

Kirklees Safeguarding Adults Board

MINUTES

5 November 2021

1:00pm – 3:00pm

Venue: Virtually via Microsoft teams

Attendees

Robert McCulloch-Graham, (Independent Chair)

Penny Woodhead, Chief Quality and Nursing Officer/Deputy Chief Officer (NHS Kirklees Clinical Commissioning Group)

Jim Griffiths, Detective Superintendent, Kirklees District (West Yorkshire Police)

Helen Hunter, Chief Executive (Healthwatch Kirklees and Healthwatch Calderdale)

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)

Julie Warren-Sykes, Assistant Director of Nursing, Clinical Governance and Safety (South West Yorkshire Partnership NHS Trust)

Penny Renwick (Lay Member)

Helen Geldart, Head of Housing Services (Growth & Regeneration – Development, Kirklees Council)

Deputies and others in attendance

Paula Adams, Head of Safeguarding (Locala Community Partnerships CIC)

Karen Burke, Named Professional for Safeguarding Adults, (Calderdale and Huddersfield Foundation Trust)

Razia Riaz, Senior Legal Officer (Kirklees Council, Legal Services)

Jacqui Stansfield, Service Manager (Kirklees Safeguarding Adults Board)

Alison Clarkson, Deputy Service Manager (Kirklees Safeguarding Adults Partnership Team)

Donna Harkins, Housing Strategy and Partnership Manager, Growth and Housing, Kirklees Council

Minutes

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

Mailing List

Nikki Gibson (Head of Safeguarding, Yorkshire Ambulance Service)

Welcome, Introductions and Apologies

Robert McCulloch-Graham (RMG) opened the meeting, welcomed members, and asked members to briefly introduce themselves and their organisational roles

Formal apologies were received from:

Marie Gibb

Emily Parry-Harries

Cllr Musarrat Khan

Amanda Evans

1. Declarations of Interest and Confidentiality Declarations

None declared

2. Story – setting the scene

Item 2) SAR Leanne

Jacqui Stansfield (JS) delivered a story to the Board iterating a Safeguarding Adults Review (SAR) from another local authority concerning “Leanne”. The story touched on adult safeguarding issues including mental capacity, professional curiosity, and empowerment.

Robert McCulloch-Graham (RMG) expressed the view of Board members during the subsequent discussion that the story was both well delivered and well written, adding value to Board meetings in contextualising adult safeguarding in human terms. RMG invited additional thoughts from members remarking that this was a very sad story.

Acknowledging the story as very powerful Penny Woodhead (PW) focused on the issue of professional curiosity reminding Board members that concerns around this are significant. Professional curiosity depends on compassion and commitment and how organisations can influence each other in positive decision making.

Richard Parry (RP) offered the view that professional curiosity is something that has perhaps been lost sight of and this might link into the need for additional training across professionals and consideration of day-to-day pressures over the next six months or so. Additionally, personalised care is crucial in terms of professional curiosity. Integrated working may help to hang together relationships and consideration of the wider life better for both professionals and service users.

Helen Hunter (HH) made the point that sometimes professionals need the space to make room for good professional curiosity and that perhaps the demands to prioritise service users’ needs complicate professionals decision making. Similarly, whilst it is important to acknowledge the need to discuss SAR stories it may also be useful for the Board to hear from current cases that do not lead to a review. It’s important to understand the stories of people who represent “live cases” who are experiencing these issues now for the Board to gain better understanding and share partner learning.

Moving on to the issue of mental capacity Karen Burke (KB) offered the view that whilst the Mental Capacity Act (MCA) represented welcome legislation it sometimes

didn't recognise individual complexities. The case highlights issues surrounding capacity for decision making sometimes taken without more holistic and deeper considerations such as the effects of illness and how people with different functional capacities may have a more complex view of the world. This has moved KB to think deeper after considering the case of Leanne and also to examine the issue of anorexia and capacity which is embedded in mental health law.

RMG summarised the discussion saying that he is reassured by the level of conversation and informed reflection alongside the delivery and narrative of the story which wasn't reflected in his reading of the SAR. There is a sense that Board members are keenly aware of the implications of this story lending itself to how an individual is perceived in holistic terms. It is also reflective of professionals asking difficult questions and being prepared to encounter difficult ground. There are too many "ifs" in this story alongside the dilemma of when to apply the mental capacity act to deprive an individual of their liberty appropriately. RMG posed the question what would we have done differently in Kirklees. It is this question partners should consider in terms of the story.

A discussion arose around issues partners are experiencing in terms of capacity.

PW reiterated previous concerns about current workload and issues surrounding recruitment of staff. Services are currently operating with a very high level of acuity. This is to do with both the current level of Covid -19 provision as well as the re-setting of services pre-pandemic. Work is being carried out to help professionals in terms of their resilience and being reliable secure in the knowledge that there is hope for the future. The next six months will be critical and the need will be to add value in safeguarding while trying to reduce additional complexities.

RP reflected that there may be an element of fatigue across service professionals that wasn't evident at the height of the pandemic. At that time professionals were focused in terms of a national emergency and reacted as such. The position now is much more complex with the easing of restrictions and whilst safeguarding was at the top of the agenda then it might not be so now. There needs to be assurance that the complexity of risk in the current environment is being addressed.

Summarising RMG reflected that when organisations are focused on individual goals that is often that time that sharing of learning stops. As we move to the next phase of the pandemic, we need to ensure that joined up working continues.

3. Previous Minutes and Matters Arising

Item 3) Draft Minutes from Meeting 23rd July 2021

Board members agreed the minutes of the KSAB meeting of 23rd July 2021 were accurate

Actions from meeting 7th May 2021

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

PW said this item related to missing adults' protocols and we should investigate if there were any gaps for scoping in consultation with SAPT

JG said that now we have a policy this will be completed by the next Board meeting
Carried forward

Actions from meeting 23rd July 2021

Item 5

Partners, Organisations and Colleagues to provide comments on the executive summary and press release on the SAR's for Adult N and Adult M via the KSAB mailbox ksab@kirklees.gov.uk by 30th July 2021

Completed

Item 11

PR to liaise with EPH via e-mail to describe situation regarding children's access to public swimming pools.

Tanya Simmons (TS) informed the Board that a new safety water group has been assembled at West Yorkshire Fire and Fire and Rescue (WYFR) with specific Terms of Reference

RP informed that Board that considerations are being made within Kirklees Council regarding the issue of school swimming

Completed

4. Governance

Item 4 Legal Update

Razia Riaz (RR) gave an overview of the legal report. Highlights from the legal report were:

As of 11 November, the [Health and Social Care Act 2008 \(Regulated Activities\) \(Amendment\) \(Coronavirus\) Regulations 2021](#) come into force. These regulations require registered persons of all CQC registered care homes (which provide accommodation together with nursing or personal care) to ensure that a person does not enter the indoor premises unless they have been vaccinated. This is subject to certain exemptions. The Regulations apply not just to care home staff, but also to those visiting care homes in a professional capacity, such as Best Interests Assessors, IMCAs and lawyers. The guidance accompanying the regulations apply only in England.

[The Most Complex Covid Patient in the World](#)

The case concerned a 56-year-old Muslim woman, AH, who had been an inpatient at Addenbrooke's Hospital, Cambridge, since the end of December 2020, where she was admitted, on an emergency basis, suffering with severe symptoms of Covid19, and where she remained at the time of the judgment, September 2021. AH was currently being cared for in a critical care unit and was dependent on mechanical ventilation, continuous nursing care, nutrition and hydration delivered via a nasogastric tube, and receiving various medications. The Judge was informed that

“in terms of the neurological impact and complications AH is ‘the most complex Covid patient in the world’.” The virus had caused substantial neurological damage. There was agreement AH’s lacked capacity to decide in relation to treatment.

Dr A gave evidence to the effect that the ventilatory support was not keeping AH alive, in order to equip her to respond to an underlying illness (for which it is designed), it was simply keeping her breathing. In a very real sense, it was not prolonging her life, it is protracting her death and it was extending her pain at a time when her ability to feel it had increased.

The Judge found that it is not in AH’s best interests that ventilation be continued indefinitely, however found that it is in her interests that ventilation remains in place until such point as all her four children and family members can be with her. He was satisfied that is what she would want and be prepared to endure further pain to achieve. One of the children was presently outside the UK and would have to make arrangements to travel. The Judge made clear that ventilation should be discontinued by the end of October 2021. The Official Solicitor, Sarah Castle, identified this case as the most troubling and tragic of the cases of this kind with which she had been involved.

[Committal Proceedings of Sibling](#)

An application was made for the committal of one of P’s children (HB) because he had earlier breached court orders within these proceedings. P was a 96-year-old man whose lack of capacity was an issue in the wider proceedings. The applicant (AB) was one of P’s children who was resident in the USA. P’s 2 other children resided with P in the UK. AB was concerned that P had lost capacity to manage his property and affairs and was being financially exploited.

It was alleged that HB had prevented attempts for P’s capacity to be assessed on at least 7 different occasions despite the court sanctioning such assessment and ordering HB not to hinder the proposed assessment. At the time of the committal hearing, the assessment had been completed. Based on the evidence before it, the court found that HB had “made clear he would not cooperate with an assessment.”

The Judge, however, opted not to impose a custodial sentence or a fine against HB. Instead, the judge emphasised to HB the need to obey court orders and concluded that “it is not necessary to impose any custodial sentence, immediate or suspended, and neither is it necessary to impose a fine” because the judge intends “to give Mr HB the opportunity to demonstrate that he has learnt the importance of compliance with court orders

[Court of Protection Approves Covid Vaccine For Man Lacking Capacity, But Declines To Authorise Booster Dose Without Another Hearing](#)

The case of A, Re (Covid-19 vaccination) [2021] concerned AD, a man in his thirties, who lives in supported living with a 24/7 package of care and support from a private care provider, commissioned by the local authority.

AD has diagnoses of moderate Learning Disability, Down's Syndrome and Autism. He is clinically overweight, with an estimated BMI of 31. He is of BAME heritage. AD

is also unable to comply with social distancing measures or wear PPE such as a mask, and he is a sociable person.

All those involved with AD agreed that he lacks capacity to make a decision about the Covid-19 vaccination and any medication to facilitate its administration. AD has a history of refusing healthcare and intervention and will say “no” when introduced to a healthcare professional. Staff members had attempted to go through the easy read social story concerning Covid-19 virus and the vaccine. It was noted that AD had limited capacity but clearly objected to the injection and would shake his head to verbalise “no”.

His mother, Mrs C, strenuously opposed the administering of the Astra-Zeneca vaccine, or any Covid vaccine. She considered amongst other things that the force or restraint would be too traumatic and destroying for him including that it did not guarantee prevention of Covid-19 or stop transmission, it was not proven safe, the incidence of adverse side effects was very high, Vitamin D and C were better treatments, and in the long-term people who had taken the vaccine would fall very sick and die.

The CCG’s application was supported by AD’s father, his social worker, a Senior Community Learning Disability Nurse, the operations manager of the care provider, AD’s Independent Mental Capacity Advocate, and AD’s GP.

Counsel for the CCG submitted that many of Mrs C’s arguments were “well-known, extraordinary and dangerous misinformation concerning the Covid-19 vaccine, of the kind which is rife online”.

The Court of Protection judge declared that “AD lacks capacity to make decisions in respect of the administration of the Covid 19 vaccination, that it is lawful for AD to be given two doses of the Astra-Zeneca Covid 19 vaccine in accordance with the care plan (no use of force) but refused the application to allow for the administering of the booster in a few months’ time, without agreement or further application to the court”.

Following the submission of the report RMG sought comments on the cases outlined from members

RP reflected that the cases outlined do appear to be very live issues that have significance in social care at the moment.

PW noted the volume of work that was associated with the roll out of Covid vaccinations, the cost significance and the time consumed in administration. There is a need to attempt to make earlier interventions.

PW also confirmed to the Board that an announcement by the Government is imminent relating to compulsory vaccination for care home staff.

Closing this section RMG reflected on the interesting debate elsewhere about children’s capacity for taking decisions to have the vaccine and the role of the parent.

5. Strategic Priorities

Item 5) Draft Strategic Plan incorporating new proposed Shared Priority Objectives

JS introduced this item presenting the draft KSAB Strategic Plan for 2020-23 which incorporates the shared priority objectives for 2021/22

Following on from the Boards Development Day it became apparent in the workshops that followed, that the current plan required refining. The new plan on a page which was agreed at the Development Day features replaces the previous jigsaw model. The inspiration for this model was from the example at West Yorkshire Police (WYP) which is simpler, easier to read and more compact. The Draft Strategic Plan incorporating new proposed Shared Priority Objectives now requires sign off as this will influence the Boards workplan

In terms of the shared priority objectives SAPT requested feedback from partners and the following 4 headings represented the most commonly submitted:

- Building a Confident Workforce
- Learning from the Experience of Covid
- Improved Communication Across the Partnership
- Active Listening

Each of these outcomes is then drawn deeper at a more granular level describing process: what will we do; how will we do it; how will we measure it. These represent the focus point of the Boards work.

RMG noted that the plan on a page was very helpful

PW informed members that there had been significant discussion on the strategic plan and shared priority objectives at the last meeting of the KSAB Strategic Delivery Group meeting. There is a need to articulate the document into the Boards workplan. As we are already well into the current year there is a need for thought as to how long the work will take and refreshment of the plan in 2022

Concluding RMG said that the main focus on strategy will be on 2022/23. Perhaps now is the time to pause and consider what is to be done from 2022/23

The draft KSAB Strategic Plan for 2020-23 incorporating the shared priority objectives for 2021/22 was agreed by KSAB and can be published

6. Safeguarding Adults Reviews

Update

Item 5a) Adult M Update - Action plan and next steps

Item 5b) Adult N Update - Action plan and next steps

Item 5c) Adult O Update

Chair of the KSAB SAR Subgroup Jim Griffiths (JG) delivered the standing agenda item update.

The action plans in respect of the SAR's for Adult M and Adult N were discussed at the last meeting of the KSAB SAR Subgroup and there is assurance that the action plans will be carried out.

Sharing SAR's learning around the country from other local authority Safeguarding Adults Boards (SAB's) is problematic. JS will be taking this issue to the National SAR Board.

Updating progress with the Adult O SAR JG informed members that the draft report from the Independent Author has been received and is under consideration by the KSAB SAR Subgroup running towards conclusion.

The KSAB SAR Subgroup workplan was considered at the last meeting of the group and the new shared objectives linking into the workplan are being considered by the Subgroup.

JG informed members that a document had been submitted by Donna Harkins (DH) to the KSAB SAR Subgroup which followed on from consideration of a SAR from Calderdale local authority. This was very helpful in outlining how Kirklees have reacted to the report showing what has been carried out to diminish the likelihood of similar issues within the authority.

RMG asked that this report should be taken to the National Safeguarding Adults Board

Action: SAPT to submit the DH SAR report in response to Calderdale SAR report to the National Safeguarding Adults Board
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7. Performance

Update:

**Item 7i) Q & P Proposed new dashboard
ii) Audit Programme Update**

KSAB Quality and Performance (Q&P) Subgroup Chair Paula Adams delivered the standing agenda item.

There is a new proposal to refresh the performance dashboard which informs the work of the Q&P Subgroup. At present Q&P Subgroup members consider the dashboard to be too heavily focused on Adult Social Care (ASC) data and narrative. There are further considerations being made as to how it can be more inclusive for the partnership. A task and finish group was recruited to devise a new template for health partners to record and narrate more meaningful quarterly data. The first iteration of this in quarter 2 2021/21 was received favourably. There is now development in terms of extending this template across the whole partnership. Is the proposal to develop the performance dashboard further agreed?

The Board agreed the proposal

Turning to the Audit Programme Update the proposal is to link in the audit with the recommendations from the Adult N SAR and to continue work in relation to Making Safeguarding Personal (MSP) collaborating with Healthwatch Kirklees.

The Board agreed the proposal

8. Dignity in Care Network Event update

Update

Alison Clarkson (AC) delivered an update on the KSAB Dignity in Care Network Event “Success Through Adversity” held on 30th September 2021

A broad range of guest speakers were invited including Professor Christopher Phillipson from the University of Manchester who had recently co-collaborated on a report discussing the community response to the Covid-19 pandemic and its importance in providing resilience to communities. Other speakers were from various voluntary and community groups in the Borough and all were received very well particularly David from Kirklees Involved Network (KIN).

The event included breakout room discussion and the narrative from this is included in the subsequent report.

The event logistics went well but the ultimate attendance of 40 after initial bookings of over 80 was disappointing. There may be a need to re-consider the schedule of timings for the KSAB network events.

Though the level of feedback responses was disappointing in terms of submissions the views on both the content and delivery of the event were encouraging.

The event was recorded and the recording has been sent to all delegates.

The appendix section in the submitted report reflect the comments from the breakout room and these will now be submitted to the KSAB Learning and Development (L&D) Subgroup for sharing and learning. RMG noted that the event was very good despite the attendance and that it will prove useful in terms of wider sharing and learning.

9. NHS White Paper update

This is a standing agenda item.

PW said a more detailed briefing note will be submitted in advance of the next KSAB meeting which should contain more clarity on how the imminent changes to the NHS structure will affect adult safeguarding. There has been some information on the structural changes which will take place from April 1st, 2022. An announcement is pending on the name of the Chair and Chief Executive of the new body.

A review of the current functions and what will be delivered differently has been undertaken, and in terms of safeguarding, accountability will rest with the Chief Nurse but will be devolved on a place-based basis.

PW has included KSAB on the draft constitution as a key stakeholder. RMG may want to comment on this.

RMG said this will be discussed as a standing agenda item at the next KSAB meeting.

10. National and Regional Updates

RMG reported that there is a regular 2 yearly survey of National Safeguarding Adults Board Chairs (SAB's) and we are currently entering the current period of review. Most of the review is fairly routine but there are a couple of areas that others in the Board might contribute, for example in relation to SAR's.

There are 4 areas which require reporting: new inspection framework; core business; SAR's; care improvement programme. RMG will contact specific members for their contribution.

PW said that for those of us working across boundaries peer reviews will have been completed. Some of the considerations from the review would be useful for the KSAB SDG particularly in light of the strategic refresh.

RMG said the review will be compiled during December 2021/ January 2022 and will be shared in February 2022

JS updated the Board informing them that the SAR National Library has now been taken under the wing of Independent SAR Author Michael Preston-Shoot (MPS). This will be themed based and provide a useful additional resource. MPS has asked for submission of any SAR's from 2019 onwards

11. Agency Safeguarding updates and local issues

Vulnerability to Radicalisation Summary

JG summarised the vulnerability to radicalisation work that has been carried out by West Yorkshire Police (WYP). This fits into current threads in policing at the moment and in particular around Self-Neglect. It also made WYP realise how much police officers understand about adult safeguarding and links into the theme of professional curiosity. There are many issues that occupy police officers when attending an incident. One of these is radicalisation. The current policy within Kirklees is very well embedded.

One of the aspects that works very well in Kirklees is that there is a specific officer responsible for adult safeguarding and sits with the Adult Social Care Front Door Team.

The police training is not recommended for the Board and partners but consideration should be given to how well it is embedded with partners.

Board members agreed that this approach was the correct one. RP suggested a conversation might take place on the councils inclusive community strategy which attempts to prevent people feeling excluded.

Reflecting on his time in a previous local authority RMG agreed that good ties with the community can alleviate many vulnerabilities

Julie Warren-Sykes (JWS) informed the Board that South West Yorkshire Foundation Partnership Trust (SWYFPT) have recruited a new named nurse for safeguarding children. Separately, improvements in communication are being experienced in terms of digital working.

HH informed the Board that she will shortly be taking up a position with the NHS Confederation and therefore leave the Board. A replacement from Healthwatch will take HH's place on the Board.

KB informed the Board that Calderdale and Huddersfield Foundation Trust (CHFT) have recruited a new named nurse for safeguarding children. CHFT are still experiencing discharging issues. There also issues with communication in terms of feedbacking staff narratives to the Board which are being worked on.

JS informed the Board that Jackie McGranaghan Service Manager for Learning and Organisational Development at Kirklees Council will shortly begin the process of phased retirement. Consequently, the Board will need to commence on a period of recruitment to seek a new Chair for the KSAB L&D Subgroup

12. Annual Report

AC informed the Board that the draft KSAB Annual Report 2020/21 and associated Executive Summary is now ready for Board sign off and agreement subject to members comments and feedback which should now be submitted as soon as possible

Following receipt of comments, feedback, and any amendments the Annual Report and Executive Summary will be circulated for members electronic signature

RMG asked for members thoughts on the draft Annual Report

In response to a question from PW relating to checking on outcomes of the Boards work in the period AC confirmed that a retrospective summary had been included

PW commented that it is very important to blend together a narrative that underscores the importance of the partnership as a corporate story in identifying achievements.

HH said that the Annual Report is received at the Kirklees Council Health and Well-Being Board Is there something more that can be done to capture the impact of safeguarding practice and how it links into the people of Kirklees.

Penny Renwick (PR) shared this view commenting that the Annual Report is very long and unclear in terms of impact as well as being very descriptive. It is worthy but not dynamic and this is something that perhaps could be looked at in future years

Summarising RMG welcomed comments on the draft Annual Report along with the hope that it will be released earlier in future years. SAPT should now set a target date for final comments, amendment, and electronic sign off from Board members

Action: SAPT to set target for members to feedback final comments on the draft Annual Report 2020/21 in order circulate for electronic signature to sign off and publish to the KSAB website

13. AOB

RMG reiterated his congratulations to HH on her appointment to the NHS Confederation and thanked her for her work on the Board.

14. Next Meeting Date

**Next Meeting Date: Monday 7th February 2022
1pm – 3pm**

Virtual via Microsoft Teams

Summary of actions

Actions from meeting 7th May 2021

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

PW said this item related to missing adults' protocols and we should investigate if there were any gaps for scoping in consultation with SAPT

JG said that now we have a policy this will be completed by the next Board meeting
Carried forward

Actions from meeting 5th November 2021

Item 6

SAPT to submit the DH SAR report in response to Calderdale SAR report to the National Safeguarding Adults Board

Item 12

SAPT to set target for members to feedback final comments on the draft Annual Report 2020/21 in order circulate for electronic signature to sign off and publish to the KSAB website