



PEOPLE OVERVIEW & SCRUTINY COMMITTEE

MINUTES of the meeting held on Thursday, 18 September 2025 commencing at 10.02 am and finishing at 1.01 pm.

Present:

Voting Members:

Councillor Toyah Overton – Acting Chair
Councillor James Barlow
Councillor Will Boucher-Giles
Councillor Judith Edwards
Councillor Lee Evans
Councillor Rebekah Fletcher
Councillor Georgina Heritage
Councillor Paul Austin Sargent

Officers:

Karen Fuller, Director of Adult Social Services
Victoria Baran, Deputy Director of Adult Social Care,
Ian Bottomley, Deputy Director of Integrated
Commissioning Health, Education and Social Care
Dr Jayne Chidgey-Clark, Independent Chair of
Oxfordshire Safeguarding Adults Board
Lorraine Henry, Head of Safeguarding MH DOLS
Cheryl Huntbach, Local Area Coordinator Steven Turner,
Strategic Partnerships Manager – Adult Social Services
Ben Piper, Democratic Services Officer

The Council considered the matters, reports and recommendations contained or referred to in the agenda for the meeting and decided as set out below. Except insofar as otherwise specified, the reasons for the decisions are contained in the agenda and reports, copies of which are attached to the signed Minutes.

20/25 APOLOGIES FOR ABSENCE AND TEMPORARY APPOINTMENTS

(Agenda No. 1)

Apologies were received from Cllr Snowdon (substitute: Cllr Sargent) and Cllr Edosomwan.

In the absence of Cllr Snowdon, Cllr Overton, Deputy Chair, took the Chair.

21/25 DECLARATION OF INTERESTS

(Agenda No. 2)

There were none.

22/25 MINUTES

(Agenda No. 3)

The minutes of the meeting held on 26 June 2025 were **APPROVED** as a true and accurate record.

23/25 PETITIONS AND PUBLIC ADDRESS

(Agenda No. 4)

There were none.

24/25 OXFORDSHIRE ADULTS SAFEGUARDING BOARD ANNUAL REPORT

(Agenda No. 5)

Dr Jayne Chidgey-Clark, Independent Chair of Oxfordshire Safeguarding Adults Board, Karen Fuller, Director of Adult Social Services, Victoria Baran, Deputy Director of Adult Social Care, Steven Turner, Strategic Partnerships Manager – Adult Social Services and Lorraine Henry, Head of Safeguarding MH DOLS, were invited to present the Oxfordshire Adults Safeguarding Board (OSAB) Annual Report and answer the Committee's questions.

The Director of Adult Social Services introduced the annual safeguarding adults report by emphasising its significance as a system-wide document, highlighting the collaborative work across the health and care system in Oxfordshire regarding safeguarding, and noting that while the report was being presented to the committee, it reflected the efforts of multiple partners. She stressed the importance of oversight for safeguarding the county's most vulnerable adults

The Independent Chair detailed the board's four strategic aims: improving frontline practice across all sectors, enhancing preventative work to stop abuse before it occurs, assuring the quality of safeguarding through monitoring referrals and service improvements, and learning from both safeguarding adult reviews and audits to inform future practice, including sharing good practice across the county. She also described the board's multi-agency composition, the alignment of subgroup work plans to strategic objectives, and the importance of robust governance and partnership working

The Committee raised the following questions and comments about the OSAB Annual Report:

- Members sought clarification on the term "desired outcomes" in the safeguarding report, specifically questioning whether outcomes were assessed based on what individuals themselves requested or desired. The Deputy Director explained that safeguarding was tailored to the individual's wishes, focusing on what outcomes they want to achieve, rather than imposing solutions. Early discussions were held with the person, or their deputy if needed, to guide the team's work by these goals, often prioritising risk reduction while respecting personal choices. Officers added that desired outcomes were tracked through case file audits and ongoing collaboration with partners to ensure feedback genuinely reflected individuals' experiences.

- The definition of self-neglect within the safeguarding context, specifically asking whether it referred to individuals whose care needs were unmet due to physical incapacity or to those who, despite having the physical ability, were unwilling or unable to meet their own care needs, possibly due to mental health issues. It was clarified that self-neglect can result from multiple causes, but in safeguarding contexts, it generally refers to individuals who consistently decline assistance or intervention, sometimes without being aware of their own deterioration. If an individual was open to receiving care but had not been referred, the usual assessment process applied rather than initiating safeguarding procedures. Safeguarding measures were implemented when individuals continually refuse support, involving a multi-agency strategy to engage them and establish ongoing relationships aimed at meeting their needs.
- The causes of high staff turnover in adult social care, whether the reasons were consistent with national trends or if there were specific factors unique to Oxfordshire, and how these were identified and addressed. The Director of Adult Social Services reported that staff turnover in Oxfordshire's adult social care was consistent with the national average. Exit interviews indicated that many departures were due to retirement or personal circumstances, rather than job dissatisfaction. The challenges associated with safeguarding work were acknowledged, and staff wellbeing initiatives and supervision measures were described. Oxfordshire also supported workforce development through apprenticeships and a Social Care Academy, aiming to encourage career progression and belonging.
- How lessons were learned across partnership work and the consistency of best practice, particularly in relation to supervision and support for frontline staff among different agencies. The Independent Chair, and Officers, explained that the local authority's supervision model, which included both welfare and casework support, was shared with partner organisations during multi-agency workshops. These sessions enabled the exchange of approaches and highlighted the strengths of the local authority's model. The sharing of best practice was actively encouraged, and external peer support was sought through regional and national safeguarding networks.

Officers described how the Multi-Agency Risk Management (MARM) process united professionals to support at-risk individuals before statutory intervention was needed. By sharing information and resources, they intervened earlier and more effectively, leading to better outcomes and coordinated support.

- How Oxfordshire was adopting a Pan-London style multi-agency safeguarding policy and specifically how it would be adapted for the county's rural areas. The Director of Adult Social Services and the Head of Safeguarding responded that, having seen the benefits of the Pan-London approach in other settings, they were working to amend its processes and principles to fit Oxfordshire's context. They explained that the adaptation involved considering the county's demographic and geographic differences, with particular attention to the challenges faced by rural communities, such as isolation and limited access to services.

- The impact of the "right care, right person" policy on police willingness to conduct welfare checks was discussed. The Independent Chair noted that, although there had been national concerns and some coroners' reports referencing changes in police practice and potential adverse outcomes, in Oxfordshire police responses to threats to life and limb were reported as consistent. The situation continued to be monitored, and officers remained attentive to emerging issues; however, at the time of the meeting, no specific local concerns had been identified.

Officers also explained that, when a referral did not meet the safeguarding threshold, feedback was provided to the referrer identifying the specific reasons for not proceeding. Patterns and themes observed in referrals were communicated to providers, occasionally through the board, to inform future referrals. This method aligned with regional practices, and information regarding safeguarding criteria was shared with providers and professionals to enhance understanding.

- How did the council supported individuals, particularly young people approaching adulthood, who became involved in dangerous situations such as county lines activity. The Director of Adult Social Services described collaboration with the youth justice team, police and other partners to support young people affected by county lines as they move into adult services. Multi-agency meetings were held to determine referrals, including to the national referral mechanism. While statutory adult care may not always be provided, wraparound support was ensured through partner organisations and national networks. County lines issues affected both young and older adults, including through exploitation like "cuckooing". The council's approach relied on collaboration between adult and children's services, community safety partnerships and the police.

The Committee **AGREED** to the following actions:

- The Independent Chair, and other Adult Social Services Officers, would report back to the Committee when an update on the Oxfordshire Safeguarding Adults Board Risk Register was ready.
- The Director of Adult Social Services would provide an update on the Pan Oxfordshire multi-agency policy and procedures approach, with consideration for how it is adapted for rural areas

The Committee paused at this stage at 11:27 and resumed at 11:34

25/25 AGE WELL UPDATE ON SUPPORTING OLDER PEOPLE IN OXFORDSHIRE (Agenda No. 6)

Karen Fuller, Director of Adult Social Services, Ian Bottomley, Deputy Director of Integrated Commissioning Health, Education and Social Care (HESC), and Cheryl Huntbach, Local Area Coordinator, were invited to present the Age Well Update on Supporting Older People in Oxfordshire and answer the Committee's questions.

The Deputy Director introduced Age Well by noting Oxfordshire's growing population of 137,000 older people, with most not receiving formal services. He stressed the council's aim to help seniors live independently through preventative measures like the Oxfordshire Way. By addressing loneliness, isolation, and inactivity, and focusing on community services and system planning, the council had reduced care home admissions and enabled more older people to stay at home.

The Local Area Coordinator outlined the adoption of local area coordination in Oxfordshire, one of eleven regions using the Australian model. She described the coordinators' strengths-based, person-centred approach, their ongoing support without strict referral criteria, and their role as community connectors. The Local Area Coordinator illustrated its benefits with an example of an older resident who became more active locally after coordinator support, showing how early intervention can reduce reliance on formal care.

The Committee raised the following questions and comments related to the Age Well update:

- How the original areas with a local area coordinator were selected for expansion and why only two further areas were added, despite the initial success. The Deputy Director of Integrated Commissioning HESC and the Local Area Coordinator stated that new areas were selected based on public health data identifying locations with deprivation and need within Oxfordshire. The process also considered local interest and the capacity to participate, with recruitment panels that included residents. The decision to expand into two additional areas was influenced by programme costs and the requirement for financial viability. Local area coordination may continue to expand where it was assessed as effective, but resource constraints and existing local interventions meant a countywide rollout was not pursued at that time.
- What the definition of rurality was and how it was considered in the deployment of local area coordinators, how the impact of these coordinators was measured, and what the potential was for expanding the model to other highly deprived areas in Oxfordshire. The discussion recognised that some areas lack community resources and could benefit from local area coordination. The Deputy Director of Integrated Commissioning HESC noted rurality was considered, but area selection focused mainly on need and deprivation, with no single definition for rurality. Impact was measured using both quantitative data and qualitative stories, though attributing outcomes to coordinators remains complex due to overlapping services. It was emphasised that new coordinators should complement, not duplicate, existing interventions such as Age UK and Brighter Futures. Any expansion of the model will depend on resources, proven impact, and strong partner collaboration to maximise effectiveness and avoid duplication.
- The Committee discussed the variations in loneliness among individuals living alone in rural and urban areas, as well as the ways in which strategies like social prescribing respond to these issues. The Deputy Director of Integrated Commissioning HESC noted that loneliness affected both rural and urban areas, sometimes more so in cities despite closer proximity to others. The strategy to address loneliness focuses on strengths-based assessments and connecting

people with local community resources, such as voluntary groups and Age UK, rather than relying on formal care. Social prescribing and local area coordination were key elements. The approach recognised that different communities have unique needs, so effective interventions may vary by area. Ongoing work aimed to enhance support in both rural and urban settings, tailoring solutions to local circumstances and prioritising community-based connections.

- Members highlighted concerns about the distribution of community capacity grants, specifically noting an apparent over-concentration of funding in the Oxford City area despite its lower proportion of older residents compared to more rural districts. The Director of Adult Social Services and the Deputy Director of Integrated Commissioning HESC noted that more established organisations in Oxford City, familiar with funding applications, tend to secure more grants, some of which extend beyond older adults. To support smaller or rural groups, initiatives such as drop-in sessions and a grants helpline were introduced. The discussion emphasised the need for cross-departmental collaboration, especially regarding transport, to enhance support across Oxfordshire. Efforts continued to improve coordination between council departments and external partners, as voluntary organisations provide much of the community transport.
- How successful community capacity grant projects could be scaled up and their best practices shared across Oxfordshire. The Deputy Director of Integrated Commissioning HESC emphasised that scaling up successful projects is handled carefully to preserve local creativity and context. What worked in one area may not suit another due to differing community needs, so the council shared best practices while supporting tailored approaches. Mechanisms existed to disseminate learning and guide organisations whose initial grant bids were unsuccessful towards other opportunities. The local area coordination model was cited as an example of effective initiatives inspiring similar methods elsewhere. Overall, the council prioritises organic growth and adaptation, encouraging the spread of proven strategies without imposing uniform solutions, and ensuring outcomes are shared and lessons learned across Oxfordshire.

The Committee **AGREED** to make the following observation:

- That Manchester City Council's provision of council tax relief for residents in end-of-life care represents a compassionate and practical approach to supporting vulnerable individuals. Members noted the potential relevance of such a scheme in the Oxfordshire context, particularly for residents experiencing deprivation.

26/25 COMMITTEE FORWARD WORK PLAN (Agenda No. 7)

The Committee **AGREED** the proposed work programme.

27/25 COMMITTEE ACTION AND RECOMMENDATION TRACKER (Agenda No. 8)

The Committee **NOTED** the action and recommendation tracker.

28/25 RESPONSES TO SCRUTINY RECOMMENDATIONS

(Agenda No. 9)

The Committee **NOTED** the Cabinet responses to the Co-production in Adult Social Services recommendations.

..... in the Chair

Date of signing

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