

MINUTES OF OVERVIEW AND SCRUTINY COMMITTEE

Wednesday, 31 March 2021
(7:00 - 8:46 pm)

Present: Cllr Jane Jones (Chair), Cllr Dorothy Akwaboah (Deputy Chair), Cllr Toni Bankole, Cllr Donna Lumsden, Cllr Olawale Martins, Cllr Ingrid Robinson, Cllr Paul Robinson and Cllr Phil Waker

Also Present: Cllr Evelyn Carpenter and Cllr Maureen Worby

Apologies: Cllr Simon Perry

48. Declaration of Members' Interests

There were no declarations of interest.

49. Minutes - 26 January 2021

The minutes of the meeting held on 26 January 2021 were confirmed as a correct record.

50. Minutes - 3 February 2021

The minutes of the meeting held on 3 February 2021 were confirmed as a correct record.

51. Continuity and recovery in schools during COVID-19 - Interim report

The Cabinet Member for Educational Attainment and School Improvement (CMEA) introduced an interim report on the continuity and recovery in schools during Covid-19. She thanked the Borough's schools and education settings for their tireless work over the past 12 months, to remain safely open for the children of critical workers and for vulnerable pupils. Whilst it was recognised that disadvantaged areas such as the Borough would be particularly affected by the pandemic and would take a long time to recover, she praised the strengthening of partnerships between schools, Children's Social Care, Health, Community Solutions, the Police and the voluntary sector during the pandemic.

The Commissioning Director for Education (CD) and the Project Co-ordinator for the Step Up, Stay Safe (PC) programme presented the interim report, which provided a detailed narrative of the previous 12 months in relation to the continuity and recovery in schools during the pandemic. Much had been learnt about remote education and schools had carried out extensive work to remain in contact with, and to support their pupils. This had included mechanisms such as:

- The submitting of daily returns to the Department for Education (DfE) in relation to matters such as attendance;
- The tracking and brokering of support for vulnerable pupils;
- The establishment of new arrangements which had led to the creation of new multi-agency support structures, bringing together professionals from a

wide range of areas such as Education, Social Care, Early Help, Health, the Youth Offending Service (YOS), the Youth at Risk Matrix (YARM), North East London Foundation Trust (NELFT) and the Police;

- Thrive London training, which provided parents, carers, teaching staff, youth workers, and medical experts with an integrated approach to understanding children's behaviour;
- The development of over 170 videos which modelled activities for children by the Portage Service (a home visiting system for children with disabilities);
- The provision of devices for schools to distribute to vulnerable pupils, by both the Government and several local businesses;
- Early individual reviews for those with Education, Health and Care (EHC) plans and weekly network meetings to support SENCOs (Special Educational Needs Co-ordinators); and
- The development of workstreams about race and discrimination, following the Black Lives Matter (BLM) movement.

An update was also provided around the reopening of schools, the testing of school staff and pupils and the Holiday Activities and Food programme.

The Chair thanked the CD and the PC for their presentation and wished to relay the immense thanks of the Committee to all school staff within the Borough.

Following the introduction provided by the CMEA, which had stated that several local businesses had kindly supported the provision of IT equipment for vulnerable pupils, the Chair suggested that the CMEA liaise further with the Cabinet Member for Employment, Skills and Aspiration, to enquire as to whether this resource could be further utilised to support local families.

In response to a question from a Member, the CD stated that the Council had commissioned the Barking and Dagenham School Improvement Partnership (BDSIP) to lead work on its behalf in relation to anti-racism education and BLM. This would be undertaken both for and with schools, and would include external advice, as well as be partially led by an experienced, knowledgeable and interested Headteacher. This work would focus on conversations and the input of young people, the current provision and what worked well, and ensuring that the curriculum reflected the voices of diverse communities. This would provide a sustained opportunity for learning and would be an inclusive project going forward.

The Committee wished to put on record its immense thanks to the Education team, the CMEA, all school staff and all of those who had supported the continuity and recovery in schools during the Covid-19 pandemic.

52. Supporting older residents during the pandemic and beyond

The Cabinet Member for Social Care and Health Integration (CMSC) introduced a report on how the Council was supporting older residents during the pandemic and its plans for post-pandemic support. She praised the exemplary work that had been seen from staff in delivering services safely to the community at speed during the pandemic, as well as the strong partnership working in dealing with Covid-19.

The Operational Director for Adult's Care and Support (OD) and the Lead Commissioner for Older People (LC) provided a brief outlook in regards to the demographic makeup of older people living within the Borough before the onset of the Covid-19 pandemic, followed by a more detailed narrative in relation to the

work that had been undertaken to provide support to older residents over the past 12 months. This had included mechanisms such as:

- Extensive work in relation to hospital discharges, such as the identification by BHR of designated settings (nursing homes) and one commissioned home care agency to deal only with positive cases, which had reduced transmission, and local authority brokered placements (rather than the CCG) to improve choice, cost and control;
- Utilising learning gained during the pandemic to look at the way in which staff could be used more effectively going forward, such as by moving the Joint Assessment and Discharge (JAD) team into the community;
- Supporting adult providers to provide high-class care for residents through means such as 7 day per week virtual support from the Council's Public Health, Commissioning and Provider Quality teams, as well as through funding and uplifts to continue as businesses and to maintain the adult social care market;
- Supporting care homes to reduce isolation through Covid-safe visiting, funding and technology such as Breezie tablets (handheld devices performing functions such as enabling residents to connect virtually with relatives);
- Providing funding for the 'Reconnections' programme, to increase the social networks of older residents and to improve their health and wellbeing; and
- Providing support in relation to a number of issues via agencies such as the Council's Community Solutions team, the Specialist Support Hub, BDCAN and the Central Food Hub.

The OD and LC also wished to publicly thank colleagues in BHRUT, NELFT and primary care, for their dedicated work in relation to rolling out the Covid-19 vaccine to the Borough's care homes.

In response to several questions, the OD stated that:

- The Council had already been working towards a Home First model for quite some time, since the new hospital discharge guidance came in early 2020.
The aim of this model was to assess discharged residents, primarily older people, in their own homes, rather than the hospital and to improve resident health and social care outcomes by ensuring that a more realistic assessment of an individual's needs took place in their home environment. This model had been working very well and as such, the Council was not expecting there to be any major issues with this going forward.
- There was no limit to the number of patients that a hospital could discharge in one day.
- Whilst the Council was not responsible for hospital transport, it was responsible for care and support in the community. By moving Hospital Discharge staff into the community, this would create a 'receiving' service whereby patients were pulled (rather than pushed) into the community. This had been organised through giving health partners in hospitals the authority to prescribe the first couple of weeks of patient care, to give the Council's

Care and Support staff time to visit these patients and undertake an assessment to provide them with long-term support. This was especially helpful given that patients were now being discharged from hospital earlier each year and that it took time for patients to recover before an effective assessment could be undertaken. This would also enable Care and Support staff to gain a more realistic perspective of how the discharged patient was coping, their circumstances and where they might be receiving informal carer support.

- A good partnership between the Council and health partners was essential, with Care and Support staff needing to rely on health colleagues for effective communication about which patients were being discharged and when, as well as the type of support that was being prescribed initially by health partners on behalf of the Council. Going forward, a single point of access was to be established and this was in development. The Council was working alongside health colleagues to ensure that their 'receiving' service was well aligned with the service established by health partners.
- The pandemic and exceptional circumstances had meant that new projects and support had had to be developed at pace, to support the Borough's most vulnerable residents. The Council now needed to ensure that these arrangements were properly established, safe for residents to use and worked for local residents, reflecting what they wanted to see in the services.
- Residents made their own decisions and could decide whether or not they wanted to engage with Council services. If these residents had the mental capacity to make this decision, the Council would respect this. However, the Council acknowledged the risks that it saw on those occasions and would both make an offer and continue to make an offer, even if residents were not initially willing to engage with the Council.
- The Council was relying on its health partners to relay information back to it. The single point of access would replace the Discharge Co-ordination Unit (DCU) which currently co-ordinated discharges, to fulfil the same function. As such, this would be a relatively safe process, but the Council would be careful to monitor the single point of access as it was being implemented.

In response to an earlier question, the CMSC stated that the Council's new technology bid may help to support those who may be reluctant to engage with the Council. The Careline model was now outdated, and the Council was currently looking into employing a new support model (potentially akin to an Alexa-type system) that more elderly residents may consider utilising to enable them to maintain their independence. The Council was also in the process of developing its Community Hubs model, which would enable elderly residents to participate in activities at their local community hub and potentially begin to have conversations with support workers, realising that their independence would not be lost when they spoke with the Council. As such, the Council was looking into different approaches that it could utilise to engage vulnerable residents who needed support.

The Council's Director of Strategy and Participation (DSP), as well as Shielding Lead, also wished to thank the Independent Living Agency (ILA), who had

provided extensive support to residents who were shielding. This statement was echoed by the OD, who praised the strength of the relationship between the ILA and the Council over the past 18 months, stating that the Council was planning to work more closely with the ILA to develop its new social care model.

In response to a question, the CMSC stated that she would come back to the Committee about the number of residents who were currently using Breezie tablets. The devices had also worked particularly well for those with dementia in some of the Borough's care homes. The number of residents using these tablets was growing and the Council would pay for both these tablets and the Wi-Fi for a resident to use these, if a social worker thought that a resident could benefit from the device.

In response to several questions, the OD stated that:

- In years to come, those residents who were getting older and who may unfortunately develop memory-affecting conditions, would likely already have a basic understanding of how a tablet worked as they would have likely previously used these. As such, it would be easier for them to use modern technology more naturally. Technology was also continuously improving and Commissioning colleagues were looking more widely at digitally-enabled equipment to support residents in the future.
- He would need to come back to the Committee with a more detailed response around the provision for those with visual impairments and how they could use the Breezie tablets. However, if a resident had a visual impairment that allowed them to see some detail, they could use any laptop or Breezie device to make the detail bigger. The CMSC also stated that each Breezie was set up for the individual using it, for example, the volume could be enhanced on a tablet for those with a hearing impairment and a closer image could be shown on the tablets for those with visual impairments.

The OD, CMSC and the Chair encouraged residents to contact the Council's Intake team or their local Councillor if they believed that either themselves or someone they knew could benefit from a Breezie tablet. The Chair thanked the OD and LC for their work in supporting the Borough's elderly residents.

53. Work Programme

The Chair informed Members of three changes that had been made to the Work Programme:

- Whilst the Committee had been due to receive a previously requested update on the 'Working with residents affected by Capital Works' item at this meeting, report authors had requested that this item be deferred to a later date, to allow time for the programme to 'bed in' as well as to develop new ways of engaging with residents to improve response levels. This item would now be presented in the new municipal year.
- The Committee had been due to receive an item around the Probation Services at its 12 May 2021 meeting; however, as the National Probation

Service was currently undergoing a large restructuring programme and a lot would still be unknown by 12 May, this item had been postponed to the Autumn of 2021, after the restructuring programme was complete.

- The Committee had been due to receive items on the Multi-Agency Safeguarding Hub (MASH) Annual Report and the Early Help update on the Ofsted Improvement Plan at its 12 May Committee. However, as Early Help was subject to an audit report and there would be a report on this presented to the Audit and Standards Committee on 12 July 2021, it was felt appropriate for the Committee to receive this item in the new municipal year to align matters.

Members stated that in some cases, the reasons provided for the postponements of certain reports needed further clarity than was being provided and that the Committee should not simply agree to their deferment as items may need to be challenged before further action was taken by officers. Members were also concerned about the number of changes that had been made to the Committee's Work Programme. As such, the Council's DSP suggested that when the Work Programme is presented to the Committee, a short covering report be provided going forward, in which the relevant department requesting the change provide a short paragraph about why the change was being requested. This would help with transparency and accountability, and the Committee could then also decide to agree the change or ask further questions around why the change was being requested.

The Committee also requested that the Work Programme include an update from the Enforcement team in relation to footway parking, as many of the roads within the Borough were narrow and if footway parking was not permitted, it would prevent vehicles from entering and exiting the roads safely.

The changes to the Work Programme were noted.

Continuity and recovery in schools during COVID-19

Barking & Dagenham

Interim update
March 2021

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Overview and Scrutiny
Committee

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Introduction

- This is an interim update which sets out key areas of focus for continuity in schools during COVID-19. Some key learning and legacy is also highlighted.
- During the pandemic, Barking and Dagenham schools have worked tirelessly to remain open, including for vulnerable pupils and Critical Workers' children when required.
- There is much that we do not know about the impact of COVID-19 on children and young people. Schools' efforts to maintain contact with, and provide quality learning for, pupils in Barking and Dagenham are remarkable. However, no one would argue that this is a proper substitute for being in school each day.

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Research has shown that areas of disadvantage are more likely to be adversely affected by the pandemic. Given the multiple lockdowns and ongoing disruption to face-to-face learning, the impacts of COVID-19 on young people's educational outcomes in the borough could be seen for several years to come. It is unlikely that catch-up sessions during the holidays and after school hours will replace the learning that has been missed during the past 12-months.

- Despite these challenges, close partnership working between schools, Education and other Local Authority services has brought about positive developments and learning which will last beyond the pandemic.

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Examples of key areas supporting continuity...

Tracking and brokering support for vulnerable pupils

- Since Autumn 2020, the Education Team have worked with schools to encourage vulnerable pupils back to education settings where there is concern about pupils' home settings and/or their engagement with home learning.
- The tracking and brokering of support for vulnerable pupils by schools in partnership with the Council has been recognised as a strength. Building on this model and previous learning, the Education team has organised three staff - called 'Education Inclusion Partners' – to support clusters of schools in the borough in the North, East, and West.
- The new arrangements have led to the creation of new multi-agency partnership support structures (Figure 1).

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Vulnerable Pupils' Hot Clinics

allow professionals to refer to a multi-disciplinary team of professionals from Children's Social Care, the Youth at Risk Matrix (YARM), North East London Foundation Trust (NELFT), and Youth Offending Service (YOS)

Team Around the School (TAS)

pilot model: TAS operates at three of the borough's Primary schools – Richard Alibon, Monteagle, and Thomas Arnold. TAS brings together professionals from Education, Social Care, Early Help, and Health. TAS aims to reduce exclusions and support children who have been identified as an increasing risk.

Team Around the Area (TAA)

brings professionals together from across Education, Children's Social Care, the YARM and Police to share local information about the clusters of schools.

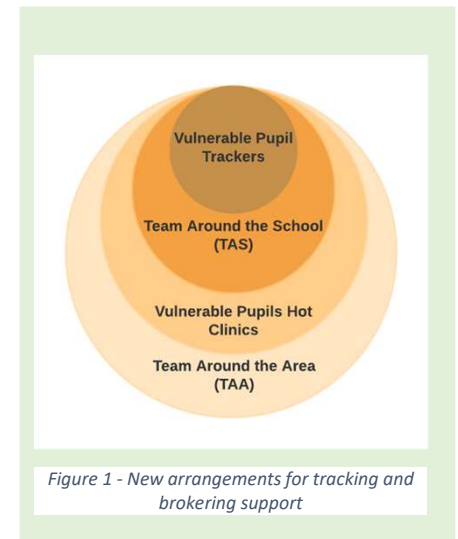


Figure 1 - New arrangements for tracking and brokering support

Mental health and wellbeing support for pupils

- Young people in the borough are facing traumatic experiences including bereavement, self-isolation, a loss of routine, uncertainty about their futures, and a breakdown of formal support mechanisms.
- Since the Summer term 2020, Children's and Adolescents Mental Health Services (CAMHS) have delivered virtual weekly 'Hot Clinics'. At these, school staff discuss pupils they are concerned about who are not already receiving CAMHS support. The Hot Clinics have been well received by schools.
- During the Summer term 2020, 58 staff in 8 schools participated in Thrive online training courses. Thrive training gives parents, carers, teaching staff, youth workers, and medical experts an integrated approach to understand children's behaviour.

Young volunteers surveyed young people from the LBBD, Havering, and Redbridge in July 2020 – during lockdown, 1 in 4 young people worried about their mental health and 1 in 3 young people worried about their physical health, family, and friendships.

Thrive London, in partnership with the Education team, has planned 'Bounce Forward', a 6-week resilience programme for parents and carers. The programme has 250 spaces and is being promoted with schools.

Early Years and Portage

- Following the wider re-opening of Early Years settings from September 2020, attendance remained high and slightly below attendance in 2019. Since January 2021, attendance has been approximately 60% of capacity. Nursery attendance has increased to approximately 90% in March 2021.

The DfE has confirmed that the Early Years Dedicated Schools Grant will be paid on expected attendance rather than actual attendance (with a minimum guarantee of 85%). However, there are concerns that the resulting 15% decrease in funding could impact upon the delivery of places.

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The Early Years team have created a webpage which brings together good practice resources to help parents and carers support their child's learning at home. The team has developed a range of online 'Bitesize' training sessions for providers through a YouTube channel.

The Portage Service have developed over 170 individual videos which model activities for children. The service introduced its own YouTube channel and Facebook page to teach parents and carers new skills to further enrich their child's development.

"During this lockdown, we had ups and downs with our child's behaviour and you gave us the right advice or cheered on his achievements. We are very grateful to have you, lockdown or not! I cannot stress highly enough how much our Portage Provider helped us, from being a friend, advisor and helper. She kept me calm, focused and she knew exactly how we were feeling".

Early Years parent

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There have been important positive developments and learning which will last beyond the pandemic. Examples include...

Remote Learning

- Even in the first six weeks of Spring 2021 during the third lockdown, much has been learned.
- Schools have refined their remote learning offer drawing on feedback from teachers, pupils, and parents. Most are offering a mix of live sessions, recorded, and posted clips, and, particularly for younger pupils, some paper-based work.
- Headteachers are already seeing the potential for developments in home learning – and providing wider opportunities for pupils who miss lessons to access materials and catch up.

The government has provided 3491 devices for schools to distribute to vulnerable pupils. However, we know that despite this many pupils still do not have adequate access. **In January 2021, headteachers estimated that around 8,000 pupils (20%) in the borough do not have sufficient access to an appropriate device and around 4,000 (10%) do not have sufficient broadband.**

Recovery of provision for pupils with SEND

- Three priorities for recovering SEND, for September 2021:
 1. *Early individual reviews*
 2. *A support strategy for second lockdown or self-isolation*
 3. *Getting therapies in place*

Weekly network meetings to support SENCOs, including the following attendees:

- EHC Team,
- Educational Psychologists,
- BDSIP, and
- Health colleagues.

During the Summer term of 2020, the Education team worked in partnership with schools to ensure that pupils with EHC plans and those with additional needs were encouraged to attend their school where individual risk assessments determined it was safe to do so. By June 8th, 2020, 82 pupils with EHC plans attended the borough's ARPs (approximately 1 in 5).

Anti-racist Education – Responding to Black Lives Matter (BLM)

- Following the BLM movement, three workstreams have been developed about race and discrimination that include schools:
 - Creative cultural education in schools
 - Listening to and incorporating young people’s voices
 - Partnership work with Barking & Dagenham School Improvement Partnership (BDSIP)

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The November 2020 CEP ‘SlowCo’ (a longer conference delivered across a number of days) held a discussion session with a panel (comprising Early years and primary and secondary school representatives) and cultural organisations about BLM.

- BDSIP have discussed with the BAMEed Teachers Network, the Black Curriculum, local Headteachers, and a Professor of Educational Leadership and Social Justice. There are proposals to facilitate school-led work, supported by LA-commissioned funds, around the following areas: leadership of cultural change, staff recruitment and progression, behaviour and inclusion, and curriculum and inclusive teaching.

In response to the BLM movement, the BAD Youth Forum held discussions about their experiences as residents and whilst at school. They shared a range of experiences and knowledge about the topics of racism, unconscious bias and racial inequality. The Forum also linked with the ‘BLM Barking and Dagenham Group’. Both groups invited one another to a session to discuss BLM at their respective organisations.

Schools Update March 2021

- Schools re-opened fully to all pupils from 8 March 2021
- All school staff are testing at home twice weekly with Lateral Flow Tests – there has been strong compliance with this requirement. All secondary pupils expected to take 3 lateral flow tests on site and move to home testing from the week commencing 15 March 2021.
- Currently, we are seeing very low numbers of staff testing positive
 - Wb 8th March = 3
 - Wb 15th March = 9
- Pupil numbers of positive cases
 - Wb 8th March = 18
 - Wb 15th March = 47
- The Holiday Activities and Food programme, funded by the government, will provide Free School Meals and activities for pupils over 12 sites during Easter, to increase in the Summer. There is currently a call for applications live on the Council's OneBoroughVoice website. Free School meals vouchers will also be available during this time.
- Elective Home Education has continued to rise with 350 active cases in 2021, rising 88% from August 2020

Examinations and national tests have been cancelled for the second year. Ofqual and the Department for Education have decided that teacher assessments with a best fit model for grading will be used instead – schools are still waiting for final guidance on this.

Schools are currently operating a mix of face-to-face teaching and remote teaching and learning for those who are self-isolating.

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Supporting older residents during the pandemic and beyond

March 2021

Barking & Dagenham

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Minute Item 52

Older People in Barking and Dagenham

Over 65s make up 13% of the whole population and 49% of those known to Adults' Care and Support

Greater growth in 60 – 69 year cohort than other cohorts, from 13.5k in 2018 to 19.5K by 2030



Female life expectancy at age 65 is 20.5 yrs (national average 21.2 yrs)

Male life expectancy at age 65 is 17.4 (national average 19.0)

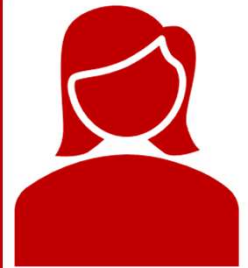


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24% increase in unplanned hospital admissions of Barking and Dagenham residents expected by 2030 due to population change and health demographics – getting hospital discharge and post discharge support pathway right is paramount



1 in 4 people between 64 -75 years and half of over 75's live alone in Barking and Dagenham. Additionally, 1 in 3 carers above 65 years reported social isolation.



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Hospital discharge during the pandemic

- No discharges into care homes from hospital without a COVID test result.
- BHR designated settings (nursing homes) and one commissioned homecare agency for positive cases – has reduced transmission and worked well
- Local authority brokered placements (rather than the CCG) has improved choice, control and cost
- Homecare agencies and PAs have continued to provide good quality care – high levels of satisfaction from spot phone calls
- British Red Cross provide a 'home, settle and support' service for discharged residents – shopping and medication in particular

Improving our hospital discharge pathway

- Big plans for 2021!
- Taking learning from our experience during the Pandemic and looking at the way that we use our staff in the hospital and the community
- Improving our resident's experience of hospital discharge and the information that's given out – British Red Cross are going to help us to think about what we can improve and ensure we are listening to the patient's voice
- Learning from pilots like Home First and Discharge to Assess to become 'business as usual'
- Care City to support us to look at innovative discharge models in the UK and further afield that we could replicate in B&D

Support to providers during the pandemic

- 7 day per week support from Commissioning, Provider Quality and Public Health Teams
- In excess of £2.5million funding for infection control, workforce and testing support
- A 10% uplift from the local authority to further support providers between April and August 2020
- PPE distribution centres for PAs and Carers as well as central government portal for providers
- Support from the IPC team in NELFT
- Coordinated outbreak management support
- Regular testing
- Huge push around vaccine take up – top third in London for vaccinating Care and Support care home staff (from last place three months ago!)

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Reducing isolation

- Care homes implemented more tech, visiting pods and virtual events to reduce isolation. All of the homes are successfully implementing LFD testing to facilitate family visiting
- Breezie continuing to be used in the community – excellent feedback
- Exciting new care technology service to be tendered in the next few months

Reconnections

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90 residents supported and 48 volunteers

Support has included weekly phone calls, online shopping, use of Spotify and streaming platforms, wellbeing walks, step challenges, dog walks, virtual coffee mornings and online cook-alongs.

Funding until January 2023

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Community support

- Barking & Dagenham Citizens Alliance Network (BDCAN) – social support coordinated by an alliance of voluntary and faith organisations
- Specialist Support Hub – anyone who received adult social care services or who has been (or may in future be) identified as extremely vulnerable by the NHS and ‘shielding’
- Community Solutions – front door support on issues ranging from homelessness, debt advice, benefits support, job support and community food clubs
- Central Food Hub – operated through Community Solutions, from London East, centre of procurement and delivery of food to vulnerable residents through BDCAN, ILA, DABD and food clubs.
- 20,000 calls made by the Intake team to vulnerable/shielding residents
- Virtual community based exercise classes through the Young at Heart programme – 508 attendances and 4,068 check-in calls made
- Preparing to open our Leisure Centres back up again
- Ongoing work to reimagine social care and use our Community Hubs to support this cohort of residents

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