

# **Safeguarding Adults Board Meeting**

10 December 2024, 13:30-16:30

#### **Present:**

- Michael Preston-Shoot (MPS) Independent Chair, SSAB
- Carolyn Smith Principal Social Worker, Strategic Lead for Safeguarding and DOLS
- Daniel Ashfield Inspector, Avon and Somerset Police
- Daniel Dray Deputy Head of Safeguarding, SWAST
- Emily Fulbrook Service Director, Adult Social Care Operational Services, Somerset Council
- Hilary Robinson CEO, RCPA Ltd
- Jan Errington Strategic Housing Manager, Somerset Council (Item 3)
- Jane Spencer Safeguarding Lead, Abri Housing Association
- Julia Mason Designated Nurse for Safeguarding Adults, NHS Somerset Integrated Care Board
- Katy Buckle Service Manager, SWAN Advocacy
- Kyleigh Callow Rough Sleeper Coordinator, Somerset Council (Item 3)
- Lisa Simpson Superintendent, Avon and Somerset Police
- Lucy Macready Public Health Specialist, Community Safety, Somerset Council
- Luke Gribble Inspector, RCRP lead, Avon and Somerset Constabulary (Item 2)
- Natalie Green SSAB Business Manager
- Sarah Hawker Advanced Customer Support Senior Leader, Avon, Somerset and Gloucestershire, Department for Work and Pensions
- Sarah Wakefield Lead Member for Adult Social Care, Somerset Council
- Simon Lewis Head of Housing, Somerset Council
- Tom Herbert Detective Chief Inspective, Avon and Somerset Police
- Tracey Pugh Safeguarding Officer, Devon and Somerset Fire and Rescue
- Trudy Craig Head of Quality and Governance, Somerset Care Ltd
- Vicky Chipchase Head of Service Adults, Policy, Performance and Assurance
- Wendy Dootson Head of Safeguarding, Somerset NHS FT

## **Apologies:**

- Ashley Fussell Head of Somerset Probation Delivery Unit
- Bethany Briers-Jones Tenancy Sustainment Officer, ABRI Housing
- Gillian Keniston-Goble Manager, Healthwatch Somerset
- Helen Orford Managing Director, Discovery
- Mel Thompson Corporate Safeguarding Lead, Livewest

- Philip Boyce Safeguarding & Closed Cultures, Care Quality Commission
- Sarah Ashe Associate Director of Quality and Nursing, NHS Somerset Integrated Care Board
- Shelagh Meldrum (SM)- Chief Nursing Officer, NHS Somerset Integrated Care Board

#### **Circulation:**

All SSAB Board Members

## **Retention of notes**

The master set of these notes and background papers are held by SSAB Business Manager. Please destroy your copy when you have finished with it and use the master set for future reference.

Item		Action by
1	Welcome, introductions, apologies and work tracker:	
	Members were welcomed to the meeting by MPS.	
	Items discussed for the work tracker:	
	PiPoT:	
	<ul> <li>Michael mentioned that he has escalated the issue of the lack of a national PiPoT system to the Department of Health and Social Care (DHSC) on behalf of the national network of SAP Chairs. He is awaiting a response from DHSC.</li> <li>Emily confirmed that the issue of the PiPoT system was raised with ADASS. However, the specific outcome of that discussion was not detailed in the meeting. Emily will follow up to provide more information on the outcome.</li> </ul>	Michael Preston- Shoot Emily Fulbrook
	MCA Training:	
	Following discussion on whether the Somerset NHS FT would continue providing mandatory MCA training, Wendy Dootson agreed to follow up the status of MCA training at Somerset NHS FT.	Wendy Dootson
2	Right Care, Right Person	
	Overview: RCRP is an initiative aimed at ensuring that individuals with health and social needs receive the appropriate care from the right professionals. It focuses on reducing the demand on police services by directing calls to the most suitable agencies, such as the NHS and local authorities.	

• Implementation in Somerset: Luke Gribble, the lead for RCRP in Avon and Somerset Police, provided an update on the implementation phases and the collaboration with partner agencies. The initiative has been rolled out in phases, starting with concerns for safety and moving towards more complex areas like mental health and conveyance under Section 136.

## Key Points:

- **Phases**: The implementation includes multiple phases, such as concerns for safety, mental health, and conveyance under Section 136.
- **Collaboration**: Strong emphasis on working with partners like the NHS, local authorities, and ambulance services to ensure a coordinated response.
- **Training and Support**: Police officers and decision-makers are trained to support the initiative, and there is a mental health link officer role to bridge gaps between police and health services.
- **Challenges**: Addressing public concerns and ensuring that the transition does not leave gaps in service provision.
- **Feedback and Impact**: The initiative has seen positive feedback, particularly in reducing inappropriate police deployments and improving service delivery to the public. However, there are ongoing efforts to monitor and address any service gaps.

For more detailed information, you can refer to the email provided by Luke Gribble: <a href="mailto:luke.gribble@avonandsomerset.police.uk">luke.gribble@avonandsomerset.police.uk</a>.



Right Care Right Person Presentation.p

# 3 Homelessness, Rough Sleeping

The meeting discussed the complex issue of homelessness and rough sleeping in Somerset, highlighting the challenges and the strategic response required to address these issues.

## **Key Points**:

- **Complex Needs**: Many individuals experiencing homelessness have multiple and complex needs, including mental health issues, substance misuse, and physical health problems.
- **Strategic Response**: The Somerset Homelessness Reduction Board is responsible for developing and implementing a strategy to address homelessness and rough sleeping. The strategy includes principles

- such as increasing prevention efforts, ending rough sleeping, and providing suitable accommodation and support.
- **Case Studies**: Specific cases were discussed to illustrate the challenges faced by individuals and the system. These cases highlighted issues such as fluctuating capacity, antisocial behaviour, and the difficulty in finding suitable accommodation and support.
- **System Concerns**: There are concerns about the length of time taken to achieve solutions, the need for multi-agency collaboration, and the flexibility of budgets and legislative discretion to address individual needs.
- Multi-Agency Collaboration: Emphasize the need for a coordinated approach involving health, social care, housing, and other relevant agencies to address the complex needs of individuals experiencing homelessness.
- **Flexible Use of Budgets**: Advocate for the flexible use of budgets to provide bespoke solutions for individuals with complex needs.
- Governance and Prioritization: Improve governance structures to ensure that homelessness and rough sleeping are prioritized and that there is a clear system for multi-agency decision-making and accountability.



#### **Next Steps:**

**Workshops and Reviews**: A follow-up workshop is planned for early 2025 to continue the discussion and develop solutions. Additionally, a safeguarding adult review focusing on homelessness is being conducted to provide further insights and recommendations.

 Vicky to coordinate the follow-up workshop on homelessness in the New Year with Alice Munro.

## Vicky Chipchase

#### **Applications to the Court of Protection:**

- Discussion on Capacity Assessments: Michael raised the issue of fluctuating capacity and disagreements about capacity assessments in complex cases. He suggested that the Court of Protection could be used to resolve these issues by ordering specialist assessments and making interim orders if necessary.
- Query on Local Examples:
  - It was asked whether there were any examples of Court of Protection cases in Somerset.

1	Someract Careguarding Addition Double	CCCITIBCI ZUZ-
	<ul> <li>ASC was requested to identify and share examples of Court of Protection cases in Somerset.</li> </ul>	Carolyn Smith
	<b>Proposal for Complex Case Panel:</b> Michael suggested the creation of a complex case panel similar to the one in Plymouth. This panel would include senior leaders from various agencies, such as the Director of Adult Social Care, the Director of Public Health, the Chief Nurse in the ICB, and a senior representative from the Police. The panel would address cases that are stuck and have not been resolved through ordinary multi-agency risk management systems.	
	• <b>Purpose and Function:</b> The complex case panel would ensure that any case referred to it is not rejected and continues to be worked on until a solution is found. This would involve the flexible use of budgets and creative use of legal powers.	
	Next Steps: Michael emphasized the need for senior leaders to convene and create this panel to address the stuck cases discussed in the meeting. Senior leaders were encouraged to take this forward.	Michael Preston- Shoot/ Emily Fulbrook/ Shelagh Meldrum/Lisa Simpson
4	MARM - how it can support you	
	MARM meetings are designed to bring together multiple agencies to discuss and manage the risks associated with vulnerable individuals, particularly those who may not meet the criteria for a Section 42 safeguarding inquiry but still face significant risks.	
	When to Use:	
	<ul> <li>Early intervention when concerns start to arise.</li> <li>During or after a safeguarding inquiry if additional risk management is needed.</li> <li>For individuals who self-neglect, refuse services, or are at risk of complex discharges from hospitals.</li> </ul>	
	Process:	
	<ul> <li>Any professional can call a MARM meeting when they identify unmanageable levels of risk.</li> <li>Identify a lead professional or agency to coordinate the meeting.</li> <li>Ensure the individual at risk is involved in the process, either directly or through an advocate.</li> <li>Clearly document risks, actions, and follow-up plans.</li> </ul>	
	Schedule follow-up meetings to review progress and adjust plans as	

necessary.

	Challenges:	ecember 2024
	<ul> <li>Challenges:         <ul> <li>Ensuring all relevant agencies attend and engage in the process.</li> <li>Overcoming misconceptions that MARM meetings are only for adult social care to lead.</li> <li>Embedding the process within agencies to ensure consistent use.</li> </ul> </li> <li>Evaluation and Improvement:         <ul> <li>An evaluation form is available to gather feedback on the effectiveness of MARM meetings: Multi Agency Risk Management (MARM) (office.com)</li> </ul> </li> <li>Organisations are requested to encourage their teams to provide feedback through the evaluation form.</li> <li>Regular reviews and updates to the process are planned to ensure it meets the needs of all involved.</li> </ul> <ul> <li>SSAB MARM December 2024.pptx</li> </ul>	All
7	Notes of previous meeting and matters arising (September 2024) and action tracker	
	The minutes of the meeting held on 04/09/2024 were reviewed and <b>agreed</b> as accurate, with no proposed redactions to the version for publication. Minutes of the September 2024 Board to be published on the website.	Natalie Green
	Action Tracker – The Board reviewed the Action Tracker and agreed that the actions highlighted had been completed.  Members were requested to provide NG with updates for the action tracker so these can be considered at the next Board and removed once the actions have been completed.  SSAB Board Work Tracker-as of Decemb	All
8	Update on Safeguarding Adult Reviews	

Due to time constraints, the following has been added post the Board meeting for your information.

- 4 received draft SAR reports being reviewed.
- Thematic Review (6 SARs) at review stage.
- Thematic Review (3 SARs) awaiting 2nd panel to consider first draft of report and recommendations.
- 1 SAR awaiting selection of an independent reviewer.
- 1 SAR awaiting a learning event.
- 2 SARs post learning event, preparing learning for circulation.

The SAR Subgroup has just considered 7 SAR referrals, for which 4 were found to meet the criteria for discretionary SARs and one for a mandatory SAR. The remaining 2 referrals required further information before a decision could be made.

Due to the number of SARs being undertaken, the subgroup is considering the themes presented and SAR with these themes currently or recently being reviewed to achieve the most efficient way to address the learning.

## 9 Performance and Assurance Report

## Safeguarding Adults Collection (SAC) Return:

- **Demographics**: 622 individuals with 655 safeguarding enquiries. 55% were female, and 61% were aged 65 or over.
- **Concerns**: Somerset reported a 5.5% decrease in safeguarding concerns, contrasting with a 5% national increase.
- **Enquiries**: 39% of concerns became enquiries in Somerset, higher than the national average of 31%.

## Types, Locations, and Sources of Risk:

- **Types**: Neglect and acts of omission (31%) and physical abuse (30%) were the most common types of abuse.
- **Locations**: 57% of abuse occurred in the individual's own home, higher than the national average of 50%.
- **Sources**: Higher percentage of service provider risks in Somerset compared to national figures.

#### Risk Assessment Outcomes:

 Risks were identified in 86% of cases, with actions taken in 97% of these cases, making Somerset one of the best-performing authorities in the Southwest.

## **Making Safeguarding Personal:**

• Desired outcomes were asked in 96% of cases, with 72% fully achieved, both figures higher than national averages.

## **Mental Capacity Assessment Outcomes:**

• 14% of clients lacked capacity, but 94% were supported by an advocate, higher than the national average.

## **Current Safeguarding Data:**

- More safeguarding enquiries are being concluded this year, averaging 66 per month.
- The average time to complete an inquiry has improved to 64 working days.
- The triage system is working well, with only one person on the waiting list at the time of reporting.

## **Practice Quality Framework**:

• Implemented in September, with positive feedback and improvements noted in the first review.

#### **Complaints and Ombudsman Reports:**

- Seven complaints received this year, with communication identified as a common theme.
- Six Ombudsman complaints, slightly increased from previous years.

## **Deprivation of Liberty Safeguards (DoLS)**:

• Increase in DoLS applications, predominantly from acute settings. Somerset's administration is comparable with other local authorities.

## Care Market Quality and Sustainability:

- 84.9% of social care settings in Somerset are rated as good or outstanding by CQC, above national averages.
- Low levels of unmet need and effective risk mitigation strategies in place.

## Governance and Safeguarding Adult Reviews (SARs):

 The board has been active in enhancing communication and engagement, with several SARs in progress or under review.

**Hate Crime Data**: The Board is awaiting the publication of the latest hate crime data from SARI. Once available, it will be included in the next

quarterly report, and a dedicated agenda item on hate crime will be considered for a future meeting.

## Engagement with those with lived experience:

- Vicky talked about the plan to involve individuals with lived experience in the Board's activities. A task and finish group is being formed to explore existing mechanisms and forums for engagement. Volunteers have already come forward, and more are welcome to join.
- Emily suggested linking with Open Mental Health, which has a group
  of individuals with lived experience relevant to safeguarding,
  homelessness, and substance misuse. This group could provide
  valuable insights and feedback.

The full performance report is attached with the presentation:



SSAB Quarterly Performance and Assi



SSAB Performance report Nov.pptx

#### The Board **agreed**:

 a. SSAB P&Q Subgroup to consider 2023/24 SARI Impact Report statistics and Hate Crime insights in its next quarterly Performance and Assurance Report on 13<sup>th</sup> February 2025.

Business

Unit

Perf&QA

b. SSAB Business Unit to progress plans to convene follow-up assurance sessions to Organisational Safeguarding Self-Audits during Autumn/Winter of 2024.

Perf&QA

c. SSAB P&Q Board to develop a forward plan of Assurance Reports for 2025 in conjunction with a revised Terms of Reference.

Perf&QA

the next Performance Report to demonstrate a partnership approach.

e. SSAB Chair to seek a formal update on timescales for completion and

d. SSAB P&Q Board to consider supplementary information and data for

**SSAB Chair** 

submission of the requested performance report from Avon and Somerset Constabulary.

## 10 Regional and National Updates

Michael provided a written paper on regional and national updates.

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Regional and National Updates for :	
Any Other Business	
SSAB Budget:	
Due to time constraints, the budget position was not presented, but is included here:	
SSAB Budget Position.xlsx	
To ensure the Board can utilise the small budget it has in the most effective way, it has agreed to commission Section 42 awareness training for those outside of Adult Social Care who undertake Section 42 reports. To maximise training opportunities, organisations are requested to share any available training resources with Natalie Green to enhance the Board's training offering.	All
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Future Board Meeting date:	
11 March 2025 09:30-12:30 via TEAMS	
	Any Other Business  SSAB Budget:  Due to time constraints, the budget position was not presented, but is included here:  SSAB Budget Position.xlsx  To ensure the Board can utilise the small budget it has in the most effective way, it has agreed to commission Section 42 awareness training for those outside of Adult Social Care who undertake Section 42 reports. To maximise training opportunities, organisations are requested to share any available training resources with Natalie Green to enhance the Board's training offering.