

**North Yorkshire
Safeguarding Adults Board
Meeting Minutes**



Date & Time: Wednesday 21 September, 2016
Time: 14:30 – 17:00
Venue: Conference Room, North Yorkshire Police HQ, Newby Wiske

Name	Agency	Attended	Deputy Present	No Deputy
Colin Morris (CM)	Independent Chair	✓		
Mike Webster (MW)	NYCC Health and Adult Services	✓		
Nigel Costello (NC)	North Yorkshire Police		✓	
Victoria Pilkington (VP)	NHS PCU	✓		
Lincoln Sargeant (LS)	NYCC Health and Adult Services	✓		
Emma Dixon (ED)	NYCC Legal Services	✓		
John Pattinson (JP)	NHS England Yorkshire & Humber	✓		
Nigel Ayre (NA)	Healthwatch North Yorkshire	✓		
Holly Bainbridge (HB)	Independent Care Group		✓	
Christine Pearson (CP)	NHS PCU	✓		
Elizabeth Moody (EM)	TEWV NHSFT	✓		
Jill Foster (JF)	Harrogate District NHSFT	✓		
Diane Chaplin (DC)	CQC	✓		

In Attendance

Nicola Webb (NW)	NYCC Health and Adult Services	✓
Jacqui Hourigan	Primary Care Lead - NHS	✓
Angela Gray	NYCC Health and Adult Services	✓

Item 1	Welcome / Introductions / Apologies for Absence	Action/FAO
	<p>The Chair (CM) welcomed everyone to the meeting.</p> <p>Apologies were received from Cllr. Clare Wood, Ian Spicer, Wallace Sampson, Simon Hills, Sheila Hall, Lisa Winward and Richard Webb. Holly Bainbridge was in attendance on behalf of Keren Wilson; Nigel Costello was in attendance on behalf of Lisa Winward, Matt O'Connor was in attendance for Nancy O'Neill.</p> <p>Nigel Ayre, Delivery Manager for Healthwatch, North Yorkshire was welcomed to the meeting. Angela Gray of NYCC Health and Adult Services was also welcomed to the meeting. Christine Pearson was congratulated on her new appointment as Safeguarding Lead for the NHS PCU.</p> <p>There were no declarations of interests.</p>	
Item 2	Safeguarding story - WS	
	<p>This item was deferred as Wallace Sampson was not present. Nigel Ayre (Healthwatch) was asked to give an overview of the role of Healthwatch.</p>	

Item 3	CQC Presentation - DC	
	<p>DC confirmed that, within NY, management of CQC is shared between Kathryn Reid and DC. They will be able to answer questions that the SAB has regarding safeguarding issues and quality issues within the market.</p> <p>3 main issues for CQC:-</p> <ol style="list-style-type: none"> 1) Completion of CQC Program. Inspections have now been completed. DC is not able to report in detail as some reports are not yet finalised. Overall, CQC have 2.4% outstanding, 79.5% good and 18% as not meeting standards. Overall, 'quality' is not significantly of concern. 2) CQC are undertaking an increasing number of investigations. There are new criminal prosecution powers for breaches in care:- <ul style="list-style-type: none"> • Regulation 12 – Safe care and treatment • Regulation 13 – Safeguarding and Protection from Abuse • Regulation 14 – Nutrition and Hydration. <p>In prosecuting, the problems are not just evidential. CQC also has to prove that the alleged incident led to avoidable harm, neglect, or loss of property which is sometimes difficult within areas of comorbidity, but may progress if it is deemed in the public interest. CQC cannot prosecute a registered provider but need a named individual. This is in its early stages for taking forward.</p> 3) There has been increased work regarding Coroners hearings. CQC is working very closely with local coroners, and is also developing prosecution work. It is also connecting with victims and families, looking at how they will re-rate services and is developing its programme of looking at quality of care, looking at people's care journey and the overall quality of care that people receive. CQC now have updated guidance for their staff on how to deal with care home closures specifically for families and people who are experiencing this. <p>NC commented that a table top exercise/ joint training in respect of primacy as a similar piece of work has been undertaken with the HSE. DC agreed this would be beneficial. NC to action a table top exercise.</p> <p>MW commented that it would be useful for someone from NYCC Operational Safeguarding team to be involved in this which would be raised at the Engagement Group meeting the following day.</p> <p>JF requested a copy of the updated CQC guidance document for home closures. DC agreed to forward a copy.</p> <p>JP also confirmed that NHS England have guidance on home closures. DC confirmed that CQC's Management group was Regional and included York Teesside and Selby Area.</p>	<p>NC</p> <p>MW</p> <p>DC</p>
Item 4	Governance Structure 2015/16 - MW	
	<p>CM gave an overview of this document. The general view is that Partners are working well together but things could be improved upon therefore clear, strategic objectives as a Board are required. It would be useful to have a lay member but this presents a challenge.</p> <p>At the previous meeting it had been agreed that a Vice-Chair be appointed – Lisa Winward has been proposed and this was agreed by the Board.</p> <p>CM stressed that there was still a lot of work to be done. It requires commitment for agencies to provide performance data for scrutiny and quality assurance. CM explained that an electronic survey had been completed for the LSAG's.</p>	

	<p>VP confirmed she supports the governance structure.</p> <p>MO’C said that there needed to be proportionate representation for a small area and wanted this to be looked at within the LSAG Groups, due to the duplication of meetings regarding the same representative being required to attend all meeting across the geographical patch.</p> <p>The new structure was agreed</p>	
	Item 18 b/f - Development Session - 14 October 2016	
	<p>CM - commented that commitment is required to take this forward including responsibility for the actions needed to fulfil the strategic objectives and to share workload. The session is only planned for four hours therefore people need to come along, be prepared to make it a success and it may be that a further session is required in 2017.</p>	
Item 5	Report from QAP - MW	
	<p>MW - There are 4 key issues that the group needs to address over time. These are:</p> <p>Of the 1,255 concerns that don’t go through to Safeguarding, 66% are marked NFA. This is partially due to a decision several years ago that care homes be encouraged to report everything.</p> <p>NC commented that it’s a fine line. We either tell people to make referrals and we will screen out certain ones, or we leave the decisions on referring cases to the staff. NC confirmed that he prefers the first option.</p> <p>CP - Highlighted that the term NFA is perhaps not the right term as there may be further action.</p> <p>MW - 424 cases went to a safeguarding enquiry and 2 progressed to closure within the quarter. The report also reflected the outcome of concerns that had been raised earlier than Quarter 1. Figures are quarterly but there is also current safeguarding activity recorded within the report.</p> <p>VP - Asked if there were KPIs linked to safeguarding?</p> <p>MW - These figures are affected by the implementation of The Care Act and performance indicators flow from that.</p> <p>Making Safeguarding Personal is the main focus in making sure that the adult at risk has their outcomes met.</p> <p>MW asked NW to give a reassurance that risk issues are managed. NW explained that for all safeguarding concerns which are raised, Safeguarding coordinators complete a Risk Assessment which is reviewed throughout to ensure the appropriate action is being taken,</p> <p>It was generally agreed that it is difficult having clear quarterly figures.</p> <p>MW - this is the first report where we managed to obtain information from the Police and Health and includes figures on Making Safeguarding Personal - 48% said their outcomes were satisfied, 49% said they didn’t know. Further work is needed to refine this.</p>	CP/MW

Item 6	SAB Annual Report - MW	
	<p>CM – the proposal is that now we have a finalised report which we can sign off today to publish. MW – We want to make it more of a themed document by next year LS said that he liked the infographic and found it useful as this was clear and easy to read.</p> <p>CM confirmed that he would like evidence in future that people have taken the report on board and that there is evidence that this has appeared on agendas of meetings for discussion.</p> <p>The Board agreed the Annual Report.</p>	
Item7	NHSE Safeguarding Inspection - CP	
	<p>CP – Referred to the completed document – the final template from NHS England. The same ratings were achieved across Children and Adults.</p> <p>There were 2 reds, neither of which were deemed urgent action required.</p> <p>3 ambers – Work has started on all of them. There is a training needs analysis across Children and adults.</p> <p>JH has developed the training programme which is ready to roll out.</p> <p>MW – training is perhaps something we could all do together? Agreed. CP to action and to feed into the group.</p> <p>MOC – Explained that Airedale Wharfedale and Craven have recently been through the same process. It was agreed that MOC bring to the next meeting of the Board.</p>	<p>CP</p> <p>MO’C</p>
Item 8	Learning Disabilities Mortality Review (LeDeR) Programme - JP	
	<p>JP explained the programme. In particular, it is important to ensure accountability remains with NHS England. Emerging themes are expected and what needs to be done for service improvement and review it in a year’s time. 15 people are registered as reviewers and monthly meetings are planned with the reviewers so that they are confident to go ahead with the reviews. Deaths regarding 16-24 year olds will trigger multi-agency reviews. The reviews must be completed within 28 days. It’s not possible to control whether any reported deaths come into the Programme through families. This is a difficult message to get out. We have a strong collaborative network. There is a national link into families and it is hoped to collate our own lessons learned and common themes.</p> <p>CM asked for an update in 6 months’ time.</p>	JP
Item 9	Mental Health Crisis Concordat - VP	
	<p>VP confirmed that the Crisis Concordat has not left the agenda. A bid was granted for £15million, “Superflow” has been extremely successful, using powers more efficiently. Now looking at rolling it out across the rest of NY. Safe haven opportunities have been driven by Service Users. Now looking at funding a health based place of safety. There is a clear governance structure that allows reporting on a regular basis. There will be a reviewed action plan in November. There is a clear structure linked to the Health and Wellbeing Board.</p>	VP
Item 10	Increase in eligibility for Section 117 Aftercare - VP	
	<p>VP confirmed that LAs are also monitoring S117’s, and more work is required to align. Since the Cheshire West decision, S117’s have increased nationally</p>	

	<p>(detaining under S.3) and there is a need for assurances that people detained under section 3 are appropriate.</p> <p>Costs to health has been increasing. Also, consideration has been given to assessing a person's S117 after care. A much more robust way of working with local authorities now exists. No patient will be delayed because of a budget debate, the NHS will pay 50/50 until a decision has been made. The problem is not funding but whether or not there is a proper service for S.117 after care. There is a determination to have a process to discharge people off S117's. The NHS are trying to obtain a Memorandum of Understanding but this is proving difficult.</p>	VP
Item 11	Making Safeguarding Personal – Temperature Check 2016 - MW	
	<p>MW confirmed that very few Boards have completely implemented this, very few have ignored it and most, like North Yorkshire, are in the process of implementing it. The area that requires most development is around engagement of partner organisations.</p> <p>It was agreed that the progression of the local recommendations be referred to the Executive.</p>	SH
Item 12	Safeguarding Week - MW	
	<p>MW confirmed to the meeting that information has been sent out on where events are taking place. The report asked for promotion of Safeguarding Week (17-21 October) and to identify who will take a lead role. MW confirmed that someone will talk to Stray FM on the Sunday. JH confirmed that GPs are being engaged and looking to book onto training sessions.</p> <p>It was agreed that everyone would contact NW to confirm dates that they were available to support local sessions.</p> <p>MW informed the group that Cllr Clare Wood would be speaking at the Friday Wider Partnership event.</p> <p>The Board will receive a report at its next meeting.</p>	All
Item 13	Review of Multi-Agency Procedures - MW	
	<p>MW confirmed it was timely to review these policies and procedures following 18 months of their adoption after the Care Act. The review could take some time and the Board needed to decide the best way forward to achieve this. The Board agreed that it's important that there is similar practice wherever possible with City of York, and that discussions take place with partners to achieve this. MW advised the Board that we need to acknowledge that some elements of the procedures are being interpreted differently by authorities. MOC commented that in Craven there was some confusion and staff were following Bradford's interpretation of the procedures.</p> <p>It was agreed that work would continue with the Consortium group and City of York prior to a further report being made to the Board.</p>	MW
Item 14	Lessons Learned – Alexandra Court - MW	
	<p>MW provided an update. The County engagement Group is active and the Police involvement has been gratefully received.</p> <p>MW suggested that any specific questions should be put to the engagement group.</p>	All

Item 15	Confidential Cases Update- MW	
	MW outlined two cases. One concerns the death of an individual abroad on holiday, and the second is a safeguarding enquiry involving abuse substantiated against a number of people, and an independent review has been commissioned. Further information will be brought to the next meeting of the Board.	
Item 16	Strategic Board meeting notes from 11th May 2016 and matters arising	
	It was agreed to sign off the minutes as an accurate reflection of the meeting. MW confirmed that membership of the various groups needs to be finalised CM confirmed that he would ask WS to present his story at the next meeting.	CM/WS
Item 17	For Information	
	Minutes of the Executive Meeting – 7th September 2016	
Item 19	AOB	
	<p>NC informed the group that the Police are doing some work on anti-slavery. There is a loophole in the legislation around MRN referral and whether a person being trafficked is entitled to be housed by the Home Office. He confirmed that it takes 5-6 days to house a person and that in Harrogate, the Police lost a person by the time they could rehouse him.</p> <p>NC confirmed that the A19 Exelby Service Station is a hotspot for lorry drops. NC confirmed that we need a steer on whether it should lie with District Councils as there is no consistent approach.</p> <p>CM confirmed that Harrogate have Chief Executive meetings coming up and the matter could be fast tracked to this forum.</p>	NC