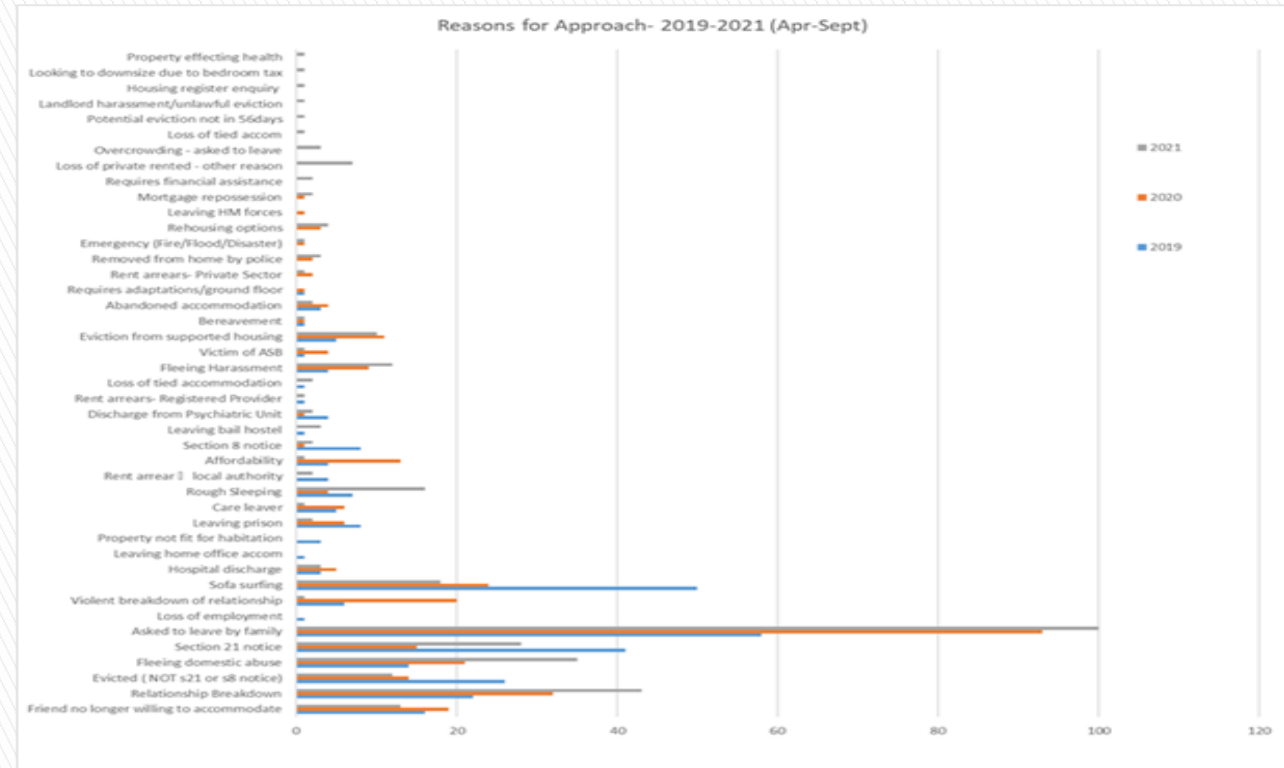
DLuHC– Homelessness and Rough Sleeping Strategy 2018

- ▶ Context – Govt Rough Sleeping Strategy sets out the government’s vision for halving rough sleeping by 2022 and ending it by 2025.
- ▶ Rough Sleeping strategy was published in 2018 – [The rough sleeping strategy – GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/682212/rough_sleeping_strategy.pdf)
- ▶ Every Local Authority now has to publish its own RS and Homelessness prevention strategy 2020 – 2025 to ensure we are aiming towards their target. The strategy overarches all the work we do.
- ▶ Strategy is based around 3 core pillars, prevention, intervention and recovery and TBC is from 2020 –2023
- ▶ Sector research “housing disease” – ONS correlation between overcrowding, homelessness, lack affordable housing and more shared accomm like HMO is needed nationally

Actions, challenges & Achievements Data picture – ...”

- ▶ Rough sleeping transient &/or entrenched; temporary &/or communal
- ▶ Causation - asked to leave by family / friend no longer willing to accommodate, hidden homelessness and sofa surfing
- ▶ RS Count is 20th October anyone bedded down after 12 pm joint County decision (Nuneaton, Lichfield, Cannock etc)
- ▶ TBC aiming for 0 this year in RS estimate
- ▶ Assisted over 40 since Nov 19 - currently:-
 - 1 in B&B
 - Active cases open to RSI 4 Team 16
 - Active cases open to the homeless Team 130 4X officers, OOH rota
 - 20 in council TA- self contained
 - Several previous rough sleepers rehoused but struggling to sustain tenancy
 - Example: Cost B&B/TA based on average 30 nights x 18 - £25k
 - Govt assess each rough sleeper costs £14,300-£21,200 to public services

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- **CHALLENGES:**
- Unmet housing need – shortfall in numbers – land availability of 1 beds
- Gaps in specialist provision – behavioural rather than medical (mental health)
- Clients remain complex and chaotic and sustaining tenancies is the biggest challenge coupled with non-engagement
- Performance strong which inevitably limits external funding opportunities
- Impact wider health determinants
- Stakeholder expectations
- PRS realism around shared accomm for under 35yrs
- Revolving door of homelessness- Entrenched RS
- Poverty / Low incomes around affordability
- Cross border placements - Birmingham

Tamworth Rough Sleeping Count Target for 2021 is 0

Homelessness



Rough Sleepers

- Yearly Rough Sleeper figure return
- Entrenched or transient population
- Begging
- Priority need
- ½ BY 2022 end by 2025

Legislation

- Obligation of Housing Authorities
- Part 7 of Housing Act 1996
- Homelessness Act 2002
- Homelessness Reduction Act 2017
- Homelessness Code of Guidance 2018
- Homeless & RS Strategy 2020–2023
- Rough Sleeping Strategy 2018
- Children Act 1989
- Equality Act 2010
- Covid 19 response
- Data returns to MHCLG
- Part 6 Housing Act 1996 Housing Register

What is Homelessness?

You may be homeless if you're sleeping rough, don't have rights to stay where you are or you live in unsuitable housing.

- ▶ staying with friends or family
- ▶ staying in a hostel, night shelter or B&B
- ▶ squatting (because you have no legal right to stay)
- ▶ at risk of [violence or abuse in your home](#)
- ▶ living in poor conditions that affect your health
- ▶ living apart from your family because you don't have a place to live together

- ▶ Anyone – single or families
- ▶ Londoners – people are described as 1 pay cheque away from it
- ▶ Leaving home for the first time or leaving care
- ▶ [pregnant with nowhere to stay when the baby comes](#)
- ▶ Friends or family asking you to leave
- ▶ struggling to live on benefits or a low income and pay your rent
- ▶ Victims of domestic abuse
- ▶ Splitting up with partner
- ▶ from abroad without the right to claim benefits
- ▶ [an asylum seeker or refugee](#), [leaving prison](#), hospital discharge
- ▶ Being evicted
- ▶ Disaster such as fire or flood
- ▶ Hate crimes
- ▶ Severely overcrowded

You may count as homeless if you are:

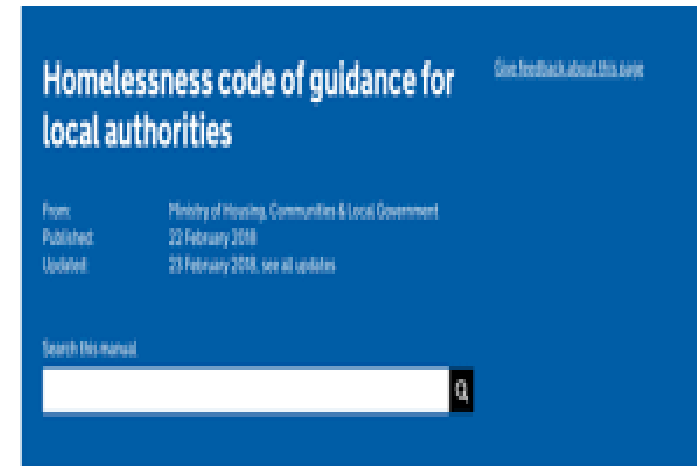
Who is affected?

Legal Definition of Homelessness – Housing Act 1996 Part VII S175.

Who is legally homeless? A person is legally defined as homeless if: [\[1\]](#)

- ▶ they have no accommodation available in the UK or abroad
- ▶ they have no legal right to occupy the accommodation
- ▶ they have a split household and accommodation is not available for whole household
- ▶ it is unreasonable to continue to occupy accommodation
- ▶ they are at risk violence from any person
- ▶ they are unable to secure entry to their accommodation
- ▶ they live in a moveable structure but have no place to put it
- ▶ Suitable, reasonable, affordable
- ▶ [Shelter Legal England – Legal definition of homelessness](#)

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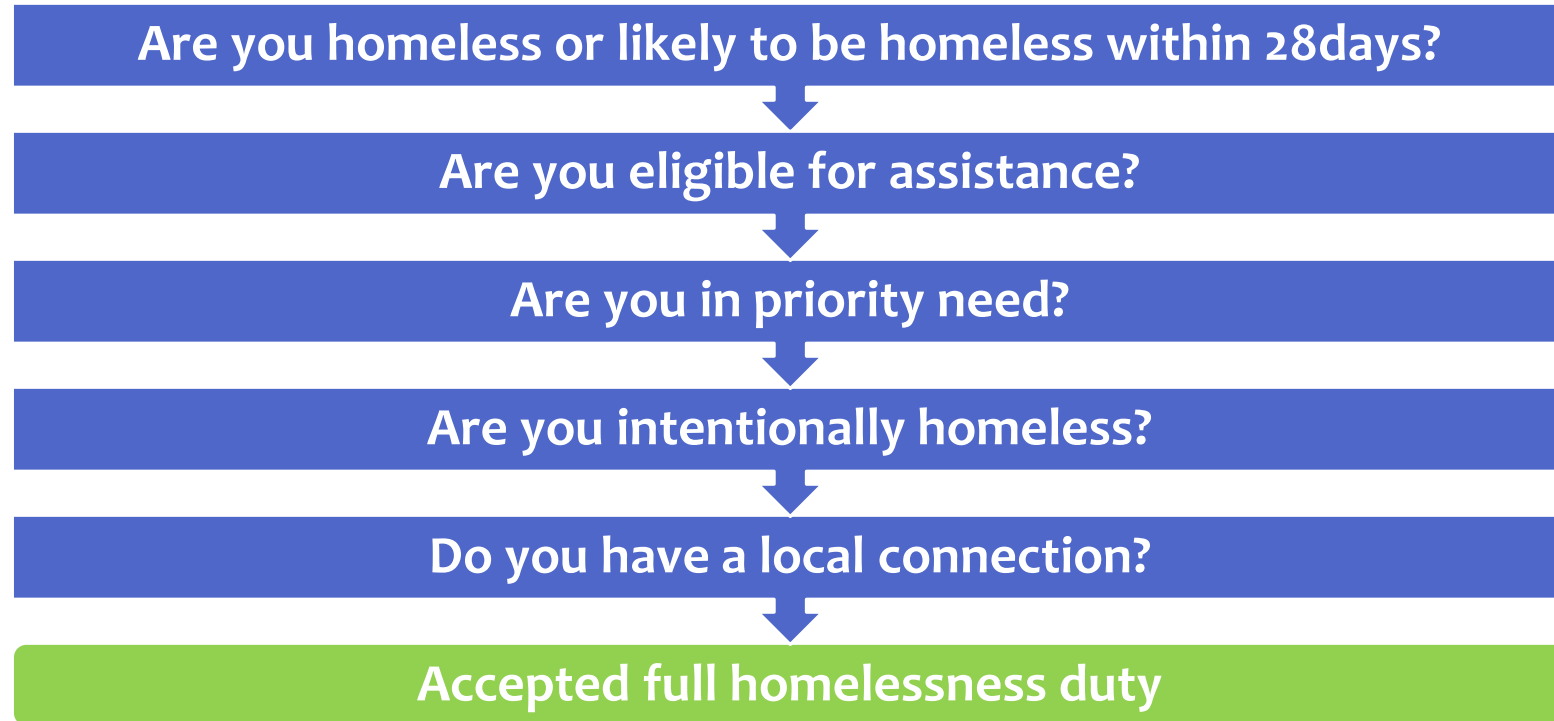
Contents > Chapter 6: Homeless or threatened with homelessness

Chapter 6: Homeless or threatened with homelessness

Guidance on how to determine whether a person is homeless or threatened with homelessness according to legislation.

Prior to 2018 and the Homeless Reduction Act

2017



New System

Are you eligible for assistance?

Are you homeless or likely to be homeless within 56 days?

NEW!

Prevention Duty - Reasonable steps to help you keep your home

NEW!

Relief Duty - Reasonable steps to help you find somewhere else to live

NEW!

Are you in priority need?

Are you intentionally homeless?

Do you have a local connection?

Full homelessness duty

Applicant

Is applicant eligible for assistance?

NO

S184 Not Eligible Letter (R)

YES

Is applicant homeless or threatened with homeless within 56 days?

NO

S184 Not Homeless Letter (R)

S188 accommodation for those where there is a reason to believe that they are homeless, eligible and priority need

YES

Homeless (Relief Duty)

Can you refer them under local connection rules?

YES

S198(1A) No Local Connection Letter (R)

NO

Duty to complete Assessment & Personalised Plan (189A) (R)

No Further Duty

Refusal of Final Accom. Offer or Part VI (S193A) (R)

Duty to help to secure suitable accommodation becomes available (S189B(2))

S189B(2) Duty can come to an end (R)

Has accom. for at least 6 months S189B(7a)

56 Days End S189B(7b)

Refused 6 months' accom. S189B(7c)

IH from accom. made available S189B(7d)

Cease to eligible S189B(7e)

Withdrawn S189B(7f)

Refusal to cooperate S193B despite a warning letter

Not Homeless S184 (R)

S193 Main Duty if Priority Need & Not IH & has local connection (R)

IH S184 (R)

Not Eligible S184 (R)

Duty to offer of AST with min 6 months only if PN and not IH

Duty comes to an end if (R):
• Refuses TA (S193(5))

Duty comes to an end if (S193C(5)) (R):

Threatened with homeless within 56 days (Prevention Duty)

Duty to complete Assessment & Personalised Plan (189A) (R)

Duty to help that suitable accommodation does not cease to be available (S195(2))

S195(2) Duty can come to an end (R)

Has accom. for at least 6 months S195(8a)

56 Days End S195(8b)

Became Homeless S195(8c)

Refused 6 months' accom. S195(8d)

IH from accom. made available S195(8e)

Cease to eligible S195(8f)

Withdrawn S195(8g)

Refusal to cooperate S193B despite a warning letter

No Further Duty

Go to Relief Duty

Key changes: Prevention Duty	Relief Duty	Main Housing Duty
<ul style="list-style-type: none"> • Lasts 56 days • Prevent the accommodation being lost • Early intervention • Reduce pressure on emergency accommodation • Personal Housing Plan • Example– Section 21 served • Advice & assistance duty 	<ul style="list-style-type: none"> • Lasts 56 days • Satisfied they are homeless and eligible • Not reasonable to remain • Duty to take reasonable steps to help applicant secure accom that is available for 6 months • Personal Housing Plan • Example– DA victim 	<ul style="list-style-type: none"> • Owed to an applicant if we are unable to Prevent or Relief their homelessness • 5 Test of homelessness • Eligible • Homeless • Priority need • Unintentionally homeless • Local connection
<p><u>Temporary Accommodation– Interim Duty S188</u></p>		

A local authority must provide interim accommodation while it makes inquiries if it has reason to believe that the applicant may be:

- homeless
- eligible for assistance, and
- in priority need. If all 3 are satisfied..... B&B/Council stock TA units can then be sought, dependant on case, Hostels (TCHA, Deventio, YMCA Burton) are also sought and private sector accommodation.



Feedback on Grant Funding from RSI 4

- ▶ Cabinet report in July 2021 updated on successful bid for the Rough Sleeping Initiative funding RSI4 (100K bid was awarded)
- ▶ To date have received £61,400.00
- ▶ Second tranche of funding due end of October £38,600.00
- ▶ 3 X new positions created, HS Out reach Officer, Mental health support worker and to be appointed in November Neighbourhood Coach
- ▶ £10K set aside for personal budgets for rough sleepers to support tailored interventions, support resettlement e.g, Paying for birth certificates, driving license for job prospects, passports, mobile phone to keep in touch with service, upcycles furniture from local charities, clothes for job interviews
- ▶ SWEP Winter relief £6400.00 and Begging initiative- Jan - June 21 £1200
- ▶ Tamworth has agreed with MHCLG and its HAST RS advisor, working document...End RS Plan which we are all focused on entwined with our Homelessness and RS Strategy 2020- 2023
- ▶ Currently have 16 clients open to the team who are receiving support
- ▶ From last November to date we have supported over 30 clients who were or previously rough slept, some are still in chaotic, complex cycle and need intense support
- ▶ Tamworth's RS cohort are White, Male, British nationals and between 35- 50
- ▶ The funding will support those with Utility hikes who may be unable to pay bills and choose to go back out...
- ▶ Last year RS estimate reported 5, this year our goal is 0
- ▶ Prospect of RSI 5 next February

IS ON TRACK!!

STILL MORE TO DO!!!

Reflection ~ Covid impact Winter 2020/21

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2019/20 winter (pre Covid)	2020/21 Winter – (Covid)
Night shelter operated– shared sleeping space	Place based support– mirror of housing first principles – both HoT and TBC agreed the wrap around support really worked for the vulnerable community members
Some engagement from service users in shelter, however some positive outcomes achieved. Focus on transient rough sleepers some with accommodation already available but attending for the social aspect	‘Everyone in’ Government initiative to support rough sleepers during Covid– 18+ were accommodated by TBC between March– August.
Tensions build within night shelter, police are called, small community impact noted	No reports of ASB at stand alone accommodations
Although some positive outcomes achieved, the cycle of homelessness was not ended in all cases	Engagement from each service user, increased working with the team
Support provided to collective group due to numbers in shelter, limited individual support.	HOT & mental health worker provided tailored support to individual which has resulted in positive outcomes

Winter Relief Proposal to Cabinet 11.11.21

- ▶ Continue to work with Heart Of Tamworth (HoT) cost £6400.00 from 1st Dec until end of February

Support includes:

- ▶ Both agreed that the wrap around support worked really well last year for the vulnerable members of Tamworth
- ▶ HoT would be happy to use this model going forward for this year, and have you advised that by necessity we have all learned to deliver services to clients in a different way and it worked well.
- ▶ Dedicated member of staff from HoT to work alongside TBC Housing solutions team
- ▶ Covid secure home visits
- ▶ Food parcel/ Hygiene pack deliveries
- ▶ Befriending – telephone & face to face
- ▶ Support while in TA such as speaking to other council departments as an advocacy service if need to
- ▶ Hand holding to getting forms completed (H-reg form now online)
- ▶ Providing a single point of contact for queries, linking in with RSI team
- ▶ Providing emotional support through listening and agreeing an action plan
- ▶ Hand holding to attend appointments within the community (banks, GP's)
- ▶ Upskilling, Job prospects, CV writing workshop, volunteering opportunities
- ▶ Referrals into Tamworth Advice Centre (TAC) financial/debt assistance
- ▶ Two way commitment between council and third sector, outcome focused.

Thank you for listening

Any questions, we
welcome your views...

HEALTH AND WELLBEING SCRUTINY COMMITTEE

TUESDAY, 19 OCTOBER 2021

REPORT OF THE PORTFOLIO HOLDER FOR REGULATORY AND COMMUNITY SAFETY

SAFEGUARDING CHILDREN AND ADULTS AT RISK OF ABUSE REPORT

EXEMPT INFORMATION

None

PURPOSE

The purpose of the report is to provide a biannual safeguarding update to the Health and Wellbeing Scrutiny Committee.

RECOMMENDATIONS

That members:

Review the report and raise any questions in relation to the content with the Assistant Director Partnerships in collaboration with the Portfolio Holder for Regulatory and Community Safety, and thereafter endorse.

EXECUTIVE SUMMARY

Tamworth Borough Council has a legal responsibility to safeguard children and adults with care and support needs from abuse and neglect. The safeguarding children and adults at risk of abuse and neglect policy and procedure provides a framework for safeguarding, and demonstrates the council's commitment to safeguard children and adults at risk.

Safeguarding is integrated into the day-to-day operations of the council. The council responds to all safeguarding concerns raised in line with the safeguarding procedure. Reporting of concerns is fundamental in ensuring that children and adults at risk receive the necessary support to safeguard and promote their welfare.

The following information provides an overview of the number of safeguarding referrals received and an update on the safeguarding work that has taken place since the last update provided to the committee on the 21st April 2021.

Safeguarding Statistics

The number of safeguarding concerns referred via the council’s safeguarding reporting procedure for the date period 1st April 2021 to 30th September 2021 are detailed in the table below:

Referral type	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Child referrals	3	9			12
Adult referrals	5	10			15
Total combined referrals	8	19			27

Table 1: Safeguarding concerns raised by staff 2021-22

Referrals continue to be received from a wide range of council staff including, customer service officers, housing solutions officers, tenancy sustainment officers, and sheltered housing managers.

A quarterly overview of safeguarding referrals is attached at Appendix 1.

Staffordshire Safeguarding Children Board (SSCB)

Staffordshire Safeguarding Children Board (SSCB) is the key statutory body for coordinating and ensuring effective arrangements are in place to safeguard and promote the welfare of all children in Staffordshire.

Section 11 of the Children Act 2004 places duties on a range of organisations, agencies and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children (Working Together 2018).

The Board also has a duty to hold agencies to account in terms of their safeguarding arrangements and practices. Organisations that are delivering services directly or indirectly to children and young people must complete the Section 11 safeguarding audit.

This year’s review of Section 11 duties focused on learning and development. The information requested to seek assurance was submitted to the Board in July, and we are currently awaiting feedback.

Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board (SSASPB)

- Under the Care Act 2014 the SSASPB has to:
- i) establish how it will hold partner agencies to account and gain assurance of the effectiveness of its arrangements
 - ii) determine its arrangements for peer review and self-audit

The SSASPB Audit and Assurance Sub-group has developed a four tier audit model. Tier 2 is for individual agencies to audit themselves against an agreed set of standards. There is no statutory requirement for any organisation to complete the

Tier 2 SSASPB audit, but co-operation to do so is sought and it can provide useful information for improvement. The audit has been completed and submitted to the Board in August, and we are currently awaiting feedback.

Safeguarding Training

Safeguarding training continues to be delivered via two E-Learning modules to all new starters and staff requiring refresher training. Staff are required to attend additional safeguarding children training depending on their level of contact with children and families. The Partnership Vulnerability Officer is also available to deliver virtual safeguarding training via Microsoft Teams if required. A virtual safeguarding training session was delivered to Members on the 10th June 2021.

Suicide Prevention Training

Staff have been attending a half-day suicide prevention training session delivered by Staffordshire Mind.

The training aims to help staff to:

- Tackle misconceptions and stigma regarding suicide
- Recognise the signs that someone may be at risk
- Have open and honest dialogue about suicide
- Use a simple 4 step suicide intervention
- Signpost to local support services

35 members of staff have completed the training with a further 9 registered to attend forthcoming sessions. Mind will continue to deliver sessions until March 2022.

Taxi driver safeguarding training

The Partnership Officer has recommenced delivery of safeguarding training to taxi drivers. The training is delivered virtually via Microsoft Teams.

Multi-agency working

Multi-agency Child Exploitation Panel (MACE)

The Partnership Vulnerability Officer continues to attend the bi-monthly MACE panel meeting. Part of the MACE panel remit is to identify current local issues and themes and coordinate a multi-agency response. The Partnership Manager and Partnership Vulnerability Officer are scheduled to meet with an officer from the Staffordshire Police Child Exploitation Early Intervention and Prevention Team to discuss how we can work together going forward to raise awareness about child exploitation with local businesses and the wider community.

Locality Partnership Meeting

Officers from the partnership team attend the locality partnership meeting which takes place monthly. Representatives from statutory and community and voluntary organisations attend. The meeting provides a forum for early help services to share information on the support that is available for children and families in Tamworth. The sharing of this information enables professionals to signpost families at the

earliest opportunity into services that can offer support. Information from this meeting is cascaded to relevant service area within the Council.

Modern Slavery

The Partnership Manager and the Partnership Vulnerability Officer attended the County tactical meeting coordinated by Staffordshire Police. This multi-agency meeting identifies emerging trends and hotspot areas and also provides a forum for agencies to draw on the expertise of other professionals to respond effectively to concerns around modern slavery. The partnership team are currently undertaking a piece of work to establish who is best placed to represent TBC at future meetings.

Tamworth Vulnerability Partnership (TVP)

The weekly partnership meeting continues to be well attended by representatives from statutory organisations. The partnership provides a joined-up response to vulnerability within the community and endeavours to provide help at the earliest opportunity to improve outcomes for vulnerable people.

The partnership has reviewed the terms of reference and has widened the scope of the meeting to consider other community safety priority areas including youth anti-social behaviour in the community.

RESOURCE IMPLICATIONS

There are no immediate financial implications arising from this report. The training requirements will be met from existing revenue budgets within GS1005.

LEGAL/RISK IMPLICATIONS BACKGROUND

The Safeguarding Children and Adults at Risk of Abuse and Neglect Policy has been risk assessed and no significant risks exist. From a legal perspective the authority is meeting its expectations and requirements in relation to vulnerable children and adults at risk.

SUSTAINABILITY IMPLICATIONS

The policy and staff in this important service will continue to operate locally and in conjunction with partners to sustain the levels of support, training and guidance required.

BACKGROUND INFORMATION

Tamworth Borough Council has both a legal and moral duty to protect children and adults at risk from harm and abuse. The Children Act 1989 and 2004 along with the associated government statutory guidance sets out our legal responsibilities for protecting children. The Care Act 2014 along with associated statutory guidance recognises and reinforces that organisations make a significant contribution to adult safeguarding.

REPORT AUTHOR

Stephanie Ivey
Partnership Vulnerability Officer

LIST OF BACKGROUND PAPERS

[Children Act 1989](#)

[Children Act 2004](#)

[Working Together to Safeguard Children 2018](#)

[Care Act Statutory Guidance](#)

APPENDICES

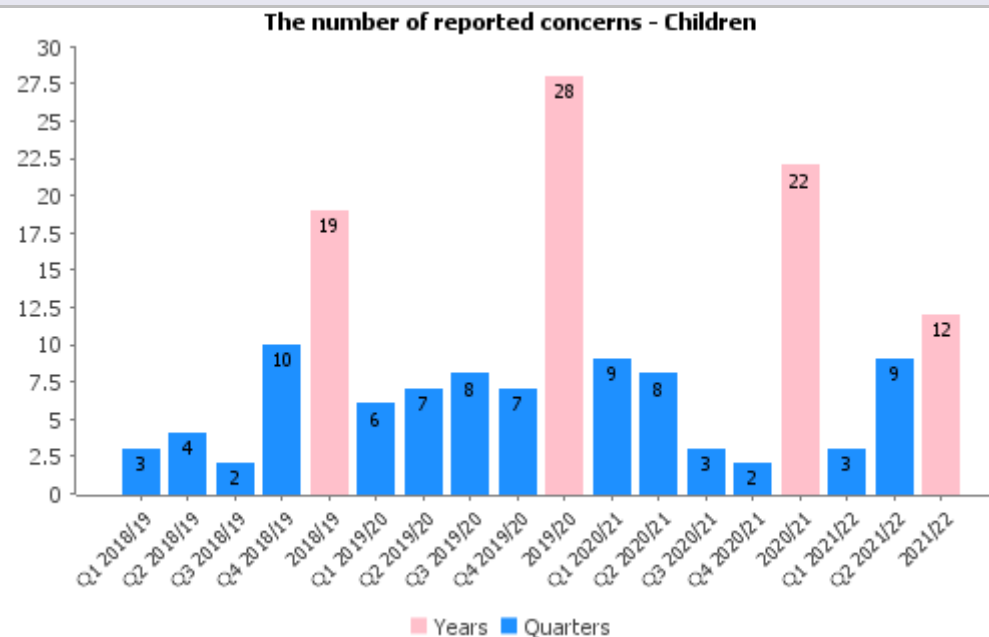
Appendix 1 Safeguarding referral overview

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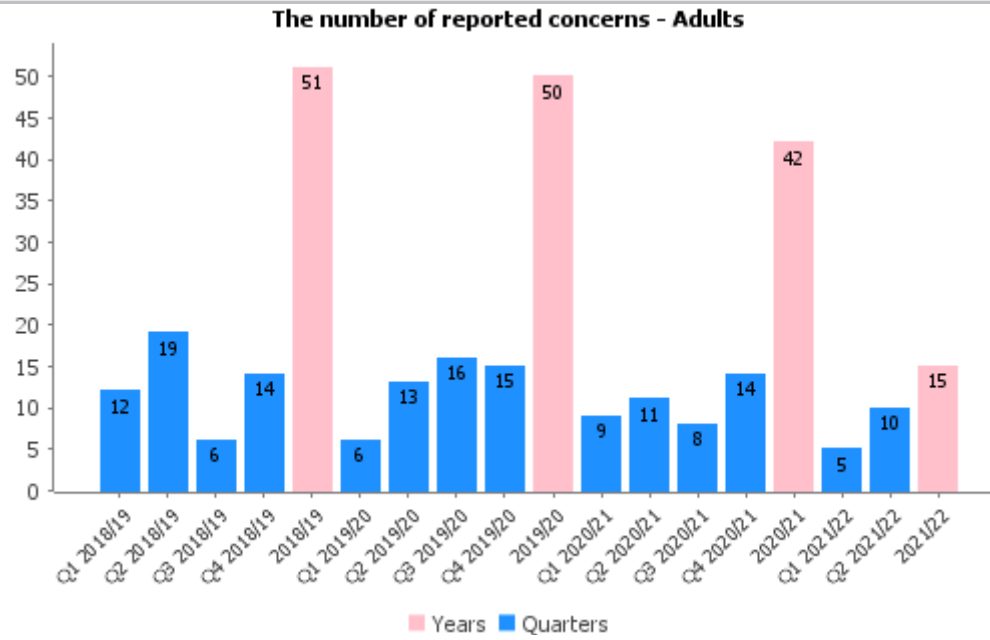
Safeguarding Performance Indicators

Performance Indicator	Trend Chart
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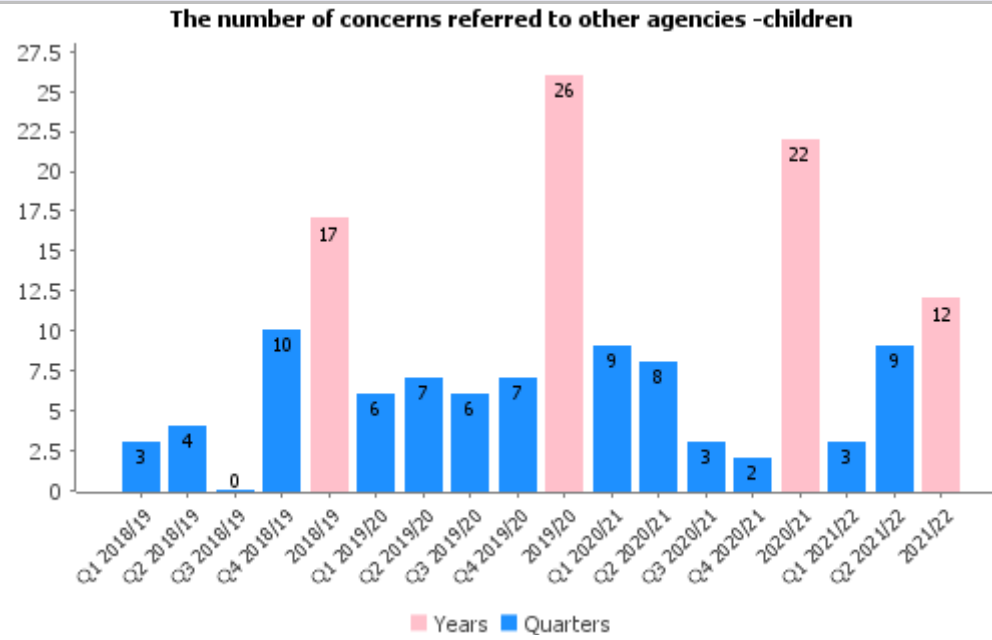
The number of reported concerns – Children



The number of reported concerns – Adults

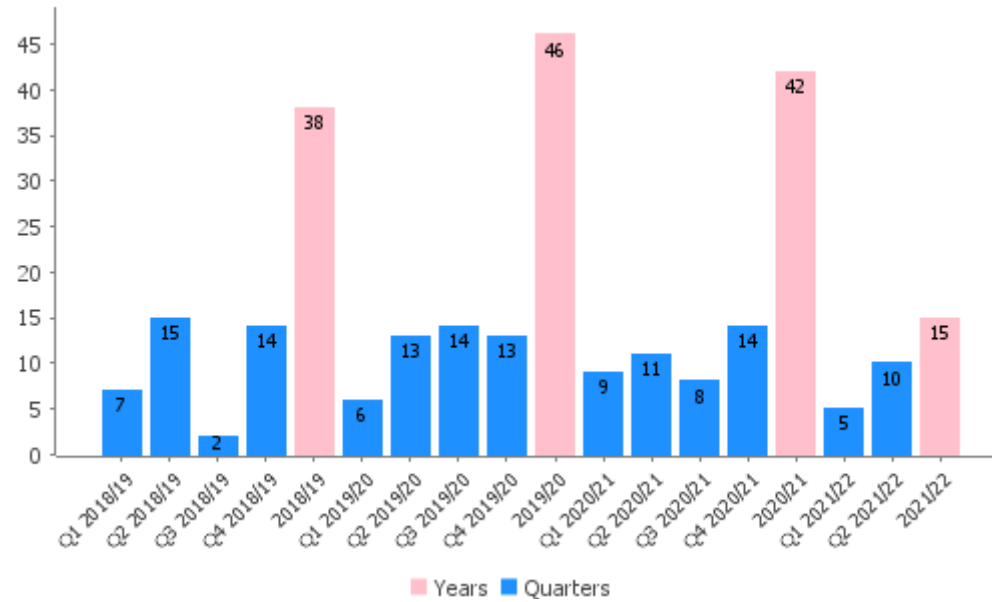


The number of concerns referred to other agencies –children



The number of concerns reported to other agencies – Adults

The number of concerns reported to other agencies - Adults



Health & Wellbeing Scrutiny Work Plan

Work Plan 2021 – 2022		
Work Area Themes for the Year		
1. Mental Wellbeing		
Topics	Target Meeting	Additional information
Community mental health services transformation – pathways to care in Tamworth	Further date to be confirmed	Invitation extended to Assistant Director Partnership & representative of Midland Partnership Foundation Trust
Leisure Services & Open Spaces	30 th November 2021 & 25 th January 2022	Invitation to be extended to Assistant Director Operations & Leisure
Substance abuse / addition		
Young people’s experiences in Tamworth		To capture the working groups learnings
Loneliness / isolation		
2. Homelessness		
Topics	Target Meeting	Additional information
Overview of services available to rough sleepers / homeless people in Tamworth		Suggested invitation to representatives of Heart of Tamworth and/ or other relevant voluntary organisations
Housing Allocations Policy – post implementation review		Suggested invitation to Assistant Director, Neighbourhoods
Homelessness Winter Relief Update	19 th October 2021	Invitation to Assistant Director, Neighbourhoods

Other suggested topics for Committee consideration

Green and open spaces		
Attainment and Skills in Tamworth		
Safeguarding updates (2 per year)	19 th October 2021 & 29 th March 2022	Invitation to Portfolio Holder and Officers

Specific topics to feed in to Staffordshire County Council (separate from main Themes)

Topic	Date of planned Staffs consideration	Additional information
Wider determinants of health in Tamworth, including diet / food vulnerability / healthy eating / social prescribing		Extend an invitation to voluntary sector to understand current initiatives eg Community Together CIC
Strategic Transformation Programme (STP)		To tie in with County consideration when dates for County consideration known

Possible Working Group topics

Armed Forces Covenant		Understand the current Staffordshire wide and Tamworth position

Upcoming Health & Wellbeing Scrutiny Committee Meetings

19th October 2021
30th November 2021

25th January 2022

29th March 2022

Upcoming Relevant County Council Meetings

**Health and Care Overview and Scrutiny Committee – Staffordshire
County Council**

- 25 October 2021
- 29 November 2021
- 13 December 2021
- 31 January 2022
- 15 March 2022
- 19 April 2022

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