

**Kirklees Safeguarding Adults Board**

**MINUTES**

**8<sup>th</sup> February 2021**

**1:00pm – 3:00pm**

**Venue: Virtually via Microsoft teams**



## **Attendees**

Mike Houghton Evans (Independent Chair)  
Penny Woodhead, Chief Quality and Nursing Officer (Greater Huddersfield CCG & representing North Kirklees CCG)  
Jim Griffiths, Detective Superintendent, Kirklees District (West Yorkshire Police)  
Andrea Dauris, Associate Director of Nursing (Corporate) (Calderdale & Huddersfield NHS Foundation Trust)  
Richard Parry, Strategic Director for Adults and Health (Kirklees Council Commissioning, Public Health & Adult Social Care)  
Tanya Simmons, District Prevention Manager (West Yorkshire Fire & Rescue Service)  
Clive Barrett, Head of Safeguarding (The Mid Yorkshire NHS Acute Hospital Trust)  
Helen Geldart, Head of Housing Services (Kirklees Council, Economy and Infrastructure)  
Julie Warren-Sykes, Assistant Director of Nursing, Clinical Governance and Safety (South West Yorkshire Partnership NHS Trust)  
Penny Renwick (Lay Member)  
Amanda Evans, Service Director for Adult Social Care Operations (Kirklees Council, Adult Social Care Operations)  
Julie Clennell (Locala Community Partnerships CIC)  
Helen Hunter (Healthwatch, Kirklees and Calderdale)  
Emily Parry-Harries, Consultant in Public Health/ Head of Public Health (Kirklees Council, Public Health)  
Cllr Musarrat Khan, Portfolio holder for Health and Social Care, Kirklees Council

## **Deputies and others in attendance**

Karen Oates, Commissioning Manager (Kirklees Council, Economy and Infrastructure)  
Paula Adams, Head of Safeguarding (Locala Community Partnerships CIC)  
Victoria Thersby, Head of Safeguarding (Calderdale and Huddersfield NHS Foundation Trust)  
Marie Gibb, Named Nurse Safeguarding Adults (The Mid Yorkshire NHS Acute Hospital Trust)  
Alexia Gray, Head of Quality Standards and Safeguarding Partnerships (Kirklees Council)  
Razia Riaz, Senior Legal Officer (Kirklees Council, Legal Services)  
Mariam Bhamjee, Senior Legal Officer (Kirklees Council Legal Services)  
Jacqui Stansfield, Board Service Manager (Kirklees Safeguarding Adults Partnership Team)  
Alison Clarkson, Board Deputy Manager (Kirklees Safeguarding Adults Partnership Team)  
Robert McCulloch-Graham, KSAB Independent Chair designate  
Rebecca Spavin, Programme Lead: Kirklees Urgent Community Response, Kirklees UCR Provider Alliance

## **Minutes**

Ronnie Lodge, Business Support Manager (Kirklees Safeguarding Adults Partnership Team)

**Mailing List**

Nikki Gibson (Head of Safeguarding, Yorkshire Ambulance Service)

## **Welcome and Introductions**

Mike Houghton-Evans opened the meeting and welcomed all members. MHE introduced Robert McCulloch-Graham (RMG) to the Board and stated that RMG would be taking over the role of KSAB Independent Chair from MHE in April

Board members were invited to introduce themselves to RMG and RMG outlined a brief resume of his career to date

### **1. Declarations of Interest and Confidentiality Declarations**

None declared.

### **2. Previous Minutes and Matters Arising**

The minutes of the meeting held on 20<sup>th</sup> October 2020 were agreed as an accurate record.

#### **Actions from Meeting 8th July 2020**

**Jim Griffiths (JG) to provide brief about the Stalking Protection Orders virtually to Board members**

Action carried forward

**JG and MHE to present an update to Board following CSE Gold meetings**

The non-recent abuse protocol document was signed off at the last meeting. Not sure how it's been circulated – Jacqui Stansfield (JS) to check if this has been circulated

#### **Actions from Meeting 20th October 2020**

**CR to provide Safeguarding Adults Partnership Team with Dr Ring's contact details**

Completed.

**JS to circulate executive summary of Michael Preston Shoot SAR report**

Completed.

**MHE to circulate papers outlined with minutes**

Completed.

**RML to send invites for Board and subgroup meetings going into 2021 calendar year**

Completed.

### **3. Governance**

Governance:

Razia Riaz (RR) confirmed the requirement to have declarations of interest and confidentiality as a standing agenda item and noted that non were disclosed.

Legal Update:

RR gave an overview of the legal report. Items from the Legal Highlight Report were:

- [Covid-19 vaccine authorised to 80-year-old woman in care home despite objections of son](#)
- [Family Care and Lockdown Regulations; Hertfordshire County Council v NG \[2020\]](#)
- [Mental Health Act assessments require physical attendance and cannot be undertaken remotely - Devon Partnership NHS Trust v Secretary of State for Health and Social Care \[2021\]](#)

A short discussion took place on aspects of the cases outlined

MHE posed a question relating to case 1: is this an issue that is cropping up locally?

RR said the legal department have not had any approaches

Penny Woodhead (PW) said that vaccinations have taken place almost daily in care homes. 99% of residents have been inoculated. The CCG has not experienced any similar cases. In terms of case 3 the CCG has received assurance that people are being seen in person rather than remotely.

Amanda Evans (AE) is also not aware of any cases of people not being seen personally

Emily Parry-Harries said uptake of the vaccine has been very good in the over 80's as well as in terms of staff in care homes. Is there a conversation to be had about care home staff that remain hesitant? Is this something the Board should consider and discuss?

PW said it would be interesting to establish if the Board had some messaging around this. The CCG have spoken to every care home in the Borough and have good data. There is around 60% take up at the moment which is around 20% better than flu vaccination take-up. Remaining issues seem to be around fears in relation to pregnancy and the speed of the vaccinations production and release in the community. Conversations are taking place within the CCG in terms of what additional support is required to assure people.

MHE said that if communications were issued by the Board the concern may be that they are considered a threat and therefore not helpful. It is, however, important in terms of assurance

Julie Warren-Sykes (JWS) said that conversations around this are taking place at South West Yorkshire Partnership NHS Trust (SWYPFT) including question and answer sessions. These conversations have included whether vaccination should be mandatory for front line staff.

#### 4. Safeguarding Adults Reviews (SARs)

Update:

Jim Griffiths (JG) updated the Board saying that there are currently 3 cases ongoing. There is one undergoing scoping and the 2 remaining surround self-neglect. Michael Preston-Shoot (MPS) Independent author for one of the ongoing SAR's will attend the next meeting of the SAR panel group and will assist in the learning and network events on March 5<sup>th</sup> 2021

A report has been commissioned on a previous self-neglect case and will concentrate on themes rather than specific actions

A third scoping involves a girl with complex learning difficulties and the SAR Subgroup are currently looking at methodologies which will inform them of the best way forward.

Jacqui Stansfield (JS) and Alison Clarkson (AC) are currently working on the creation of an online SAR referral form

JG is also looking at ways of communicating what a SAR is and to outline SAR criteria to wider audiences via digital media. To support this JG is going to present a piece to camera which will be used on the current SAR video presented on the KSAB twitter page.

**Action: JG to present piece to camera in support of SAR communications in next 3 weeks**

#### 5. Performance

##### 5a) Dashboard

Paula Adams (PA) reported on the Quarter 3 (2020/21) Dashboard data saying that it now reflects the most recent data available and is therefore much timelier.

The number of reported concerns has increased for Quarter 2 which relate mainly to an increase in neglect cases and discharges from acute trusts.

Nursing Home concerns are down by 54%. There has been an increase in adults at risk in own home. This may be due to care staff having to work from home due to Covid-19.

There are some reporting concerns which are being worked on including building into the Dashboard diagrams which add clarity to numerical data.

Making Safeguarding Personal (MSP) seems to show fairly static progress which could represent issues at front door. There is currently "deep dive" activity across partners to establish the potential reasons behind this.

Mental Capacity Act (MCA) clinics have commenced across partnerships and have been reported as being successful.

There is work ongoing surrounding amendment of risk assessments which will help to improve the safeguarding pathway.

PW stated the need for partners to stay connected on the issue of discharges. There is a need for a place based view on discharges and possibly the development of a pre-discharge space. It may be that safeguarding is being used as a default position unnecessarily.

Alexia Gray (AG) said that in terms of assurance the aim might be to replicate the Care Home Early Support and Prevention (CHESP) programme for discharging. AG is currently looking at a back room function for this and intends to produce a paper in due course.

## **5b) Risk Register**

PA said the risk register paper represented its second iteration. The methodology of this iteration was to send out a questionnaire to partner agencies seeking data on each area of risk. From the responses received there is less assurance around the domiciliary care network, the impact of reduced intensive care unit (ICU) capacity and issues relating to rapid changes in leadership in care homes.

PA would welcome the Boards feedback

MHE said he and PW had agreed that the best arena for looking into the further risks identified would be the SDG (Strategic Delivery Group).

PW further explained that the SDG had been considering this recently drawing out a couple of areas for focus namely domiciliary care and CHESP. It will be important for the Board to consider what the risk register will look like in a post Covid-19 world and PW is happy for this be considered at future meetings of the SDG.

Andrea Dauris (AD) asked in relation to line 14 of the risk register if there was something specific around the issue of ICU capacity.

PW said this was about ward discharges and the consequent impact on pressures in the system.

AD said the issue was broader, not just occurring in ICU settings

AE said that it is a difficult balance to discharge people effectively but that the issue was being looked at.

MHE concluded by saying there is much speculation about what is going to happen in a post Covid-19 world and we as a Board need to be prepared.

## **6. Challenge Event**

MHE confirmed that the annual peer review challenge event will take place over the course of 25<sup>th</sup> and 26<sup>th</sup> February 2021

Most partner challenge event responses have been received

PW reminded partners that questions will be asked relating to the role and policies on self-neglect and this is being used on all partner proformas.

## **7. Adults Missing from Health and Care Settings – Saved in National Guidance Folder**

MHE said the document was issued by the Government and referred to safeguarding 25 times. As such it will have an impact on all partners. One recommendation relates specifically to the need for partners to discuss and collaborate on the issue of adults missing from health and care settings.

RP said he hasn't seen anything in terms of this from an official route and PW confirmed that was the experience of the CCG

MHE said there was a need to confirm what issues there may be locally and whether there is anything the Board needs to fulfil.

PW said that Clare Robinson (CR) has had conversations surrounding this issue with colleagues but not from a health perspective concentrating rather on NHS providers.

Vicky Thersby (VT) said that Calderdale and Huddersfield Foundation Trust (CHFT) have done some local work on this issue and could undertake some scoping work on the number of people that have gone missing.

JG said there is intelligence at West Yorkshire Police on the numbers of missing people and this is a marker of performance management in terms of assurance.

Musarrat Khan (MK) would welcome looking into this as a partnership as there does appear to be a gap in this area. There have been a couple of cases in the Borough some of which involve children. Often cases are revealed across social media before the police become involved. There is an opportunity for volunteers to link up with Community Plus (CP).

Clive Barrett (CB) said that the relationship with police had been good at Mid York's Hospitals Trust and this had helped improve the Trust in their reporting procedures relating to missing people. Could the issue be taken to the SDG or set up in terms of a task and finish group?

MK said there could also be a relationship to mental health issues, and it would have been reasonable to predict issues relating to missing people going into an out of lockdown. Is it worthwhile considering people who might be better placed in mental health services?

Karen Oates (KO) said there may be some learning from the SAR Adult F case, and it may be that there is learning from the Herbert protocol.

RMG said this was an interesting document and he would be taking it in his work in other settings.

MHE concluded by saying it was important that this issue was on the agenda today and there had been some positive contributions. In agreement with PW's suggestion MHE would like a task and finish group set up on this issue under the authority of JG.

**Action: JG to set up a task and finish group looking at adults missing from health and care settings. JG will lead on this**

## **8. Self-Neglect Multi-agency policy and guidance highlight report**

Alison Clarkson (AC) presented the report previously submitted to SDG, explaining it represented the fulfilment of work carried out over the last 12 months. Highlighting the background to how recommendations of discretionary SAR for Adult L largely shaped the piece of work. This included:

- a rewrite of the self-neglect policy,
- a rollout of the policy; with briefings to frontline staff, which were ongoing and delivered by AC and JS,
- Creation of Risk Escalation Conference – layer of support and assurance from senior manager to frontline staff struggling with progressing self-neglect cases
- Holding Learning Bytes sessions to gain feedback from staff who have used the policy
- Creating online supporting paperwork on CareFirst system

Adjustment have been made and continue to be made to the policy based on feedback which continues to be received.

Consideration is now being given to making sure front line staff are more aware of the policy to gain assurance that all the information is being disseminated to the right and relevant people. The overall experience and feedback has been very positive and the sense is that we are heading in the right direction.

PW said that the paper was very good prompting very good discussion. PW urged partners look at what has been done in terms of self-neglect in their organisations and how it can be embedded in Kirklees.

Tanya Simmons said the self-neglect policy is assisting at Hoarding Panel in terms of pathways and cases referred. There are now improved links with REC and better governance underpinning a robust partnership.

MHE concluded by saying this was an excellent piece of work highlighting an example of moving from a SAR to a conclusion.

## 9. Subgroups Terms of Reference

Strategic Delivery Group  
Quality and Performance subgroup  
Dignity in Care Steering Group  
Learning and Development subgroup  
Safeguarding Adult Review subgroup  
(Engagement group – to be reviewed)

MHE asked if members were happy to sign off the Subgroups Terms of Reference

Penny Renwick (PR) said for all Subgroups should we consider inclusion of learning from elsewhere because as a structure we do learn from arenas other than Kirklees

Secondly, should we consider the inclusion of a clause specifying that an independent (lay) member sits on the SDG

Thirdly, there should be clarity on the independence of oversight on the SAR Subgroup in that there should be a credible and independent presence other than the Board.

MHE said that assurance is overt in that the Chair of the Board is independent and that SAR authors are also independent. The SAR Subgroup is Chaired by the police and the Independent KSAB Chair is not involved in decision making.

JS said that this is written in the SAR framework and that there are different methodologies which cover the issue of independence. MHE added clarification that a standalone Terms of Reference is produced for an Independent Author in relation to the SAR at the point of commissioning.

PR would like this written into the Terms of Reference and is concerned about transparency if for example the family involved in a SAR were to seek assurance of independence.

**Action: SAPT to investigate and advise on Terms of Reference for the 3 concerns raised**

## Urgent Community Response

Rebecca Spavin (RS) presented this item confirming that presentation slides had been circulated and shared these on screen with Board members

RS works on behalf of Provider Alliance alongside partners in the meeting

The Urgent Community Response (UCR) layers into the discharge pathway and Provider Alliance will be able gauge demand and capacity after obtaining 3 months of data. Provider Alliance are currently 13 weeks into a pilot project and learnings have come from the response to Covid-19 allowing people to remain at home and support people through the restrictions. UCR meetings will help support service improvement and attendance at seminars alongside working with Gateway to Care (GTC) are also beneficial.

In the long run UCR will assist in triaging referrals from 111 and 999 calls allowing people to remain in their own homes supported. All UCR staff are up to date in their understanding of policies and procedures surrounding safeguarding

RS wants to assure the Board that UCR learnings are raised at clinical meetings and that if there are safeguarding issues they don't breach the accepted targets.

CB asked if the UCR is available in other areas to Kirklees Council?

RS said that this isn't possible at the moment but has been raised with colleagues. Once there is a more consistent approach it may be possible to make better links

MHE said that this represents 1 of 7 national pilots. What would be the valuation timescale?

RS said later this year.

EPH asked how UCR would be communicated to the public. There are concerns that some people may view UCR as a lesser outcome than being admitted to hospital RS recognised this and said data would be forthcoming at the end of the pilot review.

## **10. National and Regional Updates**

JS said that there is work currently being undertaken around section 42's and in support of this JS is attending a webinar and working with Nicola Webb in updating regional guidance.

Covid 19 insight project return - AG confirmed this has been completed

## **11. Agency Safeguarding updates and local issues**

AG – said an update on ADASS Yorkshire and Humberside risk assessments has been reviewed and will now be signed off to be shared with the Board

There were no other agency safeguarding updates or local issues reported

## **12. AOB**

## **Network Event – Hiding Behind Capacity - Tackling complex situations with confidence**

JS reported that there are now 120 people registered to take part in this event

### **Engagement group update**

JS said that a first meeting has been held this year and the group's first step will be to revise the Terms of Reference.

### **Learning Disability Inequalities**

PW said there is a large amount of work and scrutiny that needs to be undertaken in terms of this. The learning and disability reviews and actions have been completed but have these been sent to the learning disability steering group? We need to think about what our role as a partnership is in terms of learning disability. Do we know enough about what's happening in Kirklees Council?

RP said that there is a sense that there are a large range of issues in terms of learning disability and we may need to encourage conversations with partners and others for the Board to seek assurance that this is an issue that is in hand.

### **Locala - Leaders in Safeguarding Award' for their Safeguarding work across all our services**

MHE recognised and congratulated Locala on their recent award.

RP placed on record that various Board members will be leaving. RP thanked MHE for his stewardship of KSAB and the Boards huge appreciation for his flexibility

RP also thanked KO, VT and CB for their contributions to the work of the Board and wished them all future success.

In concluding the meeting MHE thanked all Board members for their input to the work of the Board. MHE reflected that the Board is now a true partnership with Chairs from partners rather than Kirklees Council and in this way an arms-length relationship has been cultivated.

MHE confirmed that the next meeting of KSAB will be Chaired by RMG.

### **13. Next Meeting Date**

Friday 7<sup>th</sup> May 2021, 1:00pm – 3:00pm  
Virtual via MS Teams

### **Actions from meeting 8<sup>th</sup> July 2020**

**Item 2**

Jim Griffiths (JG) to provide brief about the Stalking Protection Orders virtually to Board members

**Item 6**

JG and MHE to present an update to Board following CSE Gold meetings – JS to check how non-recent abuse protocol was circulated

**Actions from meeting 8<sup>th</sup> February 2021****Item 4**

JG to present piece to camera in support of SAR communications in next 3 weeks

**Item 7**

JG to set up a task and finish group looking at adults missing from health and care settings. JG will lead on this

**Item 9**

SAPT to investigate and advise on Terms of Reference for the 3 concerns raised