



## Teeswide Safeguarding Adults Board

Meeting Date: **Tuesday 28 June 2016**  
 Time: **9am – 11.30am**  
 Venue: **Stockton 6<sup>th</sup> Form College**

### Minutes

Attendees		
Name	Role	Representing
Julie Allan	Head of Area	National Probation Service
Ann Baxter	Independent Chair	TSAB
Joanne Baxter (Part)	Director of Clinical Care & Patient Safety	North East Ambulance Service
Cllr Jim Beall	Lead Member	Stockton-on-Tees Borough Council
Jane Bell	Admin Officer	TSAB Business Unit
Martin Crow	Project Officer	TSAB Business Unit
Lorraine Garbutt	Business Manager	TSAB Business Unit
Barbara Gill	Director of Offending Services	Durham Tees Valley Community Rehabilitation Company
Maureen Gordon (Part)	Head of Clinical Care and Patient Safety	North East Ambulance Service
Liz Hanley	Assistant Director Adult Social Care	Stockton-on-Tees Borough Council
Stuart Harper-Reynolds	Named Nurse (Adult Safeguarding)	North Tees and Hartlepool NHS Foundation Trust
Jill Harrison	Assistant Director of Adult Services	Hartlepool Borough Council
Natasha Judge	Healthwatch Manager	Middlesbrough, Redcar & Cleveland and Stockton
Phil Lancaster	Director of Community Protection	Cleveland Fire Brigade
Angela Legg	Data Analysis and Performance Monitoring Officer	TSAB Business Unit
Gina McBride (Minutes)	Admin and Information Officer	TSAB Business Unit
Pam McNeice	Clinical Lead Learning Disabilities	South Tees CCG
Elizabeth Moody	Director of Nursing and Governance	Tees Esk & Wear Vally NHS Foundation Trust
Donna Owens	Joint Commissioning Manager	North of England Commissioning Support Unit
Barbara Potter	Deputy Lead Nurse	Hartlepool & Stockton CCG and South Tees CCG
Patrick Rice	Assistant Director of Commissioning and Adults	Redcar & Cleveland Borough Council
Lindsey Robertson	Deputy Director of Nursing	North Tees and Hartlepool NHS Foundation Trust
Sally Robinson	Director of Children and Adults Services	Hartlepool Borough Council
Erik Scollay	Assistant Director – Social Care	Middlesbrough Borough Council
Alastair Simpson	Detective Superintendent	Cleveland Police
Judith Thompson (Part)	Network Manager & Assurance Lead	North East & Cumbria Learning Disability Network
Robert Turnmore	Coordinator LeDeR Programme	LeDeR Programme

(Part)		
Helen Williams	Named Nurse Adult Safeguarding	South Tees Hospitals and NHS Foundation Trust

Apologies		
Name	Role	Representing
Katherine Acheson	Compliance Inspector	CQC
David Egglestone	Lead Manager	Durham Tees Valley Community Rehabilitation Company
Elaine Godwin	Admin Officer	TSAB Business Unit
Jean Golightly	Executive Nurse	Hartlepool & Stockton CCG and South Tees CCG
James Hart	Observer	Teesside University
Jane Johnstone	Assistant Dean Academic Developments & Governance	Teesside University
Christine McManus	Safeguarding Lead	North East Ambulance Service
Paul Mundy	Learning & Development Coordinator	TSAB Business Unit
Barbara Shaw	Corporate Director of People Services	Redcar & Cleveland Borough Council
Helen Smithies	Assistant Director of Nursing Safeguarding	South Tees Hospitals NHS Foundation Trust
Jo Tate	Head of Residence and Services	HMP Holme House Prison
Cllr Steve Thomas	Development Manager	Healthwatch Hartlepool
Cllr Dave Walsh	Lead Member	Redcar & Cleveland Borough Council
Christine Wharton	Inspection Manager	CQC

Absent		
Name	Role	Representing
Christopher Akers-Belcher	Healthwatch Manager	Hartlepool Borough Council
Nick Banfield	Governor	HMP Kirkclevington Grange
Peter Kelly	Director of Public Health	Stockton-on-Tees Borough Council
Tony Parkinson	Executive Director, Corporate and Commercial Services	Middlesbrough Borough Council
Cllr Julia Rostron	Lead Member	Middlesbrough Borough Council

**Copies:** Jenny Anderson; Peter Bell; Janene Bonas; Angela Brown; Anya Camidge; Susan Cawley; Jo Fisher; Jackie Gibson; Emily Gill  
Julie Hartley; Jas Lang; Kelly McCluskey; Pat McQuillan; Suzanne Metcalfe; Wendy Milburn; Kathryn Murray; Pamela O'Connor; Judith Oliver;  
Laura Poppleton; Rae Rynn; Mike Sharman; Denise Walker; Anne Warlow

<b>Agenda Item 1</b>	<b>Introductions and Apologies</b>	<b>Presenter:</b> Chair
<b>Discussion</b>	Introductions were made and apologies noted.	

<b>Agenda Item 2</b>	<a href="#">Minutes from the meeting held on 26/04/16</a>	<b>Presenter:</b> Chair
<b>Discussion</b>	One minor inaccuracy was highlighted. Following this amendment the minutes from the meeting on Tuesday 24 April were agreed as a true and accurate record.	

<b>Agenda Item 3</b>	<b>Matters Arising</b>	<b>Presenter:</b> Chair
<b>Discussion</b>	<p><b>Medication Distribution</b> Cllr Jim Beall (JB) noted that there is a review of pharmacies with a proposal to reduce the numbers of community pharmacists. JB reflected that this is currently under consultation; however it has not been widely circulated.</p> <p><b>Heat Map Project</b> Barbara Potter (BP) tabled a 'heat map' document for information. This shows all</p>	

	<p>Care Homes within the South Tees area and their CQC ratings. Work is ongoing to pull together this information for all areas across Tees.</p> <p><b>Links between Care Plans and Support Services</b> Sally Robinson (SR) reported that Hartlepool Borough Council (HBC) are looking at care plans and matching these directly to support services. They are working collaboratively with CQC and the CCG and incorporating the quality assurance framework.</p> <p><b>CQC Representation</b> A CQC representative with a lead for health services will be in attendance at the September Board meeting.</p> <p><b>Independent Chair 360 Degree Feedback</b> Liz Hanley (LH) advised that not all members completed feedback; however key themes will be identified from the forms submitted and circulated with the minutes of this meeting. The voice of the adult has been identified as a key area for improvement.</p> <p><b>Channel Panel Membership</b> Alastair Simpson (AS) advised that the Community Safety Partnership Leads from each of the Local Authorities attend these meetings.</p>	
<b>Action Points</b>	<b>Action Owner</b>	<b>Deadline</b>
1. Members to contact the Business Unit with any questions they have for CQC.	All	16/08/16
2. Key themes from 360 degree feedback to be circulated with the minutes of this meeting.	LH / GMc	12/07/16

<b>Agenda Item 4</b>	<b>Quality Surveillance Group (QSG) Safeguarding Issues (<i>Standing Item</i>)</b>	<b>Presenter:</b> Barbara Potter
<b>Discussion</b>	<p><b>Nursing / Residential Group</b> BP confirmed that there is no additional QSG for nursing and residential care as this topic is covered via other avenues.</p> <p><b>Safeguarding QSG LA Representation</b> An invitation has been extended to Directors of Adult Social Services within each of the Local Authorities. Erik Scollay (ES) informed that within Middlesbrough Borough Council (MBC) this would not be the appropriate level of representation for the QSG.</p>	
<b>Action Points</b>	<b>Action Owner</b>	<b>Deadline</b>
1. LAs to consider attendance at the Safeguarding QSG	DASS	12/07/16

<b>Agenda Item 5</b>	<b>Transforming Care Update</b>	<b>Presenter:</b> Judith Thompson
<b>Discussion</b>	<p>Issues have been raised previously in relation to information sharing, which can impact on appropriate planning. It was acknowledged however that there are strong links with Lesley Jeavons, NE ADASS lead for learning disability. Julie Allan (JA) mentioned that the Probation Service have not been involved in any Care Planning meetings. It was also noted that there is no representation from MAPPA (Multi-Agency Public Protection Arrangements).</p> <p>Members were informed that there is a regional Transformation Board. It was requested that Probation and MAPPA are invited to attend.</p> <p>Donna Owens (DO) confirmed that if an individual was subject to MAPPA then a representative should be invited to discuss any potential discharge.</p>	

	<p>Liz Hanley (LH) commented that although there seems to be local discussions on individuals there does not appear to be a strategic overview, which is required for the coordination of service planning. Some members were of the opinion that there is a pressure to close inpatient beds quickly, rather than the timescale being dictated by the appropriate support infrastructure being available. Elizabeth Moody (EM) stated that the 50% reduction in inpatient beds is a nationally driven incentive.</p> <p>It was noted that there also may be some disconnect between adults and children's services when making planning arrangements.</p> <p>DO explained that anyone who does not need clinical treatment should not remain within a hospital setting. She assured members that multi-agency conversations do take place, that every individual's needs are carefully considered and the risks identified. Transition plans are put in place to ensure that the individual is protected as well as members of the community.</p> <p>AS expressed his concerns that there is not enough emphasis on risk management. It was reiterated that any decisions to find an alternative placement should be a multi-agency decision and not just a clinical one. These discussions also need to be evidenced. EM informed that she was unaware of anyone being discharged without a multi-agency risk assessment being conducted.</p> <p>JT advised that up to date information can be accessed via the Transforming Care website (once available) and members can request to be added to the e-bulletin circulation list.</p>
--	--

Action Points	Action Owner	Deadline
1. Probation Service and MAPPAs representative to be invited to the Regional Transformation Board and Care and Treatment Reviews (where appropriate).	JT	12/07/16
2. Comments raised by the Board to be taken back to National Leads for Transforming Care.	JT	12/07/16
3. Update on Transforming Care to be discussed at the December Board meeting.	JT	20/12/16
4. Business Unit to provide contact details to members regarding Transforming Care e-bulletins	Business Unit	06/09/16

Agenda Item 6	Learning Disability Death Review (LeDeR)	Presenter: Judith Thompson
<b>Discussion</b>	<p>Judith Thompson (JT) conducted a presentation on the LeDeR programme.</p> <p>The key points were highlighted as follows:</p> <ul style="list-style-type: none"> <li>• Anyone can notify the LeDeR programme of a death involving someone with a learning disability.</li> <li>• Jean Golightly (JG) is the local designated contact for the Tees area.</li> <li>• It is proposed that the TSAB only becomes involved if, at the initial review stage, it is agreed that there is multi-agency involvement. An action plan will be produced and it is suggested that the TSAB and CCG will provide assurance to the QSG on a quarterly basis, in the first instance.</li> <li>• A regional steering group has been established and has multi-agency membership. JT chairs this group.</li> <li>• The LeDeR team are making close links with the QSGs.</li> <li>• Not all learning disability deaths will have a safeguarding element.</li> <li>• The projected numbers of multi-agency reviews are low.</li> <li>• A business case is being drafted to help with additional resources to carry out this work.</li> <li>• 60 staff across the region are trained as Reviewers.</li> </ul>	

- Any statutory reviews required will take precedence over the LeDeR. The LeDeR team should be notified of the death; however this review will be put on hold until the statutory review is completed.
- The Secretary of State has approved the Section 251 agreement with the National Programme (Bristol University). This will assist with information sharing, however local arrangements still need to be in place

### **Briefing Paper**

A briefing paper was circulated to members for information along with an update from the Assistant Director, Transforming Care, ADASS.

### **TSAB Involvement**

Ann Baxter (AB) reflected that the core responsibility for the TSAB is safeguarding, whilst the LeDeR programme has a wider perspective. AB reiterated that this Board covers four Local Authorities, which may impact on the number of reviews.

JT predicted that approximately 1 in 4 Learning Disability (LD) deaths would result in a multi-agency review. BP commented that she is providing support for reviews across the Tees area. So far, this has involved a lot of work; in particular time involved to collate information.

EM advised that Tees Esk & Wear Valley (TEWV) NHS Foundation Trust covers multiple Local Authority areas. EM expressed concerns over the potential work load involved. She reflected that a Serious Incident Review takes at least 60 days within the Trust and enquired what the expectations would be in terms of timescales to complete a LeDeR. JT advised that currently reviewers are being asked to record the time spent on completing a review.

AS commented that the notification process for LeDeR may need to be reconsidered. Although anyone can notify of a death, it may be that individuals expect others to do this and as a result the death is not reported at all.

It was noted that once information is gathered this often prompts more questions and the time spent on reviews should not be underestimated.

It was acknowledged that although this may be an important piece of work, members were concerned that there are no additional resources to carry this out. It was felt that professionals are already aware of contributing factors to the premature deaths of people with learning disabilities (lack of regular health checks, pre-existing health conditions, not engaged with health and care services etc). In a time of austerity, it was recognised that this is a huge piece of work which may not highlight any additional findings to those already known.

Members agreed that, for Tees, it would more appropriate for the QSGs to receive the multi-agency reviews. Close links need to be forged between the QSGs and the Regional Steering Group. It was suggested that links could also be made with the Learning Disability Partnership Boards where they still exist. Any reviews which involve a safeguarding element should be requested via the TSAB's SAR notification process.

AB requested that an update on progress is provided to the Board in 6 months.

### **Learning Event**

A LeDeR learning event is scheduled to take place on 19 July (9.30am – 3.30pm) at the Durham Centre, Belmont Industrial Estate, DH1 1TN. Members wishing to attend can register [here](#).

Action Points	Action Owner	Deadline
1. Members wishing to join the LeDeR steering group to inform JT.	All	06/09/16
2. Procedures on other reviews conducted at the same time as a LeDeR to be circulated.	GMc	12/07/16
3. Section 251 Agreement and letter to be circulated with the minutes of this meeting.	JT / GMc	12/07/16
4. JT to feedback to National Advisory Group and NHS England of the Board's recommendations.	JT	12/07/16
5. Update on LeDeR programme and whether the proposed process is working to be discussed at the December Board meeting.	JT	20/12/16

Agenda Item 7	North East Ambulance Service (NEAS)	Presenter: Joanne Baxter																								
<b>Discussion</b>	<p>JB advised that the Tees Health Scrutiny Committee have quarterly meetings and NEAS issues are routinely discussed.</p> <p>Joanne Baxter (JBa) explained the categories and response times within NEAS:</p> <table border="1"> <thead> <tr> <th>Code</th> <th>Red 1</th> <th>Red 2</th> <th>Green 1</th> <th>Green 2</th> <th>Green 3</th> </tr> </thead> <tbody> <tr> <td><b>Description</b></td> <td>Respiratory / cardiac arrest</td> <td>All other life threatening emergencies</td> <td>(new internal category/elderly falls)</td> <td>Non- life threatening but serious</td> <td></td> </tr> <tr> <td><b>Response Time</b></td> <td>8 minutes</td> <td>8 minutes</td> <td>20 minutes</td> <td>30 minutes</td> <td>1 hour</td> </tr> <tr> <td><b>Blue Lights / Sirens</b></td> <td>Yes</td> <td>Yes</td> <td>Yes</td> <td>Yes</td> <td>No Lights</td> </tr> </tbody> </table> <p>The red category response times are a national requirement and NEAS are currently commissioned to achieve 75% within 8 minutes. The green categories are not currently commissioned therefore no targets are set currently, however NEAS endeavour to meet. Green 1 is a new category and the Dispatch Protocol has subsequently been amended to include this.</p> <p>NEAS has experienced a 20% increase of red incidents compared to the same time period last year. All red calls take priority over any green calls, which unfortunately results in delays for those patients categorised as green. In addition to this there is a national shortage of paramedics which has resulted in a 20% vacancy rate within NEAS which is being addressed through international and national recruitment campaigns and extra training with universities. NEAS establishment, without vacancies also has the lowest ratio of paramedics per square mile, and, per head of population. Whilst the workforce plans are realised, NEAS have commissioned the Red Cross and St John's Ambulance service to support gaps in service provision. It was noted that these services provide technicians and not paramedics; however, this does ease some pressures. JBa explained that a 2 year programme is underway to increase the number of qualified paramedics in Sunderland and a 3 year graduate course in Teesside. They are also conducting a Rapid Improvement Workshop into how we improve responses to patient who have experienced a fall and the university is involved in carrying out some research.</p> <p>JBa commented that some nursing homes have a 'no lift' policy which is increasing the number of calls to the ambulance service when patient fall which is resulting in long and unnecessary waits. NEAS are working with the CCGs on this matter.</p>		Code	Red 1	Red 2	Green 1	Green 2	Green 3	<b>Description</b>	Respiratory / cardiac arrest	All other life threatening emergencies	(new internal category/elderly falls)	Non- life threatening but serious		<b>Response Time</b>	8 minutes	8 minutes	20 minutes	30 minutes	1 hour	<b>Blue Lights / Sirens</b>	Yes	Yes	Yes	Yes	No Lights
Code	Red 1	Red 2	Green 1	Green 2	Green 3																					
<b>Description</b>	Respiratory / cardiac arrest	All other life threatening emergencies	(new internal category/elderly falls)	Non- life threatening but serious																						
<b>Response Time</b>	8 minutes	8 minutes	20 minutes	30 minutes	1 hour																					
<b>Blue Lights / Sirens</b>	Yes	Yes	Yes	Yes	No Lights																					

In future they are looking to remodel the workforce with a real emphasis on treating people at home where appropriate, rather than being incentivised to transport patients to hospitals.

Barbara Gill (BG) enquired as to how to log instances where a delay or non-arrival of an ambulance may have had a delayed impact on a person's wellbeing. JBa informed that services are to email [risk@neas.nhs.uk](mailto:risk@neas.nhs.uk)

Phil Lancaster (PL) reported that Cleveland Fire Brigade have been heavily involved with NEAS and are providing support in code red emergencies. This is part of a national trial which has been very successful.

Action Points	Action Owner	Deadline
1. PL to provide a presentation on the joint work alongside NEAS at the next meeting	PL	06/09/16

<b>Agenda Item 8</b>	<b>Governance / Membership</b>	<b>Presenter: All</b>
----------------------	--------------------------------	-----------------------

**Discussion**

**Terms of Reference (ToR)**  
AS requested that Cleveland Police were removed from the Local Executive Group membership as he is unable to facilitate this.

Lindsey Robertson (LR) confirmed that she was the representative for North Tees and Hartlepool NHS Foundation Trust (NTHFT) and Stuart Harper-Reynolds (SHR) would deputise.

JB was of the opinion that the TSAB is a valuable meeting for Lead Members to attend. It was acknowledged that attendance has been disappointing for Lead Members in some Local Authority areas. Jill Harrison (JH) confirmed that Cllr Steve Thomas will be attending future Board meetings as a Lead Member for Hartlepool. Alternative membership should be sought for Healthwatch Hartlepool.

Natasha Judge (NJ) attends on behalf of Healthwatch Middlesbrough, Redcar and Stockton. NJ to consider if she can act as the Healthwatch link as a collective group. Healthwatch also provide valuable links to the voluntary community sector and therefore the Board will not pursue offers from Age UK or Victim Support.

JA cannot commit to offer representation at Sub-Groups although if there is a specific piece of work Probation should be involved in, she would endeavour to provide assistance.

Peter Kelly is leaving SBC and therefore there will be a gap in membership for Public Health and in his capacity as Director for SBC Local Authority.

Any gaps in membership should be addressed in other forums. JB reflected that emphasis should be on engagement rather than representations.

AB agreed to formally write to colleagues who are regularly absent and requested that an attendance matrix of Board members is included within the minutes. It was noted that an attendance analysis is also included within the Annual Report.

Company	23/02/2016	26/04/2016	28/06/2016	3
CCG	0	1*	1*	67%
Cleveland Fire Brigade	0	1*	1	67%

Cleveland Police	1	1	1	<b>100%</b>
CQC (committed to 2 meetings per year)	0	0	0	<b>0%</b>
Durham Tees Valley CRC	0	0	1	<b>33%</b>
HBC Director	0	1	1	<b>67%</b>
HBC Assistant Director	1	0	1	<b>67%</b>
HBC Lead Member	0	0	0	<b>0%</b>
Healthwatch Hartlepool	0	0	0	<b>0%</b>
Healthwatch Tees (committed to 2 meetings per year)	0	0	1	<b>33%</b>
HMP Holme House	1	0	0	<b>33%</b>
HMP Kirklevington Grange	0	0	0	<b>0%</b>
MBC Director	1	0	0	<b>33%</b>
MBC Assistant Director	1	1	1	<b>100%</b>
MBC Lead Member	0	0	0	<b>0%</b>
National Probation Service Cleveland	1*	1	1	<b>100%</b>
NHS England	0	0	0	<b>0%</b>
North East Ambulance Service	0	0	0	<b>0%</b>
North Tees & Hartlepool NHS Foundation Trust	1*	1*	2	<b>100%</b>
RCBC Director	0	1	0	<b>33%</b>
RCBC Assistant Director	1	1	1	<b>100%</b>
RCBC Lead Member	1	0	0	<b>33%</b>
SBC Director	1	0	0	<b>33%</b>
SBC Assistant Director	1	1	1	<b>100%</b>
SBC Lead Member	1	1	1	<b>100%</b>
South Tees Hospitals NHS Foundation Trust	1	1	1*	<b>100%</b>
Teesside University	1	0	0	<b>33%</b>
TEWV	1*	1*	1	<b>100%</b>
TSAB	6	4	6	<b>100%</b>

Key:  
Updated via CCG  
\*Deputy attended

### Quoracy

Members agreed that the Board meeting will be quorate, if 3 statutory partners are present.

### Monitoring Contributions

Members agreed that the minutes are sufficient to capture contributions.

### Accountability / Links to Health & Wellbeing Boards and other Strategic Structures

This item was not discussed.

### Lay Membership Proposal

The lay membership proposal was circulated for information. PL advised that this forms part of the Communication and Engagement Strategy. The Communication and Engagement Sub-Group will continue to explore the different options available and a final draft of the strategy will be presented to the Board in



	October.		
Action Points		Action Owner	Deadline
1. ToR to be updated		LG	06/09/16
2. NJ to consider if she is able to act as the overall Healthwatch link at Board meetings		NJ	06/09/16
3. Attendance matrix to be included in minutes		GMc	12/07/16
4. Communication & Engagement Strategy to be discussed at the October Board meeting.		All	18/10/16

Agenda Item 9	TSAB Q4 / End of Year 2015/16 Performance Report	Presenter: Angela Legg
<b>Discussion</b>	<p>Angela Legg (AL) highlighted the following key points:</p> <ul style="list-style-type: none"> <li>• It has been mentioned in various meetings and discussions with partners how comparisons cannot be made with the previous recording mechanisms of Alerts / Referrals however the end of year figures does not present a too dissimilar picture to the previous year. Concerns &amp; Enquiries have indicated slight decreases when compared to 2014/15 end of year data.</li> <li>• Generally in Q4 the LAs have noted an increase in concerns and a decrease in enquiries (HBC &amp; RCBC).</li> <li>• The two main categories of abuse are Neglect &amp; Acts of Omission (38%) and Physical (26%), followed by Financial Abuse (15%).</li> <li>• The introduction of the new categories of abuse had little impact during the last reporting year with minimal numbers of concerns being recorded. This could be due in part to Care Management systems not being updated and also that not all concerns transfer into S42 enquiries. The North Tees Hospitals Foundation Trust (NTHFT) data does show that 41 concerns were raised by the Trust for the Self-Neglect category during 2015/16. NTHFT data also indicates that they had concerns in relation to 'Living Conditions' and 'Unkempt' which could also be perceived as self-neglect. This could increase the number of concerns within the Self-Neglect category to 70.</li> <li>• The two main locations of abuse were Care Homes (46%) and Own Home (37%). This category has been impacted this year by the number of care home closures, medication errors and resident-on-resident incidents.</li> <li>• Both Middlesbrough and Redcar &amp; Cleveland reported that they had 3 care homes each investigated under Serious Concerns Protocol (SCP). One of these care homes in Middlesbrough also had Redcar &amp; Cleveland residents placed; therefore the Redcar Safeguarding team has been attendance at the SCP meetings. The concerns for this particular care home in Middlesbrough related to care practice. Redcar &amp; Cleveland confirmed that the majority of the issues raised were related to the management and leadership of the services rather than the care to the individuals.</li> <li>• The main themes in Care Homes for this year were in relation to: medication errors, resident-on-resident incidents, reduction in nursing bed availability and being unable to recruit high calibre managers and nurses.</li> <li>• CQC Portal – the Business Unit will include information around the mapping of CQC inspections in future performance reports.</li> <li>• Multi-agency page – now includes Fire Brigade data.</li> </ul> <p>AL advised that she is arranging a meeting with the LA Performance Leads to discuss the quality of data and the information to be captured in future. AL asked if members had any further suggestions for inclusion in future performance reports to contact her.</p>	
Action Points	Action Owner	Deadline

1. Members to contact AL with any suggestions to include in future performance reports	All	08/07/16
--	-----	----------

<b>Agenda Item 10</b>	<b>Care Act Implementation / Stock Take</b>	<b>Presenter: Chair</b>	
<b>Discussion</b>	<p>The Care Act Implementation document was circulated for information.</p> <p>MBC and RCBC have not yet published their safeguarding literature, although this is near completion.</p> <p>Information on advocates does not seem to be available across all LAs. It has been suggested that operational staff promote the use of advocates, although this does not appear consistent across all LAs. The Advocacy Hub has reported that demand has not been as high as expected. MC suggested that links are made between the Hub and the PPP and PAQ Sub-Groups.</p>		
<b>Action Points</b>		<b>Action Owner</b>	<b>Deadline</b>
1. Links to be made between the Advocacy Hub, PPP and PAQ Sub-Groups		HS / ES	19/08/16

<b>Agenda Item 11</b>	<b>Safeguarding Refugees and Asylum Seekers</b>	<b>Presenter: Chair</b>	
<b>Discussion</b>	<p>The following questions were asked prior to the meeting and it was requested that members to provide feedback:</p> <ul style="list-style-type: none"> <li>• Current and expected numbers of asylum seekers</li> <li>• Levels of vulnerability / safeguarding issues</li> <li>• Impact on universal / specialised services</li> <li>• Any issues of which the Board should be aware</li> </ul> <p>Members felt that this subject matter needed to be looked at in more detail and that potentially a working group should be established. AS commented that asylum seekers and refugees can be targeted for human trafficking as they are perceived as vulnerable. There are also links to domestic abuse and deprivation.</p>		
<b>Action Points</b>		<b>Action Owner</b>	<b>Deadline</b>
1. Business Unit to request information on refugees and asylum seekers.		Business Unit	12/07/16
2. Business Unit to collate information and present to the next Board meeting.		Business Unit	06/09/16
3. Board members to consider whether a working group is required to find out further information in relation to refugees and asylum seekers.		All	06/09/16

<b>Agenda Item 12</b>	<b>Strategic Business Plan 2016/17</b>	<b>Presenter: Chair</b>	
<b>Discussion</b>	<p><b>Work Plans</b> Work plans are being developed for all Sub-Groups. LEG Chairs will consider whether they want to develop their own work plans.</p> <p><b>Timeline Overview</b> This document was circulated for information. It outlines the Strategic Business Plan's objectives, associated timescales and which group within the Board's structure is leading on each of the objectives.</p> <p><b>Timetable for Reports</b> This document was circulated for information. The Quality Assurance Framework / Self Audit Tool process began in April 2016. Following completion of the audit, each agency will present their findings to the Board – there will be 2 presentations per meeting. The first agencies to present will be CCG and SBC in September.</p>		
<b>Action Points</b>		<b>Action Owner</b>	<b>Deadline</b>

1. CCG and SBC to present QAF findings to the Board in September	JG/LH	06/09/16
--	-------	----------

<b>Agenda Item 13</b>	<b>Strategic Co-ordination of Activities to Prevent and Respond to Domestic Abuse</b>	<b>Presenter:</b> Liz Hanley	
<b>Discussion</b>	<p>JB advised that a steering group has been pulled together as part of the Health and Wellbeing Board to look at a collective domestic abuse strategy within SBC.</p> <p>If deemed appropriate, the Board may feel that this model is adapted across Tees.</p>		
<b>Action Points</b>	<b>Action Owner</b>	<b>Deadline</b>	
1. JB to feedback on developments in relation to the Domestic Abuse Strategy	JB	06/09/16	

<b>Agenda Item 14</b>	<b>Update from Sub-Groups</b>	<b>Presenter:</b> Sub-Group Chairs	
<b>Discussion</b>	<p><b>Communication and Engagement (CE) – Phil Lancaster (PL)</b>  <b>TSAB Awareness Day</b>  An awareness day has been scheduled to take place on 15 July to formally launch the Board’s safeguarding information. PL will lead on any media release. The awareness day is linked to the regional radio campaign which runs for 8 weeks throughout the summer period.</p> <p><b>Safeguarding Awareness Video</b>  A Safeguarding Awareness video was shown to members. There are two versions. The shorter version will be used via social media and the slightly longer version will be uploaded to the TSAB website.</p> <p><b>Learning Training and Development (LTD) – Sally Robinson (SR)</b>  <b>Domestic Abuse Conference</b>  Members agreed for the Board to host a Domestic Abuse conference. A working group is to be set up to fulfil this task. LG asked for members to contact her with any volunteers who would like to be involved.</p> <p><b>Training Workbooks</b>  The workbooks are in final draft and are available online. Members should contact the Business Unit with any comments prior to formal publication.</p> <p><b>Performance Audit and Quality (PAQ) – Erik Scollay (ES)</b>  ES is the newly appointed chair for this group. At the last PAQ meeting they reviewed the Terms of Reference and established workload priorities. The group are looking to improve the quality and consistency of data and are hoping to improve two-way communication between the Board and the Sub-Group.</p> <p><b>Policy Procedures and Practice Guidance (PPP) – Lorraine Garbutt (LG)</b>  In the absence of Helen Smithies, LG provided and update as follows: <ul style="list-style-type: none"> <li>• MCA DoLS Policy is in development and the TSAB has commissioned this piece of work</li> <li>• A work plan has been developed</li> <li>• A small working group is to be set up to review Teeswide policies and procedures, including the development of a Grievance and Malpractice Policy and Self-Neglect practice guidance</li> </ul> </p> <p><b>Safeguarding Adult Review (SAR) – Alastair Simpson (AS)</b> <ul style="list-style-type: none"> <li>• South Tees Hospitals NHS Foundation Trust presented a Single Agency Report and Action Plan.</li> <li>• A new SAR Notification was discussed, however TEVV were not present at the meeting, and further information was sought.</li> </ul> </p>		

	<ul style="list-style-type: none"> <li>SAR Policies and Procedures have been published.</li> <li>Family involvement discussed.</li> </ul> <p><b>SAR 3 Update – HBC</b> SR advised that the report should be completed and presented to the Board meeting in December, ready for publication in the new year.</p>
--	--

Action Points	Action Owner	Deadline
1. Members to contact LG with volunteers for Domestic Abuse Conference Working Group	All	12/07/16
2. Members to contact Business Unit with any final amendments to the training work books.	All	12/07/16
3. SAR3 Report to be discussed at the December Board meeting.	SR	20/12/16
4. SAR Report to be published in the new year.	Business Unit	TBC

<b>Agenda Item 15</b>	<b>Making Safeguarding Personal (MSP)</b>	<b>Presenter:</b> Lorraine Garbutt	
<b>Discussion</b>	<p><b>Temperature Check</b> As part of a national incentive, a number of LAs have been contacted to complete a stock take on Making Safeguarding Personal. Redcar &amp; Cleveland Borough Council (RCBC) and HBC have both been involved. A national report will be produced and circulated when available.</p> <p><b>ADASS Toolkit</b> Members of the Operational Leads Practice Group (OLPG) felt that aspects of the toolkit could be used to analyse how well MSP is incorporated into the QAF/ self-audit process.</p> <p><b>Operational Leads Practice Group Minutes</b> The minutes from the meeting held on 7 June 2016 were circulated for information.</p>		
<b>Action Points</b>	<b>Action Owner</b>	<b>Deadline</b>	
1. National MSP Temperature Check Report to be circulated once available	Business Unit	TBC	

<b>Agenda Item 16</b>	<b>Children and Vulnerable People in Custody</b>	<b>Presenter:</b> Alastair Simpson	
<b>Discussion</b>	AS advised that he is in the process of pulling together a summary report which will include recommendations to the TSAB and LSCBs.		
<b>Action Points</b>	<b>Action Owner</b>	<b>Deadline</b>	
1. CVPIC Report to be discussed at the next meeting.	AS	06/09/16	

<b>Agenda Item 17</b>	<b>Finance Report</b>	<b>Presenter:</b> Chair	
<b>Discussion</b>	A finance report was circulated to members. It was requested that the statutory partners meet to discuss the options available.		
<b>Action Points</b>	<b>Action Owner</b>	<b>Deadline</b>	
1. Business Unit to arrange a meeting with statutory partners to discuss finance arrangements.	Business Unit	12/07/16	
2. Updated finance report to be presented at the next meeting.	Chair	06/09/16	

<b>Agenda Item 18</b>	<b>North Tees &amp; Hartlepool NHS Foundation Trust – CQC Inspection Action Plan</b>	<b>Presenter:</b> Lindsey Robertson	
<b>Discussion</b>	LR noted that the Action Plan is out of date and has since been updated. Following a recent unannounced visit from CCG, feedback was very positive, in particular in relation to DoLS.		

<b>Agenda Item 19</b>	<b>Any Other Business</b>	<b>Presenter:</b> All	
<b>Discussion</b>	None.		

Next Meeting Date: **Tuesday 6 September 2016**  
Time: **1.30pm – 4pm**  
Venue: **Stockton 6<sup>th</sup> Form College**

Minutes authorised by Independent Chair on 05/07/16

A handwritten signature in black ink, appearing to read "Daxve".