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| **Notes of Meeting****Date & Time: 21 June 2023 at 2pm****Venue:** Microsoft Teams |

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| **Name** | **Agency** | **Attended** | **Deputy Present** | **No Deputy** |
| Sue Proctor (SPr) | Independent Chair |  | X |  |
| Richard Jones, CBE (RJ) | Independent Chair | X |  |  |
| Helen Day (HD) | TEWV NHSFT | X |  |  |
| Scott Bissett (SB) | North Yorkshire Police  |  | X |  |  |
| Emma Dixon (ED) | NYCC Legal Services | X |  |  |
| Olwen Fisher (OF) | NHS Humber and North Yorkshire Integrated Care Board (ICB) | X |  |  |
| Emma Nunez (EN) | Harrogate District NHSFT | X |  |  |
| Helen Hart (HH) | NHS Bradford District and Craven Health and Care Partnership |  | X |  |
| Kim Robertshaw | Housing Services Manager, NYC | X |  |  |
| Rachel Bowes | Assistant Director, Adults Social Care |  | X |  |
| Caroline O’Neill (CO’N) | Community First Yorkshire |  | X |  |
| Hannah Ellingworth (HE) | NY Safeguarding Children’s Partnership | X |  |  |
| Christine Pearson (CP) | NHS Humber and North Yorkshire Integrated Care Board (ICB) |  | X |  |
| Michelle Carrington (MC) | Place Nurse Director for York and North Yorkshire, NHS Humber | X |  |  |
| John Pattinson (JP) | Independent Care Group |  |  | X |
| Louise Wallace (LW) | NYCC Health and Adult Services | X |  |  |
| Richard Webb (RW) | NYCC Health and Adult Services | X |  |  |
| Thomas Hirst (TH) | North Yorkshire Fire and Rescue Service |  | X |  |
| Joseph Howard (JH) | National Probation Service |  |  | X |
| Ashley Green (AG) | North Yorkshire Healthwatch |  |  | X |
| Phil Hubbard (PH) | Safeguarding Exec Lead, BDCFT |  | X |  |
| Jennifer MacNeill (JM) | NHS Humber and North Yorkshire Integrated Care Board (ICB) |  | X |  |
| **Also in Attendance** |  |  |  |
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| **Name**Dr Paul Walker (PW)Carole RobertsAmanda Robinson (AR)Heather Whoriskey (HW)Vicky Coe (VC)Rachel Craig (RC)Laura Watson (LWA)Janice Foxton (JF)Naomi Smith (NS)Claire Lindsay (CL) | **Agency**Doctor for Safeguarding, Tees, Esk and Wear Valley NHS FoundationCommunity First YorkshireHead of Safeguarding, BDCFT North Yorkshire PoliceNorth Yorkshire Fire and Rescue ServiceNYSAB TeamNYSAB TeamNYSAB TeamHead of HAS Population PlanningCare Services Manager, Adult Safeguarding |  |  |
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| **ITEM NO.** | **SUBJECT AND DISCUSSION** |
| **Item 1** | **Welcome / Introductions / Apologies for Absence** |
|  | **Apologies for absence**:Sue Proctor, Scott Bissett, Phillipa Hubbard, Emma Stevens, Christine Pearson, Laura Watson, Joseph Howard, Louise Johnson, Helen Hart, Tara Filby, Rachel Bowes, Ashley GreenNo declarations of interestRP welcomed members of the Safeguarding Adults Board to the meeting and Dr Paul Walker and Naomi Smith who were in attendance.The Chair noted that papers would be taken as read. |
| **Item 2** | **Minutes of the meeting held on 22 March 2023** |
|  | Minutes were noted and approved by the Board.No further matters arising other than those captured on the action log and risk register. |
| **Item 3** | **Action Log** |
|  | The action log was noted.With regard to outstanding actions:* MC, Place Nurse Director for North Yorkshire and York, explained that this was her first meeting having replaced Sue Peckitt and noted that the ICS Structure was had not been published but Theresa Fenech holds Executive responsibility for Yorkshire and York and that she could share the structure for “Safeguarding, North Yorkshire and York”. It was agreed that it would be useful if MC could provide the structure to be circulated with the minutes.
* With regard to the action in relation to NY Fire Service training, VC offered to liaise with JF to resolve this outstanding action.

**Action**: * **Move completed actions to “completed actions” table – JF.**
* **MC to forward structure for “Safeguarding, North Yorkshire and York” to JF to share with members of NYSAB.**
* **JF to liaise with VC regarding outstanding action 2021/04 - NY Fire & Rescue Service Safeguarding Training to other agencies to ascertain whether this could be removed from actions log.**
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| **Item 4** | **Report from Executive** |
|  | The report was noted.Key points:* Reviewed data with regard to drug and alcohol deaths and explored trends. Focus on learning.
* Delivery plan for NYSAB was noted. Work is progressing well.
* Structure of ICB still unconfirmed but MC had noted at this meeting that she would forward the revised structure.
* Helpful presentation given on “Right Care, Right Person” (RCRP). This is a work in progress, and we will consider how this will work with individual agencies.
* Update on our preparation for CQC inspection had been given/noted.
* Updates on sub-group activities, PPDL, PQI and LAR were presented/noted.
* Update on engagement and communication including Safeguarding Week noted.
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| **Item 5** | **Delivery Plan 2023/24** |
|  | Members of SAB noted the plan.Noted that:* Strategic priorities set by Safeguarding Adults Board.
* Sub-groups ensure that actions are undertaken/delivered.

Questions/comments:* KR noted that safeguarding sat within housing, rather than community safety in some regions and wondered how this would be rectified and who would initiate this. LW noted that this should be addressed and said that Public Health team (via NYSAB) would arrange a “scoping” meeting to consider the best approach for each locality.
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| **Item 6** | **Risk Register** |
|  | The risk register was noted.Questions/comments:* MC suggested that the risk with regard to industrial action taken by nurses was no longer applicable and could be removed.
* MC suggested that LPS would not progress during the lifetime of current government and was not, therefore a risk for this Board and that this could be removed.
* LW invited members of the Board to submit any suggested additions or amendments between meetings should something arise.

**Action:*** **Update risk register as per suggestions above.** **JF to update.**
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| **Item 7** | **Verbal Updates from Partners** |
|  | It was noted that:* Junior doctors in Harrogate and district NHS Foundation Trust would take strike action in the coming months.
* North Yorkshire Police(NYP) were about to undergo HMI re-inspection; cause for concern to be undertaken in next couple of weeks, next month offender management and online abuse, with full inspection commencing September/October. In view of this there would be significant pressure on the force. NCPR inspection and Peel inspection ongoing.
* Significant investment in safeguarding personnel - recruitment of 49 individuals had been approved by NYP and these roles (combination police officers and staff roles) would be advertised shortly.
* Waiting time for therapy is extreme for children, initial health assessments in North Yorkshire are fragile and under-investment in Yorkshire’s “front door” MASH. MC was keen to understand connectivity between SAB and Children’s Partnership and whether that relationship is strong. HE explained that as Manager of SG Children’s partnership she sits on SAB and is involved with SAR’s, etc. A meeting had been scheduled with Chairs of LSP’s in September.
* With regard to transition from children’s safeguarding to adult safeguarding, there was learning to be noted by both Boards/partners from the recent James SAR which was an extremely sad case where James died not long into adulthood.
* Two clinical assurance visits were scheduled, one due to concerns regarding aspects of TEWV (this would involve partners) and one with York and Scarborough hospitals at the end of June. MC would report back to SAB with regard to outcomes.
* A new Safeguarding Committee had been formed by ICB and anything of interest would be fed into SAB.
* HAS team are currently reviewing trends with regard to drug and alcohol related and other deaths from public heath and adult social care points of view. With regard to assertive outreach, are we confident that people feel empowered to ask the right questions.
* A joint “Quality Team” is in place between Yorkshire and Humber NHS and NYC to offer “hands on” support to care providers that may struggle with quality and other relevant issues.
* Yorkshire and Humber NHS won Adult Social Care, Chief Nurse Gold Award which was awarded to Sarah Fiori and the team. MC encouraged colleagues to nominate people for the social care awards.

The Chair thanked members of SAB for the updates. |
| **Item 8** | **Care Market Sustainability Update** |
|  | The Chair welcomed Jo Waldmeyer (JW), Head of Service Development, to the meeting.Members of SAB had noted the slides that had been circulated.Key points:* Reduction in unsourced packages of care in the county had been noted. Work had been undertaken to encourage new providers into the area, which had contributed to this.
* Further analysis to be undertaken to understand trends in relation to unsourced packages and to sustain this reduction throughout the winter months.
* Embarking upon Phase 2 of care market transformation. How do we transform the market, particularly in areas where there are gaps, often in rural and coastal areas?
* A number of providers, particularly those offering specialist care are seeking uplift in fees or may serve notice. Uplift requested averaged 9.2%. JW would share a “Provider Briefing” with members of SAB that sets out the different uplifts.
* We will re-procure our “Shared Life” service for people with learning disabilities who live in people’s homes and also our “Carer’s Break” service.
* There are a number of new providers, some of which use international recruits. We continue to work closely with these providers to ensure sustainability and quality of care.
* A positive picture overall, and we will work to sustain this.

Questions/comments:* JW asked whether members of SAB may like more information with regard to quality in future reports. The Chair felt that this would be useful and asked that thought be given to how this may be presented.
* RW noted that work had been undertaken with 30+ providers in the past year with regard to closure, moving residents and quality. As a result of this, the CQC ratings for providers in North Yorkshire had improved and we are now above the national average and overall Yorkshire average.
* MC offered to provide further information with regard to ongoing work with regard to quality and noted that there was inequality in provision, in as much as the most expensive care homes were often the best quality and that the more support that could be provided to those care homes that needed it, the better.

**Action:*** **JW to share “Provider Briefing” with members of SAB via JF/NYSAB.**
* **Consider how best to incorporate “quality” in future reporting to NYSAB. JW/MC.**

The Chair noted the excellent work being undertaken with regard to the care market, and thanked JW for the report and for attending the meeting. |

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| **Item 9** | **Suicide Prevention** |
|  | The Chair welcomed Dan Atkinson (DA), Health Improvement Officer to the meeting.Members of SAB had noted the slides that were circulated.DA stressed the importance of remembering that each number discussed refers to an individual.Key points:* The total number of suicides has decreased in North Yorkshire between 2018-20 and 2019-21.
* The suicide rate has fallen from 12.8 per 100,000 in 2018-20 to 11.3 per 100,000 in 2019-21; similar compared to the England average.
* There are a higher proportion of male than female suicides which is in line with the national trend.
* There were 22 suicides in Q1 2023 in comparison to 16 for Q1 2022.
* Suicide numbers were similar across Q3/Q4 2022 and Q1 2023, with a crude rate of 3.5 per 100,000 population in North Yorkshire in Q1 2023.
* Individuals aged 30-49 make up the largest proportion within suspected suicide data 2023.
* There are two “Lower Super Output Areas” (LSOAs) that feature more prominently in local data on suspected suicides, and both are amongst the most deprived within North Yorkshire and within the 20% most deprived in England.
* Linked to a wider, international case, 7 individuals within North Yorkshire were identified to have purchased Sodium Nitrate (which can also be known as Suicide Kits). North Yorkshire Police have supported this international case by following up on the 7 individuals within North Yorkshire.
* North Yorkshire Suicide Prevention Strategic Group will be re-established with a view to nurturing collaboration to reduce the number of suicides.
* New courses will be facilitated by Head:FIRST, North Yorkshire’s mental health training hub in 2023/24. Courses are provided on an annual basis and are recognised/accredited.
* Re-visit annual audits, as the last one was undertaken in 2018. DA would attend a future NYSAB to update on audit outcomes.
* Processes around work relating to suicides will be reviewed.

The Chair thanked DA for the update and presentation and invited questions/comments.Questions/comments:* The Chair felt it would be most useful for DA to attend a future meeting with audit outcomes following the five years hiatus.
* CL ask whether any work is undertaken with regard to working with bereaved families? DA noted that this was an important part of the work undertaken that he had omitted to mention in the presentation and noted that North Yorkshire Council has a Post Prevention Team offered by Major Incident Response Team in the council which has direct referral for family and close friends. Just B also offer counselling, but this is only available in a few localities at present.
* HD wondered whether DA had links to TEWV Suicide Prevention lead or Community Transformation Service for mental health to increase partnership working and offered to make the introductions. DA thanked HD and advised that he is in regular contact with Emma Cassey, Suicide Prevention lead, but would welcome an introduction to the lead in the Community Transformation Service.
* HE reported that she and DA were in regular contact with regard collaboration between children’s and adults.
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| **Item 10**  | **CQC Assurance Framework** |
|  | Update:* Mock inspection to be held tomorrow with commissioned external consultant. May undertake mock on-site inspection later in the year with same consultant. This approach has been tested with all councils in north-east and East Midlands.
* Four domains that councils will be assessed upon: working with people, providing support, ensuring safety and leadership.
* Five councils had volunteered to be tested and this would commence in July 202: North Lincolnshire, Birmingham, Nottingham, Lincolnshire, and Suffolk.
* Working together across Yorkshire and Humber to support each other in the development.
* North Yorkshire would participate in peer challenge with West Yorkshire on Thursday. Grouped with West Yorkshire due to size of council and sharing an ICB boundary.
* A “Preparing for inspection Board” would be convened and NYC would be inviting volunteers from ICB’s, voluntary sector, etc., to join the Board.
* Engine Room Group in place chaired by LW.
* Ten improvement areas across the Directorate.
* We will highlight that we are listening, learning, and continuously improving.

The Chair thanked RW for the comprehensive update. |
| **Item 11** | **LeDeR Report** |
|  | Members of the SAB had read the report and noted that this is interim position statement for Q1 of 2023.OF noted that this report is not safeguarding specific.Key points:* 39 LeDeR cases open across North Yorkshire and York.
* Annual report currently being drafted and would be shared with Board once approved.
* No notifications (across the ICB) for people who are none-white British this year to date.
* No notifications for someone who is autistic to date.
* ICB have formalised joint working and this should improve governance.
* Additional focus inclusion: long term unmanaged constipation, Ischaemic Heart Disease, Epilepsy, SUDEP.
* From the 1 July, any child death for a person with learning disabilities or Autistic people will no longer be notified to LeDeR

The Chair thanked OF for the report and update.OF asked whether the Board would like to continue with quarterly reports or maybe the annual report or bi-annual report as this is not safeguarding specific.Questions/comments.* The Chair noted that this is reported annually at Leeds SAB and the Board felt that was sufficient and it may be that this would suffice for NYSAB.
* MC concurred with the Chair that a quarterly report was not necessary but felt it important that the Board keep an eye on learning, and it may therefore be worth having a bi-annual report to update on how recommendations are progressing.
* It was agreed that the Board would receive the Annual Report and then consider progress with regard to recommendations six months later.

**Action:*** **OF and JF to liaise with regard to when the LeDeR Annual Report would be shared with NYSAB and add to schedule along with update on recommendations six months later**
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| **Item 12** | **Unplanned Care Home Closure – Action Plan update** |
|  | The report was taken as read.Key points:* Reviews ongoing for Hylands Care Home and Sheiling Care Home. Reports will be shared in due course.
* Working to attain robust policies, empowerment of front-line staff with regard to recognising concerns, clear governance, and processes to manage standards of care and agreement as to what represents “good”.
* Quality pathway phase 1 complete.
* Phase 2 completion scheduled for January 2024. Dashboard will make it easier to extract data.

The Chair thanked RC for the report and update.Questions/comments:* It was noted that a considerable amount of work had been undertaken and it appeared that we were moving towards “business as usual” following a number of unplanned care home closures. In view of this it may be worth considering producing a broader report that may include new entrants to the market, sustainability, and quality in addition to those leaving the market and perhaps considering frequency of reporting.

RC would feed this suggestion back to RB who was unable to attend today. |
| **Item 13** | **Any other business** |
|  | LW thanked RJ for attending the meeting and acting as Chair.There was no further business and the meeting closed at 3.45 p.m. |
| **Calendar of Meetings** |
|  | * Wednesday, 27 September 2023, 2.00 pm, In person venue tba
* Wednesday, 20 December 2023, 2.00 pm, Microsoft Teams
* Wednesday, 20 March 2024 at 2.00 pm, Microsoft Teams
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