

Adult Safeguarding
Plymouth City Council
Windsor House
Plymouth PL6 5UF
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www.plymouth.gov.uk/democracy
29 September 2017

PLYMOUTH SAFEGUARDING ADULTS BOARD

Thursday 5 October 2017 10.00 am Windsor House

Members:

Andy Bickley, Chair
Councillor Lynda Bowyer, Carole Burgoyne, Gary Wallace, Craig McArdle, Matt
Garrett, Jane Elliot Toncic, Julian Mouland, Laura Collingwood-Burke,
Greg Dix, Geoff Baines, Joanna Robison, Craig Downham, Chris Rogers, Jon McLeavy, Sandy
Magee, Jonathan Nason, Kerri Nason, Sue Baldwin, Gary Walbridge, Bel Davies and Jon Cox
Members are invited to attend the above meeting to consider the items of business overleaf.

For further information on attending Council meetings and how to engage in the democratic process please follow this link - http://www.plymouth.gov.uk/accesstomeetings

Tracey Lee
Chief Executive

PLYMOUTH SAFEGUARDING ADULTS BOARD

I.	WELCOME AND APOLOGIES:	
2.	MINUTES AND MATTERS ARISING:	(Pages I - 6)
3.	CHAIR'S UPDATES:	
4.	BUDGET SETTING PRINCIPLES:	(Pages 7 - 18)
5.	SUB GROUP UPDATES:	(Pages 19 - 28)
6.	LEDER PRESENTATION:	(Pages 29 - 34)
7.	QUALITY AND PERFORMANCE SUB GROUP UPDATE:	
8.	NATIONAL/REGIONAL UPDATES SAFEGUARDING MANAGERS REPORT:	(Pages 35 - 36)
9.	AOB:	(Pages 37 - 98)



Safeguarding Adults Board

Page 1 Core Priorities:

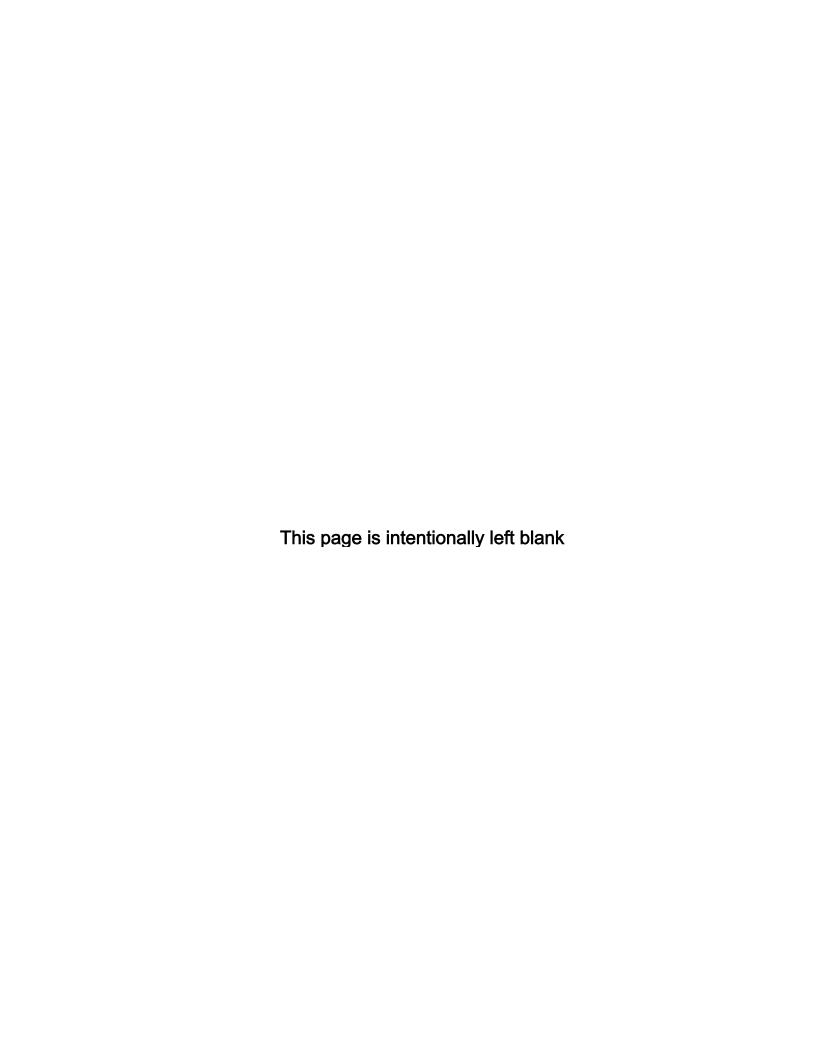
Agenda Item 2

Risk Management and Self Neglect
Mental Health
Engagement and Participation
Quality assurance
Learning and Development Strategy
SAB management arrangements

PLYMOUTH SAFEGUARDING ADULTS BOARD MEETING

Thursday 05 October 2017 10am to 1pm Windsor House, Tavistock Road, Plymouth, PL6 5UF AGENDA

1.	10.00 – 10.05	Welcome and Apologies	Andy Bickley	Dissemination
2.	10.05 – 10.15	Minutes and Matters Arising	Jane Elliott Toncic	Discussion and Decision
3.	10.15-10.25	Chair's Update	Andy Bickley	Dissemination
4.	10.25 - 10.40	Budget Setting Principles	Julian Mouland	Discussion Decision
5.	10.40 – 11.15	Sub group updates	Julian Mouland	Dissemination Discussion Decision
		BREAK 11.15 - 11.30		
6.	11.30 – 12.00	LeDeR presentation	Sally Matravers Simon Pollack NHS England	Dissemination, Discussion
7.	12.00 – 12.20	Quality & Performance sub group update	Geoff Baines	Dissemination Discussion
8.	12.20 – 12.40	National/ Regional updates Safeguarding Managers Report	Andy Bickley Jane Elliott Toncic	Dissemination Discussion Decision
9.	12.40- 13.00	AOB	Andy Bickley	Discussion





PLYMOUTH SAFEGUARDING ADULTS BOARD FULL BOARD MEETING

Thursday 20 July 2017 10am to 1pm

WINDSOR HOUSE, TAVISTOCK ROAD, PLYMOUTH, PL6 5UF MINUTES

Present:

Andrew Bickley	Independent Chair	
Cllr Lynda Bowyer	Portfolio Holder for Health and Adult Social Care	Plymouth City Council
Carole Burgoyne	Director for People	Plymouth City Council
Jane Elliott Toncic	Adult Safeguarding Manager	Plymouth City Council
Julian Mouland	Adult Safeguarding	Plymouth City Council
Craig Downham	Superintendent	Devon & Cornwall Constabulary
Jonathan Nason	Head of Plymouth, Cornwall & IoS Local Delivery Unit	National Probation Service
Kerri Nason	Operations Manager	DDC CRC
Gary Wallace	Public Health	Plymouth City Council
Geoff Baines	Director of Professional Practice, Quality and Safety	Livewell Southwest
Sue Baldwin	Designated Safeguarding Nurse	NEW Devon CCG
Jon Mcleavy		Independent
Wendy Rowden	Representing the Criminal Justice, Commissioning and Partnerships Manager	Office of the Police and Crime Commissioner
Jon Cox	Housing Services Manager	Sovereign Housing

[&]quot;Committed to ensuring improvements in the safeguarding of adults at risk of abuse, neglect or exploitation, by assurance, challenge, support and learning."

	Page 4	4	
Beverley Allingham	Representing the Director of Nursing,	PHNT	
Megan Cleaves	Safeguarding Administrator	Plymouth City Council	
Also in attendanc	e:		
Bridie Oakes-Richar	ds, Governor, Dartmoor Prison		
Kate Spreadbury att	ended for item 6 on the agenda		
I. Welcome/	Apologies		
	Andy Bickley welcomed everyone to the meeting		
Apologies f			
	s, Named Professional Safeguarding Param	edic, SWAST	
	nspection Manager, CQC		
•	lle, Assistant Director, PCC		
•	on, Criminal Justice, Commissioning and F Police and Crime Commissioner	Partnerships Manager,	
 Greg Dix, Di 	irector of Nursing, PHNT.		
 Lorna Colling 	gwood-Burke, Chief Nursing Officer, New	v Devon CCG.	
 Sandy Magee 	, Children's Services, Plymouth City Cour	ncil	
 Nick Rudling 	Nick Rudling, Deputy Safeguarding Lead, NHS England.		
 Matt Garrett 	Matt Garrett, Head of Community Connections, Plymouth City Council		
 Gary Walbrid 	Gary Walbridge, General Manager, Plymouth City Council		
Declaration	Declarations of Interest.		
 AB declared role. 	AB declared an interest in item 6 as he had prior involvement in his previous role.		
2. Minutes and	d matters arising		
 Item 4 Proba 	ation to be amended to CRC		
Matters Ar	Matters Arising		
No matters a	No matters arising, all actions from previous meeting are completed.		
3. Chair's Upo	date		
	of the Board congratulated Carole Burgo services to children and young people in I	,	
tracking of S	Work is ongoing with the Department of Health regarding the quality and tracking of SARs. There is a regional review led by Kate Spreadbury with a Conference planned for November.		
4. Budget 201	6-17		
 Work is ong 	 Work is ongoing on developing a policy regarding the budget. 		
JM needs to:	speak to OPCC regarding their contributi	ion. JM	
 There will be Boards. 	e £3000 from CRC to be split between Ch	nildren's and Adult's	
AB confirmed that he is contracted for 20 days work per year for SAB.			
, 12 (3)11111110	10 10 10 11 11 12 10 10 1 20 days Work		

[&]quot;Committed to ensuring improvements in the safeguarding of adults at risk of abuse, neglect or exploitation, by assurance, challenge, support and learning."

5. Quality and Performance

• GB gave his presentation on the information gained from the data he used. The data was from I June 2016 to 31 December 2016 this was benchmarked from data from I April 2015 to 31 March 2016. The data was sourced from the Local Authority Annual Safeguarding Adults Collection (SAC) Return.

Questions/Comments discussed.

- It would be useful to look at source of the referral. The quality of these referrals could be used to target training.
- It would be helpful to show people with multiple categories of abuse.
- What is the difference between care home, residential and nursing home in the location of abuse. Care home was used in the 2015-16 SAC return for the 2016-17 return location was changed to show residential or nursing home.

Recommendations

- GB highlighted a number of recommendations in his presentation and has suggested the following.
- I. Safeguarding Board to establish a multi-agency performance sub group to analyse data and report to the Executive and Board
- 2. to analyse the national benchmark information for 2016/17 once published
- 3. to take responsibility for implementing recommendations and reporting progress to the Executive

6. SCR/SAR Updates

SCR V

- The SCR report was published 12 June 2017. There was some media locally this was overshadowed by national events.
- JM met with the family before publication. He is the point of contact for the family and will revisit 6 and 12 months' time.
- The recommendations from the report will be monitored by the SAR Sub Group who will provide updates to the Board. To be included in the agenda for the next Executive Group meeting in September.

SAR RM

- Kate Spreadbury attended the meeting to present her draft report. The family have received a copy of this report and Kate and JM are meeting with the family on Tuesday 25 July 2017 for any comments/feedback.
- The request for the SAR was made by RM's family in March 2015 after seeing the outcome of the inquest regarding V reported by the media. The SAR process started in November 2016 after a number of other of legal routes had been explored by the family.
- Kate met with family to go through the ToR and they also submitted evidence for the report.
- A learning event was held 3 May 2017 with operational staff from the key agencies. Kate expressed that the people involved were very open and had a

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great willingness to learn.	
Comments/Feedback	
 It was felt that it is a very helpful report and easy to read and 	understand.
 One of the challenges was obtaining information from the DV to explore further the relationship between the Board and DV 	
 Discussion took place regarding the ViST process and what per the information within the ViST. AB will speak to Steve Parket ViSTs. 	· AD
 Agencies are still not confident in using the Risk Management 	Process.
 The action plan will be monitored by the SAR Sub Group. 	
7. National Regional Updates	
• n/a	
Safeguarding Managers Report	
 Could any comments regarding the report be sent to AdultSafeguarding@plymouth.gov.uk 	
 Could any expressions of Interest for the ADDAS Conference November be sent to the Adult Safeguarding mailbox. 	e on 20
8. AOB	All
 Information has been sent out regarding SARC could all commaddly Safeguarding so AB can send a response. 	nents be sent to
9. Future Meetings	
Thursday 5 October 2017	
Thursday 18 January 2018	
Meetings are 10:00 to 13:00 and are held at Windsor House	

[&]quot;Committed to ensuring improvements in the safeguarding of adults at risk of abuse, neglect or exploitation, by assurance, challenge, support and learning."

Page 7 Agenda Item 4
The following relates to exempt or confidential matters (Para(s) 3 of Part 1, Schedule 12A of the Local Govt Act 1972). Any breach of confidentiality could prejudice the Council/person/body concerned & might amount to a breach of the councillors /employees codes of conduct.



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Page 19 Agenda Item 5
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Report to: Plymouth Safeguarding Adults Board		
Date of meeting:	5 th October 2017	
Author:	Lorraine Webber,	
	Deputy Director of Quality Assurance & Improvement (SDT CCG)	
	Simon Polak, Deputy Chief Nurse (NEWD CCG)	
Title of Report: Learning Disabilities Mortality Review (LeDeR) Programme for Devon		

Background

Since the 1990s there have been a number of reports and case studies that have consistently highlighted that in England people with learning disabilities die younger than people without learning disabilities. The Confidential Inquiry into the premature deaths of people with learning disability (CIPOLD) reported that for every one person in the general population who died from a cause of death amenable to good quality care, three people with learning disabilities would do so (1).

More recently, analysis of data from the Primary Care Research Database (2) suggested that people with learning disabilities had a life expectancy 19.7 years lower than people without learning disabilities.

The Learning Disabilities Mortality Review (LeDeR) Programme has been commissioned by NHS England and established in response to the recommendations made by CIPOLD and has been set up to contribute to improvements in the quality of health and social care for people with learning disabilities in England. It is also recommended by the National Quality Board in their 'Learning from Deaths Programme' published April 2017.

The LeDeR Programme

The LeDeR programme provides guidance for the conduct of reviews of the deaths of people with learning disabilities and will support local areas to carry out local reviews. Through an agreed local review process, it aims to firmly embed the responsibility for conducting the reviews and implementing any recommendations and plans of action, into the hands of regional and local services.

The main purpose of the LeDeR review of a death of a person with learning disabilities is to:

- Identify any potentially avoidable factors that may have contributed to the persons death and
- Develop plans of action that individually or in combination, will guide necessary changes in health and social care services

Inclusion criteria for reviews under the LeDeR programme are:



- Initial reviews are undertaken of **all** deaths notified to the LeDeR programme of people with learning disabilities aged 4 and above who are registered with a GP in England.
- Deaths in adults with a learning disability aged 75 or over are not subject to a LeDeR review.

Establishing the LeDeR Review Process

The SDT CCG Director of Quality initially agreed to act within the Executive Lead role in the Devon STP area.

An implementation group is in place and an implementation plan in progress (Appendix 1)

A **Local Steering Group (LSG)** will be established for Devon (STP footprint) and will have responsibility for:

- ➤ Guiding the implementation of the programme of local reviews of deaths of people with learning disabilities
- Receiving regular updates from the local area contact about the local reviews of deaths of people with learning disabilities
- Monitoring action plans resulting from local reviews of deaths
- > Taking appropriate action as a result of information obtained from local reviews of deaths
- Resolve any interagency disputes that arise

Anticipated date of first steering group will be Sept/October 2017.

Local Area Contact

Local area contacts are the link between the central LeDeR programme team, the Local Steering Group and local reviewers. There will be 2 local area contacts for Devon and their role will be to work in partnership with the LeDeR team in organising the delivery of training for local reviewers, and more general awareness raising about the programme

In addition they will receive notifications of deaths of people with learning disabilities from the central LeDeR programme team and help allocate cases to appropriate local reviewers. They will monitor the progress and completion of reviews to ensure that they are of a consistent standard and completed in a timely and comprehensive way and provide ongoing advice, support and training for local reviewers as necessary.

Local area contacts will also liaise with the Local Steering Group about any issues that arise in relation to the reviews of deaths, receive and sign off completed review documents and action plans, anonymise and collate learning points and actions, and present the information to the Local Steering Group for action and implementation.

The area in which the person is registered with a GP will lead the review. If a person is in an 'out of area' placement the area in which the person is registered will lead the review unless there are compelling reasons why this should not be the case. In such



circumstances, discussion is required between the sending and receiving areas to agree which would lead the review and how best to collaborate.

- South Devon & Torbay (CCG area) LAC Lorraine Webber, Deputy Director of Quality Assurance & Improvement (Lead Nurse), Tel: 07769 324515 or email lwebber@nhs.net
- NEW Devon (CCG area) LAC Simon Polak, Deputy Chief Nurse, Tel: 07896 198812 or email simon.polak@nhs.net

Local Reviewers

The reviews should be undertaken using the secure web-based LeDeR review system, with all review documents completed on-line and any additional case notes and supporting paperwork stored within the LeDeR review system.

It is anticipated that around 32 local reviewers will be required across Devon and this has been estimated based on historical data of deaths over 1 year:

Area	Deaths in 1 year	Estimated no. of reviewers
Bristol	55	22
Somerset	34	14
Cornwall	39	15
Devon (incl Torbay)	80	32

There has not been data made available to identify the age of previous deaths however reviewers will need to be a mix of individuals from across both adult & childrens services. They will be responsible for undertaking robust and high quality reviews of the deaths of people with learning disabilities following the LeDeR methodology. Reviewers will receive training and support from the LeDeR team and locally from the LAC.

At the end of July training has been undertaken across Devon for both local area contacts and 15-20 reviewers from across CCG's and provider organisations. A further 4 reviewers are booked for training in September.

Local reviewers will undertake the 'initial review' and this process will determine if a multi-agency review is required. A **multi-agency review** should be considered if the local reviewer thinks that a multi-agency review would be appropriate, even though their initial assessment does not include any 'red flag' responses or when any red flag alerts are indicated in the initial review. Additionally a multi-agency review should be considered if there have been any concerns raised about the care of the person who has died.

Data Sharing & Confidentiality

Due to the complex and multi-agency nature of the reviews it is important that information sharing is in line with expectations regarding confidentiality and the appropriate use of received information.



The LeDeR programme has Section 251 approval (CAG reference: 16/CAG/0056) for the use of patient identifiable information in order for reviews to be undertaken of the deaths of people with learning disabilities.

Where the LeDeR review overlaps/links with other mortality reviews, to avoid duplication reviewers need to be clear how, and in what ways, the LeDeR mortality review process links with other mortality reviews or investigations. The Local Area Contact is responsible for informing the LSG about each LeDeR review that significantly impacts on or is affected by another investigation or review, sharing the agreed plan for data collection and providing the Local Steering Group with reports on progress and completion of the review.

Involving families in the review process

Families should be encouraged and supported to be involved throughout the entire review process or as much as the family feel able or want to be involved. Information & resources are also available to support the family.

Types of review

- > Initial undertaken by the local reviewer within 4 weeks
- ➤ **Multi-agency** undertaken where 'red flags' or concerns are indicated on initial review and completed within 90 days from initial review
- ➤ **Priority themed** deaths of people with learning disabilities who fit the criteria for priority themed review are subject to a full multi-agency review, and the anonymised reports and action plans reviewed externally by an independent, multi-agency review panel. Two panels are in existence: one is a multi-agency panel of professionals and family members. The second panel is of people with learning disabilities.

Quality Assurance

The local area contact is responsible for quality-assuring each initial and multi-agency review that is undertaken in their local area.

The Steering Group will be responsible for producing regular quality assurance reports and ensuring recommendations and action plans that support practice, process or system change are produced and monitored.

The Regional & National LeDeR team will also undertake reviews and themed analysis that could support the local Steering Group.

Governance

The outputs from the LeDeR programme need governance and oversight at local, regional and national level, to ensure any appropriate management action is taken as required, and that themes and lessons are fed into service improvements.



Local level governance - All areas should have a local steering group established. The preferred geography would be utilising existing Transforming Care Partnership footprints or other learning disability-focussed commissioning networks. The local steering group provides oversight, support and governance to the local delivery of the programme, and oversees how the programme is administered and delivered in the local area.

The local steering group should provide updates and assurance to:

- The central LeDeR team at the University of Bristol
- The named lead for the programme in their respective NHS England region (North, South, Midlands, London)
- ➤ The national Operational Steering Group.

Impact/Risks

Reviewers have been identified from across the CCG footprint and include many individuals/roles that are already actively involved in case reviews and therefore have key skills. Training & support time for reviewers has initially been required.

No additional resource or funding has been provided to CCG's to support the implementation of this programme and the additional time for Local Area Contact and reviewer work will need to be picked up within current roles.

There may also be a requirement to source administrative support for co-ordinating the steering group.

Potential links & overlaps with other statutory review/investigation functions eg CDOP/Safeguarding. The National Leder team have developed guidance to support this and locally we have completed more detailed analysis to identify the overlaps and to guide both LAC and reviewers (Appendix 2)

Key Milestones

The implementation plan (Appendix 1) details all areas completed and outstanding. A 'go live' start date for Devon has been agreed for 1st October 2017. NHS England are commencing a South West regional Steering group in August 2017. NHS England are providing briefings to Chairs of local SAB's/LSCB's and CDOP.

References

- (1) Heslop P, Blair P, Fleming P, Hoghton M, Marriott A, Russ L. (2013) *The Confidential Inquiry into premature deaths of people with learning disabilities. Final Report*. University of Bristol. Bristol. http://www.bristol.ac.uk/media---library/sites/cipold/migrated/documents/fullfinalreport.pdf
- (2) Glover G, Williams R, Heslop P, Oyinola J, Grey J. (2016) Mortality in people with intellectual disabilities in England. Journal of Intellectual Disabilities Research. Early view. Doi: 10.1111/jidr.12314



SAFEGUARDING MANAGER'S REPORT

Plymouth Safeguarding Adults Board October 2017



I PSAB Executive Group highlights:

The group last met 01 September, and areas for discussion included:

TAMAR BRIDGE SAFETY: Supt. Downham had raised the issue of risk associated with the Tamar Bridge, discussion to be taken to the Creative Solutions Forum in September. Devonport Police are working with the Tamar Bridge and Torpoint Ferry Joint Committee regarding solutions to height of railings, access, support information etc.

SUB GROUP UPDATES:

SAR:

- Group has accepted one referral and is considering three others: agenda item
- SCR V: letters have been sent to partners regarding the report recommendations, requesting evidence and assurance, responses requested by end of September 2017.
- SAR RM: agenda item
- Atlas: to be discussed under AOB. Outcome of the court cases following Operation Baddeck discussed. Devon SAB is currently considering a further SAR regarding learning from the Atlas enquiry.

QUALITY AND PERFORMANCE: agenda item

PLOG:

- Work continues on the Learning and Development competency framework, and a cascade model for the Risk Management, Self Neglect and Hoarding Policy.
- A range of new safeguarding leads have been invited, membership has now expanded into the VCS.

BUDGET: agenda item

PSAB STRATEGIC PLAN 2016-19 TRACKING:

- Risk Management, Self-neglect & Hoarding: policy is updated and online. Wider circulation will be planned through PLOG.
- Mental Health: ongoing discussion to develop regular assurance from local providers around implementation of their action plans and embedding learning from SARs in practice.
- Engagement and Participation: Agenda item
- SAB Management arrangements: discussion of constitution 'model' for PSAB; agenda item

Safeguarding Adults Collection (SAC) 16-17

National benchmarking information from NHS Digital has been delayed until November; following receipt we will be in a position to provide further analysis. However PCC has some restricted information now and will be using it to inform the work of the developing Quality and Performance sub group.

3	National Network for Chairs of Safeguarding Adult Boards (NNCSAB)	NNCSAB published a report in August: 'Auditing the Impact of Becoming Statutory' which summarises the findings of a survey sent to Chairs of Safeguarding Adults Boards in October 2016. The aim of the survey was to assess the impact of the implementation of the Care Act 2014 on SABs and to capture the effects of making SABs statutory partnerships. It is designed to inform SABs, the Dept. of Health and other stakeholders about the progress of SABs, the impact of the Act, and to support further development of SABs.
		https://www.local.gov.uk/sites/default/files/documents/Safeguarding%20Adults%20Boards%20audit_August%202017.pdf
4	SW ADASS Safeguarding Leads Group Conference	The conference to present findings of the regional thematic review of SCR/SARs commissioned from Prof. Preston-Shoot will be held in Taunton on 20 November. We are awaiting confirmation of the number of places we've been allocated, please email any further expressions of interest in places to adultsafeguarding@plymouth.gov.uk by 13 October 17.



Devon Safeguarding Adults Board

Constitution

Version 0.03

24/05/17

Version control for drafting

Version	Date	Details
0.01	29/3/16	First draft considered by DSAB 29/03/17
0.02	24/05/17	Amendments made following comments at DSAB 29/03/17 and will be presented at DSAB 20/06/17. Content has been added requiring Making Safeguarding Personal (page 5) and membership has been updated (page 15).
0.03	04/07/17	Membership updated

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Objectives, Roles and Functions of the Board

Title

The Board shall be known as Devon Safeguarding Adults Board, hereafter known as DSAB or the Board.

Mandate

The Board is a Safeguarding Adults Board established by Devon County Council under section 43(1) of the Care Act 2014.

Aim of adult safeguarding

The March 2016 edition of the Care and Support Statutory Guidance to the Care Act says that the aims of adult safeguarding are to:

- prevent harm and reduce the risk of abuse or neglect to adults with care and support needs;
- stop abuse or neglect wherever possible;
- safeguard adults in a way that supports them in making choices and having control about how they want to live;
- promote an approach that concentrates on improving life for the adults concerned;
- raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect;
- provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult; and
- address what has caused the abuse or neglect

Objective

The core objective of the Board, set out in section 43(2) of the Care Act 2014, is to help and protect adults in its area in cases where

- The adult has care and support needs;
- They are experiencing, or at risk of, abuse or neglect; and

- As a result of those care and support needs they are unable to protect themselves from either the risk of or the experience of abuse or neglect

It will do this by co-ordinating and ensuring the effectiveness of what each of its members does. The Board may do anything which appears to it to be necessary or desirable for the purpose of achieving its objective.

The Care and Support Statutory Guidance says that the Board will assure itself that local safeguarding arrangements and partners act to help and protect adults in such cases.

Making Safeguarding Personal

The work of Devon Safeguarding Adults Board is driven towards ensuring all services for vulnerable people are person-centred, easy to access and importantly promote independence, whilst ensuring people are safe. The Board is particularly keen to ensure that the 'Making Safeguarding Personal' agenda is rooted throughout and across all partner organisations and that front line staff are supported to have the confidence in delivering this. The DSAB Business Plan and Sub-Group work plans are developed with these objectives in mind.

Duties

The Board has 3 core duties under the Care Act 2014:

- It must publish a Business Plan and linked Operational Action Plans for each financial year that sets how it will meet its main objective and what the members will do to achieve this. The plan must be developed with local community involvement, and the Board must consult the Healthwatch Devon. The plan should be evidence based and make use of all available evidence and intelligence from partners to form and develop its plan
- It must publish an annual report detailing what the Board has done during the
 year to achieve its main objective and implement its Business Plan, and what
 each member has done to implement the strategy as well as detailing the
 findings of any safeguarding adults reviews and subsequent action
- It must conduct any safeguarding adults review in accordance with Section 44 of the Act. These will be carried out via the Safeguarding Adults Reviews Core Group

Role

The Care and Support Statutory Guidance paragraph 14.134 – 14.135 sets the following roles for the Board:

It oversees and leads adult safeguarding across the locality

- It will be interested in a range of matters that contribute to the prevention of abuse and neglect, including
 - The safety of patients in its local health service,
 - The quality of local care and support services
 - The effectiveness of prisons and approved premises in safeguarding offenders
 - The awareness and responsiveness of further education services
- It will be an important source of advice and assistance, for example in helping others improve their safeguarding mechanisms.
- It will make effective links with other key partnerships in the locality and share relevant information and work plans. It will cooperate to reduce any duplication and maximise any efficiency, particularly as objectives and membership is likely to overlap.

It is important that SAB partners feel able to challenge each other and other organisations where it believes that their actions or inactions are increasing the risk of abuse or neglect. This will include commissioners, as well as providers of services.

The SAB will need intelligence on safeguarding in all providers of health and social care in its locality, not just those with whom its members commission or contract.

In addition to its role as a Safeguarding Adults Board under the Care Act 2014, the Board also gives local leadership on application of the Mental Capacity Act 2005 by Members, including the Deprivation of Liberty Safeguards.

Functions

Paragraph 14.139 of the Care and Support statutory guidance says that the Board will

- identify the role, responsibility, authority and accountability with regard to the action each agency and professional group should take to ensure the protection of adults
- establish ways of analysing and interrogating data on safeguarding notifications that increase the SAB's understanding of prevalence of abuse and neglect locally that builds up a picture over time
- establish how it will hold partners to account and gain assurance of the effectiveness of its arrangements
- determine its arrangements for peer review and self-audit

- establish mechanisms for developing policies and strategies for protecting adults which should be formulated, not only in collaboration and consultation with all relevant agencies but also take account of the views of adults who have needs for care and support, their families, advocates and carer representatives
- develop preventative strategies that aim to reduce instances of abuse and neglect in its area
- identify types of circumstances giving grounds for concern and when they should be considered as a referral to the local authority as an enquiry
- formulate guidance about the arrangements for managing adult safeguarding, and dealing with complaints, grievances and professional and administrative malpractice in relation to safeguarding adults
- develop strategies to deal with the impact of issues of race, ethnicity, religion, gender and gender orientation, sexual orientation, age, disadvantage and disability on abuse and neglect
- balance the requirements of confidentiality with the consideration that, to protect adults, it may be necessary to share information on a 'need-to-know basis'
- identify mechanisms for monitoring and reviewing the implementation and impact of policy and training
- carry out safeguarding adult reviews and determine any publication arrangements;
- produce a Business Plan and an annual report
- evidence how SAB members have challenged one another and held other boards to account
- promote multi-agency training and consider any specialist training that may be required. Consider any scope to jointly commission some training with other partnerships, such as the Community Safety Partnership

Membership of the Board

Chair

The local authority, having consulted the other members of the Board, must appoint as the chair a person whom the authority considers to have the required skills and experience

The responsibilities of the Chair are

- To ensure that the Board meets its obligations
- To ensure smooth running of the Board and its meetings

- To report to the Board on its effectiveness in discharging its responsibilities and functions
- To agree the recommendations from Safeguarding Adults Reviews, following consultation with the Director of Adult Social Care for Devon County Council

The Chair will be responsible to the Chief Executive of Devon County Council who may delegate day-to-day responsibility to another officer of Devon County Council.

The Chair may take such action as he or she considers to be in the best interest of the Board, provided that before doing so, the Chair shall consult with the Director of Adult Social Care for Devon County Council and, if reasonably practicable, with Board members, specifically before:

- Making a public or media statement within the objectives and functions of the Board. The Chair shall only make such a statement through Devon County Council's Communications team.
- Making representations to any government body or department, or any other organisation on behalf of the Board.

Vice Chair

The vice chair shall be nominated and appointed by the Board. The vice chair shall be appointed for a term of three years. The Board has the aspiration that the same person cannot act as Vice Chair for consecutive terms, but recognises there may need to be flexibility on this at time.

Membership

The Board shall be composed of senior officers with required skills, experience and responsibility nominated by each member agency. Members must have the sufficient delegated authority to effectively represent their agency and to make decisions on their agency's behalf. They must have access to those responsible for making the decision for which they do not have delegated authority.

If members are unable to attend board meetings for any reason they must send a nominated representative of sufficient seniority. Representatives are appointed to discharge personally the functions of the Board on behalf of their organisation. Therefore, the representative may only send a substitute to a Board Meeting with the consent of the Chair.

Changes to membership

Membership will be reviewed by the Chair every year to ensure appropriate representation

The Chair has the power to make changes to the agencies that make-up of the membership of the Board, the number of members from each agency, and which roles within those agencies will act as Members of the Board. The Chair will consult with Board members on such matters.

An appointed Member of the Board may be removed at any time by the agency they represent.

The Chair of the Board may refer the matter of an individual's continued membership of the Board back to their individual agency for a decision to be made as to whether that individual should continue to represent the agency at the Board.

Where the Chair has reasonable cause to believe that the need for removal is urgent, the Chair may suspend that member until such time as the agency can consider the matter.

Responsibilities of Board Members

Members who attend in a professional and managerial capacity should be:

- able to present issues clearly in writing and in person
- experienced in the work of their organisation
- knowledgeable about the local area and population
- able to explain their organisation's priorities
- able to promote the aims of the SAB
- able to commit their organisation to agreed actions
- have a thorough understanding of abuse and neglect and its impact
- understand the pressures facing front line practitioners

Expectations on Members

Board Members will:

- Take a lead role for safeguarding adults within the representing agency and lead on work as required by the Board.
- Co-operate in and contribute to the carrying out of a safeguarding adults review.
- Share the responsibility of ensuring that the board's work programme is delivered

- Chair a task and finish group if required or identify a senior manager within their organisation who has the skill and abilities to chair such a meeting.
- Ensure appropriate representation on the sub group/task and finish group as appropriate to their organisation.
- Adhere to the Board's Information Sharing Protocol
- Act as a channel of communication between their agency and the Board.
- Attend and support promotional and other events arranged by the Board
- Contribute to and examine regular updates, data and analysis on individual agency and joint agency performance indicators.

Monitoring of Board attendance

Attendance at meetings will be reported to the Board and recorded both in the minutes of the meeting and in the Board's Annual Report. In the event of one member's persistent non-attendance, the Chair will write to Chief Executive, or equivalent, of the organisation concerned to bring this to their attention.

Declarations of Interest

If at any time a Board Member has a pecuniary or other potentially prejudicial interest in any matter being considered by the Board, they should declare the existence and nature of that interest.

Declarations of interest will be recorded and action taken by the Chair to ensure the individual concerned has no involvement in decision-making or consequent action in relation to the matter in question.

The Declaration of Interest will be a standing item on all Board agendas.

Arrangements for the Board

Meetings of the Board

The Board will meet not less than four times a year. Additional meetings may be convened if required by the Chair.

A quorum of the Board shall be

- Either the Chair or Vice-Chair must be present.
- Five full members, representing at least four separate agencies.

 There must be representation from the four agencies required by section 1 of Schedule 2 of the Care Act 2014 to be members: Devon County Council, NEW Devon CCG, South Devon and Torbay CCG and Devon and Cornwall Police

If at any time there is not a quorum present, the meeting cannot made decisions on behalf of the Board.

The business of each meeting will be planned so that the annual reporting back on work managed within any subcommittee, working group, or other process outside the main meeting, is spread throughout the year

Meetings of the Board are open only to Board members and to invited attendees.

Decision making

Wherever possible the Chair shall attempt to reach decisions by consensus. However, where this proves not to be possible then matters will be settled by a simple majority of those members present who are entitled to vote.

No organisation shall exercise more than one vote, except in the case of elected Members of Devon County Council who will each have voting rights separate from those of Officers of the Council.

In the case of equity of votes the Chair shall have the casting vote.

The Chair or, in the absence of the Chair, the Vice Chair, in consultation with the 4 Member agencies set out in section 1 of Schedule 2 of the Care Act 2014 (Devon County Council, NEW Devon CCG, South Devon and Torbay CCG and Devon and Cornwall Police), shall decide any issue which requires a decision by the Boards between meetings if it does not, in the opinion of the Chair, require a special meeting to be convened. The decision will be reported and submitted for ratification to the next meeting of the Boards.

The Board may delegate such of its functions as it considers appropriate to subgroups and / or task specific working groups.

Confidentiality

The Chair may determine that any particular item of business at a meeting of the Board be treated as confidential. The presumption is that items will not be confidential unless this is a reasonable requirement. Reasonable requirements might include, but are not restricted to, the matter involving sensitive personal data, commercially sensitive information, or information that might prejudice another process.

Accountability

In order to provide effective scrutiny, the Board is independent. It is not subordinate to, nor subsumed within, other local structures. Each partner organisation retains their own existing lines of accountability for safeguarding and the promotion of the welfare of adults with care and support needs by their services.

The principal means of accountability of the Board will be its Annual Report and of minutes of its meetings other than any confidential items.

The Board will make public minutes of its meetings, once these have been agreed at the subsequent meeting, except for the minutes relating to any confidential section of the meeting.

Annual Report

In line with the requirements of Schedule 2 of the Care Act 2014, the Chair of the Board shall send copies of the Annual Report to

- The Chief Executive and the Leader of Devon County Council
- Devon and Cornwall Police's Chief Superintendent
- The Chief Executive of Healthwatch Devon
- The Chair of Devon Health & Wellbeing Board

The Safeguarding Adults Board will offer to present a report to the Health and Wellbeing Board annually, including the Board's annual report.

The Board shall also send its annual report to the appropriate Scrutiny Committee of Devon County Council.

Business Plan

A lead is taken in the strategic development of the Board's Business Plan by:

- Receiving an annual report on the work of standing groups and other working groups.
- Making decisions on the proposed business plan for the coming year.
- Agreeing themes for future Board Themed Workshops and Development meetings

Assurance

The Board will get assurance of how key safeguarding responsibilities are being discharged by all Members by:

- Undertaking agreed self-audits on key safeguarding responsibilities of all Members.
- Providing performance management information on agreed topics.
- Receiving reports on Safeguarding Adults Reviews' learning best practice from other review processes
- Receiving updates on Devon Safeguarding Children Board from the Chair where there is shared learning arising from performance review, serious case review (or SAR) and any other audit activity, where there is crossover between safeguarding adults and safeguarding children
- Receiving reports on safeguarding work not led by the work of Subcommittees, working groups or other processes.
- Receiving reports on safeguarding work led by individual Members or standing sub-groups and other working groups.

Finances and Resources

Members of the Board are expected to consider what assistance they can provide in supporting the Board in its work. This might be through payment to the local authority or to a joint fund established by the local authority to provide, for example, secretariat functions for the Board. Members might also support the work of the SAB by providing administrative help, premises for meetings or holding training sessions. It is in all core partners' interests to have an effective SAB that is resourced adequately to carry out its functions. Core members of the Board are responsible for the agency budget contribution to the Board and ensuring that the allocated agency resources, financial and human, are utilised to meet the board's objectives.

Board member agencies may contribute annually towards resources at an agreed level, having regard to the differing size, resources and responsibilities of each agency.

The financial year will run from 1st April to the 31st March each year.

Devon County Council will administer the budget on behalf of the board. The Business Manager for DSAB will have the authority to act as the board's budget holder for the authorisation of payments, or to escalate such decisions as required by Devon County Council's scheme of delegation. The Business Manager will consult with the Chair on financial decisions.

The Board's budget is kept under review by receiving an annual budget report and agreeing funding proposals.

Structure

The Board shall have power to create Sub-Groups as it deems necessary. These may be standing groups or task and finish groups.

The Board will have the following sub groups:

- An Operational Delivery Group, including safeguarding adults leads from key local partners.
- A Community Reference Group
- A Learning & Improvement Group
- A Safeguarding Adults Review Core Group
- A Mental Capacity Act Group

Where the Board creates an ongoing Subgroup, it will agree Terms of Reference for the group, which specify what authority is to be delegated and the reporting mechanism to the Board.

The Board may agree that some of its sub-groups are jointly run with neighbouring local authority areas where key aspects of the work of such a sub group cross local authority boundaries because there is singular provision by, e.g. an NHS Trust or other agency

When required, Task & Finish groups will be set up deliver key pieces of the work commissioned by and reported to the Board. These task and finish groups will comprise of representatives nominated by board members who have sufficient knowledge and skills to contribute to the required task.

Conflict Resolution

In the event of any dispute between Board Members, the Board will collectively take all reasonable steps within the powers available to its Members to resolve it. When a matter cannot be resolved through the course of a Board Meeting, the matter shall be referred to the appropriate officers of the Members who shall meet to resolve the matter with the Chair's nominee, who will be either the Vice-Chair of the Board or the Chair of the advisory sub-group, with the Chair determining which of those is best placed to attend to the particular matter.

If the dispute is not resolved, the Chair's nominee will escalate it to the Chair of the Board for a further attempt at resolution. The Chair may consult with others, such as senior managers of the agencies involved.

In the event that the dispute cannot be resolved in accordance with the above procedures and within a reasonable time, having regard to the nature of the dispute, the Members concerned may refer the matter to such body or person to act as a mediator as they may agree, the costs of such mediation to be borne by the Members concerned.

Support

The Board will be supported by a Business Manager and a Service Support Officer

Review of constitution

The Board's constitution will be reviewed every 3 years by the board or as required, in accordance with statutory or regulatory provisions or other organisational changes that may require a change to the membership.

Appendix A: Membership of Devon Safeguarding Adults Board

Organisation	Role	Current Representative
	Independent Chair of DSAB	Siân Walker
Devon Partnership Trust	Vice Chair	Penny Rogers
Devon County Council	Strategic Director – People & Director of Adult Social Services	Jennie Stephens
Care Quality Commission (Advisory member of Board)	Inspection Manager - Devon	Mandy Tomlinson
Devon County Council	Councillor & Cabinet Member for Adult Social care & health Services	Andrew Leadbetter
Devon County Council Public Health	Director of Public Health	Virginia Pearson
Devon & Cornwall Police	Detective Superintendent	Steve Parker

Devon Partnership NHS Trust	Director of Nursing & Practice	Paul Keedwell
HM Prison Service	Deputy Governor	Andy Chattaway
Northern, Eastern & Western Devon CCG	Chief Nursing Officer	Lorna Collingwood- Burke
South Devon & Torbay CCG	Director of Quality Assurance and Improvement	Gill Gant
National Probation Service	Assistant Chief Officer Head of Devon & Torbay Local Delivery Unit	Jonathan Nason
Dorset, Devon & Cornwall Community Rehabilitation Company	Assistant Chief Officer	Keri Nason
Northern Devon Healthcare NHS Foundation Trust	Director of Nursing, Quality and Workforce	Darryn Alcorn
Royal Devon & Exeter NHS Foundation Trust	Medical Director	Dr Jane Sword
South Western Ambulance Service NHS Foundation Trust	Director of Nursing	Jennifer Winslade
Torbay & South Devon NHS Foundation Trust	Director of Nursing and Professional Practice	Jane Viner
Advisor to the Board	Chair of Learning & Improvement Sub-Group	Delia Gilbert
Advisor to the Board	Co-Chair of MCA Sub-Group	Sandra Geary
Advisor to the Board	Chair of Operational Delivery Sub-Group	Geraldine Benson
Advisor to the Board	DSAB Business Manager	Ben Smith

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