

HAMPSHIRE SAFEGUARDING ADULTS BOARD

MEMORANDUM OF AGREEMENT

March 2015

1. Introduction

- 1.1 This Memorandum of Agreement (MOA) describes the framework that underpins the working of the Hampshire Safeguarding Adults Board (HSAB) and outlines the role, responsibilities, authority and accountability of the member organisations represented at the HSAB. The authority of the Board, exercised over the members, is agreed through signature to this MOA.
- 1.2 This MOA has been updated to reflect the statutory functions of the Safeguarding Adult Board (SAB) as outlined in section 43 of the Care Act 2014. The Act creates a new legal framework for how local authorities and other parts of the system should work together to protect adults at risk of abuse or neglect. The Care Act statutory guidance requires partner agencies to agree how they must work together and the roles they must play to keep adults at risk safe. Chapter 14 of the Care Act statutory guidance replaces 'No Secrets' (2000).
- 1.3 The Care Act 2014 creates a duty to promote wellbeing and prevention in all care and support functions of which adult safeguarding is one. Adult safeguarding is also included as one of the five aims of co-operation between partners relevant to care and of support.

2. Role and scope of the Hampshire Safeguarding Adults Board

- 2.1 The HSAB is a statutory, multi-organisation partnership committee, co-ordinated by the local authority, which gives strategic leadership for adult safeguarding, across the Hampshire County Council area.
- 2.2 The main objective of the HSAB is to gain assurance that local safeguarding arrangements and its SAB partners act to help and protect adults in its area who meet the criteria set out in Chapter 14 of the statutory guidance of the Care Act 2014.
- 2.3 The HSAB oversees and leads adult safeguarding across the locality and will have an interest in a range of matters that contribute to the prevention of abuse and neglect. These will include the safety of patients in its local health services, quality of local care and support services, effectiveness of prisons and approved premises in safeguarding offenders and awareness and responsiveness of further education services.
- 2.4 It is important that HSAB 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.

- 2.5 HSAB seeks to act as an important source of advice and assistance, for example in helping others improve their safeguarding mechanisms and so it has developed effective links with other key partnerships and will share relevant information and work plans. The HSAB works with other strategic forums and Boards to ensure that any duplication is reduced and efficiencies maximised, particularly as objectives and membership between forums is likely to overlap.
- 2.6 The Care Act 2014 statutory guidance outlines three core duties for SABs:
- a) It must publish a strategic plan for each financial year setting out 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 SAB must consult the local Healthwatch organisation. The plan should be evidence based and make use of all available evidence and intelligence from partners to form and develop its plan.
 - b) It must publish an annual report detailing what it has done during the year to achieve its main objective and implement its strategic 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 taken.
 - c) It must conduct any safeguarding adult review in accordance with Section 44 of the Act.
- 2.7 Whilst Hampshire Adult Services is the lead agency with responsibility for co-ordinating adult safeguarding arrangements, all the members of the HSAB should designate a lead officer.
- 2.8 The HSAB's remit is to agree objectives, set priorities and co-ordinate the strategic development of adult safeguarding across the county. It is the key mechanism for agreeing how local agencies will work together effectively to safeguard and promote the safety and well-being of adults at risk and/or in vulnerable situations. To fulfil its remit, the HSAB works to:
- Embed a zero tolerance culture of abuse or neglect.
 - Promote awareness and understanding of abuse amongst service users, carers, professionals, care providers, the wider community and the public.

- Generate community and stakeholder interest and engagement in safeguarding to ensure “Safeguarding is Everyone’s Business”.
- Promote strategies and activities aimed at prevention and early intervention in safeguarding.
- Develop the Making Safeguarding Personal approach across all member organisations.
- Ensure links are established and maintained with other strategic plans and forums.
- Provide a clear legal, policy and professional framework to enable staff with safeguarding responsibilities across all agencies, to work effectively together to safeguard people at risk so that responses are proportionate and consistent with personalised safeguarding.
- Develop a shared workforce planning and development framework which sets the standard for safeguarding adults training and which will inform partner agencies training provision.
- Hold local partners to account regarding their delivery of safeguarding and implement an integrated performance monitoring framework focusing on outcomes rather than targets.
- Hold agencies to account regarding the quality of services they commission and the strategies in place to monitor and improve local care services.
- Implement a robust quality assurance framework ensuring the voice and experience of users of safeguarding services are integral to these processes.
- Commission safeguarding adults reviews and other forms of multi agency reviews as required and putting in place mechanisms to promote learning from such cases.
- Produce and publish a Safeguarding Adults Strategy in consultation with Health Watch and the local community.
- Publish a HSAB annual report/accountability statement highlighting the Board’s progress and achievements in meeting stated objectives in the Strategic Safeguarding Plan and ensuring this is widely reported across partner agencies and organisations.
- Provide information or advice to any public body on carrying out their function in relation to safeguarding adults.

3. Statement of Principles

3.1 The following principles are used to underpin both the work of the HSAB and local safeguarding arrangements. All members agree to these principles in working together to:

- Promote empowerment, independence and the wellbeing of adults and an individual's right to self-determination, through the services they provide.
- Recognise that the right to self-determination can present risk and seek to ensure the law and statutory requirements are known and used appropriately so that adults are informed and those experiencing crime receive the protection of the law and access to the criminal justice system.
- Deliver personalised, proportionate and responsive safeguarding.
- Promote public awareness of the issues surrounding adult safeguarding and provide information to the general public and professional staff about how to get help and support.
- Work to support communities to prevent, detect and report neglect and abuse.
- Provide safeguarding strategies, policies and practice guidance that are devised within the framework of relevant legislation and are based on the promotion of human rights.
- Actively promote effective and clear processes to facilitate use of the Mental Capacity Act (2005) and the Deprivation of Liberty Safeguards where this is necessary.
- Ensure that local systems to protect people at risk are proportionate, balanced and responsive and that these provide a wide spectrum of support and that safeguarding responses are proportionate and the least intrusive.
- Foster on a 'whole system' approach providing a gateway to mainstream community safety and crime prevention measures
- Learn from the experiences of individuals, through Safeguarding Adults Reviews and other forms of review in order to improve the way we work as a Board but also as individual organisations.

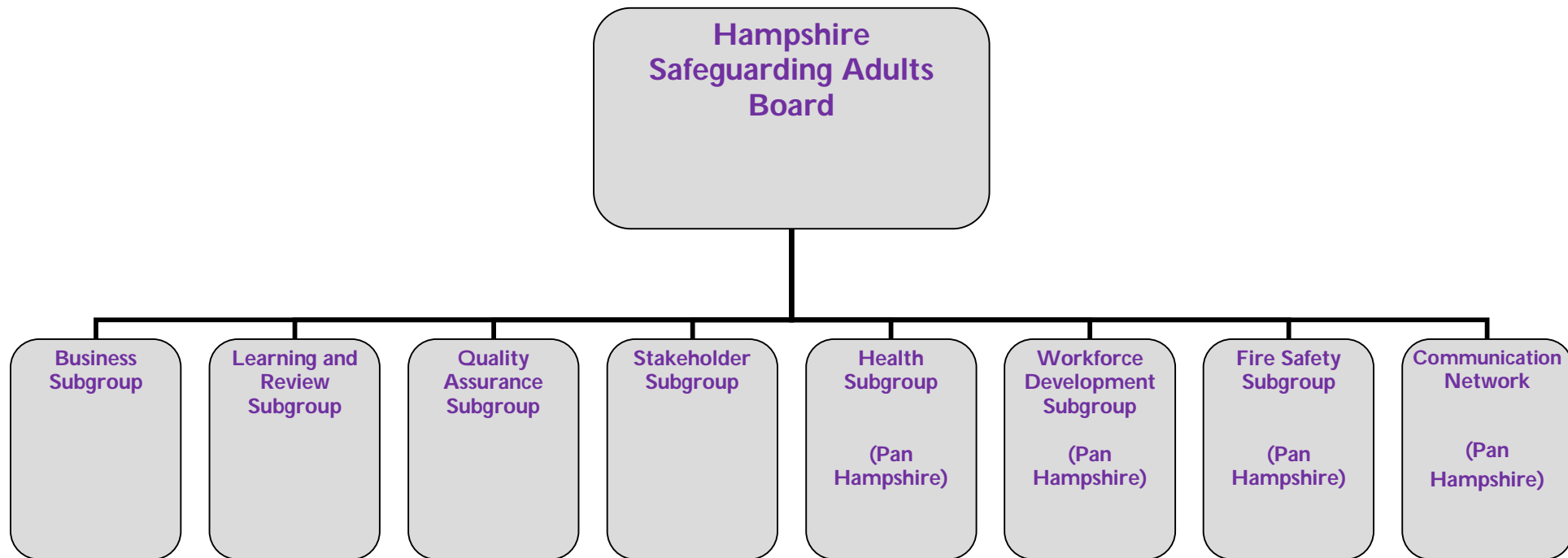
3.2 The above is underpinned by the principles laid out by Government in 2011¹

- Empowerment:** Person-led decisions and informed consent.
- Prevention:** It is better to take action before harm occurs.
- Proportionality:** Proportionate and least intrusive responses appropriate to the risk presented.
- Protection:** Support and representation for those in greatest need.
- Partnerships:** Local solutions through services working together within their communities.
- Accountability:** Accountability and transparency in the delivery of safeguarding at the local level.

¹ Statement of Government Policy on adult safeguarding , Department of Health (2013)

4. Structure of the HSAB

4.1 HSAB is supported by a number of subgroups which focus on the delivery of specific business plan objectives. These are illustrated below:



- 4.2 Each HSAB Subgroup operates to terms of reference and a work plan agreed by the Board and which focus on the delivery of HSAB strategic objectives and priorities. A chair will be appointed for each subgroup who will be responsible for providing regular progress reports to HSAB. The HSAB Manager will have an overview of the work and activities of all the subgroups and is responsible for ensuring respective work programmes of the subgroups are co-ordinated and also consistent with the HSAB Safeguarding Strategy and Business Plan. Short term task and finish groups are also set up as and these focus on the implementation of specific objectives or projects.
- 4.3 The HSAB also maintains effective links with a range of other strategic forums and partnerships including the Local Children's Safeguarding Board, Hampshire Domestic Abuse Partnership, Learning Disability Partnership Board, Community Safety Partnerships, Health and Wellbeing Board and Healthwatch. These links emphasise the strong synergies between the work of the HSAB and these forums and ensures that any duplication is reduced and efficiencies maximised, particularly as objectives and membership are likely to overlap.
- 4.4 The HSAB aims to promote the involvement and contribution of service users on the Board. The HSAB continues to explore a range of approaches to achieve meaningful involvement of service users on the board and also ensure that the Board is informed by the voice of service users in general.

5. Accountability and Governance

- 5.1 Accountability for the co-ordination of the HSAB is located with the Local Authority through the Director of Adult Services.
- 5.2 The HSAB is formally accountable to the HCC Health and Adult Social Care Select Committee, which holds the Director of Adult Services to account for the performance of the HSAB.
- 5.3 The HSAB will be chaired by an independent person appointed by the Board but accountable to the Director of Adult Services. A vice chair will be agreed by the members of the HSAB on an annual basis from amongst the core membership.
- 5.4 The HSAB is required to produce a strategic plan and must consult the local Health Watch organisation and – as far as is possible – the local community in the area on the contents of this plan.

- 5.5 The HSAB will also produce an Annual Report and Accountability Statement which provides an overview of the progress that the HSAB has made against the strategy and objectives set for that year (as laid out in the HSAB Business Plan). The Annual Report will highlight what each HSAB member organisation has done to implement the Safeguarding Strategy as well as the areas requiring focus for the following year. The Annual Report will also include a summary of any Safeguarding Adults Reviews undertaken.
- 5.6 The Annual Report will be presented to the Health and Wellbeing Board in order to ensure alignment of activities within the broad health and well-being agenda and to deliver accountability to the wider local strategic partnership. It will also be shared with the Hampshire Safeguarding Children's Board in recognition of the links between the safeguarding agenda of the respective boards.
- 5.7 Subgroups and task and finish groups will have a work plan which is derived from the HSAB Business Plan.

6. Membership of the HSAB

- 6.1 The membership of the HSAB can be seen in Appendix A.
- 6.2 Membership will include core members, as identified through section 43 of the Care Act 2014 and relevant NHS guidance, and associate members who are invited on to the HSAB in order to enhance multi-agency working.
- 6.3 HSAB member organisations should designate a named person to attend all meetings. The named person must have the required seniority, experience, skills and decision making authority to represent their organisation. A designated person (also of sufficient seniority) should also be identified to deputise for the named person when necessary. The named person (and their deputy) must be able to:
- Make decisions on behalf of their organisation
 - Hold their organisation to account
 - Commit their organisation on policy practice developments
 - Commit resources in their organisation to support the work of the HSAB
- 6.4 HSAB will also maintain definitive links with a range of agencies whose functions support adult safeguarding work and the protection of adults at risk. HSAB's strategic links to the agencies below will be developed and maintained by the HSAB Board Manager and a brief update of relevant developments in these agencies included in the HSAB Annual Report:

- Coroner's office
- Crown Prosecution Service
- Department of Work and Pensions
- MAPPA (Multi-Agency Public Protection Arrangements)
- National Human Trafficking Centre
- Police and Crime Commissioner's Office
- PREVENT
- Office of the Public Guardian
- UK Border Agency
- Witness Support

6.5 The Independent Chair and the Local Authority will secure the involvement of other relevant organisations, either as associate members of the HSAB, by inviting them to be representative of subgroups or through invitation to speak to specific issues at an HSAB meeting.

6.6 The HSAB will receive support and advice from legal and performance information advisors as required.

6.7 The Executive Member and Director of Adult Services will have a standing invitation to attend the HSAB but will not be formal, voting members.

7. Local Frameworks

7.1 The HSAB has developed a range of multi-agency frameworks and strategies designed to support the work of the Board and facilitate a cohesive approach and partnership working. These have been shared with the other Local Safeguarding Adult Boards in Hampshire in order to develop a consistent approach. These include:

- 4LSAB Safeguarding Adults Policy, Guidance and Toolkit
- Information Sharing
- Designated Adult Safeguarding Manager Framework
- Prevention and Early Intervention in Safeguarding
- Learning and Review Framework
- Safeguarding Adult Review Policy and Toolkit
- Quality Assurance Framework
- Learning and Development Strategy
- Safeguarding in Commissioned Services
- Safeguarding in Prisons and Approved Premises
- Human Trafficking
- Communication and Media

- 7.2 The work of the HSAB is also underpinned by other general sets of principles to which all members must adhere;
- Nolan 'seven principles of public life' (Appendix C)
 - Caldicott Principles (Appendix D)
 - Data Protection Act 1998 (Appendix E)
 - Crime and Disorder Act 1998 (Appendix F)

8. Financial Arrangements

- 8.1 HSAB core member organisations will agree joint funding arrangements to enable HSAB to implement its business plan objectives. This will be managed by the Local Authority on behalf of the HSAB and budget requirements will be reviewed annually in the light of the coming year's HSAB business plan. Partner contributions will be agreed via a funding formula agreed by the HSAB.

9. HSAB Business Support

- 9.1 The Hampshire Safeguarding Adults Board will be supported by a Board Manager whose specific responsibilities will be to:
- Ensure HSAB meetings are convened, support agenda setting for board meetings and arrange accommodation.
 - Arrange secretariat to the HSAB and the circulation and despatch of appropriate papers.
 - Advise and update HSAB on the policy and practice implications of any new legislation, government policy or guidance.
 - Attend all of the HSAB subgroups, support the chairs in setting the agenda. To also maintain an overview of the work of all the subgroups and ensure respective work programmes and activities are co-ordinated and consistent with the HSAB Safeguarding Strategy and Business Plan.
 - Provide advice to the HSAB and subgroups on professional issues.
 - Co-ordinate the production of the Business Plan, undertaking quarterly reviews of progress and reporting to the HSAB.
 - Co-ordinate the production and publication of the Strategic Plan and Annual Report.

- Develop and maintain strategic links with agencies whose function supports adult safeguarding work and the protection of adults at risk but who do not sit on the Board.
- Act as the first point of contact to receive and triage for learning review referrals.

10. Disputes and Complaints

- 10.1 The HSAB is intended to be a collaborative and co-operative body and the independent chair will ensure that no particular sector or member is unduly favoured. Problems and issues should normally be debated and resolved at HSAB meetings.
- 10.2 Any dispute or complaint that cannot be resolved as above and which if not resolved satisfactorily, could compromise the effectiveness of safeguarding arrangements will be addressed via the HSAB Dispute Resolution Protocol (Appendix G).

11. Monitoring

- 11.1 The HSAB's role is to ensure the effectiveness of work to safeguard and prevent harm to adults at risk of abuse and neglect. The HSAB will undertake a peer review process, based on self-evaluation, to monitor the performance of member organisations in relation to this. The role of the HSAB is to hold organisations to account where failures are apparent.
- 11.2 The HSAB will implement an integrated performance monitoring framework with a focus on outcomes rather than targets. It will also implement a range of quality assurance activities including seeking views of people who have experienced safeguarding services.

APPENDIX A: HAMPSHIRE SAFEGUARDING BOARD MEMBERSHIP

Chair

Independent Chair

Support to the HSAB

HSAB Board Manager

HSAB Business Support

Core Members

Hampshire Adult Services

Hampshire Constabulary

Clinical Commissioning Groups

Associate Members

Community Safety Partnerships (County & District/Borough Councils)

Hampshire Fire and Rescue Service

Hampshire and Isle of Wight Community Rehabilitation Company

Hampshire County Council Children's Services

HM Prison Winchester

Housing (via a representative of the 11 District/Borough Council Housing Officers)

Independent care provider

NHS England (Wessex Local Area Team)

NHS providers (acute, community, mental health, ambulance)

National Probation Service (South Central)

Trading Standards

Chair Business Subgroup

Chair Communications Network

Chair Learning and Review Subgroup

Chair Health Subgroup

Chair Quality Assurance Subgroup

Chair Stakeholder Subgroup

Chair Workforce Development Subgroup

Advisory

Advocacy provider

Carer organisation

Care Quality Commission

Director of Adult Services

Executive Member, Hampshire County Council

Health Watch

Service user representative

Voluntary Sector (Community Action Hampshire)

APPENDIX B

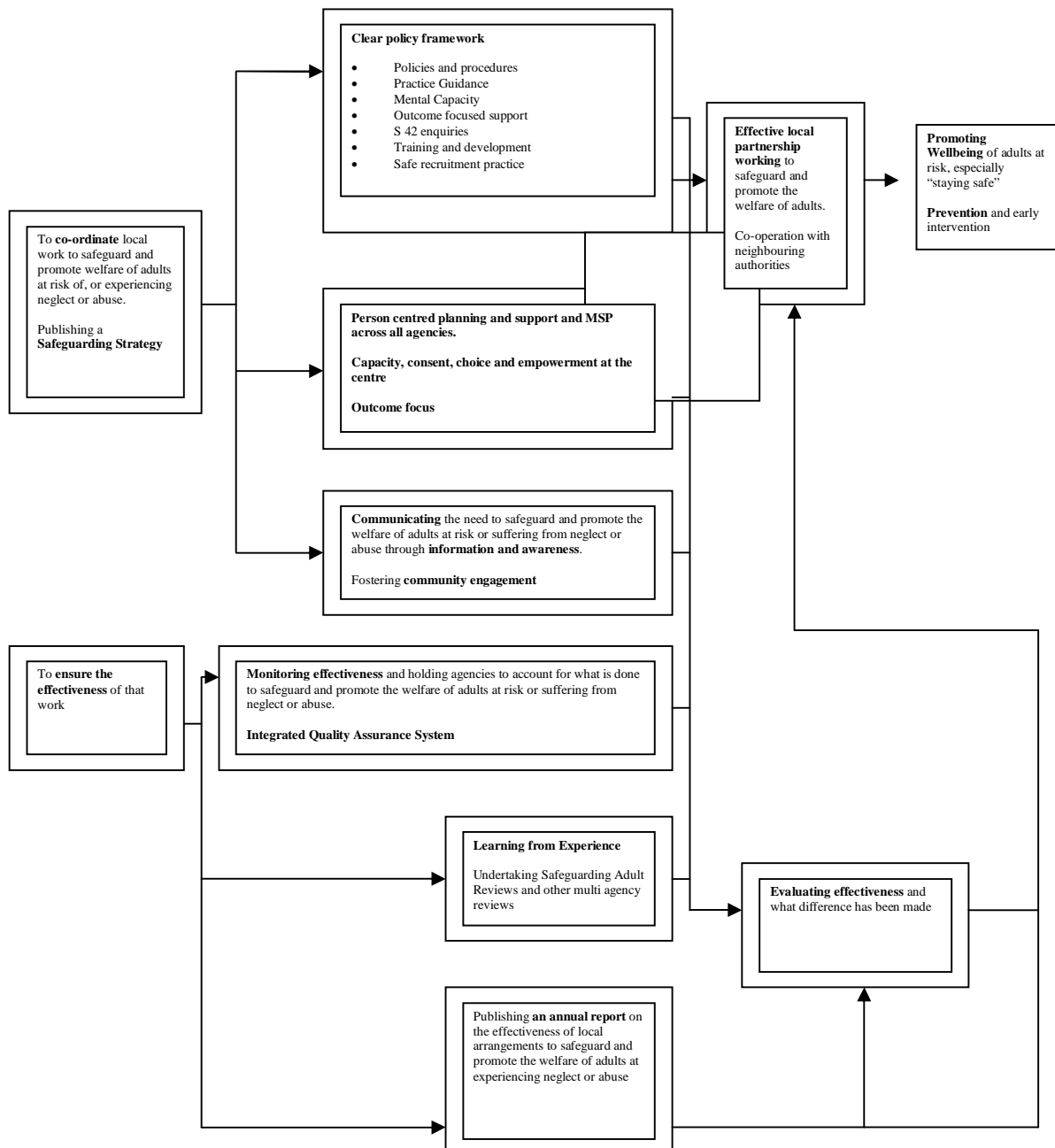
The Role of the Hampshire Safeguarding Adults Board

HSAB Objectives...

...pursued through HSAB functions...

...help produce outputs...

...that contribute to overall outcomes



NOLAN SEVEN PRINCIPLES OF PUBLIC LIFE

The Seven Principles of Public Life, known as the Nolan Principles, were defined by the Committee for Standards in Public Life . They are:

- **Selflessness** Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.
- **Integrity** Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.
- **Objectivity** In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.
- **Accountability** Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.
- **Openness** Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands it.
- **Honesty** Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.
- **Leadership** Holders of public office should promote and support these principles by leadership and example.

These principles apply to all aspects of public life. The Nolan Committee set them out for the benefit of all who serve the public in any way.

CALDICOTT PRINCIPLES

The Caldicott Report set out a number of general principles that health and social care organisations should use when reviewing its use of client information and these are set out below:

1. Justify the purpose(s)

Every proposed use or transfer of personally identifiable information within or from an organisation should be clearly defined and scrutinised, with continuing uses regularly reviewed by the appropriate guardian.

2. Do not use personally identifiable information unless it is absolutely necessary.

Personally identifiable information items should not be used unless there is no alternative.

3. Use the minimum personally identifiable information.

Where the use of personally identifiable information is considered to be essential, each individual item of information should be justified with the aim of reducing identifiability.

4. Access to personally identifiable information should be on a strict need to know basis.

Only those individuals who need access to personally identifiable information should have access to it.

5. Everyone should be aware of their responsibilities.

Action should be taken to ensure that those handling personally identifiable information are aware of their responsibilities and obligations to respect patient/client confidentiality.

6. Understand and comply with the law.

Every use of personally identifiable information must be lawful. Someone in each organisation should be responsible for ensuring that the organisation complies with legal requirements.

PRINCIPLES OF THE DATA PROTECTION ACT 1998

- Personal data shall be processed fairly and lawfully, and in particular, shall not be processed unless at least one of the conditions in *Schedule 2* is met, and in the case of sensitive personal data, at least one condition in *Schedule 3* is also met.
- Personal data shall be obtained only for one or more specified and lawful purposes and shall not be further processed in a manner incompatible with that purpose or those purposes.
- Personal data shall be adequate, relevant and not excessive in relation to the purpose or purposes for which they are processed.
- Personal data shall be accurate and, where necessary, kept up to date.
- Personal data processed for any purpose or purposes shall not be kept for longer than is necessary for that purpose or those purposes.
- Personal data shall be processed in accordance with the rights of data subjects under this Act.
- Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing of personal data and against accidental loss or destruction of, or damage to, personal data.
- Personal data shall not be transferred to a country or territory outside the European Economic Area unless that country or territory ensure an adequate level of protection of the rights and freedoms of data subject in relation to the processing of personal data.

APPENDIX F

CRIME AND DISORDER ACT 1998

Section 115 of the Crime and Disorder Act provides a legal basis for sharing information between CSP partner agencies where it is necessary for fulfilling the duties contained in the Act. The key conditions to consider under Section 115 are:

- 1) 'Relevant authorities' have the power (but not a legal duty) to share information if it is necessary for the purposes of any provision under the Crime and Disorder Act. This would include where it is necessary for the formulation and implementation of the local Crime and Disorder Reduction Strategy.
- 2) This power does not override other legal conditions governing information sharing. These principally relate to the Data Protection Act 1998, the Human Rights Act 1998 and the common law of confidentiality.
- 3) Personal information can be shared without the permission of the person to whom it relates. However, the legal conditions governing the sharing of personal information must be followed.

APPENDIX G

DISPUTE RESOLUTION PROTOCOL

This Protocol relates to disputes between Hampshire Safeguarding Adults Board Partners and/or with other Local Safeguarding Adults Boards

If two or more partner agencies of the HSAB are engaged in a disagreement that, if not resolved satisfactorily, could compromise the effectiveness of safeguarding arrangements in Hampshire, the Independent Chair and Director of Adult Services will convene a joint meeting with the parties involved. This should take place within 28 days of the determining that a dispute exists. In most cases the Independent Chair of the HSAB will chair these meetings. The agenda will be agreed jointly by the parties in dispute.

If no agreement can be reached, either party to the dispute may suggest to the Chair that an independent mediator be appointed in a further attempt to resolve the dispute. If parties are not in agreement with this and no resolution has been identified within 28 days then the Chair may refer the dispute to a Chartered Institute for Arbitrators to be resolved.

If there is a dispute between the Independent Chair and a HSAB partner or any other Local Safeguarding Adults Board a similar process will be followed. The Director of Adult Services will convene a joint meeting of the parties as above. If no agreement can be reached, either party to the dispute may suggest that an independent mediator be appointed in a further attempt to resolve the dispute. If parties are not in agreement with this and no resolution has been identified within 28 days then the Director of Adult Services may refer the dispute to a Chartered Institute for Arbitrators to be resolved.

SIGNATURES

I am signing to confirm that I am committed to the contents of this Memorandum of Agreement and will abide by them on behalf of my organisation.

Name

Signature

Organisation

Date