

Salford Safeguarding Adult Board (SSAB): Summary of the discussions and outcomes for the June 2023 Board

Date: 8th June 2023

Time: 10:00am until 12:30pm

Venue: Via MS Teams

Chair: Francine Thorpe

Minute Taker: Katie D'Rozario

Agenda planned by: Jane Bowmer / Francine Thorpe

Item 1 - Introduction and Apologies

Everyone was welcome.

Apologies were noted.

All statutory partners were in attendance.

Item 2 – Minutes/Action Log

March 2023 minutes were approved.

Action Log was reviewed.

Action Log – Action 20 is the only one outstanding, regarding ASC self-assessment. FT asked if MC's presentation would close this off, he agreed that it would.

Item 3 – Business Managers Update

JB provided headline information on the work of the Board for Q1 2023/2024

Update was given on the work of the sub groups.

Board members agreed external trainers to be commissioned to delivery introduction to safeguarding training.

FT asked if members had any feedback about the Bite-Sized Briefing training from attendees from their agencies.

MK said some of the training is very valued by ASC staff, it is focussed and done in a compact way which is not too time consuming when they are very busy. Great example of what can be achieved through training.

Item 4 – Safeguarding Effectiveness Group Update

EW provided an update on the SEG.

SEG members have been asked to complete an exception report for each meeting to summarise key information from the last quarter.

The Board was advised that SEG Data quality is improving and welcomed any thoughts from the Board.

MK thanked EW for the comprehensive work of the SEG and is pleased on progress being made.

FT provided feedback that the format of the exception report works well and answers questions as it goes on. She asked how confident the Board can be about the accuracy of the data?

MC responded to this question saying that he has a high level of confidence in accuracy of the safeguarding data.

EW said that having the GMMH data and dashboard is a real positive, as this level of data oversight has never been seen before.

FT asked JN about the outstanding safeguarding enquiries at GMMH she recognised the organisational challenges in completing the reviews but asked if there is a timescale for completion?

JN said that GMMH is aiming for next two-three months for completion. The backlog was mostly due to statutory challenges and delivery of those duties.

Item 5 – Outcome of SSAB Audit for 2023/2024 Q1 – ‘Self-Neglect’

KD presented audit summary and key outcomes.

FT thanked KD for her work on behalf of the Board.

KD opened up to questions from Board members about the audit. She also asked Board members (on behalf of IIN) about their thoughts on the lead agency of a S42 safeguarding process being the agency with the key specialism relating to the adult, e.g. a health agency leading a safeguarding process when the adult has complex health needs. This was a finding from the audit and it had been suggested to avoid any delays to the process and best serve the adult in the most efficient way.

GW asked if the End of Life ‘Dying Matters’ initiatives in 2020 could be taken back through the IIN, and if information sharing could be linked to GM work, as a consistent approach is needed.

EW stated that there may be confusion in the system about what the ‘Lead Agency’ of a Section 42 safeguarding process actually is. Leading and chairing need clarification, health representatives should be taking responsibility for involvement in those enquiries. She suggested that the right people may not always be involved and a further review is needed. She referenced Children’s Services model of the Bridge, and asked if Adults Services could be more visionary and put the two together, as this could have some significant advantages.

EW commented that as ASC and NCA Health are both NCA and together, the sharing of information should be efficient and swift and therefore the communication there could be improved.

FT was encouraged about the proposed document to share good practice from audits. She noted that when she had read the full audit report; good practice was highlighted in terms of the Renal Unit following up non-attendance which was identified as a learning point from SAR Andy.

GW confirmed that the Renal Unit have developed since SAR Andy, with discussions about executive functioning being very much embraced.

Item 6 – New Counter Terrorism Local Profile (CTLP) and Community Cohesion Priorities

This section of the minutes have not been included due to the confidential nature of the presentation.

Item 7 – Impact of Coronavirus Pandemic on Salford Care Homes

Presentation was given by BW – report had been shared with the agenda.

BW explained that Salford was one of the first areas in GM to experience the major impact of the pandemic on care homes. There was no particular reason for that, but as we were the first, Salford developed processes to react and respond. The first wave was extremely challenging; no Covid-19 testing was available, patients were being discharged from hospitals into Care Homes with Covid-19 which then spread around other residents, and death rates in some homes were swift and significant, which was traumatic for all involved. No real anomalies between Care Homes and other areas of practice were identified.

BW continued that the impact of the speedy vaccination programme can be seen by way of a huge reduction in deaths. The Care Homes Practice which covers the majority of Care Home residents was a huge benefit to Salford. The report outlined a range of information and learning throughout the pandemic to improve the support provided to Care Homes. A range of groups set up during Covid-19 really helped support the Homes and gave them a place to share beneficial practice ideas and experiences. We found it very difficult to contain Covid within the Care Homes but overall the Homes did very well.

BW explained that the main focus of the Impact Report is to reflect on what Salford learned and what we take forward. Relationships with Care Homes improved during the pandemic. The Health Protection team has been strengthened and continues to support Homes auditing and delivering face to face training. Key leads attending training is not always usual, but this changed during the pandemic. The report also contained information on the challenges of obtaining PPE.

FT asked BW to pass on the thanks of the Board to her team and also suggested that Board members may want to be involved in any event that is held to recognise Care Home staff to thank them.

Item 8 – Adult Social Care - CQC Inspection Readiness

MC wanted to emphasise that ASC is not the sole focus of any inspection; it is the statutory groups and that readiness is work in progress. MC said confidence in Salford data and what we are seeing from the data is high, that Salford come out high on the data we have in terms of Making Safeguarding Personal and ensuring the wishes of adults are heard. The key element is to drive all that we are already doing, forwards.

MC said that data and evidence showing the connectivity with those we serve needs to be improved, and that they are working on how this can be better placed.

MC said the QIN group has been revamped with new Terms of Reference to ensure it has a very clear focus on synergy of approach and actions, and then highlighting any key points of attention or decision making to the Board.

MC said there is a targeted focus on hospital discharges, to ensure that the best setting for each individual to reside in is found, and that support mechanisms for those with specialist needs who required services unavailable in Salford were covered by appropriate links with neighbouring boroughs.

FT asked if the SSAB would likely be involved in the CQC inspection process.

MC confirmed this was likely, with SSAB being asked about systems, organisation and responsiveness of partners. Likely that FT as Independent Chair would be asked to be involved specifically.

MK was more than happy with MC's overview and said it is testament to the good work the Board has done over a number of years that we are in this position.

MK asked to be invited back nearer the point of inspection inception.

FT agreed.

Item 9 – Domestic Abuse Services in Salford – 12 Month Update of 'Safe in Salford'

DB updated that a Lead Provider Model has been commissioned, PE will present about this, and that the team are about to review their strategy not just for commissioning but also in terms of Domestic Abuse.

Presentation was shared.

Resource issues were highlighted, challenges with 'recycling' of staff around Greater Manchester agencies driving up salaries and creating difficulties in recruitment.

FT thanked PE and said it was positive to see the data being collected and monitored to evidence how service use progresses over time.

Item 10 – Agree Information To Be Shared

FT agreed that information can be shared with partners/subgroups. JB has captured this.

Item 11 – Risk Register

FT asked Board members if any new risks had been identified to add to the Register.

JB said there is a risk for GMMH, which will be shared outside of the meeting and added.

EW confirmed that a risk to the ICB around safeguarding resource has been amended, as the formal consultation period has now been entered and there have been discussions about additional finance. EW said there was uncertainty if this will impact or have implications on Salford safeguarding resource and so wanted to adjust this risk.

FT confirmed that the Board will be guided by EW in terms of risk level and keeping this on the Risk Register to maintain oversight.

FT thanked everyone for attendance.

Close of Meeting.