



Safeguarding Adults Board Meeting

17 December 2025, 13:30-16:30

Present:

- Michael Preston-Shoot (MPS) Independent Chair, SSAB
- Alexandria Hewitt - Health Improvement Manager, Public Health, Somerset Council
- Bethany Briers-Jones - Tenancy Sustainment Officer, ABRI Housing
- Carolyn Smith - Principal Social Worker, Strategic Lead for Safeguarding and DOLS
- Claire Evans - Senior Probation Officer
- Daniel Dray - Deputy Head of Safeguarding, SWAST
- Emily Fulbrook - Service Director, Adult Social Care Operational Services, Somerset Council
- Helen Orford - Managing Director, Discovery
- Hilary Robinson - CEO, RCPA Ltd
- Julia Mason - Designated Nurse for Safeguarding Adults, NHS Somerset Integrated Care Board
- Kamal Ali-Merkhbi - Head of Contracts Collaboration and Delivery, Open Mental Health
- Kirsty Larkins - Service Director Housing, Somerset Council
- Joseph Piscina representing Lisa Simpson - Avon and Somerset Police
- Louise Curry - Public Health Consultant, Somerset Council
- Natalie Green - SSAB Business Manager
- Patsy Temple - Public Health Consultant, Somerset Council
- Rachel Handley - Public Health Consultant, Somerset Council
- Ranjana Sharma - Safeguarding Service Manager, ASC, Somerset Council
- Sarah Ashe - Associate Director of Quality and Nursing, NHS Somerset Integrated Care Board
- Sarah Hawker - Advanced Customer Support Senior Leader, Avon, Somerset and Gloucestershire, Department for Work and Pensions
- Sarah Ralls - Customer Services Manager, Somerset Council
- Simon Lewis - Head of Housing, Somerset Council
- 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 - Director of Safeguarding, Somerset NHS FT

Apologies:

- Angela Kerr - VCSFE Representative
- Ashley Fussell - Head of Somerset Probation Delivery Unit
- Gill Waldron - Manager, Healthwatch Somerset
- Heather Sparks - Strategic Lead & Named Professional Safeguarding Adults, Somerset NHS FT
- Lucy Macready - Head of Service, Community Safety, Somerset Council
- Philip Boyce - Safeguarding & Closed Cultures, Care Quality Commission
- Rachel Donne-Davis - Health Psychologist, LeDeR, NHS Somerset Integrated Care Board
- Sarah Wakefield - Lead Member for Adult Social Care, Somerset Council
- Shelagh Meldrum - 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:	
	Members were welcomed to the meeting by Michael and noted apologies.	
2.	Suicide Prevention Strategy	
	Somerset Suicide Prevention Strategy Overview: Patsy Temple presented the Somerset Suicide Prevention Strategy, outlining its development, key priorities, governance structure, and ongoing implementation efforts.  SSAB Suicide Prevention strategy u Strategy Development and Consultation: The collaborative process of developing the Somerset Suicide Prevention Strategy was detailed, which involved input from the Somerset System Suicide Prevention Partnership Forum, public consultation, and multiple governance boards. The strategy was revised to include more context, data, and case studies based on public feedback, and was published in February after sign-off from relevant system boards. Key Priorities and Workstreams: The strategy condenses the national eight priority areas into three local workstreams: evidence-informed approaches, community engagement and robust evaluation. These workstreams focus on using data and lived experience, making suicide prevention a community-wide responsibility, and ensuring services are effective and appropriately targeted. Governance and System Integration: Governance for the strategy sits with the Somerset System Mortality Group, which oversees the three workstreams and is developing a preventable deaths subgroup to address overlaps between suicide, drug-related deaths, homelessness, and domestic homicide. The strategy aims to streamline learning and reduce duplication across review processes. Implementation Challenges and Actions: Patsy highlighted ongoing efforts to establish data sharing agreements, develop real-time suicide surveillance, and promote community training such as the Orange Button Scheme. There is a focus on embedding the strategy across the system, engaging partners, and addressing capacity challenges in setting up new groups.	

	Stakeholder Engagement and Questions: Kirsty Larkins emphasized the importance of linking homelessness reviews with the strategy, while Natalie Green inquired about integrating safeguarding adult reviews into the mortality review process. Michael Preston-Shoot discussed the relevance of national data and the need for local evaluation, and Carolyn Smith raised the issue of focusing on older adults in suicide prevention efforts. It was agreed to: • Arrange a follow-up discussion between Patsy and Natalie to design the process for SARS to feed into the Mortality Review Group. • Share the current membership list of the SUPPA group with Kirsty and confirm if there is representation from homelessness services. • Send the presentation from Professor Louie Appleby (National Confidential Inquiry into Suicide) to Patsy and Natalie for use in Somerset and attachment to the meeting minutes.	Natalie Green/ Patsy Temple Patsy Temple Michael Preston-Shoot
3.	Open Mental Health	
	Open Mental Health Programme in Somerset: Kamal Ali-Merkhbi provided an overview of the Open Mental Health network in Somerset, detailing its collaborative model, impact metrics, digital and community initiatives, and ongoing challenges.  Open Mental Health 17-12-25.pptx Programme Structure and Collaboration: Open Mental Health is a network of 18 local charities working with NHS and council partners, guided by experts by experience at all levels. The programme emphasizes trauma-informed care, inclusivity and co-production, and has distributed over £1 million in small grants to support community-led projects. Service Delivery and Impact: The programme operates on a 'no wrong door' principle, providing access to support through multiple channels including Mindline and local hubs. It has achieved significant reductions in hospital bed days, readmissions and A&E attendance for mental health, supporting over 80,000 interventions annually and winning national recognition for innovation. Digital Inclusion and Access Challenges: Kamal addressed digital exclusion by partnering with organizations to provide SIM cards and ensuring information is available in both digital and print formats. Efforts are ongoing to improve access for vulnerable groups, such as vehicle dwellers and those in rural areas, through community outreach and alternative communication methods. System Barriers and Collaborative Mechanisms: While the programme benefits from long-term funding and strong collaboration with statutory partners, challenges remain in engaging with some services and addressing transport barriers in rural communities. Regular collaborative meetings and programme boards provide mechanisms to address these issues, though funding constraints limit some solutions.	

	Community Engagement and Suicide Prevention: Kamal leads the suicide prevention and community engagement workstreams, with multi-agency participation and a focus on breaking stigma, promoting the Orange Button Scheme, and involving people with lived experience in all aspects of programme delivery.	
4.	Review of Management of Safeguarding Referrals from Contact	
	Carolyn Smith, supported by Ranjana Sharma and Sarah Ralls, presented the end-to-end review of safeguarding referral pathways in Somerset, detailing new guidance, process improvements, audit plans, and performance data.  Management of Safeguarding Referral Pathway Structure and Guidance: The safeguarding pathway review clarified the roles of the contact centre, safeguarding team, quality assurance, and operational teams. New guidance was developed to explain referral processes, screening outcomes, escalation routes, and the distinction between different types of meetings and inquiries. Screening and Escalation Processes: The contact centre uses the Care Act criteria and a risk decision tool to screen referrals, with a live Teams chat for advice from safeguarding managers. Escalation processes are in place for unresolved concerns and feedback templates have been updated to improve communication with referrers. Audit and Quality Assurance: A new monthly audit process will systematically review concerns resolved by the contact centre without progressing to safeguarding, with moderation by safeguarding managers. Audit findings will be reported to the Adult Social Care and Housing Assurance Board, and actions will be implemented by responsible managers. Performance Metrics and Staffing: Performance data shows improvements in pathway decision times, conversion rates, and risk outcomes, despite ongoing staffing challenges and vacancies. Targets have been set for timely allocation and completion of inquiries, with recent recruitment expected to further improve performance. Clarification of Care and Support Needs: In response to questions, Carolyn and Ranjana clarified that 'care and support needs' are interpreted broadly, including people experiencing homelessness and those with complex circumstances and that ongoing audits will monitor the application of this definition. It was agreed to send the Somerset Safeguarding Pathways guidance document to the SSAB for wider distribution and potential hosting on the SAB website.  Safeguarding Pathways Guidance 21	Carolyn Smith

5.	Notes of previous meeting and matters arising (November 2025 and action tracker)	
	Michael led the review of the previous meeting's minutes, confirming their accuracy and discussing follow-up actions. It was agreed to publish the minutes without any redactions. Natalie confirmed recent updates to the action tracker, including an update from housing about asylum seeker information, which was highlighted in green. Emily reported further progress on two of her actions and will send updates. There was specific discussion about an action related to the Office of the Public Guardian, with Emily providing details on data requests and internal improvements for tracking concerns about people with lasting power of attorney.	Natalie Green
6.	Updates on SARs	
	There are currently 16 SARs being reviewed; this is being done through thematic reviews, internal learning events and commissioned independent authors. The thematic reviews are for self-neglect and substance use, with the individuals SARs covering themes of neglect and acts of omission, transitional safeguarding, homelessness and substance use with deprivation of liberty. Due to the continued high number of referrals progressing to SARs, the SAR Subgroup considers how to achieve the learning, whilst considering the themes of current and recently completed SARs. There are also 2 referrals being considered.	
7.	Performance and Assurance Report	
	Data Quality and System Improvements: A working group has addressed gaps in safeguarding reporting by updating the Eclipse case management system, standardizing data fields, and improving tracking of referrals and inquiries. These changes aim to enhance compliance with CQC requirements and support better data analysis.  SSAB Quarterly Performance and Assi Audit and Practice Quality: Recent audits show improvements in practice quality, with results presented to the Practice Quality Board. The board is also focusing on improving data collection on ethnicity and protected characteristics to ensure equitable outcomes and compliance with CQC expectations. Care Market and Quality Assurance: The majority of social care settings in Somerset are rated good or better, with no inadequate provision currently. The quality assurance team is working proactively with providers, especially in light of CQC inspection backlogs, and is updating policies in collaboration with ICB colleagues.	

	Multi-Agency Data Sharing and Thematic Focus: A new data and quality assurance subgroup has been established to triangulate quantitative and qualitative information, identify trends, and inform continuous improvement. The first thematic focus will be on safeguarding, with plans to seek more direct feedback from service users. Out of Area Placements: Members raised concerns about assurance for out-of-area placements and the need to proactively monitor quality and safeguarding for these individuals. Vicky confirmed that out of area placements are on the subgroup's forward plan, with scoping underway for a dedicated piece of work. It was agreed that Somerset local authority and ICB would write to all nursing and residential homes to request details about out of area placements and the last review by the placing authority, to ensure compliance and oversight. Hate Crime: It was reported that Somerset was the third highest reporting authority area for hate crime referrals to SARI (Stand Against Racism and Inequality), with 98 referrals. Michael questioned how many hate crime victims had care and support needs, noting that hate crime is classified as discriminatory abuse under safeguarding, although Section 42 referrals for discriminatory abuse are very low. It was agreed to request information about hate crime leads in Somerset's community safety structures and recommended raising the issue in the Safe Somerset Partnership. Wendy agreed to take the topic to the Safe Somerset Partnership and to work with Vicky and others to identify how many hate crime victims have care and support needs, aiming to raise the profile of hate crime as discriminatory abuse.	Vicky Chipchase Wendy Dootson
8.	Regional and National Updates	
	Michael summarized recent national policy developments relevant to the board, including the new homelessness strategy, co-occurring mental health and substance use framework and clinical guidelines for alcohol treatment.  National Update for Somerset SAB from the Policy Announcements and Local Implications: The Board was informed about the release of the government's new homelessness strategy and the co-occurring mental health and substance use delivery framework. Members were encouraged to review these documents and consider their implications for local commissioning and service delivery. Commissioning and Compliance: Rachel Handley confirmed that public health commissions the drug and alcohol contract and will ensure alignment with the new clinical guidelines for alcohol treatment, as recommended in the update.	
9.	Any Other Business	
	Daniel Dray provided an update on the South Western Ambulance Service Trust's (SWAST) new safeguarding referral system, explaining its features, partner engagement and expected improvements in referral quality.	



SWAST Safeguarding
System Presentation.g

System Features and Implementation: The new digital referral system, launching in January, streamlines internal processes, mandates completion of key fields and differentiates between safeguarding and care needs referrals. The system has been tested with partner local authorities and is designed to improve data quality and routing.

Training and Professional Communication: SWAST is reinforcing training on professional communication and the importance of discussing concerns with care providers before making referrals. The new system includes prompts for consent and actions taken, and future audits will monitor compliance and feedback.

CLOSE

Future Board Meeting date:

To be confirmed