

Gloucestershire Safeguarding Adults Board (GSAB) Meeting

Thursday 23rd November, 9:30am

MS Teams

MINUTES

Present:

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| 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 |
| Lisa Walker (LW) | Service Manager, Gloucestershire Carers Hub |
| Clare Lucas (CL) | Healthwatch Gloucestershire |
| Karl Gluck (KG) | Mental Health, Advocacy and Autism Commissioner, GCC/ICB |
| Keith Gerrard (KGE) | Strategic Director and Strategic Lead for Safeguarding, Stroud District Council |
| Alicia Wynn (AW) | Young Gloucestershire |
| Emily White (EW) | Director of Quality, Performance and Strategy, GCC |
| Erica March (EM) (Minutes) | Safeguarding Adults Administrator, GCC |
| Carolyn Bell (CB) | GSAB Business Manager, GCC |
| Paula Massey (PM) | Enabling Manager, Resident Services Group, Forest of Dean and Cotswold District Councils/West Oxon District Council |
| Donna Potts (DP) | Head of Safeguarding & Prevention Manager, Gloucestershire Fire and Rescue Service |
| Steve O'Neil (SON) | Drugs and Alcohol Commissioner, GCC |
| Nicola Goddard (NG) | Gloucester City Homes |
| Hannah Williams (HW) | Deputy Director of Nursing & Quality, Gloucestershire Health and Care NHS Foundation Trust (GHC) |
| Helen Penrose (HP) | Care Quality Commission |
| Sam O'Malley (SOM) | Safeguarding Adult Lead, Gloucestershire ICB |
| Karen Smith (KS) | Trading Standards |
| Sophie Jarrett (SJA) | County Domestic Abuse and Sexual Violence (DASV) Strategic Coordinator |

Apologies:

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| Caroline Walker (CW) | Cheltenham Borough Homes |
| Vicky Livingston Thompson (VLT) | Chief Executive, Inclusion Gloucestershire |
| Marian Andrews Evans (MAE) | Executive Nurse & Quality Lead, NHS Gloucestershire ICB |
| Susan Hughes (SH) | Forest of Dean and Cotswold District Councils |
| Sarah Scott (SS) | Executive Director Adult Social Care and Public Health, GCC |
| Jenny Cooper (JC) | Older People Commissioner, GCC/CCG |
| Mary Morgan (MM) | Commissioner, GCC/ICB |
| Danielle Vale (DV) | Community Manager, POhWER Advocacy |

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| 1. | Declarations of Interest: No declarations of interest were made. | |
| 2. | Minutes of the Last Meeting – 07/09/2023 The minutes of the meeting held on 07/09/2023 were agreed as a true and accurate record. | |

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| 3. | Matters Arising from 07/09/2023 All matters arising are complete. | |
| 4. | Items from the Chair <ul style="list-style-type: none"> • PY informed the Board that he is now providing a Highlight Report. • The Bi-Annual Safeguarding Adults Board National Chairs and Business Manager's survey is underway. This covers a range of areas including national and local priorities and provides an opportunity for Boards to review their representation and funding arrangements. There has not been a local uplift in funding since the inception of the Board. • The National Chairs Network is on 13/12/2023. • The South West Chairs Group next meet on 06/12/23. PY sets the agenda, and it includes Right Care, Right Person, Police safeguarding data, CQC and Peer Review Inspections, SAB governance and quality assurance arrangements. • The three-year Strategic Plan runs from April 2022 to March 2025; Year 2 is underway. • There is now only one active SAR, EP. The first learning event is scheduled for 01/12/2023. <p>Areas for improvement highlighted in the recent LGA Self-Assessment submission include the same three priorities as for the national networks of SABs, so these are not unique to Gloucestershire.</p> <ul style="list-style-type: none"> • Priority 1: How does the board assure itself it is making a difference? Such as the use of partnership data and quality assurance processes and this is adding values and bringing better outcomes. • Priority 2: How do we engage and involve individuals with lived experience of adult safeguarding to determine if a person-centered response was delivered to identify and maximise on opportunities to learn to shape further practice. • Priority 3: How we engage and safeguard individuals with complex needs and severe multiple disadvantages in order to keep them safe. There was also the need to work with more closely with children's social care and associated partners to understand the needs of children transitioning into adulthood. <p>PY will provide updates on these in future Highlight Reports.</p> <p>From now on, the GSAB Business Planning Group minutes will be included in the Board papers. Individual Sub Group Reports are also routinely shared.</p> <p>PY asked if anyone had any new priorities to consider for the Strategic Plan or new risks for the Risk Register. None were provided.</p> <p>Action: Review Strategic Plan and Risk Register and provide any updates</p> | ALL |
| 5. | GSAB Constitution  GSAB Constitution Oct 2023.docx <p>A new, solely GSAB Constitution has been produced, previously this was joint with Children's. Statutory partners were provided with a copy over the summer and provided feedback. It sets out the purpose of the Board, the objectives,</p> | |

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| | <p>functions, and membership.</p> <p>DP asked at what level the Memorandum of Understanding should be signed, it was agreed that it should be Board member level rather than Chief Executive.</p> <p>Actions: Review and feedback on the GSAB Constitution by 15/12/23</p> | ALL |
| 6. | <p>Statutory Partner Highlight Reports (Statutory Partners)</p> <p>The statutory partner Highlight Reports were shared within the meeting papers. Board members were given the opportunity to ask any questions.</p> <p>PY asked DP about the Safeguarding Review monthly meetings, DP advised that within her team, they go through their cases, review those outstanding and look at trends and delays. DP updated on the UK Fire Standards for Safeguarding, set by the national Fire Standards Board. This sets the standard for all Fire and Rescue Services to achieve; Gloucestershire is fully compliant.</p> <p> Safeguarding-Fire-Standard-Draft-2.0.pdf</p> <p>PY asked JW about safeguarding risk assessments for outpatient clinics. JW advised that they check the day before a clinic, to ensure there are the correct alerts on patient records. HW said that GHNHSFT hold outpatient clinics in GHC community hospitals and wondered if this extends to their clinics.</p> <p>HW provided her apologies for not producing a Highlight Report, due to pressure of work.</p> | |
| 7. | <p>LGA Peer Review Findings</p> <p> 20231123 LGA briefing GSAB.pptx</p> <p>EW provided an update now that the final report has been received.</p> <ul style="list-style-type: none"> • CQC are starting statutory inspections nationally from January. • Nine weeks' notice is provided before an inspection. • Safeguarding will be an area of interest. • CQC are starting inspections of ICS's as well, pilots are happening at present. • CQC have just published the pilot reports on their website. <p>Headlines from the LGA Peer Review include:</p> <ul style="list-style-type: none"> • Dedicated and skilled staff, with a values led approach. • Need to embed the voices of local people. • Need to use data intelligently. • Need to be clearer about key priorities and narrative. • There is clear political support. • Potential to further develop strategic intent. • Opportunity for transformation. • Insufficient, visible data. <p>One consideration was discussed regarding 'threshold' guidance, which CQC are keen to see. SJ advised that the new GCC Single Point of Access Team are informing referrers of what should be reported. A decision-making support tool is currently being produced.</p> | |

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| | <p>SOM asked about Continuing Health Care, EW advised that SJ is working with the CHC Team, and this will continue.</p> <p>PY asked if the Care Act may change as a result of the CQC Inspections. EW felt a significant number of inspections would need to be undertaken before this was considered.</p> | |
| 8. Right Care Right Person | <p> Item 6. National Partnership Agreement</p> <p>Right Care, Right Person (RCRP) is a national agreement which will change the way the police and health partners respond to mental health emergencies in the future. At a national level there is cross agency agreement on implementing RCRP to achieve the following:</p> <ul style="list-style-type: none"> • Establish a new governance structure, including experts by experience. • Shared understanding of respective roles/responsibilities across a wide range of partners. • Access to 24/7 advice, support, assessment, and treatment. • Protocols aimed at ending police involvement in initial crisis calls, welfare checks, walking out of health facilities, missing from acute Mental Health and other psychiatric inpatient units, improving s136 processes and transport. • Reduce delays/handovers between the Police and Mental Health services with an aim to achieving a one hour target. • Clear protocol on identifying/conveying to a Health Based Place of Safety. KG noted that there is only one in Gloucestershire, the Maxwell Suite. • Data collection/data sharing across agencies to improve the understanding of Urgent and Emergency Care, Mental Health patient flows and Police involvement. • Development of multi-agency training. <p>Local Context:</p> <ul style="list-style-type: none"> • Working relationships between the Police, ICB and GHC are positive. • A programme will deliver this work over the next 12 months. • A local conference was held on 16/11/2023 by Gloucestershire Police to bring partners together. • Agreement that the Inter-Agency Monitoring Group (IAMG) will be used to drive the changes. A high-level group of Senior Leaders still needs to be established for the IAMG to report into. • There has already been good progress and joint working on AWOL from acute psychiatric inpatient units. <p>SB noted that 40 partners were invited to the conference, however only 13 attended. At a high strategic level, this is accepted as the right approach, the challenges will be at operational level. Incidents are often very complex, and people can have a range of needs, so several different agencies may need to be involved, but the aim is to minimise the inappropriate intervention of the police.</p> <p>Humberside Police piloted this and took two years to implement it. Gloucestershire have approximately a year, but work has already begun in some</p> | |

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| | <p>areas.</p> <p>PY requested a further update to the Board in six months' time.</p> | |
| 9. | <p>Domestic Abuse Update</p>  Domestic Abuse Update.pptx <p>SJA highlighted some of the changes over the last couple of years. As part of the Domestic Abuse Act 2021 there is a requirement for the survivor's voice to be represented on the Partnership Board. Some areas of the country have identified an individual to represent survivors, Gloucestershire wanted to ensure a broad spectrum of lived experience. A new Consultation Officer brings the lived experience voice into all of the work undertaken.</p> <p>A full countywide needs assessment and strategy refresh will begin in 2024.</p> <p>National Data:</p> <ul style="list-style-type: none"> • 5.5% of adults 16-74 experienced domestic abuse in the last year (2.3 million people) • Domestic abuse impacts 7 in 100 women and 4 in 100 men • There are three domestic homicides per week in England and Wales • 4.6% of women and 2.5% of men will have experienced stalking in the last year <p>Gloucestershire Data:</p> <ul style="list-style-type: none"> • 13% of all crime reported is domestic abuse • 38% of all violent offences are domestic abuse • 78% of victims are female • 93% of perpetrators are male • 30% of referrals to Childrens Social Care are domestic abuse related • Gloucester has the highest domestic abuse recorded crime in the county <p>DP said that target hardening costs are rising considerably, SJA agreed, but said the Home Office are allowing them to repurpose some funding streams if needed.</p> <p>PY asked about the availability of data. SJ advised that some is available. There were approximately 200 concerns raised since April, which is around 12%. SJ added that having a DA specialist embedded in the Adult Safeguarding Team would allow them to draw on their expertise.</p> <p>Action: SJ, PY and SJA to meet to discuss the data in the new year</p> | SJ/ PY/ SJA |
| 10. | <p>Cross Cutting Issues to follow up with GSCP</p> <p>SB raised an incident that happened a few weeks ago regarding a young person placed in county by another authority. The situation could have been avoided if there had been consultation when making the placement. SJ added that this was an example of the need for RCRP. SJ has held a debrief and it is clear what the issues are, but there are no solutions at present. This will be escalated to directors.</p> <p>Action: SJ to provide KG with the out of county placement debrief notes</p> | SJ |
| 11. | <p>Issues to be raised with NHS (South) QSG</p> | |

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| | No Issues were raised. | |
| 12. Any Other Business | <p>SON advised that there will be a new drug and alcohol provider from 1st April called V-I-A. SON will arrange with CB for them to attend a future Board meeting to provide an overview.</p> <p>SB advised that the VKPP Peer Review into the Police missing person's response has been completed and the report received. SB would like to present this at the February Board meeting.</p> <p>Action: CB to add VKPP Peer Review Report onto the agenda for February Board</p> | |
| Date of next meeting: Tuesday 20th February 2024 at 9.30am (Virtual) | | CB |