



MINUTES				
Meeting Title	West of Berkshire Safeguarding Adults Partnership Board			
Date	Wednesday 7 th June 2023			
Time	10:00-13:00			
Location	Microsoft Teams			
Chaired By	Professor Keith Brown			
Attendees:				
Professor Keith Brown, Independent Chair, SAB	Lorna Pearce Interim Assistant Director - Adult Social Care, Wokingham Borough Council	Jane Barnett, Business Support Officer, SAB	Alison Drew, Interim Head of Safeguarding, Royal Berkshire NHS Foundation Trust	Lynne Mason, Business Manager, SAB
Patricia Pease, Interim Director of Safeguarding, Berkshire West Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board	Gemma Nunn, Head of Safeguarding, Berkshire Healthcare Foundation Trust	Hannah Cole, PSW, West Berkshire Council	Sue Ross, Interim Assistant Director for Safeguarding, Quality, Performance & Practice, Reading Borough Council, SR	Philip Bell, Involve – left 12 noon
Gail Muirhead, Risk Reduction Manager, Royal Berkshire Fire and Rescue Service	Ann Standen, The Advocacy People	Richard Jarvis, DCI, Berkshire Protecting Vulnerable People, Thames Valley Police	Karen Glaister, Interim Head of Adult Safeguarding, Care & Governance, Wokingham Borough Council	Paul Coe, Service Director, Adult Social Care, West Berkshire District Council – left 12.55pm
Melissa Wise, Acting Executive Director – Adult Social Care & Health, Reading Borough Council	Jennie Henstridge, Senior Probation Officer, National Probation Service	Rachael Corser Chief Nursing Officer Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board – left 11:20am	Andrew Grahame, Thames Valley Police	Sarah Deason, Acting Chief Officer Healthwatch Reading & Healthwatch Wokingham Borough – representing Healthwatch Reading, West Berkshire and Wokingham
Ella Oyorteyi - Advanced Customer Support Senior Leader (ACSSL), Department for Work and Pensions, Service Excellence Group, Buckinghamshire,	Mark Power – Sandra SAR Author – for item 1 only (left 10:50am)	Rebecca Bullock, ASH Team Manager, Wokingham Borough Council - observer		

Berkshire & Oxfordshire District – for item 4 only (joined at 11.15am -left 11:30am)				
Apologies/did not attend				
Heidi Ilsley, Deputy Director of Nursing, Berkshire Healthcare Foundation Trust	Paul Illman, Royal Berkshire Fire and Rescue Service	Cath Marriott, Partnerships and Performance, Office of the PCC - Virtual member	Deborah Fulton, Director of Nursing & Governance, Berkshire Healthcare Foundation Trust	Simon Broad, Assistant Director - Adult Social Care, Wokingham Borough Council, SB
Jane Hitching, PSW, Reading Borough Council	Sue Brain, Service Manager – Safeguarding Adults, West Berkshire District Council, SBr	Rachel Spencer, CEO, Reading Voluntary Action	Jasbir Lall, Solicitor, Joint Legal Service (virtual member)	Dorcas Nyabunze, Head of Service, Emergency Duty Service
South Central Ambulance Service	Susan Powell, Building Communities Together Team Manager, West Berkshire District Council	Liz Warren, Safeguarding Manager, Royal Berkshire Fire and Rescue Service	tbc, Executive Member for Adult Social Care, West Berkshire District Council	Safeguarding link person, NHS England South (South-east) - Virtual member
Matt Pope, Director Of Adult Service, Wokingham Borough Council	Karen Miller, Designated Safeguarding Lead (Adults) in Berkshire West Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board	Alice Jones, Ramsey Healthcare – representative for independent health sector	Cllr John Ennis, Cllr, Reading Borough Council	Chief Supt Sarah Grahame, Chief Supt TVP Berkshire, Thames Valley Police
Linda Andrew, Acting Head of Service, Emergency Duty Service	Cllr David Hare, Executive Member for Adult Social Care, Wokingham Borough Council	Garry Poulson, Director, Volunteer Centre West Berkshire	Zelda Wolfle, Acting Head of Housing and Neighbourhood Services, Reading Borough Council – optional attendee	

	Item
1	Welcome and Introductions KB: opened the meeting and the meeting was deemed to be quorate. Rebecca Bullock, ASH Team Manager, Wokingham Borough Council attended as an observer.
2	Sandra SAR – Paper 1 The Board was asked to review the draft Safeguarding Adult Review (SAR), in order to endorse the SAR and its recommendations and agree a publication plan. MP, the Independent Author, gave an overview of the SAR and how this had led to his four findings and recommendations, detailed below, and each one was discussed in detail:

Finding 1 – The Assessment of Safeguarding Referrals and Social Care Prevention Pathways

Learning: Improvement is required in the way that referrals and contacts are initially assessed and allocated for further social work. New prevention pathways are required to ensure that social work teams are structured and resourced to manage cases of differing complexity.

Recommendation 1:

Wokingham Adult Social Care should present to the adults safeguarding board its new strategy for prevention pathways, outlining how complex cases will be initially assessed and allocated to appropriate social work teams. Following this presentation, the safeguarding board should consider the development of a partnership data dashboard in relation to the consistent use and quality of multi-agency strategy discussions.

LP (Wokingham Borough Council, WoBC) recognised that the management of long/complex cases needed to be reconsidered; whilst they had clear procedures for the conduct of formal multi-agency strategy discussions, these were not followed in Sandra's case and the review identified a need to ensure a greater consistency of their use. It was discussed that offering Sandra advocacy should at least have been considered, as even if she was deemed to have capacity, she would still have qualified for this under the Care Act guidance, however, LP explained that practitioners do understand this at the assessment and safeguarding stages. It was not a lack of understanding of advocacy in this case, which MP agreed with. It was recognised that the GP had had no real insight in this case, as they had not recognised her as a vulnerable patient, which was not helped with Sandra not engaging with the support offered. MP did not consider that covid was a factor in the outcome of this case.

MP explained why he thought the Board should consider the development of a dashboard to monitor the numbers being assessed but concerns were raised about this by members. PC (West Berkshire Borough Council, WeBC) explained that they had previously had a similar safeguarding structure to Wokingham Borough Council, WoBC but had changed this model recently, in order to triage for inappropriate referrals; this meant it would be very difficult to compare numbers by Local Authorities. The numbers alone would not give a full picture, as quality of meetings wouldn't be captured. It was agreed that a key performance indicator to measure the consistent application of thresholds - their use, timeliness, and the engagement of partnership agencies within multi-agency strategy discussions needed further thought.

Finding 2 – The Quality of Care Act Assessments and Management of Risk

Learning: Social workers and managers need further guidance in how to prepare person centred Care Act assessments and safeguarding plans.

Recommendation 2:

Wokingham Adult Social Care should develop guidance for social workers and managers in relation to Care Act assessment and risk management plans. This guidance should include the use of assessments under both the Care Act (Section 11) and the Mental Capacity Act.

It was agreed that whilst the issues of 'hoarding' and the cleanliness of Sandra's flat were recognised, the underlying causes of these reoccurring issues was not understood or addressed and therefore safeguarding concerns were not recognised. Priority was not given to assessing Sandra's mental capacity. Sandra referenced issues with her son and wanting her life back, but she was not properly heard. Agencies were not sharing the information that they had with other agencies, e.g., the social worker recognised that there was domestic abuse but did not pass her concerns onto the Police; the context of the whole family was not considered. It was agreed that whilst the individual has rights, in a complex pathway situation all teams involved need to have the full picture. The son had his own issues but had refused help but the use of Section 11 of the Care Act, which provides powers to support vulnerable people who refuse care need assessments, may have helped. It was agreed that collecting the chronology had helped understand this case; holistic assessments were never used, and front-line staff had needed to see Sandra's relevant history earlier. WoBC recognised the need to provide some guidance on what constitutes a good Care Act assessment for their Social Work Managers.

Finding 3 – Multi-Agency Information Sharing and Planning

	<p>Learning: There is a need to promote the current multi-agency arrangements to share information and develop joint safeguarding plans. This should include improving the understanding of when a referral would still be appropriate in the absence of consent.</p> <p><i>Recommendation 3:</i> The safeguarding adults board should develop a multi-agency strategy discussion protocol. To outline the threshold for discussions, to clarify their purpose, and to outline arrangements for agency participation.</p> <p><i>Recommendation 4:</i> The safeguarding adults board should develop guidance to promote the existing arrangements for multi-agency planning. This should include both statutory processes and other partnership arrangements. It should also provide guidance in relation to the submission of referrals in the absence of consent.</p> <p>MP explained that no new processes are needed but it is how the current processes are used that needs to be addressed. The idea of a multi-agency strategy discussion protocol was supported; it was considered whether the SAR Panel could help develop this (TVP supported this approach).</p> <p><i>Finding 4 – Developing Professional Curiosity</i> Learning: Agencies have identified how a greater level of professional curiosity by their staff would have helped to better identify vulnerability and improve the submission of safeguarding referrals.</p> <p>The SAR had identified that the Police had dealt with each issue separately. TVP were already working on changes to their processes (RJ was working with a Service Improvement Team, based on other secondary investigations/other cases/reviews) and SCAS had improvement plans that were being progressed. As already covered the GP did not recognise Sandra’s vulnerabilities. RB clarified that the ASH (Adult Safeguarding Hub) at WoBC can offer advice on who best needs to be involved in individual cases but not once a case is active – that is the remit of the Multi-Agency Safeguarding Hub (MASH).</p> <p>KB thanked MP for a comprehensive SAR and the SAR was endorsed by the SAB who agreed that the report will be published in full and that the SAR Panel will be asked to consider the recommendations of this SAR and actions required.</p> <p>ACTION: LM to work with WoBC on the publication of the SAR. ACTION: SAR Panel to consider a plan for implementing the recommendations of this SAR.</p>
<p>3</p>	<p>Presentation from the BOB ICB</p> <p>RC and PP delivered a presentation to the SAB on behalf of the BOB ICB who had been requested to cover the following in their presentation:</p> <ul style="list-style-type: none"> • How the BOB wants to work with our and its other Boards • What can our SAB do to work effectively with BOB • Offer assurance on BOB’s quality assurance methods for commissioned services • Update on Berks West Health Partners Strategic Safeguarding Committee. <p>A summary of the presentation as follows:</p> <p>Berkshire West, ICB: Health Partners Strategic Safeguarding Committee The Safeguarding Committee is a delegated sub-group of the Berkshire West Safeguarding Adults Board (BWSAB) and will report directly to the partnerships on its activity. Items covered by the committee are:</p> <ul style="list-style-type: none"> • Updates from assurance work with CICs (Community Interest Companies) are a form of social enterprise and not-for-profit organisation; they exist for the good of their community and re any surpluses into their services. CICs play an important role within many local health and care systems as they provide all types of community services, ranging from district nursing to prison healthcare, primary care and care homes.

	<ul style="list-style-type: none"> • LAC looked-after children, Three 'PLACE' Safeguarding Teams have established partnerships, networks, assurance systems and processes. National policies and drivers - Safeguarding workstreams are driven by the NHS Safeguarding accountability and assurance framework (SAAF). <ol style="list-style-type: none"> 1. Work across ICB Directorates and with ICS partners to assess demand and capacity – standardise and identify new ways of working for priority workstreams. Engage with vulnerable adults, children and young people and their representative groups to improve their experience and to develop our services. 2. Work to align and standardise our safeguarding Quality Assurance Framework (QAF) and processes. 3. Developing an improvement programme which promotes preparation for new legislation and duties. As an initial priority is to align with the Community Safety Partnership and Thames Valley Police priorities (all age) to meet the statutory violence duty. <p>Partners at the meeting are required to present an assurance report which covers: Key achievements, Key concerns, Key areas of work, next 3 months, safeguarding training figures and anonymised allegation report (PIPOT)</p> <p>As at the time of this presentation the Key Adult Safeguarding hot topics and risks in Berkshire West have been identified as:</p> <ul style="list-style-type: none"> • Asylum seeker hotels concerns Berkshire West – 4 priority hotels identified. • Large Scale Enquiry, Operation Rivermead • Increase in complex cases. <p>The safeguarding team is still being formed and whilst some positions have been filled adverts for other safeguarding specific posts will be going out in the next few weeks.</p> <p>A 5-year plan for BOB has been agreed but it is still evolving.</p> <p>KB thanked RC and PP for their presentation it was noted that the BOB are focused on quality assurance and supporting best practice.</p> <p>KB noted that it will be a challenge to ensure that SAB's and ICB's priorities align due to the large footprint of ICBs often covering numerous SAB's.</p> <p>PP requested that there was consideration of the BOB ICB meeting schedule when arranging SAB meetings.</p>
4	<p>Presentation from the Department of Work and Pension</p> <p>Ella Oyorteyi - Advanced Customer Support Senior Leader (ACSSL), Department for Work and Pensions, Service Excellence Group, Buckinghamshire, Berkshire & Oxfordshire District. Provided a presentation to inform the SAB of the function of the new Advanced Customer Support Team in DWP and how they can support adult safeguarding.</p> <p>It was agreed that a copy of the presentation will be added to the SAB website, which can be found here: PowerPoint Presentation (sabberkshirewest.co.uk)</p>
5	<p>Minutes of Last Meeting and Action Log – Paper 2 and Paper 3</p> <p>The minutes were endorsed and the Action Log noted; it was noted that the Minutes are published on the website.</p> <p>The following updates on the Action Log were provided:</p> <p>Royal Berkshire Fire and Rescue Service Presentation March 23 1c – BOB to share emollient leaflet with pharmacies – AM AM has since left the role LM will contact KM in regard to this action.</p>

	<p>ACTION: Publish March 23 meetings on website – JB</p> <p>ACTION: Share action on emollients leaflet with KM for action - LM</p>
6	<p>Subgroup Updates – Paper 4</p> <p><i>Each subgroup chair to provide an update on the subgroups achievements and plans to meet the requirements set out in the ToR and the SAB Business Plan.</i></p> <ul style="list-style-type: none"> • Learning and Development – LM (SB on leave) <p>Continue working on actions from the SAB Business plan.</p> <p>Investigation in regard to re-establishing the train the trainer programme has been completed and it is the recommendation of the subgroup that it is not re-established, the reasons for this are described in the subgroups update report, appendix 1. The subgroup recognised that some areas of the Voluntary Care Sector are finding it difficult to access/commission suitable safeguarding training. The SAB endorsed the subgroups recommendation.</p> <p>The subgroup escalated their concerns that in response to the recent announcement that the implementation of LPS will not progress during the life of the current parliament, the subgroup understands that there is a may be backlog of community DoLs applications that require progressing, and the SAB are asked to consider what assurance they require from partners on this potential issue. The SAB agreed to ask that the Performance and Quality Subgroup seek assurance from the Local Authorities.</p> <ul style="list-style-type: none"> • Performance and Quality – LM/GN <p>The chair role was shared between AM in BOB and GN in BHFT, however AM is no longer in post so GN in currently chairing the subgroup alone. Due to the meeting not being quorate the meeting scheduled for May 23 was rearranged for the 22nd June, so there are no updates to provide the SAB. GN agreed to add the backlog of community DoLS assurance request to the agenda for June 23.</p> <p>ACTION: Add Community DoL's assurance to P&Q Workplan – LM/GN</p> <ul style="list-style-type: none"> • SAR Subgroup –LP <p>The SAB were asked to note that LP had agreed to chair this panel on an interim basis, due to Reading not be able to chair the meeting on a Friday and that the chairing arrangements will be reconsidered before the next SAB.</p> <p>The SAR Panel remain very busy with 3 SARS in progress currently with a notification from Reading Borough Council due to be discussed this Friday.</p> <p>Bracknell Forest SAB requested that our SAB published a BF SAB anonymously to support the anonymity of the case in Bracknell. It was agreed by the SAR Panel that as the SAR had not been endorsed by the West of Berkshire and all other SARs are published as West of Berkshire it was not appropriate to publish a SAR that was not for this area on our website.</p> <ul style="list-style-type: none"> • Communication and Publicity Subgroup – KG <p>The subgroup has a new chair KG. KG summarised the work of the subgroup:</p> <ul style="list-style-type: none"> • Self-Neglect and Hoarding Fire Awareness Campaign – issues with obtaining photos had caused some delays but photos have been identified and progress is being made to launch the campaign. • SAB Social Media Presence – the subgroup will consider in August 23 if there is a need for a SAB social media presence and report back to the SAB in September 23. • Whistle-blowing – planning to develop simple posters in regard to whistleblowing for frontline staff and members of the public in order to address the subgroup's action for the SAB's 1 priority around quality of commissioned services. Also looking at promotion around LA's and BOB care governance processes.

	<ul style="list-style-type: none"> • Safeguarding Adults Week – T&F group is in place, this week focuses on wellbeing of practitioners and the people they support, the group struggled with ideas for this week. The SAB advised that there was a focus on prevention as this supports wellbeing. • Policies and Procedures Subgroup – LM Abigail Simmons stepped down as chair of this subgroup, it was agreed that the chairing arrangements should sit with the SAB that is hosting the meeting. Slough will be taking over the meeting for the next 12 months, a request has been made for them to allocate a chair (rotate admin across 4 Boards). The SAB agreed that in light of the new ICB's that it was still appropriate for the P&P's to run across Berkshire. • VCS and Healthwatch Subgroup - KB Prof Keith Brown had agreed to chair this meeting moving forward, meetings will be held on a six-monthly basis and will be used as a feedback forum between the VCS, Healthwatch and the SAB.
7	<p>SAB Priorities 2023- 24 The SAB considered: SAB Business Plan 2023/24, SAB Risk and Mitigation Log, Learning from SARs/Audits Tracker, Pauline SAR Action Plan.</p> <p>It was agreed that: ACTION: The Risk and Mitigation Log will be reviewed and updated – KB/LM There were unavoidable delays in the Pauline SAR Action plan due to the changing in structures in BOB.</p>
8	<p>Advocacy Update AS provided a presentation to the SAB where the ask from the SAB was to: Offer assurance to the SAB of the Advocacy offer in the West of Berkshire and to share the Advocacy's Peoples views on how your organisation can support the partnership with obtaining meaningful feedback from individuals with lived experience of the safeguarding in the West of Berkshire.</p> <p>A copy of the presentation can be found here: PowerPoint Presentation (sabberkshirewest.co.uk)</p>
9	<p>MCA Survey Analysis - Paper 9 In response to the SAB's MCA priority a survey was conducted in April to assess the confidence in applying the MCA in practice across the partnership.</p> <p>LM and PC delivered a presentation to the SAB on the results of this survey and asked the SAB to consider next steps. A copy of the presentation can be found here: PowerPoint Presentation (sabberkshirewest.co.uk)</p>
10	<p>Asylum seekers living in Berkshire West: Report for the West of Berkshire Safeguarding Adults Board May 2023 – Paper 10</p> <p>SD summarised a report endorsed by Healthwatch Berkshire West on Asylum Seekers living in West Berkshire.</p> <ul style="list-style-type: none"> • We heard concerns relating to the difficulty of accessing information about healthcare services; barriers to attending necessary medical appointments and preventative care; the food provided in the HOCCAs; and the difficulties some residents were facing in accessing local educational or leisure opportunities. • We learned that isolation and long periods of time spent indoors were a contributor to feelings of hopelessness amongst residents. • One positive finding was that most residents described having good or very good interactions with local people. Church and community groups have really stepped up to help the residents feel welcomed and to provide practical and moral support, easing the burden of loneliness and boredom. <p>There are two locations used by the Home Office as contingency initial accommodation for asylum seekers in West Berkshire – one in a rural setting a considerable distance from any facilities and one on the edge of an urban area in walking distance of most services. At the time of the survey together they housed over 150 and 160 asylum seekers. It is understood that this number remains fairly consistent as small numbers of people</p>

	<p>move on and new people arrive. Many have been there for nearly twelve months and do not know when they will be moved or indeed their application for asylum processed. We heard that sometimes people are moved on with seemingly no reason and short notice.</p> <p>We are therefore using the term Home Office Contracted Contingency Initial Accommodation (HOCCIA) rather than hotel to describe the nature of the accommodation; the report has 12 recommendations.</p> <p>At the same time as our project in West Berkshire, in Healthwatch Reading and Healthwatch Wokingham, we received feedback regarding those living in home office contracted initial accommodation in those areas. We heard the same concerns regarding the mental health, living conditions and nutrition as in West Berkshire. In addition, we heard that in Reading there were a significant proportion of women, pregnant women, and babies for whom particular concerns were raised.</p> <p>KB thanked SD for her summary of the report.</p> <p>PP explained that the ICB have a tactical meeting in place to look at this across BOB, the issues highlighted in Healthwatch's report do not appear to be unique to the West of Berkshire. It is understood that hotels used to house Afghan Asylum Seekers are being decommissioned.</p>
11	<p>Information Items</p> <ul style="list-style-type: none"> • SAB Budget – Paper 11 LM explained that final conformation is required from Reading Borough Council but there should be some carry over from 22/23 budget. A full budget report with recommendations for 24/25 SAB Budget will be brought to Septembers SAB. <p>ACTION: Full Budget report with recommendations for 24/25 partner contributions to go to SAB in September 23 for consideration - LM</p> • SCAS Assurance update KB attended the monthly assurance meeting last week was impressed with the progress SCAS has made.
12	<p>AoB KB highlighted that SCIE had updated their guidance on: Safeguarding Adults Boards checklist and resources – Introduction (scie.org.uk)</p>
Meeting ended: 12:57pm	
<p>Date of next meeting: Wednesday 27th September 10:30-1:30pm In person at Civic Offices in Reading</p>	