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| **Notes of Meeting****Date & Time: 18 September 2024 at 10.00 pm****Venue:** Microsoft Teams |

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| **Name** | **Agency** | **Attended** | **Deputy Present** | **No Deputy** |
| Adrian Green (AG) | Independent Chair | X |  |  |
| Helen Day (HD) | TEWV NHSFT | X |  |  |
| Ian Scott (IS) | 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 |  |
| Kim Robertshaw (KR) | Housing Services Manager, NYC |  | X |  |
| Carole Roberts | 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 |  |
| Katrina Uttley | BDCFT  | X |  |  |
| John Pattinson (JP) | Independent Care Group |  |  | X |
| Louise Wallace (LW) | NYC Health and Adult Services | X |  |  |
| Richard Webb (RW) | NYC Health and Adult Services | X |  |  |
| Karen Siennicki (KS) | NYC Health and Adult Services |  | X |  |
| Thomas Hirst | North Yorkshire Fire and Rescue Service |  |  | X |
| Vicky Coe (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 |  |
| Sally Lichfield | Head of Engagement & Governance, NYSAB | X |  |  |
| **Also in Attendance:** |  |  |  |
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| **Name**Graeme Wright (GW)Jemma HillCaroline JohnsonMargarita Gibson (MG)Frances Aldington (FA)Helen Hart (HH)Laura Watson (LWa)Janice Foxton (JF)  | **Agency**North Yorkshire PoliceTEWVHumber and North Yorkshire ICBNYC, HousingHDFTICBNYSABNYSAB (Minutes) |  |  |

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| **ITEM NO.** | **SUBJECT AND DISCUSSION** |
| **Item 1** | **Welcome / Introductions / Apologies for Absence** |
|  | Chair welcomed members of the Safeguarding Adults Board to the meeting. Apologies for absence: Phil Hubbard, Emma Stevens, Ian Scott, Kim Robertshaw, Olwen FisherIt was noted that there was a deputy present for the majority of members of SAB that could not attend the meeting.No declarations of interestChair noted that papers would be taken as read.  |
| **Item 2** | **Minutes of the meeting held on 19 June 2024** |
|  | 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.AG reported that he had met with Jo Holland to better understand the care work data. With regard to outstanding actions:* 2023/06 related to action from Anne SAR and assurance that recommendations had been adopted by housing department. Chair asked that this action be expedited as it had been on the log for considerable time. LW and MG would follow-up with Kim Robertshaw with regard to forwarding written assurance to SAB.
* 2023/09 related to engagement work with homeless people within the region would remain on the log and would be updated following the development day to be held on 4 October 2024.
* 2023/10 related to adult MASH. GW reported that there would be a number of stages in the approach to this process for practical/legal reasons. First step would be to expand screening arrangements between social care and police to include health. Health colleagues were currently observing screening meetings.GW reported that York would participate in the MASH.

The Chair thanked members of the Executive for the updates. |
| **Item 4** | **LeDeR Annual Report/Presentation for the NY&Y areas of the ICB** |
|  | Chair welcomed Christine Pearson (CP) to the meeting.Members of the Safeguarding Adults Board had noted the contents of the Learning from lives and deaths – ‘People with a learning disability and autistic people’ (LeDeR) Annual Report.CP asked whether members of SAB would like to receive the report in future.Questions/comments:* LW said the LeDeR Annual Report was appreciated and offered excellent insight and learning that should be embedded in practice.
* RW felt that the report was useful, and wondered whether HAS should consider holding professional sessions in different sectors to build the learning into care.
* Chair felt that it was important, should be presented to Board, and proposed that the Board should receive a presentation on the content of the report to facilitate discussion and tease our proposals with regard to how the information was used. CP would speak to OF with regard to how best to facilitate this.

**Actions:*** **Add LeDeR Report key points to agenda for next SAB meeting – presentation of key points and discussion with regard how best to use information contained in the report.**

**CP to consult with OF with regard to presentation on LeDeR report key points at next meeting.** |
| **Item 5** | **Annual Report and Accounts** |
|  | Members of SAB had noted the draft Annual Report and Accounts.Laura Watson (LWa) reported:* All submissions had been received and incorporated in the report.
* Some partner contributions would not appear in the Annual Report but would be on the website and there would be a link to those within the report.
* An easy read summary would be produced in conjunction with self-advocates.
* An audio version of “easy read summary” would be produced.
* A one page “visual” summary of the key achievements within the report would be created.
* Report and accounts would be published on 28 October 2024.
* AG would present the report to Care and Support Overview in December 2024 and Health and Wellbeing Board in January 2025.

Members of the Executive Group approved the contents of the Annual Report and Accounts.The Chair thanked LWa, members of the team and partners for their work on the report.  |
| **Item 6** | **NYSAB Delivery Plan** |
|  | Members of SAB had read the report.SL updated:* Although a number of “items” were on hold until after the development day on 4 October, a considerable amount of work was still ongoing.
* Row 6 – Strengthen our work to ensure that we hear the voices of people and communities. Involvement Manager and her team would lead this work. Assurance and Safeguarding Development Officer had discussion with Healthwatch about reviewing the NYSAB website and suite of resources/information.
* Row 8 – Strengthen SAB engagement and involvement of people in the work of the NYSAB; with a particular focus on seldom heard groups. SL reported that some of these groups had delivered sessions during Safeguarding Week. A leaflet and a video had been produced on the Mental Capacity Act and people from the region with “lived experience” had co-produced the video that had been added to the NYSAB website.
* Row 9 – Identify practice issues through MSP Questionnaire results (HAS) and specifically updates to the Safeguarding module in the North Yorkshire case management system. This had been on the delivery plan for quite some time with no time frame, but it would go live in February 2025, and would include updates to the processes and forms.
* Row 10 – Develop and implement an Organisational Safeguarding Policy (in line with NICE guidelines) – This would “go live” on 1 October and a number of webinars had been scheduled throughout September to launch the policy.
* Row 11 – Review Training Directory with regard to training courses across NYSAB, NYSCP and identify any gaps and update the document. This work had been undertaken and the updated document was available on the NYSAB website. However, further work was required to update some of the course titles within the directory and this would be overseen by the PPDL group.
* Row 12 – Review Multi Agency Safeguarding Meeting (MASM)/ Self neglect practice guidance, in North Yorkshire. It was noted that a meeting had been held on 16 July to review the Self Neglect practice guidance with a view to developing One Minute/Seven Minute Guides. Once approved, these would be added to NYSAB website.
* Row 16 – James SAR. This had been approved as “completed” at the Learning and Review (LAR) group meeting held on 18 July 2024 and this item on the delivery plan would now be closed.

**Action:** * **Row 16 on delivery plan (James SAR) to be closed as now complete. SL.**

The Chair thanked SL for the update and noted the considerable amount of work that was ongoing. |
| **Item 7** | **Report from Executive / Update on Safeguarding Week** |
|  | Members of the Executive Group had noted the contents of the report.SL updated on key points from Executive group meeting:* An update/presentation had been received from Dolly Cook in relation to Mortality Data Sub-Group. (Further information available within the report).
* The group considered new guidance on “Managing Different Professional Perspectives” to support practitioners when there were different opinions in groups and to aid compromise. This included an escalation process to help reach agreement via an informal process. This had been introduced by Children’s Safeguarding Partnership and had been adapted for NYSAB. Members of Executive Group approved the guidance subject to minor changes, following which the guidance would be adopted.
* PQI group had reported a 20% increase in safeguarding concerns compared to last year and further analysis would be undertaken to understand the increase.
* With regard to PPDL group, work was ongoing on Organisational Safeguarding Procedures and Liquid Logic. Reforms were awaited with regard to DoLS, and a couple of actions on the workplan for PPDL were on hold due to this.
* LAR group had considered Cross-boundary Safeguarding Adult Reviews and how actions from these were monitored. It was noted that all actions from the “James” SAR were complete.
* Only one LSP report had been received from Hambleton and Richmond group. A review of the structure of LSP’s/partnerships was underway and an update would be shared at the next Executive meeting. Chair noted that there was a question about LSP’s in the survey that would be sent to participants ahead of the development day and it was hoped that further consideration would be given to LSP’s at the development day, e.g., the structure and how the groups would be supported.

LWa updated on Safeguarding Week:* There had been 44 sessions in total, 9 of which were hosted/delivered by Safeguarding Adults Board (SAB).
* All SAB sessions were well attended.
* Total of 3719 attendees over all the sessions.
* 1523 attended SAB sessions.
* 204 people participated in the survey and 74 people had attended two or more sessions. 61% of participants attended for professional purposes and 39% were members of the public.
* Some sessions had been recorded and would be placed on the NYSAB website.
* LW had chaired Safeguarding Week planning for the past two years with Diane Burton as co-Chair in 2024 and the team would seek volunteers to assist with Safeguarding Week 2025 shortly.

Questions/comments:* LW thanked Diane Burton who had made a significant contribution to planning for Safeguarding Week 2024.
* LW noted that a de-brief meeting would be held to discuss what went well, what could be done differently, etc.
* Chair reported that he had asked the business unit to explore work that has been done throughout the year and consider how this could be used it to promote videos, presentations, updates to website, etc.
* Chair noted the importance of using work already undertaken, resources available from Safeguarding Week 2024 and issues raised at the development day on 4 October 2024 to develop and maximise the impact of Safeguarding Week 2025. (LWa/LW).
* Chair asked members of NYSAB to consider what was required from LSP’s and how it should be presented and also how we would support them.

The Chair thanked SL and LWa for the updates and all involved for a fantastic effort during Safeguarding Week.**Action:*** **LWA/LW and Safeguarding Week 2025 committee to review work already undertaken, resources available from Safeguarding Week 2024 to develop and maximise impact of Safeguarding Week 2025. LWa/LW to update SAB in March 2024.**
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| **Item 8** | **Preparing for CQC Inspection – Adult Social Care Update** |
|  | RW reported that NYC had not yet received notification of a CQC inspection and gave a presentation on “Preparing for CQC inspection” and work that had been undertaken.The presentation would be shared with members of Safeguarding Adults Board after the meeting, but it was “strictly confidential” and should not be shared wider than members of SAB.Presentation incorporated: * CQC’s assessment of adult social care – why and how.
* CQC Assurance: 4 domains and 9 quality statements.
* CQC activity and ratings to date.
* Work undertaken by HAS to prepare for the inspection which comprised 3 stages.
* Summary findings from the 3 stages/what works well.
* Examples of good practice.
* Summary findings from the 3 stages/what could be better.
* Adult social care improvement priorities.
* Examples of questions for Independent Chair.
* Examples of questions for statutory partners and Board Manager.
* Examples of good practice from reports.
* Next steps.

RW noted:* Approximately one third of councils would have had their adult social care inspections within the next six months.
* It was thought that the regime of inspections would continue under the Labour Government.
* Likely that NYC inspection would be within the next 12-18 months.
* NYC had undertaken a three-stage peer review over the past 12 months. HAS commissioned Carol Tozer(CT) to undertake the review which included focus groups, meetings with people with lived experience, and an in-depth case file audit. The process had been extremely thorough.
* Members of the team would compiling a detailed action plan.
* See the presentation that was circulated for more detail.

LW noted:* That this was a continuous learning and improvement a journey – we acknowledge our strengths but are aware of where we would make improvements.
* Seven priority areas had been identified on which the team would focus.
* These priority areas were waiting well, reviews, direct payments, carers, reablement, “Home First” and complex care.
* There had been mixed feedback from those with lived experience. It was felt that sometimes communication was poor, that our responses were inadequate, and people did not feel listened to or that their views were valued. This feedback had been taken board and we would work to improve in these areas.
* A number of areas that managers and statutory partners may be asked about, e.g., challenge, threshold for referrals, reduction of inappropriate referrals, how does performance reporting inform Board activity/planning, evidence of impact, examples of change, etc.
* Consideration was given to questions that may be asked of Statutory Partners and Board Manager.
* Examples of good practice from reports were shared.

Chair reported that he had three inspections coming up. As Chair of other SAB’s, he had been asked to identify strengths and weaknesses of a SAB, consider SAR’s learning and how this was embedded, training and was there sufficient take up, how did you know training had been effective and how do you hold your council to account? AG advised that CQC undertake some research via SAB websites.AG would share the questions he had for Durham Council along with analysis from the nine that had been undertaken and reviewed by A Cooper.**Action:** * **AG to share questions and analysis that he had with regard to forthcoming inspections and those that had taken place with LW and RW.**

Chair thanked RW and LW for the updates. |
| **Item 9**  | **NYSAB Development Day – 4 October 2024** |
|  | Chair reported that:* three planning meetings had been to finalise details for the NYSAB development day.
* 44 acceptances to date but there may be more.
* attendance was important as groups would discuss priorities for NYSAB for the coming years, the mission statement and values.
* a survey would be sent to delegates in advance of the day.
* a wider group of delegates had been invited, including representatives of Parkinsons, and dementia groups.
* each key partner would give a presentation on the day about priorities for their organisations.
* there would be a presentation on issues in North Yorkshire with regard to “rough sleeping”.
* there would be a facilitator on each table to enable discussions/record outcomes.

RW thanked AW for the update and stressed the importance of all representative collaborating to ensure the best possible outcomes.Chair looked forward to seeing members of SAB on Friday 4 October at 9.30 at Ripon Rugby Club. |
| **Item 10** | **Rough Sleeping – Ministerial letter** |
|  | Chair reported that Kim Robertshaw had agreed to be the NYSAB “champion” with regard to rough sleeping.Chair, LW and KR had met to discuss this further and noted that with regard to timescale, we would need to have something in place with regard to this directive from the Government by early 2025. Chair would consider convening a workshop on rough sleeping for North Yorkshire to which, all those partners that currently work with rough sleepers would be invited to introduce NYSAB’s new responsibilities under the ministerial directive. This would be held as soon as possible, and participants would be those that work with rough sleepers in the region.Chair noted that the words “hold to account” were stated in the letter, so it was important that members of NYSAB understand what was required and ensure that we deliver it.Margarita Gibson reported that housing had restructured the “rough sleeper” teams, and this would offer an opportunity to ensure that the information needed for SAB was embedded in the way the officers work and to work with other services, ensuring that clear processes were in place and to measure progression for this directive.Chair stressed that this directive was not just about housing, and that it was important to ensure that synergies between services were present and working, e.g. assertive outreach and long-term objectives. This responsibility should, and would, be shared.**Actions:*** **AG to provide dates for “rough sleeping” workshop. AG.**
* **Ensure that completion of the rough sleeping directive was placed on the action log. Resp KR/AG/MG & SAB**
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| **Item 11** | **Any other business** |
|  | Chair asked about compliance with accessibility with regard to the NYSAB website and annual report and sought reassurance that NYSAB were compliant. LWa explained that NYSAB were compliant with the “Accessible Information Standard” and regular audits were undertaken on the website.Chair thanked members of NYSAB for attending and looked forward to seeing everyone at the development day on Friday 4 October at 9.30 am at Ripon Rugby Club. |
| **Calendar of Meetings** |
|  | * Wednesday 11 December 2024, 2.00pm, Microsoft Teams
* Wednesday 19 March 2025, 2.00pm, Microsoft Teams
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