

**Gloucestershire Safeguarding Adults Board (GSAB) Meeting**  
**Tuesday 10<sup>th</sup> September 2024, 9:30am**  
**Chalford Meeting Room, Shire Hall, Gloucester and MS Teams**

**MINUTES**

**Present:**



Paul Yeatman (Chair) (PY)	Independent Chair, GSAB
Sarah Jasper (SJ)	Head of Safeguarding Adults, GCC
Steve Bean (SB)	Detective Superintendent, Head of Public Protection, Gloucestershire Constabulary
Jeanette Welsh (JW)	Lead Safeguarding Adults, Gloucestershire Hospitals NHSFT
Jessica John (JJ)	Designated Safeguarding Lead, Young Gloucestershire
Emily White (EW)	Director of Quality, Performance and Strategy, GCC
Carolyn Bell (CB)	GSAB Business Manager, GCC
Sam O'Malley (SO)	Designated Safeguarding Nurse, ICB
Steve O'Neill (SON)	Drugs and Alcohol Commissioner, GCC
Erica March (EM) (Minutes)	Safeguarding Administrator, GCC
Donna Potts (DP)	Head of Safeguarding & Prevention Manager, Gloucestershire Fire and Rescue Service
Clare Lucas (CL)	Healthwatch Gloucestershire
Lisa Walker (LW)	Service Manager, Gloucestershire Carers Hub
Chris Atkins (CA)	Gloucestershire Care Providers Association
Amanda Wray (AW)	Safeguarding Manager, Cheltenham Borough Homes
Sarah Hawker (SH)	Advanced Customer Support Senior Leader, DWP
Natalie Thelwell (NT)	Head of Housing and Communities, Gloucester City Homes
Jessica John (JJ)	Designated Safeguarding Lead, Young Gloucestershire
Chloe Causier (CC)	Senior Probation Officer, Probation Service
Hannah Williams (HW)	Deputy Director of Nursing Therapy and Quality, GHC
Jonathan Newman (JN)	Named Nurse for Adult Safeguarding, GHC
Lara Gillman (LG)	Senior Commissioning Manager, GCC
Daniel Dray (DD)	Deputy Head of Safeguarding, SWAST
Sarah Simmons (SS)	Gloucestershire Constabulary


**Apologies:**


Nina Kane (NK)	Probation Service
Marie Crofts (MC)	Chief Nursing Officer, NHS Gloucestershire ICB
Sarah Scott (SS)	Executive Director Adult Social Care and Public Health, GCC
Vicky Livingstone-Thompson (VLT)	Chief Executive, Inclusion Gloucestershire
Susan Hughes	Forest of Dean and Cotswold District Councils
Jason Poole	Trading Standards
Karl Gluck	Mental Health, Advocacy and Autism Commissioner, GCC/ICB
Craig Tucker	Kingfisher Treasure Seekers
Helen Penrose	Care Quality Commission
Jenny Cooper	Lead Commissioner, Older People Hub, GCC/ICB

		Owner
1	<b>Declarations of Interest:</b> No declarations of interest were made.	
2	<b>Minutes of the Last Meeting</b>	

	The minutes of the meeting held on 14/05/2024 were agreed as a true and accurate record.	
<b>3</b>	<b>Matters Arising from 14/05/2024</b> All matters arising are complete.	
<b>4</b>	<b>Items from the Chair</b> The CQC Inspection of GCC Adult Social Care took place last week; PY was interviewed. The Annual Train the Trainer CPD Event is taking place in Cheltenham on 11/09/2024, 40 trainers have signed up to attend. The National SAB Chairs Executive met yesterday, prior to the board meeting on 18/09/24. Items of interest on the agenda included: the role of the coroner and its interface with SARs, Right Care, Right Person (RCRP) and SAB funding. There were also discussions regarding legal advice for SABs and SAR escalations.	
<b>5</b>	<b>GCC Update</b> EW provided the update. <ul style="list-style-type: none"> <li>• GCC Adult Social Care were inspected by CQC last week. Interim verbal feedback will be provided on 11/09/2024. The full report is expected in 8 weeks. Communication will be circulated to partners once feedback has been received. Once the report is finalised, it will be published.</li> <li>• Some of the key themes included: demographics, how this is promoted and how GCC work with people. Communicating with those with lived experience, making safeguarding personal, out of hours support, governance, feedback loops and community engagement.</li> <li>• SJ updated on Making Every Adult Matter (MEAM). This is a network providing advice and support for working with people with severe and multiple disadvantage. A bid has been made to join the network, if successful it will be for two years. MEAM offer advice on co-production and working in a trauma informed way.</li> <li>• The Q1 data shows a 23% increase since last year. The Single Point of Access (SPA) has increased the number of referrals. Abuse in people's own homes is the number one location of abuse and SJ undertook a review of these. A significant number are domestic abuse and SJ has met with the Domestic Abuse Partnership Board to highlight this. This will continue to be an area of focus. On average around 80% of referrals go through the SPA portal, this will not increase further until blue light colleagues start using the portal. DD said he would be happy to support with this for SWAST.</li> <li>• 173 GCC employees completed adult safeguarding training in Q1, but further work is needed on feedback from training, which currently is not being captured.</li> <li>• There continues to be high numbers of Deprivation of Liberty Safeguards (DoLS) applications. Work is ongoing regarding automating the process, to reduce the admin burden.</li> <li>• A Making Safeguarding Personal (MSP) audit has been undertaken looking at the number of Not Applicable responses; 45% of enquiries are categorised as Not Applicable. More work is needed in this area.</li> <li>• There was one large scale enquiry during the quarter. This is ongoing at present.</li> </ul>	

6	<p><b>ICB Update</b></p>  <p>GSAB board Sept 24.pptx</p> <p>SO provided the update, covering:</p> <ul style="list-style-type: none"> <li>• Governance arrangements</li> <li>• Key achievements in adult safeguarding</li> <li>• Key concerns/patterns/trends in relation to adult safeguarding</li> <li>• Adult safeguarding training</li> <li>• Capturing the voice of the individual (service user)</li> </ul> <p>They hold regular lunch and learn sessions for ICB staff. There are also GP and Practice Manager Forums. PY asked about the integration of the health safeguarding teams, which was planned a few years ago. It was felt that this would compromise the ICB, as they have an assurance function. SO said there was close working arrangements, with quarterly meetings and combined learning from SARs and DHRs. There is also a rolling programme of safeguarding supervision.</p>	
7	<p><b>GHC Update</b></p>  <p>GHC - GSAB Update.pptx</p> <p>HW provided the update.</p> <ul style="list-style-type: none"> <li>• GHC have a Bi-Monthly Safeguarding Group, which reports to the Quality Assurance Group. They also have an Improving Care Group, Learning Opportunities Group and with the new introduction of the Patient Safety Incident Response Framework nationally, colleagues are working closely with learning and patient safety colleagues through the After-Action Review (AAR) process.</li> <li>• There is good attendance at the lunch and learn sessions, which are carried out virtually. Training compliance for adult safeguarding is a challenge due to the large number of staff. Safeguarding training is being reviewed, to align it with the NHSE strategy. It is also aligned with health partners as much as possible. Bespoke safeguarding training has been provided for some specialist areas.</li> <li>• The Trust MCA Lead has increased training compliance, understanding and application within community hospitals.</li> <li>• The number of safeguarding referrals that colleagues are submitting has improved.</li> <li>• Safeguarding supervision for adults is an area for improvement. It can be a struggle to engage colleagues due to high workloads.</li> </ul>	
8	<p><b>GHT Update</b></p> <p>JW provided the update.</p> <ul style="list-style-type: none"> <li>• Safeguarding assessments have now been added at a variety of stages, including A&amp;E, maternity and inpatient wards for elective and unscheduled admissions.</li> <li>• In the past, outpatient staff overlooked alerts, such as safeguarding, the need for an interpreter, or if a patient was known to be violent. Now staff</li> </ul>	

	<p>are checking a day ahead, to pick these up. This provides staff and patients with a better experience.</p> <ul style="list-style-type: none"> <li>• Work is ongoing to digitalise the MCA Form, which is currently going through user-acceptance testing and will go live shortly.</li> <li>• The voice of the patient is key. There has been an improvement in this, with regard to learning disabilities and people with autism.</li> <li>• There tends to be more voice of parents, in teenager and young adult's notes, rather than the voice of the young person. This is something that needs to be explored further.</li> <li>• The Trust Behavioural Standards Panel is run weekly, looking at violent incidents where the patient has capacity, and it helps in addressing this behaviour; there has been a significant improvement.</li> <li>• A Vulnerabilities Framework has been created on the intranet, with how-to guides for staff. This includes risk assessments, contact and training information and policies.</li> <li>• A selection of leaflets has been created for best interest meetings to help families, carers and clinicians know what is expected within a meeting. There is also an easy read version for patients who wish to attend.</li> </ul>	
9	<p><b>GFRS Update</b></p>  <p>GFRS - GSAB Update.pptx</p> <p>DP provided the update. There is now a national Safeguarding Standard set by the UK Fire and Rescue Services, and GFRS are inspected on it. The fire risk factors were shared and discussed. Funding has been received for a Serious Violence Duty Worker, who is delivering training to adolescents, covering county lines, antisocial behaviour and violence against women and girls. The individual's involved in a safe and well referral are always asked what outcome they want. Lunch and learn sessions on SARs are regularly held, the last one was attended by around 60 people. They cover the learning relevant to fire, to ensure the whole workforce understands why safeguarding matters. Another one will be held in October focusing on domestic abuse and how that relates to fire. The overall aim is to highlight professional curiosity.</p>	
10	<p><b>Police Update</b></p> <p>SB provided the update. The Safeguarding Adults, Missing and Mental Health Team is still under resourced. This should be an investigative hub that deals with any safeguarding, adult criminal investigations and safeguarding referrals, however due to capacity this work is directed elsewhere. At present criminal investigations are either undertaken by CID or children's safeguarding. This is an issue in terms of accountability, and it is regularly raised. SB chairs a fortnightly Senior Leadership Team meeting where all heads of units come together to discuss issues. There are two monthly Vulnerability and Serious and Organised Crime and Exploitation meetings. This feeds into the Bi-Monthly Chief Constable's Performance Board. There is a good tiered system of governance. At the Vulnerability Board, SB provides a highlight report and</p>	

	<p>updates around those aspects of vulnerability that sit within Public Protection.</p> <p>Trends:</p> <ul style="list-style-type: none"> <li>• Fraud accounts for around 50% of all recorded crime and often vulnerable people are targeted. Domestic abuse is also a priority.</li> <li>• Safeguarding and vulnerability need to be understood across the force. All recruits have VIST training. The voice of the victim is evident within the VIST. There is also regular CPD where other agencies talk about adult vulnerability.</li> <li>• A new IT system, NICHE, will launch in October 2025, a dedicated team are currently working on this.</li> </ul>	
11	<p><b>Right Care Right Person Update</b></p> <p>SS provided the update.</p> <ul style="list-style-type: none"> <li>• Phase 1: AWOL went live on 31<sup>st</sup> January 2024.</li> <li>• Phase 2: Concern for Welfare and Frequent Callers is anticipated to go live on 24<sup>th</sup> September 2024. Work is taking place with partners and stakeholders to ensure readiness. Frontline training includes feedback from those with lived experience. These use recordings of frequent callers and their experiences of police contact.</li> <li>• Phase 3: Missing from Healthcare is due to go live at the beginning of 2025. Work is ongoing with colleagues in Children's Social Care to ensure it is understood where there is a concern for welfare or when it should be recorded as a missing person event.</li> <li>• Phase 4: Section 136 will be looked at with a joint policy and conveyance agreements.</li> </ul> <p>PY asked if it has been possible to capture the additional capacity requirement for health and social care, SS advised that they are looking at the displacement demand. Data will be shared with relevant stakeholders through the Implementation Board.</p> <p>SJ asked about care homes, and it was agreed that briefings will be needed with care providers regarding what is expected from them.</p>	
12	<p><b>Probation Update</b></p>  <p>Probation - GSAB Update.pptx</p> <p>CC provided the update.</p> <p>Probation currently manages around 1,800 people across the county. Internal adult safeguarding issues are dealt with through the Public Protection sub group which reports to the Operational Change and Delivery Board. Any adult safeguarding issues raised through MAPPA are escalated to the MAPPA Strategic Management Board.</p> <p>Over the last two years there has been an increase in individuals presenting with complex neurodiversity needs.</p> <p>From January 2024, the Early Release Scheme identified people who were suitable for release up to 70 days early. The service was only given a couple of weeks' notice prior to release. This reduced time to identify issues prior to release, usually release time frames are around six months. This has diminished the ability to support people effectively.</p> <p>The SDS40 (Standard Determinate Sentence) allows prisoners to be released</p>	

	<p>after serving 40% of their sentence; this begins today. Locally 15 people are being released, usually there are only one or two daily. A further eight will be released in October.</p> <p>The Victims Liaison Team will work with victims to inform them of release dates and for domestic abuse cases there is liaison with GDASS and the Nelson Trust.</p>	
13	<p><b>Cross Cutting Issues to follow up with GSCP</b></p> <p>SJ advised that GCC Children's Social Care have asked if they can join this Board, which has been agreed and SJ has suggested that she attend the Gloucestershire Safeguarding Children's Partnership on behalf of adults.</p>	
14	<p><b>Issues to be raised with NHS (South) QSG</b></p> <p>None reported.</p>	
15	<p><b>Any Other Business:</b></p> <p>SB asked when a response will be received from the Police and Crime Commissioner regarding additional GSAB funding; PY will provide an update once known.</p>	
	<p><b>Date of Next Meeting: Tuesday 26<sup>th</sup> November 2024</b></p>	