

RAG (Red, Amber, Green) STATUS KEY			
	Improvement required (red)		Preparation underway (amber)
	Improvement completed (green)		

**RAG Overview – previous and current rating**

Recommendation No.	New RAG (Dec17)	Recommendation No.	New RAG (Dec 17)
1		8	
2		9	
3		10	
4		11	
5		12	Omitted due to similarity to other recommendations
6		13	
7		14	

**Agencies involved:**

- [Kirklees Safeguarding Adults Board \(KSAB\)](#)
- [Kirklees Council – Adult Social Care](#)
- [NHS England](#)
- [Greater Huddersfield and North Kirklees Clinical Commissioning Groups \( CCGs \) - Health Commissioners](#)
- [Calderdale and Huddersfield Foundation Trust](#)
- [Mid Yorks NHS Trust](#)
- [South West Yorkshire Partnership NHS Foundation Trust](#)
- [Locala](#)
- [West Yorkshire Police](#)
- [West Yorkshire Fire and Rescue Service](#)

<b>KSAB</b>	Kirklees Safeguarding Adults Board	<b>SAB</b>	Safeguarding Adults Board
<b>MCA</b>	Mental Capacity Act	<b>KSCB</b>	Kirklees Safeguarding Children Board
<b>MARAC</b>	Multi-agency Risk Assessment Conference	<b>QIG</b>	Quality Implementation Group
<b>QPR</b>	Quality Performance Resource (Clinics)	<b>MHA</b>	Mental Health Act
<b>ASC</b>	Adult Social Care	<b>CCG</b>	Clinical Commissioning Group
<b>DOLS</b>	Deprivation of Liberty Safeguards	<b>IDVA</b>	Independent Domestic Violence Advocate
<b>CHFT</b>	Calderdale and Huddersfield Foundation Trust	<b>SWYPFT</b>	South West Yorkshire Partnership Foundation Trust
<b>DRAMM</b>	Daily Risk Assessment Management Meetings	<b>QAF</b>	Quality Assessment Framework

AGENCY NAME: Kirklees Safeguarding Adults Board (KSAB)			
	Recommendation	RAG	Progress
7	The SAB to be assured that partner agencies have a shared and common multi-agency understanding and approach to the identification and management of risk.		<p><b>No update for October – but taken from August 2017 update:</b></p> <ul style="list-style-type: none"> <li>- Kirklees Safeguarding Adults Board (KSAB) has established a Task and Finish Group focusing on Self Neglect and risk management.</li> <li>- The Self Neglect Task and Finish Group has developed a multi-agency action plan and Self Neglect Protocol (April 2016) with a multi-agency training programme in operation currently and well attended.</li> <li>- A dedicated referral form for self-neglect is available on Carefirst.</li> <li>- Referral numbers for self-neglect in 2016 - 17 were 55. The new referral form will improve measurement of performance against outcomes.</li> <li>- Once Kirklees Council is confident of the effectiveness of the Self Neglect Protocol this approach will be extended to other areas of risk assessment and management as an on-going process of development.</li> </ul> <p><b>October 2017 update (provided by Adult Social Care):</b> The Principal Social Worker through the audit framework provides a robust scrutiny of appropriate cases and effective risk management. As a result of our work on establishing a Self-Neglect Protocol, this provides a platform to risk assess/manage those complex cases involving wider risky behaviours/lifestyle choices. These cases by their nature are complex and involve numerous agencies, creating a different ask of our multi-agency safeguarding response. This will be kept in view as we implement new ways of working.</p> <p>Quality and Performance subgroup will build into their schedule a retrospective audit on the self-neglect cases and protocol.</p>

<p><b>11</b></p>	<p><b>Safeguarding Adult Board (SAB) to be assured / receive assurance in partnership with the Domestic Abuse Strategy Group</b>  <b>Ensure that domestic abuse training is available across agencies and organisations</b></p>	<p>A multi-agency training audit has been created which identifies the current position from agencies in attendance at the Domestic Abuse Strategic Partnership Board. The Domestic Abuse training offer was revised and courses refreshed for 2017/18. They all include details of where to refer for emergencies, safeguarding concerns, general support, signposting and reference the links between the Care Act and Mental Capacity. Summary below:</p> <p><b>June 2016 – Sept 2016</b></p> <ul style="list-style-type: none"> <li>• MARAC (Multi-Agency Risk Assessment Conference) –5 sessions with 77 attendees</li> <li>• Safeguarding Adults at Risk –2 x sessions in 2015/16 with 22 attendees in total</li> <li>• Domestic Abuse Training – Level 2 –1 x session with 13 attendees</li> <li>• Domestic Abuse – Impact on Children (KSCB – Kirklees Safeguarding Children Board) - 21 x sessions with 39 attendees</li> </ul> <p><i>A further breakdown of the courses including number of sessions; people in attendance and future dates has also been submitted</i></p> <p><b>December 2017 update</b>  <b>Additional informal training offered in relation to Domestic Abuse:</b></p> <ul style="list-style-type: none"> <li>• Training offered widely across the Council and Children’s Safeguarding Board websites (E-Learning, MARAC briefings, Level 2 DA Awareness, Impact on Children, Coercive and Controlling Behaviour and Honour Based Violence/Forced Marriage and Female Genital Mutilation)</li> <li>• Lecture provided by Brid Featherstone and focus on older people as part of safeguarding week</li> <li>• West Yorkshire Communications campaigns (focus on 3<sup>rd</sup> party reporting and Coercive and Controlling Behaviour)</li> <li>• Usual routes for addressing staff concerns through supervision, access to Care First counselling and Employee Health Care</li> <li>• One Minute Guide on services circulated staff</li> </ul>
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AGENCY NAME: Kirklees Council – Adult Social Care			
	Recommendation	RAG	Progress
1	Ensure Mental Capacity Act Awareness is embedded in practice for key staff		<p><b>October 2017 update:</b> Evidence based assurance routes in place through the Adult Social Care Quality Assurance Framework (QAF) which ensures Mental Capacity Act (MCA) awareness and assessment of MCA assessments are undertaken appropriately. As well as identifying areas of robust practice through the QAF, where there are variations in practice (e.g. where MCA principles are not followed in practice) these are routed through to the Quality Impact Group (QIG) to identify actionable areas for improvement. Action points and learning from the QIG are escalated to the Quality, Performance and Use of Resources Clinics to support strategic oversight of key quality and performance issues.</p> <p><b><i>NB: There is a rolling programme of training to take into account turnover of staff and the cycle of monitoring improvement. This will also be taken forward through the Board's challenge event and training subgroup. This oversight is contained with the Terms of Reference for both these.</i></b></p>
2	The Person Led Assessment should have explicit links to the assessment of Mental Capacity so that the worker ensures a Mental Capacity Assessment is considered and where required one is undertaken.		<p><b>October 2017 update:</b> In line with national findings MCA remains a continued area of focus for Adult Social Care. The review of the Person Led Assessment (PLA) documentation is in progress and will follow once the system redesign work is completed. Prompts are now included in the PLA form to ensure MCA is considered as part of the assessment process. The quality assurance framework continues to ensure that MCA remains a pivotal domain within the audit cycle and is actively carried forward by the Principal Social Worker, this along with Supervision Audits (due to be presented to SLT late Oct) provides robust assurance. Our audit process recognises that there are some gaps in compliance with regards to MCA and we continue to communicate robustly with Team Managers and Deputy Team Managers to shift quality and</p>

			performance in the right direction. We recommend to the Board that a briefing is provided in 6 months' time with a report on MCA progress outside of this SAR.
<b>3</b>	<b>Mental Capacity to be better embedded into social care practice, and be supported by workforce development methods.</b>		<b>October 2017 update:</b> As per previous updates, the full suite of training available to staff has been updated to incorporate MCA. The outcomes of the recent Supervision Audit will be presented to the Adults Senior Leadership Team as part of a unified approach to Quality Assurance to ensure connectivity with quality, performance, service user feedback themes. Through our assurance processes we are self-aware of practice issues and are taking active action to mitigate these. We continue to monitor the effectiveness of our MCA learning and operational practice through our QAF process.
<b>4</b>	<b>Adult Social Care, with Client Financial Affairs (CFA) should ensure that evidence of registered Enduring Power of Attorney, Lasting Power of Attorney or Deputyship is established and recorded appropriately on the user's record.</b>		<b>October 2017 update:</b> This is now in place and is standard operational practice, Team Managers continue to be prompted and invited to make known Power Of Attorney (POA) and deputyship status and communications have been sent out to staff to this regard. Recording of POA/Deputyship will be considered as part of ongoing MCA thematic audits going forward to provide assurance that this is happening. Operationally local Deputy Team Managers and Team Managers will lead on providing assurance (e.g. assurance that we always seek proof of a POA).
<b>5</b>	<b>Management should ensure that all staff as a matter of routine practice record their name and team on all observations recorded on Care first system to increase accountability and enable swifter fact finding for all</b>		This recommendation was based on a misunderstanding of Carefirst; which automatically adds the staff member's details as an entry is made.  <b>No further updates required as this recommendation is Green.</b>
<b>6</b>	<b>The Safeguarding Board to be informed of progress around on-going developments associated with the Safeguarding Adults Service, in particular the systems thinking and service re-design work.</b>		<b>October 2017 update:</b> The new safeguarding model will be operational following recruitment to key posts and going forward the approach will be underpinned by the Safeguarding Consultants role. A briefing note was formally issued to all members of the Board early summer 2017. The new model is now embedded and therefore we recommend this domain progresses

			to a Green RAG rating
<b>13</b>	<p><b>Safeguarding Adult Board to be assured in partnership with the Domestic Abuse Strategy Group</b></p> <p><b>Review that there are effective information sharing protocols and consider options for multi-agency information sharing, including 'Think Family' which is about improving life chances of families at risk. (Links with day service recommendation – Improved sharing of information and vetting of family/carers)</b></p>		<p><b>No update for October – but taken from August 2017 update:</b></p> <p>As well as the Inter-Agency Information Sharing Agreement, information sharing between key domestic abuse agencies has been reviewed and revised. This guidance is due to be shared with the Domestic Abuse Strategic Partnership Meeting in September 2017 with a recommendation that it proceeds to formal sign off through the Community Safety Partnership. This information sharing protocol is specifically in relation to MARAC (Multi-agency Risk Assessment Conference) but now also incorporates the Daily Risk Assessment Management Meetings (DRAMM) that commenced in October 2016.</p> <p>One of the purposes of the DRAMM being implemented was to ensure that all medium-high risk cases of domestic abuse are discussed daily with representation from both Children's and Adult's Services. As well as ensuring an immediate risk assessment and safety plan to be actioned, it also ensures that, irrespective of whether there are children connected with the family or not, thought is given to the circumstances of the whole family, including interfamilial abuse. This means that the needs of the children and/or adults are not considered in isolation and appropriate support can be offered (including social care intervention). This process complements the now streamlined MARAC and any cases that require a wider agency input will still proceed to MARAC for a full case discussion as an additional safeguard.</p> <p><b>December 2017 update</b></p> <p>A management walkthrough will be carried out regarding the issues from the 'Mr G' case to compare the actions from the case against the new Adult Social Care protocols.</p>
<b>14</b>	<p><b>Safeguarding Adult Board to receive assurance in partnership with the Domestic Abuse Strategy Group</b></p> <p><b>The Kirklees Council Provider Forum explore the issues raised by the day care service</b></p>		<ul style="list-style-type: none"> <li>- Questionnaire circulated prior to the Learning Disability Provider Forum meeting. Discussion took place during the meeting, summary of comments made recorded.</li> <li>- A further follow up session held at the Learning Disability Provider Forum meeting on 1<sup>st</sup> February 2017. Discussion took</li> </ul>

			<p>place during the meeting, summary of comments made recorded.</p> <p><b><u>Summary of Evidence</u></b> Survey of Providers, LDPF Agenda, LDPF minutes, Questionnaire discussion summary (updates received June 2017)</p> <p><b>No further updates required as this recommendation is Green.</b></p>
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AGENCY NAME: Greater Huddersfield & North Kirklees Clinical Commissioning Groups / NHS England			
	Recommendation	RAG	Progress
1	Ensure Mental Capacity Act Awareness is embedded in practice for key staff		<p><b>October 2017 GP Practice update (including any additional evidence):</b></p> <p><i>In February we identified that this action for the GP Practice was now completed with no further actions – this was agreed by NHS England and the CCG.</i></p> <p>If evidence is required that GP1 attended the MCA masterclass the CCG is able to provide training attendance record but has not as the record contains the names and details of the many GP's who attended.</p> <p>GP2 is currently on maternity leave so it is not possible to request her training certificate for the MCA on line training completed.</p> <p>There were no concerns raised within the SAR about the Practice adhering to MCA requirements and in October 2015 (post the SAR event and after GP1 had attended MCA training) the CQC completed an inspection of the practice and found the overall rating to be 'good', but with a mark of 'outstanding' given for the category 'are services effective'.</p> <p>Within the CQC inspectors' comments for the effective practice comment is a statement: "Patients' needs were assessed and care was planned and delivered in line with current legislation. This included assessing capacity". This demonstrates that the CQC as the regulators of GP Practices were happy that the practice had embedded the requirements of MCA.</p> <p>A copy of the CQC inspection report (which is contained within the CQC archived documents) can be found at:  <a href="http://www.cqc.org.uk/location/1-546094205">http://www.cqc.org.uk/location/1-546094205</a></p> <p>Following a 'business decision' the Practice has now merged with</p>

			<p>another practice.</p> <p>October 2017 update: The policy template is complete and is the process of being shared with the Local Medical Committee as a guidance template that Practices can choose to use if they want to. The MCA DoLS training template will then be added to the CCG intranet that GP Practices can access.</p>
8	<p>The GP practice ensures that their already good practice of recording the details of the adult(s) accompanying a child or vulnerable adult when they attend the surgery is extended to all adults at risk.</p>		<p><b>October 2017 update:</b></p> <p>The audit was completed by the Practice prior to the Practice merging with another practice. No further audits will be completed as the Practice is no longer registered with the CQC.</p> <p>Assurance is given by the Designated Nurse that the learning from this and other local and national cases has been shared in discussions at training provided to GP's and at GP Safeguarding Lead meetings. It is proposed by the CCG team that this action is complete.</p>
9	<p>The GP Practice amends it's Did Not Attend Policy to include briefly reviewing the records in all cases of a child or vulnerable adult failing to attend a Surgery or Hospital appointment, to determine the number of such episodes and, when a number are found, reviewing the child or vulnerable adult's record and those of their family/household in more detail to check for Safeguarding risk factors or concerns.</p>		<p><b>October 2017 update:</b></p> <p>The policy was amended and audit completed. An overview of the lessons from the case has previously been shared at GP Safeguarding training provided by the CCG Safeguarding team delivered previously and will be shared at GP Practice Safeguarding Leads at twice yearly held meetings with the CCG team.</p> <p>As proposed in June 2017, this action is now complete. Of note the GP Practice is no longer registered as detailed in recommendations 1 and 8.</p> <p><b>No further actions or evidence required as this recommendation is green.</b></p>
10	<p>The GP Practice ensures that the production of its Safeguarding Adults Policy is completed in a timely manner.</p>		<p><b>October 2017 update:</b></p> <p>Copy of the GP Safeguarding Policy was received by the KSAB in March 2017.</p>

			<p>The CCG Safeguarding Team has developed a Safeguarding Adults Policy 'template' for GP Practices in the area to utilise in the development/update of their own policies.</p> <p>This will not be a compulsory template for practices to utilise (as they are all independent providers), but will be offered in a supportive approach to amending/developing their own practice policy.</p> <p><b>No further actions or evidence required as this recommendation is green. The Practice is also no longer registered.</b></p>
<p><b>11</b></p>	<p><b>Safeguarding Adult Board (SAB) to be assured / receive assurance in partnership with the Domestic Abuse Strategy Group</b>  <b>Ensure that domestic abuse training is available across agencies and organisations</b></p>		<p><b>October 2017 update:</b>                  The CCG Safeguarding Team is continuing to provide a Domestic Abuse Masterclass for GP Practices on an annual basis for each of the North Kirklees area and Greater Huddersfield area. There are no further updates or actions for this section and it is proposed that the action for the CCG is now completed.</p>

AGENCY NAME: Calderdale & Huddersfield Foundation Trust			
	Recommendation	RAG	Progress
1	Ensure Mental Capacity Act Awareness is embedded in practice for key staff		<p><b>October 2017 update:</b></p> <ul style="list-style-type: none"> <li>- Monitoring and review of Deprivation of Liberty Safeguards (DOLS) applications and authorisations at the Trust Safeguarding Committee is ongoing</li> <li>- Regular Safeguarding Champions network events are planned and ongoing</li> <li>- MCA DoLS training is now delivered as an essential skill to front facing non-clinical staff as an eLearning package for level 1. Level 2 is delivered as part of the Safeguarding Adults Level 2 eLearning package, and Level 3 is now delivered separately through a classroom session. This training was part of Adult safeguarding Level 3 classroom session prior to this change.</li> <li>- The Safeguarding team delivered a workshop on 'See me and Care' at CHFT Nursing Conference in October</li> <li>- The introduction of the new Electronic Patient Records now has a mandatory field where capacity is asked in the ED dept.</li> <li>- MCA DoLS Policy is now separate</li> </ul> <p><b><i>NB: There is a rolling programme of training to take into account turnover of staff and the cycle of monitoring improvement. This will also be taken forward through the Board's challenge event and training subgroup. This oversight is contained with the Terms of Reference for both these.</i></b></p>

AGENCY NAME: Mid Yorks NHS Trust			
	Recommendation	RAG	Progress
1	Ensure Mental Capacity Act Awareness is embedded in practice for key staff		<p><b>October 2017 update:</b> Compliance as at 1<sup>st</sup> October 2017: Level 1 (all 7000 staff) = 97%. This is attendance at Corporate Induction and/or receipt of NHS MCA prompt cards Level 2 (approx. 3000 clinical staff) = 90% (classroom or e-learning options) Level 3 (approx. 500 senior staff) = 82% (Masterclass or workshop)</p> <ul style="list-style-type: none"> <li>• MCA Champions' Network is being developed, with the first meeting planned for the end of October.</li> <li>• Audits of the new care plan for vulnerable patients are being undertaken.</li> <li>• Pocket sized laminated cards on documenting capacity and consent distributed to all wards and departments</li> <li>• The safeguarding team have been attending morning board rounds and safety huddles to ensure staff are considering the MCA and identifying potential DOLS cases.</li> <li>• MCA training on learning from SIs has been delivered to community nursing teams.</li> <li>• Lawyer from Trust's solicitors will be delivering an MCA masterclass in December to staff who are senior decision makers.</li> </ul> <p><b><i>NB: There is a rolling programme of training to take into account turnover of staff and the cycle of monitoring improvement. This will also be taken forward through the Board's challenge event and training subgroup. This oversight is contained with the Terms of Reference for both these.</i></b></p> <p><i>MYHT feel that we have achieved the target for this action.</i></p>
11	Safeguarding Adult Board (SAB) to be assured / receive assurance in partnership with the Domestic Abuse Strategy Group Ensure that domestic abuse training is available across agencies and		<p><b>October 2017 update:</b> As recommendation 1 – domestic abuse training is incorporated within Safeguarding Children training at both level 2 and level 3. All staff in</p>

	<p><b>organisations</b></p>	<p>contact with patients are mandated to undertake either level 2 or 3 training every three years. Within this training, staff are informed how to identify, manage and appropriately refer domestic abuse.</p> <p>There is a domestic abuse case scenario within Safeguarding Adults level 2 training, which is mandatory training for all staff who have safeguarding responsibilities.</p> <p>Information leaflets on domestic abuse support groups have been distributed across wards.</p> <p>As part of Safeguarding Week, the safeguarding adults team will be delivering training sessions on domestic abuse in older people with Pennine Domestic Violence Group on wards at Dewsbury Hospital</p> <p><i>MYHT feels that we have met the target for this action</i></p>
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AGENCY NAME: South West Yorkshire Partnership NHS Foundation Trust			
	Recommendation	RAG	Progress
1	Ensure Mental Capacity Act Awareness is embedded in practice for key staff		<ul style="list-style-type: none"> <li>- Staff within the Trust now receive mandatory training in MCA/Dols (Mental Capacity Act/ Deprivation of Liberty Safeguards).</li> <li>- Within Mental Health, clinical staff also receive mandatory training in the use of the MHA (Mental Health Act) to ensure staff understand the interface.</li> <li>- The training compliance is reported on a monthly basis to the Executive Management Team and to the MHA committee on a 3 monthly basis.</li> <li>- MHA committee have commissioned an internal audit of staff's understanding of MCA/DoLs/MHA also including their experience of the training delivered. This was to be presented to the MHA committee in August 2017.</li> <li>- The clinical legislation manager is currently working on the level 2 e-learning for MCA.</li> </ul> <p><b>October 2017 update:</b></p> <ul style="list-style-type: none"> <li>- The trust compliance rate for mandatory MCA/Dols training is currently at 86%</li> <li>- Themed MCA/Dols quality inspection across services will be undertaken in January 2018 and a report will be submitted to MHA committee in March 2018.</li> </ul> <p><b><i>NB: There is a rolling programme of training to take into account turnover of staff and the cycle of monitoring improvement. This will also be taken forward through the Board's challenge event and training subgroup. This oversight is contained with the Terms of Reference for both these.</i></b></p>
11	Safeguarding Adult Board (SAB) to be assured / receive assurance in partnership with the Domestic Abuse Strategy Group Ensure that domestic abuse training is available across agencies and		The domestic abuse training is accessible by staff through the Learning and Development training brochure on the Trust's intranet. The Trust's Domestic abuse policy is currently being reviewed and this further

	<p><b>organisations</b></p>		<p>promotes the issue of domestic abuse and the training available. SWYPFT staff can also access domestic abuse level 1 and level 2 e-learning. Domestic abuse and access to training is promoted through Safeguarding adults training and through safeguarding forum.</p> <p><b>No further actions or evidence required as this recommendation is green.</b></p>
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AGENCY NAME: Locala			
	Recommendation	RAG	Progress
<p><b>1</b></p>	<p><b>Ensure Mental Capacity Act Awareness is embedded in practice for key staff</b></p>		<p><b>October 2017 update:</b></p> <ul style="list-style-type: none"> <li>• MCA mandatory training compliance 92%</li> <li>• Rolling programme of briefings continue for frontline practitioners. 500+ colleagues have attended session.</li> <li>• Reminder email sent to colleagues who have not yet completed the MCA mandatory read – 1124 read (404 still to read).</li> <li>• New MCA template introduced into adult services electronic health records on September 4th. Use of the template will be evaluated in a future audit.</li> <li>• MCA champions available to support teams to complete MCA assessments upon request. Training sessions offered to integrated community care teams.</li> </ul> <p><b><i>NB: There is a rolling programme of training to take into account turnover of staff and the cycle of monitoring improvement. This will also be taken forward through the Board's challenge event and training subgroup. This oversight is contained with the Terms of Reference for both these.</i></b></p>

AGENCY NAME: West Yorkshire Police			
	Recommendation	RAG	Progress
1	Ensure Mental Capacity Act Awareness is embedded in practice for key staff		<p><b>October 2017 update:</b> Further training around mental health has been delivered to front line staff in September 2017. This is a rolling process and will continue in the future also. This has now been built into all Safeguarding training and student courses also.</p> <p><b><i>NB: There is a rolling programme of training to take into account turnover of staff and the cycle of monitoring improvement. This will also be taken forward through the Board's challenge event and training subgroup. This oversight is contained with the Terms of Reference for both these.</i></b></p>

AGENCY NAME: West Yorkshire Fire and Rescue Service			
	Recommendation	RAG	Progress
1	Ensure Mental Capacity Act Awareness is embedded in practice for key staff		<p><b>No update for October – but taken from August 2017 update:</b></p> <ul style="list-style-type: none"> <li>- All relevant staff have received initial training on the MCA (Mental Capacity Act) by a colleague from Wakefield Council (Mental Capacity Act Lead).</li> <li>- When prevention officers are carrying out High Risk Interventions they are considering if the occupant has capacity, which they didn't do prior to the awareness being delivered.</li> <li>- MCA refresher training for the officers and prevention staff will be arranged so that everyone has a better understanding of this.</li> </ul> <p><b><i>NB: There is a rolling programme of training to take into account turnover of staff and the cycle of monitoring improvement. This will also be taken forward through the Board's challenge event and training subgroup. This oversight is contained with the Terms of Reference for both these.</i></b></p>