Teeswide Safeguarding Adults Board

Meeting Date: **Wednesday 11th December 2024**
Time: **9.30am – 12pm**
Venue: **Microsoft Teams**

Minutes

Attendees			
Name	**Job Role**	**Role**	**Representing**
Janet Alderton	Assistant Director of Nursing & Patient Safety	Deputy	North Tees and Hartlepool NHS Foundation Trust
Cllr Pauline Beall	Lead Member	Member	Stockton-on-Tees Borough Council
Jane Bell	Administration Officer	Member	TSAB Business Unit
Sarah Bowman-Abouna	Director of Public Health	Member	Stockton-on-Tees Borough Council
Tracey Brittain	Policy, Partnerships and Delivery Manager	Invited	Office of Police & Crime Commissioner
Lindsay Britton-Robertson	Assistant Director of Safeguarding	Member	South Tees Hospitals NHS Foundation Trust
Mike Fleet	Principal Lecturer (Programmes) Department of Nursing & Midwifery	Member	Teesside University
Elaine Godwin	Admin Officer	Member	TSAB Business Unit
Adrian Green	Independent Chair	Member	Teeswide Safeguarding Adults Board
Jill Harrison	Director of Adult and Community Based Services	Member	Hartlepool Borough Council
Suzanne Hodge	Head of Prevention, Provider and Support Services	Deputy	Middlesbrough Council
Gina Hurwood	SAR Co-Ordinator	Member	TSAB Business Unit
Alyson Longstaff	Advanced Customer Support Senior Leader	Member	Durham Tees Valley Department for Work and Pensions
Amy Mahoney	Business Manager	Member	TSAB Business Unit
Tom McLeod (Part only)	T/Inspector Missing Persons Unit	Invited	Cleveland Police
Sam Midgley	Project Officer	Member	TSAB Business Unit
Jen Moore	Designated Nurse for Safeguarding Adults	Deputy	North East and North Cumbria Integrated Care Board
Eve Newbury	Associate Director of Nursing and Quality	Invited	Tees, Esk and Wear Valleys NHS Foundation Trust
Carolyn Nice	Director of Adults and Health	Member	Stockton-on-Tees Borough Council
Cara Nimmo	Assistant Director for Adult Care Operations	Deputy	Redcar & Cleveland Borough Council
Julian Penton **	Development Officer	Member	Hartlepool Community Trust
Chris Piercy	Director of Nursing	Member	North East and North Cumbria Integrated Care Board
John Rafferty	Compliance Business Partner - Safeguarding	Member	Thirteen Group
Patrick Rice	Corporate Director of Adults and Communities	Member	Redcar & Cleveland Borough Council
Iain Richardson	Head of Safer Prisons & Equality	Member	HMP Holme House Prison

Carol Sansum	Administration Officer	Member	TSAB Business Unit
Mike Sharman (Part)	Business Manager - Quality Assurance & Service Support	Invited	Middlesbrough Council
Nicki Smith	Associate Director for Nursing (Safeguarding)	Deputy	Tees, Esk and Wear Valleys NHS Foundation Trust
Angela Storm	Data Analysis and Performance Monitoring Officer	Member	TSAB Business Unit
Stephen Thomas	Development Officer	Member	Healthwatch Hartlepool
Alan Turner		Deputy	Cleveland Fire Brigade

Apologies			
Name	**Job Role**	**Role**	**Representing**
Cllr Gary Allen	Lead Member	Member	Hartlepool Borough Council
Richard Baker	Assistant Chief Constable	Member	Cleveland Police
Gordon Bentley	Deputy Designated Nurse Safeguarding Adults	Deputy	Northeast and North Cumbria Integrated Care Board
Lee Brown	Area Manager	Member	Cleveland Fire Brigade
Angela Connor	Assistant Director Adult Social Care/PSW	Deputy	Stockton-on-Tees Borough Council
Neil Harrison	Head of Safeguarding & Specialist Services	Member	Hartlepool Borough Council
Rachelle Kipling	Temporary Assistant Chief Executive	Member	Office of Police & Crime Commissioner
John Lovatt	Assistant Director	Deputy	Hartlepool Borough Council
Dr Hilary Lloyd	Chief Nurse	Deputy	South Tees Hospitals NHS Foundation Trust
Lucy Owens **	Chief Executive	Member	Catalyst Stockton
Ann Powell	Head of Stockton & Hartlepool PDU	Member	National Probation Service
Cllr Lisa Robson	Lead Member	Member	Redcar and Cleveland Borough Council
Cllr Jan Ryles	Lead Member	Member	Middlesbrough Council
Erik Scollay	Director of Adult Social Care	Member	Middlesbrough Council
Jeanette Scott	Director of Nursing	Deputy	North East and North Cumbria Integrated Care Board
Gary Watson	Business Manager	Member	South Tees Safeguarding Children Partnership
Helen Wilson	Superintendent	Deputy	Cleveland Police

Absent (Invited)			
Name	**Job Role**	**Role**	**Representing**
Mark Davis *	Chief Executive	Member	Middlesbrough Voluntary Development Agency
Elspeth Devanney	Group Director of Nursing & Quality	Member	TEWV
Natasha Douglas	Healthwatch Manager	Member	Healthwatch Stockton
Dean Johansen-Berg	Engagement & Events Officer	Member	Healthwatch South Tees
Dr Hilary Lloyd	Chief Nurse	Member	North Tees and Hartlepool NHS Foundation Trust
Peter Neal *	CEO	Member	Redcar and Cleveland Voluntary Development Agency
Kay Nicolson	CEO	Member	A Way Out
Elise Pout	Temporary Assistant Chief Executive	Member	Office of Police & Crime Commissioner

Leanne Stockton	Business Manager	Member	Hartlepool & Stockton Safeguarding Children Partnership
Kellie Woodley	North East Director	Member	People First

* Attends on behalf of MVDA & RCVA,
** Attendance will be shared between Catalyst and Hartlepool Community Trust

Referenced Organisations		
Name	**Role**	**Representing**
Sarah Aspinall	Inspector	CQC (Middlesbrough, Stockton-on-Tees and Redcar & Cleveland) ***
Rachel Lucas		North East Ambulance Service

*** CQC Attend the Regional Safeguarding Adults Board Chairs Network Meetings.

Copies: Margaret Blakey, Emily Johnson, Judith Oliver, Karen Sprotson, Rachael Winspear, Executive Mailbox Cleveland Police, NENCICB Safeguarding.

Agenda Item 1	**Introductions and Apologies**	**Presenter:** Chair
Adrian Green (AG) welcomed members to the December meeting and apologies were noted.		

Agenda Item 2	**Minutes from the meeting held on 9th October**	**Presenter:** Chair

Minutes from the meeting that took place on 9th October were agreed as a true and accurate record.

Actions from the October meeting were reviewed:

4.4. Enquire if Advocacy is included in the pick lists for each LA - Angela Storm (AS) advised that PAQ Sub-Group members have been tasked to review their pick lists. One Local Authority (LA) does already report on Advocacy, so this can be captured within the data and will help to reduce the 'Other' category. Further exploration may need to take place to establish if this can be broken down further by type and a definition may need to be added for clarity.

5.1 Final comments on the Annual Report to be provided to the Business Unit by Friday 18th October – The Annual Report has now been published and AG extended thanks for the work that had gone into producing the document, which has been used during all four LA Care Quality Commission (CQC) inspection interviews.

Agenda Item 3	**Missing From Home - Update**	**Presenter:** Tom Mcleod

Tom McLeod (TM) joined the meeting to provide an update on the Cleveland Police response to Missing Persons within the new Missing Person Unit structure.

The presentation included the College of Policing definition of a missing person. TM noted that this is a broad definition and that the Police also have an obligation to work within a legal framework focused around investigation balanced against an individual's Human Rights.

The Missing Person Unit structure comprises of an Investigation Team and a Prevention Team. The Prevention Team adopt a problem solving approach to try and reduce the number of missing episodes; signposting to other services and providing support for families and carers. The Investigation Team comprises of operational officers working on low and medium risk cases. Officers operate in plain clothes in an attempt to reduce barriers. Evidence suggests that dedicated teams become experts in dealing with missing persons by understanding risk, ensuring that safeguarding is in place where required and disrupting criminality where exploitation is involved. The structure has proved effective in other parts of the country and is now being trialled in the Stockton area for six months.

The number of incidents over the last 12 months has seen a reduction from the previous year. This may be attributed to the prevention work that has taken place around ensuring that partners understand what a missing person is, and the services that they should be accessing.

TM advised that data analysis is used to identify repeat missing persons and the vulnerabilities surrounding them. Whilst initiatives such as the Herbert Protocol are managed by individual organisations or LAs, they are promoted by the Police as part of their prevention work to educate family members and carers.

In relation to the use of technology the NHS in South Yorkshire are trialling a system of issuing GPS trackers to individuals who receive a dementia diagnosis, which may be an avenue to explore in the longer term.

The trial period is due to end in May 2025. Once findings are available TM will provide an update to Board.

Contact details were provided within the presentation.

Action Points	Action Owner	Deadline
1. Update on findings from Missing Person Unit trial to be shared with Board	TM	10/09/2025

Agenda Item 4	Follow-up: A Tees-wide Approach to Domestic Abuse	Presenter: Tracey Brittain

The report from the Safe Lives Review of Domestic Abuse Across Tees was published in 2022 and highlighted a range of recommendations for a more collaborative and strategic approach to domestic abuse. One of the recommendations focused on Tees partners more visibly holding perpetrators to account for domestic abuse. Alongside the Domestic Abuse Act 2021 and the national Violence Against Women and Girls (VAWG) Strategy, the government committed to publish a national perpetrator strategy to set out its commitment and approach. It was hoped that this would help to inform a local strategy, but to date this has not yet been published. In 2023 a multi-agency working group was established to develop a perpetrator strategy for Tees with commitment from the Office of the Police & Crime Commissioner (OPCC), Cleveland Police and directors within the four LAs with responsibility for Domestic Abuse. The group were keen to align the strategy with existing National and Local Domestic Abuse strategies. Extensive consultation took place with local agencies, including a number of development days, and conversation has been held with the Local Criminal Justice Board in relation to governance.

A copy of the draft strategy was shared with the agenda. Tracey Brittain (TB) provided an overview of the contents of the strategy. The aim has been to align the document with other strategy work within TSAB, including the Adult Exploitation Strategy, to try and provide consistency. The priorities will follow the 5Ps model – Partnership, Prevent, Protect, Pursue, People. There is still some partner input to be added, and the working group need to agree key performance indicators and a delivery plan. The draft strategy will then be circulated for feedback prior to presentation to the key Boards for agreement and sign off.

Sarah Bowman-Abouna commended the fact that the work has been done collaboratively to compliment other work happening across the local area and added that whilst the VAWG agenda is the driver nationally, at a local level consideration also needs to be given to both women and children as perpetrators.

AG added that victims can also be perpetrators and that awareness and support of elderly people also needs to be included, as there is not always representation from this group. Consideration will also need to be given to data and how those involved as victims and perpetrators are flagged within systems so that they are addressed appropriately. TB responded that from the outset it has been recognised that this work needs to be whole system to link in with adult social care. The strategy is set at a high and broad level and aims to remove some of the labelling and assumptions in relation to domestic abuse through the language used. The working group are keen to understand the subject from a range of

perspectives, so encourage members to provide feedback once the document is circulated for consultation.

AG thanked TB for the presentation, reiterating the importance of data and inclusion of the elderly as key factors for this Board.

Action Points	Action Owner	Deadline
1. Feedback on the Perpetrator Strategy to be provided once the document is circulated for consultation	All	TBA

Agenda Item 5	Adult Exploitation Strategy	Presenter: Cara Nimmo

Cara Nimmo (CN) attended the meeting to present the final draft of the Adult Exploitation Strategy for 2024-27, which has been developed following a recommendation from the Molly SAR. A copy of the Final Draft Strategy was circulated with the agenda.

CN posed two questions to Board:

- Once the Strategy is agreed a Strategic Implementation Group will be required to take the work forward. Should this be a new group or should it comprise of the existing group, widened to include voluntary and community partners?
- Who would Chair the group and would this need be an Independent Chair?

Feedback on the document has been received from voluntary and community groups and CN has met with the Community Safety Partnerships in each LA who have also provided comments. Overall, the feedback was supportive with some concerns raised in relation to representation at the implementation group, time constraints and making sure that the work links to other pieces of work across the area to avoid duplication. A further follow up meeting is planned for January. Members of the working group have been tasked with completing a Self-Assessment matrix which will help to inform the action plan. The group have also linked with the Children's Partnerships and their Harm Outside The Home Strategy to acknowledge transitional safeguarding. A working group has been established to create a clear protocol on how to address exploitation during the transition process.

Amy Mahoney (AM) advised that she has attended a Sexual Harm Round Table meeting chaired by the OPCC which involved a number of agencies from the voluntary and community sector. AM provided an overview of the Strategy and the work going forward and extended the invitation to join the implementation group.

The Strategy was approved and members agreed that the existing working group should lead and coordinate implementation. It was noted that this will be a strategic group so organisations may wish to review their representation within the group. Members supported a proposal for CN to lead the group and expand membership to include the voluntary and community sectors. It was not felt that an independent chair is needed at this stage. Once implementation work is underway and decisions have been made on where the work will sit then chairing arrangements can be reviewed. AG extended an offer to CN to bring the work back to the Board at any stage if needed.

AG thanked CN and those involved in the group for their commitment and dedication in competing this challenging piece of work. CN also noted the value of the Business Unit, who were key in driving the work forward and providing support.

Action Points	Action Owner	Deadline
1. Existing working group to lead on the implementation of the ASE Strategy	CN	Ongoing
2. CN to lead the ASE implementation group	CN	Ongoing
3. Chairing arrangement for the ASE implementation group to be reviewed	CN / BU	TBA

Agenda Item 6	Q2 TSAB Data Dashboard	Presenter: Angela Storm

The link to access the TSAB Data Dashboard on PowerBi was shared on the meeting agenda. Any members that are unable to access the system should contact Angela Storm (AS) for assistance.

AS provided a summary of the key points:

Priorities for 2022-25 – The data has been linked to the Board's four priorities. Joint Working includes figures for Multi Agency Audits, the number of cases referred into the High Risk Adults Panel, which was slightly lower than the previous quarter, and the percentage of individuals satisfied with their outcome. People includes the figures for training uptake and SAR notifications considered within the quarter. Communication provides the percentage of individuals asked about desired outcomes and data for social media reach and website views. The number of website views is high which may be attributed to campaigns that have taken place during the quarter. Services includes details of participation in the Quality Assurance Framework (QAF) process and the number of Care Providers subject to the Responding to and Addressing Serious Concerns Protocol (RASC).

Performance Indicators (PI) – Teeswide all four PIs are being achieved. Under PI 1 Hartlepool Borough Council (HBC) are not achieving the PI. This was discussed at the last meeting and relates to a particular provider impacting on their figures. The provider accounts for approximately 10% of this figure. Without this provider the PI would be achieved. Assurance has been provided that this problem is not masking any other issues under this PI. The provider has had a CQC inspection published during the quarter and their rating has changed from Requires Improvement (Inadequate in relation to Safeguarding) to Good overall. Under PI 3 HBC are 1% short of achieving the PI. AS highlighted that this figure is a snapshot in time and will fluctuate as Safeguarding Section 42 Enquiries are closed.

Safeguarding Concerns – There has been a slight increase in the figure in comparison to Q2 in the previous year and Q1 of the current year with Middlesbrough Council (MBC) recording the most significant increase. Discussion at the PAQ Sub-Group identified that this has been attributed to an increase in medication errors reported following medication training being undertaken. There has been an increase in referrals from Providers which may be a result of improved awareness. Work has also been undertaken with the Access Team and there have been some changes to the way that Safeguarding Concerns are recorded at the point of contact. This may also have impacted on the figures. Psychological abuse has replaced Financial & Material abuse in fifth place under types of abuse. The same trend has been seen across all four LA areas and will be monitored going forward this year. It was noted that recording may have impacted on the figure if cases have been allocated to Psychological abuse rather than Domestic Abuse at the point of referring the Concern into the Local Authority.

Section 42 Enquiries – Enquiries have increased during the quarter, with the largest increase in MBC. Neglect and Acts of Omission and Physical remain the top categories of abuse, although figures have decreased slightly in comparison to the same period in 2023-34. Increases were recorded in Domestic Abuse and Self-Neglect with Own Home recorded as the main location of risk. There was a reduction in the number of Section 42 Enquiries relating to Care Homes when compared to the same quarter in the previous year, despite an increase in MBC.

Outcomes – These figures are based on Concluded Section 42 Enquiries. In just over half of the cases, the Source of Risk was Known to the Adult. The number of Concluded Section 42 Enquiries where Safeguarding Action was taken remained similar to the previous year. Increases were recorded against the number of Concluded Section 42 Enquiries where the risk was Reduced or Removed, the number of individuals asked about their desired outcomes from the Safeguarding process and the number of Concluded Section 42 Enquiries where desired outcomes were Fully or Partially Achieved.

A narrative page has been included on the dashboard to provide context to the data for members.

Members queried if there would be benefit in including figures relating to where risk remains as part of the themed audits in order to identify barriers and areas of good practice in relation to engagement. Jill Harrison (JH) advised that HBC have done some work in relation to this which produced learning around definitions, consistency of recording, the number of challenging cases where it is hard to remove all risk and raised the question around how to record the level of risk that can be tolerated for individual cases.

Alyson Longstaff (AL) advised that the Department for Work and Pensions (DWP) have been providing upskilling and awareness sessions for their staff and are now looking to provide training on how to make a quality safeguarding referral. AL queried if it was possible to obtain data on the number and quality of referrals received from DWP. AS advised that this data would be held by the Operational Leads but was unsure if it is recorded specifically for DWP. In instances where referrals do not progress feedback should be provided to the referrer. AS will raise this at the next Operational Leads Sub-Group meeting.

Patrick Rice queried why the figures for Concerns in Redcar & Cleveland Borough Council (RCBC) were low. Following the recent PAQ Sub-Group meeting the Performance Lead and Operational Lead from RCBC will be looking at this in more detail as conversion rates are also low. Cara Nimmo confirmed that there is work to be done to look at the recording of a Section 42 Enquiry to ensure that all instances where the Section 42 Enquiry duty has been met, and work has been undertaken to ensure a person is safe is being recorded on the system accurately.

Action Points.	**Action Owner**	**Deadline**
1. Quality of referrals received from DWP and feedback to be raised with Operational Leads Sub-Group	AS	23/01/2024

Agenda Item 7	**HRAP Update**	**Presenter:** Cara Nimmo

A copy of the HRAP Chairs Summary was circulated with the agenda, covering activity from June to November 2024. The report shows the number of cases opened and closed within each LA during the period and identifies key themes. Similar themes are common across all 4 LA areas, but it was noted that people often fall into more than one category. The report includes examples of good practice, including DWP attendance at meetings in RCBC and support from Legal Services in MBC. Barriers and challenges were also noted which included lack of attendance from Probation and issues around Housing. Case studies have been included to highlight successful outcomes. These demonstrate the commitment from partners when an individual is hard to engage and how trauma informed practice training is having a positive influence on responses.

Agenda Item 8	**Sub-Group and Task & Finish Group Update**	**Presenter:** Sub-Group Chairs

Operational Leads Sub-Group – Amy Mahoney

The Sub-Group last met on 14th November. The Mental Capacity and DoLS Team Manager at RCBC was invited to the meeting to lead a multi-agency discussion and share learning on the topic of Executive Functioning and MCA following a recommendation from the James SAR. This was really insightful and prompted good discussion within the Group. An online platform has been created to host examples of good practice, resources, and comments and questions in relation to MCA. This is available to all professionals and can be accessed via a link on the TSAB webpage.

An update was provided on the Community Practice Workstream and the HRAP Multi Agency Audit Reports were presented. MBC's Practice Support Forum was discussed after this was identified as an area of good practice within their Quality Assurance Framework (QAF) submission. The Forum is a resource for staff to discuss complex case work that does not meet the criteria for HRAP, providing a multi-disciplinary team approach to enable staff to talk through ideas and solutions to manage risk collectively. Members of the Sub-Group were asked to share the model within their own organisations. Following a query raised at the October Board Meeting the quality and quantity of concerns received from Cleveland Fire Brigade (CFB) was discussed. Due to the low numbers involved LA representatives agreed to conduct a focussed audit on Concerns raised by CFB to identify any learning. Organisational memory was discussed following the publication of good practice guidance on Organisational Abuse. Four RASC lessons learned reports and the thematic analysis of SARs involving Transitions Report were shared with the Group.

The HRAP Multi Agency Audit took place in October and involved all four LAs. LA Operational Leads were asked to randomly select a case for audit, in which the individual had been discussed at HRAP and closed within the previous 12-month period. A collated report was circulated with the agenda. AM summarised the key findings from the report. Areas that were done well included the range of agencies and disciplines involved in the meetings, information sharing both during and after the meetings, detailed

referral forms, evidence of professional curiosity in all the cases considered, consideration of the individuals wishes and feelings and meeting minutes being stored within individual electronic case records.

A number of areas for improvement were identified. It was evident from the cases subject to the audit process that all other appropriate interventions had not always been considered/attempted prior to referring to HRAP, including referrals into safeguarding, and that the managers checklist is not being followed prior to sign off. There were a number of inconsistencies in the way that minutes are recorded, with some being more detailed than others. It was recommended that good practice guidelines are created to assist with this. There was no evidence within the audits of the HRAP closure checklist being followed. Although it was agreed that the closure checklist steps had been followed there was a lack of evidence to support this. Not all core attendees are present at meetings or are not providing appropriate deputies or will only attend if the individual is already in their service. This will be raised for discussion in the HRAP review meeting. Challenges at a strategic level were identified around the lack of specialised housing, lack of flexibility of detox/rehab provision and the deterring of perpetrators.

The audits provided evidence of the complexity of cases discussed at HRAP and the level of work that is undertaken. It is evident from the data that despite best efforts it is not always possible for risk to be removed in every case. It was clear from the audit that the guidance and flowchart are not being followed and it is suggested that following the HRAP review there is further promotion of all associated documents/guidance across partner agencies, to communicate any changes made to the documentation and to ensure that referrals are being made appropriately. A number of recommendations have been identified and will be considered along with best practice and identified learning as part of the HRAP Review Meeting which is taking place on 17th December. A recommendation was made that the audits are repeated as part of the multi-agency audit schedule in 2025-26 to evaluate the effectiveness of the HRAP following the annual review, and to allow the opportunity for any changes made following the review, to fully embed into practice.

AG supported the recommendation for the HRAP audit to be repeated in 2025-26 and requested that a summary of the outcomes of the review meeting be fed back to Board.

Performance, Audit & Quality Sub-Group – Angela Storm on behalf of Erik Scollay (ES)
The Sub-Group met on 25th November. The Group discussed the recording of Domestic Abuse sub categories. These are currently only recorded by SBC, but the other LAs will add these when they are able to do so. The recording of Cuckooing cases was discussed. This has been raised at the National SAB Mangers network and further work will be done around this. The Q2 data was discussed in depth and the group considered the existing pick lists for source of referral and more work will be done in relation to this. The Impact of Right Care, Right Person on source of referral was considered and will be referred to the Operational Leads Sub-Group for discussion. An update on the QAF process was provided and the Sub-Group Workplan was reviewed. All actions are on track to be achieved by the end of the year. ES informed the Group that he has been appointed as the new Chief Executive for MBC, and as such a new Chair will be required for the Sub-Group. AS thanked ES for the support provided to the Sub-Group and wished him well in his new role. Volunteers for the role of Chair for this Sub-Group would be welcomed.

Safeguarding Adults Review – Jill Harrison
Since the last Board meeting the Sub-Group have met twice. There are 16 cases at various stages; from referral received up to action plan stage. Some TSAB partners are also involved in 8 Out of Area cases.

At the November meeting the Sub-Group reviewed 9 cases with open action plans and progress updates were provided. The Molly, James and Adult K action plans are all nearing completion. The Learning from Regional and National SARs Transition Report was discussed and is included within the information section of the Board agenda. The report has been shared regionally and nationally and will help to inform the transitions awareness campaign taking place in February and the development a Tees Exploitation Transitions Protocol.

At the December meeting a new SAR Notification from the Middlesbrough area was discussed, and a recommendation of No Further Action under S44 was made and agreed by the Independent Chair. MBC will be taking forward a single agency learning review and findings will be taken back to the Sub-Group. A notification has been received for an individual known to Middlesbrough services, however it has transpired that they passed away in the Durham area. Initial discussions will be taking place with Durham SAB.

Cross Boundary SAR Guidance - Due to the increase in SARs involving out of area SABs, TSAB's SAR Coordinator has led a Task & Finish Group to develop Cross Boundary SAR Guidance for the North East region. This has now been shared for feedback.

Coroner/SARs Guidance - National guidance was produced and shared via the National Business Managers Network regarding the interface between SARs and Coronial Processes. The SAR Sub-Group considered the recommendations and noted that TSAB already has good links with the Coroner. The majority of recommendations can be taken forward by updating the SAR documentation and administration processes.

Thematic SAR - Two notifications have been received in close succession with very similar circumstances linked to severe neglect of an adult by those living in or visiting the household. It was agreed that a single author be appointed to undertake a thematic review of both cases. Chris Hogben (CH), who led on the Bernadette SAR, has been appointed as the Independent Reviewer. Following an initial meeting with CH both cases were referred to the Domestic Abuse Related Death Review (DARDR) process, with one case meeting the criteria for a DARDR. Discussion is now taking place regarding next steps and to establish if there is scope to undertake a joint review.

Susan Action Plan (For Approval) – The Susan SAR was published in November. The final draft action plan was circulated with the agenda for approval. The Sub-Group will continue to monitor progress and evidence and will bring back to the Board for sign off once completed. Members approved the action plan.

DHR7 - The report is due to be published on MBC's website. The SAR Sub-Group have had some involvement, as a SAR notification was also submitted, and will monitor relevant actions applicable to TSAB. A copy of the report will be shared with members once available.

AG informed members that a review of the SAR process in taking place with the aim of improving efficiencies, workloads and costs. The revised process will be shared with members once available.

Action Points	**Action Owner**	**Deadline**
1. HRAP Multi Agency Audit to be repeated in 2025-26	BU	31/03/2025
2. Update on outcome of HRAP Review meeting to be provided to Board	AM	12/03/2025
3. DHR7 Report to be shared with members	BU	Once Available
4. Revised SAR Process to be shared with members	BU	Once Available

Agenda Item 9	**QAF Reports**	**Presenter:** Mike Sharman

Mike Sharman joined the meeting to present the findings from MBC's QAF. A copy of the report was circulated with the agenda.

The submission was made in July of this year and received an overall rating of green. The submission received positive feedback and identified a number of areas of good practice. These included Community Safety Plans, Trauma Training, Advocacy Reports and the Practice Support Forum which was shared with OLSG as a recommendation. A recommendation was also made to provide a more up to date version of the Audit Recording Tool and work is progressing in relation to this.

Agenda Item 10	**TEWV Update on CQC Inspection**	**Presenter:** Eve Newbury

Tees, Esk and Wear Valleys (TEWV) NHS foundation Trust's CQC Core Service and Well-led Inspection took place in 2023. Eve Newbury (EN), Associate Director of Nursing and Quality, shared a presentation with Members to update on TEWV's progress against their CQC Improvement Plan.

The presentation provided a timeline for the inspection process and a summary of the positive findings and areas identified for improvement. As of 30th October 2024 82% of the actions within the Improvement Plan had been completed. The Quality Assurance Committee commissioned a 'one year on' root and branch review in September to undertake a full review of the plan to ensure that actions remain fit for purpose. A number of workshops then took place to look at individual recommendations, establish if they have been fully addressed, identify any amendments needed to the plan in order to fully achieve recommendations and look at any action needed to ensure that improvements are fully embedded and sustainable. As a result of this some amendments were made to wording and timescales. Any actions rated as red were not amended. The presentation detailed the key improvements that have been made.

CQC commenced an unannounced assessment of TEWV's AMH Crisis, Acute Liaison, and Health Based Places of Safety in June 2024. The draft report was received in November for factual accuracy checking and was submitted to CQC in December. No immediate actions or areas of concern were identified.

AG thanked EN for the presentation. Noting that a significant amount of work has been completed, and that the report provides assurance to Board.

Agenda Item 11	**Safe Place Scheme Update – Independent Voices**	**Presenter:** Sam Midgley

Safe Place Scheme venues are located within each LA area and provide a place within the community where vulnerable people can go for help and support. The Board provides the governance arrangements for the scheme and support in partnership with the LAs. Sam Midgley (SM) shared a presentation with members detailing the work that has been conducted to audit the scheme in each LA area and includes examples of how the scheme has been of assistance to people.

There are 94 venues in the scheme across Tees. The TSAB website includes an interactive map of locations and also a printable PDF version. The scheme has received positive feedback, although it was noted that it is hard to measure effectiveness, as in many cases it is simply the fact of knowing that the places exist that provides the support. Venue numbers are good across Tees, with a focus on quality and ensuring that venues understand their responsibilities within the scheme. Work will continue to raise awareness of the scheme for individuals to use. The Business Unit, with the support of adults with learning disabilities from Independent Voices and Larchfield Community, have created a new animated information video for use by new venues joining the scheme.

SM shared a video recorded by Independent Voices who have helped to audit the scheme.

AM thanked SM for driving this work forward, acknowledging the positive work that has been done including the involvement of people with lived experience.

AL requested if it was possible to have a copy of the presentation to share with Disability Employment Advisers. SM will forward a copy following the meeting.

Action Points	**Action Owner**	**Deadline**
1. Safe Place Scheme presentation to be shared with AL	SM	11/12/2024

Agenda Item 12	**Any Other Business**	**Presenter:** All

TB advised that the Cleveland Police force area will be a pilot for the testing of the new Domestic Abuse Protection Orders. Requirements will mandate that perpetrators subject to an order attend a domestic abuse perpetrator programme, substance misuse or mental health appointment. Work is still in the early stages with the pilot due to commence in February / March 2025. Further details will be circulated following the meeting.

Lindsay Britton-Robertson enquired if the results from CQC Inspections could be added to the agenda for the next meeting. All inspections have now taken place but reports have not yet been published. AG confirmed that the Board will be updated on progress and findings presented once available.

AG wished members a Happy Christmas and New Year.		
Action Points	**Action Owner**	**Deadline**
1. Details of Domestic Abuse Protection Order pilot to be circulated to members	TB / BU	18/12/2024

Next Meeting Date: **TSAB Development Day**
Wednesday 12th February 2025
Time: **9.30am – 1pm**
Venue: **River Tees Watersports Centre**

Minutes approved by Independent Chair:

Date: 06/01/2025

Appendix 1 - Attendance Matrix

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

Company	17/04/2024	12/06/2024	11/09/2024	09/10/2024	11/12/2024	12/02/2025	12/03/2025	5
Catalyst Stockton / Hartlepool Community Trust	0	0	1	1	1	0	0	**60%**
ICB	2	1	1	1	2	0	0	**100%**
Cleveland Fire Brigade	1	1	1	1	1	0	0	**100%**
Cleveland Police	1	1	1	1	0	0	0	**80%**
CQC Board Member (Mlbro, Redcar, Stockton) (committed to attend 2 meetings per year)	0	0	0	0	0	0	0	**0%**
CQC Board Member (Hartlepool)	0	0	0	0	0	0	0	**0%**
DWP	1	1	1	0	1	0	0	**80%**
Hartlepool and Stockton Safeguarding Children Partnership	0	0	0	0	0	0	0	**0%**
Hartlepool Borough Council	1	2	2	2	1	0	0	**100%**
HBC Lead Member	1	0	1	0	0	0	0	**40%**
Healthwatch Hartlepool	1	1	0	0	1	0	0	**60%**
Healthwatch South Tees	1	0	1	0	0	0	0	**40%**
Healthwatch Stockton	0	0	0	0	0	0	0	**0%**
HMP Holme House Prison	1	0	0	0	1	0	0	**40%**
Middlesbrough Borough Council	1	1	1	1	1	0	0	**100%**
MBC Lead Member	0	0	0	0	0	0	0	**0%**
Middlesbrough VDA / Redcar & Cleveland VDA	0	0	0	0	0	0	0	**0%**
National Probation Service Cleveland	0	1	0	0	0	0	0	**20%**
North East Ambulance Service (attend for specific agenda items only)	0	0	0	0	0	0	0	**0%**
North Tees & Hartlepool NHS Foundation Trust	1	1	1	1	1	0	0	**100%**
Public Health	0	1	1	0	1	0	0	**60%**
Office of Police & Crime Commissioner (committed to 2 meetings per year)	0	1	0	1	1	0	0	**60%**
Redcar & Cleveland Borough Council	1	1	1	1	2	0	0	**100%**
RCBC Lead Member	0	0	0	0	0	0	0	**0%**
Stockton on Tees Borough Council	1	1	1	1	1	0	0	**100%**
SBC Lead Member	1	1	1	1	1	0	0	**100%**
South Tees Hospitals NHS Foundation Trust	1	1	1	1	1	0	0	**100%**
South Tees Safeguarding Children Partnership	0	0	0	1	0	0	0	**20%**
Teesside University	0	0	0	0	1	0	0	**20%**
Tees Esk & Wear Valleys NHS Foundation Trust	0	1	1	1	1	0	0	**80%**
Thirteen Housing	1	0	1	1	1	0	0	**80%**
TSAB Independent Chair	2	1	1	1	1	0	0	**100%**
TSAB Business Unit	7	7	7	7	7	0	0	**100%**