

# MINUTES OF THE SAFEGUARDING ADULTS BOARD Monday 18<sup>th</sup> July 2016 Room 3&4, 9<sup>th</sup> Floor, River Park House, 225 High Road Wood Green, N22 8HQ

## **MEMBERSHIP & ATTENDANCE:**

AGENCY	NAME	Initials	ATTENDANCE			
Safeguarding Adults	Dr Adi Cooper, (Chair) (AC)	AC	✓			
Board	Patricia Durr, Business Manager (PD)		✓			
Volunteer Lay Member	Volunteer Lay Member Lauritz Hansen-Bay (LH)					
Local Authority	Local Authority					
Chief Executive Service	Zina Etheridge, Deputy CEO (ZE)	ZE	-			
Adult Services	Beverley Tarka, Director of Adult Services (BT)	BT	✓			
	Jeni Plummer, Operational Lead Manager (JP)	JP	✓			
	Margaret Gallagher, Performance Manager (MG)	MG	✓			
	Paula Rioja, Performance Officer (PR)	PR	✓			
	Helen Constantine, Strategic Lead - Joint Governance & Improvement Service (HC)	HC	<b>√</b>			
	Marianne Ecker, Lead OD Consultant (ME)	ME	✓			
Commissioning	Charlotte Pomery, Commissioning (CP)	СР	<b>√</b>			
Children's & Young People's Services	Neelam Bhardwaja , AD Safeguarding & Social Care (NB)	NB	-			
Community Safety			<b>√</b>			
Legal Services Stephen Lawrence-Orumwense, Assistant Head of Legal (SLO)		SL-O	✓			
Housing	Sharon Morgan, Homes for Haringey Deputy Director of Housing Operations (SM)	SM	<b>✓</b>			
Lead Member for Adult Safeguarding	Cllr Jason Arthur	JA	-			
Health Services						
Haringey Clinical Commissioning Group	Karen Baggaley, AD Safeguarding & Designated Nurse for CP (KB)	KB	<b>✓</b>			
	Hazel Ashworth, Safeguarding Adults Lead (HA)	НА	✓			
Whittington Health	Theresa Renwick, Safeguarding Adults Lead (TR)	TR	✓			
	Dr Doug Charlton, Deputy Director of Nursing (DC)	DC	-			
NMUH	Eve McGrath, Safeguarding Adult Lead (EMc)	EMc	✓			
	Noeleen Behon, Director of Nursing (NB)	NB	-			
	Colette Mannian, Deputy Director of Nursing (CM)	CM	Apologies			
BEH-MHT	Mary Sexton, Executive Director of Nursing Quality & Governance, BEH-MHS (MS)	MS	-			
	Joy Maguire, Safeguarding Adults Lead (JM)	JM	✓			
	Ruth Vines, Head of Safeguarding (RV)	RV	-			

Police					
	Paul Trevers, DCI (PT)	PT	Apologies		
	Des Fahy, Detective Superintendent, MPS (DF)	DF	✓		
Probation	Andrew Blight, Assistant Chief Officer (AB)	AB	-		
	Douglas Charlton, ACO for Probation Community Rehabilitation Company (DC)	DC2	-		
Care Quality Commission	Martin Haines, Inspection Manager (MH)	МН	<b>✓</b>		
London Fire Brigade	Craig Carter, Haringey Borough Commander (CC)	CC	Apologies		
	Pamela Oparaocha, Station Manager, Hornsey	PO	✓		
London Ambulance Service	Sean Brinicombe, Ambulance Operations Manager (SB)	SB	Apologies		
HAVCO	Paul Leslie, Chief Executive (PL)	PL	✓		
Healthwatch	Sharon Grant, Chair (SG)	SG	✓		
Bridge Renewal Trust	Geoffrey Ocen, CEO (GO)	GO	Apologies		
	Russel King (in place of GO)	RK	✓		

## IN ATTENDANCE:

Agency	NAME		
Local Authority Adult	Ann Powdrell, Business Support, Adults	AP	
Services	Safeguarding & DoLS Team (AP) - Minute taker		✓
Haringey CCG	Angela O'Shea, Quality Assurance Nurse (AO)	AO'S	✓
Police	Stewart Hill, Det SUPT (SH)	SH	✓

MINUTE NO	SUBJECT/DECISION	ACTION BY
1.	WELCOME AND INTRODUCTIONS: By Dr Adi Cooper (Chair)	
2.	APOLOGIES Apologies for absence were received from those listed above and accepted by the meeting.	
3.	URGENT BUSINESS	
	There was none.	
4.	MINUTES OF LAST MEETING 25 <sup>th</sup> April 2016 were reviewed and agreed with the following amendment:	
	MET ISA There is no further update on this as it is still awaiting agreement and publication by the Met Police.	
	SAB Information Sharing Protocol  HC reminded members that the updated Protocol had been presented and agreed at the last Board meeting. As highlighted at the April Board there is	
	work underway within the LA to look across the range of information sharing agreements for compliance and consistency. The Protocol will be considered	HC

by both the Information Governance Board and the Statutory officer Group as part of this work. HC has received feedback from CCG and asked for any further comments to be sent to her asap. CK advised that the Crime and Disorder ISP has also been updated and is currently in draft and reinforced the importance of ensuring that the right governance is in place. Action: 1. Any further comments to HC on the ISP asap ΑII HC/CK 2. HC and CK to keep the group updated on progress on the council's review of information sharing 3. DF to update on progress on the met ISA **Fatal Fire** JP updated that the Provider Forum meeting with FB input had happened and the slides from the session had been circulated with the agenda and papers and they were welcomed. Quality Assurance Framework KB expressed concern that a specific paper had not come to this SAB about the number of safeguarding cases that still required screening. BT advised that this could be covered during the performance report on the agenda (item 5.3) and it was agreed to look at it then. Police inspection on missing persons DF advised that the report could be accessed online on the Justice DF Inspectorates website. It is concerned with safeguarding children and young people but DF agreed to review the report for any learning for SAB. Annual report PD updated that the draft of the report was planned for presentation at this All Board meeting but that it was not ready. PD is still waiting on partner returns and needs them by the end of July to enable her to draft for email circulation the draft. PD Action: 4. DF to review the HMIC report Missing children: who cares? - The DF police response to missing and absent children 5. All to provide partner annual returns to PD asap and before end of ΑII 6. PD to draft annual report for circulation in September PD 5. **BUSINESS ITEMS:** 5.1 SAB Strategic Plan PD advised that the circulated plan had been updated following the meeting between the Chair and respective sub-group chairs. The meeting involved consideration of the plan against the 6 Safeguarding Principles and Making Safequarding Personal – piloting the toolkit from ADASS. An additional column has been added which indicates the specific principle the group felt was most at play. There were a number of comments received at the meeting: • ME highlighted the fact that 2.6 still says it is being led by prevention subgroup, but this is being led by Q&A. • ME advised that the campaign won't happen until September. Need to review date references to Q1-4 to ensure they match the financial year as they are confusing and consistent numbering of priorities LB-H queried why communication was not a priority and was directed

to Priority 2.2 and to para 5.1 and all agreed that this was the key feedback from the consultation

There was a discussion about accountability and Priority 4.6. There was mixed feedback about whether or not the Board Strategic Plan had been taken through respective agency governance pathways.

AC reminded partners that agreement within the partnership means agreement that partner agencies have signed up to the plan and its implementation. KB asked if the Chair wanted assurance that this has happened going forward.

AC said that would be really helpful and also advised that she has been invited to a number of partner governance meetings through the year and is happy to attend more as requested, as part of her role.

AC advised that part of the reason for bringing chairs of sub-groups together was to ensure joint accountability for the plan; she reminded members that any problems in addressing the priorities should be escalated and raised at the Board.

It was agreed that the Strategic Plan was signed off.

#### Action:

7. All to get back to AC with any requests for attendance at relevant governance meetings to present the Strategic Plan.

#### 5.2 | Performance Report

PR tabled and presented an updated version of the report and asked members not to refer to the report in the meeting packs. PR highlighted:

- 254 safeguarding concerns recorded. 71 of these were S42. This represents a decrease in the number of concerns from this time last year but could be connected to awareness campaign timing;
- 92% dealt with in 24 hours, 79% took 3 weeks or more for screening completion;
- Since w/c 11/7 there has been a significant decrease in the number of section 42s awaiting decision. From 104 to 12. There are some problems with recording practice which account for some of the numbers:
- BT advised that she has asked for this problem to be interrogated and that there is work underway to review pathways for the Safeguarding Adults Team also;
- the workflow is being reviewed and a new version in draft currently which will come to the QA Sub-group - this will include monitoring of the timeliness of the concerns;
- the QA Sub-group has agreed to look at data across agencies more thoroughly and to bring highlights to the Board which have already been scrutinised;
- Looking at abuse types, there should be no 'not recorded' some of the problem is around not having mandatory recording fields

The Chair invited questions and comments:

- there was a discussion about timescales and the need to ensure that we make safeguarding personal with flexibility to go at the right pace for the person involved;
- AC asked the QA subgroup to look into this what may be indicative of a good performance in Haringey;

CP/QA Subgroup

EΜ

- EM to take up outside the meeting queries around the referral form AC reminded that the S.42 referral form had been agreed at a previous SAB meeting.
- PR said that qualitative recording could be added to capture the range of languages and this could be considered to reflect the changes in population profile more currently
- PL queried how outcomes were being captured and it was acknowledged that this has to be the driving force in performance and is being considered carefully by the QA Sub-group

PR

CP/QA Subgroup

PR QA Subgroup

#### Action:

- 8. PR to ensure that comparative data is included in the data
- 9. Performance report to be presented at the next SAB meeting from the QA Sub-group

### 5.3 Transformation and Safeguarding

JP presented the report and highlighted that she felt that this was becoming outdated and that we needed to move to a multi-agency risk management approach and register.

JP had met with PL prior to the meeting to address concerns from VCS stakeholders and will meet again PL, JP, HC and a member of the transformation team to ensure relevancy or the reporting on transformation.

PL said that there had not been an opportunity to seek wide views and feedback from the wider sector but that many of the concerns raised were around cuts in the budget, to social work and occupational therapist complements, difficulties in recruitment and retention and whether care plans are updated regularly for people with progressive illnesses, such as dementia and the knock on effect of poor service.

PL said that they will book in meetings effectively to ensure this is done in future for reporting back.

Members agreed that the approach to risk management should be a partnership one and acknowledged that the development of a risk management approach is a priority in our Strategic Plan. It was agreed that partners should work together to mitigate the risks identified and to also be solution focussed to support the positive outcomes of risk taking.

AC asked the QA subgroup to bring back a proposal for a multi-agency risk management framework for safeguarding for the borough and CP confirmed that this was on the work plan for the group.

LB-H raised concern about signposting and said that pensioners don't know where to get help from due to cuts. BT advised that information and advice and signposting is a piece of work that has been ongoing along with parallel processes developing Haricare. It was agreed that IT technology isn't right for everyone, and that it was important to ensure that people could access information and advice within the full range of communities. It was agreed that signposting sometimes isn't enough, and people may need advice and guidance to get the services they require. LH-B said that a lot of people ask their GP or Practice Manager within the GP surgery about issues they may have.

#### Action:

10. JP to convene a meeting to look at transformation risk reporting moving forward

JP

	11. CP to move the work forward on a multi-agency risk management framework in the QA Sub-group and bring a proposal to the next Board in October	СР
5.4	SAB Budget – verbal	
0.4	HC provided a verbal update reminding members that arrangements for 2015/16 had been agreed late in the year and that this year's contribution requests would be based on this.	
	Based on committed contributions across partner organisations, 2016/17 income equals £66, 345 - CCG, health providers and police have agreed around £5k each, with some variation due to uplift and the difference between local and regional agreements. LFB have agreed a contribution of £1k across both Adult and Children's Safeguarding Boards; currently being escalated across 32 London Boards regarding Memorandum of Understanding issue	
	Committed 2016/17 expenditure (based on actual items at the time of SAB meeting) equals £68,500 (includes independent SAB chair's fees, independent SAR reviewer's fees and SAB/subgroup business support costs) – a shortfall of £2,115 which is being reported as a pressure by the Local Authority	
	Action:	
	12. HC to provide a written report to be sent with the minutes – as below	НС
6.	SUBGROUP UPDATES	
6.1	MCA/DoLS	
	<ul> <li>JP presented her written report and highlighted:</li> <li>She will be chairing the Sub-group going forward;</li> <li>the Sub-group last met on 7<sup>th</sup> July and reviewed the role of the group and membership;</li> <li>the group is thinking about what information should be reported up to the SAB to ensure it is more meaningful;</li> <li>the LA is holding the risk regarding the DoLs backlog and have commissioned an external agency to address it as well as restructuring the in-house team and a recruitment campaign including a DoLS admin person to help with the process;</li> <li>the numbers of requests coming in fluctuate month to month and the LA is hoping the backlog can be cleared by December 2016;</li> <li>TR acknowledged the LA risk but raised concerns about the role and reputation of providers and impact of delay on the patient experience and relationships with family. There was a discussion about prioritisation and JP advised that this can be requested via adult.protection@haringey.gov.uk and that she will review the criteria for urgent cases.</li> </ul>	
	KB asked if the current team could manage all new applications. BT felt it was too early to state this. Risk management approach of all cases coming through and this is flagged on the risk register.  AC asked that the subgroup continue to monitor closely and report regularly to the Board.	JP
6.2	Prevention and Training & Development  ME presented her written report and highlighted the following:	
	<ul> <li>Public awareness campaign – awaiting the outcome of grant application but won't be until September. Task and finish group is looking at taking</li> </ul>	

- the campaign to a variety of locations across the borough;
- evaluation papers will be coming in at the end of the year regarding training and development;
- members keen to close the loop of learning from SARs and high risk panel cases.

PL flagged the important role of the VCS in building community based assets and pooling resources – in this case for the campaign.

PD advised that there is a diagnostic involving a mock Joint Targeted Area Inspection focused on Domestic Abuse happening in the LSCB this week which has already flagged up gap in the borough in join up between approaches to adults and children. The report recommendations will involve some focus on strategy and the HSAB needs to consider it at the appropriate time.

#### 6.3 | SAB Quality Assurance subgroup update

CP presented her report and felt that the key points had been made during the meeting. Priorities for the Sub-group are:

- developing the performance data and multi-agency approach to it
- developing the approach to risk management
- · developing a multi-agency approach to auditing
- · work on policies and procedures.

## 6.4 | SAR Sub-group update

PD presented the summary report of the work of the group which has considered three referrals to date.

AC reminded members that we have not published a SAR yet but that she will ensure that the outcomes and learning are joined up to disseminate through the focus of the Prevention sub-group.

KB asked about the choice of pseudonym for SAR referral 3. PD said that this is going to the Panel meeting on 20<sup>th</sup> July for review and consideration.

#### 7. Exempt Items

#### 7.1 Commissioning & Quality

CP presented the report which provides a summary picture of services that have been inspected in Haringey and information from establishment concerns procedures and highlighted the following:

- the LA is no longer commissioning care from one of the providers around whom there were significant concerns;
- the relationship between care management, commissioning and brokerage;
- broader workforce insecurity issues (eg zero hour contract, which means workers can be registered with a number of different agencies) and queried if a wider discussion could be had on workforce issues.

AD asked people to be mindful of the information contained within the documentation and that it was to remain confidential. AD said that moving forward updates with non-identifying information will be useful and highlighting specific issues around safeguarding.

PL raised a concerns about a wider problem of contract values impacting on workforce. CP said that this is not always related – it is more about the model of provision.

	MH said that they are 2/3 the way through CQC data collection which will be available by the end of January and that he could then do a presentation to the SAB.  Action:  13. CP to take forward future reporting on this issue 14. MH to present at the January Board	CP MH
8.	New items of Urgent Business None.	
9.	INFORMATION ITEMS	
9.1	Reviews and inspections	
	Whittington Health DC reported that the CQC Inspection report gave Whittington Health NHS Trust an overall rating of Good, and rating of Outstanding for care. The inspection was in December 2015, and found there was a good awareness of MCA in the organisation, outstanding actions taken in Emergency Department to protect vulnerable patients, and good awareness across the hospital of safeguarding procedure.  MH said that they are working on getting publication times down for public inspections.  North Middlesex Inspection has resulted in a new chief exec and focused improvement around A&E Department. New medical director. There will be a repeat 2 day inspection in September.	
10.	Future SAB Meetings 24 <sup>th</sup> October: 2-4pm 30 <sup>th</sup> January 2017: 2-4pm  Agenda items suggested: Offer from CQC to come back and report. Evaluation on DV	
11.	Voluntary sector feedback to be included in the agenda  Any Other Business	
	11.1 London Safeguarding Adults Board  AC feedback from the meeting on 5 <sup>th</sup> July where a joint letter from the Chairs of the LSAB was agreed to ask for feedback from local SABs on key issues and what we may want the London SAB to prioritise. AC to feedback on any matters proposed by members:  • issue of LFB memorandum request regrading funding to be escalated;  • issue of Primary Care input into Safeguarding Adults Boards;  • self neglect – guidance on approach to self neglect which would need to build on the Pan London Guidance and then state what else is needed.  • Modern slavery – mechanisms of referral;  • Safeguarding adult reviews – this is about learning lessons and themes and patterns across London from SARs.	
	AC advised that the establishment of sub-groups was being considered.	

Haringey Safeguarding Adults Board Budget 2016-17						
Income						
S00031	London Fire Brigade	Assumed same contribution as 2015/16		1,000.00	Warrants escalation across 32 Boards (MOU issue)	
S00031	Local Authority/Adult Social Services	Assumed same contribution as 2015/16		40,000.00	Received	
S00031	NHS Haringey CCG	Assumed same contribution as 2015/16		5,115.00	Invoiced	
S00031	Whittington Health	Assumed same contribution as 2015/16		5,115.00	Invoiced	
S00031	NMUH	Assumed same contribution as 2015/16		5,115.00	To be invoiced (no response 2015-16)	
S00001	London Councils Met Police	Assumed same contribution as 2015/16		5,000.00	Invoiced	
S00031	ВЕНМНТ	Assumed same contribution as 2015/16		5,000.00	Invoiced	
Total Projecte	ed Income 2016/17			66.345.00		
Expenditure						
S00031	LA	SAB Executive Assistant		42,000.00	Currently projected by Adult Social Care	
S00031	LA	SAB Independent Chair		15,000.00	Currently funded and projected by Adult Social Care	

S00031	SAB	SAR Reviewer	11,500.00	DASS has agreed to fund as a one-off. As per SAR protocol it is expected that partner agencies contribute to SARs
S00031	SAB	Development Days	ТВС	
S00031	SAB	Communications and Campaigns	ТВС	
Total Projected Expenditure 2016/17		68,500.00		