



Somerset Safeguarding Adults Board Minutes

12 October 2021 (09:30-12:30)

Microsoft Teams

Present:

- Keith Perkin (KP) Independent Chair, SSAB
- Mel Lock (ML) Director of Adult Social Services, Somerset County Council
- Superintendent Richard Turner (RT), Avon and Somerset Police
- Val Janson (VJ) Director of Quality and Nursing, NHS Somerset Clinical Commissioning Group (CCG)
- Richard Painter (RP) Director of Safeguarding & Patient and Family Centred Care, Somerset NHS Foundation Trust
- Liz Spencer (LS) Head of the National Probation Service - LDU Somerset Cluster NPS South West South Central Division Her Majesty's Prison and Probation Service
- Tracy Aarons (TA) Deputy Chief Executive, Mendip District Council
- Bernice Cooke (BC) Deputy Director Quality Governance, Patient Safety and Safeguarding, Yeovil Hospital NHS Foundation Trust
- Heather Sparks (HS) Named Professional for Safeguarding Adults, Somerset NHS Foundation Trust
- Jacob Ayre (JA) Head of Service, Swan Advocacy
- Julie Bingham (JB) Regional Manager Neighbourhoods, LiveWest
- Lucy Macready (LM) Safer Communities Manager, Somerset County Council
- Lynn Bignell (LB) DWP Advanced Customer Support Senior Leader, Department of Work and Pensions
- Mark Bodley (MB) SAB Manager North Somerset Safeguarding Adults Board
- Nick Rudling (NR) Head of Safeguarding Transformation, NHS England
- Nicola Kelly (NK) Director of Care, Somerset Care
- Helen Orford (HO) Managing Director, Dimensions
- Lucie Woodruff (LW) Chief Operating Officer, Evolving Communities
- Alison Jenkinson (AJ) Partnership Liaison Manager, Lighthouse Safeguarding Unit (LSU), Avon and Somerset Constabulary
- Stephen Miles (SM) SSAB Business Manager
- Marion Nuttall (MN) SSAB Assistant

Attendees for specific items:

- Niki Shaw (NS) Strategic Manager, Quality and Assurance, Adult Services, Somerset County Council (for item 5)
- Nainesh Pandit (NP) Team Leader, Stand Against Racism & Inequality (SARI) (for item 3)

Apologies:

- Emma Read, Deputy Designated Nurse Safeguarding Adults, NHS Somerset CCG
- Kathy Smith, Housing Officer, Golden Lane Housing
- Becky Arrowsmith, Head of Housing, Golden Lane Housing

- Cllr David Huxtable, Cabinet Member for Adult Social Care, Somerset County Council
- Alison Bell, Strategic Manager Public Health, Somerset County Council (LM representing)
- Amanda Maggs, Team Leader, Shared Lives South West
- Amanda Robinson, Safeguarding Business Manager, South Western Ambulance Service NHS Foundation Trust (SWASFT)
- Anne Harrison, Communities Manager, Devon & Somerset Fire & Rescue Service
- Claire Evans, Senior Probation Officer, National Probation Service
- Deborah Bilton, Named Safeguarding Professional for Adults, South Western Ambulance Service NHS Foundation Trust (SWASFT)
- Deborah Penny, Carers Voice Somerset Project Officer, Somerset County Council
- Gillian Keniston-Goble, Manager, Healthwatch Somerset (LW representing)
- Janet Quinn, Trading Standards Officer, Devon, Somerset and Torbay Trading Standards
- Kate Norris, Clinical Nurse Manager, Marie Curie Dorset
- Lucy Martin, Partnership Manager for Department for Work and Pensions in Somerset
- Richard Pitman, CEO, Compass Disability
- Simon Blackburn, CEO, Registered Care Providers Association Ltd
- Paul Chapman, Inspection Manager, Care Quality Commission (South West England)
- Victoria Caple, Head of Victim Care, Safeguarding & Vulnerability, Avon and Somerset Police (AJ representing)
- Bob Champion, Local Board member, Healthwatch Somerset (LW representing)

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 |
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| 1 | Welcome, introductions and apologies: | |
| | Members were welcomed to the meeting by KP. Per time constraints, a decision was taken to forego introductions. | |
| 2 | Notes of previous meeting and matters arising (June 2021) and action tracker | |
| | <p>The minutes of the meeting held on 11/06/2021 were agreed as accurate, with no proposed redactions to the version for publication. Action: SM to publish on the website.</p> <p>The action tracker was reviewed, and it was confirmed that Action 4, for KP to meet with AH, was in progress.</p> <p>There was a discussion regarding the feedback forms that were introduced in May 2021, and which SM had circulated to the Board following the last</p> | SM |

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| | meeting (Action 12). Action: All partners to share the links to the feedback questionnaires with colleagues and promote their completion. | ALL |
| | SM asked that any questions about the feedback forms be sent to him to follow up on. Action: All to note. | ALL |
| 3 | Update on discriminatory abuse in Somerset- Nainesh Pandit, Team Leader, Stand Against Racism & Inequality (SARI) | |
| | <p>NP gave a detailed presentation on SARI's services and information on hate incidents, hate crime and mate crime within the region.</p> <p>Key points included:</p> <ul style="list-style-type: none"> • SARI wants to work in partnership with other agencies and contacting NP was strongly encouraged. • Their services focus on providing person-centred support • Mate Crime is on the rise and likely underreported. • Victims are often reluctant to believe perpetrators are not their mates. • The importance of addressing prejudiced attitudes through education to prevent progression into hate crimes. This is the focus of their work. • Images shown which demonstrated how hate crimes may go unrecognised as such. <p>Challenges:</p> <ul style="list-style-type: none"> ○ <u>Reporting:</u> Lack of trust, lack of organisational specialism, fear of attracting unwanted attention, immigration status. ○ <u>Cultural:</u> Hate crimes as "normalised" experiences, accessing services only in an emergency, fear of the police because of previous experiences in other countries. ○ <u>Personal:</u> Lack of understanding of what hate crime is and its consequences, convincing other people of personal perception of prejudice/discrimination, lack of trust in the police, fear of further discrimination. <p>A discussion took place during which the following points were made:</p> <ul style="list-style-type: none"> • KP asked NP about data evidence demonstrating that Mate Crime is on the rise. NP responded that they received this information from Brandon Trust (covering mainly the former Avon area) and reports from other partners they work with, but these partners also have cases that have gone unreported at the request of the victim, and anecdotally there are many more. Other partners in the meeting indicated that it was their perception that incidents were rising. • LM said that SARI has been recommissioned for the next three years to provide Hate Crime services in Somerset. An additional outreach worker is starting and the Somerset Hate Crime and Community Cohesion Board, a subgroup of the Safer Somerset Partnership (SSP), meets on a quarterly basis to develop the strategy to address Mate Crime within Somerset. Within Public Health, a Hate Crime Needs Assessment was published last year which highlights the | |

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| | <p>disproportionate reporting rate of disability Hate Crimes in relation to their population size. The SSP has secured funding to develop a strategy and promote services to encourage reporting from within disabled communities.</p> <ul style="list-style-type: none"> • NP provided a verbal breakdown of the 29 cases they have open by protected characteristic status and of the 71 referrals they have received by ethnicity. • KP highlighted that the SSAB's focus should be maintained on those with care and support needs, given the Board's remit under the Care Act and addressing "hidden harm" for this group should be a priority. • KP raised the issue that of the 867 hate crime flagged incidents only 19 had a clear link to disability. KP asked RT to provide information on whether this data is recording both physical and "hidden" care and support needs – for example those with learning disabilities and mental ill health. RT responded that some those 19 cases did mention people with learning disabilities, however, police performance data does not distinguish between disability type, and it is likely that more than the recorded 19 victims recorded had care and support needs. Research would be needed to collect better-quality data in this regard. • KP raised testing provider understanding of hate crime and this consideration, for example, among care staff who people may initially talk to about it, and felt that this could potentially be something for inclusion the Board's next Strategic Plan. • NP said he could provide data for meetings, and that SARI's new website launched on 12/10/2021 has the figures and their breakdown across Avon and Somerset. • JA offered to share their data around the victims they support through the Victim of Crime and Advocacy Service. <p>Action: Hate Crime Needs Assessment to be circulated with notes. Action: Performance and Quality Subgroup (P&QA) to consider data that may be available from SARI, SWAN Advocacy, the Safer Somerset Partnership and the Police as it further develops its dashboard. Action: Hate Crime Needs Assessment to be considered as part of the development of the Board's new Strategic Plan for 2022/23.</p> | <p>SM P&QA</p> <p>ALL</p> |
| 4 | <p>“Matthew” Safeguarding Adults Review</p> | |
| | <p>SM gave an overview of the review and the recommendations, and the Board agreed that it should be signed-off and published in full, subject to the Board once SM had spoken to his family.</p> <ul style="list-style-type: none"> • KP asked SM to provide assurance to Board members that the agencies which have recommendations were closely consulted by both the panel and Safeguarding Adults Review subgroup (SAR) in the creation of the recommendations. SM provided details and confirmed this. • KP noted that the recommendations are much SMARTer than previously, and this is a success for the SAR subgroup. • KP asked SM for a timeline of publication. SM explained that publication may be delayed as the SAR panel had, with some discomfort, decided it was not appropriate to involve 'Matthew's family until after the report | |

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| | <p>was completed, in order to respect his stated wishes that they should not be involved in, or know about, his health and care. Publication is likely to follow 2-3 weeks after their viewing.</p> <p>Action: SM to offer to discuss the publication of the report with ‘Matthew’s family, if they wish to do so. This will include whether the report should be published under a different pseudonym.</p> <p>Action: Once agreement is received, or if ‘Matthew’s family do not respond to SM’s approach, SM to initiate the publication process.</p> | <p>SM</p> <p>SM</p> |
| 5 | <p>Performance & Quality Subgroup: Development of a SSAB Performance Report</p> | |
| | <p>NS gave a presentation on the Performance Report and highlighted how this report has been designed to be more accessible and how the data within the report fulfils the aims of the Board’s Strategic Plan.</p> <p>Positives:</p> <ul style="list-style-type: none"> • Somerset’s level of referrals for people who are unable to keep themselves safe is lower than nationally. Suggestion that this reflects the success of work to ensure safeguarding concerns are forwarded to the correct services. • Inclusion of a summary page with core messages. <p>A discussion followed in which the following points were made:</p> <ul style="list-style-type: none"> • NS took a question from NR re: why the number of safeguarding concerns and Section 42’s had decreased while the number of SAR’s had increased. KP responded that this reflects a national pattern. NR asked a follow-up question regarding whether national trends had emerged. NS responded that, as with many other Boards, this figure includes individuals who, like ‘Matthew’, would choose not to engage with services, that some of the SARs the Board is working on are historic, and there has been a recent increase in referrals likely due to greater awareness in care settings as the Board has promoted its previous SARs. SM noted that one emerging theme is self-neglect, and he noted his concerns that there may be cases of self-neglect that have been effectively hidden by people being required to self-isolate, another is SARs related to adults with learning disabilities. However, all cases remain distinct currently and the theme seems to be the type of abuse rather than the circumstances of it – however that does not mean there is not work to do across the system, especially in relation to responding more effectively to self-neglect and not dismissing it as a ‘lifestyle choice’. • KP spoke about how having both quantitative and qualitative data is positive. He wants the performance and quality data to be used to gain an understanding into why things are happening, to achieve outcomes and to demonstrate that the Board is fulfilling its assurance role across the partnership. KP noted that while the LA’s data is key, other organisations also needed to provide data to gain a fuller picture. For example, data on fire risks from DSFRS, or data from the National Probation Service. It was Agreed by all that the approach should be to collect a wide range of data and then streamline. | |

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| | <ul style="list-style-type: none"> • NS stated that mapping functionality using postcode data is being improved to identify areas of concern and opportunities to do a more targeted intervention. This shall inform part of upcoming Police Performance Data Meeting. • JA responded that SWAN Advocacy can provide further data into how many enquiries under Section 42 of the Care Act (2014) they have supported and Safeguarding Best Interest Decisions they have worked on. JA wants to meet with NS to discuss data sharing. • HS asked if other organisations are noticing the lack of awareness on self-neglect and the learning about this issue. HS suggested this should be considered by the P&QA Subgroup to identify if there were any trends, noting that Somerset NHS Foundation Trust has data on quantity of referrals, but also reasons for referral. • VJ requested additional information about how multi-agency working surrounding the Mental Capacity Act (MCA) is going. NS responded that more information on this will be available in the coming months from the organisational self-audits, and that she expects MCA compliance, competence and confidence will be a theme again as it continues to be for most Boards despite continuous work to develop practice. • LS responded that due to the current unification of the Probation Service, access to accurate case data may be delayed. However, this could be explored further in early 2022. • RP added that the Trust currently produce monthly dashboards for NHS Somerset CCG and it was agreed it is the case of these sets being looked at from a Board perspective rather than as a single agency. • ML notes that it is important to look at the data available as it is and then developing it iteratively, so actions can be taken forward, rather than waiting for a perfect data set to be available. This approach was agreed. <p>Action: NS to thank the P&QA subgroup for their work, and to inform them of the offers from agencies in this meeting to supply additional data.</p> <p>Action: P&QA Subgroup to consider data regarding self-neglect and any trends within it.</p> <p>Action: Audit analysis to be considered by the P&QA Subgroup in November/December, then presented to the Board later in the financial year. As with previous years, a summary to be included in the next annual report.</p> <p>Action: Organisations to share data with the P&QA Subgroup to enable the dashboard to be further enhanced.</p> | <p>NS</p> <p>NS</p> <p>ALL to note</p> <p>ALL</p> |
| 6 | <p>Learning from the national Analysis of Safeguarding Adult Reviews April 2017 – March 2019</p> | |
| | <p>In the presentation, SM gave a detailed presentation which highlighted that themes emerging locally are also reflective of national trends, such as self-neglect. He further highlighted the significant impact of individuals life experiences on their engagement with agencies. SM provided an overview of the contents of the report including references to specific sections that Board members may wish to review in more detail outside of the meeting</p> | |

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| | <p>and national recommendations noting that the Board has volunteered to support these.</p> <p>In terms of the reconditions for local SABs, KP confirmed that they were being monitored by the SAR Subgroup and Executive Group, and progress would be reported to the Board in the usual progress update. KP explained the process structure to inform regional and national boards about relevant findings from local SARs.</p> <p>A discussion took place during which the following points were made:</p> <ul style="list-style-type: none"> • RT asked about whether the current increase in SARs and strains on the health and care system indicate that there shall be continued increase in SARs. RT asked if the Board has a risk register, recognising that these strains might be a risk for the Board or county. RT also asked if the Board itself, or the national Board, is in contact with government to request additional support for the care sector so that the learning from SARs may be enacted. ML responded that this issue is being raised with government and provided details of regional collaborations within ADASS and local authorities to push for this. She confirmed a clear risk assessment is in place for the county and for the CCG regarding each service but also where the system is currently and where it is going. Across the South West the system is struggling in terms of care and capacity, and they will continue to request government to review the funding. KP responded that he and ML are scheduled to meet next week, and he has a task from the regional Board to look at the links between the regional SAB and regional ADASS. SM confirmed that the Board has a risk register, that is monitored by the P&QA Subgroup and reported to the Executive Group, but that this related to risks for the Board rather than the wider health and social care system or individual member organisations. • KP asked about the performance data shown during Item 5 which indicates an increase in SARs and cases of self-neglect against relatively low levels of referrals or enquires under section 42 of the Care Act. This is an issue which has emerged within national SAR work and can also be seen in local data although the numbers are relatively small when looked at a local level. KP asked for the P&QA Subgroup to look into this further. SM confirmed that a local recommendation from the 'Luke' SAR reflects national learning and that, as per the recommendations, all member organisations have recently been approached 12 months after the publication of the review to provide details of how they are ensuring staff are aware of the signs of self-neglect, and how they should be responding. <p>Action: National report to be circulated after the meeting Action: Board to be updated on the progress of the actions for local SABs in future progress updates. Action: KP to look at 'Matthew' SAR to identify issues needed to be taken to the regional and national Chairs' meetings.</p> | <p>SM SM KP</p> |
| 7 | Prevent Annual Report | |

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| | <p>LM presented an annual progress report on Prevent in Somerset, including their statutory duties and the strategies they use, the profile of Channel cases and provided detail on the trends and challenges they are identifying and the link between these to adult safeguarding.</p> <p>A discussion took place during which the following points were made:</p> <ul style="list-style-type: none"> • KP asked LM to delay providing the Board with information on the Plymouth shooting until once the IOPC and other reviews into the case have been published. LM agreed to pick this up in future. <p>Action: LM to send SM the presentation to circulate to the Board Action: KP and LM to discuss how to support robust data sharing and assist in the assurance work regarding the identification of individuals with care and support needs vulnerable to radicalisation.</p> | <p>LM & SM KP & LM</p> |
| 8 | Progress update on SSAB Strategic Plan | |
| | <p>SM provided a brief update on the Strategic Plan and SSAB self-assessment audit collection. SM confirmed that the progress update on the Strategic Plan had been circulated to Board members and that work has begun to analyse audit results.</p> <p>Action: Board members with questions on the Strategic Plan to contact SM.</p> | <p>ALL</p> |
| 9 | Developing our new Strategic Plan for 2022 onwards | |
| | <p>KP spoke about having a Task and Finish group to discuss the contents of the Strategic Plan for 2022.</p> <p>Action: Board members interested in volunteering to contribute towards the Task and Finish group plan to email SM by the end of October.</p> | <p>ALL</p> |
| 10 | SSAB Updates | |
| | <p>SM gave an overview of the progress on the self-audit to date, and the likely timescales for the results to be available to Board members.</p> | |
| 11 | Items for next meeting and newsletter | |
| | <p>Action: Any items for next newsletter and meeting to be sent to SM.</p> | <p>ALL</p> |
| 12 | Any Other Business | |
| | <p>Action: Board members with views on whether face-to-face meetings should resume should contact SM.</p> <p>KP thanked everyone for their attendance.</p> | <p>ALL</p> |
| <p>Future Board Meeting dates: 10th February 2022, Microsoft Teams Meeting. 9.30-12.30 16th June 2022, Location TBC. 09:30-12:30 13th October 2022, Location TBC. 09:30-12:30 14th February 2023, Location TBC. 09:30-12:30</p> | | |