



### Bristol Safeguarding Adults Board

| Meeting:           |      | Date:   | Time:     | Location:                     |
|--------------------|------|---|-----------|-------------------------------|
| BSAB               |      | 10 <sup>th</sup> May 2017   | 2pm – 5pm | 1P09, City Hall               |
| Attendance         |      |   |           |                               |
| Member             | Ref. | Role/Agency   |           | Attendance                    |
| Louise Lawton      | LL   | Chair of BSAB   |           | Present                       |
| Becky Lewis        | BL   | Joint Safeguarding Boards Business Unit Manager                           |           | Present                       |
| Aileen Fraser      | AF   | Clinical Director, Bristol Community Health                               |           | Present                       |
| Alison Moon        | AM   | Transformation and Quality Director, Bristol Clinical Commissioning Group |           | Present                       |
| Allason Hunt       | AH   | Senior Probation Officer, National Probation Service                      |           | Present                       |
| Anna Smith         | AS   | CEO, One25  |           | Absent                        |
| Carmel Brogan      | CBr  | Housing Policy & Contracts Manager, Housing Solutions, BCC                |           | Apologies                     |
| Charlie Baker      | CBa  | Head of Bristol & South Gloucestershire LDU, NPS                          |           | Apologies – represented by AH |
| Claire Hayward     | CH   | Director, Freeways  |           | Present                       |
| Claire Littlejohn  | CL   | HealthWatch   |           | Absent                        |
| Cllr Helen Holland | HH   | Cabinet Member, People  |           | Absent                        |
| David Elson        | DE   | Bristol Older People's Forum  |           | Absent                        |
| Ethera Morgan      | EM   | SAT, Safeguarding, BCC  |           | Present                       |
| Fiona Tudge        | FT   | Service Manager: Safeguarding, Care & Support-Children & Families         |           | Present for item              |
| Gill Brook         | GB   | Head of Patient Experience, NBT   |           | Present                       |
| Helen Morgan       | HM   | Deputy Chief Nurse, UHB   |           | Present                       |
| Jan Little         | JL   | Care Homes Director, Brunel Care  |           | Present                       |
| John Readman       | JR   | Strategic Director – People, BCC  |           | Apologies – represented by MH |
| Johnson Koikkara   | JK   | MCA/ DoLS Co-ordinator, BCC   |           | Apologies                     |
| Lindsey Scott      | LS   | NHS England   |           | Absent                        |
| Mark Dean          | MD   | Head of Safeguarding, AWP   |           | Apologies. Represented by WH  |
| Mark Ames          | MA   | University of Bristol   |           | Present                       |

|                    |     |  |  |
|--------------------|-----|--|--|
| Mary Ryan          | MRy | Service Director – Landlord, Housing Delivery, BCC                     | Apologies                                |
| Mike Hennessey     | MH  | Director of Adult Social Services, BCC                                 | Present                                  |
| Nancy Rollason     | NR  | Service Manager – Legal, BCC   | Apologies – rep by Sarah Sharland        |
| Paul Chapman       | PC  | Inspection Manager, CQC  | Apologies                                |
| Paulette Nuttall   | PN  | Designated Safeguarding Adults and MCA Lead Nurse, BCCG                | Present                                  |
| Pete Anderson      | PA  | Service Manager - Crime and Substance Misuse Service, BCC              | Apologies                                |
| D/Supt Andy Bennet | AB  | Investigations Head of Manage, Avon & Somerset Constabulary            | Present                                  |
| Rob Davis          | RD  | Avon Fire & Rescue   | Apologies – represented by Steve Nichols |
| Sam Shanks         | SS  | Bristol Dementia Partnership   | Present                                  |
| Sarah Smith        | SSm | HMP Bristol  | Present                                  |
| Simon Hester       | SH  | South West Ambulance Service Trust                                     | Apologies                                |
| Steve Cross        | SCr | Governor, HMP Bristol  | Apologies – represented by SS            |
| Steve Nichols      | SN  | Avon Fire and Rescue service   | Present                                  |
| Sue Jones          | SJ  | Director of Nursing and Quality, NBT                                   | Apologies - represented by Tammy David   |
| Tammy David        | TD  | Safeguarding Lead, NBT   | Present                                  |
| Tracey Judge       | TJ  | Strategic Safeguarding Adults / MCA & DoLS Co-ordinator, BCC           | Present                                  |
| Victoria Caple     | VC  | Head of SCU, Avon & Somerset Police                                    | Present                                  |
| William Hall       | WH  | Interim Clinical Director for System Leadership, Bristol Mental Health | Present                                  |
| Colette O'Neil     | CON | Bristol Community Health   | Present                                  |
|                    |     | BCC Safeguarding Adults Team   | Present                                  |

## 1. Introduction

### 1.1 Welcome and apologies

Apologies were received from Rob Davis, Simon Hester, Steve Cross, Paul Chapman, Mary Ryan, Mark Dean, Pete Anderson, Carmel Brogan, and Kelly Brown. Minutes were taken by Bronwen Falconer.

MH was thanked for his contribution to the Board. He will be moving roles and leaving Bristol City Council. Interim arrangements have been made.

WH was thanked for his contribution as this will also be his last meeting.

New attendees were welcomed.

1.2 Minutes and matters arising of meeting held on 1<sup>st</sup> February 2017

| Item           | Action   | Lead             |
|----------------|--|------------------|
| F030816.2.2.3  | RK, MH and AM to meet to discuss core partner contributions to the BCC.  | <b>RK/MH /AM</b> |
|                | <b>Outstanding.</b> To be arranged before MH leaves in June.   |                  |
| F.030816.3.1.6 | EIA work to be addressed by the PISG and LDSG.   | <b>PN/TJ</b>     |
|                | Work has been taken into sub groups. Action removed.   |                  |
| F.091116.2.2.5 | NC to produce simplified version of the information sharing guidance.  | <b>NC</b>        |
|                | Complete and addressed on the agenda   |                  |
| F.091116.2.4.1 | NC to organise a task and finish group for the 17/18 annual report and bring a paper to the next Board.                                  | <b>NC</b>        |
|                | Complete   |                  |
| F.091116.2.5.3 | MP to provide PN with an electronic version of the budget.   | <b>MP</b>        |
|                | Updated version has been sent to core partners.  |                  |
| F.091116.2.7.1 | SSm to circulate link to the Prisoner Operating Procedure.   | <b>SSm</b>       |
|                | Complete   |                  |
| 010217.2.3.1   | NC to send the self-neglect guidance to associate board members with a tight timescale for comments.                                     | <b>NC</b>        |
|                | Complete   |                  |
| 010217.2.4.1   | TJ to link in with Quality & Contracts regarding Services of Concern.  | <b>TJ</b>        |
|                | Complete   |                  |
| 010217.2.4.2   | Services of Concern to become a standing agenda item.  | <b>KB</b>        |
|                | Complete   |                  |
| 010217.2.5.1   | FT to take forward work on how children transition working together with children and adults.  | <b>FT</b>        |
|                | Update to be provided at meeting.  |                  |
| 010217.2.5.2   | University suicides to be discussed again at the next board to look at the lessons learnt and the Board's response to this, if anything. | <b>TJ</b>        |
|                | Complete and on agenda   |                  |
| 010217.2.6.1   | PA to speak to BF regarding the latest guidance to be included in the Learning & Improvement Framework.                                  | <b>PA</b>        |
|                | Complete   |                  |
| 010217.2.6.2   | BF to bring a draft SAR Guidance to the next board meeting.  | <b>BF</b>        |
|                | Complete   |                  |
| 010217.2.7.1   | TJ to circulate an updated budget breakdown before the end of February.  | <b>TJ</b>        |
|                | Complete   |                  |
| 010217.2.8.1   | NC/PN to bring draft implementation plan to next Board meeting   | <b>NC</b>        |

|              |   |              |
|--------------|---|--------------|
|              | Complete  |              |
| 010217.3.3.1 | Comments on the annual report leaflet to be sent to NC.   | <b>ALL</b>   |
|              | Complete  |              |
| 010217.3.3.2 | TJ to ensure that the annual report is published on the website asap.   | <b>TJ</b>    |
|              | Complete  |              |
| 010217.3.4.1 | MD to respond to the SCR SG in relation to the actions for AWP re "SCR 2"   | <b>MD</b>    |
|              | Complete  |              |
| 010217.3.4.2 | BF to ensure that all agencies have received a letter in relation to the actions from 'SCR 2'                                       | <b>BF</b>    |
|              | Complete  |              |
| 010217.3.5.1 | PN to prepare a programme of multi-agency training that is evidenced based from the training survey and the learning from the SCR's | <b>PN</b>    |
|              | On agenda   |              |
| 010217.3.5.2 | The LDSG & PISG to consider how the board can quality assure single agency training.  | <b>PN/TJ</b> |
|              | Update to be provided – <b>outstanding</b>  |              |
| 010217.3.6.1 | JK to circulate the link to the case law and commentary in relation to the hospital sector.   | <b>JK</b>    |
|              | Outstanding – <b>TJ to follow up</b>  |              |
| 010217.3.6.2 | JK to provide a further explanation of the ethnicity data at the next board meeting.  | <b>JK</b>    |
|              | Outstanding – <b>TJ to follow up</b>  |              |
| 010217.4.2.1 | PN to circulate the NHS England mental health homicides presentation slides.  | <b>PN</b>    |
|              | <b>Outstanding.</b> Not yet received from NHSE. PN noted that the CCG have lost some emails through migration to nhs.net.           |              |

## 2. Business Items

### 2.1. SCR presentation

FT presented 'SCR 3'. This has been circulated and is available on the BSCB website.

This case was of relevance to the safeguarding of adults with care and support needs. It was agreed at an early stage not to conduct a joint BSAB/BSCB SCR, but adult safeguarding was represented on the review panel.

Findings relevant to the BSAB were outlined. The BSCB is in the process of compiling an action plan that will be monitored by the SCR sub group and signed off by the BSCB. Cross working with the BSAB will be needed. FT and VC will work together to achieve this. It was suggested that progress against the action plan be brought to the BSAB by VC.

**Action 2.1.1: FT/VC to jointly develop action plan to bring to BSAB. Progress will be monitored.**

LL identified that the findings are similar to findings from recent Adult SCRs, particularly around lead practitioners and the navigating of mental health services across the city.

FT confirmed that the briefing / learning event from the SCR has been distributed and adult practitioners are free to attend.

MH queried the wording of Finding 7, ie. whether this is specific to this case, or a finding in general.

WH added that more frequently, service users are surprised that information is not shared across services. The finding does not make this clear.

'**SCR 4**' was also circulated and is available on the BSCB website.

## **2.2. Joint Business Unit**

BL introduced herself as JSBU Business Manager.

The Data Analyst post has now been advertised and should be circulated across networks.

Two rounds of recruitment for the 0.5 Administrator have been unsuccessful; this will be re-advertised.

The Unit should be fully in place by September.

Priorities for BL include work around policies and timescales around SARs and dissemination of findings. How to increase Board ability to increase challenge and scrutiny will also be a focus.

## **2.3. University suicide prevention update      University of Bristol**

An update was provided at the last meeting. Mark Ames from UoB provided a report jointly written between UoB and Public Health.

Experience over last few months has identified gaps in the UoB knowledge of NHS and mental health services in general. It is hoped this will support further partnership work and greater understanding.

The value of early disclosure of mental health needs is known. Students are invited to make a disclosure at the point of application and other key points pre-arrival. It is encouraging that an increasing number are disclosing but a substantial number will not. A new mental health advisory team will help to pro-actively engage with students in order to plan care and provide consistent engagement. Recruitment will take place over the summer.

VC proposed some offline discussions regarding information sharing. MA agreed this would be helpful.

**Action 2.3.1: VC and MA to begin information sharing discussions.**

MH asked whether there were any immediate changes to practice, and what type of support is received by families.

A key change to who work is now conducted is around partnership working, particularly with Public Health, and how responsibilities are shared. In the short term response, web resources and student wellbeing as a priority of the communications plan for the academic year has been intensified.

When any student dies, whatever the circumstances, there is a protocol in place. Bereavement support officers coordinate the response and act as a point of contact for families. An offer of memorial events etc is made through the chaplaincy. There is a limit to what can be offered, especially with international students.

LL affirmed that the Board can offer support and advice, and challenge where appropriate. The Board would like to explore in more detail how this relationship can be developed. BL and MA will continue these discussions.

**Action 2.3.2: MA and BL to discuss the development of a relationship between the BSAB and universities / other adult education institutions.**

The involvement of the Health and Wellbeing Board was raised. AM suggested it would be beneficial for the HWB to also see this paper. MH agreed and suggested that this could be reported to the HWB as part of a broader piece of work on suicides across Bristol. The links between the Board and Public Health should be strengthened. SS added that the prison population has also seen an increase in suicides – this would fit into the larger work.

UoB agreed to bring outcomes from the July learning event back to a future Board meeting.

**Action 2.3.3: LL to speak to Becky Pollard regarding strengthening links with the BSAB.**

**Action 2.3.4: Thematic work on suicides to be brought to the HWB, including the UoB report.**

**Action 2.3.5: LL to write to AWP for an update on any work done in the area of suicides.**

**Action 2.3.6: Suicide work to be added to the agenda for the next Board meeting for a follow up.**

## **2.4. SAR Guidance**

BF presented the revised SAR strategy. Although detail about procedural steps has been provided, it was emphasised that the methodologies applied must remain flexible. The example given in the protocol is illustrative only.

As NR has not had an opportunity to comment it was agreed that the guidance would not be published until viewed by the legal department, but could be agreed in principle.

PN has fed back that guidance for information sharing for GPs will be welcomed.

**Action 2.4.1: BF to incorporate DHR guidance on information sharing into the protocol.**

**Action 2.4.2: A letter specifically for GPs to be developed to provide assurances regarding the Care Act requirements of information sharing in the course of a SAR.**

AM and MH noted the importance of proportionality and that some methodologies will be more labour intensive. There is already a paragraph regarding the importance of proportionality, but this could be reframed to provide further emphasis.

**Action 2.4.3: The importance of proportionality in the selection of SAR methodology to be re-emphasised.**

**The BSAB approved the SAR protocol subject to minor amendments. Publication will follow once legal sign off has been obtained.**

## 2.5. SAR sub group

### Oversight of SCR Action Plans

The action plans are largely complete, subject to reports from individual agencies. MD has some further input from AWP. These should be complete by the next Board.

**Action 2.5.1: SAR Action plans to be brought to next BSAB. RC to be completed and signed off.**

### 'SAR 4' Learning Review

A SAR referral was recently received regarding SAR 4. It was agreed it did not meet threshold for SAR but the SARSG recommended the BSAB ask BCC for assurance that safeguards are in place in the care home in question. It also recommended that a proportionate learning review take place to focus on financial exploitation. It was agreed this would be led by BL and Safer Bristol.

MH was concerned about the definition of 'sufficient safeguards' and how this could be interpreted.

AM thanked VC for the SAR report, and suggested that roles of attendees be given rather than names.

It was noted that a theme identified from recent SCRs has been the issue of risk assessments for vulnerable residents of assisted housing. The Board must be confident of the current systems in place in Bristol. LL recently presented themes of SCRs to the HWB, and this was picked up as an action.

**Action 2.5.2: MH to bring the issue of risk assessments in assisted housing to a meeting on Friday.**

## 2.6. Current SCRs

### SCR 2

A scoping meeting was held on 8/5/17. This will now be a SILP learning review instead of a SCIE review. It is hoped this will be more efficient. Draft terms of reference were discussed, and this will be reviewed and brought back by the reviewers. A parallel mental health homicide review is being undertaken by NHS England; there will be close contact between the reviews with touch points. It is important to emphasise that two adults are the subject of this review.

### SCR 3

This case was recently received and it was agreed that the criteria were met. It was unusual as the referral was received from the family of the deceased. It is not a recent case as the subject died in 2015. One of contributory causes was listed as malnourishment. Health and weight declined after a move to supported accommodation. Scoping for reviewers will begin shortly.

### SCR 5

Correspondence with the family is ongoing. The family submitted a number of questions and points for resolution, and a response has now been sent.

An extra-ordinary Board meeting to accept the existing report has been scheduled for 6<sup>th</sup> June. A draft board response to the SCR has also been circulated to the core partners. LL emphasised that it is critical that all Board members read the papers thoroughly before the meeting.

## 2.7. 'SCR 4' Addendum

The SCR 4 was commissioned in 2013. In March this year the inquest was re-opened. As a result of this it was highlighted that the published executive summary was not as clear as it should have been around the issue of the availability of supported housing. 5 areas were noted as being ambiguous, and this has been accepted. An addendum has been produced to clarify this. It has been noted that the ambiguities identified did not have an impact on the findings.

## 2.8. BSAB Policy update & sign off

### Information Sharing Guidance – Simplified Version

NC presented the simplified guidance as requested at a previous Board meeting. This has been taken from the text of the guidance. This has been approved by the legal department.

**The BSAB approved the simplified Information Sharing Guidance.**

### Escalation Policy - Monitoring



The Escalation Policy has now been publicly available for some time online. The Board must now be assured that practice can be safely challenged, and a better audit trail for the use of the escalation policy is needed for that. A lot of escalations are raised informally. An audit of escalations will take place to amend and improve the use of the policy.

A monitoring form has been designed to be completed at stage 1 of the escalation process. An email will be sent out within the next two weeks requesting agencies to collect data around escalations for a 4 week period. Board members are requested to look out for this message and action once received.

**Action 2.8.1: Board members to complete the use of escalation policy audit using the agreed monitoring form once requested.**

### **Self-neglect & Clutter Image Scale Rating**

The Self-neglect protocol has now been approved and is available on the website.

Steve Nichols from Avon Fire and Rescue Service gave a presentation, demonstrating the clutter image scale rating. This is a visual guide to clutter originating from Public Health England, allowing professionals to quantify mess at home, particularly when changes were evident (eg, a sudden escalation). It allows professionals to strengthen operational risk assessments. AFRS workers would be attending at every level.

It was proposed that the scale be added as an appendix to the existing protocol as a way to disseminate to other agencies and adopt a common measurement.

Multiple Board members agreed that this would be a very useful tool.

TD noted that a colleague will be attending a meeting the following day regarding anti-social behaviour in housing properties. It was agreed that this information will be passed along for discussion at that meeting. PN added that this would also be useful to give to GPs.

**Action 2.8.2: 'Clutter image scale rating' is ratified and will be added as an appendix to the Self neglect protocol.**

### **Policy update**

A paper was circulated providing an update on the following:

- Perinatal Mental Health Protocol
- Protocol for joint working across Adult Mental Health and Children's Services
- FGM Guidance and Strategy
- Disabled Children and Child Protection (0-25)
- Multi-Faith Policy
- Self Neglect Guidance
- Integrated Supervision Policy

- Organisational/Institutional Abuse incl Large Scale Investigations

Policies approved at the BSCB include:

- Strategy Discussions
- Protocol to Prevent childhood exposure to Opioid Substitution Medication 2017

## **2.9. Early Intervention and Prevention Implementation Plan**

The implementation plan has been created as result of a task group. LL and BL will redirect this towards commissioners.

A strategy is now in place, and the BSAB must now look at next steps and implementation. Engagement with Public Health and Safer Bristol is needed.

**Action 2.9.1: LL to meet with Becky Pollard to discuss what is needed through early intervention.**

**Action 2.9.2: LL and JSBU to discuss what an implementation plan may look like**

**Action 2.9.3: Early Intervention and Prevention Implementation Plan to be added to the agenda for the next meeting.**

## **2.10. Annual Report 2017/2018**

The last annual report was not published quickly or in an easy format. A task group met to consider future aims. Key areas of focus will be timeliness and work around partnership. Data must be more embedded.

This year's annual report will be ready for August – in the future they will be presented in May.

An online survey will be sent to Board members to complete. Previously more guidance on how to complete submissions has been requested.

Any further comments can be emailed to the JSBU.

## **3. Standing Items**

### **3.1. Risk Register**

The risk register has been updated for the meeting. A key change has been around the risks to how the Board is funded. There are ongoing risks around the implementation of SAR action plans. Some risks have been mitigated.

### **3.2. Services of Concern**

The Services of Concern paper was tabled and discussed.

MH noted that CQC has identified 4 main areas in which there are a significant number of alerts and referrals. This includes medical errors, bedsores and resident on resident violence. A sense of the number of alerts in Bristol that fall in these areas would be useful.

It is positive that Bristol is not seeing many reports abuse or uncaring attitudes – the main area for improvement would be workforce development, ensuring they have the right tools for the job.

National comparators are useful.

### **3.3. Finance Update**

The finance paper was tabled.

Some work has recently taken place in ascertaining clarity around financial reporting. This has identified / clarified some errors.

BGSW money split between the children and adults board.

It was noted that the previous Annual report reported a surplus. It has not been possible to identify this in the budget systems. John Readman has agreed a financial review of this.

BL is taking forward work on identifying where under / overspends are held.

LL will hold further conversations with the core partners about the end of the financial year. The Board will also need to consider how to tie financial considerations into the strategic plan for the next 3 years.

### **3.4. Performance and Intelligence sub group**

TJ provided a report.

#### **Multi agency Audit Schedule**

The first audit will be held next Friday. This will look at concerns raised and the quality of the response and decisions. Following this will be audits on use of escalation, and self-neglect. The results of the audits will be brought to the Board.

The anticipated Data Analyst will progress work with data reporting.

The PISG would like to examine instances of S42 where there is and isn't consent, and drill down on the origin of this.

ASCOF report provided.

LL noted that a consistently higher rate of reported concerns has been seen over the past 4 months, and the reasons behind this are needed.

The conversion rate appears to be more static after work from last year.

Average duration from enquiries appear to have gone down.

There may be an error in input dates where measuring completion within a reasonable timescale – this can be cleaned up.

In the long term the PISG will need to report on a longer period in order to analyse trends.

### **3.5. Communications and Engagement sub group**

#### **Conference Update**

The BSAB joint S Glos conference is taking place in the same week as Stop Adult Abuse week.

There are some concerns around the information for the conference being properly disseminated. While the BCCG commissioners have circulated to providers, BCC have not.

#### **Action 3.5: MH to ensure BCC commissioners have circulated information regarding the conference to providers.**

This is the first year the conference will be charged. It is hoped this will cover costs with a small surplus.

Board members were reminded to book their tickets now.

#### **Website update**

Progress is being made. A test site for the BSAB site is available.

SAA week – leaflet will be going out.

#### **Promotional materials**

A leaflet for Stop Adult Abuse week will be circulated. This will be in PDF form for cost reasons, but if the surplus from the conference is sufficient this could go towards future printing costs.

### **3.6. Learning and Development sub group**

#### **Training Strategy**

The training strategy has been developed, and amended to include E-learning. In the future the group will be looking at the scope for income generation. The priority now is to look at how to disseminate learning from SARs. Options have been provided, and work will take place with the CESG about messaging.

The group is looking for case studies of good practice. Suggestions welcome.

**Action 3.6.1: Training strategy to be brought back to the Board for approval. Any comments to be sent to the LDSG.**

### **3.7. Deprivation of Liberty Safeguards**

A written report has been provided for information.

**Action 3.7.1: Ensure that 'Deprivation of Liberty Safeguards' is correctly referenced throughout.**

A Law Commission report into DOLS was published in March. There is no timescale on when a response from the Government is expected or when this would move into legislation. It may be some time.

In summary, the criteria will remain same, but how it is authorised will change. Those not objecting can be signed off at lower level.

The DOLS team is generally positive about the emphasis, but it is unknown how this will work in practice.

MH noted that BCC made £1.5million available for implementation after the judgement, but there remains significant pressure.

The status will be monitored.

## **4. Any other Business**

### **4.1. UHB CQC report**

The new UHB report from the CQC has been received, with the service rated Outstanding. The staff are very pleased with this result. Areas of good practice in safeguarding were identified in knowledge of how to report, accessible policies, and understanding of levels of responsibility. The report will be available to read.

### **4.2. NHS net**

BCCG has now migrated to using exclusively nhs.net email addresses. Patience is required, as some emails have been lost in the move. It should now be possible to send confidential information to .gov.uk addresses.

The Intercollegiate document remains on hold.

### **4.3. Sub groups**

MH noted that the sub group reports were very good and formally reported thanks to Chairs. LL echoed this, and encouraged agencies to direct staff who want to contribute to safeguarding work to the sub groups. Since BLs arrival the JSBU has been more coordinated.

**Action Grid**

| <b>Item</b>          | <b>Action</b>  | <b>Lead</b>      |
|----------------------|--|------------------|
| <b>F030816.2.2.3</b> | RK, MH and AM to meet to discuss core partner contributions to the BCC.  | <b>RK/MH /AM</b> |
| <b>F010217.3.5.2</b> | The LDSG & PISG to consider how the board can quality assure single agency training.   | <b>PN/TJ</b>     |
| <b>F010217.3.6.1</b> | JK to circulate the link to the case law and commentary in relation to the hospital sector.  | <b>JK/TJ</b>     |
| <b>F010217.3.6.2</b> | JK to provide a further explanation of the ethnicity data at the next board meeting.   | <b>JK/TJ</b>     |
| <b>F010217.4.2.1</b> | PN to circulate the NHS England mental health homicides slides.  | <b>PN</b>        |
| <b>100517.2.1.1</b>  | FT/VC to jointly develop action plan to bring to BSAB. Progress will be monitored.   | <b>FT/VC</b>     |
| <b>100517.2.3.1</b>  | VC and MA to begin information sharing discussions.  | <b>VC/MA</b>     |
| <b>100517.2.3.2</b>  | MA and BL to discuss the development of a relationship between the BSAB and universities / other adult education institutions.                         | <b>MA/BL</b>     |
| <b>100517.2.3.3</b>  | LL to speak to Becky Pollard regarding strengthening links with the BSAB.  | <b>LL</b>        |
| <b>100517.2.3.4</b>  | Thematic work on suicides to be brought to the HWB   | <b>BL</b>        |
| <b>100517.2.3.5</b>  | LL to write to AWP for an update on any work done in the area of suicides  | <b>LL</b>        |
| <b>100517.2.3.6</b>  | Suicide work to be added to the agenda for the next Board meeting for a follow up.   | <b>KB</b>        |
| <b>100517.2.4.1</b>  | BF to incorporate DHR guidance on information sharing into the protocol.   | <b>BF</b>        |
| <b>100517.2.4.2</b>  | A letter specifically for GPs to be developed to provide assurances regarding the Care Act requirements of information sharing in the course of a SAR. | <b>BF</b>        |
| <b>100517.2.4.3</b>  | The importance of proportionality in the selection of SAR methodology to be re-emphasised.   | <b>BF</b>        |
| <b>100517.2.5.1</b>  | SAR Action plans to be brought to next BSAB. RC to be completed and signed off.  | <b>SARSG</b>     |
| <b>100517.2.5.2</b>  | MH to bring the issue of risk assessments in assisted housing to a meeting on Friday.  | <b>MH</b>        |
| <b>100517.2.8.1</b>  | Board members to complete the use of escalation policy audit using the agreed monitoring form once requested.  | <b>ALL</b>       |
| <b>100517.2.8.2</b>  | 'Clutter image scale rating' is ratified and will be added as an appendix to the Self neglect protocol.  | <b>NC</b>        |
| <b>100517.2.9.1</b>  | LL to meet with Becky Pollard to discuss what is needed through early intervention.  | <b>LL</b>        |
| <b>100517.2.9.2</b>  | LL and JSBU to discuss what an implementation plan may look like   | <b>LL</b>        |
| <b>100517.2.9.3</b>  | Early Intervention and Prevention Implementation Plan to be added to the agenda for the next meeting.  | <b>KB</b>        |
| <b>100517.3.5.1</b>  | MH to ensure BCC commissioners have circulated information regarding the conference to providers.  | <b>MH</b>        |
| <b>100517.3.6.1</b>  | Training strategy to be brought back to the Board for approval. Any comments to be sent to the LDSG.   | <b>PN</b>        |
| <b>100517.3.7.1</b>  | Ensure that 'Deprivation of Liberty <u>Safeguards</u> ' is correctly referenced throughout.  | <b>KB</b>        |