



Teeswide Safeguarding Adults Board

Meeting Date: **Wednesday 26 April 2017**
 Time: **1.30pm – 4pm**
 Venue: **25k Youth & Community Centre**

Minutes

Attendees

| Name | Role | Representing |
|------------------------|--|--|
| Karen Agar | Associate Director of Nursing | Tees Esk & Wear Valley NHS Foundation Trust |
| Julie Allan | Head of Cleveland Area | National Probation Service |
| Ann Baxter | Independent Chair | TSAB |
| Mandy Cockfield | Service Manager Adults and Safeguarding | Redcar & Cleveland Borough Council |
| Martin Crow | Project Officer | TSAB Business Unit |
| Lorraine Garbutt | Business Manager | TSAB Business Unit |
| Jean Golightly | Director of Nursing and Quality | Hartlepool & Stockton CCG and South Tees CCG |
| Liz Hanley | Assistant Director Adult Social Care | Stockton 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 |
| Debbie Howe | Inspector | CQC |
| Phil Lancaster | Director of Community Protection | Cleveland Fire Brigade |
| Gina McBride | Admin and Information Officer | TSAB Business Unit |
| Patrick Rice | Interim Director Adult Care & Health | Redcar & Cleveland Borough Council |
| Sally Robinson | Director of Child and Adults Services | Hartlepool Borough Council |
| Lyn Romeo (Part) | Chief Social Worker for Adults | |
| Anne-Marie Salwey | Detective Superintendent – Head of Specialist Crime | Cleveland Police |
| Erik Scollay | Director of Adult Social Care and Health Integration | Middlesbrough Borough Council |
| Sue Smith (Part) | SARC Manager | SARC |
| Helen Smithies | Assistant Director of Nursing Safeguarding | South Tees Hospitals NHS Foundation Trust |
| Christine Wharton | Inspection Manager | CQC |

Apologies

| Name | Role | Representing |
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| Katherine Acheson | Compliance Inspector | CQC |
| Cllr Jim Beall | Deputy Leader and Adult Social Care & Health | Stockton Borough Council |
| Jane Bell | Admin Officer | TSAB Business Unit |
| Chris Brown | Deputy Director of Quality Assurance | NHS England |
| Natasha Judge | South Tees Healthwatch Manager | Middlesbrough, Redcar & Cleveland and Stockton |
| Angela Legg | Data Analysis and Performance Monitoring Officer | TSAB Business Unit |
| Toni McHale | Programme Manager | Healthwatch Tees |
| Christine McManus | Safeguarding Lead | North East Ambulance Service |

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| Elizabeth Moody | Director of Nursing and Governance | TEWV |
| Mel Newton | Senior Lecturer in Nursing from the School of Health and Social Care | Teesside University |
| Barbara Potter | Head of Quality and Adult Safeguarding | Hartlepool & Stockton CCG and South Tees CCG |
| Lindsey Robertson | Director of Nursing, Patient Safety & Quality | North Tees & Hartlepool NHS Foundation Trust |
| Steve Rose | Chief Executive | Catalyst (North Tees) |
| Cllr Steve Thomas | Lead Member | Hartlepool Borough Council |
| Victoria Wilson | Service Manager | Redcar & Cleveland Borough Council |
| Cllr Dave Walsh | Lead Member | Redcar & Cleveland Borough Council |
| Ann Workman | Director of Adults & Health | Stockton-on-Tees Borough Council |

| Absent | | |
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| Name | Role | Representing |
| Christopher Akers-Belcher | Healthwatch Manager | Hartlepool Borough Council |
| David Egglestone | Lead Manager | Durham Tees Valley Community Rehabilitation Company |
| John Graham | Director of Operations | Durham Tees Valley Community Rehabilitation Company Limited |
| Cllr Julia Rostron | Lead Member | Middlesbrough Borough Council |
| Jo Tate | Head of Residence and Services | HMP Holme House Prison |

Copies: Peter Bell; Susan Cawley; Jackie Gibson; Emily Gill; Suzanne Glass; Lorna Harrison; Colin Holt; Jas Lang; Pat McQuillan; Suzanne Metcalfe; Pamela O'Connor; Judith Oliver; Laura Poppleton; Mike Sharman; Rachael Surtees; Dave Turton; Anne Warlow

| Agenda Item 1 | Introductions and Apologies | Presenter: Chair |
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| Discussion | <p>Introductions were made.</p> <p>Ann Baxter (AB) welcomed Lyn Romeo (LR), Chief Social Worker for Adults (England) who introduced herself to Board members.</p> <p>LR explained that she works closely with Isabelle Trowler, Chief Social Worker for Children and Families (England). LR summarised their roles and priorities, as follows:</p> <ul style="list-style-type: none"> • education, training and regulation of social workers • support and challenge the profession to ensure that children and adults get the best possible help from social workers • provide independent expert advice to ministers on social work reform, and the contribution of social work and social workers to policy implementation more generally • provide leadership and work with key leaders in the profession and wider sector to drive forward the improvement and reform programme for social work • challenge weak practice to achieve decisive improvements in the quality of social work • provide leadership to the network of principal social workers • influence statutory guidance • promote integrated working with health colleagues, Local Authorities etc. • LR is a member of LGA, ADASS Network and Chair of the Safeguarding Leadership Group • improve guidance for Social Workers – there is a dedicated Making Safeguarding Personal group | |

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| | <p>LR advised that her annual report is available online. She also has a blog and twitter account and encouraged members to use these. AB advised that the Business Unit will forward any relevant queries to LR on behalf of members.</p> <p>Jean Golightly (JG) indicated that there are a lot of good examples of multi-agency working across Tees. JG reflected that from a national perspective further work is needed on Information Governance, Learning Disabilities and Transforming Care.</p> | |
| Action Points | Action Owner | Deadline |
| 1. Members to contact the Business Unit with any queries for LR | All | 28/06/17 |

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| Agenda Item 2 | Minutes from the meeting held on 03/03/17 | Presenter: Chair |
| Discussion | The minutes from the meeting held on 3 March 2017 were agreed as a true and accurate record. | |
| Action Points | Action Owner | Deadline |
| 1. Approved minutes to be uploaded to the TSAB website | Business Unit | 10/05/17 |

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| Agenda Item 3 | Matters Arising | Presenter: Chair |
| Discussion | <p>Meeting with Hartlepool Deaf Centre In the absence of Lindsey Robertson this item was not discussed.</p> <p>Vulnerable Exploited Missing Trafficked (VEMT)</p> <ul style="list-style-type: none"> • Agenda Anne-Marie Salwey (AMS) has asked that adult agenda items are discussed at the beginning of meetings wherever possible. • Partnership Arrangements The strategic and governance arrangements are to be considered once Erik Scollay (ES) has attended a VEMT meeting. • Representation ES was unable to attend the previous meeting; he will attend the next and provide feedback to the Board. <p>E-CINS AMS advised that there is a significant amount of interest in this system and training events have been oversubscribed.</p> <p>Complaints Policy Now available on the Board's website.</p> <p>Outcome of Cleveland Fire Brigade Conference – Joint work with NEAS AB wrote a letter to the Fire Brigade national leads to support continuation of this work. Phil Lancaster (PL) informed the Fire Brigade Union voted at the conference to continue with the pilot until November 2017. This will enable negotiations to take place with employees to determine if this work will become a core element of Fire Service business.</p> <p>TEWV Data Q3 TEWV performance data was checked and it was confirmed that the increase was due to TEWV's recent expansion. The TSAB Q3 performance report was amended to include Tees figures and recirculated.</p> <p>Discharge to Assess Report – Implementation Process Stuart Harper-Reynolds (SHR) advised that Rosedale and Westview are using</p> | |

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| | <p>this.</p> <p>Feedback from TSAB Development Day AB thanked attendees for their contribution at the Development Day and advised that discussions have contributed to the revision of the Strategic Plan. AB expressed her disappointment with the level of attendance and asked that all members prioritise next year's Development Day scheduled to take place on 7 March 2018.</p> | |
| Action Points | Action Owner | Deadline |
| 1. Meeting with Hartlepool Deaf Centre to be discussed at the next meeting | Lindsey Robertson | 28/06/17 |
| 2. Business Unit to circulate invitations for 2018 Development Day | Business Unit | 28/06/17 |

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| Agenda Item 4 | Transforming Care | Presenter: Chris Brown |
| Discussion | <p>Chris Brown (CB) sent late apologies; therefore this item was not discussed.</p> <p>AB requested that JG contacts Bev Reilly to express the Board's disappointment and to ask that CB attends the next meeting on 28 June 2017.</p> | |
| Action Points | Action Owner | Deadline |
| 1. JG to contact Bev Reilly | JG | 10/05/17 |
| 2. Business Unit to invite CB to the next meeting | Business Unit | 17/05/17 |

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| Agenda Item 5 | Tees LEDER Issues | Presenter: Jean Golightly |
| Discussion | <p>JG provided an update of progress that has been achieved in relation to reducing premature mortality of people with learning disabilities across Cumbria and the North East.</p> <p>Communication Communication briefings aimed at CCGs/Primary Care, Trusts, Local Authorities and families have been circulated widely. All are available on the LeDeR website including a wide range of other helpful resources.</p> <p>North Region Co-Ordinator - Maria Foster, NHS England has been appointed as the North region co-ordinator for the LeDeR programme.</p> <p>Local Area Contacts/Steering Group The Directors of Nursing & Quality in all Cumbria and North East CCGs are the Local Area Contact for their locality for the LeDeR programme.</p> <p>Local Area Contacts are providing locality leadership and co-ordination for the reviews of deaths they also have oversight of implementation of the programme across Cumbria and North East.</p> <p>NHS England Cumbria and North East LeDeR pilot has progressed to full implementation. The original steering group established to oversee the setting up of the pilot now needs to be fully revised in terms of activities and membership to ensure representatives are of sufficient seniority within their localities to provide leadership and steer about how the programme will be operationalised locally.</p> <p>The revised Terms of Reference are being developed. Core members are CCGs Directors of Nursing, however the group is working to identify other key stakeholders to include:</p> <ul style="list-style-type: none"> • ADASS lead representing, at a senior level, the Local Authorities adult social care | |

- Safeguarding Adult Board manager or chair representing SABs across the region
- Safeguarding Forum lead representing 'designated clinicians' across the region
- Family carer lead representing the Family Carer Forum across the region
- Child Death Overview Panel (CDOP) lead representing CDOP across the region
- Chris Brown, Deputy Director of Quality Assurance, CNE, NHS England
- Maria Foster, NHSE North Region LeDeR co-ordinator
- Coroner's office representation
- Learning from Deaths lead from a Trust
- Primary and secondary care representatives
- Care Quality Commission learning disability lead

The revised Steering Group has a meeting schedule for the remainder of this year and JG will be working over the coming weeks to establish the wide representation listed above.

LH agreed to attend in her role as Chair of the North East Region Safeguarding Adults Network Group.

Reviewers peer- to- peer support network

Now there is a more locality based approach, led and co-ordinated by the Local Area Contacts. Discussions are underway to implement this.

Training

There are a significant number of trained reviewers across Cumbria and North East. JG explained that the training is moving towards a 'train the trainer' model for reviewers to enable sustainability for the future and to provide some additional capacity in the long term.

Learning from Deaths

The [Learning from Deaths Guidance](#) was published during March. This places a responsibility on all Trusts to carry out reviews of all deaths of people with learning disabilities using the LeDeR methodology (where it is in an implementation area; Cumbria and North East is an implementation area) and all Trusts must publish a dashboard (quarterly) of all deaths including those of people with learning disabilities; these requirements were for implementation from 1 April 2017.

Governance

NHS England Cumbria and North East have 2 Quality Surveillance Groups.

There is a region-wide approach, locally delivered, to carry out learning disability mortality reviews. This ensures that service improvement is implemented locally and the system is held to account as a result of learning from reviews to ensure premature and avoidable mortality of people with learning disabilities are tackled.

There are no additional resources to conduct these reviews. The Trusts already carry out a review of all deaths in hospital and in North Tees and Hartlepool NHS Foundation Trust (NTHFT) the LeDeR process runs alongside this. SHR advised that a system has been set up which will flag patients with a learning disability. Jill Harrison (JH) asked if there was any indication of the level of activity expected. LA would be notified of LeDeR reviews in their area. SHR informed that if a Safeguarding Concern form is found as part of the review they would contact the LA.

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| | Board members agreed that a further update in 6 months would be helpful and would also provide an opportunity for the Trusts to share findings from local reviews. | |
| Action Points | Action Owner | Deadline |
| 1. JG to send Steering Group dates to LH | JG | 17/05/17 |
| 2. Update on LeDeR progress to be brought to a future Board meeting | JG/Trusts | 18/10/17 |

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| Agenda Item 6 | QSG Safeguarding Issues (Standing Item) | Presenter: Jean Golightly |
| Discussion | <p>JG reiterated that Local Authority attendance is welcomed at these meetings.</p> <p>JG advised that student nurses have been withdrawn from a nursing home in Stockton-on-Tees. This continues to be monitored.</p> | |

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| Agenda Item 7 | Sexual Assault Referral Centre (SARC) | Presenter: Sue Smith |
| Discussion | <p>Sue Smith (SS) advised that the SARC works in partnership with Police, Health and support services to provide crisis intervention and continued support for victims of rape and assault.</p> <p>If the criminal route has been exhausted there are alternative options through SARC (only 20% of referrals received want this to be reported to the police).</p> <p>SARC have implemented a new Safety and Support Assessment (SAS) that was commissioned by the Home Office. Previously, different forms were used - this new paperwork will track the individual through the care pathway and transfer with them across agencies throughout their journey.</p> <p>SARC are members of the Tees Tackling Sexual Violence Implementation Group (TTSVIG) which brings together commissioners and service providers to develop services and raise awareness of the issue. This also includes commissioning accredited training sessions for Independent Sexual Violence Advisors (ISVAs) which focus on the Crown Court System and court offences.</p> <p>SS explained that there are standard operating procedures in place:</p> <ul style="list-style-type: none"> • should an individual wish to withdraw from criminal proceedings • if criminal justice decide there should be 'no further action' • if no crime has taken place in the first instance. <p>Work is ongoing to improve contact with individuals by identifying an appropriate time and means of contact. Meetings can take place with a SARC member of staff and an ISVA if an individual retracts or disengages as there may be external factors (such as coercion) which have contributed to this decision.</p> <p>The number of referrals to SARC has increased by 20% year on year. There are approximately 700 clients a year across the Tees area. SS was of the opinion that the increase is due in part because more people are coming forward and an increased public awareness of the subject.</p> <p>SARC are able to offer anonymous intelligence and can collect forensic evidence without police involvement. This allows the victim to take time to decide whether they wish to press charges.</p> <p>SHR enquired about patients disclosing information within the Trust but not giving consent to share that information. AMS confirmed that the Trust should record this and notify the police – this can be done anonymously.</p> | |

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| | SS circulated some information cards and advised that these can also be sent electronically. | | |
| Action Points | Action Owner | Deadline | |
| 1. SS to email information cards to the Business Unit | SS | 10/05/17 | |
| 2. Business Unit to circulate SARC information with the minutes | GMc | 17/05/17 | |

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| Agenda Item 8 | Police Matters | Presenter: Anne-Marie Salwey | |
| Discussion | <p>CVPIC Action Plan AMS advised that the CVPIC Action Plan has been circulated to the Tees LSCBs and TSAB. Paul Haytack (Cleveland Police) is taking the lead on this work. AMS talked through the plan and highlighted elements applicable to vulnerable adults.</p> <p>AMS suggested that another update is provided to the Board in June.</p> <p>Operation Shield Operation Shield is the Cleveland Police review into Child Sexual Exploitation and Abuse cases. Work is ongoing in relation to information sharing/intelligence gathering and improving categorisation of cases. AMS explained that there is some crossover with Domestic Violence.</p> <p>Sexual Exploitation resources from Newcastle City Council were circulated for information.</p> <p>Modern Slavery / Human Trafficking AMS explained that this type of crime can be difficult to detect and there has been minimal reporting in the Tees area. It is uncertain where Human Trafficking and Modern Day Slavery should sit in terms of governance and although currently within VEMT, it is likely to have an impact on the current VEMT structure. AMS explained that there are arrangements in place with the Salvation Army to provide accommodation and support for victims, but that this is usually for the very short term. It is recognised that there needs to be multi-agency systems and resources in place to support and manage these individuals on a longer term basis.</p> <p>AMS mentioned that there is a national steer to drive activity and raise awareness in locations (e.g. ports) across the country.</p> <p>AMS informed that Matt Murphy-King (MMK) is delivering training using a number of case studies. It was suggested that MMK could attend a future Board meeting to provide an update on Modern Day Slavery.</p> | | |
| Action Points | Action Owner | Deadline | |
| 1. Updated CVPIC Action Plan to be discussed at the next TSAB meeting | AMS | 28/06/17 | |
| 2. MMK to attend a future Board meeting to discuss Modern Day Slavery | AMS | 06/09/17 | |

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| Agenda Item 9 | Update from the Sub-Groups | Presenter: Sub-Group Chairs | |
| Discussion | <p>Communication and Engagement (CE) – Phil Lancaster</p> <ul style="list-style-type: none"> Chairing Arrangements PL advised that he will no longer be chairing the CE Sub-Group and that Dave Turton (DT), will be taking on this responsibility. PL is also Deputy Chair of the TSAB and proposed that if members were in agreement, DT also takes on this role – members agreed to this proposal. <p>AB thanked PL for his contribution to the Board.</p> | | |

- **CE Report / Strategic Plan**

The CE report was discussed at the Board's Development Day and elements have been incorporated into the TSAB Strategic Plan. The Strategic Plan will also support the development of the CE Sub-Group's work plan for 2017/18.

- **Prevention**

Discussions have taken place as to whether prevention sits within the CE Sub-Group. This will be discussed at the next Sub-Group meeting and it may be that a Task & Finish Group is set up to take the prevention agenda forward.

- **Regional Safeguarding Adults Awareness Campaign**

Liz Hanley (LH) advised that this campaign was previously funded on behalf of the North East region by ADASS, at an approximate cost of £5k-£6k; however they are no longer able to do so. Overall this has been a positive campaign and LH asked if the Board would consider contributing to funding the campaign for 2017/18. LH will take this suggestion to the regional group to determine the scope and how to get the most value. This will then be drafted as a formal business case and presented to all North East Safeguarding Adults Boards. If agreed, the cost to the TSAB would be between £1.5k and £2k per annum.

Learning Training and Development (LTD) – Sally Robinson

- **Domestic Abuse and Adult Safeguarding Conference**

This event takes place on 4 May and is fully booked.

- **Virtual College E-Learning**

Negotiations are ongoing to commission a 'Pan' agreement jointly with the four Tees LSCBs.

The Sexual Exploitation contract has expired and negotiations are taking place.

- **Training Plan**

This will be discussed at the next Sub-Group meeting. SR explained that a significant proportion of the training budget is allocated to the Provider Manager's course; alternative training providers are being explored. SR advised that there is a need to consider the staffing resources required within the Business Unit to support the work of the LTD Sub-Group going forward.

- **MAPPA E-Learning**

Julie Allan (JA) highlighted that there is a free MAPPA e-Learning course available via the MAPPA website. To access click [here](#).

Performance Audit and Quality (PAQ) – Erik Scollay

Erik Scollay (ES) informed members that the frequency of these meetings has changed to quarterly.

- **Strategic Overview Report**

This was discussed at the Development Day and the Sub-Group will look at actions from the report and factor these into the work plan. There will also be a number of actions from the Strategic Plan to incorporate.

Policy Procedures and Practice Guidance (PPP) – Ann Workman

In the absence of Ann Workman, LG provided an update.

- **Risk Register**

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| | <p>A number of documents were circulated for comment. This included; a Risk and Opportunity Management Policy and Strategy, Risk Management Process, Risk Register template and a profile form. These documents set out the Board's intention around risk and how risks will be managed. There are two levels of risk: strategic; which will be managed by the Board, and operational; which will be managed by the relevant Sub-Group.</p> <p>It was questioned how the risk register should be populated and whether a workshop is held specifically to look at identifying risks.</p> <p>JG felt that the Board should be clear on who manages these risks and that this should not be the Board's responsibility. JG felt that appropriate organisations should provide assurance to the Board that these risks are being managed. Although this element is covered within the documentation, AB suggested that this is discussed further at the workshop.</p> <p>LG asked that members provide any feedback on the risk register documentation to the Business Unit.</p> <p>Safeguarding Adult Reviews (SAR) – Helen Smithies</p> <ul style="list-style-type: none"> • Learning from Serious Concerns Protocol <p>The Terms of Reference for the SAR Sub-Group have been slightly amended to ensure that learning from other processes such as the Serious Concerns Protocol is cascaded across Tees.</p> <ul style="list-style-type: none"> • SAR Policy and Procedures <p>A mini-review of the SAR Policy and Procedures has been undertaken. Employees with experience of using the SAR procedures during SAR3 were asked to review the documentation and provide comments and recommendations. The revised version will be considered at the next SAR Sub-Group meeting.</p> |
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| Action Points | Action Owner | Deadline |
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| 1. North East Regional Awareness Campaign Business Case to be discussed at the next Board meeting | LH | 28/06/17 |
| 2. Members to feed back any comments on the Risk Register documentation to the Business Unit | All | 11/06/17 |
| 3. Risk Register Strategy review to be changed to a 3 yearly cycle | LG | 11/05/17 |
| 4. Business Unit to arrange a Risk Management workshop for operational leads and TSAB members | Business Unit | 07/08/17 |

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| Agenda Item 10 | TSAB Accountability Arrangements Report | Presenter: Chair |
| Discussion | <p>AB presented a short summary report highlighting the key themes of discussions at meetings she attends as part of the Accountability Arrangements. AB will continue to keep a record and will produce a fuller report in future.</p> <p>LH advised that Neil Schneider, Chief Executive of SBC will carry out AB's appraisal and a 360 degree feedback form will be circulated week commencing 15 May 2017 to Board members for completion.</p> | |
| Action Points | Action Owner | Deadline |
| 1. Accountability Report to be discussed at a future meeting | Chair | April 2018 |
| 2. Business Unit to circulate 360 degree feedback form | Business Unit | 15/05/17 |

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| Agenda Item 11 | TSAB Strategic Plan 2017/18 – First Draft | Presenter: Chair |
| Discussion | <p>The Strategic Plan was circulated for comments. MC noted that this will be the final plan of a three year cycle and that the core aims may be reviewed next year.</p> | |

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| | AB asked that members provide feedback within a week (prior to publication). | |
| Action Points | Action Owner | Deadline |
| 1. Members to provide feedback to Business Unit regarding the Strategic Plan | All | 05/05/17 |

| Agenda Item 12 | CQC Discussion | Presenter: Christine Wharton / Debbie Howe | | | | | | | | | | |
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| Discussion | <p>Consultation and Strategic Direction Christine Wharton (CW) explained that CQC are moving forward in line with a 5 year strategy. The following key points were raised:</p> <ul style="list-style-type: none"> • By April 2017, CQC completed a programme of comprehensive inspections which resulted in all services being awarded a rating • The majority of services rated as 'good' demonstrated strong leadership, governance with providers carrying out their own audits/action plans. These services also responded well to medication errors by developing specific action plans and providing extra training and supervision • Going forward CQC will focus on risk with a more proportionate response: <table border="1" data-bbox="427 808 1458 985"> <thead> <tr> <th>Rating</th> <th>Visits</th> </tr> </thead> <tbody> <tr> <td>Outstanding</td> <td>2 years (unless intelligence suggests otherwise)</td> </tr> <tr> <td>Good</td> <td>2 years (unless intelligence suggests otherwise)</td> </tr> <tr> <td>Requires Improvement</td> <td>Within 1 year</td> </tr> <tr> <td>Inadequate</td> <td>Within 6 months</td> </tr> </tbody> </table> <ul style="list-style-type: none"> • Improving and refining key functions for registration, monitoring, inspection, rating and enforcement • Encouraging improvement, innovation and sustainability • By 2020 providers will register online • More robust service for registering new providers • More streamlined service for registering known services with a good track record and good quality service • Working to improve the quality and presentation of data which will help to inform inspections • Pilot in place – a dashboard portal between CQC and Commissioning Services so that both parties can share information - members present were unaware of this. CW to determine which LAs were piloting this • Introducing digital provider handbooks which will include the refreshed assessment framework • National project ongoing to look at a different approach to assess Domiciliary Care Services • Key Lines of Enquiry will be streamlined • Changes to structure – CQC meet as a whole North East Hub (Hartlepool is included within the hub area). This helps to pool resources across the region <p>Domiciliary Care linked to the National Report and Challenges Debbie Howe (DH) summarised the following:</p> <ul style="list-style-type: none"> • Inspectors find that large Domiciliary Services can struggle if they become too large and/ or do not have strong managers in place • Not all services allocate time for travel or pay expenses for mileage • Services struggle to retain staff in part due to zero hour contracts • Difficulties in recruiting experienced staff as they tend to apply for care homes or other care professions • Domiciliary care is increasingly supporting people with more complex needs | | Rating | Visits | Outstanding | 2 years (unless intelligence suggests otherwise) | Good | 2 years (unless intelligence suggests otherwise) | Requires Improvement | Within 1 year | Inadequate | Within 6 months |
| Rating | Visits | | | | | | | | | | | |
| Outstanding | 2 years (unless intelligence suggests otherwise) | | | | | | | | | | | |
| Good | 2 years (unless intelligence suggests otherwise) | | | | | | | | | | | |
| Requires Improvement | Within 1 year | | | | | | | | | | | |
| Inadequate | Within 6 months | | | | | | | | | | | |

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| | <p>JG reflected that zero hour contracts can pose difficulties during holiday periods as employees do not need to give notice of annual leave. This means that there is limited cover during these times.</p> <p>LH indicated that some of the issues raised are for commissioning teams rather than safeguarding and it remains their responsibility to acknowledge concerns and ensure that sanctions are applied.</p> <p>JG commented that failing services rarely turn themselves around, but rely on a systems approach to improve services: CQC play a good part in this in her experience.</p> <p>North East Ratings CQC were unable to comment on the North East Ratings.</p> <p>SR asked that the ratings are updated for HBC as they do not reflect the current position.</p> <p>ES shared some practical examples of the difficulties the LA face when working with CQC. ES asked if improvements could be made in these areas.</p> <p>LH enquired if a home is rated as inadequate and a registered manager leaves or a new one is appointed, would this trigger a visit from CQC. Christine Wharton (CW) advised that they would allow time for the new manager to settle in before visiting. JG informed that 'soft' intelligence can sometimes lead to a visit.</p> <p>CW indicated that CQC would like to re-establish information sharing meetings with each of the LAs are these were extremely useful.</p> | |
| Action Points | Action Owner | Deadline |
| 1. CW to ascertain which LA is piloting the dashboard | CW | 17/05/17 |
| 2. CW to send potential information sharing meeting dates for MBC to ES | CW | 27/04/17 |

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| Agenda Item 13 | Social Care and Adult Services Scrutiny Panel Report (MBC) | Presenter: Erik Scollay |
| Discussion | <p>This report was circulated for information.</p> <p>ES informed that an action plan will be created and will be brought to the Board.</p> | |
| Action Points | Action Owner | Deadline |
| 1. Adult Services Scrutiny Panel Action Plan to be brought to a future Board meeting | ES | 06/09/17 |

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| Agenda Item 14 | Ripfa Coercive Control | Presenter: Chair |
| Discussion | This item was circulated for information. | |

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| Agenda Item 15 | Liberty Protection Safeguards | Presenter: Chair |
| Discussion | This item was circulated for information. | |

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| Agenda Item 16 | Any Other Business | Presenter: All |
| Discussion | None. | |

Next Meeting Date: **Wednesday 28 June 2017**
Time: **1.30pm – 4pm**
Venue: **Stockton Sixth Form College**



Appendix 1 Attendance Matrix

The table below reflects **named** members of the TSAB, although deputies have been shaded.

| Company | 03/03/2017 | 26/04/2017 | % |
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| CCG Board Member (Hartlepool & Stockton CCG and South Tees CCG) | 1 | 1 | 100% |
| Cleveland Fire Brigade Board Member | 1 | 1 | 100% |
| Cleveland Police Board Member | 1 | 1 | 100% |
| CQC Board Member (committed to attend 2 meetings per year) | 0 | 2 | 50% |
| Durham Tees Valley Community Rehabilitation Company | 0 | 0 | 0% |
| HBC Board Member | 0 | 1 | 50% |
| HBC Assistant Director | 1 | 1 | 100% |
| HBC Lead Member | 0 | 0 | 0% |
| Healthwatch Hartlepool | 0 | 0 | 0% |
| Healthwatch Tees (committed to attend 2 meetings per year) | 1 | 0 | 50% |
| HMP Holme House Prison | 0 | 0 | 0% |
| MBC Board Member | 1 | 1 | 100% |
| MBC Assistant Director (N/A) | 0 | 0 | 0% |
| MBC Lead Member | 0 | 0 | 0% |
| National Probation Service Cleveland | 1 | 1 | 100% |
| North East Ambulance Service (attend for specific agenda items only) | 0 | 0 | 0% |
| North Tees & Hartlepool NHS Foundation Trust | 0 | 1 | 50% |
| RCBC Board Member | 1 | 1 | 100% |
| RCBC Assistant Director (N/A) | 0 | 0 | 0% |
| RCBC Lead Member | 0 | 0 | 0% |
| SBC Board Member | 0 | 0 | 0% |
| SBC Assistant Director | 1 | 1 | 100% |
| SBC Lead Member | 1 | 0 | 50% |
| South Tees Hospitals NHS Foundation Trust | 1 | 1 | 100% |
| Teesside University | 0 | 0 | 0% |
| Tees Esk & Wear Valleys NHS Foundation Trust | 1 | 1 | 100% |
| TSAB Independent Chair | 1 | 1 | 100% |
| TSAB Business Unit | 4 | 3 | 100% |
| Voluntary Sector - North Tees (Catalyst) | 1 | 0 | 50% |