

# DRAFT MINUTES OF THE SAFEGUARDING ADULTS BOARD

Thursday 21<sup>st</sup> July 2022 at 13:00-14:30

Virtual Meeting via MS Teams

## MEMBERSHIP & ATTENDANCE:

AGENCY	NAME	Initials	ATTENDANCE
Safeguarding Adults Board	Dr Adi Cooper, Chair	AC	✓
	Rebecca Waggott, Governance & Improvement	RW	✓
	Ashraf Sahebodin, Governance & Improvement (Minutes)	AS	✓
Volunteer Lay Member	Lauritz Hansen-Bay	LHB	✓
Adult Services	Beverley Tarka, Director of Adult Services	BT	✓
	Vicky Murphy, Interim AD Adult Services	JE	Apologies
	Chris Atherton, Head of Assurance and Principal Social Worker	CA	✓
	Marianne Ecker, Workforce Development Manager	ME	✓
	Peter Foreman, Head of Assessment and Safeguarding	PF	✓
Commissioning	Farzad Fazilat, Head of Brokerage	FF	✓
	Gill Taylor, Strategic Lead, Assistant Director Communities and Housing Support (Interim)	GT	✓
	Paula Rioja, Senior Performance Officer	PR	Apologies
Children's Services	Beverley Hendricks, Assistant Director Children's Safeguarding and Social Care	BH	X
Public Health/ Community Safety	Dr Will Maimaris Interim Director of Public Health	WM	X
	Manju Lukhman VAWG Strategic Lead and Commissioner	ML	Apologies
	Katy Harker (P&L Subgroup Chair)	KH	✓
Legal Services	Stephen Lawrence-Orumwense, Assistant Head of Legal	SLO	X
Cabinet Member for Adults and Health	Councillor Lucia Das Neves, Cabinet Member for Adults and Health	Clr LDN	X
North Central London ICB	Victor Nene, Haringey Safeguarding Adults Designated Professional	VN	✓
	Deirdre Malone, Deputy Director of Quality	DM	✓
	Rosie Peregrine-Jones	RPJ	✓
	Dr Lionel Sherman, Adult Safeguarding Lead	LS	✓
Whittington Health	Deborah Clatworthy, Deputy Director of Nursing	DC	Apologies
	Theresa Renwick, Safeguarding Adults Lead	TR	✓

	Varda Lassman	VL	✓
NMUH	Sarah Hayes, Chief Nurse	SH	Apologies
	Celia Jefferies, AD of Safeguarding	CJ	✓
	Richard Wandeu	RW	Apologies
BEH-MHT	Amanda Pithouse, Executive Director of Nursing, Quality and Governance	AP	Apologies
	Sian Carter-Jones, Head of Safeguarding	SCJ	✓
Haringey Police	Sebastian Adjei-Addoh, Detective Superintendent	SAA	Apologies
	Pyrouz Alinia – Deputy Inspector	PA	✓
	Stephen O'Brian	SOB	✓
Housing	Denise Gandy, Director of Housing Demand	DG	X
Housing Provider	Phil Johnson, Housing Services Manager, Hornsey Housing Trust	PJ	✓
London Fire Brigade	Keith Wilson, Borough Commander	IT	X
	Peter Shaw, Tottenham Station Manager	PS	X
Healthwatch	Sharon Grant, Chair	SG	Apologies
Bridge Renewal Trust	Geoffrey Ocen, CEO	GO	✓
Department for Work and Pensions	Phyllis Fealy, Haringey Relationship Manager	PF	Apologies
	Archibald Okolie, Senior Safeguarding Lead	AS	✓
Probation	Shirley Kennerson, Assistant Chief Officer	SK	Apologies
	Russell Symons, Deputy Head of Service	RSy	✓

#### IN ATTENDANCE:

Agency	Name	Initials	Attendance
Haringey	Louise Daniels – Senior Performance Officer	LD	(Part) ✓
	Ilona Zeqiri	IZ	✓

ITEM	SUBJECT/DECISION
	<p><b>WELCOME AND INTRODUCTIONS/APOLOGIES:</b> AC welcomed everyone to the virtual meeting. Apologies for absence were received from those listed above and accepted by the meeting.</p>
1.	<p><b>MINUTES OF LAST MEETING AND MATTERS ARISING</b> The minutes of the May meeting were reviewed and agreed as an accurate reflection of the meeting.</p>
	<p><b>BRIEFINGS AND PRESENTATIONS</b></p>
2.	<p><b>SAFEGUARDING PEOPLE FACING HOMELESSNESS AND ROUGH SLEEPING ANNUAL REPORT 2021/22</b></p> <ul style="list-style-type: none"> <li>GT presented the safeguarding people facing homelessness and rough sleeping annual report.</li> </ul>

- The aim of the report is to provide assurance to the SAB that measures are in place to safeguard vulnerable adults at risk who are affected by homelessness and rough sleeping.
- The report provides an overview of homelessness in the borough affecting single adults; highlights the strategic context, local profile of homelessness and key initiatives and services that contribute to the prevention and reduction of harm affecting vulnerable adults.
- Last year has been a period of recovery from the COVID-19 pandemic response. The Covid-19 homelessness response came to an end in March 2022. No-one returned to rough sleeping when the hotels closed, sustained the 75% reduction of 'single night figure' achieved during 'Everybody In'.
- In total more than 1200 people were supported to move into other forms of housing, smaller numbers returned to family and friends, other boroughs and countries.
- There is now an ongoing commitment to provide immigration advice and move on support for people affected by rough sleeping.
- 268 individual people were seen rough sleeping in the borough by an outreach team in 2021/22, this represents a 34% decrease when compared to 2020/21 when 405 different people were seen.
- As the deaths of homeless people were not being fully investigated and explored, and the opportunities for learning were being missed, implemented the Homelessness Fatality Review procedure in 2019 to prevent the premature deaths of homeless people, which has also been adopted across the country.
- Secured funding to deliver rough sleeping services over the next three years.
- Opened a new supported housing service for people with experience of rough sleeping. Also, a new 14 bed woman only supported housing service.
- Recommissioned the adult supported housing pathways, bringing in new and specialist organisations to support residents.
- Haringey has the highest number of rent free bed spaces in London that are available for vulnerable people affected by rough sleeping and uncertain immigration status.
- Concluded the Making Every Adult Matter project, achieving significant reductions in unplanned hospital admissions and arrests for those involved.
- GT shared the priorities for 2022-23, including building on learning from fatality reviews to develop bespoke social care interventions for people with rough sleeping histories, (see presentation).
- AC and BT thanked GT and other colleagues involved in the progress and extensive achievement recognised by London Councils.
- VN queried how does the Homelessness Service link in with A&E (especially at North Mid) where they receive a significant number of homeless people. GT highlighted that the 'Out of Hospital Care Service' (set up in 2021) which funds a Hospital Move-On Coordinator and five short term, rapid access properties in one of the sheltered housing schemes. The aim of the service is to facilitate discharge and successful housing outcomes for people who face rough sleeping after they leave hospital. The coordinator provides intensive support, short term practical interventions and housing information to patients, as well as advice, guidance and collaborative case management support to NHS colleagues to navigate accommodation and community support options.

**ACTION:**

1. **Add Safeguarding People Facing Homelessness and Rough Sleeping Annual Report 2022/23 to July 2023 HSAB forward plan.**

3.

### MULTI-AGENCY SOLUTIONS PANEL ANNUAL REPORT

- The Multi-Agency Solutions Panel (MASP) was setup in May 2021 following a review of the Haringey High Risk Panel (HHRP). The review highlighted several key areas for improvement. which included increasing the numbers of referrals and referrers, more consistent and senior panel membership, broadening the range of types of cases being presented and increasing frequency of panel meetings.
- The aim of the Panel was to identify solutions which couldn't have been reached through other routes. The MASP's role is to support an open discussion with the referrer that considered the goals, strengths, risks and vulnerabilities affecting a person, and use the collective insight and expertise of those at the panel to identify actions and solutions, remove or reduce barriers and inequalities and seek opportunities to improve individual and organisational practice.
- Additionally, the MASP process looked to better engage the wider system in conversation on cases of complexity and risk to better support the connectivity of the system as highlighted in recent Safeguarding Adult Reviews in Haringey.
- The annual report looks at the impact of the MASP over the last 12 months to determine how effective the new model has been and identify areas for further improvement for the next 12 months.
- Significant improvements in cases: an increase (127%) of numbers brought to the MASP in comparison to the HHRP. Also, an ( 200%) increase in types of partners who are referring in coupled with an 83% increase in the number of partners who make up the panel itself.
- Significant growing problem of those living in the community who are suffering from mental ill health and have a lack of support or connection after being discharged back to their GP. If we are to ensure people are able to live meaningful lives within community settings, we must ensure that the offer to those residents is meaningful and holistic and we must ensure a systemic approach to support to these individuals.
- Some of the cases presented to the MASP were identified under 4 or 5 different categories given the level of complexity that these individuals were facing.
- BT highlighted the need to support those people that don't meet the threshold for services (mental health assessment, social care etc.). Need to have further discussions with key senior partner agencies on how we can support these cohort of people through preventative early intervention to prevent the crisis from happening. AC added that the Bristol Creative Solutions Panel is attended by senior officers across partner agencies and illustrates an effective model in terms of authorisations and seniority.

#### **ACTIONS:**

- 2. All partner agencies to share the MASP information across their networks.**
- 3. AC to write to the Mental Health Trust to ask for commitment of operational representation at the MASP.**
- 4. AC, BT and CA to discuss further the effectiveness of the MASP and its membership to enable to support those people that don't meet the threshold for services**
- 5. Add the MASP Annual Report 2022/23 to July 2023 HSAB forward plan.**

STANDING ITEMS	
4.	<p><b>COVID-19 SAFEGUARDING CONCERNS</b></p> <p><b>a) Safeguarding Issues and Risks in Adult Services</b></p> <ul style="list-style-type: none"> <li>• BT noted at the previous HSAB, concerns were raised regarding significant challenges on all areas of service delivery which impacted on safeguarding activity.</li> <li>• Social Services across the country are currently going through Covid recovery phase. The context and national picture is challenging and this has been highlighted by ADASS.</li> <li>• The Assistant Director in Adults is currently leading an audit in looking at service capacity and how we are working with practitioners and social care teams. Also, scrutinising current caseloads and bringing in additional capacity in terms of senior social workers.</li> <li>• The new system being implemented has already seen a significant reduction in waiting list.</li> </ul> <p><b>b) Safeguarding Issues and Risks in across other services</b></p> <p><u>North Middlesex University Hospital</u></p> <ul style="list-style-type: none"> <li>• CJ noted that NMUH has seen an increase in the number of people arriving with Covid and this is putting extreme pressure on services. Additional pressures due to lots of staff going off sick.</li> <li>• The Trust is currently on 'Critical', highest level of alert since Tuesday due to the heatwave and now due to the continued increase of patients arriving with Covid.</li> <li>• Current backlog of Section 42 enquiries due to capacity issues.</li> </ul> <p><u>Whittington</u></p> <ul style="list-style-type: none"> <li>• TR noted at the Whittington, the increased number of safeguarding referrals and the severity of abuse being reported.</li> <li>• VL highlighted that the Whittington is under a lot of pressure and has been on 'Critical' for a week.</li> <li>• Community Services are incredibly challenged with lots more referrals being signposted into the community from the Hospitals.</li> <li>• Continuing vaccinating people in the community and care homes. However, there have been issues with family members refusing the vaccination for their loved ones, therefore safeguarding referrals have been raised by the services.</li> </ul> <p><b>ACTIONS:</b></p> <p><b>6. BT/VM to present findings/outcomes (data, type of assessments, backlog etc) of the audit at the next HSAB meeting.</b></p>
5.	<p><b>HARINGEY SAFEGUARDING PERFORMANCE DATA Q1</b></p> <p>No Performance Team member available to present.</p> <ul style="list-style-type: none"> <li>• 17% increase of s42 enquiries from April 22 to May 22</li> <li>• 17% decrease is the numbers of concerns raised from April 22 to May 22.</li> <li>• 58% of the alleged victims were identified as women and 42% men.</li> <li>• Safeguarding concerns referred by the NHS remain to be the greatest proportion of source of referral at 40%. There has been a 35% decrease in May for concerns raised by Police.</li> <li>• Neglect abuses accounts for 26% of all safeguarding abuses.</li> <li>• The number of physical abuses declined by 13% when compared to</li> </ul>

- previous month although it is 10% higher than the same period last year.
- In May 2022, 97% of people had their risk removed or reduced at the end of safeguarding case. This is above the 95% target set.
  - There has been a 5% increase in the proportion of people asked about their desired outcome in May 2022 (80%). Need to include reasons why (in this period) 20% of people were not asked of their desired outcomes.
  - In May 2022, 87% individuals had their desired outcomes met or partly met.
  - A deep dive was carried out on financial abuse. The audit found that the 'victims own home' accounted for the majority of section 42's (77%), followed by supported living and the perpetrators own home.
  - A further deep-dive was carried out regarding the African-Caribbean ethnic group with the following findings:
    - Two categories of abuse were noticeably from Section 42s investigations: neglect (31%) and emotional and psychological (29%). 17% were related to financial abuses.
    - 'Victim's own home' accounts for the majority of section 42s (77%) however, followed by care home (13%).
    - 10 out of 32 Section 42 cases were looked into.
      - 2 miss medications, one by care provider and another by a family member
      - 1 pressure sore by district nurse
      - 4 neglect cases, 3 by family member and one by district nurse
      - 3 financial abuses by family member
  - TR highlighted that the highest age category for abuse victims recorded is the 18-64 category. The HSAB to consider further data analysis for the working age adult.

**ACTIONS:**

- 7. PF to explore the Think Family approach with recommendations and proposals (more broadly with adult relatives, carers, or adults who are victims and or perpetrators) and bring report back at a future HSAB meeting.**
- 8. PR to carry out a deep dive in the 18-64 category. The Prevention and learning subgroup to review and discuss at its subgroup meeting and report back to the HSAB.**
- 9. The Prevention and Learning subgroup to further analyse the African Caribbean deep dive and develop a response to the intelligence and data in terms of preventative work.**

6.

**HSAB MANAGEMENT REPORT**

The HSAB agreed to the following recommendations in the report:

- Partner agencies to share information with the HSAB on any resources/training/ planned for Safeguarding Adults Week so that these can also be promoted on the Haringey SAB webpage as part of national Safeguarding Adults Week.
- the LPS Local Implementation Network (LIN) to reconvene, TR and Amit Malik (Haringey Dols Manager) to lead and chair.
- agreed the HSAB 2022/23 priorities.
- agreed partner contributions towards the HSAB Budget for 2022/23

**ACTIONS:**

- 10. Partner agencies to provide contact details to the Local Authority so the HSAB can invoice from HSAB contributions.**
- 11. HSAB October meeting date to be rearranged**

7.	<p><b>JOINT PROVIDERS MONITORING REPORT</b></p> <p><i>Update exempt from publishing</i></p>
<b>BUSINESS ITEMS</b>	
8.	<p><b>MANAGING PROVIDER FAILURE AND OTHER SERVICE INTERRUPTIONS PROCEDURE</b></p> <p>The HSAB agreed and signed off the revised procedure and thanked those involved.</p>
9.	<p><b>REVIEW OF THE SAR SUBGROUP EFFECTIVENESS 2021/22</b></p> <ul style="list-style-type: none"> <li>• The aim of the report is to assure the Board that the SAR Subgroup and Chair is delivering its objectives and priorities as outlined in its terms of reference and to demonstrate that Safeguarding Adults Board (SAB) partners have applied the learning from SARs to practice.</li> <li>• The HSAB agreed to the following recommendations: <ul style="list-style-type: none"> <li>○ That SAB partners are reminded on an annual basis of the criteria for a SAR to be undertaken to maintain awareness of the SAR referral process.</li> <li>○ That the SAB considers establishing action planning groups led by a senior SAB representative to implement the recommendations of SARs.</li> <li>○ That the SAR Subgroup continues to produce 7-minute briefings and the SAB encourages partners to share SAR learning information widely and to consider incorporating it into their own learning events and training.</li> <li>○ That the SAB considers holding an annual SAR learning event/campaign to reinforce historical and current SAR learning and requests SAB partners to present feedback on the progress and impact of SAR recommendations at the event.</li> </ul> </li> </ul> <p><b>ACTION:</b>  <b>12. SAR Subgroup to consider cross cutting NCL themes and learning from across the region at the annual learning events or other opportunities as they are presented.</b></p>
9.	<p><b>HSAB ANNUAL REPORT 2021/22</b></p> <p>The HSAB agree to the draft Annual Report subject to final amendments and updates following comments and feedback from previous Adults Scrutiny Board.</p> <p><b>ACTION:</b>  <b>13. AS to finalise the HSAB Annual Report, circulate and publish.</b></p>
10.	<p><b>AOB</b></p> <p>CJ leaving NMUH next week, will be handing over to an interim before permanent recruitment in 3 months. AC thanked CJ for her contribution to the HSAB on behalf of NMUH.</p>