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SCRUTINY BOARD (ADULT SOCIAL CARE)

Meeting to be held in Civic Hall, Leeds on Monday, 19th July, 2010 at 10.00 a.m.

(A pre-meeting will take place for ALL Members of the Board at 9.30 a.m.)

MEMBERSHIP

Councillors

J Chapman	-	Weetwood;
B Cleasby	-	Horsforth;
P Davey	-	City and Hunslet;
A Gabriel	-	Beeston and Holbeck;
S Hamilton	-	Moortown;
T Hanley (Chair)	-	Bramley and Stanningley;
A Hussain	-	Gipton and Harehills;
V Kendall	-	Roundhay;
R Pryke	-	Burmantofts and Richmond Hill;
K Renshaw	-	Ardsley and Robin Hood;
D Schofield	-	Temple Newsam;
S Varley	-	Morley South;

CO-OPTEES

Ms Joy Fisher – Alliance Service Users and Carers Sally Morgan – Equality Issues

Please note: Certain or all items on this agenda may be recorded on tape

Agenda compiled by: Andy Booth Governance Services Civic Hall LEEDS LS1 1UR Tel: 24 74325 Principal Scrutiny Advisor: Sandra Newbould Tel: 24 74792

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AGENDA

ltem No	Ward/Equal Opportunities	ltem Not Open		Page No
1			APPEALS AGAINST REFUSAL OF INSPECTION OF DOCUMENTS	
			To consider any appeals in accordance with Procedure Rule 25* of the Access to Information Procedure Rules (in the event of an Appeal the press and public will be excluded.)	
			(* In accordance with Procedure Rule 25, notice of an appeal must be received in writing by the Chief Democratic Services Officer at least 24 hours before the meeting.)	
2			EXEMPT INFORMATION - POSSIBLE EXCLUSION OF THE PRESS AND PUBLIC	
			1 To highlight reports or appendices which officers have identified as containing exempt information, and where officers consider that the public interest in maintaining the exemption outweighs the public interest in disclosing the information, for the reasons outlined in the report.	
			2 To consider whether or not to accept the officers recommendation in respect of the above information.	
			3 If so, to formally pass the following resolution:-	
			RESOLVED – That the press and public be excluded from the meeting during consideration of the following parts of the agenda designated as containing exempt information on the grounds that it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the press and public were present there would be disclosure to them of exempt information, as follows:-	

ltem No	Ward/Equal Opportunities	ltem Not Open		Page No
3			LATE ITEMS	
			To identify items which have been admitted to the agenda by the Chair for consideration.	
			(The special circumstances shall be specified in the minutes.)	
4			DECLARATIONS OF INTEREST	
			To declare any personal / prejudicial interests for the purpose of Section 81 (3) of the Local Government Act 2000 and paragraphs 8 to 12 of the Members Code of Conduct.	
5			APOLOGIES FOR ABSENCE	
			To receive any apologies for absence.	
6			MINUTES - 23 JUNE 2010	1 - 4
			To confirm as a correct record the minutes of the meeting held on 23 June 2010	
7			LEEDS LINK ANNUAL REPORT	5 - 38
			To receive and consider the annual report for the Leeds Local Involvement network for health and social care	
8			ADULT SOCIAL CARE COMMISSIONING SERVICES AND NEIGHBOURHOOD NETWORK REVIEW UPDATE	39 - 44
			To receive and consider the report of the Deputy Director, Strategic Commissioning.	
			Neighbourhood Network Review report for this item to follow.	

ltem No	Ward/Equal Opportunities	ltem Not Open		Page No
9			PERFORMANCE REPORT YEAR END 2009/10 AND MAJOR ADAPTATIONS FOR DISABLED ADULTS QUARTER 4	45 - 66
			To receive and consider two reports, the first being the report of the Head of Policy and Performance which presents the key performance information against the Leeds Strategic Plan improvement priorities relevant to the Adult Social Care Scrutiny Board for the year end 2009/10. The second report is the report of the Chief Officer for Health and Environmental Action Services which presents quarter 4's performance information on the delivery of adaptation schemes to tenants and owner occupiers.	
10			INQUIRY INTO SUPPORTING WORKING AGE ADULTS WITH SEVERE AND ENDURING MENTAL HEALTH PROBLEMS	
			To receive and consider the report of the Head of Scrutiny and Member Development which recommends the Adult Social Care Scrutiny Board agrees its inquiry report on Supporting Working Age Adults with Severe and Enduring Mental Health Problems, or makes recommendation for change as appropriate.	
			Report to follow	
11			LEEDS SAFEGUARDING ADULTS PARTNERSHIP ANNUAL REPORT 2009/10	67 - 134
			To receive and consider the report of the Director of Adult Social Services which introduces members of the Scrutiny Board to the 2009/10 annual report and the work plan for 2010/11.	
12			CO-OPTED MEMBERS To receive and consider the report of the Head of Scrutiny and Member Development regarding the formal consideration for further appointments of Co-opted Members to the Board	135 - 138

ltem No	Ward/Equal Opportunities	ltem Not Open		Page No
13			SCRUTINY BOARD (ADULT SOCIAL CARE) - WORK PROGRAMME	139 - 172
			To receive and consider the report of the Head of Scrutiny and Member Development which outlines the Scrutiny Board's work programme for the 2010/11 Municipal Year	
14			DATE AND TIME OF NEXT MEETING	
			Wednesday, 22 September 2010 at 10.00 a.m. (pre-meeting for all Board Members at 9.30 a.m.)	

Agenda Item 6

SCRUTINY BOARD (ADULT SOCIAL CARE)

WEDNESDAY, 23RD JUNE, 2010

PRESENT: Councillor T Hanley in the Chair

Councillors J Chapman, B Cleasby, S Hamilton, A Hussain, G Hyde, V Kendall, R Pryke, D Schofield and S Varley

1 Declarations of Interest

The following declarations of interest were made in Agenda Items 9 and 10 Input to the Work Programme 2010/11 – Sources of Work and Establishing the Board's Priorities/Determining the Work Programme 2010/11. (Minute No. 6 refers):

- Councillor B Cleasby as a Member of the Horsforth Live at Home Scheme and as his wife was in receipt of a care allowance.
- Councillor J Chapman as she has a family member employed in a local care capacity.
- Councillor G Hyde as a Neighbourhood Network Member.
- Councillor R Pryke as a Neighbourhood Network Member.
- Councillor S Hamilton due to her employment with the NHS
- Councillor V Kendall due to her position with Community Action for Roundhay Elderly.
- Councillor Hanley as a director of Bramley Elderly Action

2 Apologies for Absence

Apologies for absence were submitted on behalf of Councillors A Gabriel and K Renshaw. Councillor G Hyde was in attendance as a substitute for Councillor Renshaw.

3 Minutes - 11 May 2010

RESOLVED – That the minutes of the meeting held on 11 May, 2010 be confirmed as a correct record.

4 Co-opted Members

The report of the Head of Scrutiny and Member Development sought the Scrutiny Board's formal consideration for the appointment of co-opted Members to the Board.

The Board were asked to consider the co-option of the following for the 2011/12:

- Joy Fisher Alliance of Service Users and Carers
- Sally Morgan Equality Issues

In addition to this, the Board discussed having a co-opted Member who represented the Leeds LINk.

RESOLVED -

- (a) That the following be co-opted to the Scrutiny Board (Adult Social Care) for the 2010/11 Municipal Year:
 - Joy Fisher, Alliance of Service Users and Carers
 - Sally Morgan, Equality Issues
- (b) That a further report be submitted to the next meeting to give further consideration to co-opting a Member from Leeds LINk

5 Changes to the Council's Constitution in relation to Scrutiny

The report of the Head of Scrutiny and Member Development referred to recent amendments to the Council's Constitution as agreed by Council, which directly related to and/or impacted on the work of Scrutiny Boards.

The following main issues were highlighted:

- The need to investigate 'value for money' in any scrutiny reviews
- The reduction to 6 Scrutiny Boards Scrutiny Board (City and Regional Partnerships) had ceased
- Substitute Members were now permitted for all Scrutiny Board meetings provided that the substitute was already a Scrutiny Board Member

Concern was expressed due to the cessation of the Scrutiny Board (City & Regional Partnerships) particularly as it was felt that there were cross boundary issues in relation to the provision of adult social care. It was reported that there was a regional network of Lead Members for Adult Social Services and networking also took place with other Local Authorities and the Centre for Public Scrutiny.

RESOLVED – That the report be noted.

6 Input to the Work Programme 2010/11 - Sources of Work and Establishing the Board's Priorities and Determining the Board's Work Programme 2010/11

The reports of the Head of Scrutiny and Member Development provided information and guidance to assist the Board in developing its Work Programme for 2010/11.

Members attention was brought to the following content detailed in the report:

Council Business Plan

Draft minutes to be approved at the meeting to be held on Monday, 19th July, 2010

- List of previous Scrutiny Inquiries relevant to the Adult Social Care Portfolio
- The Forward Plan of Key Decisions
- Suggested work areas.

The Chair welcomed the following to the meeting:

- Councillor Lucinda Yeadon, Executive Member for Adult Social Care
- Sandie Keene, Director of Adult Social Services
- Dennis Holmes, Deputy Director of Adult Social Services
- John Lennon, Chief Officer Access & Inclusion

Councillor Yeadon and Sandie Keene addressed the Board and highlighted some of the key issues/areas concerning the provision of Adult Social Care over the following year. These included the following:

- Budget constraints
- Residential care, domiciliary care and reablement services
- Provision of Day Services
- Work with health partners
- Neighbourhood Networks
- Learning Disability Services

In response to Members comments and questions, the following issues were discussed:

- Hospital discharges and the impact on residential care.
- End of life care
- Day centre provision and the impact of recent closures
- Integration issues with health service partners and joint commissioning
- Holt Park and PFI funding.
- Issues surrounding IT systems including compatibility and transfer of data with partner organisations
- Working Groups the Principal Scrutiny Adviser agreed to contact Members regarding availability for Working Groups and to arrange dates and times of meetings. The Board was also advised that member availability will directly influence the capacity to undertake inquires
- The possibility of joint working with the Scrutiny Board (Health) on various issues and the need to avoid duplicating areas of work.

RESOLVED – That the report and discussion be noted and the Work Programme be amended where appropriate.

7 Inquiry Report, Self Directed Support and Personal Budgets- Formal Response

The report of the Head of Scrutiny and Member Development referred to the Board's Inquiry into Self Directed Support and Personal Budgets. It was

reported that the Director of Adult Social Services response to the Executive Board had been approved and all this was detailed in appendices to the report. Members were asked to consider the responses provided and to decide whether further scrutiny was required

John Lennon gave the Board a brief overview of the Inquiry and Members were invited to make comments and questions. In brief summary, the following issues were discussed:

- The Board referred to recommendations which specified monitoring the position in relation to Self Directed Support and Personal Budgets on a quarterly basis.
- Individuals did not have to move to a personal budget, and those who did would be assessed for suitability.
- The relevant information on all Inquiry's as detailed in the previous Board's Annual Report would be distributed to all Board Members for information.

RESOLVED – That the report and discussion be noted

8 Date and Time of Next Meeting

Monday, 19 July at 10.00 a.m. (pre-meeting for all Board Members at 9.30 a.m.)

The meeting concluded at 11.25 a.m.



Agenda Item 7

Originator: Sandra Newbould Tel: 247 4792

Report of the Head of Scrutiny and Member Development

Scrutiny Board: Scrutiny Board (Adult Social Care)

Date: 19 July 2010

Subject: Leeds Local Involvement Network (LINk) – Annual Report (2009/10)

Specific Implications For:
Equality and Diversity
Community Cohesion
Narrowing the Gap

1.0 **Purpose of the report**

- 1.1 The purpose of this report is to provide the Scrutiny Board (Adult Social Care) with the 2009/10 Annual Report of Leeds Local Involvement Network (LINk). This will be the second annual report produced by Leeds LINk.
- 1.2 In presenting the LINk's Annual Report (2009/10), it is intended that this will:
 - Continue to raise awareness of the role and work of Leeds' LINk (both publicly and among members of the Scrutiny Board),
 - Provide members with more detail of what Leeds' LINk has done during its second year, alongside any future plans; and,
 - Provide an opportunity for a general discussion between the Scrutiny Board (Adult Social Care) and representative members of Leeds' LINk , including any work programme issues.

2.0 Background

- 2.1 The Local Government and Public Involvement in Health Act 2007 gave a duty to all 150 local authorities in England with social services responsibilities, to enable the formation of a Local Involvement Network (LINk).
- 2.2 The LINk acts as the successor to the Patient and Public Involvement Forums, but with an extended remit covering social care. Run by local people and groups, the role of a LINk is to promote involvement; to find out what people like and dislike about local services; monitor the care provided by services; and use LINk powers to hold services to account. In summary, this will be achieved by:
 - Asking local people what they think about local health and social care services, and providing a chance to suggest ideas to help improve services;

- Investigating specific issues of concern to the community;
- Using powers to hold providers and commissioners to account and get results;
- Asking for information and get an answer in a specified amount of time;
- Using authorised representatives to 'enter and view' premises to see if services are working well;
- Making reports and recommendations and receive a response;
- 2.3 Under the provisions of the Local Government and Public Involvement in Health Act 2007, the LINk also has the right to refer both health and social care matters to the relevant Scrutiny Board. In turn, this places responsibility on the appropriate Scrutiny Board to acknowledge any such referrals and keep the LINk informed about what actions, if any, will be taken

3.0 Leeds' Local Involvement Network (LINk)

3.1 Locally, in August 2008, the Shaw Trust was appointed as the host organisation to support the work of the Leeds' LINk. Since that time it has been working with the LINk to get a wide range of people and organisations involved. The LINk was formally launched on 9 June 2009.

Annual Report

- 3.2 LINks are accountable to the public and to the Secretary of State for Health. As such, every year all LINks are required to publish an annual report, which will also be sent to the Care Quality Commission, to relevant Overview and Scrutiny Committees (Scrutiny Boards), Primary Care Trusts (NHS Leeds) and the Strategic Health Authority (NHS Yorkshire and the Humber).
- 3.3 The Annual Report (2009/10) for the Leeds' LINk, covering the period 1 April 2009 to 31 March 2010, is attached at Appendix 1.
- 3.4 Representatives from Leeds' LINk have been invited to attend the meeting to both present the Annual Report and discuss any pertinent issues with the Scrutiny Board (Adult Social Care).

4.0 Recommendation

- 4.1 Members of the Scrutiny Board (Adult Social Care) are asked to consider Leeds' LINk's 2009/10 Annual Report and the discussion at the meeting, and:
 - Determine any matters that will inform the Board's future work programme;
 - Identify any issues that may impact/ influence the Board's longer term relationship with Leeds' LINk.

5.0 Background Papers

Local Government and Public Involvement in Health Act 2007



Leeds Local Involvement Network

your local involvement network for health and social care

Annual Report 2009 - 10

Contents

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Introduction from the Joint Chairs	1-2
How has the LINk changed services in 2009/10?	3
The work groups - how has the LINk identified areas of work?	4
Mental Health work group	5-6
Maternity Services work group	7
Seldom Heard work group	8
Equality and Diversity work group	9
How has the LINk worked with the statutory bodies?	10-13
Enter and View activities	14
The Leeds LINk sub groups	15-17
The Leeds LINk Launch Event	18
Raising the profile of the LINk in Leeds	19
LINk structure and membership	20
Facts and figures about the LINk membership	21
Representation from LINk members in Leeds	22
Training and development of LINk members	23
Future plans - LINk Week!	24
Leeds LINk Project Annual Expenditure	25
Summary of contact with the statutory bodies	26
Contact details for the LINk and the Host staff	2/
LINk Membership Form	28-29

Introduction from the Joint Chairs

Welcome to the second annual report of Leeds LINk. As anticipated it has been a busy year though perhaps most of all a year of consolidation. We now have a democratically elected Steering Group and Joint Chairs. Sub groups have been established to facilitate the underlying structure of the LINk and in particular ensure that it is accessible to all its members and the public.



Joint Chairs Arthur Giles and Joy Fisher

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Throughout the year the LINk has been working to develop partnerships with services providers, identifying issues and pressing for the ongoing improvement and development of services. City wide the LNL is represented on several key committees and boards, involved in commissioning and overseeing services for Leons of the ongoing in provides an

opportunity for the voice of the people of Leeds to be heard clearly and loudly. A number of work groups have been formed to investigate issues that have been identified as causing concern to the people of Leeds. In the main this work is the responsibility of LINk members who freely give of their time, skills and experience. We have a vibrant and active membership but to be truly representative of the City's population we must continue to grow. To this end the LINk decided to launch a 'Leeds LINk Week' in June 2010 to encourage as many people as possible to become members. There were a variety of activities around Leeds - in health centres, the Leeds City market and also at local community festivals. The LINk even advertised the week on Radio Aire and Magic 8 throughout June!



Steering Group meeting September 2009

We must take this opportunity to thank the Host staff for all their hard work and support they have provided members over the year. They are a committed team dedicated to ensuring members have the tools to do the job of improving services. We as chairs very much appreciate the hard work that our Steering Group members have put in over the last year. There have been many meetings, reams of reports and papers to read and comment on and almost without exception all have persevered with the task. Many members not involved in the Steering Group have made a valuable contribution to work groups and to other activities and events. We look forward to

this next year with renewed vigour, aware that we must continue to work toward further improvements of NHS and Adult Social Care services.

Joy Fisher and Arthur Giles Joint Chairs of the Leeds LINk



Training session and introductory meeting for the elected Steering Group September 2009

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2

At a Glance - Leeds LINk 2009/10

APRIL '09 - MAY '09

The LINk Interim period group plan the LINk Launch Event

JUNE '09

The Launch takes place in the centre of Leeds

JULY '09 - AUG '09

The LINk holds elections for the 20 members of the Steering Group followed by the election for the Chair

SEPTEMBER '09

The Steering Group and the Joint Chairs come into position for 2009/20

OCTOBER '09 - MARCH '10

The four work groups meet to look at specific area of work and identify areas for improvement to services

Page 10

How has the LINk changed services in 2009/10?

During 2009/10 the LINk has had representation on numerous patient boards and groups around Leeds. This has been integral for building relationships between the LINk and the statutory bodies it has been put in place to monitor. It has also informed the LINk of where there are existing issues and has allowed the LINk to offer its views and influence small but important changes to services. The following changes have been made this year as a result of input from the LINk whilst attending different patient groups:

Positive Change for Stroke Patients

During a meeting of the Stroke Strategy Group a LINk member asked a hospital consultant from the Leeds Teaching Hospitals NHS Trust if staff were using the newly refurbished tunnel between the over 65 Stoke Rehabilitation ward in the Becket Wing urough to the Bexley Wing to transfer patients for MRI scans. It was the consultant's response that they were still being transferred between the two wings via ambulance.

• The LINk member questioned the effect this might be having on the patients who were being taken outside unnocessarily. The consultant agreed that it was not an acceptable method of transfer.

Whils attending a meeting of the states Patient Experience Group at the Hospital Trust the LINk member ned the matter again and found that

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3

a member of staff agreed to look into it further. The LINk member was later informed by the Hospital Trust that porters had since been instructed to transfer patients through the tunnel between the two wings.

Improving conditions on the wards

- The two LINk representatives who attended the Leeds Teaching Hospitals NHS Trust Estates Patient Experience Group last year were also instrumental in the following changes:-
- Better signage in hospital wards with the distance to locations i.e. X-Ray.
- The provision of clear spaces in waiting areas for the specific use of people in wheelchairs.

In the upcoming year the LINk want to continue making important changes like these. If you have any experiences that you would like to share with the LINk get in touch! To view a full list of LINk representation for 2009/10 go to page 22.



A waiting area (picture provided by NHS Leeds)

The work groups - how has the Leeds LINk identified areas of work for 2009/10?

Alongside the work the LINk has been undertaking around Leeds through it's representation within different groups, the Steering Group decided to establish four of it's own work groups based on issues that had been brought forward by partner organisations within the voluntary sector and members of the public. The entire LINk membership was asked to be involved in the selection of these four groups, and invited to become involved in them and help to drive the work forward.



A LINk member gathering feedback from the public in Leeds



LINk members at the Equality and Diversigroup meeting

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4

After a consultation with the LINk membership these four work groups were chosen-

Mental Health Seldom Heard Equality and Diversity Maternity Services

The LINk continues to seek involvement in the work groups and would like to hear from you if you are interested in taking part or if you feel you have any contribution to make To find out more about each work group see the following pages.

Mental Health work group

Mental health affects people's quality of life, how we spend our time, our relationships and future plans. Not only is it important to individuals, it also affects the wider community. We are all affected by mental ill health in some way, whether because of our own experience or through someone we know. So it wasn't surprising that Leeds LINk members chose mental health as a priority for its work.



The Montal Health work group has been neeting since early 2010, and members include people who have used mental workers and others who want to see being services and support available in Learn The group has been chaired by a

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5

worker from Volition - the voluntary sector mental health network in Leeds. Pulling together an action plan has been a challenge for a number of reasons, including the vast scope of mental health services and organisations in the city, and trying to identify areas where the LINk can make a real difference. The group want to make sure that the action plan reflects the concerns of people who are currently using mental health services, or who are finding it difficult to get the support they need. So the action plan includes outreach work, to find out from groups of service users and carers what they think we should be doing, and to encourage them to get involved.

Members will also be supporting colleagues in health and social care who are discussing establishing a network of mental health service user groups. Still in the early planning stages, such a network would help service user groups to coordinate their campaigns and strengthen their voice. Many people have contacted the LINk with concerns about the support that is available for people who are experiencing a mental health crisis. The group are gathering information about people's experience of crisis services, what services are available, and investigating how services are accessed and publicised, with a view to improving information for the public in future.

Members have made really useful links with Leeds **Partnerships** NHS Foundation Trust (LPFT), who provide specialist Mental Health services (and learning disability services) in Leeds. The group is working with staff from LPFT's Partnerships and Social Inclusion Team to hold a mental health event during Leeds LINk week in June 2010. This will enable LINk members and other interested people to find out about the different services LPFT provides, to meet people who have used these services, and to discuss any areas for improvement. LPFT have also invited Leeds LINk to comment on their latest Quality Accounts report. For the future, the group will be looking out for the final report of the recent Scrutiny Enquiry into mental health services for working age adults, and the Mental Health Needs Assessment for Leeds, which LINk members contributed to. Both of these documents will include important conclusions and recommendations which will inform the future action plan of the Mental Health work group.

Gill Crawshaw Mental Health work group Lead

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Maternity Services work group

The Maternity Services work group was established after it was identified as an area of concern through initial consultations undertaken by the LINk.

A small group of members came together to decide on a strategy and formulate an action plan. It was agreed that the group needed to gather further evidence about current service provision, and look at any work currently being undertaken in this area.



and members would take this out to

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7

mums and tots groups and breastfeeding cafes in Leeds. The questionnaire will also be made available on the LINk website for people to complete. It was also felt that in order to reach particular groups such as gypsy and traveller women the questionnaires could be conducted over the telephone.

In order to get a clearer overview of service provision in Leeds the group invited the Commissioner for Maternity Services NHS Leeds and the Commissioning Manager for Maternity Services NHS Leeds to come and speak to the group. They gave an update about current service provision in Leeds and future plans for the service.

The group also agreed to work closely with an organisation called CHANGE who are in the process of conducting a research project looking at maternity service provision for women with learning difficulties in Leeds. Leeds LINk will work closely with CHANGE once the findings of the research have been published to take forward any areas of concern that are highlighted.

Betty Smithson Maternity Services work group Lead

Seldom Heard work group

It was hoped that forming a work group looking at issues within Seldom Heard communities would offer a voice for people who find it very difficult to get their views on health and social care services heard. The group very quickly realised that there were going to be considerable difficulties in gathering the information they needed. First there was knowing where and how to collect the evidence of issues so that it could be used to the benefit of those in need.

One of the issues that members of the group were aware of from LINk member organisations working with seldom heard groups was access to services, particularly the problems faced by people who don't speak English as a first language. The group decided to find out more about what was already being done to improve access within NHS Leeds and so met with the Patient and Public Involvement Manager, the Health Inequalities Manager and the acting Corporate Equality and Diversity Manager to ask some questions. The group wanted to know more about the use of Language Line and interpreters within Primary Care services. After some discussion the group felt that the problem might not be a lack of provision for people who don't speak English but that the issue might be a lack of knowledge regarding availability of translation services. The group hope to maintain an ongoing relationship with NHS Leeds in the upcoming year and potentially help to promote translation services within the communities in Leeds and also with staff fronting Primary Care services.

At the end of 2009 the LINk was approached by a group called Trans Yorkshire and asked to look at a service provided to transgender individuals across Yorkshire, which is based in Leeds. The group has been in discussions over how to take this issue forward. Through contact with Trans Yorkshire the work group became sensitive to the problems faced by trans individuals in accessing services when they often feel stigmatised This was also addressed with the NH Leeds team and discussions to take joint work approach to enriching the N Leeds 'Fairness scheme' (or Single Equality Policy) to include the view of trans people and the barriers the feel they face when accessing services are ongoing. The next step for the group will be to make contact with trans groups in Leeds and hopefully start to gather some feedback on services to take the work forward.

Beatrice Rogers Seldom Heard work group Lee

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Equality and Diversity work group

When this work group first met, a previous piece of work had already been undertaken by several members of the Interim Steering Group to address the issues involved in this area, from which a document was produced. The authors of this document were consulted and asked to highlight the parts that would be relevant to the work of the new group. From this it was agreed by the group to commission Equality and Diversity training for the entire LINk membership to partake in to ensure that the principles of equality and diversity were embedded into the LINk.

the group felt that the first important step would be to unify their understanding of diversity and since then have been receiving ongoing presentations from different organisations in Leeds on the 'Seven Strands of Diversity' - Disability, Age, under, Sexuality, Religion, Ethnicity and Ruce. This has helped to underpin members knowledge and understanding of the usen strands.

The workgroup has been approached by Londs University for involvement in a nonarchattidy on 'Research Mobilisation an Utilisation by Healthcare Managers' of the formation gathered on BME communities. Confirmation of funding for the project is pending but a member of the LINk work group has agreed to represent the views of the LINk through an advisory group to feed into the project.

The group have been designing a toolkit in recent months for the purpose of gathering evidence on access issues, to include questions on the availability of alternate methods of communication i.e. Braille, audio, interpreters etc. As of the next financial year the Equality & Diversity work group will be joining with the Seldom Heard work group as it has become increasingly apparent that there is an overlap in the two agenda's and this is felt to be the most effective way forward. The two action plans will be amalgamated and worked on as one document in the coming year.

Jackie Bolland Equality and Diversity work group Lead

How has the LINk worked with the statutory bodies in Leeds over the past year?

Developing a working protocol document

In late 2009 the LINk held a protocol meeting where key individuals from the health and social care statutory organisations attended to work together on a protocol document that would outline how all parties communicate and work alongside each other. The Yorkshire Ambulance Service later contributed its comments on the draft protocol in early 2010 and the final documents will be signed off between the LINk and NHS Leeds, Leeds Partnerships Foundation Trust and Adult Social Care in the near future.



Representatives from the different Statutory partners have continued to attend the LINk Steering Group meetings and maintain an ongoing relationship

Protocol in practice

As agreed in the draft protocols, all the statutory organisations have maintained an ongoing relationship of communication and information sharing with the LINk. The LINk has asked for information from the NHS Trusts and Adult Social Care over the past year both formally and informally. Further to this each LINk work group has liaised with staff from the different NHS Trusts in order to develop their action plans and work is in progress with Adult Social Care around the Personalisation Agenda and other key issues (see more about this in the work group section of the report). The Leed Partnerships NHS Foundation Trust, th Yorkshire Ambulance Service and the Leeds Teaching Hospitals NHS Trust also involved the LINk in their work in feeding into their Quality Accounte for 2010.

Leeds LINk believes that a vital part of improving NHS and Social Care services is through developing effective partnerships. The Leeds LINk has welcomed co-operation from both the NHS Trusts and Adult Social Care in the previous year and looks forward to developing these relationships further in the future

LEEDS LINk

10

Joint LINk Chairs Arthur Giles and Joy Fishe

Requests for information

Over the year the Leeds LINk has responded to issues brought forward by it's members and the public and requested information from the different Trusts on several occasions. The Trusts have responded with the information and helped the LINk to solve some of these issues.

Dermatology Ward at Leeds General Infirmary

In October 2009 a wider LINk member contacted the Steering Group regarding the possible closure of the Dermatology Ward. The Steering Group wrote to the eeds Teaching Hospitals NHS Trust to stablish some factual information. The ust responded outlining their plan to look at options for relocating the beds to a different ward and reassured the LINk there would be consultation around the options. The LINk closely monitored the developments around the ward for several months and a LINk member attended the patient panel at the LGI in order to feedback to the LINk on what was happening. In March 2010 the Trust nnounced that they would not be closing rine Ward I

0.4 numbers

Au raue doubthe LINk picked up on from the ublic at the launch event had been the high cost of making calls to GP surgeries using 084_ numbers. The LINk wrote to NHS Leeds explaining this and also the difficulty some people had reported navigating through the recorded system. The Trust responded promptly to the LINk outlining that only a small percentage of surgeries use the 084 numbers and that there is evidence that it sometimes works out cheaper for patients to use these compared to local numbers.

Continence Products

In November 2009 a LINk member was made aware of concerns within the community that people would soon have to pay for continence products. This concern was addressed to NHS Leeds who clarified for the LINk that products would still available free of charge but that patients first needed to be assessed by a District Nurse as needing them.

Eccleshill Treatment Centre

For the past couple of years there has been a great public interest in the Eccleshill treatment centre and several LINk members have been involved with planning the consultation around finding a new provider for the centre and also a LINk member has been present during the selection process of the new provider, in the capacity as an observer.

Middleton Eye Clinic

During a LINk information session at the St Georges One Stop centre in Middleton a member of the LINk staff was approached about the issue of transport for patients using the Eye Clinic. Patients

had been experiencing long waiting times for transport home after an appointment and often they were not notified or aware of what could be causing delays.



The LINk Steering Group decided to take this issue forward and wrote a letter to the Yorkshire Ambulance Service, explaining the complaints that the LINk had received and suggesting that the Trust make service users aware beforehand of anything that could affect the service so that they could at least make an informed decision. The Trust responded to the LINk to let them know that they had already begun work on a booklet for this purpose but that the LINk had highlighted some additional points and that they would now add some relevant contact details to the booklet.

Leeds Teaching Hospitals NHS Trust Hospital Food Focus Group

Leeds Voice made a request to work in partnership with the LINk to consider matters around hospital food. A meeting was held with the Leeds Teaching



Hospitals NHS Trust and it was agreed to form a hospital food focus group. The group will meet regularly with the Patient Environmental Department at the Trust,

visit hospitals, including carrying out blind tasting, collating views of patients, carers and other members of the public and offer feedback to the Trust. Information about the group was distributed to a LINk members and organisations on th LINk database asking for volunteers interested in joining the group. Articles were published in the Yorkshire Evening Post and information also appeared the Wharfedale Observer, Leeds Institute of Medical Education and the Leeds Voice e-bulletin. The LINk had a really good response and lots of volunteers came forward who were interested in hearing more about the group. Increstod volunteers will meet at a future date consider the scope of the project.

LEEDS LINk

Further relationship building

Health and Adult Social Care Overview and Scrutiny Panels

In June/July 2009 the LINk Co-Chairs met with both the Health and Social Care Scrutiny Boards to present the 2008/09 Annual Report. They also discussed possibilities for joint working and ongoing communication throughout the next year to ensure that there was no duplication between work.

There have been no direct referrals of work made to either Scrutiny panel in 2009/10. However the Health Scrutiny as had ongoing contact with the LINk and has provided updates on issues that it has been investigating, which in some ceses have been raised within the LINk as well, such as the issue around the Dematology Ward at LGI. The LINk Seldem Heard work group has also exemplified good practice by being aware of the work Calderdale scrutiny has been under ing regarding gender issues, which me some crossover with the LINks work wore action plan. This has been instrumental to ensure that no duplication of work has occurred. The LINk hope to continue in the relationship with both Adult Social Care scrutiny parts and mprove upon these in the control year

Equalities Assembly at Leeds City Council

The Equality Team at Leeds City Council has set up seven different Equality Hubs. In early 2010 the Disability Hub had identified four areas of work however the other Hubs were still in early stages of development. The LINk will monitor the work of the Hubs so that there is no duplication of work.

Healthy Leeds Partnership

The LINk has worked closely with the Healthy Leeds Partnership over the past year and LINk representatives sit on a variety of their partnership groups. Throughout 2009 the LINk also took part in a series of workshops that were looking at how to best develop health and wellbeing partnerships at a local level. These have now been set up and are attended by the LINk. In December 2009 LINk members took part in a Healthy Leeds workshop that was focused on the refresh of the Vision for Leeds (Sustainable Community Strategy). It brought together different partners to vision where it was that they saw Leeds by 2030. This helped the partnership to develop some recommendations, which have been presented to the Vision Project team and will help form the new Vision for Leeds. The LINk will play a vital role in further developing the Vision for Leeds when it goes out to consultation later this year.

Enter and View activities of the LINk

The LINk has the power to carry out Enter and View activities to Health and Social Care premises to look at the nature and quality of services. It can do this when it has been made aware of a complaint or issue against the premises or as part of the LINk work plan to gather further evidence, or as part of a survey or project.

In November 2009, nine Leeds LINk members underwent Enter and View Training. Following the training five of these members went on to be CRB checked to carry out Enter and View visits on behalf of the LINk:- Joy Fisher, Laurence Wood, Myra Drapkin, Betty Smithson & Bob Mason.

The LINk did not carry out any formal Enter and View activities over the course of 2009/10. Following guidance from the National Centre for Involvement, Shaw Trust interpreted both legislation and guidance on Enter & View as the following:-

It is our understanding and recommendation to the LINKs that Enter & View is completed under the following criteria as a last resort, allowing for evidence to be gathered and utilising other mechanisms.

- If complaints or major issues have been raised within the community
- By listening to patients/carers
- As part of a specific survey or project
- To follow up on a previous visit.
- To monitor a service that is closing, changing or under threat of closure
- Support effective consultation

Based on this the LINk carefully looked at several opportunities to see whether a visit would be appropriate as an evidence gathering exercise for the work plan. There are plans to make potential visits to sites in the future in response to issues highlighted by the public. In the upcoming months there will be another opportunity for LINk members to attend Enter and View training.

Currently the LINk Equality and Diversity work group are following up an issue raised about the access ramp at Temple Lawn Day Centre. A LINk member was invited to undertake a visit to investigate the ramp. Several users of the centre had raised issues with the design and said that it is difficult for wheelchair users to use. The LINk were also informed that it was discouraging further community activities from being held in the building. The LINk member upon viewing the ramp said:

I have taken measurements of the ramp and interviewed a local resident and other members at the centre about the access issues

The report generated from the visit will be sent to the relevant contact within the Local Authority. Once a response is received the LINk will decide what needs to be cone to make the centre accessible to the community.

LEEDS LINk

The Leeds LINk sub groups - how have they shaped the LINk in 2009/10?

A Real Provide Hereit

The Leeds LINk is made up of different sub groups. Each of these groups has had an important ongoing role to ensure that the underlying structure is working properly, addressing issues when they arise and changing and adapting different aspects to ensure that the LINk is accessible to the different needs of its members. Every LINk member is different! The sub groups have worked thanks to the specialist skills of the LINk members involved within them.



Nk marketing materials developed by the Marketing net Communications sub group



Recently printed Urdu, Bengali and Punjabi flyers

The **Governance** sub group has continued to develop the LINk documents such as the Code of Conduct, Equality and Diversity policy and Enter and View policy.

The Finance of the LINk is managed by a small group of members who meet monthly to review the expenditure of the LINk and make suggestions to the Steering Group of useful ways outilise the LINk budget.

The Marketing and Communications sub group came together for a number of reasons:

- **Advortising!** An ongoing purpose of the group has been to look at different ways of telling the public about the LINk and they have worked closely with local radio and papers to achieve this.
- Marketing Materials! The group has developed leaflets, flyers and posters. These are now wilable in different formats - easy read, alternate languages of the LINk flyer and udio. The group has also worked hard to develop the LINk quarterly newsletter.
 - Nkw//ek! The group took the lead in organising LINk Week!



The Care Quality Commission sub group is an important part of the LINks contribution to improving Health and Social Care as it can directly comment on the criteria used to assess the different Trusts. The following process has been agreed between the CQC and the Leeds LINk:

- Details of any services that are rated as poor by the CQC will be passed on to the LINk by email.
- The LINk will take responsibility for checking the CQC website every week to keep up to date with any key developments and issues that they are working on.
- The CQC lead will check the Leeds LINk website to keep up to date with what areas of work the LINk are looking at.
- The LINk will send the CQC lead any Enter and View reports where areas of concern have been raised.
- The findings of the Leeds LINk feedback forms will be shared with the CQC on a quarterly basis.
- The CQC will include the LINk in any surveys that it undertakes in the future, where appropriate.
- The CQC lead will continue to attend the LINk CQC sub group meetings on a quarterly basis to keep the group updated.

Further to these sub group's one LINk member has been responsible for building a relationship between the **PALS and Complaints** team within each Health Trust and Adult Social Care. By the end of March 2010 the following progress had been made:-

LEEDS TEACHING HOSPITALS NHS TRUST

A meeting has taken place with the acting PALS and Complaints lead at the Trust and the LINk has been informed that the Trust is collating the PALS calls it receives. The LINk looks forward to receiving the Trusts Complaints information for December 2009 once it has been checked by the Trusts information governance team and will then select a number of complaints to view in more detail.

The Trust is also in the process of collating the PALS and Complaints service into one system and the LINk welcomes feedback on this in the future.

LEEDS LINk

ADULT SOCIAL CARE

The LINk has received the 'Adult Social Care Customer Services Complaints and Compliments Annual Report' for the period of I April 2008 - 31 March 2009.

The LINk looks forward to working with Adult Social Care in the near future to discuss the frequency of reports.

LEEDS PARTNERSHIPS NHS FOUNDATION TRUST

A meeting took place to discuss the Trust's PALS and Complaints information service. When the meeting took place it was agreed that the Trust would supply the LINk with PALS and complaints information on a quarterly basis and in an agreed format (to be discussed). The LINk looks forward to receiving this information shortly.

YORKSHIRE AMBULANCE SERVICE

The LINk has received the PALS and Complaints information for December 2009 from Yorkshire Ambulance Service and looks forward to working with YAS in the near future to establish good information sharing pathways.

LEEDS LINK

17

NHS LEEDS

A meeting took place with the PALS and Complaints lead individuals for NHS Leeds. It was agreed that they would supply the PALS and Complaints information on a monthly basis and in the agreed format. The LINk has now received 3 PALS from reports NHS Leeds for December '09, January and February '10 and also looks forward to receiving the Complaints information. NHS Leeds has shown that they are committed to full co-operation with the LINk.

The Leeds LINk Launch Event!

One of the biggest jobs in 2009 was to officially tell the public in Leeds that the LINk was up and running. After months of hard work from staff and members, on the 9th June the LINk held a successful launch event in the centre of Leeds.



LINk staff and member of the Steering Group

It was a fun day with a variety of entertainment from Bollywood dancers, Dhol Players and a steel band. There were fun activities to attract families and children into the marquee such as Henna tattooing and face painting...and there was



Musicians who performed on the day

lots of yummy finger food as well! The Deputy Lord Mayor appeared as a special guest to officially launch the LINk. Over the course of the day 1,600+ members of the public visited the LINk marquee to enjoy the entertainment and to hear more about the LINk. Katie Baldwin (Health Reporter for the Yorkshire Evening Post) also came down to the event and interviewed the LINk Joint Chairs for an article in the paper.



LINk members cutting the celebration cake on the launch day!

22 new members joined the LINK at the launch event and even more left their feedback on what they felt that changes should be in Health and Social Car services in Leeds. The feedback collected over the course of the day we used help decide what work group, the Link would have and further details of these can be found earlier on in the repor-

LEEDS LINk

Raising the profile of the LINk in Leeds: Gathering views and raising awareness

The LINk members and staff have worked hard to continue promoting the LINk this year and maintaining the feedback from the public on health and social care services. The LINk has done this in several ways:-

LINK PRESENTATIONS The staff team and LINk members have been visiting different places to present to people about



the LINk and gather their views on services in conjunction with the work groups.

OFFEE MORNINGS The LINk decided



And the second

to schedule a coffee morning once a month for the next year to give existing members and anyone else interested in

the LINk the opportunity to come in and talk to staff and members.

LOC L AUTHORITY ON: TOP CENTRES The LINk staff carried out a number of information

out a number of information sessions at various One-Stop centres in Leeds.

LEEDS LINk

19

NHS LEEDS PUBLIC HEALTH BUS

LINk members used the two to scher views from the public in Nodey. They had plans to continue using the bus but unfortunately it was decommissioned in late '09.



FEEDBACK FORMS

This has been an effective way of gathering the views on services and has been distributed widely

around Leeds. The LINk has future plans to commission a researcher to analyse all of the feedback surveys received by the LINk to date. The LINk intends to use the results for developing it's work plan in the next year and ensuring that it is an up to date reflection of issues raised by the people in Leeds.

PATIENT OPINION WEBSITE This has been a useful forum for picking up on some of the complaints the public have



with NHS services. The LINk monitor the website on an ongoing basis.

INFORMATION STALLS The LINk has participated in numerous events and festivals over the year where it has used a stall as a means to distribute information



and engage with members of the public.

The LINk structure and membership

In March 2009 the entire LINk membership and the statutory partners in Leeds were invited to attend an event at the Civic Hall where they participated in different workshops and made key decisions to shape the future of the LINk. The participants in one of these workshops helped to decide what the Steering Group (the core decision making body of the LINk) would look like. It was later agreed that there would be 12 individual members and 8 voluntary sector members which would be broken down into specific seats. The following members were voted into place for 2009/10:

INDIVIDUAL SEATS

Joy Fisher (Co-Chair) Arthur Giles (Co-Chair) Ann Butler Bob Mason Beatrice Rogers Jonathan Butler Laurence Wood Rosemary Young Kenneth Ward Harvey Gothelf Irene Wyatt Myra Drapkin (resigned in March 2010) Betty Smithson (Co-opted member)

VOLUNTARY SECTOR REPRESENTATIVE SEATS

Aqila Choudrhy (People in Action) Learning Disabilities Representative

Emma Stewart (Alliance of Service Users and Carers) Physical Disabilities Representative

> Gill Crawshaw (Volition) Mental Health Representative

> Hafizur Hussain (Touchstone) BME Seat Representative

Jeannette Morris-Boam (Leeds Voice Younger People Representative)

Jackie Bolland (Age Concern) Older People Representative

Val Hewison (Carers Leeds) Carers Representative

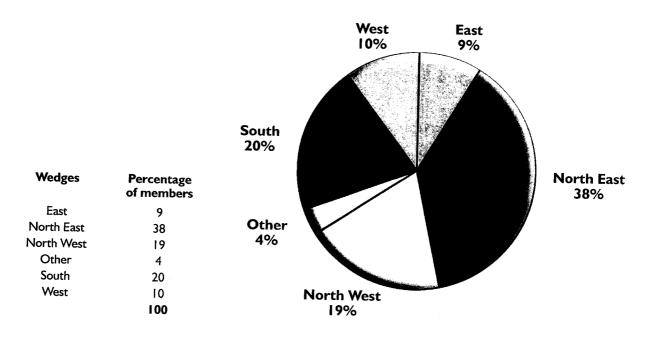
Refugee/Asylum Seeker Seat is still open.

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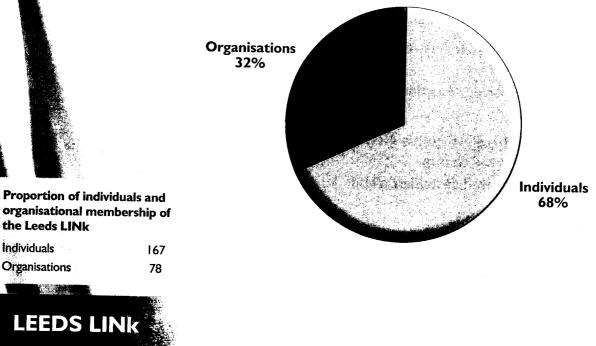
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Through this selection of different voluntary sector seats the LINk attempted to ensure that a diversity of knowledge and speciality areas were involved within the LINks decision making body, although they recognised that not every group could be covered within the Steering Group model but that this didn't at all reflect the issues the LINk could look at the Steering Group feel that the structure appears to be working well.

Percentage of Leeds LINk members in the Leeds Metropolitan District wedges



Membership representation of individuals and organisations of the Leeds LINk



Page 29

the Leeds LINk

Individuals

21

Organisations

Representation from LINk members in Leeds

The Leeds LINk has had representation on the following in 2009-10 from either the Joint Chairs or from a member of the Steering Group:

- Joint Strategic Commissioning Board Members involved: Beatrice Rogers and Laurence Wood (now retired)
- Electronic Prescription User Group Members involved: Beatrice Rogers and Bob Mason
- Health Scrutiny Board
 Member involved: Arthur Giles
- West Yorkshire Urgent Care Contract Board Member involved: Laurence Wood (now retired)
- Leeds Teaching Hospitals NHS Trust Board Member involved: Betty Smithson
- Leeds Partnerships NHS Foundation Trust Board Member involved: Betty Smithson
- Dermatology Patients Group
 Member involved: Kenneth Ward
- Leeds Teaching Hospitals NHS Trust Estates Panel Members involved: Beatrice Rogers and Bob Mason
- Leeds Teaching Hospitals NHS Trust Carers Charter Group Members involved: Bob Mason and Noreen Reid
- NHS Leeds Trust Board
 Members of the LINk Steering Group
 will share attendance

- Wharfedale Hospital Forum
 Member involved: Laurence Wood
- Leeds East North East Partnership
 Board

Member involved: Rosemary Young

- Leeds West North West Partnership Board
 Member involved: Laurence Wood (now retired)
- Patient Safety Committee Member involved: Laurence Wood (now retired)
- CQC and LINks Advisory Group Members involved: Arthur Giles and Laurence Wood (now retired)
- Yorkshire LINks Ambulance Group
 Member involved: Harvey Gothelf
- Promoting Health and Wellbeing Group, Healthy Leeds Partnership Member involved: Rosemary Young and Ken Ward

These representatives feed back to the test of the LINk members through reports that are made available on the LINk website. This is important as it gives other members the chance to learn what is happening around Leeds and it also allows the attending LINk representative to make recommendations or suggestions to further develop the LUNks own work.

LEEDS LINk

Training and development of the LINk members

One of the first questions people ask about why they should get involved in the LINk what is in it for them. LINk members can develop their own knowledge of health and social care services by getting involved in different events locally and nationally and also participate in different training opportunities. This past year the LINk Steering Group has tried to develop the knowledge and understanding of new members of the LINk through a Meet and Greet at the Four Seasons café in Leeds where everyone was invited to come and find out more about LINk work and meet teering Group members. The newly ected Steering Group also had an introductory session when it came into position. It has been a busy year with verious other events and training, some of the things that have taken place are:-

TRUNING COURSES:

- Enter and View Training
- Gyper and Traveller awareness training (provided by GATE)
- Equality and Diversity training (planned for 2010)

Membershave been encouraged to think hout weas that they feel they need other gaining in via communication through he LINk e-bulletin and the newsletter Some areas have been id offied and will be taken forward.

AWARENESS SESSIONS TAKEN PLACE:

- Independent Complaints and Advocacy Service (ICAS)
- Health Leeds Partnership
- Care Quality Commission

EVENTS, CONFERENCES AND CONSULTATIONS:

All LINk members have had the opportunity to attend the above as LINk representatives to feed back to the rest of the LINk. This year members have attended many different ones, locally and nationally.



LINk members attending local and national conferences



23 LEEDS LINK

Future plans for 2010/11 - LINk Week!

After months of planning, in June of this year the LINk carried out a week long engagement plan to promote the LINk to the people of Leeds and to gather feedback on health and social care services.

The LINk visited:

Chapeltown Health Centre

Leeds Central Library

St Georges Crypt

The Becklin Centre

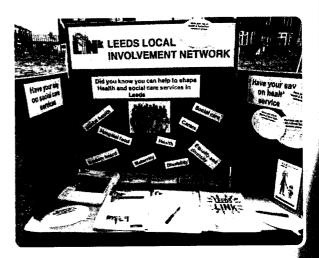
The Ministry of Food at Leeds City Market

Beeston Festival

Members distributed information packs, spoke to many individuals about their views and experiences on services and gathered lots of useful feedback. Radio Aire and Magic 8 broadcast a commercial promoting LINk Week to try and raise awareness of the event beforehand and encourage the public to come along and find out more.

The LINk has now commissioned a freelance researcher to analyse all the feedback forms that have been collected

over the past several months and will produce a report collating all themes, which will be used to develop work topics over the upcoming year.



The LINk will be planning further community engagement activities all over Leeds in order to continue gathering feedback from a diversity of groups and communities.

It will be involved in activities during Refugee Week in June and Kirkstall totival, Bramley Carnival and also a retunneo the Ministry of Food in Leeds Market during July!

The work groups will continue to develop the action plans and work owards improving services for the people of Lease through its recommendations

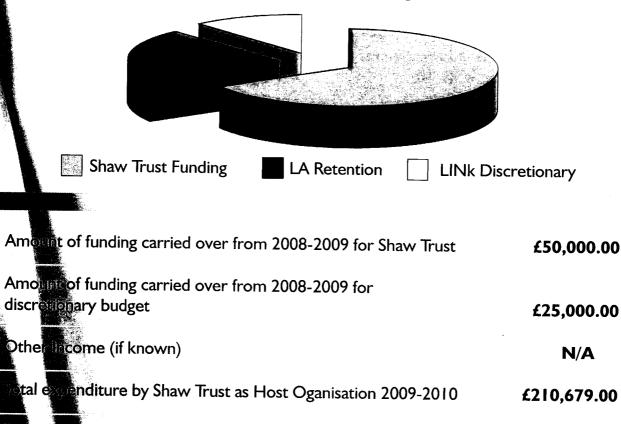
LEEDS LINk

24

Leeds LINk Project Annual Expenditure

Shaw Trust funding less LINK discretionary budget	£203,038.00
Amount of funding received by the LINK from Shaw Trust as the discretionary budget	£36,962.00
Amount of funding received by Shaw Trust as the Host from the Local Authority including discretionary budget	£240,000.00
Local Authority Finance retention 2009-2010	£67,000.00
Total Amount allocated to the Local Authority by the Department of Health 2009-2010	£307,000.00

Leeds LINK Funding



al expenditure by Leeds LINK 2009-2010

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£242,131.00

£31,452.00

Summary of contact with the statutory bodies

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26

Leeds Teaching Hospitals NHS Trust

Formal Requests for information made	
by the LINk during 2009-10	6
Responses in 20 working days	3
Responses past 20 working days	3

NHS Leeds

Formal Requests for information made	
by the LINk during 2009-10	6
Responses in 20 working days	6
Responses past 20 working days	0

Leeds Partnerships NHS Foundation Trust

Formal Requests for information made	
by the LINk during 2009-10	5
Responses in 20 working days	5
Responses past 20 working days	0

Yorkshire Ambulance Service

Formal Requests for information made	
by the LINk during 2009-10	5
Responses in 20 working days	2
Responses past 20 working days	3

Adult Social Care

Formal Requests for information made	
by the LINk during 2009-10	0
Responses in 20 working days	0
Responses past 20 working days	0

In addition to this the LINk has liaised with both the Health Trusts and Adult Social Care during 2009/2010

Contact details for the LINk

The Host staff that support the LINk are:-



EMILY WRAGG ~ Co-ordinator 07590 232025 or emily.wragg@shaw-trust.org.uk

SHARANJIT BOUGHAN ~ Community Development Officer (Part time) 07590 232026 or sharanjit.boughan@shaw-trust.org.uk

EMMA HANUSCH ~ Community Development Officer (Full time) 07590 232024 or emma.hanusch@shaw-trust.org.uk

> CLAIRE DEMPSTER ~ Administrator 0113 3885099 or leeds.link@shaw-trust.org.uk

You can contact the LINk and the staff at:

Office 27 . Evans Business Centre Burley Hill Trading Estate Burley Road . Leeds LS4 2PU

Tel: 0113 3885099 Email: leeds.link@shaw-trust.org.uk Website: www.leedslink.org.uk

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27

LINk Membership Form

Do you want to join the Leeds LINk?

If so please fill out the membership form and send it back to us!

There are different ways you can be involved; being a member doesn't mean attending lots of meetings or giving up lots of your time. Please tick \checkmark to show us how you would like to be involved in the LINk:

I want to receive the quarterly LINk newsletter	
I want to participate in questionnaires and consultations on a range of issues	
I want to know about events and training opportunities	
l want to be involved in the LINk workgroups looking at different issues (we will let you know what the current groups are)	
I want to receive the Steering Group minutes every month	
You can also volunteer your time with general things such as helping with mail-outs and distributing leaflets	
In what capacity will you be involved in the LINk?	
As an:- Individual Volunteer O Volunteer for Organisation Paid member of staff	7
Where did you hear about the LINk?	Ĩ
Health Centre/GP Hospital Day Centre	
Newsletter/Leaflet Support Worker/Carer Event	
Other	
(E.g. Did the LINk give a presentation at your Day Centre or community group?) To span the range of health and social care issues in the city, the Leeds LINk has Wood Gro place that cover different topics, each of which encompasses a very wide set of health con and social care issues. Whatever your interests are, we can find a way for you to be invo you are enthusiastic and want to make a difference, please get in touch with us.	dillors

28

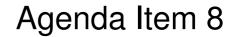
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	How would you like to receive information from us?
	Email 🗍 Hard copy 🗌
	What services are you interested in?
	Social Care Primary Health Care Hospital Services
	Mental Health Services Ambulance Services
	Name
	Organisation (if applicable)
	Address
	Post CodeTel No
	E-mail
	referred method of contact
	Please return this form to:
2 N	FREEPOST RSCX-URGB-LYGH
	Office 27, Evans Business Centre Buildy Hill Trading Estate
	Buriew Road
	eed S4 2PU
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Page 37

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Originator: Tim O'Shea

Tel:

2747258

Report of the Deputy Director, Strategic Commissioning

Scrutiny Board, Adult Social Care

Date: 19th July 2010

Subject: Adult Social Care Commissioning Services Update

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
Ward Members consulted (referred to in report)	Narrowing the Gap

Executive Summary

This report provides Members of the Scrutiny Board, Adult Social Care (ASC) with an update on progress made with the review of the Neighbourhood Network Schemes (NNS), and other current commissioning initiatives. It follows on from the report presented to the March 2010 meeting of the Scrutiny Board.

In relation the NNS review, Members will be aware that following the report to the March Board indicating an intention to award contracts via a delegated decision of the Director of Adult Social Services, a decision was subsequently taken to suspend the process. This decision was taken following representations from a number of NNS who had been advised that an award of contract was not to be recommended. In order to adequately enquire into the representations an independent review panel was established with terms of reference agreed with the organisations affected, their representatives and representatives of the different political groups in the City Council. The review was lead by Mr Bill Kilgallon and Mr Peter Howarth who, between them, have significant and longstanding expertise of third sector social care commissioning and procurement.

Their review concluded at the end of June 2010 and is to be reported to the Executive Board of the Council on the 21st July 2010. A copy of the Executive Board report will be circulated to Members prior to this meeting of the Board.

Other examples of commissioning activity underway at this time are summarised in this report, including services for people with sensory impairments and those with autistic spectrum conditions, as well as domiciliary and extra care housing provision.

1.0 Purpose of this Report

1.1 To provide Members of the ASC Scrutiny Board with a further report of the progress made and future plans for delivering the Neighbourhood Network Scheme (NNS) contract award process in the light of the outcome of the independent review. The report also describes the status of current commissioning activity.

2.0 Background Information

- 2.1 Members will be aware that following the report to the March Board indicating an intention to award contracts via a delegated decision of the Director of Adult Social Services, a decision was subsequently taken to suspend the process. This decision was taken following representations from a number of NNS who had been advised that an award of contract was not to be recommended. In order to adequately enquire into the representations an independent review panel was established with terms of reference agreed with the organisations affected, their representatives and representatives of the different political groups in the City Council. The review was lead by Mr Bill Kilgallon and Mr Peter Howarth who, between them, have significant and longstanding expertise of third sector social care commissioning and procurement.
- 2.2 The outcome of that review is contained in the Executive Board report.
- 2.3 Members have been previously appraised of a number of other commissioning initiatives underway at this time namely:
 - Framework Contracts for the provision of domiciliary care and support.
 - The award of contracts for hearing and visual impairment services
 - The award of care and support services for physically disabled people resident at Terry Yorath House
 - The award of a framework contract with Supporting People for the provision of care and housing related support to young adults with autistic spectrum conditions.
 - The arrangements for care and support services for South Leeds Extra Care Housing scheme due to commence January 2011.

3.0 The Neighbourhood Networks Services

3.1 Members are invited to consider the Executive Board report (circulated seperately) which deals with the outcome of the independent review of the NNS commissioning process and contract award proposals. Any comments or resolutions made at the this meeting will be made available to the Executive Board at their meeting.

4.0 Other Commissions

4.1 Framework Contracts for the Provision of Domiciliary Care and Support

Leeds City Council ASC and NHS Leeds are working together to jointly commission community domiciliary care. This is about the care and support people receive in their own homes which is purchased from Independent Sector providers, on their behalf, by Leeds City Council ASC and NHS Leeds. This will be achieved through a Framework Agreement. A framework Agreement is a general term for agreements with suppliers which set out the terms and conditions under which services are purchased throughout the term of the agreement. The Framework Agreement will give a much wider choice of domiciliary care providers which can be used by ASC to provide care and support for service users. The tender for the Framework Agreement was published on 16 July 2010. Tenders will be evaluated for both price and quality. Only domiciliary care providers who are rated Good or Excellent by the Care Quality Commission will be considered for the Framework Agreement. A maximum price is being set to ensure affordability. The Framework Agreement will run from 1 November 2010 to 31 October 2013, with the option for renewal for a further 2 years.

4.2 The Award of Contracts for Hearing and Visual Impairment Services

ASC is tendering to deliver a Leeds Deaf and Hard of Hearing Service. The existing contract comes to an end on 31 March 2011 and competitive bids need to be sought through open competition for the re-commissioned service. The new contract will be for three years, with a provision to extend for a further two 12 months. The purpose of this specification is to set out a framework for the provision of assessment, advocacy and support for the Deaf, Hard of Hearing and Deafblind adults. The tender went out on 23 June 2010 and the closing date is 21 July 2010. A maximum price has been set and the tenders will be evaluated for price (40%) and quality (60%). Leeds City Council is also to deliver a Leeds Severely Sight Impaired and Sight Impaired Service. The existing contract will come to an end on 31 March 2011 and competitive bids will be sought through open competition for the recommissioned service. The new contract will be for three years, with provision to extend by two 12 month extensions. The purpose of this specification is to set out a framework for the provision of assessment, advocacy and support for Severely Sight Impaired and Sight Impaired adults. This tender relates to a single service across Leeds which will offer support to specific groups of service users who have a range of issues related to their sight loss. They are:

- Services to adults who are registered as Severely Sight Impaired (SSI)
- Services to adults who are not registered SSI
- Services to adults who are registered Sight Impaired (SI)
- Services to adults who are not registered SI
- Services to adults who are Dual Sensory Impaired
- Services to young people who are in transition from Children's Services

The tender was advertised on 7 July 2010 and its deadline is 4 August 2010. A maximum price has been set and the tenders will be evaluated for price (40%) and quality (60%).

4.3 <u>The Award of Care and Support Services for Physically Disabled People Resident at</u> <u>Terry Yorath House (TYH)</u>

This is a 12 bed residential care home, of which 10 beds are available for long term residential care and 2 beds are allocated for respite users. Leeds City Council ASC is seeking to procure an integrated package of care and support from a provider, or providers, for residential and respite/short break provision for adults who are physically disabled. The tender went out on 26 May 2010 and its deadline was 30 June 2010. The deadline has been extended by six weeks to 11 August 2010. This is because ASC needs more time to respond to enquiries regarding a temporary lease and detailed information about the assets/equipment at TYH. Tenders will be evaluated for both price and quality (40% - 60%). A maximum price has been set to ensure affordability. The new contract will be for three years, with a provision to extend for a further two 12 months. The current contract expires on 31 March 2011 and the new contract will commence on 1 April 2011.

4.4 <u>The Award of a Framework Contract with Supporting People for the Provision of</u> <u>Care and Housing-related Support to Young Adults with Autistic Spectrum</u> <u>Conditions</u>

An Autism-specific supported living Framework Agreement has been jointly procured by ASC and Supporting People (SP). A Framework Agreement consists of a list of quality assured providers which is procured using a rigorous process, in accordance with European Union regulations and Contracts Procedure Rules. There is no guaranteed work attached to the framework, but those providers on the framework are invited to engage in a mini competition for specific pieces of work as these become available. Places on the framework have been awarded from 21 May 2010 to five quality assured providers. In future, Care Managers and people with personal budgets who need supported living services will be able to use the framework to select a good quality provider to meet their individual needs. The framework is currently being used to procure care and support services for people at Brandling Court, a 17 bed autism-specific service in Middleton. There has been concern about the quality of the service for some time and it was agreed to develop the framework and use this to re-tender the service at Brandling Court. Following a mini competition, supported by ASC, SP and Corporate Procurement, a new provider has been recommended and approved. The current contract ends on 14 August 2010.

4.4 <u>The Arrangements for Care and Support Services for South Leeds Extra Care</u> <u>Housing Scheme - due to commence January 2011</u>

The contract for care and support services to be provided at South Leeds Extra Care Housing Scheme is to be let to Methodist Homes for the Aged. The scheme is on schedule to open in January 2011, with the nomination rights for all 45 units held by Adult Social Services. This important development, in a deprived area of the city with little in the way of similar resources, will offer older people an alternative to residential care, and the opportunity to live independently for as long as possible.

5.0 Legal And Resource Implications

- 5.1 The additional funding required to ensure adequate cover of the NNS in all areas of the city has been factored into the budget setting process for the year 2010/11.
- 5.2 This joint commissioning exercise, conducted by partners within Leeds City Council and NHS Leeds, has established a valuable precedent for future joint commissioning endeavors. It serves to deliver more efficient use of commissioning capacity whilst meeting the common goals of the organisations concerned.
- 5.3 The re-commissioning of care and support services for young, physically disabled people and those with autistic spectrum conditions will serve to enhance the quality of life and life chances of these groups, giving greater choice, control and independence. The South Leeds Extra Care Scheme is set to deliver high quality, independent living options to vulnerable older people in a relatively deprived area of the city. Similarly, the new Framework Contracts for domiciliary care will offer greater choice and quality for service users at an affordable price, enabling people to live independently for longer.

6.0 Conclusions

- 6.1 In the past two years, the Commissioning Service has made good progress in developing efficient and effective systems for the specification and procurement of ASC services which accurately target need, are outcome focused, and deliver good value for money. The review and re-commissioning of the NNS is a prime example of this new approach to commissioning, which has drawn regional and national attention.
- 6.2 In order to continue to improve and develop ASC commissioning in Leeds, staff are embarked on a range of professional development initiatives, in conjunction with NHS Leeds, which will serve to better equip them to successfully meet the challenges which lie ahead.

7.0 Recommendations

7.1 Members of the ASC Scrutiny Board are asked to consider and note the information contained in this report.

Background Documents referred to in this report

- 1. NNS Delegated Decision Panel Report February 2010
- 2. NNS Executive Board Report July 2010

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Agenda Item 9 Originator: Heather Pinches

Tel: 22 43347

Report of the Head of Policy and Performance

Meeting: Adult Social Care Scrutiny Board

Date: 19th July 2010

Subject: Performance Report Year End 2009/10

Electoral Wards Affected:	Specific Implications For:	
	Equality and Diversity	
	Community Cohesion	
	Narrowing the Gap	

1 Executive Summary

1.1 This report presents the Quarter 4 performance summarising our progress against the Leeds Strategic Plan improvement priorities relevant to the Adult Social Care Scrutiny Board for 2009/10 at the end of the 2nd year of delivery of this plan. Action trackers are produced for all improvement priorities and these are provided to Scrutiny Boards by exception only ie all trackers with an overall progress rating of red regardless of the direction of travel arrow are provided along with amber trackers with a static or deteriorating direction of travel. However, Members will note that for the improvement priorities relevant to the Adult Social Care Scrutiny Board 100% (4 out of 4) of **improvement priorities** are assessed as green and on track. Therefore, no action trackers have been provided with this report, but, a complete set of trackers are published on the intranet for information. A full performance indicator report has been provided with this report.

2 Purpose of the Report

2.1 The purpose of this report is to present an overview of performance against the priority outcomes relevant to the Adult Social Care Scrutiny Board including an analysis of performance indicator results at the end of 2009/10 so that the Board may understand and challenge current performance.

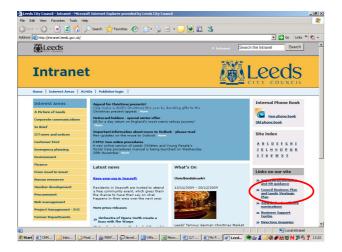
3 Background Information

- 3.1 A number of appendices of information are provided with this report and these are summarised below:
 - Appendix 1 summary sheet showing the overall progress rating against the <u>improvement</u> <u>priorities</u> relevant to the Adult Social Care Scrutiny Board.
 - **Appendix 2** Performance Indicator report containing year end results for all performance indicators from the National Indicator set and any key local indicator which are relevant.

This information is supported by a guidance document to aid the reader in interpreting the action trackers.

4 Main Issues

- 4.1 As part of the performance management process each strategic improvement priority is given a overall traffic light rating which denotes the progress based on all the information provided in the Action Tracker including progress against targets for all aligned performance indicators, progress in the delivery of key actions/activities and taking into account all relevant challenges and risks. This traffic light rating is assigned by the Accountable Officer and agreed with the Accountable Director. This is supplemented by a direction of travel arrow that indicates whether progress is improving, static or deteriorating.
- 4.2 These action trackers are provided to Scrutiny Boards by exception only in order to focus attention on those areas where the overall progress is not currently on track. However, <u>all</u> action trackers for the year end are published on the intranet so that all the green action trackers are also available for information. These can be found on the intranet by following the link to the Council Business Plan / Leeds Strategic Plan from the front page.



4.3 The action trackers provide a high level summary of performance against each of our strategic improvement priority areas and as such include relevant aligned performance indicator results. However, a full performance indicator report is provided in appendix 2 and a high level analysis of the Adult Social Care key performance indicators is provided below.

Analysis of Overall Performance in 2009/10

Improvement Priorities

4.4 There are 4 improvement priorities from the Leeds Strategic Plan which are relevant to the Adult Social Care Board. Of these improvement priorities all 4 are assessed as green and this indicates consistent good performance during 2009/10 and an improvement on the position at the end of 2008/09.

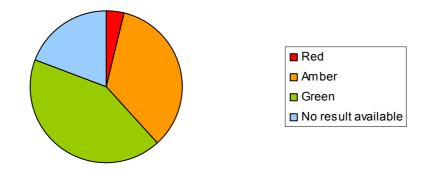
Improvement Priorities	Q4 2008/9	Q2 2009/10	Q4 2009/10
Red	0	0	0
Amber	1	0	0
Green	3	4	4

Performance Indicators

4.5 The overall breakdown of all the indicators relevant to Adult Social Care Scrutiny Board is shown in the chart below with 42% meeting their year end target – this includes all Leeds Strategic Plan indicators, National Indicators and local key indicators. At the year end we have a more complete set of performance indicators including those that are only available annually, however, members will note that there are still a number of indicators where no result is available. The majority of these are due to be provided by central government through the data hub.

Performance Indicators	Number	%
Red	1	4
Amber	9	35
Green	11	42
No result available	5	19

Overall Performance of Adult Social Care Pls



4.6 It is not possible to accurately compare this position with that from Q4 last year as a significant proportion of PIs were new and 2008/09 was the baseline year so traffic lights could not be allocated.

Data Quality

4.7 In previous quarters Members have received an update on the on-going work to develop a more robust, consistent and over-arching approach to data quality for our key performance indicators – which will give a wider based data quality judgement. The implementation of the new data quality checklists across all national and local indicators has resulted in a number of anomalies - despite a successful pilot exercise - and more work is required to ensure that this revised approach is fit for purpose and that the scoring criteria are effective across a broad range of measures. Therefore, the new scoring mechanism will not now be adopted until Q1 2010/11 and Members should note that in these Q4 reports the previous system has continued to be used to provide the data quality traffic light.

4 Implications for Council Policy and Governance

4.1 The Leeds Strategic Plan and Council Business Plan is part of the council's Budget and Policy Framework. Effective performance management enables senior officers and Elected Members to be assured that the council is making adequate progress and provides a mechanism for them to challenge performance where appropriate.

5 Legal and Resource Implications

5.1 The Leeds Strategic Plan fulfils the Council's statutory requirement to prepare a Local Area Agreement for its area and these government agreed targets are subject to performance reward grant.

6 Conclusions

6.1 This report provides the Board with a high level overview of the city's performance against the key priorities relevant to the Board from the Leeds Strategic Plan as at the end of 2009/10 ie the end of the 2nd year of delivery. This report highlights those areas where progress is not on track and Members need to satisfy themselves that these areas are being addressed appropriately and where necessary involving partners in any improvement activity.

7 Recommendation

7.1 Members are asked to consider the overall performance against the strategic priorities and where appropriate, recommend action to address the specific performance concerns raised.

	Health and Well Being		
Code	Improvement Priority		Accountable Director
HW-1e	Improve the assessment and care management of children, families and vulnerable adults	•	Sandie Keene / Eleanor Brazil
HW-2a	Increase the number of vulnerable people helped to live at home		Sandie Keene
HW-2b	Increase the proportion of people in receipt of community services enjoying choice and control over their daily lives	•	Sandie Keene
HW-3a	Improve safeguarding arrangements for vulnerable children and adults through better information, recognition and response to risk		Sandie Keene / Eleanor Brazil

Key	
	Significant delays or issues to address
	Minor delays or issues to address
	Progressing as expected – on schedule to complete actions & targets

Page 50

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	РІ Туре	Ref	Title	Service	Frequency & Measure	Rise or Fall	Baseline	Last Year Result	Target	Full Year Result	Direction of Travel	Data Quality
1	Leeds Strategic Plan - Government Agreed		Social Care clients receiving self directed support per 100,000 population aged 18+	Access & Inclusion	Quarterly %	Rise	97.7 per 100,000 population aged 18+	165 per 100,000 population aged 18+	15.0%	17.1%	N/A	No Concerns with data
			09/10 2953 people service users and 3 hose authorities whose data was avail							e target set. Recer	nt benchmarkin	g information
2	Leeds Strategic Plan - Government	NI 132	Timeliness of social care assessments (all adults)	Access & Inclusion	Quarterly %	Rise	76.0%	84.0%	88.0%	91.0%		No Concerns with data
	Agreed		of 88% has been exceeded with a yea d upon available benchmarking data th								tal of 7693 ass	essed over the
3	Leeds Strategic Plan - Partnership Agreed	NI 133	Acceptable (DH) waiting times for care packages	Social Services for Older People	Quarterly %	Rise	85.0%	85.3%	92.0%	86.9%	1	Some Concerns with data
		all services	s show an improvement on last years p s in their care plan within 28 days out c king data suggests that Leeds will be ir	of a total of 3942 who	received a se	rvice. Th	is figure doe	s fall short of				
₄ Page	Leeds Strategic Plan - Partnership Agreed	NI 136	People supported to live independently through social care (all adults)	Access & Inclusion	Number	Rise	70.4	3,904	3,900	3,450	₽	Some Concerns with data
e 51		9,438 peop	tor is reported annually. At 31/3/10 Leo ble through grant funded services. Asso or at the time of writing, Leeds perform	essed service users I	have reduced	primarilly	due to data					
5	Leeds Strategic Plan - Partnership Agreed	LSP- HW2B(II)	Estimated number of staff employed in the independent sector registered care services in Leeds that have received some training on protection of vulnerable adults that is either funded or commissioned by Leeds Adult Social Care	Social Care Commissioining	Annually %	Rise	91%	98%	99%	96%	₽	No Concerns with data
		staff traine	tion of staff reported by the independe d in the independent sector when takir ntegral part of contract management.									
6	National Indicator	NI 125	Achieving independence for older people through rehabilitation/intermediate care	Access & Inclusion	Quarterly %	Rise	91.9%	91.9%	90.0%	78.8%	₽	No Concerns with data
		dataset an	new indicator last year and results we d therefore provides a more representa- me three months later.									

	РІ Туре	Ref	Title	Service	Frequency & Measure	Rise or Fall	Baseline	Last Year Result	Target	Full Year Result	Direction of Travel	Data Quality
7	National Indicator	NI 135	Carers receiving needs assessment or review and a specific carers service		Quarterly %	Rise	13.9%	22.3%	25.8%	24.2%	1	No Concerns with data
		during the	9/10 carers specific services and infor year. Althought this does not quite measuggests that Leeds 2009/10 figures v	et the target (25.8%)	it is an improv	ement o	n last years	performance (
8	National Indicator	NI 145	Adults with learning disabilities in settled accommodation	Learning & Disabilities	Quarterly %	Rise	18.2%	17.9%	65.0%	58.7%	1	Some Concerns with Data
		been cons	a new National Indicator introduced last iderable improvements made in captur commodation. This indicator, however,	ing the relevant infor	mation this ye	ar. İinforr	nation was o	captured for 1	092 people	, of whom 949 (87°		
9	National Indicator	NI 146	Adults with learning disabilities in employment	Learning & Disabilities	Quarterly %	Rise	2.4%	2.4%	5.0%	5.4%		No Concerns with data
Page		been cons	This was a new National Indicator introduced last year and capturing the information represented a considerable challenge. This was reflected in last years figures. There have been considerable improvements made in capturing the relevant information this year and performance has exceeded the target set. The figures correspond to 88 people who are known to Adult Social Care services being supported in paid employment.									
ge 52	National Indicator	NI 124	People with a long term condition supported to be independent and in control of their condition	Datahub	Annually %	Rise	Not Set	68%	Not Set	Not Available - See comments	N/A	No Concerns with data
		LCC do not have access to data/results for this NI as it is reported by external organisations and reported directly to government departments and published via the Datahub. Results are expected to available by the end of July 2010.										
11	National Indicator	NI 129	End of life care - access to appropriate care enabling people to be able to chose to die at home	Datahub	Annually %	Rise	Not Set	Not Available - See	Not Set	Not Available - See comments	N/A	No Concerns with data
			Council do not have access to data/re Results are expected to available by the			external	organisatior	ns and reporte	d directly to	o government depa	artments and p	ublished via the
12	National Indicator	NI 131	Delayed transfers of care	PCT	Quarterly Number	Rise	5.24 per 100,000 population aged 18+	-		4.44 per 100,000 population aged 18+	₽	No Concerns with data
		health auth	s represent an average of 27.4 delayed nority) were around 11 per week - com to be amongst the best performing cou	pared to 16 for those	for which the							

	РІ Туре	Ref	Title	Service	Frequency & Measure	Fall	Baseline	Last Year Result	Target	Full Year Result	Direction of Travel	Data Quality
13	National Indicator	NI 134	Number of emergency bed days per head of weighted population	Datahub	Annually Number	Fall	Not Set	Not Available - See comments	Not Set	Not Available - See comments	N/A	No Concerns with data
			t have access to data/results for this N e expected to available by the end of N		external orgar	isations	and reported	d directly to go	overnment o	epartments and p	ublished via the	e Datahub.
14	National Indicator	NI 149	Adults in contact with secondary mental health services in settled accommodation	Datahub	Annually %	Rise	Not Set	35.2%	Not Set	Not Available - See comments	N/A	No Concerns with data
			t have access to data/results for this N e expected to available by the end of J		external orgar	nisations	and reported	d directly to go	overnment o	epartments and p	ublished via the	Datahub.
15	National Indicator	NI 150	Adults in contact with secondary mental health services in employment	Datahub	Annually %	Rise	Not Set	5.1%	Not Set	Not Available - See comments	N/A	No Concerns with data
		Leeds City Council do not have access to data/results for this NI as it is reported by external organisations and reported directly to government departments and published via the Datahub. Results are expected to available by the end of June 2010.										
	Leeds Strategic Plan - Partnership Agreed	NI 8	Adult Participation in sport and active recreation	Sport and Active Recreation	Annually %	Rise	20.6%	28.4%	22.6%	26.25%	₽	No Concerns with data
Page 53		survey wa	above was gathered by Ipsos MORI w s undertaken from October 2005 - Octo ent over the 2005/06 baseline and repre	ber 2006 and this co	llected 1,000	surveys f	rom most lo	cal authorities	s across Eng	gland. The latest fi		
17	Leeds Strategic Plan - Government Agreed	NI 141	Percentage of vulnerable people achieving independent living	Strategic Housing and Commissioning	Quarterly %	Rise	59.77%	76.39%	71%	83.95%	1	No Concerns with data
	0		ure (81.5%) indicates the continued po th poorly performing services to drive u		assisting vulr	nerable p	eople to ach	lieve indepen	dent living.	Throughout 2009/	10 Contracts Of	fficers have
18	National Indicator	NI 142		Strategic Housing and Commissioning	Quarterly %	Rise	99%	98.78%	99%	97.86%	₽	No Concerns with data
		quarterly reservices h	vulnerable people were supported to n eturns for 2009/10 has shown a slight o ave been incorporated into the NI 142 p Then 2010/11 target will be amended to	lecrease in performa performance. These a	nce from 98.7 are large volui	8% in 20 me servio	08/09 to 97.8 es with a va	86% in 2009/ ried client gro	10. During	the past year a wid	der range of ad	ditional
19	Local Indicator	LKI-SS23	Percentage of people receiving a statement of their needs and how they will be met	Access & Inclusion	Quarterly %	Rise	93.0%	99.3%	99.0%	99.3%		No Concerns with data
			ccassions where it was appropriate to p level of high performance in ensuring t								his measure sh	nows a

	РІ Туре	Ref	Title	Service	Frequency & Measure	Rise or Fall	Baseline	Last Year Result	Target	Full Year Result	Direction of Travel	Data Quality
20	Local Indicator	LKI-SS35	Adult and older clients receiving a review as a percentage of those receiving a service.	Access & Inclusion	Quarterly %	Rise	62.8%	69.6%	80.0%	83.4%		Some Concerns with Data
		During the	year, out of 17,618 service users who	received a reviewabl	e service, 14,	688 recei	ved a revie	W.	1		•	
21	Local Indicator	CP-OP51	Reduce the number of older people who are admitted to residential and/or nursing care per 10,000 population aged 65 or over	Social Care Commissioning/Acc ess & Inclusion	Annually Number	Fall	69.4	83	65	75.8	€	No Concerns with data
		During the the previou	year there were 838 permanent admis us year.	ssions of elderly peop	le to residenti	al or nurs	ing care (7	5.8 per 10,00	0 population	n), compared to 912	2 admissions ta	aking place in
22	Local Indicator	COM 4	Assessed and reviewed clients who feel safe in their own home during the day	Commissioning	Quarterly %	Rise	95.0%	95.0%	96.0%	93.0%	₽	No Concerns with data
			e based upon the results of surveys ur nost recent survey undertaken were pa					equate to a d	rop in the p	roportion who feel	safe, however,	the results
	Local Indicator	COM 5	Assessed and reviewed clients who feel safe in their home during the night	Commissioning	Quarterly %	Rise	92.5%	92.5%	96.0%	91.3%	₽	No Concerns with data
Page			e based upon the results of surveys ur nost recent survey undertaken were pa					equate to a d	rop in the p	roportion who feel	safe, however,	the results
54	Local Indicator	COM 6A	The ratio of total safeguarding referrals to total cases completed	Access & Inclusion	Quarterly Ratio	Fall	0.99	0.99	1.00	0.96		No Concerns with data
			of safeguarding referrals to total cases e system. At any given time a number									
25	Local Indicator	COM 6B	The number of safeguarding cases completed	Access and inclusion	Quarterly Number	Rise	1,310	1,310	1,500	1,964		No Concerns with data
		The numb	er of safeguarding referrals and cases	dealt with continue to	increase follo	wing the	strengthen	ing of arrange	ements and	raising of awarene	ss across the o	city.
26	Local Indicator	COM 8	The percentage of safeguarding investigations which have led to a SAEC Enquiry	Access and Inclusion	Quarterly %	Fall	43.0%	43.0%	60.0%	39.3%	1	No Concerns with data
		referrals. I	rtion of safeguarding cases leading to t is accepted that a large number of re- licator should be reviewed for next yea	ferrals can be resolve	d at an early s	tage and	a few more	e complex ca	ses will lead	to a SAEC enquiry		

Action Tracker Guidance

Introduction

The 'Action Trackers' are prepared on a half yearly basis and are intended to give an organisational 'snapshot' view of the progress against the city's top level priorities as set out in the Leeds Strategic Plan and Council Business Plan. They provide a broader range of information and progress than is provided in the performance indicator results alone. Each improvement priority within the Leeds Strategic Plan and Council Business Plan has been allocated to an **Accountable Officer** whose role is to provide leadership, co-ordinate the activities of contributing officers/partners and evaluate the performance information to ensure the delivery of the improvement priority. An action tracker has been completed for every improvement priority by the Accountable Officer who has provided an overall evaluation of progress to date and an assessment of the direction of travel. Please see below a brief summary of the information that has been provided in each of the sections of the action tracker template.

Overall Progress Traffic Light and Direction of Travel Ratings Explained

1	Progressing as expected – on schedule to complete key actions and meet the targets for key performance indicators.	1	Minor delays/issues are having an impact on delivery but remedial action is underway/planned and the key performance indicators results are likely to be on, or close to, target.	1	Significant delays or issues to address and unlikely to meet targets for key performance indicators. Overall the direction of
	Overall the direction of travel is improving.		Overall the direction of travel is improving.		travel is improving.
⇔	Progressing as expected – on schedule to complete key actions and meet the targets for key performance indicators.	↔	Minor delays/issues are having an impact on delivery but remedial action is underway/planned and the key performance indicators results are likely to be on, or close to, target.		Significant delays or issues to address and unlikely to meet targets for key performance indicators. Overall the direction of
	Overall the direction of travel is static.		Overall the direction of travel is static.		travel is static.
T	Progressing as expected – on schedule to complete key actions and meet the targets for key performance indicators. Overall the	Ţ	Minor delays/issues are having an impact on delivery but remedial action is underway/planned and the key performance indicators results are likely to be on, or close to, target. Overall the performance is	Ţ	Significant delays or issues to address and unlikely to meet targets for key performance indicators. Overall the performance is
	performance is deteriorating.		deteriorating.		deteriorating.

Why is this a Priority?	This section provides a brief comment on why this improvement area is a priority. For example it may be to address poor performance particularly in comparison to other similar cities, be a Government priority or it may address a specific local need / inequality etc.
Graphs	This section presents one or two of the aligned performance indicators as a graph. The graph will include information such as past and present performance and future targets
Overall Summary	This section provides an overall summary analysis of the progress to date - taking a view based on all the information provided in the action tracker including the results for the aligned performance indicators. This section should provide a clear explanation for the overall traffic light and direction of travel ratings.
Achievements since the last report	This section provides details of the key achievements/outcomes delivered in the last 6 months. For many improvement priorities there will be a large number of actions and activities but this section will only include the most important high level achievements.
Challenges/Risks	This section sets out any key risks or challenges that may prevent the delivery of the improvement priority.
Council/Partnership Groups	This outlines at which key council or partnership group the Action Tracker has been discussed and/or approved.
Key Actions for the next 6 months	This section provides a summary of next steps/key actions which are due to be carried out over the coming 6 months. Again these are limited to the most important and high level activities and where possible focus on what the impact/outcome will be. For each action/activity the contributory officer/partner responsible for leading this work, any milestones and timescales are included.
Performance Indicator Information	In this section the results for the aligned performance indicators for this improvement priority are presented including the target and are traffic lighted both for the result itself and for data quality. <u>NB</u> Additional performance information is presented in appendix 4.

Accountability Reporting Guidance

Column Title	Description
	The PI Type column describes which basket each indicator belongs to. A basket is a set of indicators which we use to report on progress relating to different plans or frameworks, such as the Leeds Strategic Plan.
РІ Туре	Leeds Strategic Plan Government Agreed - These indicators show progress against the Leeds Strategic Plan and also form our Local Area Agreement. Leeds Strategic Plan Partnership Agreed - These indicators are the locally agreed priorities included in the Leeds Strategic Plan. Business Plan - These are indicators that form part of the Council Business Plan. National Indicator - These indicators are part of the set that are used to measure local government performance. Local Indicator - These are local key indicators for Leeds set by specific service areas.
Reference	Each indicator has a unique reference number.
Title	This is the title given to the indicator.
Service	The service column identifies which team within the Council is responsible for service delivery, monitoring the performance and data quality of each indicator.
Frequency	The top line in this column identifies how often we collect this information. This may be every month, every three months (quarterly) or once a year (annually). We only report annual indicators at the end of quarter 4 (after the end of March).
& Measure	The second line in this column identifies what measure we use to check on progress. For example, we might measure this result in the number of days or weeks we should take to finish something, such as a planning application. In another case, we might measure the percentage, such as the percentage of enquiries we respond to within five minutes.
Rise or Fall	The good performance column identifies if the results should go up or down to show whether we are doing well. For example, if this is set to rise, you would expect the figures to increase.
Baseline	The baseline column provides a base result for the indicator against which progress can be measured. This is usually based on performance at a specific time in the past. E.g. a previous year.
Last Year Result	This column displays the result at the end of the previous financial year (31 March 2009).
Target	This column shows the target we have agreed for this financial year.
Full Year Result	This column shows the full year result for 2009/10.

	The green light shows that t this indicator has met its target.	
	An amber traffic light shows that this indicator has not met its target. However, the performance for this indicator is still acceptable and will not result in significant problems.	
	The red lights shows that this indicator has not met its target.	
	An upwards arrow indicates that the 2009/10 result is an improvement in performance compared to the 2008/09 result	1
Direction of Travel	A sidewards arrow indicates that the 2009/10 result is at the same level of performance compared to the 2008/09 result.	
	A downwards arrow indicates that the 2009/10 result is a decline in performance compared to the 2008/09 result	Ļ
	To know we can rely on the information in these reports, it has to be of good qua use this column to identify indicators where they have concerns about the quality or data in the report. If a Directorate has Some or Significant concerns regarding will be an explanation in the comments field.	of the information
Data	No Concerns indicates that the Directorate has signed off the data as accurate.	No Concerns
Quality	If Some Concerns has been chosen, the Directorate has concerns about the data and are working to ensure it is accurate and reliable.	Some Concerns
	If Significant Concerns has been chosen, the Directorate thinks that the quality of the data may not be good or that maybe they have not got the correct data.	Significant Concerns
Comments	The comments for each indicator should explain why performance varies. They s if there are any problems with the quality of the data and what steps the Director improve it. This section will also focus on what will be done to improve the action outcomes they have achieved.	ate is taking to



Report of the Chief Officer for Health and Environmental Action Services

Scrutiny Board (Adult Social Care)

Date: 19th July 2010

Subject: Major Adaptations for Disabled Adults. Performance on completion time of adaptations schemes, Quarter 4 2009/10.

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
	Narrowing the Gap

1.0 Introduction

- 1.1 In June 2009, Adult Social Care Scrutiny Board reported on a number of recommendations following an inquiry into the delivery of major adaptations. One of the recommendations was the presentation of quarterly performance information on the speed of delivery of adaptations for tenants and owner occupiers and information on concluded Ombudsman Inquiry into adaptations. This report provides the performance for Quarter 4, Dec 2009 to March 2010.
- 1.2 The performance for adaptations delivered in Q4, 2009/10 is provided at appendix 1.

Explanation of the performance information:

The information provided is principally the percentage of adaptations schemes that were delivered within the target time in the private and public housing sectors and the number of schemes delivered. The target times for the 'front end' of the process of providing an adaptations (by Social Care) is shown, together the target for the latter part of the process, that where the housing agencies install the equipment etc. The information shown is for major adaptations only, ie those costing over £1,000. Typically, these include wet floor showers and lifts, but also include complex schemes such as building an extension to the house.

Graph 1 shows the percentage of adaptations schemes that were delivered within target. This is shown by housing provider, ie the ALMOs, BITMO and the Adaptations Agency (the latter delivering adaptations through the Disabled Facilities Grant process in owner occupied homes). These figures show the time taken from the

customers first contact with the Council to completion of the adaptation and therefore include the Social care assessment stage.

Graph 2 shows the number of adaptation schemes completed in Q4 of 2009/10. A reduction in schemes completed in any quarter does not necessarily indicate a reduced demand in the period as completion times are managed according to capital resource provision in the year.

1.3 No adaptations cases were investigated and reported upon by the Local Government Ombudsman in Q4 2009/10.

2.0 Recommendations

2.1 Members are asked to note the performance reported for Q4, 2009/10 in appendix 1.

Adaptations Performance Report 2009/2010 Quarter 4

Target information:

Social Care targets for assessment:

	Social Care Targets for assessment
Adult	56 Days
Child	70 days

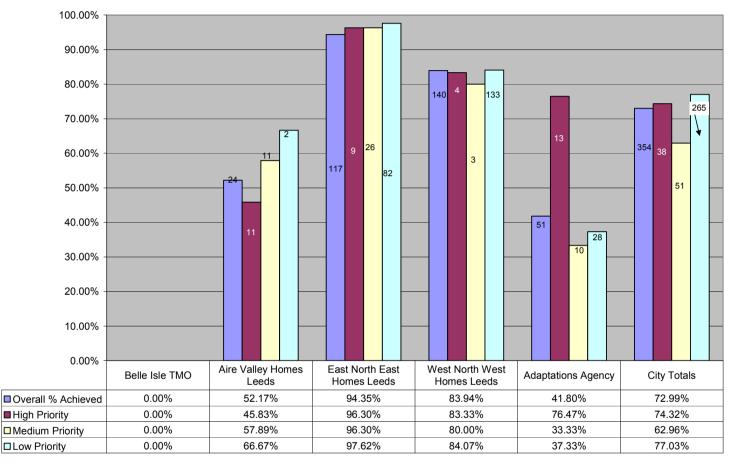
Housing provider targets, from receipt to completion:

Risk category	Targets: ALMO/ BITMO (calendar days)	Targets (Adapt Agency (calendar days)	
Low	269 Days	305	
Medium	160 Days	186	
High	80 Days	114	

Target times are based on the recommended Communities and Local Government (CLG) and Dept of Health timescales, presented in calendar days. The Adaptations Agency targets differ from that of ALMOs/ BITMO as they have to undertake a means test of the applicants resources, which is allowed for in the target timescales. Social Care (Adults and Children) risk assess each case determine the priority (high, medium or low) that they feel the housing provider should have regard to in providing the adaptation.

Appendix 1

Performance Information.



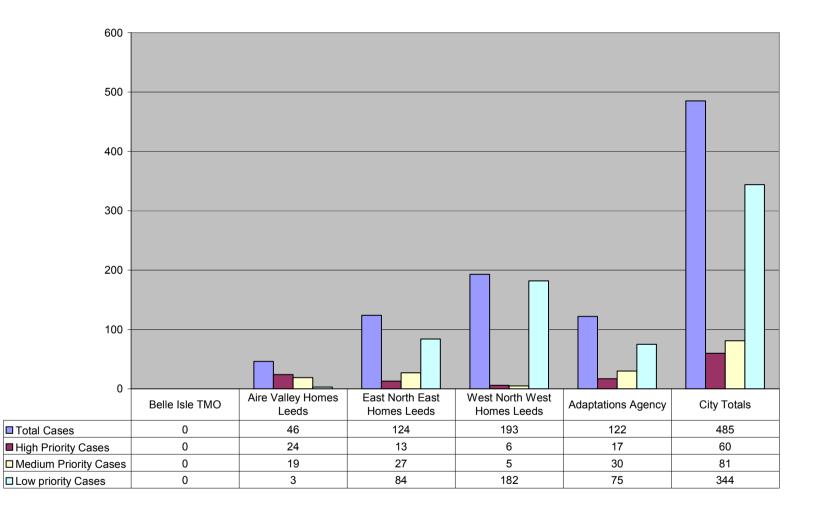
The Percentage of Major Adaptations completed within Target Qtr 4 2009/10

NB: The figures at the top of the bars are the number of completed cases

Graph 1

This graph presents the performance against both Dept of Health and CLG targets. It shows the time taken from a customers first contract with the Council to request an adaptation to the adaptation being completed in their home. Where performance may not have met the target, this may be due to delays in either Social Care (Adults or Children's), or the housing provider. In quarter 4 2009/10, 485 major adaptations were completed in the city with 72.99% completed within Communities and Local Government (CLG)/ Dept of Health timescales. Differences in performance by each provider are significantly influenced by budget management decisions, but also process delays in social care assessment or adaptation delivery.

Number of Major Adaptations Completed Qtr. 4 2009/10



Graph 2

This graph illustrates the number of adaptations undertaken by each provider. The Adaptations Agency has the largest budget of the adaptation providers but demand is such that in order to keep within budget, delivery timescales are affected, particularly in Q4 performance. This pattern has been reflected over the past few years

Table 1: The longest and shortest times taken for adaptation delivery by housing provider, Q4 2009/10.

Housing provider	Social Care risk assessment	Longest case (calendar days)	Shortest case (calendar days)
AVH	High	438	23
	Med	581	79
	Low	301	106
ENE	High	176	36
	Med	334	48
	Low	733	38
WNW	High	235	35
	Med	935	129
	Low	847	35
Adaptations Agency	High Med Low	413 1490 363	58 152 115

The above table shows the extremes of delivery times of adaptations. These extremes reflect the varying nature of adaptation schemes, for example a full extension to a house could be designated as a high risk scheme, and thereby be given the shortest delivery time. Current targets do not reflect the nature of the scheme and the work involved to deliver it, just the risk allocated to the case. This is a matter currently being considered in the review of target times. The details behind the performance in table 1 will be available verbally, if needed.

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Agenda Item 1 ⁻ Originator: Hilary Paxton Tel: 0113 224 3099

Report of the Director of Adult Social Services

Scrutiny Board: Adult Social Care

Date: 19th July 2010

Subject: Leeds Safeguarding Adults Partnership Annual Report 2009/10

Electoral Wards Affected:	Specific Implications For:		
	Equality and Diversity		
Ward Members consulted (referred to in report)	Narrowing the Gap		

Executive Summary

- 1. This report introduces Members of the Scrutiny Board to the Leeds Safeguarding Adults Partnership Board Annual Report 2009/10, and the work plan for 2010/11.
- 2. The Annual Report is now available to access at <u>www.leedsafeguardingadults.gov.uk</u> following the Executive Board meeting.

1.0 Purpose Of This Report

1.1 The purpose of this report is to introduce the third annual report of the Leeds Safeguarding Adults Partnership Board and to update the Scrutiny Board on the work of the Leeds Safeguarding Adults Partnership.

2.0 Background Information

- 2.1 Each year Leeds Safeguarding Adults Partnership Board produces an annual report of its business for the previous year and a work programme for the following year. The work programme is informed by the priorities of the Board and its partner agencies.
- 2.2 Although Safeguarding Adults Boards do not yet have the same statutory framework as that designated for Safeguarding Children Boards, the formal recognition of the work of Adult Boards is a national priority for central government and the Health and Social Care regulator, the Care Quality Commission. It is anticipated that Safeguarding Adults Boards will be put on a statutory basis, although the exact timing is not yet confirmed.
- 2.3 The Leeds Safeguarding Adults Partnership Board Annual Report 2009/10 was reported to the Executive Board on 22nd June 2010. Executive Board noted the Annual Report and endorsed the work programme for 2010/11.

3.0 Main Issues

- 3.1 The attached Annual Report sets out that there has, for the second year running, been a significant increase in the number of referrals made into the Leeds Safeguarding Adult Partnership during 2009/10. This reflects a significantly increased awareness of vulnerable adult issues and understanding of the need to safeguard adults through the revised multi-agency procedures.
- 3.2 The report deals with the success against the targets contained in the second annual report of the Board and outlines the various national safeguarding developments occurring during 2009/10. The report concludes by setting out the priorities for the Board for the 2010/11 performance year.
- 3.3 All the information contained in the report and the activity that has taken place in 2009/10 have been reported back to the Care Quality Commission, the Adult Social Care Scrutiny Board and the governance structures of the safeguarding partners. Against the criteria used by the Care Quality Commission, Adult Social Services have advised CQC that they now regard performance as being 'good' and therefore having demonstrated improvement over the judgment for 2008/09. The CQC will provide their formal definitive response to this self assessment in November.
- 3.4 Since June 2008, the Board has been chaired by the Deputy Director (Strategic Commissioning) within a separate accountability agreement to the Director of Adult Social Services. All the Board initiatives set out in the attached report continue to have been put into place under this arrangement. The intention was made plain in the previous report to appoint an independent chair for the commencement of the 2010/11 performance year. A recruitment process conducted recently has successfully identified a suitable candidate and it is anticipated that he will take over the chair later this summer.

4.0 Implications For Council Policy And Governance

4.1 The Board Memorandum of Understanding is being kept under review as agreed. This is particularly important in the light of the likelihood of further guidance emerging for local safeguarding partnerships as a consequence of the outcome of the previous Government review of the 2000 'No Secrets' framework.

5.0 Legal And Resource Implications

- 5.1 The legal implications relate to a significant array of legislation in relation to offences against the person, guidance in relation to Care Standards, Mental Capacity, the implementation of specific guidance in relation to Adult Safeguarding, Dignity in Care.
- 5.2 Local arrangements to implement all the requirements of the Mental Capacity Act (2005) and the associated Deprivation of Liberty safeguards have been brought under the governance structures of the Safeguarding Partnership Board, reflecting national best practice and policy guidance.
- 5.3 The resource implications of the Board are set out in the annual report. Elements of this investment are being offset by contributions from partners, where appropriate as income (in the case of NHS Leeds for example) or in terms of time devoted by officers to supporting the work of the partnership (in the case of the West Yorkshire Police, for example).

6.0 Conclusions

6.1 The Annual Report provides evidence that systems and practices to safeguard vulnerable adults, are now more firmly established as being everybody's business in Leeds, and used more widely across all sectors.

6.2 The Annual Report provides assurance that that all the partners have committed to a continuing programme of work designed to achieve excellence in Safeguarding practice in Leeds.

7.0 Recommendations

7.1 Members of the Scrutiny Board are requested to note the content of the attached 2009/10 annual report and endorse the work programme of the Adult Safeguarding Partnership Board for 2010/11.

Background Documents referred to in this report

Leeds Safeguarding Adults Partnership Board – Annual Report 2009/10

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Leeds Safeguarding Adults Partnership











Annual Report 2009/10

Page 71

Contents

Fo	rward	Sandie Keene, Director of Adult Social Services	4
Int	roduction	Dennis Holmes, Deputy Director of Adult Services – Chair of Leeds Safeguarding Adults Partnership Board	5
1.	Executive	Summary	7
2.	The Leeds	Safeguarding Adults Partnership Board	8
	2.2 2.3 2.4 2.5	Introduction Membership Board Member Development Programme 2009/10 Board Work Programme 2009/10 Board Sub-Groups Sub-Groups Work Programme 2009/10	8 8 10 11 11
3.	Leeds Safe	guarding Adults Partnership Board Support Infrastructure	13
		Safeguarding Adult Partnership Support Unit – Structure Financial Arrangements	13 13
4.	Safeguardi	ng Activity Data 2009/10	14
	4.2 4.3 4.4 4.5 4.6 4.7	Overview222334444566676778478484848484848444 <td>14 15 16 17 19 21 23 25</td>	14 15 16 17 19 21 23 25
5.	National ar	nd Regional Safeguarding Developments	28
	5.	 National Safeguarding Developments Independent Safeguarding Authority Regional Developments 	28 29 29
6.	Mental Cap	pacity	30
7.	Business F	Plan 2009/10	32
	6.1	Achievements of the 2009/10 Business Plan	32
8.	Business F	Plan 2010/11	32

	7.1 Board Member Safeguarding Priorities for 2010/11	32
Appen	dices -	
A.	Representations and attendance of Member Organisations, April 2009 – March 2010	34
В.	Individual Member Attendance and Representation, April 2009 – March 2010	35
C.	Membership of Safeguarding Board, 31 st March 2010	38
D.	Board Subgroup Chairs and Vice Chairs, 31 st March 2010	40
E.	Structure of Safeguarding Adults Partnership Support Unit	41
F.	Mental Capacity Act & DoLS LIN Stakeholder Group Partnership	42
G.	Achievements of the Partnership against the 2009/10 Business Plan	43
H.	Business Plan 2010/11	46
I.	Leeds Safeguarding Adults Partnership Statement of Purpose	50
J.	Leeds Safeguarding Adults Partnership Training and Workforce Development Framework	52

Foreword:

I am very pleased to present the third Leeds Safeguarding Adults Partnership Annual Report.

During 2009/10 the Leeds Safeguarding Adults Partnership Board set ambitious, but necessary targets. It recognised that our policies, procedures and systems needed renewal and that greater investment in both frontline safeguarding activity and partnership support was required. The actions of the Board sought to directly address these developmental needs. 2009/10 has hence been a period of reform. The investment in specialist posts, the establishment of a reconstituted Safeguarding Board, the relaunching of the Leeds Safeguarding Multi-Agency procedures and continuing training and workforce development have improved the Partnerships capability to safeguard vulnerable adults throughout Leeds. Much has been accomplished over the last 12months and I am pleased with our achievements.

Excellence however should remain our aspiration, and to achieve this 2010/11 needs to be a period of development. The Board is increasingly strengthened by the commitment of its Partner agencies, the leadership of its members and the strategic development of the Board's sub-groups. The Annual Report continues to look forward, setting further ambitious targets for 2010/11. I feel confident that current accomplishments can be built upon, and that targets set can be achieved. I remain personally, absolutely committed to supporting the Board achieve these aims.

I would like to thank all those who work with vulnerable adults that are making the step wise changes in practice and procedures that enable these aims to be realised. Whilst the Annual Report highlights strategic leadership within the Partnership, it is the actions of individuals at all levels within each Partner agency that enables us to fulfil our responsibilities to the citizens of Leeds.

Sandie Keene Director of Adult Social Services June 2010

Chair's Introduction

For the second consecutive year I'd like to take this opportunity to thank my fellow Board Members, sub-group chairs and the officers who have supported the Board and its sub-groups throughout 2009/10. Once again, the commitment and drive of both members and officers to advancing and promoting the Safeguarding agenda in the City was tremendously invigorating and gave enormous support to me in my work as chair.

Building on the firm foundations of the endeavours of 2008/09, this year has seen significant developments in our safeguarding work and practice across the whole partnership. Once again, increased activity levels bear testament to the greater awareness and appropriate responsiveness to safeguarding issues and concerns. The partnership has also benefited from the full deployment of staff whose role it is to promote and support the work of the partnership in all its many and varied responsibilities.

Last year I explained that our test as a Board has been to ask how well we know ourselves as a Safeguarding Partnership, to question what we aspire to and to find ways of being able to explain how what we do as a Board impacts on the lives of people who may need to be safeguarded.

All members of the Board have benefited from the opportunity to develop a better shared understanding of our roles in relation not only to the Board but within our own host organisations and within all the other networks we participate in. We have also had the opportunity to learn together about how safeguarding works in practice and to consider our different perspectives on difficult safeguarding issues.

We have completed and taken the learning from the first two serious case reviews to have been conducted in Leeds and my thanks are extended to the independent Chairs of those reviews, Margaret McGlade and Mick Muir, for conducting the reviews and helping us to develop better practice as a consequence.

Across the partnership our workers are better trained, have had more specialist training, have adopted and implemented new procedures and implemented new methods of recording information about their safeguarding work, a tremendous achievement in a relatively short space of time. The consequent improvements in practice have been verified through the continuing use of independent practice audits as we strive to demonstrate how the improvements in many areas of safeguarding practice have direct and beneficial outcomes for citizens.

I explained last year that the active interest, support and oversight of the members of boards of Statutory organisations, management committees of third sector organisations and crucially of Elected members of the Council, had been crucial in the endeavours of the Board. I am pleased that their interest has been undiminished in this year and their continuing support for the work of the Board has helped to promote it's work more widely.

My assessment is that our overall position as a partnership as well as a Board is much stronger than at any time in the recent past, however, there is still much to do. You will read in this report that we have ambitious plans for the coming year to address new priorities as well as maintaining the momentum in the areas reported in our last two reports.

Among the new developments and a priority for the coming year, is the incorporation of the arrangements for the local implementation of the Mental Capacity Act including the Deprivation of

Liberty requirements into the work of the partnership and Board. You will see a section of this report deals specifically with the activity undertaken in 2009/10 in this extremely important and closely related area of practice.

Last year I undertook to set in place arrangements for the recruitment of an Independent Chair of the Partnership Board. I am pleased that our target to undertake a recruitment process was met but that we were unfortunately unable to recommend a candidate for appointment. Our aim continues to be to secure the services of an independent Chair within the current year. I am extremely pleased to be able to continue to lead the Board in its work until such an appointment can be made.

Finally, on behalf of the Board, I commend the content of this report to you, I believe that, although there remains a challenging national, regional and local safeguarding agenda before us, we have established the appropriate foundations to confidently meet those challenges. In doing so, we can now not only aspire to excellence but demonstrate excellence in safeguarding practice for the people of Leeds.

Dennis Holmes

Deputy Director – Adult Social Care Chair, Leeds Safeguarding Adults Partnership Board. June 2010

1. Executive Summary

The Leeds Safeguarding Adult Partnership Board Third Annual Report 2009/10 provides details of the Partnership's commitment to and achievements in safeguarding the citizens of Leeds.

During 2009/2010 the Leeds Safeguarding Adult Multi-Agency procedures were revised and reintroduced alongside training and workforce development and communication initiatives to embed the procedures into practice. Practice and systems development were reinforced by strengthened Governance arrangements within the board, as evidenced by the following key achievements:

- The inclusion during 2009/10 of the Serious Case Review (Professional Practice) sub-group that has already overseen the commissioning, completion and action planned learning in respect to two serious case reviews.
- The establishment during 2009/10 of the Sub-Group Chairs Group ensuring coordination and sharing of learning between and across the Policy, Procedures and Protocols sub-group; Training and Workforce Development sub-group; Performance, Audit and Quality Assurance sub-group; and Serious Case Review (Professional Practice) sub-group.
- Formative work undertaken to establish reference groups in relation to service users, carers and the third sector.
- Developments in relation to data collection systems during 2009/10 provide for more sophisticated information in relation to safeguarding activities, that will inform the board work programme during 2010/11.

The period 2009/10 has also seen significant changes in the numbers of safeguarding referrals, reflecting the partnership's collective achievements in raising awareness and understanding of safeguarding issues.

- Referrals increased from 1320 (2008/09) to 2049 (2009/10), an increase of 55%. This reflects a significantly increased awareness of vulnerable adult issues and understanding of the need to safeguard adults through the revised multi-agency procedures.
- Learning Disability as a service user group continued to receive the highest number of referrals during 2009/10 (23.4%). Referrals for people with Physical/Terminal Illness (21.3%) have replaced Elderly Mental Illness (16.8%) during 2009/10 as receiving the next highest proportion of referrals.
- Housing have the most significant increased referral rate, indicating an increased active engagement within Partnership procedures. The highest proportion of referrals derive from NHS/Health Staff, which as a referral source has increased proportionally year on year during the 2007/8 – 2009/10. Similar trends are also noted in relation to the referral sources: Education/Training/The Workplace, the Police and Social Care Staff.

The report details the board's achievements in effectively addressing the 2009/10 Business Plan. Achievements during 2009/10 are built upon in the work programme for 2010/11. The Board and its partner agencies have set ambitious objectives, as set out in Appendix H, in order to safeguard the citizens of Leeds.

2. Leeds Safeguarding Adults Partnership Board 2009/10

2.1 Introduction

Leeds Safeguarding Adults Partnership exists to ensure that all the citizens of Leeds, irrespective of age, race, gender, culture, religion, disability or sexual orientation can be free from abuse or the fear of abuse. The Board leads and oversees the work of the Partnership and is currently a voluntary arrangement among the statutory and non-statutory partners, governed by a Leeds Safeguarding Adults Partnership Board Memorandum of Understanding. It is anticipated that during 2010/11, national legislation will be introduced to require each area to have a statutory Safeguarding Adults Partnership. The Memorandum of Understanding will be revised during 2010/11 to reflect any required changes.

2.2 Membership

The Safeguarding Adults Partnership Board met bi-monthly during 2009/10, in April, June, August, October and December 2009 and February 2010. Membership continues to include representation across statutory agencies (including Adult Social Care, Children's Services, NHS partners, Police, Probation, Community Safety and Fire Service) service user and carer organisations, housing and regulatory organisations. The Director of Adult Social Services attended the October 2009 meeting to assure herself of progress being achieved. Representation at the Safeguarding Adults Partnership Board is detailed in the appendices as detailed below:

Appendix A: Representations and attendance of Member Organisations, April 2009 – March 2010

Appendix B: Individual member attendance and representation, April 2009 – March 2010

Appendix C: Current Board Membership as at 31st March 2010

2.3 Board Member Development Programme 2009/10

Two Safeguarding Adult Partnership Board development days have been held during the year. Both were facilitated by Michael Hake, a former director of social services and independent chair of a safeguarding adults board in London. Both events were very well-attended by members of the Board and their deputies.

The first day in June 2009 focused on five key areas:

- To recognise and review progress in partnership development
- To consider how to evidence delivery
- To scope the wider safeguarding remit
- To build partnership assurance, accountability
- To identify some priorities for future board discussion

The Board development day provided a means to explore with one another the issues facing the partnership and to strengthen professional relationships underpinning the partnership.

The following question was asked of all members of the Board and also informed the second development day in November.

"If this is a safeguarding adults board, how does it safeguard vulnerable adults and how will we know if it is succeeding or failing?"

The key themes and conclusions arising from the development day were that the partnership had:

- Seen significant investment and progress with formation
- A desire to move the agenda forward more quickly
- To have a better understanding about core business, what "safeguarding" meant in terms of scope and remit and responsibilities of others
- To think about the infrastructure needed to support it.
- To clarify inputs and outputs within organisational agendas and think further about third sector issues; including the development of the reference group concept.
- To ensure clarity of purpose not just as a Board but also within all organisations within the partnership.
- Clarified issues around accountability but may need to discuss further
- A wish to understand data and generate processes of reasonable assurance through use of intelligent information.

These conclusions have fed into the work of the Board and its sub-groups across the year.

The second development day was held in November 2009 and this was again well-attended. The session sought to build on the outcomes from the day in June and focused again on the question posed in June.

The broad aims of the day were to:

- Develop ownership of new policies and procedures
- Understand the interface between Safeguarding Adults and MCA/DoLS and any Board issues.
- Scope what might be covered by *Prevention* and how to improve outcomes for populations and groups.
- Consider thresholds and how to assure consistency in understanding and in responses.

The session concluded with a number of themes and issue for partners to consider:

- Reality testing policies and procedures and knowing about the responses to concerns under them.
- Understand the interface between MCA/DoLS and safeguarding adults.
- Think further about how to prioritise the work of the Board.
- Coming to the end of the current 18 month road map and now need to start thinking about the next two years: what needed to be achieved.
- Consider further and in detail issues around performance and quality.

It was agreed that the Board would come together for a further development day in 2010 once an independent chair had been appointed.

2.4 Board Work Programme 2009/10

The key work strands that the Board agreed for 2009/10 were:

- Oversight of the development of systems so that performance data can underpin the decisions made by the Board
- Work with others to build safer communities that safeguard vulnerable people (adults & children)
- Learning from practice, including serious case reviews and embedding this learning in the workforce development strategy
- Better involvement with users, carers and third sector organisations in the planning and monitoring of safeguarding work across the City
- Work with commissioners to ensure safeguarding is embedded within all regulated services
- Ensuring a purposeful communications strategy is developed to better inform the people of Leeds in relation to safeguarding and associated matters most particularly Mental Capacity.

Board Meeting Date	Items
15th April	 Draft Annual Report of the work of the Board 2008/09
-	 Business Plan for 2009/10
	 Work Programme for the year to come
17th June	 Annual Report & Business Plan final sign off.
	 Multi-agency policy
	 Board Statement of Purpose (see Appendix I to this Annual Report)
	 Plans for Board Development Day (24th June)
19th August	 Serious case review feedback – Mr A
-	 Multi-agency Procedures and forms
	 Planning for Annual Conference
14th October	 DASS attendance
	 Progress of new Board to date, including the report on the Baseline audit of
	Board partner organisations
	 The Local Government Ombudsman and Parliamentary and Health Service Ombudsman "Six Lives" Report
	 Plans for Board Development Day (30th November)
	 Arrangements for the recruitment of an Independent Board Chair
16th December	 National data set summary
	 First Six months Performance report
	 Serious case review feedback - Mrs P,
	 Mental Capacity Act 2005 and Deprivation of Liberty Safeguards - Update
	Report and the Leeds IMCA, Advocacy and Safeguarding Policy
24th February	 AVA National Data Return
	 End of year review
	 Board Priorities for 2010/11
	 Budget for 2010/11
	 Plans for Memorandum of Understanding review
	 Serious case reviews action plans monitoring

The Board's key work programme items for each meeting held in 2009/10 are detailed below:

Proposal for a new Serious case review

2.5 Board Sub-Groups

The Partnership has continued to strengthen the board with the addition of sub-groups addressing key areas of development and learning. The Training and Workforce Development sub-group that has been operating successfully for the past five years were joined by the Policy, Procedures and Protocols subgroup and the Performance, Audit and Quality Audit during the 2008/09 period. During 2009/10 the Serious Case Review sub-group was established with representation across the Partnership, enabling a further mechanism for the Board and its partners to learn the lessons from incidents where safeguarding practice has not achieved its objectives. The Sub-Groups Chairs Group was also established during 2009/10 in order to effectively coordinate the work streams of each sub-group and enable learning and developmental issues to be shared and passed between groups. During 2009/10 work has begun in relation to the development of three further sub-groups, the Service User Reference Group, Carer Reference Group, and a Third Sector Reference Group. Collectively these sub-groups will provide for a holistic approach to the development of safeguarding practice.

Appendix D details current Subgroup Chairs and Vice Chairs

2.6 Sub-Groups Work Programme 2009/10

Policy, Procedures and Protocols sub-group

The Policy, Procedures and Protocols sub-group has met on six occasions during 2009/10. It has disseminated the revised multi-agency safeguarding adults policy and procedures and ensured that all key safeguarding agencies understand their roles and responsibilities within these. The group has reviewed single agency and multi-agency procedures and checked consistency with multi-agency procedures, including the following:

- IMCA, Advocacy and Safeguarding policy (presented to Board in December 09)
- LTHT internal procedure
- LCC Corporate procedure
- Adult Social Care Learning Disability Provider procedure

Plus:

- Contributing to draft Dispute Resolution and Escalation protocol
- Monitoring the implementation of the multi-agency procedures and forms and identifying areas that need amendment or further clarity

Training and Workforce Development sub-group

The Training and Workforce Development sub-group has met on five occasions during 2009/10. During this period the group have made significant developments in respect to safeguarding training and workforce development, including:

- The revision and updating of the multi-agency framework
- Incorporation of multi-agency training framework into key partner single agency training plans.
- Commenced development of a safeguarding adult competency framework
- Mapped the training requirements of all key agencies involved in safeguarding adults work

- Ensured the delivery of significant training provision across partner agencies
- Commenced the establishment of endorsed training materials and content, standardising safeguarding training across partner agencies.

Serious Case Review (Professional Practice) sub-group

The Serious Case Review (Professional Practice) has met on four occasions throughout 2009/10. The achievements of the group during 2009/10 has included:

- Establishing agreed terms of reference for the group
- Establishing membership from across key safeguarding adults agencies in Leeds.
- Performance managing the learning action plans from the two serious case reviews concluded during 2009/10
- Commenced commissioning of a third serious case review.
- Commenced review and revision of the serious case review policy, procedures and guidance reflecting the learning gained from the first two serious case reviews.

Performance, Audit and Quality Assurance sub-group

The group has met on five occasions during 2009/10. The work programme during this period has included:

- Establishing agreed terms of reference for the group
- Establishing membership from across key safeguarding adults agencies in Leeds.
- The group established and managed a cross-partnership baseline audit of agencies' performance in safeguarding adults work.
- Commenced the development of standard data reporting systems across safeguarding adults
- Commenced the development of agreed recording standards.

Sub-Group Chairs Group

This group met for the first time in March 2010. The remit, which was agreed by the board in principle in December 2009, is to coordinate the work of the sub-groups to clarify responsibility in the case of overlaps and to ensure there are no gaps. It was agreed that the sub-group chairs would:

- Meet on a regular basis prior to the Board meetings;
- Coordinate and drive the work of the Board through issues being raised via the sub-groups;
- Ensure joined-up working on matters that cross all sub-groups' work;
- Assure the work of the sub-groups, ensuring they meet the requirements of the Board's business plan;
- Use the business of the sub-groups to inform the Board's forward plan;
- Work to the independent chair of the Safeguarding Adults Partnership Board once that person is in post.

Users Reference Group, Carers Reference Group, Third Sector Reference Groups

The Partnership Support Unit has been working closely with users and carers' representatives and with the third sector to start the development of three separate reference groups for the Safeguarding Adults Board. These groups will be fully developed in 2010/11.

3. Leeds Safeguarding Adults Partnership Support Infrastructure

3.1 Safeguarding Adults Partnership Support Unit – Structure

The Safeguarding Adults Partnership Board is supported by the Safeguarding Adults Partnership Support Unit hosted within Leeds City Council Adult Social Care Directorate. The Unit was greatly enhanced during 2009/10 to meet the challenges of developing safeguarding practice across the partnership. The additional posts of a Head of Safeguarding, three Independent Safeguarding and Risk Managers, a Safeguarding Strategy and Risk Manager together with administrative support posts came into effect between June and August 2009, and serve to complement the previously established posts of Safeguarding Adult Co-ordinator and Training and Development Officer. The unit structure is illustrated in Appendix E.

The Partnership Support Unit supports the Board's agenda in promoting the implementation of the Safeguarding Adults Multi-Agency procedures. The Head of Safeguarding role, supported by the Safeguarding Co-ordinator and Safeguarding Strategy and Risk Manager, provides strategic leadership around practice, procedures and policies, promoting the development of single agency and partnership working practices. The Independent Safeguarding and Risk Manager roles provide for the independent chairing of Case Conferences and in so doing provide an important quality assurance role in driving up standards, and improving practice and outcomes for victims of abuse and neglect. The Training and Development Officer role supports the development and implementation of the Safeguarding Board Training and Workforce Development Framework, improving awareness and understanding of individual roles and responsibilities. The Partnership Support Unit has extended and formalised the existing telephone Advice and Information Service during 2009/10 and publicised this, supporting professionals, carers and vulnerable adults to access advice and information in relation to individual circumstances and safeguarding practice.

3.2 Financial arrangements

The following table shows the budget and projected outturn for the Board and the Partnership Support Unit in 2009/10. The outturn in 2009/10 was less than the original budget, due to the fact that the unit was not fully staffed for the first part of the year. Adult Social Care and NHS partners have shared the costs in 2009/10. Further discussion will take place as part of the review of the Memorandum of Understanding to formalise partner contributions for future years. The Budget is shown for 2010/11.

	2009/10 Budget	2009/10 Projected Outturn	2010/11 Budget
	£	£	£
Employees	420,270	347,093	425,400
Premises	0	9	0
Supplies and Services	82,800	82,709	40,170
Transport	2,040	4,822	3,200
TOTAL EXPENDITURE	505,110	434,633	468,770
Income from training	(6,000)	(6,000)	(6,000)
Contribution from partners	(314,580)	(150,000)	(230,000)
TOTAL INCOME	(320,580)	(156,000)	(236,000)
NET EXPENDITURE (contribution from Adult Social Care)	184,530	278,633	232,770

The difference between 2009/10 budget and outturn in relation to figures reflecting partner contributions is explained by the pro rata effect taking into account the phased introduction of the staffing structure of the unit. The 2010/11 budget has been adjusted to reflect this.

4. Safeguarding Activity 2009/10

4.1 Overview

There has been a significant increase in the number of referrals made into the Leeds Safeguarding Adult Partnership during 2009/10. This reflects increased awareness of vulnerable adult issues and understanding of how to safeguard individuals through the Multi-Agency procedures. This trend appears to result from the range of measures introduced during 2009/10 that include training and workforce development programmes, investment in specialist practitioner posts, communication initiatives, and partner agency commitment to and ownership of Safeguarding Adult responsibilities.

Data collection systems within Adult Social Care were developed during 2009/10, enabling the recording of newly required national Abuse of Vulnerable Adult data alongside the information required to monitor the effectiveness of the Partnership Multi-Agency procedures. This information, collected since 1st January 2010, enables the Partnership to have a more detailed understanding of the decision making, outcomes, and adherence to the Multi-Agency procedures. This will enable increased monitoring of interventions and the targeting of support to improve service delivery where required.

Key Themes:

- Referrals increased from 1320 (2008/09) to 2049 (2009/10), an increase of 55% increase in referrals during 2009/10 over 2008/9.
- 40% of Referrals have translated into Safeguarding Investigations during 2009/10, this amounts to 809 Safeguarding Investigations during this period.
- As in 2007/8 and 2008/9, Learning Disability as a service user group continued to receive the highest number of referrals during 2009/10 (23.4%). Referrals for people with Physical/Terminal Illness (21.3%) have replaced Elderly Mental Illness (16.8%) during 2009/10 as receiving the next highest proportion of referrals.
- As sources of referrals Housing have the most significant increased referral rate, indicating an increased active engagement within Partnership procedures. The highest proportion of referrals derive from NHS/Health Staff, which as a referral source has increased proportionally year on year during the 2007/8 2009/10. Similar trends are also noted in relation to the referral sources: Education/Training/The Workplace, the Police and Social Care Staff.
- Type 1 Investigations are the most frequent Safeguarding Investigation response during the 1st January 2010 31st March 2010 period, followed by Type 2. Type 1 investigations are led by the Service Provider, Type 2 investigations involve an assessment or review of the needs of, and services provided to, the vulnerable adult and/or the alleged perpetrator within the context of the presenting concern(s).

4.2 Referral Numbers

Figure 1 illustrates a significant year on year increase in the number of referrals received for the period 2006/07 - 2009/10). The number of referrals during 2009/10 were 2049, a 55% increase over the 2008/09 period and a 503% increase over the 2006/07 period.

The figures indicate a greater awareness of vulnerable adult issues and greater understanding of how to access support through the Multi-Agency Safeguarding Procedures.

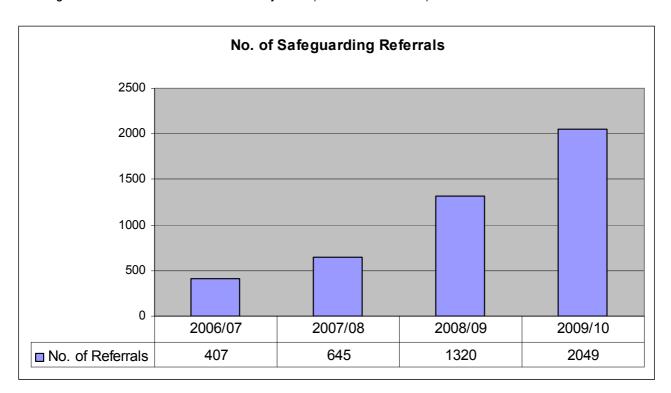


Figure 1: Number of Referrals by Year (2006/07 – 2009/10)

4.3 Referral Outcomes

Figure 2a: Illustrates pictorially the proportion of Safeguarding Referrals that resulted in a safeguarding investigation during 2009/10. Figure 2b records this same information by quarter.

Over the period 2009/10 period, 809 of the 2049 Referrals were responded to as a Safeguarding Investigation. This is the equivalent of 40% of Safeguarding Referrals. However, as illustrated in both Figure 2a and 2b, a range of other supportive outcomes are provided where the referral has not met the criteria for a Safeguarding Investigation.

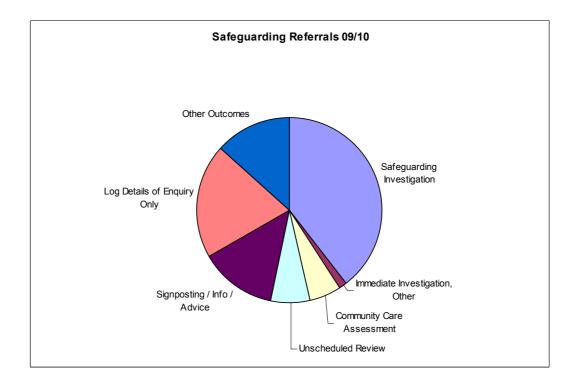


Figure 2a: Referrals Outcomes for 2009/10

Figure 2b: Referrals Outcomes by Quarter (2009/10)

	2009/10 Qtr 1	2009/10 Qtr 2	2009/10 Qtr 3	2009/10 Qtr 4	2009/10
Safeguarding Investigation	222	195	222	170	809
Immediate Investigation, Other	9	7	3	8	27
Community Care Assessment	22	21	38	32	113
Unscheduled Review	27	39	49	31	146
Signposting / Info / Advice	58	58	77	76	269
Log Details of Enquiry Only	96	103	110	103	412
Other Outcomes	49	45	53	126	273
Total					2049

4.4 Referrals By User Group

Figure 3a illustrates the percentage of referrals by User Group, for the year 2009/10. Figure 3b records the number of referrals by User Group for the period 2007/8 – 2009/10. Figure 3c illustrates the number of referrals by User Group for the period 2007/8-2009/10 graphically.

Reflecting the overall increase in referral numbers 2008/9 – 2009/2010, the referral numbers have increased for each service user group. The User Group with the highest proportion of referrals during 2008/09 was Learning Disability (24.4%). Despite a decline to 23.4% of referrals during 2009/10 Learning Disability continues to have the highest number of referrals and highest proportion of all referrals. However, during 2009/10 referrals for Physical/Terminal Illness have increased from 11.5% to 21.3% of referrals. As such Physical Illness/Terminal illness has replaced Elderly Mental Illness during 2009/10 as the second highest user group for Safeguarding referrals. Elderly Mental Illness referrals have remained constant, as a proportion of all referrals across 2008/9 and 2009/10, although referrals numbers have increased in direct proportion to the overall increase in referrals (55%).

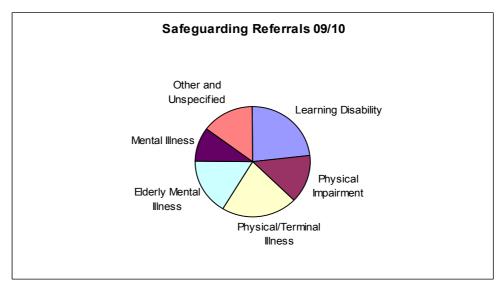


Figure 3a: Referral numbers by user group, 2009/10

Figure 3b: Referral numbers by user group, 2007/08 - 2009/10

	07/08	80	08/09		9/10
Unspecified	96	246	(18.5%)	103	(5%)
Dual Sensory Loss		2	(0.3%)	4	(0.2%)
Elderly Mental Illness	104	222	(16.7%)	344	(16.8%)
Hearing Impairment	1	1	(0.1%)	4	(0.2%)
Learning Disability	142	324	(24.4%)	480	(23.4%)
Mental Illness	67	106	(8%)	203	(9.9%)
Other/None	101	130	(9.8%)	147	(7.2%)
Physical Impairment	73	119	(9%)	282	(13.8%)
Physical/Terminal Illness	70	153	(11.5%)	433	(21.3%)
Sensory Impairment	5	5	(0.4%)	9	(0.4%)
Substance Misuse	2	15	(1.1%)	27	(1.3%)
Visual Impairment	4	4	(0.3%)	13	(0.6%)
Total				2049	

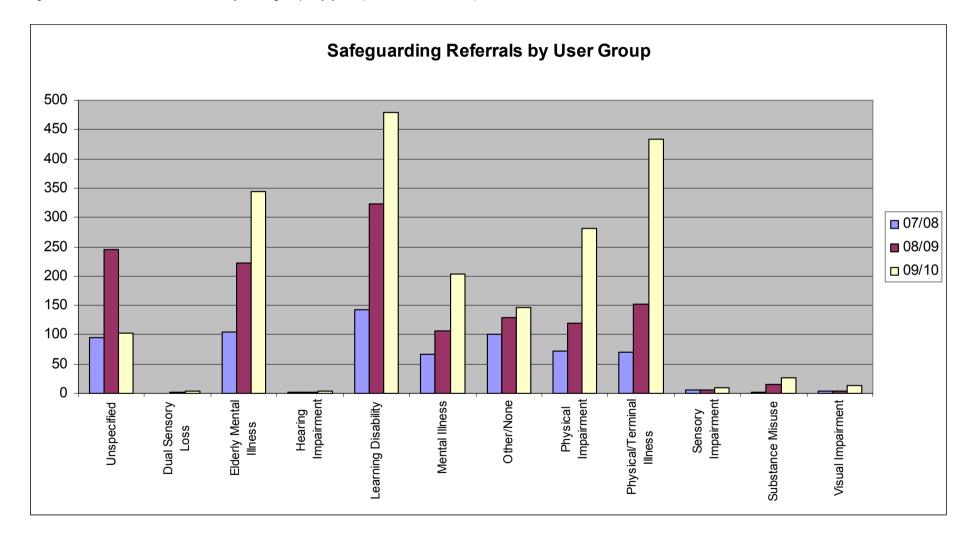


Figure 3c: Referral numbers by user group, by year (2007/08 – 2009/10)

4.5 Referrals By Age

Figure 4a illustrates the percentage of referrals received during 2009/10 by age group. Figure 4b records the actual numbers of referrals received for each age group for the period 2007/8-2009/10. Figure 4c illustrates the percentage over each of three years graphically.

These figures illustrate that although the number of referrals have increased year on year, the proportion of referral by age have remained broadly the same across the reported period. Figure 4c illustrates a small, but increasing proportion of referrals for the 75-84 year age group. Over 65's account for 56.2% of all referrals in 2009/10.

Figure 4a: Referrals by Age group (2009/10) Chart

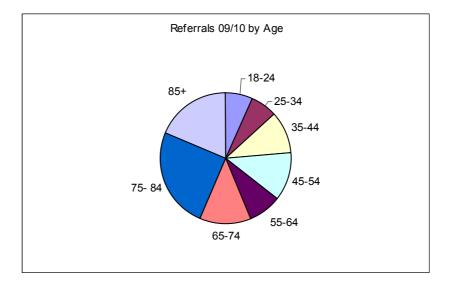
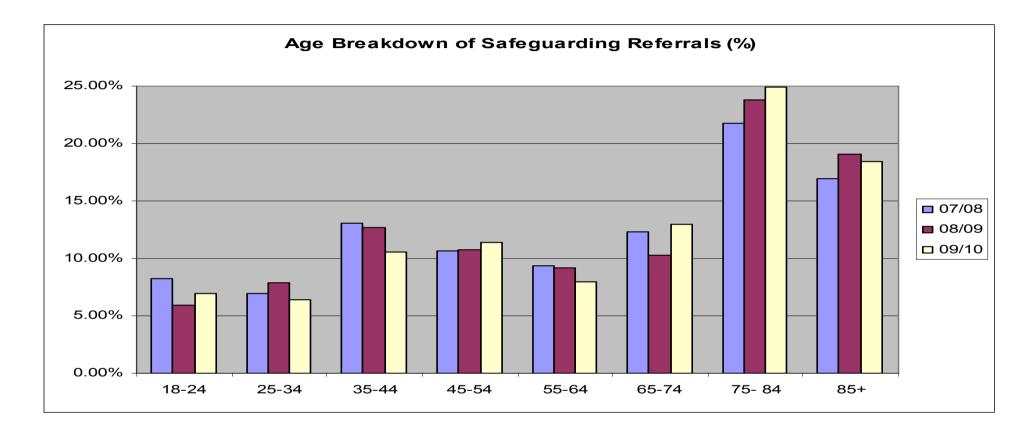


Figure 4b: Referrals by Age group (2007/08 – 2009/10) Table

	07/08	08/09	09/10
18-24	55	78	142
25-34	46	104	131
35-44	87	168	216
45-54	71	143	234
55-64	62	122	164
65-74	82	137	265
75- 84	145	316	510
85+	113	253	378
Unspecified			9
Total			2049



4.6 Referrals By Referral Source

Figure 5 illustrates the proportion of referrals received against referral sources for the period 2009/10, Figure 5a illustrates the numbers of referrals for this period. Figure 5b compares the proportion of referrals for the period 2007/8 – 2009/10.

The highest proportion of referrals were received from NHS/Health Staff, which has increased year on year over the 2007/8 - 2009/10 period. There have been similar trends for Education/Training/The Workplace, the Police and Social Care Staff, and Housing during this period. There has been a significant increase in housing referrals from 2008/09 - 2009/10, an increase from 0.96% to 6.73%.

In contrast there is a gradual decline in the proportion of referrals received from Friends Or Neighbour during the same three year period, albeit the actual number of referrals have increased steadily.

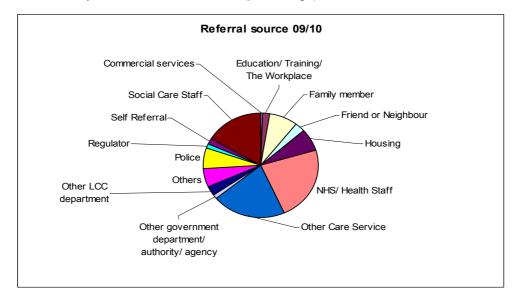
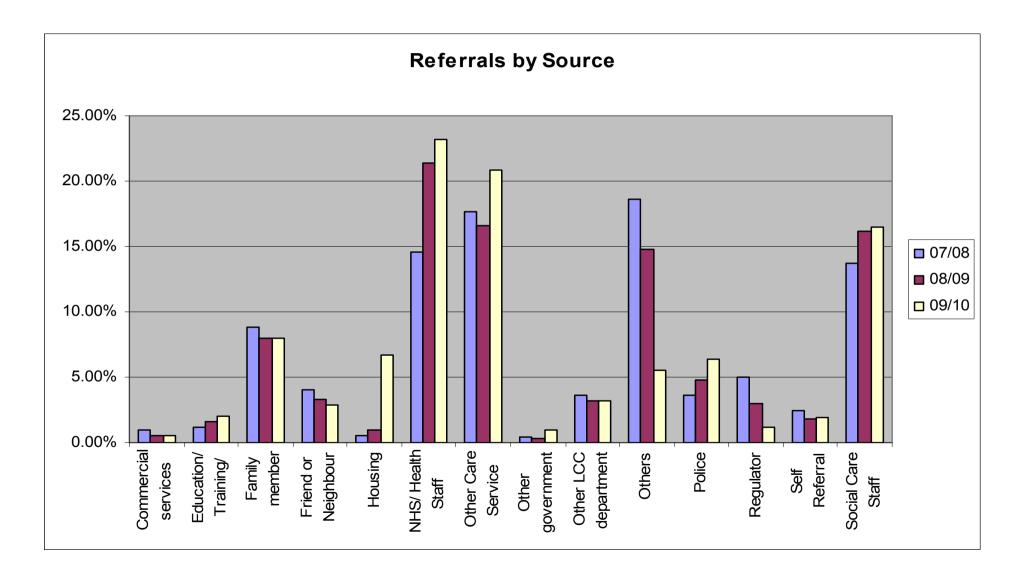


Figure 5: Referrals By Referral Source 2009/10 (percentage)

Figure 5a: Referrals By Referral Source 2009/10 (numbers)

Referral Source	Referrals
Commercial services	10
Education/ Training/ The Workplace	42
Family member	164
Friend or Neighbour	59
Housing	138
NHS/ Health Staff	476
Other Care Service	428
Other LCC department	20
Other government department/ authority/ agency	65
Others	114
Police	131
Regulator	24
Self Referral	40
Social Care Staff	338
Grand Total	2049



4.7 Safeguarding Adults Decisions

A "Safeguarding Adults Decision" refers to the Safeguarding Coordinator's decision as to whether a safeguarding investigation is required in response to a referral, and if so what kind of Investigation is required. The investigation types have only been recorded electronically following changes in information recording systems, adapted in December 2009 to meet the requirements of the Leeds Safeguarding Adults Multi-Agency procedures and the new National Abuse of Vulnerable Adults data requirements. Reports are now available for the period 1st January 2010 to 31st March 2010, so this information is not directly comparable with previous tables

The four types of investigation are detailed in the Leeds Safeguarding Adult Multi-Agency procedures. They are summarised as follows:

Type 1 Investigation – The safeguarding coordinator will request the service provider to undertake an investigation. The provider is then responsible for identifying an appropriate investigator to investigate and report back to the safeguarding coordinator.

Type 2 Investigation – The safeguarding coordinator implements an assessment or review of the needs, and services currently provided to the vulnerable adult and/or the alleged perpetrator within the context of the presenting concern(s). The safeguarding coordinator will ensure that an assessment or review is undertaken by the most appropriate health or social care professional with a report back to the safeguarding coordinator.

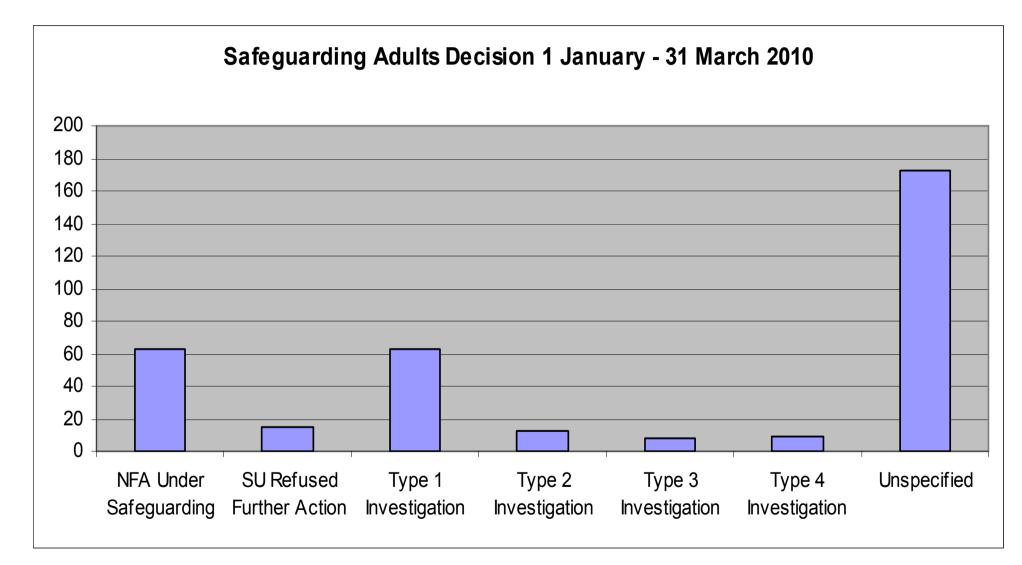
Type 3 Investigation - The safeguarding coordinator will allocate an investigating officer to investigate a specific allegation relating to an individual. A multi-agency strategy meeting will be held to plan how to investigate. An investigation report will be produced and a multi-agency case conference will be convened to consider the findings.

Type 4 Investigation - The safeguarding coordinator will allocate an investigating officer or officers to investigate allegations relating to a number of individuals. A multi-agency strategy meeting will be held to plan how to investigate. An investigation report will be produced and a multi-agency case conference will be convened to consider the findings.

Figure 6a illustrates that most Safeguarding Investigations take the form of Type 1 (63 investigations), followed by Type 2 (13 investigations), Type 4 (9 investigations) and Type 3 (8 investigations). This information is illustrated graphically in Figure 6b.

Decision Outcome	January	February	March	Total
No Further Action (NFA): Under Safeguarding	19	15	29	63
Service User (SU) Refused Further Action	7	2	6	15
Type 1 Investigation	19	27	17	63
Type 2 Investigation	8	1	4	13
Type 3 Investigation	2	2	4	8
Type 4 Investigation	3	1	5	9
Unspecified	37	60	76	173
Total	95	108	141	344

Figure 6a: Safeguarding Adults Decision $(1^{st}$ January 2010 – 31^{st} March 2010)



4.8 Abuse of Vulnerable Adults (AVA) National Data Collection

New standards and expectations were introduced during 2009/10 for Councils with Adult Social Service Responsibilities (CASSR) in respect of collecting data about Abuse of Vulnerable Adults (AVA) incidents. Data collection systems were implemented in Leeds during December 2009 and information reported since 1^{st} January 2010. The following summary of the AVA tables reflects the new AVA National Data Collection requirements. It should be noted that these tables relate to investigated referrals only and reports are available for the 3 month period 1^{st} January 2010 – 31^{st} March 2010 only. These tables are not therefore comparable with data on all referrals reported for the whole year in other sections of this Annual Report.

Table 1: Number of alerts, referrals, repeat referrals and completed referrals by age, primary client group and gender of alleged victim

It should be noted that the Leeds data collection system does not capture alerts within partner organisations and hence these are absent from this table. Alerts are defined within the Safeguarding Adult Multi-Agency procedures as occurring within organisations prior to the decision to make a referral into the Multi-Agency procedures.

Table 1 indicates that the distribution of investigated referrals between males and females are broadly equal in the 18-64 and 65-74 age groups. Female referrals are however, twice as frequent as male referrals in the 75-84 age group; and three times as likely in the 85+ age group, which is most likely to be explained by differences in mortality rates and resulting differences in populations size. Investigated referral numbers overall in this period increase steadily from a total of 16 in the 65-74 age group, to 35 in the 75-84 age group, and 46 in the 85+ age group.

According to the data at the time of this report, there are only 4 instances of repeat referrals across age, gender and primary client group records.

Table 2: Number of alerts, referrals, repeat referrals and completed referrals by ethnicity and age of alleged victim

Again, it should be noted that the data collection system does not capture alerts and hence these are absent from this table. Alerts are defined within the Safeguarding Adult Multi-Agency procedures as occurring within organisations prior to the decision to make a referral into the Multi-Agency procedures.

In 2001 according to the Leeds Census of Population statistics 10.8% of the Leeds population was from black and minority ethnic communities. If 'white other' and 'white Irish' are excluded this figure falls to 8.15%.

Table 2 indicates that referrals from black and minority ethnic communities amounted to 10.9%. If 'white other' and 'white Irish' are excluded this figure falls to 8.2%.

Although the statistics in Table 2 are comparable to the Census statistics in 2001, it has been estimated that the black and minority ethnic minority population will increase by 55% between 2001 and 2030, and hence these figures in 2010 may indicate that minority and ethnic minority population are actually slightly under-represented within referrals.

Table 3: Number of referrals by source of referral by age and primary client group of alleged victim

Table 3 Illustrates sources of investigated referrals by age and primary client group of the alleged victim. The most frequently recorded referral sources is listed as 'Social Care Staff' (47%) followed by 'Other' (28%) and Health Staff (13%)

Please note: the information contained within Table 3 is not directly comparable to that in section 3.6, Figure 5, as both the referral source criteria and the reporting period are different.

Table 4a: Number of referrals by nature of alleged abuse, age and gender of alleged victim

Table 4b: Number of referrals by nature of alleged abuse, primary client group and age of alleged victim

Tables 4a and 4b indicate that the prevalence of abuse is generally greater in the 65+ group relative to the 18-64 year age group. The difference is significant with 85 incidents of abuse recorded for the 65+ age group compared to 40 in the same period for those 18-64 years.

Across age groups, females have more referrals (80) relative to their male counterparts (40), and the incidence of each form of abuse is greater for females than males.

Referrals of physical abuse, financial abuse and neglect remain high across the age groups.

Referrals concerning sexual abuse declined from 6 in the 18-64 age group to 2 in the 65+ age group. In contrast Referrals of institutional abuse increased from 1 in the 18-64 age group to 14 in the 65+ age group.

Table 4b indicates that within the 18-64 age group referrals of physical abuse of people with a learning disability is 3 times more likely than any other form of abuse to people with learning disability, and make up 15 of the 19 physical abuse referrals in this age group.

Currently there are no recorded referrals against the primary client group, Substance Misuse in Table 4b. This is in contrast to section 3.4, Figure 3a that records 27 for the full 2009/10 period. These figures however indicate that referrals for this client group are low. This is an issue in Leeds that needs to be understood and addressed by partners working with this vulnerable client group. Substance misuse services are commissioned in Leeds by the Safer Leeds partnership, and are mostly provided by the third sector. These service users are not generally care managed in Leeds by Adult Social Care.

Table 5: Number of referrals by location alleged abuse took place by type of service

Indicates that the vast majority of referrals concern alleged abuse in the vulnerable adults own home (37%) or whilst residing in a care home on a permanent basis (31%).

In this table "Type of Service" refers to who commissions any provided care service. Under a national Association of Directors of Adult Social Services (ADASS) agreement, safeguarding referrals relating to a care home are coordinated by the host local authority. If another local authority commissions a placement in Leeds, Leeds would coordinate the investigation and invite the funding authority to contribute to the strategy meeting, the investigation and the case conference.

This table indicates that over 50% of investigated referrals concern Own Council Commissioned Services. That is, 50% of referrals concern people receiving services purchased by Leeds City Council. Approximately 18% of the referrals related to someone receiving services funded by health, and over a fifth received no service at all.

Table 6a: Number of referrals by relationship of alleged perpetrator by age and gender of vulnerable adult

Table 6b: Number of referrals by relationship of alleged perpetrator by primary client type and age of vulnerable adult

Tables 6a and 6b indicate that the alleged perpetrator of abuse is likely to be an 'other family member' (excluding partner) (33 referrals) or a member of residential care staff (37 referrals), or to a lesser extent 'another vulnerable adult (21 referrals). These three categories amount to 70% of 18-64 age group referrals and 80% of 65+ age group referrals.

In respect to the 'other vulnerable adult' referrals 12 of the 13 referrals in the 18-64 age group concern learning disability client groups.

Note: Tables 7a to 9 refer to concluded investigations. The numbers for the three-month reporting period are smaller than the numbers in Tables 1 to 6b, as recording of investigation outcomes of referrals from before 1st January 2010 were not recorded using the new part of the system. In subsequent years this issue will not arise.

Table 7a: Number of completed referrals by case conclusion, primary client group and age

Table 7a indicates that across age groups and primary client groups 53% of investigations result in the allegation being either fully Substantiated (45%) or Partially Substantiated (7%). Approx. 24% of investigations are 'Not Substantiated' and a further 24% 'Not Determined / Inconclusive'.

Table 7b: Number of completed referrals by case conclusion and ethnicity

Table 7b records the case conclusion according the ethnicity of the vulnerable adult. No particular trends are identifiable within this information.

Table 8a: Outcome of completed referral - Victim

Table 8a records the outcome of the completed referral for the vulnerable adult (victim). Across age groups the most frequent outcome is 'No Further Action' (41%), followed by 'Increased Monitoring' (32%) and 'Moved to increase / Different Care' (8%).

Table 8b: Outcome of completed referrals leading to serious case review

Table 8b highlights that none of the completed referrals in this three-month period have been recorded as resulting in a Serious Case Review as defined within the Leeds Multi-Agency Safeguarding Procedures.

Table 8c: Acceptance of protection plan

Table 8c records whether the protection plan offered was accepted by the alleged victim. Out of a total of 44 recorded occasions where a protection plan was offered, only on two occasions was the Protection Plan declined (5%); on 5 occasions (11%) the vulnerable adult was unable to consent to the Protection Plan and a decision was required in their 'best interests' as set out in the Mental Capacity Act 2005.

Table 9: Outcome of completed referral - Alleged perpetrator/organisation/service

Table 9 records the outcome of the completed referral for the alleged perpetrator/organisation/service. The most frequently recorded outcome was 'No Further Action' (26%) followed by 'Continued Monitoring' (12%) and 'Removal from property or service' (9%). Criminal Prosecution / Formal Caution occurred in 2 cases (approx. 4%).

5. National And Regional Safeguarding Developments

5.1 National Safeguarding Developments

The Leeds Safeguarding Adult Partnership achievements in developing and promoting safeguarding practice for the people of Leeds will be supported during 2010/11 by continuing developments in national policy, guidance and profile associated with Safeguarding Adults.

The consultation, Safeguarding Adults: The review of "*No secrets* Guidance on developing and implementing multiagency policies and procedures to protect vulnerable adults from abuse" was initiated on the 16th October 2008 and a Summary of Responses was published on the 17th July 2009. The full report is accessible from the Department of Health website (www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH_102764).

There were a number of key messages from the responses to the consultation. These included the need for stronger national leadership; greater understanding and clarity is around safeguarding is required within the NHS; that local arrangements should be placed on a statutory basis; and that revision and updating is needed to the "No Secrets" guidance.

A written ministerial statement was published on the 19th January 2010 by The Minister of State, Department of Health detailing the Governments response.

Firstly, the Government will establish an Inter-Departmental Ministerial Group (IDMG) on Safeguarding Vulnerable Adults. This group will include Ministers from the Department of Health, Home Office, Ministry of Justice, the Attorney General's Office and the Department for Communities and Local Government. The IDMG will have three roles.

- determine policy and work priorities for the forthcoming year;
- provide a strategic and co-ordination role, and;
- provide public and parliamentary advocacy for this policy area.

Secondly, the Government will introduce new legislation to strengthen the local governance of safeguarding by putting Safeguarding Adults Boards on a statutory footing.

Thirdly, the government is launching a programme of work with representative agencies and stakeholders to support effective policy and practice in safeguarding vulnerable adults. This will include publishing new, comprehensive, multi-agency guidance that establishes clearly the roles and responsibilities for all those involved in safeguarding vulnerable adults during the Autumn of 2010.

This will be built upon and bring together targeted guidance and support materials, which will be developed in the coming months, including:

- A guide to the law on safeguarding, to help professionals understand and effectively use the range of legal powers that can prevent and deal with harm including the Criminal Justice Act 1988, the Fraud Act, the Domestic Violence, Crime and Victims Act 2004, and the Mental Capacity Act 2005;
- Targeted guidance and toolkits for specific professionals, including general practitioners, nurses, housing staff and police officers; and
- The Association of Chief Police Officers has set up a working group under the umbrella of the economic crime portfolio to lead a programme of work to improve our response to financial crime against vulnerable adults.

Subsequently during on the 11th February 2010 Guidance was issued by the Department of Health entitled 'Clinical Governance and Adult Safeguarding: An Integrated Process' as an outcome of the No Secrets Review Consultation, providing Guidance for Health providers as to the relationship between adverse incident reporting, complaints, and safeguarding in order to encourage reporting in a way that supports the investigation and empowers staff in the process.

5.2 The Independent Safeguarding Authority

The Independent Safeguarding Authority set up by the Safeguarding Vulnerable Groups Act 2006, introduced stricter controls from October 2009 in relation to determining those individuals unsuitable to work with children and vulnerable adults in England, Wales and Northern Ireland. The full implementation of this scheme will continue into 2015, however current key milestones include:

12 October 2009

- The definitions of regulated activity and controlled activity came into operation.
- The offences of working in regulated activity while barred and of knowingly allowing someone to work in regulated activity while barred came into effect.
- From this date, Regulated Activity Providers became eligible to ask for enhanced disclosures with barred list checks on anyone they are taking on in regulated activity.
- The new duties on referrals came into operation. This means that Regulated Activity Providers that remove anyone from regulated activity have a duty to refer information to the ISA in certain circumstances.
- A similar duty applies to the responsible person in relation to controlled activity.

April 2010

• Interim requirements for controlled activity come into effect.

Further details on the Independent Safeguarding Authority can be accessed from www.isa-gov.org.uk.

Collectively these national safeguarding developments will complement the continuing development program of the Leeds Safeguarding Adults Partnership Board in achieving continuing success in minimising the risk of harm or exploitation to vulnerable adults within Leeds.

4.3 Regional Developments

In the Autumn of 2009 the Association of Directors of Adult Social Services (ADASS) set up a strategic regional group to oversee the development of safeguarding adults approaches across in the region. A regional development manager was employed to support the implementation of the work plan. The Yorkshire and Humber Strategic Health Authority Lead on Safeguarding Children and Adults was invited to join this strategic group, and over the following months has taken an active part in the work, and encouraged other health colleagues to work in partnership with the ADASS network.

The Strategic Health Authority published its Safeguarding Strategy in November 2009, and has produced a checklist for NHS Chief Executives (both commissioner and provider) covering safeguarding of both children and adults. A regional health operational group has been formed, to mirror the ADASS regional operational group, and health and social care networks are exploring how they can work together to ensure improved joint approaches. Leeds partners

have taken an active part in these networks, enabling useful networking on safeguarding matters prior to the publication of new national guidance and legislation on Safeguarding.

6. Mental Capacity

The Mental Capacity Act 2005 came fully into force in October 2007. The Mental Capacity Act (MCA) is a wide ranging piece of legislation potentially affecting the lives of many thousands of citizens in Leeds. Its main provisions are aimed at legally safeguarding and protecting the interests of the most vulnerable people in our community, people who, for a great variety of reasons, are judged to lack the mental capacity to make significant decisions in relation to their own life and circumstances, including those about their care or treatment.

The Government implemented an additional provision to the Mental Capacity Act, which came into force in April 2009: the Deprivation of Liberty Safeguards (DoLS). DoLS provide legal protection for the most vulnerable people, who lack the capacity to consent, and whom, for their own safety and best interest, need to be accommodated in a registered care home or hospital, and this may have the effect of depriving them of their liberty.

Leeds City Council, in line with the requirements of the MCA, established a Local Implementation Network, known in Leeds as the MCA & DoLS LIN Stakeholder Group to oversee the effective implementation of MCA and DoLS across the City. The LIN comprises of all the statutory partner organisations in Leeds most likely to be affected by the provisions of the MCA (see Appendix F for details). The LIN is chaired by the Deputy Director, Strategic Commissioning and has continued to meet monthly since December 2006. The MCA & DoLS Implementation, Development and Monitoring (IDM) sub-group has been established as the "operational arm" to support the LIN and also meets monthly.

In adherence to Department of Health guidance, it has been agreed during 2009/10 that the MCA LIN will become a sub-group of the Safeguarding Adults Partnership Board from 1st April 2010. The MCA & DoLS IDM will continue as a task group of this sub-group.

Department of Health guidance also recommends that statutory partners closely align the requirements and duties placed on them by the Mental Capacity Act to the safeguarding adults agenda. The Leeds Safeguarding Adults Partnership Support Unit has been working closely with the MCA Project Team to ensure this is effectively undertaken. Progress to date includes:

- The Safeguarding Partnership Unit's Strategy and Risk Manager and one of the Safeguarding Senior Practitioner are members of the MCA& DoLS IDM Sub Group.
- The MCA & DoLS Project Manager is a member of 3 of the existing Safeguarding Board Sub-Groups.
- Leeds has adopted its discretionary powers to use Independent Mental Capacity Advocates in safeguarding investigations and has agreed new procedures for undertaking this.
- Clear links between MCA/DoLS and Safeguarding have been established and the Safeguarding and MCA/DoLS policies and procedures have been updated to accurately reflect links to each other.
- A multi-agency Communication Strategy has been agreed by all partners who attend the Stakeholder and sub group meetings. In addition, communications representatives from the key organisations meet on a regular basis to progress/implement communications actions.
- The Safeguarding Adult Partnership website has been updated to include a MCA/DoLS webpage. It is intended that all partners will link their individual internet/intranet sites to the multi-agency MCA/DoLS website so that all partners receive consistent messages and have access to the same information. All information/messages put on the website have been agreed through the MCA & DoLS IDM sub group.
- MCA and DoLS training has been delivered across the partnership as follows:
 - Basic awareness MCA training to 5442 staff; 2549 LCC, 399 NHS Leeds, 586 LTHT*, 356 LPFT* and 1552 independent and voluntary sector (* part or all this training was delivered/facilitated by the individual organisation themselves).

- \circ In depth further understanding MCA training to 765 staff.
- Focused training courses for Social Care Staff linking MCA to Safeguarding and the Independent Mental Capacity Advocates Service delivered to 200 staff in ASC.
- DoLS training delivered to 570 staff.
- Training delivered by e-learning to 704 staff.
- A multi-agency Organisational Development and Training Strategy for 2010/11 for Safeguarding and MCA/DoLS has been drafted and is currently being agreed with partners. This strategy will include a focus on providing safeguarding and MCA training for Voluntary, Community and Faith sectors and for service users and their family and carers. It will also include training for the Emergency Services.
- Articulate Advocacy continue to provide the commissioned Independent Mental Capacity Advocate and Relevant Person's Representative services in Leeds. Articulate Advocacy also provide additional support in the following areas:
 - Safeguarding
 - Performance and Quality Assurance
 - \circ Communications
 - Organisational Development/Training
 - Policies and Procedures
- Senior representatives from Articulate Advocacy continue to attend both monthly LIN and IDM sub-group meetings. In addition, monthly activity and annual reports are produced and reported to these groups. A copy of the Independent Mental Capacity Advocate annual report for 2008/09 can be obtained from the Leeds Safeguarding Adults website.
- Leeds City Council and Leeds Partnership Foundation Trust has recently been successful in securing grant funding from the Department of Health to provide a number of quality assurance audits in relation to MCA. The areas covered during the audits will include independent file audits and qualitative/inspection work undertaken by Articulate Advocacy and Leeds City Councils' Strategic Commissioning Service. Additional work is also being undertaken to provide quality assurance in relation to DoLS. The results from this work/audits will be used to direct actions needed in both the Organisational Development and Training strategy and Communication Strategy.
- Two MCA Recording Tools, to ensure consistency of information recorded in relation to mental capacity assessments and undertaking best interest decisions, have been devised and fully adopted within Adult Social Care and some partner organisations. These Tools are also used when undertaking safeguarding investigations and have been incorporated into current policies and procedures.

During 2010/11 further work will be undertaken by the MCA/DoLS Project team and the Safeguarding Unit to further embed the requirements of MCA across the partnership. This will include:

- Establishing links between Deputyship, MCA and Safeguarding and ensuring there are adequate arrangements in place to identify, refer and investigate claims of financial abuse.
- Reviewing/establishing systems for compliance with Lasting Powers of Attorney, advance decisions, personal welfare deputies and research projects.
- Delivering effective MCA and DoLS information to the wider public using the media and focused training workshops.
- Delivery of further focused training sessions across the partnership including training for the Police, Fire and Rescue, Probation, Children's Services and Social Landlord/Housing Association services.
- Development of the role of DoLS Coordinators and Safeguarding Senior Practitioners.
- Evaluation of the impact of MCA/DoLS on staff, management and financial resources etc.
- Establishing effective mechanisms to disseminate national messages, relevant case law/case studies and develop procedures for appropriate Court of Protection referrals.

7. Business Plan 2009/10

7.1 Achievements of the 2009/10 Business Plan

The Board has been effective throughout 2009/10 in achieving the ambitious objectives set in the 2008/09 Annual Report. Achievements include the launching of the revised multi-agency procedures, their ratification through partner agencies governance processes, assessment of agency training requirements, agreement of mandatory multi agency training programme, establishment of the serious case review procedure and the implementation of the safeguarding communications strategy. Full details of the Action Plan 2009/10 and the achievement of objectives and timescales is detailed in Appendix G. The two outstanding action areas: completed review of Memorandum of Understanding and the Development of a Safeguarding Adults Charter for Leeds are carried forward into the 2010/11 Business Plan as detailed in Appendix H.

8. Business Plan 2010/11

8.1 Board Member Safeguarding Priorities for 2010/11

During February 2010 the Safeguarding Adults Board identified the priorities to be addressed during 20010/2011. This list details the priorities established by each partnership agency:

Partner	Priority					
Leeds Community HealthCare	Workshop for Board members on the Outcomes of the No Secrets					
	Consultation					
	Capacity and Capability within staff teams to manage the safeguarding					
	agenda					
	– how do we get smarter?					
	– how do we measure this?					
	Communications generally					
	 Public Information 					
	 Public Awareness 					
	Specific tailored safeguarding training for those responsible for the corporate					
	governance of partner organisations, such as chief executives, chief officers,					
	directors, board members and elected members, to ensure that safeguarding					
	is given the priority it requires within organisations.					
Leeds Teaching Hospitals Trust	Review of Policies and Procedures following the learning from the first year.					
	Developing Advocacy and an understanding of when to use advocacy					
	Continued implementation of Training framework					
Leeds Partnership Foundation	Capacity and Capability of workforce					
Trust	Consultation with Key Stakeholders, in particular Mental Health service users					
	Ensuring that Board partnership policies, protocols and procedures are given					
	time to go through the requisite governance requirements in each agency					
	before they go live.					
West Yorkshire Police	Continued Workforce Development					
	Joint Approach to specialist training					
	Focus on Financial abuse in line with ministerial statement and the role of					
	ACPO					
	Improved links with Crown Prosecution Service					
Alliance of Users and Carers	Filling the advocacy gaps to support victims of abuse and neglect,					

	particularly in the context of Self Directed Support					
	Ensuring the reference groups for users and carers get established					
Advocacy Network	Engagement of the 3 rd Sector					
	Establish and embed 3 rd Sector Reference Group					
	Work with Victims to help them to defend themselves					
	Improving Clarity about the IMCA role in Safeguarding					
Training and Workforce	Prioritising resources to increase the pace of delivery of training					
Development sub-group						
Adult Social Care	Bring to completion items that have been started in 2009/10					
	Further develop joint working with Safer Leeds and between children and					
	adult safeguarding					
	Renewed focus on the most vulnerable, that is those in long-term care					
	settings					

These identified priorities from partners form the basis of the Board Business Plan 2010/11. The Board continues to set ambitious objectives in order to safeguard the citizens of Leeds, and has organised these work streams according to the following themes:

- Governance, Leadership and Partnership
- Policies and Procedures
- Training and Workforce Development
- Serious Case Review
- Performance and Quality Assurance
- Communication and Community Engagement, Voice and Influence of Stakeholders

Full details of the Board Business Plan 2010, timescales for completion and responsible groups can be located in Appendix H.

Appendix A: Representation and attendance of Member Organisations, April 2009 to March 2010.

Organisation	Membership Status	April 2009	June 2009	Aug. 2009	Oct. 2009	Dec. 2009	Feb. 2010
Leeds Adult Social Care	Full member	✓	√	~	~	✓	~
Leeds Teaching Hospitals Trust	Full member		~	~	~	~	~
NHS Leeds	Full member	~	~	~	~	~	•
Leeds Partnership Foundation Trust	Full member	✓	~	~	~	~	√
West Yorkshire Police	Full member	✓	~	✓	✓	✓	<
West Yorkshire Probation Service	Full member	✓		~	~		~
West Yorkshire Fire Service	Full member					✓	
Leeds City Council: Community Safety	Full member		✓	~	~		
Leeds City Council Environment and Neighbourhoods	Full member		~		~		~
Leeds ALMOs	Associate member		~		~		~
Leeds Safeguarding Children Board	Associate member	✓					
Leeds City Council Children's Services	Associate member					v	✓
Leeds Voice	Associate member	✓ ✓	✓ 	√	✓	✓	
Leeds Advocacy	Co-opted member	✓ ✓	✓ 	v			×
Leeds Service User and Carer Alliance	Co-opted member	✓		✓	✓	•	•
Care Quality Commission	Co-opted member						 ✓
Leeds City Council Legal Services	Ex-officio member			 ✓ 			
Leeds Safeguarding Adults Partnership Unit	Ex-officio member	✓	✓	~	√	✓	 ✓

Appendix B: Individual Member attendance and representation, April 2009 to March 2010

Organisation	Invitee	Membership	April	June	Aug.	Oct.	Dec.	Feb.
		Status	2009	2009	2009	2009	2009	2010
Leeds Adult Social Care	Sandie Keene, Director of Adult Social Care	Ex-Officio – Accountable Officer				✓		
	Dennis Holmes Deputy Director, Strategic Commissioning	Full member, Chair	~	~	~	~	~	~
	Paul Broughton, Chief Officer, Learning Disability	Full member	~					
	Michele Tynan, Chief Officer, Learning Disability	Full member		~	~	~		~
	David Rosser, Deputising for Michele Tynan	Deputy					~	
	Lynda Bowen, Chief Officer, Support & Enablement	Full member	~				~	~
	Kim Maslyn, Deputising for Lynda Bowen	Deputy		~				
	John Lennon, Chief Officer, Access & Inclusion	Full member		~	~	~	~	
	Richard Graham, Senior Quality Assurance Officer	Observer	✓					
Leeds Teaching Hospitals Trust	Clare Linley, Deputy Chief Nurse/Divisional Nurse Manager	Full member			~			
	Al Sheward, Divisional Nurse Manager	Full member			~	~		~
	Sally Mansfield, Deputising for Claire Linley/Al Sheward	Deputy		~			~	
NHS Leeds	Carol Cochrane Director of Strategic Development & Commissioning for Priority Groups	Full member		✓		✓	✓	
	Diane Boyne, Deputising for Carol Cochrane	Deputy	~		~			~
	Paul Morrin Director of Operations, Care Services, Leeds Community Health Care	Full member		~	~	~	~	~
	Tasnim Ali, Safeguarding Lead, Leeds Community Health Care	Observer					~	~

Organisation	Invitee	Membership Status	April 2009	June 2009	Aug. 2009	Oct. 2009	Dec. 2009	Feb. 2010
	Michele Moran		2000	2000	2000	2000	2000	2010
Leeds Partnership	Director of Service Delivery and Chief Nurse	Full member	✓	~	~			
Foundation Trust	Shola Johnson, Deputising for Michele Moran	Deputy				~		
	Steve Wilcox, Deputising for Michele Moran	Deputy					~	~
	Julie Mason, Safeguarding Lead	Observer		~				
West Yorkshire Police	Gerry Broadbent, Divisional Commander	Full member	~	✓		~		~
	Stuart Piper, Deputising for Gerry Broadbent	Deputy			~		~	
West Yorkshire Probation	Andrew Chandler, Assistant Chief Officer	Full member						
Service	Sarah Jarvis, Deputising for Andrew Chandler	Deputy	~		~	~		
	Neil Moloney, Assistant Chief Officer	Full member						~
Leeds City Council Environment	Bridget Emery Head of Housing Strategy and Solutions	Full member		~		~		
and Neighbourhoods	Nahim Mehmood-Kahn, Deputising for Bridget Emery	Deputy						~
Leeds ALMOs	Claire Warren, Chief Executive, WNW Homes	Associate member		~				
	Paul Reid, Deputising for Claire Warren	Deputy				✓		
	Steve Hunt, Chief Executive, ENE Homes	Associate member						~
LCC: Community Safety	Jim Willson, Chief Officer, Substance Misuse	Full member		~	~	~		
West Yorkshire Fire Service	Nigel Craven, Area District Manager	Full member					~	
	Graham Heath, Area District Manager	Full member						
Leeds Safeguarding Children Board	Bryan Gocke LSCB Manager	Associate member	~					
Leeds City Council	Keith Burton, Deputy Director Children Services	Associate member						~
Children's	Matthew Orton,	Deputy					✓	

Organisation	Invitee	Membership Status	April 2009	June 2009	Aug. 2009	Oct. 2009	Dec. 2009	Feb. 2010
Services	Deputising for Keith Burton	Status	2003	2003	2003	2003	2003	2010
Leeds Voice	Julia Preston, Director (Gipsil)	Associate member	~	1	1	1	1	
	Graham Sephton,							
Board Sub-	Chair: Training and Workforce Development Sub-Group	Associate Member			✓	✓		✓
Groups Chairs	Tracy Cooper, Deputising for	Deputy					 ✓ 	
	Graham Sephton	Deputy						
	Marcus Beacham,							
	Chair: Performance, Audit	Associate				✓	✓	✓
	and Quality Assurance	Member						
	Keith Lawrance,	Associate					✓	*
	Chair: Serious Case	Member						
	Review							
	* Represented by: Emma Mor		guarding	Adults Part	nership			
	Chair: Policies, Procedures and							
	See section: Leeds Safeguardin	×	hip Unit, I	Hilary Paxt				
Leeds Advocacy	Tim Whaley	Co-opted	 ✓ 	✓	✓			✓
Leeds Service	Adult Operations Manager	member						
User and Carer	Joy Fisher,	Co-opted			1	1		
Alliance	Alliance Chair	member	•		•	•	•	•
Care Quality	Peter Westhead	Co-opted						✓
Commission		member				· · · · · · · · · · · · · · · · · · ·		
Leeds City								
Council	Gerry Gillen	Ex-officio			✓			
Legal Services	Corporate Lawyer,	member						
Leeds Safeguarding	Hilary Paxton,	Ex-officio						
Adults	Head of Safeguarding Partnership Unit &	and Associate	✓	✓	✓	✓	✓	✓
Partnership Unit	Chair: Policy, Procedures and	Member						
	Protocols	Wombol						
· · · · · · · · · · · · · · · · · · ·	Emma Mortimer							
	Safeguarding Adults Co-	Ex-officio	✓		✓	✓	✓	✓
	ordinator &	member						
	* Deputising for Keith							
	Lawrance Feb. 2010							
	Christine Clark Safeguarding Adults Co-	Ex-officio		1				
	ordinator	member	~	•				
	Kieron Smith,							
	Safeguarding Strategy and	Observer			1			~
	Risk Manager							
Leeds	Danielle Guest,							
Adult Social	Directorate Support Officer	Ex-officio	✓	✓	✓	✓	✓	 ✓
Care	(Board Meeting minute taker)	member						

Appendix C: Current Membership of the Safeguarding Adults Partnership Board, 31st March 2010

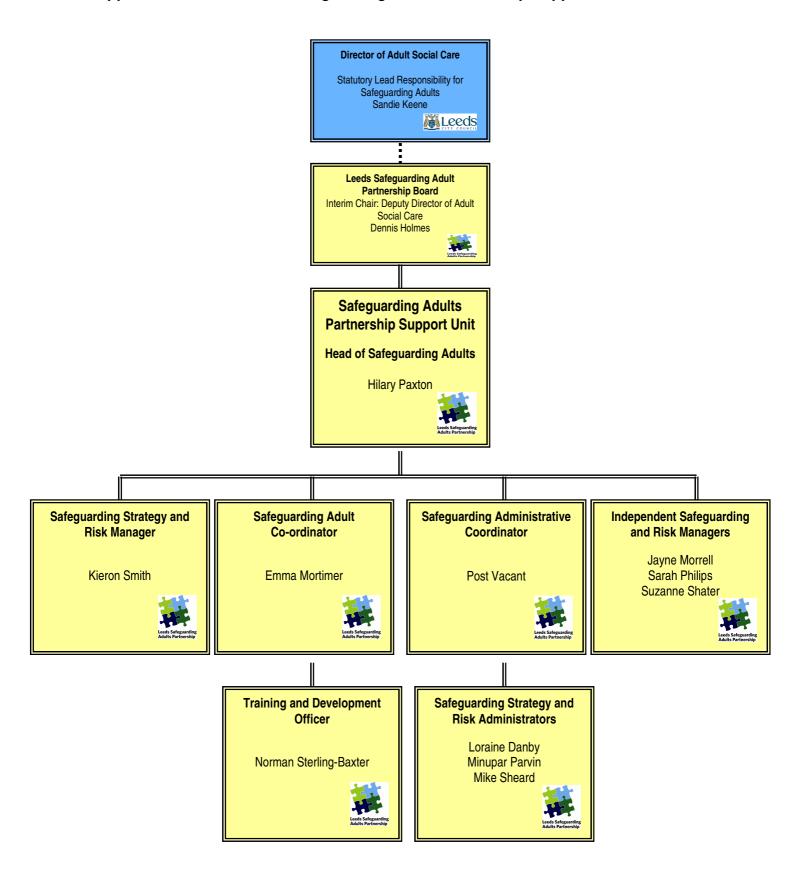
Organisation	Invitee	Membership Status
Leeds Adult Social Care	Sandie Keene, Director of Adult Social Care	Full member
	Dennis Holmes, Deputy Director, Strategic Commissioning	Full member
	John Lennon Chief Officer, Access & Inclusion	Full member
	Michele Tynan, Chief Officer, Learning Disability	Full member
	Lynda Bowen, Chief Officer, Support & Enablement	Full member
Leeds Teaching Hospitals Trust	Al Sheward, Divisional Nurse Manager	Full member
NHS Leeds	Nigel Gray, Director of Strategic Development & Commissioning for Priority Groups	Full member
	Paul Morrin, Director of Operations, Care Services, Leeds Community Health Care	Full member
Leeds Partnership Foundation Trust	Michele Moran, Director of Service Delivery and Chief Nurse	Full member
West Yorkshire Police	Gerry Broadbent, Divisional Commander	Full member
West Yorkshire Probation Service	Kevin Ball,	Full member
West Yorkshire Fire Service	Graham Heath, Area District Manager	Full member
Leeds City Council: Community Safety	Jim Willson, Chief Officer, Substance Misuse	Full member
Leeds City Council Environment and Neighbourhoods	Bridget Emery, Head of Housing Strategy and Solutions	Full member
Leeds ALMOs	Steve Hunt, Chief Executive, ENE Homes Leeds	Associate member

Organisation	Invitee	Membership Status
Leeds Safeguarding Children Board	Bryan Gocke, LSCB Manager	Associate member
Leeds City Council Children's Services	Keith Burton, Deputy Director Children's Services	Associate member
Leeds Voice	Julia Preston, Director	Associate member
Board Sub-Groups Chairs	Graham Sephton, Chair: Training and Workforce Development Sub-Group	Associate member
	Marcus Beacham, Chair: Performance, Audit and Quality Sub-Group	Associate member
	Keith Lawrance, Chair: Serious Case Review Sub-Group	Associate member
	See entry: Hilary Paxton, Leeds Safeguarding Adults Partnership Unit	
Leeds Advocacy	Tim Whaley, Adult Operations Manager	Co-opted member
Leeds Service User and Carer Alliance	Joy Fisher, Service User and Carer Alliance, Chair	Co-opted member
Care Quality Commission	Peter Westhead	Co-opted member
Leeds City Council Legal Services	Gerry Gillen, Corporate Lawyer	Ex-officio member
Leeds Safeguarding Adults Partnership Unit	Hilary Paxton, Head of Leeds Adult Safeguarding Partnership Unit & Chair: Policy, Procedures and Protocols	Ex-officio and Associate member
	Emma Mortimer, Safeguarding Co-ordinator	Ex-officio member
Leeds Adult Social Care	Daniel Guest , Directorate Support Officer (Board Meeting minute taker)	Ex-officio member

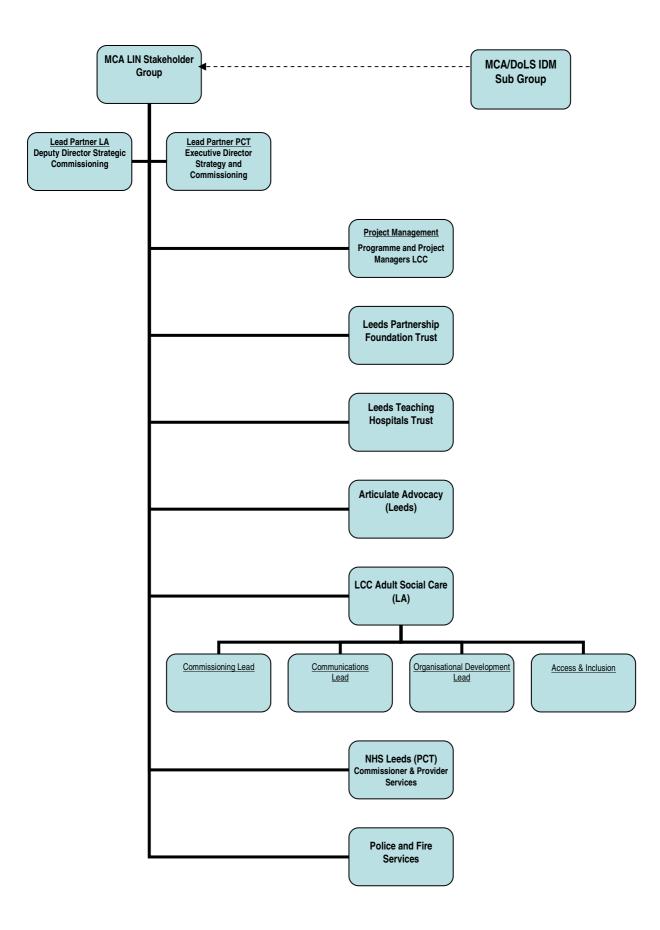
Appendix D: Board Subgroup Chairs and Vice Chairs, 31st March 2010.

Board Subgroup	Chair	Agency	Vice Chair	Agency
Performance, Audit and Quality Assurance	Marcus Beacham	LCC: Community Safety	Richard Graham	Adult Social Care
Policy, Procedures and Protocols	Hilary Paxton	Safeguarding Adults Partnership Unit	Jackie Bolland	Age Concern
Serious Case Review	Keith Lawrance	LCC: Community Safety	Karen Newsome	St. Anne's Community Services
Training and Workforce Development	Graham Sephton	Adult Social Care	Norman Sterling Baxter	Leeds Safeguarding Adults Partnership Support Team

Appendix E. Structure of Safeguarding Adults Partnership Support Unit



Appendix F: Mental Capacity Act & DoLS Local Implementation Network Stakeholder Group Partnership



Appendix G: Achievements of the Partnership against the 2009/10 Business Plan

Action Areas		Start Date Responsib Agency/ Responsib Officers		Status/Comments	Milestone	Target Date (Actual Completion Date)	
Arrangements for safeguarding vulnerable adults are effective across agencies and disciplines.	Ratify procedures through all agencies governance processes	April 09	Safeguarding Partnership / Service users and carers Emma Mortimer (Adult Safeguarding Coordinator), Hilary Paxton (Head of Safeguarding)	Complete	Procedures ratified by all partners and agencies.	Dec-09 (Jun-09)	
	Ensure Memorandum of Understanding (MoU) is maintained and improved in line with the views and expectations of partners	April 09	Dennis Holmes (Chief Officer Commissioning) Hilary Paxton (Head of Adult Safeguarding)	The Memorandum has been maintained throughout the year. Multi-agency review began in March 2010, undertaken by a time-limited task group of the Board. This review will be completed in by summer 2010.	Any amendments to the Memorandum agreed by the Board.	Mar-10	
Arrangements for safeguarding vulnerable adults are coordinated across agencies and disciplines	Agree protocols for Joint Working with Adult Social Care across partner agencies, and with particular regard to identified vulnerability, i.e. homeless unit, community safety, domestic violence leads, etc.	April 09	Safeguarding Partnership / Service users and carers Emma Mortimer (Adult Safeguarding Coordinator)	Partnership work to improve safeguarding of particular vulnerable groups continues. Quality assurance work is overseen by the Performance and Quality Assurance sub- group.	Protocols Agreed QA of case files evidence effective use of protocols baseline and targets to be developed and agreed.	Jun-09 (Jan-09) (Mar-09)	
Increase awareness and understanding of issues and arrangements regarding safeguarding vulnerable adults.	Specify and implement a comprehensive communications and social marketing strategy in relation to adult safeguarding,	April 09	Safeguarding Partnership / Service users and carers / the public Mike Sells (Communications Manager)	Complete. Further work on public awareness has been agreed as a priority for 2010/11 Surveys and quality assurance work continues and is overseen by the Performance and Quality Assurance sub-group.	Marketing strategy is implemented Surveys and quality assurance establish baseline and targets relating to outcome measures.	Jun-09 (Jun-09) Jan-10 (Jan-10)	

	n Areas	Start Date	Responsible Agency/ Responsible Officers	Status/Comments	Milestone	Target Date (Actual Completion Date)
Develop a Safeguarding Adults Charter for Leeds	Partners, agencies, service users, carers and public have information that is accurate, accessible and appropriate in terms of safeguarding standards and are able to take action to shape policy and hold the partnership to account	April 09	Safeguarding Partnership / Service users and carers / the public Hilary Paxton, (Head of Safeguarding Adults)	Agreed that this work should be progressed through the Board reference groups. This will be a priority in 2010/11.	Charter is developed by Adult Safeguarding Partnership board sub-group and ratified by board by Jan 2010 for adoption by partners	Jan-10
Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice	Scope out training requirement at high level and secure resources across agencies.	April 09	Adult Safeguarding Partnership / HR / Practitioners / Service Users and Carers Emma Mortimer (Safeguarding Coordinator), Graham Sephton (Deputy Head of HR)	Complete	Establish and fund a plan which demonstrates a multi-agency commitment and reflects cross - agency training requirements resulting in the effective safeguarding of adults across Leeds	May-09 (Aug-09)
Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice	Agree mandatory multi-agency training programme including training sub-group to incorporate workforce leads.	April 09	Safeguarding Partnership / HR / Practitioners / Service Users and Carers	Complete	Interagency strategy for safeguarding training established. A rolling programme is implemented and targets for numbers to be trained across agencies are met. Targets to	May-09 (Aug-09)
	Identify staff who require specific competencies and training requirements	April 09	Dennis Holmes (Deputy Director, Strategic Commissioning))	Complete	be defined and agreed.	Sep-09 (Sep-09)
	Establish training frequency for all roles and partners	April 09	Hilary Paxton (Head of Adult Safeguarding) Graham Sephton (Deputy Head of HR)	Complete		Sep-09 (Sep-09)
Everyone involved in safeguarding understands the partnership's vision and has the knowledge and skills to deliver effective safeguarding practice	Monitor training via the Training and Quality Assurance subgroups	April 09	Safeguarding Partnership QA sub- group/ HR - Training/ Practitioners/ Service Users and Carers. Stuart Cameron Strickland (Head of Performance) Richard Graham (QA	Monitoring will continue in 2010/11	Establish baseline and agree targets for training key staff across agencies. This evidences that all frontline internal and external staff are aware of how to identify vulnerable adults and respond appropriately to concerns. User experience surveys evidence improved safeguarding experience.	Sep-09 (Sep-09)

Action Areas		Start Date	Responsible Agency/ Responsible Officers Manager)	Status/Comments	Milestone	Target Date (Actual Completion Date)
The serious care review process is effective and the partnership evidence learning and dissemination of good practice	Ensure final draft of serious case review procedure is agreed by the board	April 09	Adult Safeguarding Board Partners Dennis Holmes, (Deputy Director, Strategic Commissioning)	The procedure was adopted and used for the first two serious case reviews. Required revisions discussed by Board October 2009. Work on revising the procedure, following the two serious case reviews continues in 2010/11	The procedure is formally adopted within all partner agencies.	Sep-09 (October 2009)
	Ensure final draft of serious case review procedure is taken through governance structures of statutory partners.	April 09	-	To be completed for revised procedure in 2010/11	Future arrangements for the review of potentially serious cases and criteria are managed within the Serious Case Review and Professional Practice sub-group of the Adult Safeguarding Partnership Board	Mar-10 (Mar-10)
The serious care review process is effective & the partnership evidence learning and dissemination of good practice	Safeguarding Partnership Board conducts serious case reviews using new procedures and revise procedures in line with learning.	April 09	Adult Safeguarding Board Partners Emma Mortimer (Adult Safeguarding Coordinator)	Two serious case reviews were undertaken using serious case review procedure. Revised draft procedures now being developed.	A pilot of two serious case reviews will have been conducted Findings and action reported in report to the board	May-09 (Mar-10) May-09 (Dec-09)
Performance of the board and its sub-groups meets the requirements of the Good Governance Standard in Public Services adopted by the partnership	The work of the Board is reported through the governance structures of the respective partners. Elected members will receive reports through the Adult Social Care Scrutiny Board. The reports to include progress against the plan, the business plan and work programme for the following year.	April 09	Safeguarding Partnership Board / NED's / Elected Members/ Service users and carers Chief Executives / Officers of safeguarding partners	Complete	Annual audits and good governance review, all sub groups have work - plans and deliver them. Annual Report is produced in May accompanied by a business plan for the following year. Quarterly Performance reports are available for examination by agency and Local Government overview and scrutiny arrangements. The work of the board is open to challenge by established group of service users and their carers.	May-09 (May-09)

Action Areas		Start Date	Responsible Agency/ Responsible Officers	Status/Comments	Milestone	Target Date (Actual Completion Date)
Performance of the board and its subgroups meets the requirements of the Good Governance Standard in Public Services adopted by the partnership	The annual report is ratified by the governance structures of safeguarding partners including the Executive Board of the Council and its Overview and Scrutiny Board(s).	April 09	Safeguarding Partnership Board / NED's / Elected Members Adult Safeguarding Board	Complete	Annual Report contains details of volume of activity and quality of outcomes from all partners. Performance improvement and learning points are incorporated into future action plans.	May-09 (Jun-09)

Appendix H: Business Plan 2010/11

Theme	Action Areas	Start Date	Sub-group/ Responsible Agency/ Responsible Officers	Milestone/Stages	Target Completion Date
1. Governance, Leadership and Partnership	1.1 Develop approach to ensure sub-groups work together where necessary and report in a timely way to the Board	April 2010	Sub-group chairs	Revised scheduling of meetings agreed at board	June 2010 Board
	1.2 Agree approach to funding contributions for the Board.	April 2010	Time-limited task-group	Framework included within draft Memorandum of Understanding	August 2010 Board
	1.3 Board partnership policies, protocols and procedures, including serious case review procedures, are given time to go through the requisite governance requirements in each agency before they go live.	April 2010	Time-limited task-group (Sub-group chairs to monitor)	Agreed framework within Memorandum of Understanding	August 2010 Board
	1.4 Dispute Resolution and Escalation Protocol as annex to MoU	April 2010	Time-limited task-group	Agreed protocol within Memorandum of Understanding	August 2010 Board
	1.5 Safeguarding Info Sharing Agreement consistent with 2008 Protocol	April 2010	Time-limited task-group	Agreed protocol within Memorandum of Understanding	August 2010 Board
	1.6 Memo of Understanding Multi-Agency review began in March 2010, undertaken by a time- limited task group of the Board. This review will be completed in by summer 2010.	April 2010	Time-limited task-group	Draft Memorandum of Understanding presented to Board	August 2010 Board
	Agreement at Board Agreement in each agencies governance arrangements			Memorandum of Understanding agreed at board	October 2010 Board
	Sign-off at board			Memorandum signed-off at board	December 2010 Board
	1.7 Further establish links with Crown Prosecution Service	April 2010	Time-limited task-group	Established link with Board	October 2010 Board
	1.8 Agree protocols for Joint Working with Adult Social Care across partner agencies, and with particular regard to identified vulnerability, i.e. homeless unit, community safety (inc. anti- social behaviour and substance misuse), domestic violence leads, children safeguarding	April 2010	Sub-group chairs	Draft protocols presented to board	December 2010 Board
	1.9 Further develop joint working with Safer Leeds and between children and adult safeguarding	April 2010	Sub-group chairs	Established links between agencies.	December 2010 Board

The	eme	Action Areas	Start Date	Sub-group/ Responsible Agency/ Responsible Officers	Milestone/Stages	Target Completion Date
2.	Policies and Procedures	2.1 Develop framework of standards and timescales in relation to the various stages of the safeguarding process.	April 2010	Policies and procedures sub-group	Draft framework of standards presented to board	August 2010 Board
		2.2 Development of further guidance on institutional (Type 4) investigations ensuring a continued focus on the most vulnerable, that is those in long-term care settings	April 2010	Policies and Procedures sub-group	Draft Guidance presented to board.	October 2010 Board
		2.3 Review implications of ministerial statement and the role of ACPO in relation to financial abuse	April 2010	Policies and Procedures Sub-group (with specific reference to the police)	Report to board detailing implications and action planning required	October 2010 Board
		2.4 Guidance on Coordination of Safeguarding investigations when other investigations are ongoing (incident investigation, disciplinary, criminal)	April 2010	Policies and Procedures sub-group	Draft Guidance presented to board.	December 2010 Board
		2.5 Further guidance on Advocacy and an understanding of when to use advocacy	April 2010	Policies and Procedures sub-group	Review partnership policy/guidance in relation to advocacy/IMCA involvement	December 2010 Board
		2.6 Improving Clarity about the IMCA role in Safeguarding	April 2010	Policies and Procedures sub-group	Review partnership policy/guidance in relation to advocacy/IMCA involvement	December 2010 Board
		2.7 Review of Policies and Procedures following the learning from the first year.	April 2010	Policies and Procedures sub-group	Review of partnership policies/ procedures	Feb 2011 Board
		2.8 Review Multi-agency Policy, Procedures and forms	April 2010	Policies and Procedures sub-group	Review Multi-Agency Safeguarding Procedures (Review earlier if new National Guidance issued)	Feb 2011 Board
3.	Training and Workforce Development	3.1 Continued implementation of training framework ensuring partner targets are achieved.	April 2010	Training and Workforce Development sub-group	Review of achievements and areas of development required	Bi-Monthly report
		3.2 Identify learning from sub-groups and reference groups and incorporate into development planning.	April 2010	Training and Workforce Development sub-group	Report on learning and action planning required.	Bi-Monthly report
		3.3 Specific tailored safeguarding training for those responsible for the corporate governance of partner organisations, such as chief executives, chief officers, directors, board members and elected members, to ensure that safeguarding is given the priority it	April 2010	Training and Workforce Development sub-group	Draft report presented to board.	August 2010 Board

Theme	Action Areas	Start Date	Sub-group/ Responsible Agency/ Responsible Officers	Milestone/Stages	Target Completion Date
	requires within organisations.				
	3.4 Workshop for Board members on the Outcomes of the No Secrets Consultation	April 2010	Training and Workforce Development sub-group	Agreement of date and content of workshop at Board	August 2010 Board
	3.5 Agree content and delivery of specialist training.	April 2010	Training and Workforce Development sub-group	Draft model presented to board	August 2010 Board
	3.6 Board agreed resources model for delivering safeguarding training	April 2010	Training and Workforce Development sub-group	Draft model presented to board	October 2010 Board
	3.7 Assessment of capability and capacity amongst partner staff teams.	April 2010	Training and Workforce Development sub-group	Draft assessment report presented to board	December 2010 Board
	3.8 Developed endorsed standard training materials and content across partner agencies	April 2010	Training and Workforce Development sub-group	Draft report presented to board.	December 2010 Board
	3.9 Review of induction processes within partner agencies to ensure safeguarding is fully included.	April 2010	Training and Workforce Development sub-group	Draft report presented to board.	December 2010 Board
	3.10 Training for vulnerable adults (inc. carers) in relation to safeguarding awareness.	April 2010	Training and Workforce Development sub-group	Establishment of training model. Report to board.	February 2011 Board
4. Serious Case Review	4.1 Prioritise action planning following a serious case review (Ensuring that if a single action could have prevented the harm, it must be done as a first priority)	April 2010	Serious Case Review and Professional Practice sub- group	Report to board on prioritised actions.	Bi-Monthly report
	4.2 Monitor achievement of action plans for each serious case review.	April 2010	Serious Case Review and Professional Practice sub- group	Update to board on action plans	Bi-Monthly report
	4.3 Report delayed/unmet action plans issues to the Board on an exceptional basis	April 2010	Serious Case Review and Professional Practice sub- group	Update to board on action plans if required.	Bi-Monthly report
	4.4 Revise serious case review procedure and bring to the Board for sign-off	April 2010	Serious Case Review and Professional Practice sub- group	Draft report presented to board.	August 2010 Board
5. Performance and Quality Assurance	5.1 Provide analysis to the Board of regular performance data	April 2010	Performance and Quality Assurance sub-group	Performance data reports	Bi-Monthly report
	5.2 Ensure audit of partner agencies is repeated in late spring 2010 to provide evidence of	April 2010	Performance and Quality Assurance sub-group	Draft report presented to board.	August 2010 Board

The	eme	Action Areas	Start Date	Sub-group/ Responsible Agency/ Responsible Officers	Milestone/Stages	Target Completion Date
		development since baseline audit				
		5.3 Develop approaches to evaluating improvement in practice following training and workforce development initiatives. Work with Training and Workforce Development sub- group to develop "Value added" and "Return on investment" measures.	April 2010	Performance and Quality Assurance sub-group / Training and Workforce Development sub-group	Draft framework reported to board.	October 2010 Board
		5.4 Monitor achievement of standards and timescales in relation to the various stages of safeguarding process.	April 2010	Performance and Quality Assurance sub-group	Draft quality framework presented to board.	October 2010 Board
		5.5 Develop approaches for monitoring alleged victim and family experience of safeguarding process. Work with reference groups to ensure relevance to alleged victims and carers	April 2010	Performance and Quality Assurance sub-group	Draft quality framework presented to board.	December 2010 Board
6.	Communication and Community Engagement, Voice	6.1 Ensure the user and carer reference group inform work with victims, to help them to protect themselves	April 2010	User Reference Group/Carers Reference group	Reference group report to board (inc. subgroup chairs)	Bi-Monthly report
	and Influence of Stakeholders	6.2 Communications strategy to include public awareness and public information	April 2010	Head of Safeguarding/ Reference groups	Communications strategy report presented to board.	August 2010 Board
		 6.3 Establish and embed reference groups: User Reference Group Carer Reference Group Third Sector Reference Group 	April 2010	Head of Safeguarding	Report on progress Bi-Monthly Groups established by the respective timescale:	 August Board December Board October Board
		6.4 Work with ASC and PCT commissioners to ensure that the advocacy gaps are filled to support victims of abuse and neglect, particularly in the context of Self Directed Support	April 2010	Head of Safeguarding	Draft report on identified gaps and action plan.	October 2010 Board
		6.5 Develop approaches to consultation with Key Stakeholders, in particular Mental Health service users	April 2010	Reference groups	Consultation framework presented to board.	December 2010 Board
		6.6 Develop a Safeguarding Adults Charter for Leeds to ensure citizens of Leeds have information that is accurate, accessible and appropriate in terms of safeguarding standards and are able to take action to shape	April 2010	Head of Safeguarding/ User Reference group/ Carers Reference group	Draft Charter presented to board	February 2011 Board

Theme	Action Areas	Start Date	Sub-group/ Responsible Agency/ Responsible Officers	Milestone/Stages	Target Completion Date
	policy and hold the partnership to account				
	6.7 Ensure the third sector reference group develops a framework for the engagement of the Third sector in safeguarding	April 2010	Third Sector Reference group	Draft framework presented to board	February 2011 Board

Appendix I: Leeds Safeguarding Adults Partnership Statement of Purpose

Leeds Safeguarding Adults Partnership Statement of Purpose

"Leeds - A Safe Place for Everyone"

The Principles

The objective of the Leeds Safeguarding Adults Partnership Board is for:

All the citizens of Leeds, irrespective of age, race, gender, culture, religion, disability or sexual orientation to live in safety and be free from abuse or the fear of abuse.

This includes:

- Knowing that all citizens have a responsibility to 'look out' for each other, as friends, relatives, good neighbours and attentive citizens and professionals.
- Empowering and informing individuals so that they know how to "talk to someone" if they suspect that any person or group who may be vulnerable is, or may be, a target for abuse, and how to get something done about it, without fear of reprisal.

The Board's vision of what it wants to achieve:

The Leeds Safeguarding Adults Partnership Board wants to develop an overarching picture of the needs of those in our community who are, or may be, vulnerable to abuse, and to use this picture to allow the Safeguarding Board to address abuse where it does occur, and to prevent abuse where it is likely to occur. Leeds Safeguarding Adults Board wants to:

- Achieve effective, respectful and valued safeguarding outcomes for:
 - *Potential victims of abuse,* for example, by developing new and innovative preventative and supportive services to help those who may be at risk of abuse to recognise this and to take action to reduce the likelihood of such abuse.
 - Victims of abuse, for example, by making sure they have the ability to speak out and the services are in place to ensure they are rendered safe and to support them in the recovery from such abuse, including recovering trust where care services may have failed them, and regaining the ability to feel safe in their neighbourhoods.
 - Perpetrators of abuse

In the case of **individual perpetrators** by seeking to provide help and support to address abusive behaviours; seeking legal prosecution of crimes; barring unsuitable individuals from working with people who are vulnerable and need support in their day to day lives; or by ensuring that they receive training and high quality supervision if they are employed in a care setting.

In the case of **institutional abuse** where the perpetrator is a service provider, to use the providercommissioner relationship to support providers to improve the recruitment, training and development of staff and to ensure their systems are robust, and where this is not successful, to re-commission services from different providers.

- Learn and develop from national policy and reports, for example, by undertaking Serious Case Reviews, Post Incident Reviews and Serious Untoward Incident Reviews and including the learning from these in the development of Safeguarding in Leeds; and reflecting our experiences in government consultations.
- Monitor, review and continuously improve the services we provide, commission and hold responsibility for; by, for example, robust performance and quality assurance processes and by involving those at risk in the review and development process.

To do all of these things well, we believe it is important to take action at all levels and at the following three stages:

- 1. At the first stage, preventing abuse from happening; through the development of new and innovative services guided by continuous research into the likely sources and locations of abuse, through partnership with other statutory and voluntary organisations.
- 2. At the second stage, ensuring that abuse is promptly identified, and referred to professionals who will develop and monitor interventions to stop the abuse and promote recovery
- 3. At the third stage, supporting people who have suffered abuse to recover from that abuse and to regain trust in those around them

This vision is spurred by the knowledge that many people who have suffered abuse do not, or cannot, seek help for themselves. This means that we must be single-minded in our efforts to prevent abuse and support individuals to "tell someone".

We want everyone to know that no-one should tolerate or be exposed to abusive, harmful, or discriminatory situations.

Appendix J

The Leeds Safeguarding Adults Partnership Training & Workforce Development Framework

Key safeguarding roles

Training Level	Safeguarding Role
1	Alerter The duty to pass on safeguarding concerns appropriately
2	Referrer How to deal with concerns and refer appropriately
3	Investigator Responding to, and investigating abuse
4	Safeguarding Coordinator (and Other Specialist Roles) Coordinating enquiries and overseeing the safeguarding assessment and its outcome

Accountabilities and competencies map for key safeguarding adults roles

Training Level	Safeguarding Role	What you are accountable for	Knowledge and skills you need
1	Alerter The duty to pass on safeguarding concerns appropriately	 All Alerters must: Recognize the potential causes and indicators of abuse Fulfil duty to pass on any disclosures or allegations Fulfil duty to pass on any concerns about potential abuse or neglect address any immediate safety or protection needs record incidents in workplace records, including decisions made under the Mental Capacity Act (2005) 	 You can explain What 'abuse', 'safeguarding', and 'vulnerable adult' are How institutional abuse can occur and how it can be tackled and prevented The circumstances in which you would raise concerns with your supervisor/manager types of abuse and how to recognize them within your work environment what to do if you witness or suspect abuse is taking place your individual responsibilities within Safeguarding procedures Why you record decisions made on peoples behalf Critical skills risk awareness taking decisions acting positively communication recording information

Training Level	Safeguarding Role	What you are accountable for	Knowledge and skills you need
2	Referrer How to deal with concerns and refer appropriately	 All referrers must: Assess the initial alert and decide whether to make a referral Take forward safeguarding adult cases beyond initial reporting Make referrals Put in place support for the member of staff dealing with the situation Identify if disciplinary procedures are necessary Take disciplinary action where appropriate Understand the implications of the Mental Capacity Act (2005) and its links to Safeguarding Record incidents in workplace records, including decisions made under the Mental Capacity Act (2005) and decisions about referral/non-referral 	 You can explain All of Level 1 plus the complexities of abuse situations the process for verification and preservation of evidence how safeguarding adult investigation, disciplinary procedures and any criminal proceedings interface – and which should take priority the types of support your staff might need consent and capacity issues in relation to safeguarding Legislation, including MCA, to a sufficient level to apply safeguarding procedures When and why it is appropriate to involve the police <i>Critical skills</i> Risk assessment Taking decisions Acting positively Communication Gathering information Recording information

Training Level	Safeguarding Role	What you are accountable for	Knowledge and skills you need
3	Investigating Officer Responding to, and investigating abuse	 All investigators must: Collect information about alleged abuse or neglect Interview people relevant to the investigation Share information – safely and effectively Use criminal and/or disciplinary investigations, in conjunction with the Police as necessary Develop an effective initial safeguarding response Prepare a report to inform a safeguarding case conference 	 You can explain All of levels 1 and 2 plus The principles, processes and best practice skills involved in undertaking investigative work, including interviewing Legal and other frameworks for safeguarding The joint and organizational roles and responsibilities for investigating safeguarding concerns How collaborative working can improve the investigation process How to manage evidence effectively The protocols and agreements for information sharing between agencies <i>Critical skills</i> Risk assessment Risk management Taking decisions Acting positively Communication Interviewing Recording information and decisions Analysing information Team working Planning and prioritizing Report writing

	Working collaboratively
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Training Level	Safeguarding Role	What you are accountable for	Knowledge and skills you need
4	Safeguarding Co-ordinator Co-ordinating investigations and overseeing the investigating officer	 All Safeguarding Co-ordinators must: Make decisions on the need to investigate Decide if the person is a vulnerable adult, meets the threshold for safeguarding procedures Allocate a case to an investigator Identify alternative responses to an investigation, and making sure that this decision is recorded Co-ordinate investigations into alleged abuse and neglect Consult the police regarding safeguarding incidents Coordinate and chairing strategy meetings Coordinate and monitor investigations Oversee the set up of safeguarding case conferences Provide information about activity and outcomes to Independent Safeguarding and Risk Managers Develop interim protection plans Present a safeguarding plan in a report 	 You can explain: All of levels 1, 2 and 3 plus The role and responsibilities of Safeguarding Co-ordinators The thresholds for entering safeguarding procedures The different types of response in safeguarding adults When suspension would be appropriate and how it would be carried out When it would be appropriate to contact the police on a safeguarding incident The purpose of strategy meetings, case conferences and reviews How to conduct a safeguarding strategy or strategy review meeting The information that should be provided to Safeguarding Adults Co-ordinators The factors that need to be considered in setting up protection plans Critical skills: Risk assessment and Risk management Taking decisions Acting positively Communication Interviewing Recording information/decisions Analysing information Team working Planning and prioritizing Report writing Working collaboratively Chairing strategy meetings

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Agenda Item 12

Originator: Sandra Newbould

Tel: 247 4792

Report of the Head of Scrutiny and Member Development

Scrutiny Board: SCRUTINY BOARD (Adult Social Care)

Date: 19th July 2010

Subject: Co-opted Members

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
Ward Members consulted (referred to in report)	Narrowing the Gap

1.0 **Purpose of the report**

1.1 The purpose of this report is to seek the Scrutiny Board's formal consideration for the appointment of co-opted members to the Board.

2.0 Background

- 2.1 For a number of years the Council's Constitution has made provision for the appointment of co-opted members to individual Scrutiny Boards. For those Scrutiny Boards where co-opted members have previously been appointed, such arrangements have tended to be reviewed on an annual basis, usually at the beginning of a new municipal year. However, the appointment of co-opted members has not been considered consistently across all Scrutiny Boards.
- 2.2 At the Adult Social Care meeting on the 23rd of June 2010 the Board resolved to consider co-opting a member from Leeds LINk.

3.0 Arrangements for appointing co-opted members

General arrangements

- 3.1 It is widely recognised that in some circumstances, in particular where there is some specialist knowledge or skill, co-opted members can significantly aid the work Scrutiny Boards. This is currently reflected in Article 6 (Scrutiny Boards) of the Council's Constitution, which outlines the options available to Scrutiny Boards in relation to appointing co-opted members. In general terms, Scrutiny Boards can appoint:
 - Up to five non-voting co-opted members for a term of office that does not go beyond the next Annual Meeting of Council ; and/or,

• Up to two non-voting co-opted members for a term of office that relates to the duration of a particular and specific scrutiny inquiry.

4.0 Issue to consider when seeking to appoint co-opted members

- 4.1 In considering or seeking the appointment of co-opted members, Scrutiny Boards may find it useful to consider that co-opted members should:
 - Add value to the work of the Scrutiny Board and/or specific inquiry, by having some specialist skill or knowledge
 - Be considered as representatives of wider groups of people. For example, service user representatives, voluntary or community groups etc.
 - Not be seen as a replacement to professional advice from officers;
 - Be mindful about the extent of any potential conflicts of interest;
- 4.2 Despite the lack of any national guidance, what is clear is that any process for appointing co-opted members should be open, effective and carried out in a manner which seeks to strengthen the work of Scrutiny Boards.
- 4.3 In addition, when considering the issue of co-opted members, Scrutiny Boards should also be mindful of the role of expert witnesses and seeking information / evidence from a variety of different sources to help fulfill the objectives of the work programme and/or a specific inquiry.

5.0 Scrutiny Board (Adult Social Care)

- 5.1 The following non-voting co-opted appointments have been made to the Adult Social Care Board so far:
 - A representative of the Alliance Service Users and Carers Ms Joy Fisher
 - A representative of Equality Issues Mrs Sally Morgan

Leeds Local Involvement Networks (LINk)

- 5.2 The Scrutiny Board is advised to consider the role of the Leeds Local Involvement Network (LINk). In summary, the LINk acts as the successor to the Patient and Public Involvement Forums, but with an extended remit covering social care. Run by local people and groups, the role of a LINk is to promote involvement; to find out what people like and dislike about local services; monitor the care provided by services; and use LINk powers to hold services to account.
- 5.3 Under provisions in the Local Government and Public Involvement in Health Act 2007, the local LINk has the right to refer both health and social care matters to the relevant Scrutiny Board. In turn, this places responsibility on the appropriate Scrutiny Board to acknowledge any such referrals and keep the LINk informed about what actions, if any, will be taken.
- 5.4 Locally, in August 2008, the Shaw Trust was appointed as the host organisation to support the work of the Leeds LINk. Since that time it has been working to get a wide range of people and organisations involved in the LINk.

Leeds LINk representatives as co-opted members

5.5 Given the role and function of LINks, the relationship between the Leeds LINk and the Council's Scrutiny Boards will be key. The Board may therefore wish to give

consideration to seeking nominations from Leeds LINk for representatives to act as non-voting co-opted members on the Board during 2010/11.

6.0 Recommendation

6.1 In line with the options available outlined in this report, Members are asked to consider the appointment of co-opted member of the LINk to the Scrutiny Board.

7.0 Background Papers

• The Council's Constitution

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Agenda Item 13



Originator: Sandra Newbould

Tel: 247 4792

Report of the Head of Scrutiny and Member Development

Scrutiny Board (Adult Social Care)

Date: 19th July 2010

Subject: Scrutiny Board (Adult Social Care) – Work Programme

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
	Narrowing the Gap

1.0 INTRODUCTION

- 1.1 Attached at Appendix 1 is the current work programme for the Scrutiny Board (Adult Social Care) for the remainder of the current municipal year.
- 1.2 Also attached for Members consideration is an extract from the Forward Plan of Key Decisions for the period 1 July 2010 to 31st October 2010 as Appendix 2.
- 1.3 The Executive Board Minutes for the meeting held on the 22nd June 2010 are presented at Appendix 3.

2.0 WORK PROGRAMME MATTERS

- 2.1 The current work programme (Appendix 1) provides an indicative schedule of items/ issues to be considered at future meetings of the Board. The work programme should be considered as a live document that will evolve over time to reflect any changing and/or emerging issues that the Board wishes to consider.
- 2.2 The work programme also provides an outline of other activity being undertaken on behalf of the Board outside of the formal meetings cycle.

3.0 RECOMMENDATIONS

- 3.1 From the content of this report, its associated appendices and discussion at the meeting, Members are asked to:
 - 3.1.1 Note the general progress reported at the meeting;
 - 3.1.2 Receive and make any changes to the attached work programme; and,
 - 3.1.3 Agree an updated work programme.

4.0 BACKGROUND PAPERS

None.

Item	Description	Notes	Type of item
Meeting date – 23 rd June 20	10		
Legislation and Constitutional Changes	To receive and consider a report of the Head of Scrutiny and Member Development on proposed changes to the Council's Constitution in relation to Scrutiny.		В
Co-opted Members	To receive and consider a report of the Head of Scrutiny and Member Development on Co-opted Members.		В
20010/11 Work Programme	Input to the Boards Work Programme 2010/11 - Sources of Work and Establishing the Boards Priorities and Determining the Work Programme 2010/11.		В
Inquiry into Personal Budgets and Self Directed Support – Response from Director and Executive Board	To receive and update on the formal response to the inquiry by the Director(s) identified in the recommendations and the views of the Executive Board	This report submitted to Executive Board in May 2010	РМ

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Meeting date – 19 th July 201	10		
Performance Management	 Quarter 4 information for 2009/10 (Jan-March) Adaptations Performance Information 	All Scrutiny Boards receive performance information on a quarterly basis	PM
Draft Mental Health Inquiry	Supporting Working Age Adults with severe and Enduring Mental Health Problems - The draft report is brought before the board for consideration and where the content is agreed, its approval.		PM/D
Commissioning in Adult Social Care	To consider an update report on commissioning within Adult Social Services. Including the Independent Review of Leeds Neighbourhood Networks. (NNS report to be in circulation 13 th July 2010)	6-monthly report. – Previous March 10 Lead Officer – Dennis Holmes/ Tim O'Shea	PM
LINk Annual Report			
Co-opted Members	To receive and consider a further report of the Head of Scrutiny and Member Development on Co-opted Members.		

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Safeguarding Board – Annual Report	The board is requested to consider the Annual report and make recommendation as necessary.	The report is scheduled to be presented at the xxx Executive Board.	РМ
Meeting date – 22 nd Septem	ber 2010		
Inquiry into Adaptations – Performance Updates and Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board June 2009		PM MSR
Performance Management	 Quarter 1 information for 2010/11 (April -June) Recommendation 2+5+7 – SDS inquiry Report Adaptations Performance Information 	All Scrutiny Boards receive performance information on a quarterly basis	РМ
Homecare Provision and Domiciliary Care Strategy	Performance Report on homecare provision across the city, including independent sector providers. Domiciliary Care Strategy due to be presented to Executive Board Aug 2010	Last update November 2009	РМ

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Inquiry into Transitional Arrangements and Independence Wellbeing and Choice Statement – Response from Director and Executive Board	To receive and update on the formal response to the inquiry by the Director(s) identified in the recommendations and the views of the Executive Board	Scheduled for Exec Board July 2010	PM
Inquiry into Transitional Arrangements Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board 11 May 2010	Scheduled for Exec Board July 2010	PM MSR
Leeds Strategic Plan and Vision	To receive a formal consultation report. This will provide details of proposed Vision aims, Local Strategic Plan and Business Plan priorities.	Lead Officer – Jane Stageman	DP
Care Quality Commission – self assessment report	To receive an update on the self assessment report due to be submitted to the Care Quality Commission which will determine the annual rating for the service.	Lead Officer – Sandie Keene (this may be moved to July 2010)	PM
2010/11 Inquires Terms of Reference	To receive and agree drafted terms of reference for the 2010/11 Scrutiny Board Inquires	Provisionally: Domiciliary Care and Reablement Residential Care for Older People	

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Meeting date – 6 th October	2010		
Scope for Inquiry - Residential Care for Older People	Single Item Agenda	Site Visits to be conducted by Board prior to this meeting.	
Meeting date – 10 th Novemb	per 2010		
Leeds Strategic Plan and Vision	Scrutiny Board involvement in target setting process, linked to the Leeds Strategic Plan and Business Plan priorities	Lead officer – Jane Stageman	DP

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Inquiry – Residential Care For Older People		Continuation of inquiry from October	
Meeting date – 15 th Decem	ber 2010		
Adult Social Services- Annual Review Report (2009/10)	To consider the outcome of the annual rating review undertaken by the Care Quality Commission for 2009/10	Scheduled to be presented to Executive Board xx/xx/xx	PM
Recommendation tracking for Mental Heath Inquiry.	To receive a performance update and consider progress made from recommendations made by ASC Board July 2010. Report to include update on MHNA and three year commissioning plan.		

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Performance Management	 Quarter 2 information for 2010/11 (July - Sept) Recommendation 2+5+7 – SDS inquiry Report Adaptations Performance Information 	All Scrutiny Boards receive performance information on a quarterly basis	PM
Inquiry into Personal Budgets and Self Directed Support Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board March 2010		PM MSR
Meeting date – 12 th January	y 2011		
Leeds Strategic Plan and Vision	Composite report to be submitted to Scrutiny Board for agreement prior to submission to Executive Board as part of the Budget and Policy Framework	Lead Officer – Jane Stageman	DP
Inquiry into Adaptations – Performance Updates and Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board June 09		PM MSR
Commissioning in Adult Social Care	To consider an update report on commissioning within Adult Social Services. Including Rec 6 – Mental Health Inquiry if not resolved by Dec 2010	6-monthly report. – Previous July 2010. Lead Officer – Dennis Holmes/ Tim O'Shea	РМ

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item		
Meeting date – 16 th Februar	y 2011				
Safeguarding Update	To consider an update report since the implementation of performance measures to improve Adult Safeguarding.	Six monthly update since the presentation of the Annual Report . Lead Officer – Dennis Holmes or Independent Chair			
Statement IWC Action Plan Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board 11 May 2010	Scheduling for Exec Board July 2010	PM MSR		
Meeting date – 16 th March	Meeting date – 16 th March 2011				

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item	
Homecare Provision	Performance Report on homecare provision across the city, including independent sector providers.	Last update September 2010	PM	
Performance Management	 Quarter 3 information for 2010/11 (Oct - Dec) Recommendation 2+5+7 – SDS inquiry Report Adaptations Performance Information 	All Scrutiny Boards receive performance information on a quarterly basis	РМ	
Inquiry into Personal Budgets and Self Directed Support Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board March 2010		PM MSR	
Meeting date – 13 th April 2011				
Inquiry Reports and Statements	Board to agree inquiry reports and statements.			

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Item	Description	Notes	Type of item
Annual Report	To agree the Board's contribution to the annual scrutiny report		
Inquiry into Transitional Arrangements Recommendation Tracking	To receive a performance update and consider progress made from recommendations made by ASC Board 11 May 2010		PM MSR

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Working Groups				
Working group	Membership	Progress update	Dates	
Proposals working group	Vacancies		Suggested Dates	
Domicilliary Care and Reablement	Cllr Ted Hanley Cllr Valerie Kendall Cllr Judith Chapman Sally Morgan Joy Fisher	Terms of Reference to be agreed 22 nd September 2010.	Provisional Dates 28 th September 2010 (2 – 4pm) 7 th October 2010 (1:30 – 3:30) 21 st October 2010 (2pm – 4pm) 10 th November 2010 (2pm – 4pm)	

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in

Unscheduled / Potential Items				
Item	Description	Notes		
Day Centre Review	Further to the special meeting in August 2009. The board may wish to consider the impact of the changes implemented and if further investigation needs to be made into this area.	Lead Officer -		

Key:			
RFS	Request for scrutiny	MSR	Monitoring scrutiny recommendations
PM	Performance management	В	Briefings (Including potential areas for scrutiny)
RP	Review of existing policy	SC	Statutory consultation
DP	Development of new policy	CI	Call in





FORWARD PLAN OF KEY DECISIONS

1 July 2010 – 31 October 2010

Key Decisions	Decision Maker	Expected Date of Decision	Proposed Consultation	Documents to be Considered by Decision Maker	Lead Officer (To whom representations should be made and email address to send representations to)
Disabled Facilities Grant 2010/11 Capital Scheme 98040. Category C DOD Authority to spend for a category C capital scheme	Chief Officer Environmental Services	1/7/10	Consultations are ongoing with Exec Member E&N and regular scrutiny board reports.	Design and Cost report/DDN	Chief Officer Environmental Services andy.beattie@leeds.go v.uk
Provision of Stair Lift contracts for the ALMO's and BITMO Adecision is required to extend the current contracts for the provision of stair lifts for the ALMO's and BITMO so they conclude when the newly procured contracts commence in April 2011	Director of Environment and Neighbourhoods	1/7/10	Previously undertaken	None.	Director of Environment and Neighbourhoods John.Statham@leeds. gov.uk

Key Decisions	Decision Maker	Expected Date of Decision	Proposed Consultation	Documents to be Considered by Decision Maker	Lead Officer (To whom representations should be made and email address to send representations to)
Award of care and support contract(s) for 17 bed autism supported living service (Branding Court) from autism supported living framework agreement To agree the award of the contracts for the service	Director of Adult Social Services	1/7/10	Service users and carers will be involved in selecting providers from the framework agreement	A Delegated Decision Panel Report	Director of Adult Social Services helen.gee@leeds.gov. uk
Neighbourhood Network Services Review outcome and approval of the way forward for the award of contracts	Executive Board (Portfolio: Adult Health and Social Care)	21/7/10	Neighbourhood Network Review Panel	The report to be issued to the decision maker with the agenda for the meeting	Director of Adult Social Services dennis.holmes@leeds. gov.uk
Self Directed Support Recent progress report on SDS implementation and agree start date for SDS and all new customers	Executive Board (Portfolio: Adult Health and Social Care)	21/7/10		The report to be issued to the decision maker with the agenda for the meeting	Director of Adult Social Services john.lennon@leeds.go v.uk
Domiciliary Care Strategy To approve proposed changes including the development of a reablement service	Executive Board (Portfolio: Adult Health and Social Care)	25/8/10	Area Committees and Ward Councillors	The report is to be issued to the decision maker with the agenda for the meeting	Director of Adult Social Services lynda.bowen@leeds.g ov.uk

Page 155

Key Decisions	Decision Maker	Expected Date of Decision	Proposed Consultation	Documents to be Considered by Decision Maker	Lead Officer (To whom representations should be made and email address to send representations to)
Adaptation Strategy Endorsing results of detailed bid solution phase. To agree the Adaptation Strategy for implementation	Executive Board (Portfolio: Neighbourhoods and Housing)	25/8/10	Previously undertaken	The report to be issued to the decision maker with the agenda for the meeting	Chief Officer Environmental Services helen.freeman@leeds. gov.uk
Residential Care Strategy for Older People in Leeds Approval to consult on options for future provision of long term residential care services	Executive Board (Portfolio: Adult Health and Social Care)	13/10/10	All stakeholders	The report to be issued to the decision maker with the agenda for the meeting	Director of Adult Social Services dennis.holmes@leeds. gov.uk

<u>NOTES</u>

Key decisions are those executive decisions:

- which result in the authority incurring expenditure or making savings over £250,000 per annum, or
- are likely to have a significant effect on communities living or working in an area comprising two or more wards

Executive Board Portfolios	Executive Member
Resources and Corporate Functions	Councillor Keith Wakefield
Development and Regeneration	Councillor Richard Lewis
Environmental Services	Councillor Thomas Murray
Neighbourhoods and Housing	Councillor Peter Gruen
Children's Services	Councillor Judith Blake
Leisure	Councillor Adam Ogilvie
Adult Health and Social Care	Councillor Lucinda Yeadon
Leader of the Conservative Group	Councillor Andrew Carter
Leader of the Liberal Democrat Group	Councillor Stewart Golton
Leader of the Green Group	Councillor Ann Blackburn
Advisory Member	Councillor Jane Dowson

In cases where Key Decisions to be taken by the Executive Board are not included in the Plan, 5 days notice of the intention to take such decisions will be given by way of the agenda for the Executive Board meeting.

Page 158

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EXECUTIVE BOARD

TUESDAY, 22ND JUNE, 2010

PRESENT: Councillor K Wakefield in the Chair

Councillors A Blackburn, J Blake, A Carter, S Golton, P Gruen, R Lewis, T Murray, A Ogilvie and L Yeadon

Councillor J Dowson – Non-voting advisory member

1 Chair's Opening Remarks

The Chair welcomed all in attendance to the meeting and thanked his predecessors, Councillors A Carter and Brett, for the equitable way in which they had conducted previous Board meetings.

- 2 Exempt Information Possible Exclusion of the Press and Public RESOLVED – That the public be excluded from the meeting during consideration of the following parts of the agenda designated as exempt on the grounds that it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the public were present there would be disclosure to them of exempt information so designated as follows:-
 - (a) Appendix 2 to the report referred to in Minute No. 14 under the terms of Access to Information Procedure Rule 10.4(3) and on the grounds that the appendix contains information relating to the business and financial affairs of the Council, and disclosure of such information would, or would be likely to, prejudice the commercial interest of the Council in securing best value for money solutions in the future.
 - (b) The appendices and the Final Business Case (FBC) document referred to in Minute No. 15 under the terms of Access to Information Procedure Rule 10.4(3) and on the grounds that publication could prejudice the Council's commercial interests, as both the appendices and the FBC (lodged with the clerk to this Executive Board and available for inspection by Members of Executive Board) include matters where final negotiations on the Contract are not yet complete, and these negotiations are confidential between the City Council, the Local Education Partnership (LEP) and the Environments for Learning (E4L) Consortium. In addition, both the appendices and the FBC contain sensitive commercial information supplied to the City Council by E4L. In these circumstances it is considered that the public interest in not disclosing this commercial information outweighs the interests of disclosure.
 - (c) Appendix 1 to the report referred to in Minute No. 21 under the terms of Access to Information Procedure Rule 10.4(3) and on the grounds that

the information contained within the appendix relates to the financial or business affairs of a particular person, and of the Council. This information is not publicly available from the statutory registers of information kept in respect of certain companies and charities. It is considered that since this information was obtained through one to one negotiations for the disposal of the property/land then it is not in the public interest to disclose this information at this point in time. Also it is considered that the release of such information would or would be likely to prejudice the Council's commercial interests in relation to other similar transactions in that prospective purchasers of other similar properties about the nature and level of consideration which may prove acceptable to the Council. It is considered that whilst there may be a public interest in disclosure, much of this information will be publicly available from the Land Registry following completion of this transaction and consequently the public interest in maintaining the exemption outweighs the public interest in disclosing this information at this point in time.

3 Declaration of Interests

Councillor Blake declared a personal interest in the item referred to in Minute No. 20, as a trustee of the Health For All organisation.

Councillor Murray declared a personal interest in the item referred to in Minute No. 16, as a Director of Learning Partnerships.

Councillor Murray declared a personal and prejudicial interest in the item referred to in Minute No. 5, due to his involvement in a charitable organisation involved in the running of a Kirkgate Market stall.

Councillor Wakefield declared a personal interest in the item referred to in Minute No. 10, as a stakeholder in Tiger 11.

Further declarations of interest were made at later points in the meeting (Minute Nos. 19 and 24 refer).

4 Minutes

RESOLVED – That the minutes of the meeting held on 19th May 2010 be approved as a correct record.

DEVELOPMENT AND REGENERATION

5 Deputation to Council - The National Federation of Market Traders on behalf of Kirkgate Market Traders regarding the Strategy for Leeds Market

The Director of City Development submitted a report in response to the deputation to Council from the National Federation of Market Traders on behalf of Kirkgate Market Traders on the 21st April 2010.

RESOLVED -

- (a) That the contents of the submitted report and the actions being taken to support the market be noted.
- (b) That endorsement be given to the proposal that following a review of markets management and consultation with Trades Unions, a permanent Markets Manager post is created and that the Council's normal recruitment policies are followed for a post of this grade.
- (c) That there be no immediate rent reduction, but that an independent rent review be undertaken and that the charges for extending produce beyond stalls into the 'Yellow Line' area be reduced and that administrative charges for a change in use etc. be reviewed and that notice periods be reduced from six to three months in line with notice periods of other commercial Council leases.
- (d) That there be no reduction in car parking charges.
- (e) That a fully costed report on the condition of the whole of the market be submitted to a future meeting of Executive Board.
- (f) That tenants continue to be encouraged to take advantage of the Business Support Scheme.

(Having declared a personal and prejudicial interest in this item, Councillor Murray left the meeting for the duration of this item).

RESOURCES AND CORPORATE FUNCTIONS

6 Final Statement and Recommendations of the Scrutiny Board (City and Regional Partnerships) on the Kirkstall Joint Service Centre

The Assistant Chief Executive (Planning, Policy and Improvement) submitted a report in response to the recommendations detailed within the Scrutiny Board (City and Regional Partnerships) statement regarding Kirkstall Joint Service Centre.

The Chair of the Scrutiny Board at the time the inquiry was undertaken attended the meeting to present the Board's findings.

RESOLVED - That the proposed responses to the recommendations of the Scrutiny Board (City and Regional Partnerships) be approved.

DEVELOPMENT AND REGENERATION

7 Response to Scrutiny Board (City Development) Inquiry into the Method by which Planning Applications are Publicised and Consultation Undertaken

The Director of City Development submitted a report in response to the recommendations arising from the Scrutiny Board (City Development) inquiry into the method by which planning applications were publicised and consultation was undertaken.

The Chair of the Scrutiny Board at the time the inquiry was undertaken attended the meeting to present the Board's findings.

RESOLVED - That the proposed responses to the Scrutiny Board (City Development) recommendations be approved.

8 Response to Scrutiny Board (City and Regional Partnerships) Inquiry into Integrated Transport Strategies for Leeds and the Wider Region The Director of City Development submitted a report in response to the recommendations arising from the Scrutiny Board (City and Regional Partnerships) inquiry into integrated transport strategies for Leeds and the wider region.

The Chair of the Scrutiny Board at the time the inquiry was undertaken attended the meeting to present the Board's findings.

RESOLVED - That the Director of City Development's responses to the recommendations of the Scrutiny Board (City and Regional Partnerships) inquiry into "Integrated Transport Strategy for Leeds and the Wider Region", be approved.

NEIGHBOURHOODS AND HOUSING

9 Response to Scrutiny Board (Environment and Neighbourhoods) Statement regarding the Procurement of Housing Contracts The Director of Environment and Neighbourhoods submitted a report in response to the recommendations detailed within the Scrutiny Board (Environment and Neighbourhoods) statement regarding the procurement of housing contracts.

The Chair of the Scrutiny Board at the time the inquiry was undertaken attended the meeting to present the Board's findings.

RESOLVED – That the proposed responses to the recommendations of the Scrutiny Board (Environment and Neighbourhoods) be approved.

LEISURE

10 South Leeds Sports Centre

Further to Minute No. 79, 26th August 2009, the Chief Recreation Officer submitted a report outlining proposals to extend the Council's management of South Leeds Sports Centre for up to four months, in order to allow continuity of service pending a decision in relation to a possible community asset transfer.

RESOLVED -

(a) That the postponement of the closure of South Leeds Sports Centre for up to four months from the current approved date of 21st June 2010 be

approved, and a further report regarding the proposed community asset transfer be submitted to the Board within that period of time.

(b) That the financial implications of continued opening, which will be met by the reprioritising of resources in the City Development Directorate, be noted.

11 Woodhouse Moor Park Barbecue Use

Further to Minute No. 66, 26th August 2009, the Director of City Development submitted a report providing an update on the actions taken following a previous Executive Board decision regarding barbecue usage on Woodhouse Moor, detailing a summary of the research and consultation undertaken in respect to this issue and outlining proposals to address future barbecue usage on the site.

RESOLVED -

- (a) That the contents of the submitted report be noted.
- (b) That the enforcement of existing byelaws outlawing barbecue usage at Woodhouse Moor Park continue as an alternative to trialling a designated barbecue area on the site.

ADULT HEALTH AND SOCIAL CARE

12 Deputation to Council - The Access Committee for Leeds regarding 'Adult Social Care: The Real Deal'

The Director of Adult Social Services submitted a report in response to the deputation to Council from the Access Committee for Leeds on 21st April 2010.

RESOLVED –

- (a) That the concerns raised by the deputation be noted and members of the Leeds Access Committee be thanked for bringing this matter to the attention of the Council.
- (b) That Adult Social Care's approach to tackling the issues raised by the deputation be noted, all of which form part of the Council's commitment to 'Putting People First' and its four key principles of early intervention and prevention, empowering people through choice and control, universal services and developing social capital.
- (c) That Adult Social Care's commitment to developing good practice by issuing additional professional guidance notes to all staff when conducting assessments for vulnerable adults, particularly where support is required to access signposted services, be noted.
- (d) That Adult Social Care's commitment to developing good practice by taking steps to ensure all service users are aware of their right to make representations regarding the outcome of their assessment, be noted.

13 Leeds Safeguarding Adult Partnership Board Report 2009/2010

The Director of Adult Social Services submitted a report presenting for approval the Leeds Safeguarding Adults Partnership Board annual report for 2009/10, in addition to the Board's work plan for 2010/11.

RESOLVED – That the content of the 2009/2010 annual report be noted, and that the 2010/2011 work programme for the Adult Safeguarding Partnership Board be endorsed.

14 Social Care Systems Review

The Director of Adult Social Services, the Interim Director of Children's Services and the Director of Resources submitted a joint report outlining proposals for the implementation of new social care business solutions, which were aimed at radically improving the access, assessment, commissioning, provision, management and monitoring of Social Care in Leeds.

Following consideration of appendix 2 to the report, designated as exempt under Access to Information Procedure Rule 10.4(3) which was considered in private at the conclusion of the meeting, it was

RESOLVED –

- (a) That approval be given to incur expenditure as detailed within exempt appendix 2, in order to develop the existing information systems (ESCR) and implement the associated business changes required to support the service improvement and transformational plans in Social Care, as outlined within the submitted report.
- (b) That the staffing resource costs to produce further reports and associated business cases for Executive Board approval in respect of the development and implementation of replacement business solutions to meet ongoing and future demands be approved.
- (c) That Board Members' views be sought in relation to the areas that those future reports referred to in recommendation (b) above should focus upon.

(Under the provisions of Council Procedure Rule 16.5, Councillor A Carter required it to be recorded that he abstained from voting on this matter).

15 Leeds Holt Park Wellbeing Centre Project: Submission of the Final Business Case and Execution of the Contract for the new Holt Park Wellbeing Centre

Further to Minute No. 189, 12th February 2010, the Directors of Resources, City Development and Adult Social Services submitted a joint report providing an update on the Holt Park Wellbeing Centre project, and which sought the necessary approvals to facilitate the submission of the Final Business Case (FBC) to the Department of Health and the execution of the project's contract documentation. With the Chair's agreement, an updated set of recommendations for this item were circulated at the commencement of the meeting. The recommendations had been revised in response to the recent announcement by the Government that the Holt Park Wellbeing Centre was one of a number of projects to be suspended pending the Government's Comprehensive Spending Review.

Following consideration of the appendices to the report, designated as exempt under Access to Information Procedure Rule 10.4(3) which were considered in private at the conclusion of the meeting, it was

RESOLVED –

- (a) That the contents of the submitted report be noted.
- (b) That the final scope of the Holt Park Wellbeing Centre Project (Project), as set out in the submitted report, be noted and confirmed.
- (c) That the submission of the FBC to the Department of Health be approved and that the Director of City Development be authorised to make any necessary amendments to the FBC. (The Final Business Case covers the Holt Park Wellbeing Centre Project financed through the Government's Private Finance Initiative).
- (d) That the demolition of the existing leisure centre in advance of opening the new Wellbeing Centre, subject to further consultation once the outcome of the spending review is known, be approved in principle.
- (e) That approval be given to the financial implications for the Council of entering into the Project, and agreement be given to the maximum affordability ceiling for the Council in relation to the PFI of £2,428,000 in the first full year of service commencement (2012/13), as set out in exempt Appendix 1 to the submitted report, but subject to resolution (i) (below), should the SWAP rate exceed 5.00%.
- (f) That the balance sheet treatment for the Project be noted.
- (g) That it be noted that the project is one of a number suspended as part of the Government's Comprehensive Spending Review, but that the Department of Health review of, and the Council input into the FBC continue (together with the progress with the Leeds Local Education Partnership (LEP) of any significant outstanding matters on the new project approval process which impact upon the process for the approval of the FBC).
- (h) That, whilst noting the financial close cannot take place until and unless the Government confirms the availability of PFI Credits and the FBC approval, approval be given to the arrangements for Financial Close and the implementation of the Project to include (but not by way

of limitation) the award/entry into a PFI Project Agreement to a special purpose company to be established under terms agreed between the City Council and the LEP, and

in connection therewith, the arrangements at paragraph 5.4 of the submitted report be confirmed, and (for the avoidance of doubt) authorisation be given to the exercising of delegated powers (as set out at Part 3 Section 3E of the Constitution in relation to PPP/PFI and other Major Property and Infrastructure Related projects), in relation to this Project, by the Director of City Development (or delegee) in consultation with the Director of Adult Social Care (or delegee).

(i) That authority be delegated to the Director of City Development, or her nominee, to approve the completion of the project should the SWAP rate exceed 5.00% but be less than 5.50% at the time of Financial Close up to a maximum affordability ceiling of £2,500,000 in 2012/13 terms.

RESOURCES AND CORPORATE FUNCTIONS

16 Reductions in Grants to Local Authorities 2010/2011

The Director of Resources submitted a report providing details of the reductions in grants to local authorities as part of the Government's accelerated deficit reduction plan at a national level, and detailing information, in so far as it was available, as to the impact of the grant reductions on this Council.

RESOLVED –

- (a) That the contents of the submitted report be noted.
- (b) That a detailed report be submitted to the July meeting of Executive Board on the implications for Leeds and the options available to meet the funding gap.

17 Financial Performance - Outturn 2009/2010

The Director of Resources submitted a report presenting the Council's financial outturn position for 2009/2010, including both revenue and capital and the Housing Revenue Account. The report also detailed revenue expenditure and income compared to the approved budget and reported on the outturn for Education Leeds and the Arms Length Management Organisations (ALMOs).

RESOLVED –

- (a) That the contents of the submitted report be noted.
- (b) That the contributions to, and the use of, Housing Revenue Account reserves, as outlined within the report, be agreed.

18 Corporate Performance Report 2009/2010 Year End

The Assistant Chief Executive (Planning, Policy and Improvement) submitted a report presenting an overview of the Council's performance against the priority outcomes at the 2009/2010 year end.

RESOLVED - That the overall performance position at quarter 4 of 2009/2010 against the strategic priorities and the action planned to further improve or address the performance concerns be noted.

DEVELOPMENT AND REGENERATION

19 Deputation to Council - Wetherby Business Association seeking reinstatement of the Wetherby Historic Market Town Signage on the A1 The Director of City Development submitted a report in response to the deputation to Council from Wetherby Business Association on 21st April 2010.

RESOLVED -

- (a) That the contents of the submitted report be noted.
- (b) That the application for appropriate brown tourist signing for Wetherby from the A1(M), from a third party, for example either the business community in Wetherby or the Wetherby Town Council, be supported.
- (c) That the applicant should fund all associated costs.

(During the course of the discussion on this matter, Councillor Gruen declared a personal interest in this item, due to his employment by the Department for Transport)

20 Granting a New 20 Year Lease at a Peppercorn Rent in respect of the New Middleton Enterprise Centre

Further to Minute No. 170, 6th January 2010, the Director of City Development submitted a report outlining proposals to grant a new 20 year lease to the Health for All (HFA) organisation, at a peppercorn rent in respect of the new Middleton Enterprise Centre.

RESOLVED - That the proposal to grant a 20 year lease to Health for All for the new Middleton Enterprise Centre at a peppercorn rent be approved.

NEIGHBOURHOODS AND HOUSING

21 Disposal of 60, Sholebroke Avenue, LS7 3HB

The Director of Environment and Neighbourhoods submitted a report outlining the options available to the Council with respect to the future of 60, Sholebroke Avenue, LS7 3HB.

Following the conclusion of an options appraisal exercise, the report presented the following four alternatives:

1. An open market sale of the property

2. The refurbishment and letting of the property as a Council house, managed by the relevant Arms Length Management Organisation (ALMO)

3. The Council entering into negotiations with a partner Registered Social Landlord currently managing other stock in the immediate neighbourhood, with a view to them purchasing the property, investing in it and creating a new affordable home.

4. The Council entering into negotiations with a local supported housing provider, with a view to them leasing the property from the Council at a peppercorn rent for a 21 year period.

Following consideration of appendix 1 to the report, designated as exempt under Access to Information Procedure Rule 10.4(3) which was considered in private at the conclusion of the meeting, it was

RESOLVED –

- (a) That approval be given to progress with Option 3, as detailed above and within the submitted report.
- (b) That the property be declared surplus to the Council's operational requirements
- (c) That approval be given to enter into negotiations with a partner Registered Social Landlord, with the aim of concluding a sale to them which represents the value of the property and which recognises the level of refurbishment needed to bring the property to a decent homes standard.
- (d) That approval be given to covenant the sale, in order that the property is retained in perpetuity as a socially rented family home and that the Council retains nomination rights in respect of lettings.
- 22 Government Review of Council Housing Finance: The Council's Response to the Consultation Paper: "Council Housing: A Real Future" The Director of Environment and Neighbourhoods and the Director of Resources submitted a joint report providing a proposed response to the Government's consultation paper entitled, "Council Housing: A Real Future".

RESOLVED -

- (a) That the proposed response to the Government's consultation paper "Council Housing: A Real Future" be agreed.
- (b) That this decision be exempt from Call In, as there is insufficient time for the Call In process to be concluded prior to the closing date for responses to the consultation exercise.

ENVIRONMENTAL SERVICES

23 Grounds Maintenance Contract

The Director of Environment and Neighbourhoods submitted a report outlining the progress made to date in relation to the procurement of a new grounds maintenance contract for the Council, recommending a proposed approach to the contract's packaging and procurement, whilst also informing of a proposed revision to the contract start date.

RESOLVED –

- (a) That the progress made to date regarding the procurement of a new grounds maintenance contract be noted.
- (b) That the contract administration and monitoring arrangements, as set out in the submitted report, be approved.
- (c) That approval be given to the contract being advertised on the basis of one, single city-wide contract, with the option to require a variant bid to allow interested Parish or Town Councils to tender for work within their areas.
- (d) That approval be given to a contract being advertised for five years with the option to extend for up to a further five years.
- (e) That the contract with Glendale and ATM be extended until 31st December 2011, subject to the issue of a transparency notice.
- (f) That a contingency sum of £60,000 in year 1 (financial year 2012/2013) and £20,000 in year 2 onwards, be allocated to enable any future orphan sites identified to be properly maintained.

(Under the provisions of Council Procedure Rule 16.5, Councillor A Carter required it to be recorded that he abstained from voting on this matter).

24 Strategic Review of Household Waste Sorting Sites and Bring Sites The Director of Environment and Neighbourhoods submitted a report providing an update on the current provision and performance of Household Waste Sorting Sites (HWSS) and Bring Sites in Leeds, outlining issues which influence their usage and effectiveness and recommending options in relation to spatial policy and joint working with neighbouring authorities.

RESOLVED -

- (a) That the permanent closure of the Calverley Bridge zero waste site be approved.
- (b) That approval be given to maintaining the current free access of border HWSS by residents from neighbouring authorities, on the proviso that protocols and procedures to account for the shared cost of the provision of facilities, on a site by site basis, are developed and subject to continuous review.

- (c) That the development of joint working with neighbouring authorities North Yorkshire and Wakefield in parallel with the undertaking of a revised replacement site search, to be carried out during the interim period before Gamblethorpe closes upon completion of East Leeds redevelopment, be commended.
- (d) That approval be given to the redevelopment of the HWSS at Kirkstall Road and modernisation of the existing transfer station by means of an injection of £3,800,000 into the Capital Programme, with a full design and cost report (DCR) and business case being prepared and submitted to Executive Board for approval when the detailed plans have been fully worked up and costed. At this stage it is proposed to fund the redevelopment of the site using a DEFRA grant (£500,000) and unsupported borrowing, with the borrowing repayments being funded from savings made as part of the overall HWSS review. The scale of the revenue repayment will be dependent upon the use of the identified £1.050.000 currently for а replacement for site Gamblethorpe, as set out in paragraph 5.5.4 of the submitted report.
- (e) That approval be given to the further review of operational practices, in order to deliver a consistently high performance across all sites, with a further report being submitted to a future meeting of Executive Board.
- (f) That approval be given to the maintenance and development of the current complementary bring site infrastructure, whilst continuing to evaluate the effectiveness of bring site provision.

(Under the provisions of Council Procedure Rule 16.5 Councillor A Carter required it to be recorded that he abstained from voting on this matter).

(During the course of the discussion on this matter, Councillor Golton declared a personal interest in this item, as a user of the Gamblethorpe site)

CHILDREN'S SERVICES

25 Updated Statements of Purpose for the Fostering and Adoption Services of Leeds City Council

The Interim Director of Children's Services submitted a report presenting for approval the revised statements of purpose for Leeds City Council's Fostering and Adoption Services.

RESOLVED – That the Statements of Purpose for both the Fostering and Adoption services of Leeds City Council be approved.

26 Building Schools for the Future Phase 2 - Farnley Park Maths and Computing College

Further to Minute No. 151, 9th December 2009, the Chief Executive of Education Leeds submitted a report presenting for approval and submission

to Partnerships for Schools (PfS) the Final Business Case (FBC) for the Farnley Park Maths and Computing College project.

RESOLVED – That the submission of the Final Business Case for the Farnley Park Maths and Computing College Project to Partnerships for Schools be approved.

27 Outcomes of the Consultation on the Proposals for the West Leeds Specialist Inclusive Learning Centre (SILC)

Further to Minute No. 154, 9th December 2009, the Chief Executive of Education Leeds submitted a report providing the outcomes from the public consultation exercise undertaken with respect to the proposed relocation of the West Leeds Specialist Inclusive Learning Centre (SILC) modular building at Farnley Park Maths and Computing College to Bruntcliffe High School. The report also outlined an alternative proposal formulated in response to the feedback received.

RESOLVED –

- (a) That the outcome of the formal public consultation exercise on the relocation of the West SILC modular building at Farnley Park Maths and Computing College to Bruntcliffe High School be noted.
- (b) That the alternative proposal formulated in response to the public consultation, to make provision for the pupils currently educated on the Farnley Park site at the West SILC Milestone site, be noted.

28 Response to Scrutiny Board (Children's Services) Inquiry Statement regarding School Attendance

The Chief Executive of Education Leeds submitted a report in response to the recommendations detailed within the Scrutiny Board (Children's Services) statement regarding school attendance.

RESOLVED – That the proposed responses to the recommendations of the Scrutiny Board (Children's Services) be approved.

DATE OF PUBLICATION: LAST DATE FOR CALL IN:

24th June 2010 1st July 2010 (5.00 P.M.)

(Scrutiny Support will notify Directors of any items called in by 12.00noon on 2^{nd} July 2010)

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