

BURY SAFEGUARDING ADULTS PARTNERSHIP



MINUTES OF SAFEGUARDING ADULTS STRATEGIC BOARD MEETING HELD ON 16/07/15, 2.00pm – 4.00pm

Present:	David Hanley (DH)	Independent Chair Safeguarding Adults Strategic Board
	Pat Jones-Greenhalgh (PJG)	Bury Council
	Julie Gonda (JG)	Bury Council
	Lorraine Ganley (LG)	Pennine Care
	Maxine Lomax (ML)	Bury Clinical Commissioning Group
	Karan Lee (KL)	Greater Manchester Police
	Kimberley Salmon-Jamieson (KSJ)	Pennine Acute
	Jane Edmunds (JE)	Bury Council (minutes)
	Mandy Symes (MS)	Bury Council (Board facilitator)
Apologies:	Cathy Fines	Bury CCG
	Jax Effiong	Greater Manchester Fire and Rescue
Circulated	All above	
	Tracy Devine	Care Quality Commission

ACTION

1.	Introductions	
1.1	DH welcomed all attendees and introductions were made.	
1.2	Apologies given	
2.	Minutes of the Meeting Held on 14th April 2015, and Matters Arising	
2.1	Page 1- agreed	
2.2	Page 2 - 3.4 Action should be allocated to MS not ML	
2.3	3.6 re: volunteers for Vice Chair – no positive responses – Board members to consider whether they are able to take on the role. Response to David Hanley before next Board through MS.	All
3.	Annual Report Draft	
3.1	Current position, first draft sent out for any significant changes nothing has come back. Board now in a position to agree and final changes.	
3.2	Comment: Overall happy with report, it has evolved and has more information in it but need to keep an eye on it and review next year in relation to Care Act guidance.	
3.3	Changes: Alter the look of page 6 & 7 to break up text.	MS

		ACTION
3.4	Add case studies as per previous reports.	MS
3.5	PJG comments to be added (were not including in time for previous dissemination)	MS
3.6	DH requested feedback through MS re: who the report has been shared with within their organisations and what the response is. Feedback prior to next Board.	All
3.7	Final draft will be back out to Board before 24 th July.	MS
4.	Performance Report	
4.1	Note of thanks to Helen Smith Intelligence manager for all her hard work with this report.	
4.2	JG presented the report.	JG
4.3	DH raised query as to how many referrals had been received from GMW. Discussion regarding what figures were for other large MH providers such as Alpha, the Priory and Fairfield Hospital. Need assurance that adult safeguarding practice within those providers is in line with required standards even though placements are generally commissioned from out of area commissioning bodies.	
4.4	Agreed that would benchmark the number of received referrals with regard to the above providers. Report to be produced at the Oct Board.	JG (via performance team)
4.5	Noted that there has been an increase in the "neglect and act of omissions" category. More qualitative work needed to understand this increase. Report to be produced at the Oct Board.	JG (via performance team)
4.6	Noted that there has been a decrease in the volume of "risk remaining" reported. This is very positive as it means that the number of people left at risk is reducing. This is felt to be as a result of training which is empowering staff and also to better data quality due to reduction in inappropriate referrals. This is supported by conversion rate from referral to investigation which has risen to 40% (2014-15) from 15% in 2012-2013.	
4.7	With regard to Deprivation of Liberty Safeguards (DoLS) the number of applications has increased by 600% in actual terms its growing all the time Definition of DoLs and threshold has been lowered by March 2014 hence the increase in applications. Care Homes and Hospitals also have a better understanding of when to apply for a DoL.	
4.8	KSJ offered to look to access A&E safeguarding data to support the performance report. KSJ thanked by the Board.	KSJ
	Self Assessment	
4.9	No response to the self assessment from CQC or GMFRS as yet.	
4.10	Discussion how to move forward from this initial self assessment, bullet points below: <ul style="list-style-type: none"> • Process needs to be open to challenge if it is felt that an organisation 	

	<p>isn't where they should be. Role of the Board is to provide scrutiny and where needed challenge.</p> <ul style="list-style-type: none"> • Need to build on self assessment – how do we do this? • KJS advised that they are conducting a mock inspection and would welcome external input regarding adult safeguarding. Will be KLOE around safeguarding included in the inspection. • KJS advised that she felt that the assessment in the performance report was more of a position statement – and that the process of self assessment re: safeguarding was far more complex. • LG advised that Pennine Care are pulling together a Bury action plan which will be shared with other divisions (includes Children's Safeguarding). New adult safeguarding lead Sian Schofield is now in place. • ML – asked for it be noted there are already assurance places in place with Pennine Acute and Pennine Care which are overseen by the CCG. Need to avoid duplication. • PJG stressed the need for each organisation to be scrutinised on their own set of standards, and how they measure up to those standards. Board agreed. <p>Based on the last bullet point, the following was agreed.</p> <p>4.11 Will operate a "buddy system" to scrutinise standards. DH will draw together a list of who will work with who. ML asked for it to be noted the PC, PA and CCG already work together regard to quality assurance – noted.</p> <p>4.12 Each Board member to look through their own set of standards and how these will be evidenced.</p> <p>4.13 Feedback to be given to Oct Board with regard to progress.</p> <p>Future of the Performance Report</p> <p>4.14 Agreed to do present the performance report in its current format every 6 months. However the time scale will be kept under review. Caveat that if significant changes/issue arise information will be brought sooner.</p>	
5.	Safeguarding Board Proposed Structure MAIN ITEM	
5.1	<p>Discussion held around the draft structure, bullet points as below:</p> <ul style="list-style-type: none"> • Need to fulfil 3 key duties – SAR's, Annual Report, Strategic Report. • KL concerned about the subgroups and the capacity to be able to manage these. • ML commented that it was her understanding that not all the groups in the proposed structure would potentially be running at first and that this proposal is based on a 2-3 year programme of work. • PJG – met with the Ops Group and the feedback was as follows: <ul style="list-style-type: none"> ○ Look to the existing Children's Workforce development group to extend to include all safeguarding training (inc adults) rather than create another group. ○ Risk review group – see a need for, Pat happy to Chair. ○ Strategic Planning group – see that as the Board's responsibility – possibly through a series of workshops. <p>Board agreed following:</p> <p>5.2 1) Prevention Group – agreed that Board Members would review that their</p>	

	organisation is doing in support of the strategy.	
5.3	2) Training/Workforce Development Group – look to the existing groups to take on this role. Report back to Oct Board on the actual structure.	MS
5.4	3)Performance and Quality Assurance Group – no group to stand. The quality assurance arm of compliance will come through the self assessment exercises as discussion in 4.10-4.12	
5.5	4) Strategic Planning group – agreed to this was the role of the Board. Series of workshops will be set up to support after the summer holiday period. MS to arrange. (2 hour afternoon) workshops	MS
5.6	5) Risk review group – Agreed this will be a standing group. PJG to pull together terms of reference and membership and report back progress to next Board.	PJG
5.7	6) Policy Review Group – this group will meet to discuss policy review as needed. Board members to come back to DH through MS to advise if the are willing to Chair.	All
5.8	ML asked where in the structure are we going to provide assurance around new areas of work (i.e. modern slavery, FGM etc)? DH to provide guidance to the “buddy’s” re: what needs to be covered. Above will also be picked up as part of the strategic planning sessions.	DH
5.9	Resources: Query raised about resourcing the new structure. MS to pull together costing document detailing what funding is needed and where current resources are coming from.	MS
5.10	KL advised that funding in the form of money would not be possible, but can offer resources i.e. people, meeting rooms and analysis.	
5.11	LG and KSJ advised that they are waiting for comment from NHS England with regard to funding local safeguarding Boards.	
5.12	DH also stressed that learning from successful Boards showed that success was achieved where members take the initiative to take ownership of work/projects. Need to be more dynamic as a Board if we are going to succeed.	
6	Any Other Business	
6.1	Nothing To Discuss	
7	Date and Time of Next Meeting <u>All Meetings will be held from 2pm to 4pm.</u>	
7.1	13 th October 2015 Irwell Room, Bury Town Hall	