



Lancashire Learning Disability Partnership Board

Keeping Safe Sub Group 2-4pm County Hall A05

Notes from meeting on 24th May 2016



What

What we talked about

Actions in **bold** with a summary at the end of the notes.



Welcome

Welcome and introductions

Louise chaired the meeting and led a round of introductions and asked the group to share something you have done since the last meeting linked to Staying Safe.

Louise Calvert – SAIL

Mike Holt – React and SAIL

Amanda Topps – Community Engagement Officer, Lancashire County Council

John McBeth – Pendle Support

Debbie Anderson – SAIL

Ellen Smith, Lancashire County Council

Elaine Craddock, Lancashire Adult Learning and Nelson and Colne College

Helen McCondichie, Developing from the Negatives, DENW



Apologies

Stuart Rutledge – Lancashire Constabulary, Hate Crime and Diversity Officer
Jamie Shields – UBU
Charlotte Cropper – self advocate Fleetwood
Ian Greenwood – People First, SAIL and Partnership Board Rep
James Hughes, React
Mavis Abel, family carer



Positive and productive meeting.

We were reminded of the group rules, and to use the red and green cards provided.

Ground Rules
– Red/Green cards, roles and responsibilities

Louise was the Chair today.
The Note keeper was Mike Holt.
The Time keeper was John McBeth.

Thank you very much for doing these roles at our meeting.



Actions from previous notes

- DENW were invited to the meeting. Helen is a member of the sub group.
- Amanda has asked for information from providers and self-advocates regarding Safeguarding. She shared this in the meeting.
- Mavis, a family carer, is already part of the group.

- Circulate Stuart's hate crime presentation within the group
Stuart doesn't want presentation used outside group – could Stuart do an abridged version that could be used?
- The address of IHAL website, which gives access to 2014 SAF was on the notes from the last meeting.
- Get Safeguarding statistics (see below)



Safeguarding

A rep from MASH (Multi-Agency Safeguarding Hub) and the Safeguarding Team were invited to this meeting.

They could not come but Amanda had some information from a safeguarding colleague:

At the minute because the volume has increased to 50+ alerts per day they are prioritised in order of risk which makes it difficult to state timescales. An assault would be dealt with on the day, a pressure ulcer may take a number of days and a medication management issue longer. The alerts are triaged as they come into the Multi Agency Safeguarding Hub (MASH).

Triage means that someone looks at the situation to decide what needs to happen next.



The MASH is currently under review but the setup is still multi agency professionals working together in one office. A social worker receives the alert and then does some evidence gathering. They would contact the alerter and potentially a provider, family, police, DN, or maybe contracts, the list is endless.

An Alerter is the person who says they think there is a safeguarding issue.



Once the social worker has enough information s/he then makes a decision whether to step up or down. Step up would mean it would be given to a social worker in the area safeguarding team to undertake further enquiry.

If stepped down the alerter is contacted and there is no further action.



There is also a RADAR (which originally stood for Receive, Advise, Develop, Action, Refer) meeting. RADAR is a confidential multiagency group that shares information to help protect vulnerable adults. RADAR discuss concerns that have been raised about providers. There are 3 in Lancashire based in Central, East and North and each group meets monthly.

Lancashire County Council send a representative to this meeting, along with reps from health and other organisations like the Police may get involved.

We need to be clear about what safeguarding data we want and why.



We looked at the Lancashire Safeguarding website
www.lancshiresafeguarding.org.uk

There is lots of information on the site about how you can get advice and support with safeguarding.

In order to report a safeguarding issue you have to use a form (the adults alert form). One person fed back that they would rather put their alert in an email, rather than a restrictive form. It would allow them to report in their own way what had happened.

It was suggested there should be an email address for this.



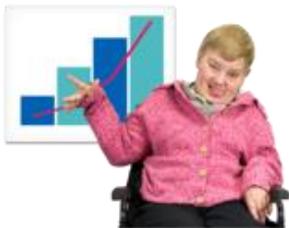
The website is not in easy read – we need to feed this back.



Within the new Care Act there is an obligation for statutory agencies to have information in accessible formats.



We would like to know if providers are aware of LCC Safeguarding policy. Organisations will have their own policies. John said it is part of regulations to tell staff about their own safeguarding policies and Lancashire County Council safeguarding policies.



We think that it would be useful to have case studies that show what happens when a safeguarding referral is made, from start to finish. It would also help to have this information in a visual format like a flow chart.



A concern raised in a comments Amanda had gathered from providers and professionals was that there is usually no feedback from Safeguarding referrals.

Investigations have been known to be closed by the social worker before the issues involved were resolved.

An outcome is needed – why are the Safeguarding team or MASH not getting back to the alerter?



Providers are required to report the conclusion of the safeguarding to the Care Quality Commission.



We need more evidence from people with learning disabilities about their experiences of safeguarding. We don't think many people understand about how to report a safeguarding issue.

We think there needs to be an easy read version of the Lancashire County Council safeguarding policy on their website.

Action

Mike and James to continue to ask people who attend advocacy groups if they have any feedback.



We looked at the questions we want to ask:

- How many safeguarding referrals investigations have been carried out in the previous 12 months?
- What categories were these referrals in?
- What settings?
- How long does it take, from raising an alert to allocation?
[this depends on the priority]
- What are the criteria used in triaging referrals?
- If the referral is high level how long is it taking to be allocated?
- Where does the alert come from? For example staff, person using service, third party, family member, public?
- What are the outcomes? Numbers of substantiated, partially substantiated and not substantiated.

Substantiated means that it was proved that the safeguarding alert was correct and a person has been abused.

Not substantiated means that the safeguarding issue could not be proved.

Partial substantiated means

Action

Amanda to ask the teams to get the safeguarding information for our next meeting.



Helen will find out how many people with learning disabilities who report a hate crime to DENW's reporting centre are referred to safeguarding?

Action

Ask Stuart if he can share last year's hate crime figures or get hold of them for the group.



What you can bring to the group

One Page Profiles

We decided to read out one or two one page profiles at each meeting.

Today John and Ellen shared their profiles.



Transforming Care

The Transforming Care work is the work that started after the abuse of people with a learning disability at Winterbourne View hospital.

Action

Ellen will ask Sally for the Transforming Care presentation, to bring to the meeting. She will also ask Sally about Lancashire's own Transforming Care plan (the Pan Lancashire plan has already been made available, including in an easy read version).



Please see additional information below for links and documents about Transforming Care.



Action Planning

We agreed that Safeguarding and Transforming Care should be priorities alongside this group supporting Safety in Town and the Hate Crime projects like the Manga Comic and Travel Training.



Agenda for next meeting

Safeguarding Information

Update on Safety in Town

The Lancashire Transforming Care Plan



**Actions from
the meeting
today**

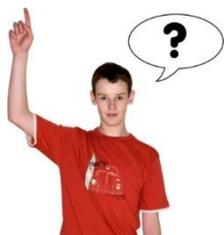
Actions

- **Ellen will ask Sally for the Transforming Care presentation, to bring to the meeting. She will also ask Sally about Lancashire's own Transforming Care plan (the Pan Lancashire plan has already been made available, including in an easy read version).**

- **Stuart's hate crime presentation was sent to Amanda but he doesn't want the presentation used outside group.**

Could Stuart do an abridged version that could be used?

- **Ask Stuart if he can share last year's hate crime figures or get hold of them for the group.**
- **Mike and James to continue to ask people who attend advocacy groups if they have any feedback.**
- **Amanda to ask the teams to get the safeguarding information for our next meeting.**



Any other business

We decided to extend the meeting by half an hour. We will now start the meeting at 1.30pm and see if this gives us more time to discuss our action plan.



Date of next meeting

The **next** meeting is on Tuesday 26 July in County Hall room **A05** from **1.30-4pm**.

Thank you for attending the Keeping Safe sub group.

Thank you Louise for being the Chair and John for timekeeping.

We had a really good and productive meeting and we look forward to seeing you again on Tuesday 26 July.



Additional Information

Since the meeting Amanda has been sent information about the Lancashire Transforming Care plans.

The documents will be attached to these notes.



update for
partnership boards



Transforming Care
in Pan Lancashire Ea



You can read more about this work in the *Building the right support* report. There is an easy read copy of the report here: <https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-net-plan-er.pdf>

You can read more about this work in the *Service Model* report. There is an easy read copy of the report here: <https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-serv-model-er.pdf>

You can find out more about Care and Treatment Reviews here: <https://www.england.nhs.uk/wp-content/uploads/2015/06/ctr-leaflet-er.pdf>

You can find the Hospitals are not Homes booklet here: <http://inclusionnorth.org/resources/information-packs/hospitals-are-not-homes/>