

Brighton & Hove Safeguarding Adult Board
3-5pm, Monday 4 September 2017
The Council Chamber, Hove Town Hall

Present

Name	Designation
Graham Bartlett	Independent Chair, B&H Safeguarding Adults Board (SAB)
Mia Brown	Business Manager, B&H SAB
George Colby	SAB Quality Assurance Manager
Karen Barford	Councillor - BHCC
Tony Benton	Healthwatch B&H
Roland Marden	Healthwatch B&H
Brian Doughty	BHCC, Assistant Director, HASC
Andy Porter	Sussex Partnership NHS Foundation Trust (SPFT)
David Feakes	Sussex Community NHS Foundation Trust (SCFT)
Lee Horner	Sussex Police
Emma Gilbert	BHCC Housing
Samuel Newbould	Kent, Surrey & Sussex Community Rehabilitation Company (KSSCRC)
Candy Gallinagh	B&H Clinical Commissioning Group (CCG)
Alison Cannon	B&H Clinical Commissioning Group (CCG)
Eleanor Battie	Lay Member
Lucy Bryson	BHCC, Community Safety Manager
Jo Henderson	BSUH
Peter Wilkinson	Consultant in Public Health (PH) Medicine & Deputy Director of PH, BHCC HASC
Rob Persey	BHCC, Executive Director, Health & Adult Social Care (HASC)
Robert Sobotka	CQC
Rose Thomson	BHCC, ASC Administrator

Apologies Received

Name	Designation
Caroline Davies	Brighton & Sussex University Hospitals NHS Trust (BSUH)
Michelle Jenkins	BHCC Head of Adult Safeguarding
Mark Burden	National Probation Service (NPS)

Jason Tingley	Detective Superintendent, Sussex Police
Richard Bates	Sussex Police
Christine Chatfield	Lay Member

No Apologies Received

Name	Designation

1. Welcome and Introductions

1.1 Graham Bartlett welcomed all members and informed the board that many apologies have been received.

2. Minutes of Last Meeting

2.1 The Minutes of the meeting 05 June 2017 were agreed for accuracy and updated on as follows:

3. Matters Arising

3.1 The SAB considered the circulated update on matters arising from the last meeting.

3.2 **(4) PASA Membership:** MB gave an update on behalf of Simon Hughes who has advised there are 86 different people on the PASA distribution list, representing 56 different organisations, 13 residential care homes, 10 supporting / sheltered housing providers and 2 home care agencies.

3.3 **ESFRS Hoarding Framework for CiP:** Framework on the agenda for next East Sussex SAB and on the work plan for next Pan Sussex procedures group.

3.4 **Stop, Look, Care:** P&E subcommittee met on August 7th and are awaiting quotes to produce 1000 booklets to circulate.

3.6 **SCR Event:** Initially this was going to be a Pan Sussex Event but West Sussex have reservations about the purpose of the session. Brighton & Hove and East Sussex keen to collaborate. MB advised the session will provide an overview of the SAR protocol, consider SAR methodologies and family involvement as well as looking at case studies to discuss threshold criteria. Learning from the SARs across Sussex will also be presented. The group agreed this would be a cost effective exercise if it supports correct SAR referrals and supports SABs with the commissioning processes. **DF, in his role as vice chair, to take the draft agenda for the day to the SAR subgroup for further consideration. This will now be pan Sussex.**

3.7 **Save the date:** Safeguarding Conference - 1st December – The Brighthelm Centre.
[Booking open](#)

3.8 **Recruitment:** SAB Administrator advert received no applicants, re-advertising underway due to close end of September.

4. Feedback from Sub Group Chairs

Sub Group / Chair	Headlines
Participation & Engagement (P&E) Richard Bates	<ul style="list-style-type: none"> • MB gave update in RBs absence • Good attendance by partners, the combined group has now met twice. • Group focused on Stop, Look, Care booklet, agreed it is a great resource, discussed how we are going to circulate it to the public • There are plans to develop a comms strategy as part of the work plan, but no capacity to take with work forward currently • Group agreed approach to disseminating learning from recent SARs and SCRs across Sussex and wider (where appropriate) within partner agencies via the use of briefings hosted on the website and face to face briefing sessions. • LSCB Neglect Strategy to be circulated with these minutes.
Learning & Development (L&D) David Kemp	<ul style="list-style-type: none"> • MB gave update in DKs absence • The group have discussed resourcing and provision of multi-agency training. It was agreed that the group would seek assurance at the quality of single agency training provision and commission ad hoc multi-agency offers were appropriate. • The group have looked at training across the partnership on supporting partners to work confidently with trans and non-binary clients. A gap in the offer had been identified and there will be session run during the Safeguarding Week. • The group have also looked at training provision across the partnership with regards to working with clients with a / suspected personality disorder. Again a session will be offered to frontline staff during the Safeguarding Week. • The group have considered the importance of embedding learning from SARs across the neighbouring Board areas. • Next meeting will focus on the training aspects of the safeguarding self-assessments. • In the absence of no specific training budget the group will consider creative ways to share and embed learning opportunities.
Quality Assurance Michelle Jenkins	<ul style="list-style-type: none"> • MB gave update in MJ absence • Agreed that all agencies have a good single agency quality assurance arrangements in place, with the exception of Sussex Police. GB has spoken with JT about this. • Discussed multi-agency audits, next audit sexual abuse, MCA/DoLs audit will also need to be considered. GB advised the Health and Wellbeing Board have tasked the LSCB and SAB with considering a joint audit to assess safeguarding outcomes for parents with a learning disability. • SECamb were not able to attend challenge event as going through a period of change and have many meetings to attend across the counties. GB and Chairs of SABs across Sussex have since met with Steve Lennox, Interim Director of Nursing and Quality regarding changes within the agency – briefing note considered. • The Brighton & Hove and bi-lateral agencies will need to be challenged and it has agreed that this will take place at the next QA meeting, GB to

	<p>attend.</p> <ul style="list-style-type: none"> • The group have reviewed the Homeless audit report, but struggled to identify actions within the business of the meeting. A follow up meeting with key stakeholders will take place and the QA Sub Group will sign off at meeting in October. • George Colby, new to post as SAB Quality Assurance Manager, will be supporting the quality assurance agenda, including developing a multi-agency data set.
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5. In-depth Review of SAR Subgroup: Safeguarding Adult Review (SAR) Roland Marden

5.1 SAR subgroup serves as vital to the board as they are the gatekeepers for incoming referrals.

5.2 Group are focusing on digesting the actions that come out of SAR A, breaking down what is meant and ensuring these are put into practice. The group have observed the wording of SAR recommendations can be vague, and would like to ensure these are tightened up when we next commission a review.

5.3 Actions are completed or track. Non-engagement practice and processes are being reviewed within the group – the QA Sub Group started this work but has been passed into SAR Sub Group due to its decreased capacity. Procedures are being re-drafted and will take into consideration learning from the review. The Adult Social Care Modernisation Board has given assurances that lessons are being incorporated into social work redesign.

5.4 The MH Homicide investigation from Christmas 2014 is being published on 28 September and this will be presented to the SAR Sub Group, who will highlight the key risks identified and gaps in assurance to Board. **Agenda for next SAB.**

5.5 RP asked how the group are supporting learning across the partnership¹. RB advised that briefings have been circulated and MB advised the Learning & Development Subcommittee have been seeking assurance from partners regarding how they are taking forward learning within their own agencies. AP advised SPFT have discussed the case within team meetings.

5.6 RP asked if all partners understood the referral criteria for a SAR.² Partners provided assurance this was understood but that the SAR event would be beneficial.

6. Safeguarding Data Report – Brian Doughty

6.1 Presented by BD in MJ's absence, MJ was yet to scrutinize the data.

6.2 There were queries as to whether ASC are on top of all mental capacity assessments and the timeliness of completed enquiries.

¹ Challenge – sharing learning across the partnership

² Challenge – understanding the SAR referral criteria

- 6.3 Constraint of report is that it is limited to B&H ASC, with no data for context or comparison. In need of multiagency data. **GC will lead on this work with partners.**
- 6.4 **BD** advised that data is discussed within his managers meetings.
- 6.5 KB asked if the information on repeat referrals could be contextualised and if the percentage of enquiries by referral source could be identified. She advised it would be helpful to see how many clients are referred multiple times by splitting into referrals and unique individuals.
- 6.6 TB asked if we could have comparison data to support identifying themes and trends.
- 6.7 GB agreed that it would be helpful to have regional/national contextual data to better interrogate the position in B&H. He also asked for commentary to accompany the data to support wider understanding, including how data compares with previous quarters etc.
- 6.8 GC suggested the data could be produced 6 monthly as opposed to quarterly to support capacity and help better identify trends and themes.
- 6.9 Male and Female data fields need reviewing to include trans and non-binary clients. **MJ/BD to take forward.**
- 6.10 GB voiced concerns about this data as a tool for the Board to set strategic priorities and demonstrate the effectiveness of its safeguarding arrangements in Brighton & Hove.³ He said he is eager for the multi-agency dataset to be developed which he would expect to then be analysed at QA subgroup with exception reporting to Board.
- 6.11 The board agreed that the data needs to be investigated for accuracy and developed to support the Board to fulfil its scrutiny function.

7. Impact of changes to Universal Credit – Liz Craine

- 7.1 LC provided the group with an overview of what effect the changes to Universal Credit are going to have on clients.
- 7.2 There is going to be a two stage role out, Hove residents will switch to UC on October 4th, Brighton Residents will be switched gradually from November to January.
- 6.8 RP queried how the SAB will support identifying adults with care and support needs left in this state of limbo without any money. LC advised there has been a project set up with Money Works to help people set up claims.
- 6.9 In summary LC informed the group of the concerns around the implementation of this new system, making agencies aware of the potential safeguarding risks. LH requested a concise document about UC that can be cascaded to colleagues and used if one comes across an issue linked to UC, Action: **will circulate a leaflet when produced.**

³ Challenge – data accuracy

6.10 KB asked what we should do as a SAB?⁴ **GB advised we have asked for this briefing to make sure we are alive to the potential implications of changes to UC on adults with care and support needs. KB suggested alerting HWB via Chair Comms about safeguarding ramifications of such changes. Action: MB to liaise with HWB.**

8. SAB Annual Report – Mia Brown

8.1 MB presented the report, which had already been circulated to and read by the board members. This was the draft unformatted version.

8.2 The report demonstrates the role and function of the board, focusing on the challenges and achievements of SAB and reflects on progress against the five priority areas.

8.3 MB discussed how Priority 3 has been difficult to give evidence of progress and welcomes suggestions from the board, the board discussed this and suggested various events and programmes they believe could evidence progress against Priority 3. **Action: MB to add.**

8.4 The report outlines SAB learning from the domestic violence quality assurance audit and talks to work under the homelessness agenda. MB advised the history and learning from the X SAR is also included in the report as are examples of challenge and scrutiny made by the SAB to partners, partners to SAB and inter-agency challenge. Performance data is yet to be added due to delays within the performance team.

8.5 The SAB discussed page 21 – a table showing how many individuals attended safeguarding training provided by HASC. The Board agreed other agencies training data needs to be added. MB asked if partners would supported this additional work and it was agreed that this will be included in next years annual report.

9.0 B&H SAB Constitution/ Information Sharing Agreement & Memorandum of Understanding Multi Agency Safeguarding Audits

9.1 MB introduced this document which articulates the role of the SAB, our membership & expectations, details how we are organised and financed, and also sets out how the chair is appointed. This document also contains a Memorandum of Understanding which provides the framework for roles and responsibilities of agencies in the multi agency audit programme. It also contains an Information Sharing Protocol which sets out the principals of partners sharing information amongst themselves and with the Board to promote the safeguarding of adults with care and support needs. MB advised this document has been approved by the BHCC Legal and Data Protection Teams. Partners were asked for any comments or suggested changes.

9.2 DF asked for section 16 'Protocol with other statutory Boards and Partnerships' to explicitly mention joint working for Pan Sussex to avoid duplication. MB agreed to ensure we outline our commitment to working in such as way as to avoid unnecessary duplication or repetition.

⁴ Challenge – SAB scrutiny of universal credit

9.3 MB reminded the group that The B&H SAB is placed on a statutory footing and may request a person to supply information to it or to another person. The person who receives the request must provide the information provided to the Board if:

- the request is made in order to enable or assist the Board to do its job;
- the request is made of a person who is likely to have relevant information and then either
- the information requested relates to the person to whom the request is made and their functions or activities, or;
- the information requested has already been supplied to another person subject to a Board request for information.

She reminded that informed consent is not a requirement where information sharing is required to meet a vital interest of the data subject (or another identifiable person) and it is not reasonable for the SAB to obtain consent. She advised that the BHCC Data Protection team have advised this is consistent with the conditions for processing in Schedule 3 of the Data Protection Act.

9.4 RP asked if we could we have one signatory for BHCC.

9.5 There was a request to take out the term DASM

9.6 It was asked how GP's/Primary Care will be parties to the agreement. **Action: CG to scope this.**

9.7 Board agreed that the document is clear and well set out. **Action: All agencies to take to their relevant Data Protection/Information Governance departments to get it signed off. Tabled for final sign off at next SAB Agenda**

10 AOB

10.1 RP mentioned difficulties of using the council chambers, very large room for group size with poor acoustics. Two options going forward, one – stay in the room but use the microphones, two – use different rooms elsewhere externally, taking the SAB around the city. RP asked members to think about it and feedback any suggestions. Agreement to stay at the Council Chamber for the next meeting and trial using the microphones. **Action: JC to arrange**

10.2 CG advised the LeDeR programme, which is the national programme for mortality reviews of people with Learning Disabilities, goes live in Sussex from 4 September 2017. The aim is that all deaths will be reviewed using LeDeR methodology and the purpose is to improve quality of health & social care, reduce premature mortality and health inequalities with the aim of influencing practice at service level. The process will run alongside or in conjunction with any other review taking place. Locally, staff have been trained as reviewers and Ian Wilson is the Local Area Co-ordinator. It is CG's understanding that there will be a launch to ensure all services know where to refer to if they become aware of the death of a LD client. **Action: CG will share details of launch with the Board when received.**

10.3 AC advised that the STP now aligned under herself and a review has been commissioned to raise the profile of safeguarding and resourcing across the system. **Action: AC will be able to provide an update at next SAB meeting.**

10.4 JH advised that the recent CQC inspection has removed from inadequate to requires improvement.

Next Meeting: 3-5pm on 4 December in the Council Chamber, Hove Town Hall

Following meetings

Date	Time	Venue
5 March 2018	3-5pm	G91, Hove Town Hall
<i>June</i>	<i>3-5pm</i>	<i>TBC</i>
<i>September</i>	<i>3-5pm</i>	<i>TBC</i>
<i>December</i>	<i>3-5pm</i>	<i>TBC</i>