



Annual Report 2016

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A Message from the Chair

This is the 6th Annual report since I took up the position of Independent Chair. Over the past seven years the Board has developed into the strategic partnership body it is now with a well-supported infrastructure. The Board's work programme has been designed to run through into 2017-18.

An effective Board requires strong collaboration between the partners. This is a key strength of the board as we work to agreed policy and strategic ambition. A key part of my role as chair is to provide system leadership to support the board in its role to provide constructive scrutiny and challenge as we focus on our primary aim to keep the people in Cumbria safe from harm. We are clear that we are there to hold partners to account through providing constructive challenge and scrutiny. Our lay members will strengthen this approach through supporting formal challenge events led by the Chair. This will enable Board partners to report on their contribution to delivering the Board's work Programme.

We have clear ambitions as part of our focus on continuous improvement and we recognise that we need to work more closely with other strategic partnerships within Cumbria. Therefore within our work Programme one of our key priorities is to collaborate more closely with the Children's Safeguarding Board, and the Community Safety Partnership.

As normal we will update our 3-year strategic plan alongside the annual report and Board members will take both documents through their respective boards or governance bodies. The reports will also be taken through the Health and Well-being Board.

I would like to thank the officers who have worked tirelessly in the background to support the work of the Board, the Operational Group and the sub-groups. Without this support we could not function effectively.



M. Le Hg /4 - Olm.

Mike Evans Independent Chair

Cumbria pen picture

Cumbria is England's second largest county and is much less densely populated than the national average with 54% of Cumbria's residents living in rural areas compared to the national average of 18%. Of Cumbria's districts Allerdale and Eden have the greatest proportions of residents living in rural areas (72% and 71% respectively), while Carlisle has he smallest proportion (27%).

Cumbria's Joint Strategic Needs Assessment (JSNA) informs us that 84 of Cumbria's communities rank amongst the 10% most deprived in England in relation to geographical barriers to services and many of the communities in the Barrow in Furness area and one in Copeland rank in the 1% most deprived nationally in relation to health and disability. Cumbria's proportion of residents reporting that their day-to-day activities are limited by a health problem or disability illness is higher than the national average (20.3% vs. 17.9%) with Barrow –in-Furness reporting 24.6%.

Cumbria has a higher proportion of residents providing unpaid care than the national average (11.3% vs. 10.3%) with Barrow-in-Furness having the greatest proportion of unpaid carers at 11.9%.

When compared to the national average, Cumbria has an older age profile: All of Cumbria's districts have older age profiles higher than the national average, with Allerdale, Eden and South Lakeland having the smallest proportions of younger residents and the greatest proportions of older residents.

In 2015-16, overall crime levels increased in Cumbria by +5.0% compared to 2014-15, and +8.4% compared to 2013-14. Of Cumbria's districts, the largest percentage increase was seen in South Lakeland +14.9% with the highest number and rate of overall crime was seen in the Carlisle district.

Violence against the person offences increased +12.6% in 201-16 compared to 2014-15. Barrow-in-Furness had the highest offence rate for violence against the person offences whilst Carlisle had the highest number of crimes. Domestic abuse incidents increased by +1.1% (+81) in 2015-16, Eden district had the largest increase in recorded domestic abuse incidents (+19.0%, +60), the largest number of recorded domestic abuse incidents occurred in the Carlisle district (1,887).

Reported sexual offences also increased in 2015-16 by +23.5% (+163) compared to 2014-15. Increases were seen in all districts except Allerdale and Barrow-in-Furness. Carlisle district had the largest percentage increase +58.9% (+76). Although hospital admissions for violent crime (including sexual violence) have decreased, the rate in Barrow-in-Furness (69.0 per 100,000) remains significantly worse than England (47.5).

(Data taken from Cumbria |SNA)

National Context

The Care Act 2014 and Adult Safeguarding – what the statutory guidance says:

What is Adult Safeguarding?

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances. (14.7)

Organisations should always promote the adult's wellbeing in their safeguarding arrangements. People have complex lives and being safe is only one of the things they want for themselves. Professionals should work with the adult to establish what being safe means to them and how that can be best achieved. Professionals and other staff should not be advocating 'safety' measures that do not take account of individual well-being, as defined in section 1 on the Care Act. (14.8)

The aims of adult safeguarding are to:

- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- Stop abuse or neglect wherever possible
- Safeguard adults in a way that supports them in making choices and having control about how they want to live
- Promote an approach that concentrates on improving life for the adults concerned
- Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- Provide information and support in accessible ways to help people understand the different types
 of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an
 adult
- Address what has caused the abuse or neglect(14.11)

In order to achieve these aims it is necessary to:

- Ensure that everyone, both individuals and organisations are clear about their roles and responsibilities
- Create strong multi-agency partnerships that provide timely and effective prevention of and responses to abuse or neglect
- Support the development of a positive learning environment across these partnerships and at all levels within them to help break down cultures that are risk-averse and seek to scapegoat or blame practitioners
- Enable access to mainstream community resources such as accessible leisure facilities, safe town centres and community groups that can reduce the social and physical isolation which in itself may increase the risk of abuse or neglect
- Clarify how responses to safeguarding concerns deriving from the poor quality and inadequacy of service provision, including patient safety in the health sector, should be responded to (14.12)

Safeguarding Adults Boards - an overview

The Care Act states that each local authority must set up a Safeguarding Adults Board (SAB). The main objective of a SAB is to assure itself that its local safeguarding arrangements and partners act to help and protect adults in its area.

The SAB has a strategic role that oversees and leads the adult safeguarding across the locality and will be interested in a range of matters that contribute to the prevention of abuse and neglect.

The Care Act states that a SAB has 3 core duties:

- It must publish a strategic plan for each financial year that sets how it will meet its main objective and what the members will do to achieve this. The plan must be developed with local community involvement, and the SAB must consult the local Healthwatch organisation. The plan should be evidence based and make use of all available evidence and intelligence from partners to form and develop its plan
- It must publish an annual report detailing what the SAB has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any safeguarding adults reviews and subsequent action
- It must conduct any safeguarding adults review in accordance with Section 44 of the Act.(14.136)

Cumbria Safeguarding Adults Board

Our Vision and Principles

The citizens of Cumbria, irrespective of age, race, gender, culture, religion, disability or sexual orientation are able to live with their rights protected, in safety, free from abuse and the fear of abuse.

To this end our focus will therefore be on creating a culture where:

- Abuse is not tolerated
- There is common understanding and belief of what to do abuse happens embedding the principles of Making Safeguarding Personal

To make this vision a reality it is essential that agencies work together to:

- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- Ensure that adults are safeguarding in a way that supports them in making choices and having control about how they want to live
- Proactively take steps to stop abuse or neglect
- Ensure they have a competent and able workforce
- Raise public awareness recognising the value local communities can play in prevention and early intervention.

Governance and accountability

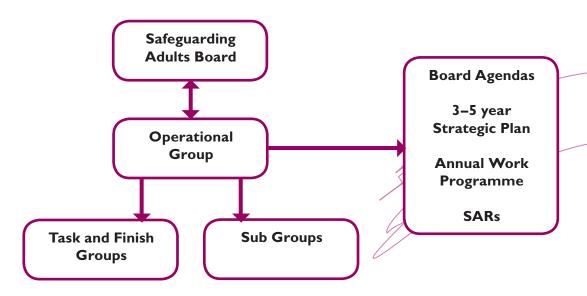
Cumbria Safeguarding Adults Board is the strategic partnership that brings together the main organisations working with adults at risk including the statutory partners of Local Authority, the Police and the CCG. Its core purpose is to ensure the effectiveness of services with responsibility for the protection adults at risk in its area.

The board has overall governance responsibility for ensuring effective policy, practice and implementation for safeguarding. It also has a key role in promoting the wider agenda so that safeguarding is seen as being everyone's responsibility.

Effective governance is primarily achieved through individual members reporting through their organisations. Also in accordance with Care Act guidance, the Independent Chair of the board reports quarterly to the Local Authority Chief Executive on the work of the Board.

The board is supported by an infrastructure that oversees and enables delivery of the work programme, coordinates sub-groups and task-and-finish groups and provides analysis and intelligence for the board. Cumbria SAB continues to develop and strengthen its functions in response to its statutory duties outlined in the Care Act 2014.

The infrastructure to oversee the work of the CSAB



Key activity and developments in pursuit of CSAB priorities in 2015/16

Priority I - Effective Leadership and Collaborative working

The Board has a broad and far reaching membership spanning a large range of statutory and non-statutory partners. In 2015 agreement was reached to include two new lay members to provide additional independent challenge and oversight to its activities.

The Board continues to provide effective leadership to its members though its' Strategic Plan and focused agendas. Partners are clear about their roles and responsibilities in response to adult safeguarding and demonstrate commitment to the Boards activity through their participation at all levels in the structure that underpins the Boards Work Programme. The Board hosts an annual development day for its members to review its progress against the Strategic plan and identify areas for further development going forward. Board members have identified the need to further strengthen our relationship with key strategic partners including the Local Safeguarding Children's Board, the Community Safety Partnership and Cumbria Health and Well-Being Board.

Priority 2 - Promoting choice and control with a proportionate response

Board members recognise that this is a crucial aspect of adult safeguarding work and are keen to ensure that the Making Safeguarding Personal (MSP) principles are fully embedded in our work with individuals. To support this aim, Cumbria Dignity and Dementia group developed a Practitioner toolkit to assist practitioners in providing advice and information at the earliest point in an enquiry to the individual concerned. The toolkit also provides a useful template to aid the discussion with the individual or their representative to record the outcomes they are seeking to achieve from the safeguarding intervention. The toolkit has been published on the website and provides simple guidance that is also suitable to leave with the individual for further reference. Safeguarding leads across the system are proactively promoting MSP with the staff in their organisations.

Board members are keen to promote the important connectivity between the Mental Capacity Act 2005 (MCA) and safeguarding adults. The spirit of the MCA and the 5 principles that underpin this important legislation provide a crucial mechanism to ensure that the rights of individuals are respected and promoted.

Priority 3 – Develop Preventative Strategies

Developing preventative strategies continues to be at the forefront of all aspects of the Boards work programme. In this reporting year partners have developed a multi-agency forum entitled the Early Indicator Meeting, the meeting occurs on a 6 weekly basis in each of the 3 localities in Cumbria. The purpose of the meeting is to share intelligence across the partnership relating to concerns or 'indicators' that people may be at risk of abuse or neglect. The intelligence shared is used to formulate proactive strategies and action plans to prevent harm occurring. The meeting also provides an opportunity for operational managers, safeguarding adult's managers, commissioners and representatives from the Care Quality Commission to receive and act upon information captured by professionals using the Early Indicator Tool that was launched last year by the Board. The meeting enhances the ability of partners to work cooperatively and collaboratively to respond to concerns raised.

The Board continues to ensure that the profile of adult safeguarding is continuously promoted through awareness raising sessions delivered to community groups, third sector groups, carers and providers of services.

A range of advice, information and guidance is available to members of the community and professionals via the County Council website together with information on how to report a concern.

Priority 4 – Multi-agency workforce development

Formal training courses have been delivered across the partnership throughout the year. This has included three courses on chairing skills, eleven courses on undertaking safeguarding investigations, three courses on minute taking, and three courses on basic safeguarding awareness. In addition partners also deliver their own in-house formal training and e learning courses are available to all partners.

The CSAB multi agency policy and procedure states that each agency will as part of their workforce development plan, ensure that all employees at all levels have appropriate knowledge and skills in relation to:

- Potential for the occurrence of abuse and neglect
- Identification of abuse or neglect
- Safeguarding policies and procedures
- Requirement to report any such concerns of abuse or neglect
- Internal reporting structures for such concerns.

Furthermore it is vital key agencies undertake multi-agency learning opportunities

- To promote the effectiveness of working together
- Provide clarity on the role and responsibility of each agency and professional involved in the safeguarding process
- Provide a coordinated approach when undertaking working with agencies and those individuals involved in safeguarding adults.

The opportunities for the development of multi-agency learning will be positively supported by the implementation of the Safeguarding Adults Locality Groups. These groups will be able to take on board the outcomes from SARS and identify on a local level how those recommended improvements in practice will be achieved.

Partners are fully committed to the Cumbria Learning and Development Strategy, which is overseen and reviewed, by the Learning and Development sub-group.

This strategy sets out the commitment of Cumbria Safeguarding Adults Board to safeguarding adult workforce planning and identifies the Learning and Development needed to support the implementation of the Cumbria Safeguarding Adults Policy and Procedures.

The strategy also:

- Outlines how the strategy will be delivered
- Identifies the key stakeholders in Cumbria
- Identifies who will need training
- Outlines what training is required to enable staff to meet agreed competencies for their role
- Identifies what resources will be needed to deliver the training
- Provides timescales for training and implementation of the strategy
- Addresses issues of performance monitoring
- Proposes a Delivery Plan for 2016-2018

Priority 5 - Hold partners to account and seek assurance of effective arrangements

The Board receives regular updates from partners in respect of their activity and progress against the agreed strategic priorities. All partners provide representation at the Operations group and the sub groups of the Board to ensure that they fully engage and commit to improving our performance in pursuit of our vision.

Each multi-agency sub group provides a written report and verbal update at each of the quarterly Operations Group meetings. The updates seek to provide assurance of the groups' progress against their activities in pursuit of the Boards priorities.

The Board seeks regular assurance from Commissioners across the sector in relation to ensuring that the processes that underpin the commissioning function result in robust and safe services being provided to the people of Cumbria.

The Board regularly invites a senior representative from the providers of the Deprivation of Liberty Safeguards (DoLS) service to report to the Board to provide information on its effectiveness of delivery, the emerging themes and pressures and how the service plans to respond to these.

The Operations Group

The role of the Operations Group through its broad multi-agency membership is to deliver on behalf of the CSAB the priorities outline in the strategic plan. Identify and establish sub groups or task and finish groups to drive the development of good practice in safeguarding adults work. The group also provides a forum for partners to receive or provide updates and information on local services and schemes, which support adult safeguarding in Cumbria. The Board recognises the Operations Group plays a critical role in translating the Boards strategies into agreed and effective ways of working through collaboration.

The group received a number of informative presentations over the year on:

- The Sexual Assault Referral Centre (SARC) Dignity in Dementia embracing Making Safeguarding Personal
- The Domestic and Sexual Violence 'Champions' scheme
- The Sexual Assault Support Service The Bridgeway
- Doorstep Crime Trading Standards

The Operations group has an important role in continuously reviewing or developing Cumbria's multi-agency guidance papers and in 2015/16 the following guidance papers were updated and published on the website:

- Information sharing
- Record Keeping
- Roles and Responsibilities
- Pressure Ulcers
- Safeguarding Adult Reviews (SARs)
- Making Safeguarding Personal Guidance
- Making Safeguarding Personal Practitioner Toolkit

In addition to the guidance papers, 3 newsletters providing updates on key safeguarding areas were published on the website:

- Information on Safeguarding Adults Reviews
- Advocacy Information on the different types of advocacy and when it should be used
- Detailed information on SAR's, the range of approaches available including the Significant Incident Learning Process and Peer Reviews

Activity undertaken by the Sub Groups

The Operations Group regularly reviews the range and purpose of the sub groups in response to learning and feedback from both the public and partner organisations. This is to ensure that the mechanisms are in place to drive activity and learning in pursuit of the Boards priorities and implement learning from Safeguarding Adults Reviews. The group agreed that the following sub groups would continue or be developed to focus on the key areas of development;

- Safeguarding Adults Review Group
- Learning and Development Group
- Performance and Quality Assurance Group
- Prevention and Dignity Group
- Communication and Engagement Group

Each sub group has membership that reflects a range of key partners and the third sector members and develops a work plan for the year ahead to support the Board achieve its priorities. The sub group chairs provide an update on their activity and progress at each Operations Group meeting where partners can make key decisions to assist the progress and effectiveness of the work being undertaken.

Safeguarding Adults Review Group Formally known as Case Review Group (Chair Tony Corcoran)

The two purposes of a case review is to:

- Determine what the relevant agencies and individuals involved in the case might have done differently that could have prevented harm or death and;
- Learn lessons from the case and apply those lessons to future cases to prevent similar harm occurring.

Where they consider there is a need and value in conducting a Safeguarding Adult Review (SAR) a recommendation is then submitted to the independent chair.

The Safeguarding Adults Review (SAR) considers the six safeguarding principles when determining a proportionate and appropriate reviewing process namely: Empowerment; Prevention; Proportionality; Protection; Partnership and Accountability

There are four methods of review, namely:

A Review and Analysis of records - This stage of Review is most similar to the previous Serious Case review and requires all known/involved agencies in a referred case to complete an Internal Management Report (IMR) to critically appraise their own practice and identify any learning points from their agency. A review panel then considers these and wider learning can be cascaded across the County to ensure best practice is shared widely and not limited to the area where the referral has originated from.

Significant Incident Learning Event - This is where key professionals can be invited to a full or half day event to examine practice, using a chronology of events, and again identify the learning.

Peer Reviews - The sub-group can request that an individual from a neighbouring Safeguarding Adults Board reviews a particular instance of multi-agency working to provide an impartial view.

Individual Agency review - The Board can request individual agencies to look at a particular case that involves safeguarding issues and report back, regardless of whether they have already completed an internal review according to their own procedures. Any review commissioned by the Board will have a particular focus around safeguarding issues.

In Cumbria during this reporting period there were 2 Review and Analysis of records and one Significant Incident Learning Event and one Agency Review. Where possible the family members of those involved were contacted in order to seek contributions from them.

The frequency of the group meetings were dictated by the number of current cases and the requirement to ensure the CRG had governance oversight. This means that we are also able to consider any new potential referrals in a timely fashion.

The group reports its progress through the Operational Group with the final report and draft improvement plan ultimately coming to the Board for consideration and sign off. The improvement plan is then monitored through the SAR sub-group and operational group.

Tony Corcoran - Governor HM Prison Haverig

The Learning and Development Sub-group (Chair - Jonathon Comber)

The membership includes identified leads whose role is to ensure safeguarding is part of workforce development and planning The Learning and Development group is a sub group of the Cumbria across partner agencies including Health and Care Services Cumbria County Council, NHS, Police, and the voluntary, independent and private sectors.

It acts on behalf of the Board to enable partner organisations across Cumbria to understand and meet their responsibilities in ensuring that carers, staff, managers and volunteers are equipped with the necessary skills and knowledge so that they are competent to protect and safeguard adults at risk of abuse in their care. It will also ensure that the six principles of Safeguarding **Empowerment-Prevention-Proportionality-Protection-Partnership and Accountability** are embedded and reflected in all learning activities.

The role and function of the group is guided and defined by the following documents/policy/legislative drivers

Care Act 2014

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect. Safeguarding Adults Boards are now on a statutory footing with duties placed on partner organisations to co-operate, share information and where necessary carry out Safeguarding Adults Reviews.

Association of Directors of Adult Social Services (ADASS) - Standards for Safeguarding (2005)

This document laid out 11 standards for good practice in safeguarding work. The relevant standards for Learning and Development are described in Standard 5.

Cumbria Safeguarding Adults Board multi agency Policy and Procedures

Key local safeguarding policy document that all partner agencies work to in Cumbria

Mental Capacity Act (2005)

The Mental Capacity Act (MCA) is designed to protect and empower individuals who may lack the mental capacity to make their own decisions about their care and treatment. It is a law that applies to individuals aged 16 and over.

National Competency Framework for Safeguarding Adults (2010)

This framework provides a benchmark against which to develop a consistent approach to safeguarding practice across all agencies and professions.

Care Quality Commission (CQC) are the regulatory body who inspect care services against a range of standards and outcomes. They will inspect services to ensure that they are keeping people who use services safe. (Regulations 12 and 13)

The policy framework outlined above has guided the L and D Group to produce a "Learning and Development Strategy" and a delivery plan to support that strategy. These are presently being refreshed and will be published later this year. These will enable/assist partner agencies in meeting/achieving their responsibilities and meeting the learning and development needs of their workforce.

The Learning and Development Strategy is based on the National Competency Framework for Safeguarding Adults and this defines Safeguarding roles (Alerter/Responder/Safeguarding process management/Strategic Leadership) as described in the Cumbria Multi Agency Policy/Procedures and the competencies necessary to fulfil the respective roles.

The Learning and Development delivery plan 2016-17 outlines the Learning and development activities that will take place during the coming year to provide the necessary supporting knowledge and information to assist staff in meeting the competencies commensurate with the role they perform in safeguarding.

To assist in the process the Cumbria SAB Learning and Development sub group in collaboration with the Pan Cumbria/Lancashire Safeguarding Adults boards has produced a **Safeguarding Adults Passport**, which has been approved and adopted by the Cumbria Safeguarding Adults Executive Board. The Passport is a tool for individual members of staff to evidence their competence in safeguarding and provides a process for partner organisations to ensure and assure themselves that their staff are competent in the respective safeguarding roles they perform. It also provides demonstrable evidence of learning and development of staff for those services, registered with the Care Quality Commission that are inspected under CQC Outcomes relating to Safeguarding but in particular **Regulation 13: Safeguarding Service users from abuse and improper treatment.**

The L and D group also oversees Safeguarding Adults Learning and Development activities to ensure that all learning and development activities will:

- be based on current, evidence-based knowledge and research
- promote a multi-agency approach to safeguarding incorporating relevant legislation
- reflect anti-oppressive practice through its content and delivery
- have learning outcomes that are competency based, which are clearly linked to the safeguarding roles and responsibilities that are set out in the Learning and Development Strategy and the CSAB Safeguarding Passport
- have systems to provide accurate date on attendances
- be evaluated, and findings presented to the Learning and Development Sub-group.

Jonathon Comber, County Manager - Care Provision, Cumbria County Council.

Good Practice Case Examples

At each Board meeting and Operations Group meeting, partner representatives are invited to present a case example to share with attendees in recognition of the positive outcomes that can result from safeguarding intervention, the following represent two examples that have been presented.

Effective multi-agency working

This case example relates to a woman who was reported to be experiencing emotional abuse from her partner. The concern was raised by a family member. When contacted she confirmed that she would like support to resolve the situation. The outcomes she wished to achieve were to feel safer and to have more frequent contact with her wider family.

In order to achieve these outcomes she had felt it necessary to move to another part of the county. As a result a number of organisations were involved in pursuing her Safeguarding Plan, colleagues in the Housing Departments in her current area and the area she wished to move to liaised regularly to ensure suitable accommodation to enable her to live as independently as possible was identified. Social Workers and Occupational Therapists from both districts liaised to ensure the necessary care support and equipment was in place in time for the move. Throughout the intervention the Police and Let Go service worked alongside care professionals to support her safety, a STORM alert was placed on the property and additional locks were fitted.

At the review, she reported that she had achieved her desired outcomes and had felt protected, respected and empowered throughout the process. Her mood lifted and she now has regular contact with wider members of her family. She reported that she now has greater control over her life

A case of self- neglect

A referral was received from Cumbria Constabulary stating that they conducted a welfare check following reports of self-neglect. They explained that a woman was living in "squalid conditions" and there were concerns in relation to her health. She was admitted to hospital (the 6th time in the last few weeks).

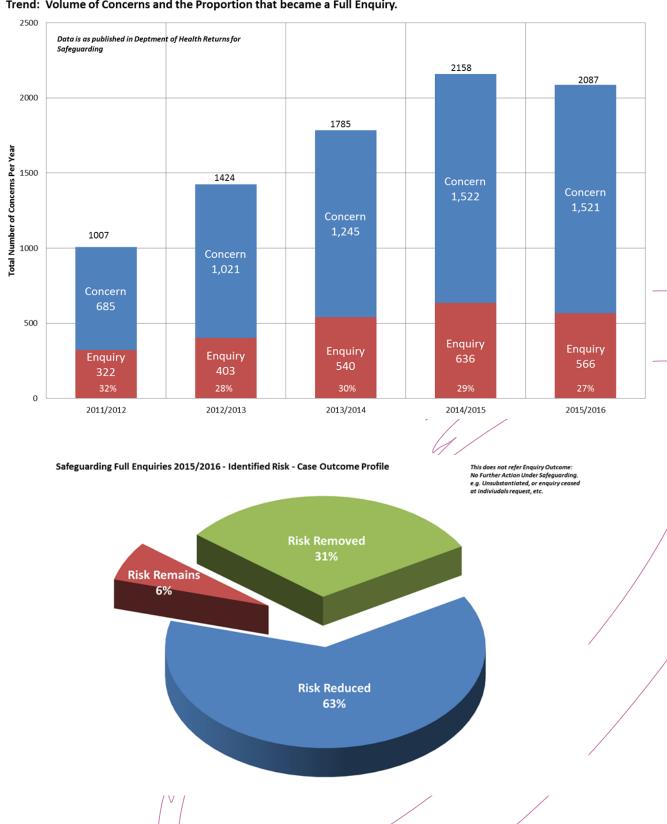
A risk management multi-disciplinary meeting was convened, involving the Police, Housing, local authority practitioners, Cumbria Care, G.P and Local Area Coordinator. The woman declined to attend and did not want a representative to attend on her behalf. It was suggested that a fast track housing move was required before her situation became unmanageable. The SW and O.T. undertook further visits to ensure a smooth transition, including getting carpets, sofa, and bed (with the support of welfare assistance). This resulted in the woman moving into Extra care housing, which was more appropriate for her needs. Care line was installed and there is an on-site warden, a 2hour visit (for cleaning) weekly and care package put in place.

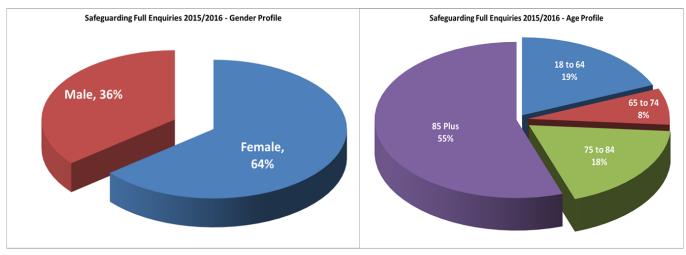
The new accommodation is more sustainable for longer term, allowing monitoring of her needs, preventing the need for further interventions from the police or environmental health; it also reduced the risk of eviction. It has also reduced the number of hospital admissions she has experienced to I admission in IO weeks from previously 6 admissions in two weeks. It has also reduced her isolation. Although she had chosen not to attend formal meetings, she was fully involved in all decision making and felt that her outcomes to feel safer, supported to maintain her environment and improve her independence were achieved.

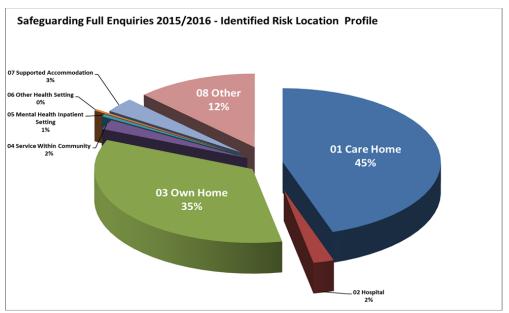
Activity and trends:

Safeguarding Data: For the 2015/2016 period - Completed episodes relating to Concerns and Full Enquiry.

Trend: Volume of Concerns and the Proportion that became a Full Enquiry.







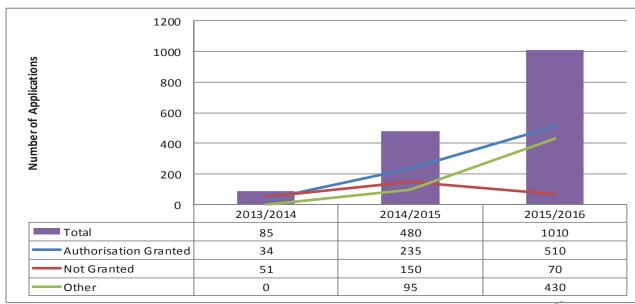
	Quarter	1	2015/2016	to	Quarter	4	2015/2016
	Column Labels						
Values	Allerdale	Carlisle	Copeland	Eden	Furness	South Lakeland	Grand Total
Sum of 01 Physical	300	301	156	252	184	443	1636
Sum of 02 Sexual	34	69	15	4	46	55	223
Sum of 03 Emotional and Pschological	142	66	92	66	104	75	545
Sum of 04 Financial	68	96	67	48	100	77	456
Sum of 05 Modern Slavery	0	0	0	0	0	0	0
Sum of 06 Discriminatory	5	2	2	5	0	5	19
Sum of 07 Organisational	35	7	18	5	17	41	123
Sum of 08 Neglect and Acts of Omission	183	137	109	242	74	181	926
Sum of 09 Self Neglect	12	4	11	5	5	4	41
Sum of 11 Domestic Abuse	34	12	17	25	17	6	111
Sum of Total Main Abuse Groups	813	694	487	652	547	887	4080
Sum of 10 Disability Hate Crimes	0	0	0	0	0	0	0
Sum of 12 Honor based Violence/Forced Marriage	0	0	0	1	0	0	1
Sum of 13 Cyber Bullying	0	0	0	0	1	1	2
Sum of 14 Internet Scamming	2	0	0	0	0	0	2
Sum of 15 Slavery	0	0	0	0	0	0	0
Sum of 16 Human Trafficking	0	0	0	0	0	0	0
Sum of 17 Forced Labour	0	0	0	0	0	0	0
Sum of 18 Domestic Servitude	0	0	0	0	0	0	0
Sum of 19 Pressure Ulcers	25	16	17	12	8	29	107

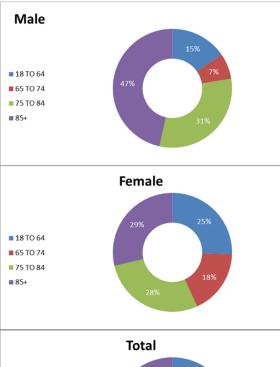
Deprivation of Liberty Data

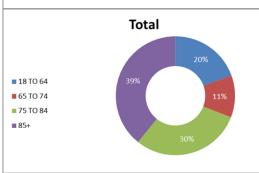
Deprivation of Liberty: Department of Health Return - Cumbria

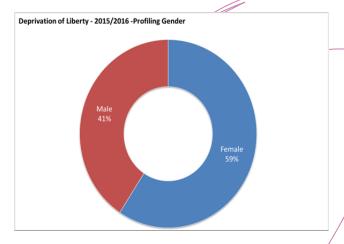
Return Year	Authorisation Granted	Not Granted	Other	Total
2013/2014	34	51	0	85
2014/2015	235	150	95	480
2015/2016	510	70	430	1010

Other Refers to requests either withdrawn or awaiting sign off at end of year.

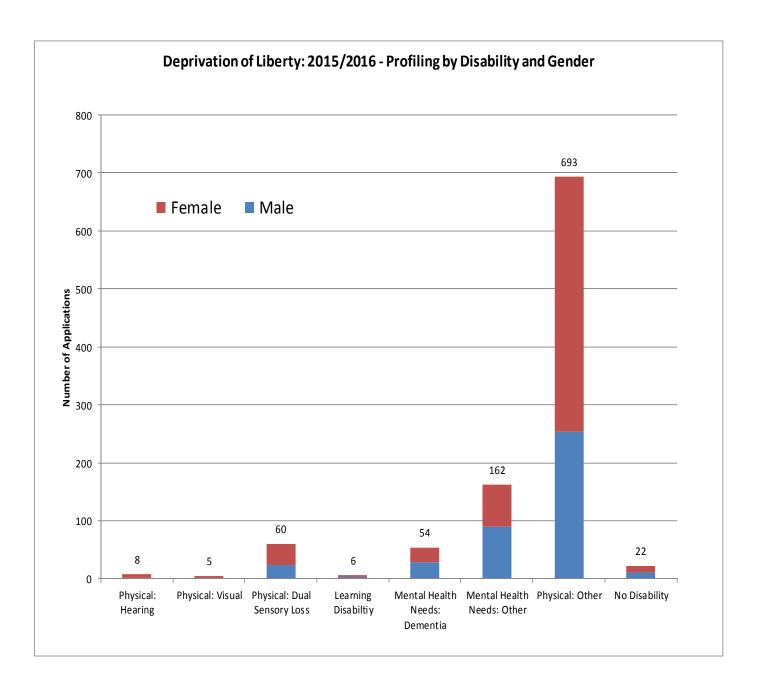








Age Band	Male	Female	Total
18 TO 64	92	105	197
65 TO 74	42	73	115
75 TO 84	186	116	302
85+	278	118/	396
	598	412	1010
	59%	41%	



Disability	Male	Female	Total
Physical: Hearing	1	7	8
Physical: Visual	2	3	5
Physical: Dual Sensory Loss	24	36	60
Learning Disabiltiy	3	3	6
Mental Health Needs: Dementia	28	26	54
Mental Health Needs: Other	89	73	162
Physical: Other	254	439	693
No Disability	11	11	22
Grand Total	412	598	1010

Statements from Strategic Partners

Health, Care and Community Services, Cumbria County Council

The County Council continues to be fully committed to the effective delivery of its statutory responsibilities and functions.

Cumbria County Council continue to work in partnership with colleagues in Lancashire, Blackpool and Blackburn with Darwen councils to ensure that the Pan Lancashire and Cumbria Safeguarding Policy and Procedures manual hosted via Tri-X delivers the necessary detailed direction and guidance to all parties in relation to the statutory responsibilities described in the Care Act and supporting guidance. Cumbria County Council also updated the organisations internal Safeguarding Procedure in late 2015 to reflect and promote the 6 safeguarding principles and the required change in approach required to embrace Making Safeguarding Personal. The Procedure will continue to be regularly reviewed and updated in response to Care Act updates and refreshes.

The safeguarding team has been strengthened and there is a dedicated Safeguarding Adults Manager (SAM) located in each of the 6 locality operational teams. The role of the SAM is to provide professional advice and guidance to all staff both within the County Council as well as external partners and providers across Cumbria. The SAMs proactively seek out opportunities to raise awareness and knowledge on all aspects of safeguarding by visiting teams and services on a regular basis. This activity is undertaken in pursuit of prevention and proportionality and has received some very positive feedback from providers who have received this support.

To improve the quality and consistency of the Council's response to all enquiries, each district office has developed a Single Point of Access (SPA) which is supported by a range of team members including Social Work, Occupational Therapy, operational Team Manager and a SAM in order to improve the quality of decision making in response to an enquiry resulting in the most appropriate response to the enquirer. Not all enquiries will require consultation with all members of the SPA but this system will support improved responses to Safeguarding alerts by supporting decision making through increasing the pool of knowledge available. A further outcome of embedding proportionality in response to enquiries is strengthened through this approach.

The SAMs attend all internal operational team meetings and safeguarding is a standard agenda item at each meeting to ensure that there is dedicated time to discuss pertinent issues relating to practice, to share feedback and learning relating to safeguarding adult reviews, good practice examples or provide the opportunity to interrogate the teams' performance in relation to safeguarding work. The Safeguarding team also works collaboratively across the Council to support all officers in relation to safeguarding matters, for example, working with colleagues in the commissioning team to ensure that we are clear with our commissioned services about our expectations in relation to their safeguarding responsibilities. This work supports us in pursuit of accountability across the system and also to individuals who come into contact with the service.

The SAMs provide Safeguarding Adults Sessions to the CSAB partner agencies in order to raise awareness and clarify roles and responsibilities by visiting teams and services on a regular basis. This function is used as vital opportunity to embed Making Safeguarding Personal within the multi-agency cohort.

Our 2015/16 safeguarding data informs us that in 94% of completed enquiries the risk to the individual is either reduced or removed. This indicates that across the partnership we are effective in our aim to protect and safeguard adults from abuse or neglect.

Adrienne Halliwell, Senjor Manager Safeguarding and Care Governance

NHS CUMBRIA CCG

As commissioners of high quality, safe healthcare, NHS Cumbria Clinical Commissioning Group (CCG) has responsibility for ensuring that the health contribution to safeguarding is discharged effectively across the whole local health economy through its commissioning arrangements and partnership working. It has a direct role in quality improvement in General Practice Safeguarding arrangements.

NHS England has a statutory duty to conduct a performance assessment of each CCG and it does this through an annual assurance process.

Safeguarding Adults continues to be a high priority for the CCG and has been embedded across all commissioning intentions.

NHS Cumbria CCG has worked within the multiagency partnership to ensure that the health safeguarding system is able to work effectively and collaboratively to protect adults at risk by:

- Being an active member of the CASB and CASB Safeguarding Operations Group
- Participating as panel members in review activity to analyse and improve health safeguarding and multiagency systems
- Supporting the development of the CASB Sub Groups

NHS Cumbria CCG's Designated Leads have also supported the Board and its subgroups in the development of the following:

- Discussions regarding safeguarding issues relating to suicide
- Identification of "silo-d" thinking and behaviour
- Focus on proactive and preventative safeguarding
- Study of different ways of doing serious case reviews
- Consideration of how change is achieved in health settings and effective learning methods.

NHS Cumbria CCG Commissions the following health organisations in Cumbria:

- CPFT
- NCUHT
- UHMBT
- CHOC

Although the CCG does not commission the Unity Drug and Alcohol Service, the CCG has links with the service and their commissioner (Public Health within the Local Authority).

The CCG holds the health organisations it commissions to account by ensuring that a continuing programme of assurance is undertaken with health providers through an annual safeguarding self-assessment. This self-assessment against a set of agreed standards monitors the safeguarding expectations and responsibilities outlined in provider contracts.

The self-assessment is reviewed annually to incorporate requirements for additional assurance from health organisations e.g. Issues raised in Serious Case Reviews, Domestic Homicide Reviews.

The self-assessment was strengthened this year to include the following NHS England priorities and which are also key areas of concern for the local multiagency adult safeguarding agenda:

- Implementation of the Care Act Meeting the statutory requirements to co-operate to help and support adults in need and their carers
- Prevent Identifying and supporting individuals who may be vulnerable and at risk of radicalisation
- FGM awareness, identification and support for victims and prevention for potential victims.
- Domestic Violence Meeting the NICE Public Health Guidance in the identification, prevention and reduction of domestic violence and abuse

The above topic areas are also incorporated in the CCG's safeguarding strategy which has been shared with health agencies.

Other areas where the CCG has influenced and supported improvement and prevention of abuse and neglect include:

- Assurance that health agencies are compliant with requirements of the Disclosure and Barring Service (DBS) to ensure that individuals working or volunteering with vulnerable adults receive the appropriate employment checks.
- Supported the planning and commissioning of the Cumbria Bridgeway service for victims of sexual assault.
- Attendance at all provider safeguarding committees oversight of all incidents.

The CCG has continued to lead the health system Safeguarding Practitioner Forum which brings together the county's health system safeguarding leads on a quarterly basis to discuss, update and problem solve identified issues.

Safeguarding Supervision is offered by the Designated Nurse for Safeguarding to Adult Safeguarding lead nurses within the health trusts.

Improvement in General Practice systems for Adult Safeguarding has been led by the County Lead GP for Adult Safeguarding and on a locality basis by Named GPs for Safeguarding, who are in regular contact and offer support and advice to the practices within their locality.

The CCG Safeguarding Leads have also met regularly with colleagues from NHS England to discuss health safeguarding system issues and initiatives.

Key achievements

Safeguarding Strategy, NHSE assurance

Key Challenges

- Ensure that safeguarding is embedded in Quality and Safety visits within commissioned services,
- To continue to increase and embed awareness of domestic violence and abuse across all providers and primary care embed National Institute of Clinical Excellence (NICE) Guidelines for Domestic Abuse.
- Work with partners to prevent harm and improve the safety of residents in care homes including transfer of care issues, delayed discharge, sharing of soft intelligence with multi-agency partners.

Future Plans

- Safeguarding training will be reviewed in line with the Intercollegiate Document for Safeguarding Adults. The training needs subsequently identified will need to be embedded across Primary Care in order to ensure compliance and promote better engagement in safeguarding.
- The expanding agenda for safeguarding will have to be managed so that safeguarding adults and children are interlinked to include PREVENT, Domestic Violence and Abuse, Female Genital Mutilation and also the Mental Capacity Act.
- Developing a more robust system to measure how primary and secondary care services learn lessons from Safeguarding Adult Reviews and Domestic Homicide Reviews

Anne Cooke, Safeguarding Business Manager, Cumbria Clinical Commissioning Group

National Probation Service - Cumbria

The National Probation Service continues to prioritise safeguarding of adults and children and this remains a core task for all grades of staff. As an agency, we are represented at multi-agency meetings at Board level and at other forums, to ensure we can contribute to wider policy and then disseminate internally to our staff. We attend multi-agency training events and have a designated lead manager who promotes good practice amongst the staff group and cascades learning from any safeguarding adult reviews.

Despite the many changes to our agency over the last 2 years, we remain committed to working with partnership agencies to ensure Safeguarding Adults continues to be a focus of our work.

Sarah Ward, Head of Cumbria, National Probation Service

North Cumbria University Hospitals Trust

North Cumbria University Hospitals Trust is fully committed to meeting Safeguarding Adults requirements under the Care Act. People coming into hospital are often in a vulnerable position and form trusting relationships with those caring for them. As such frontline hospital staff are in a key position to raise alerts about safeguarding concerns. The team has expanded recently to include a Domestic and Sexual Violence advisor and a Learning Disabilities lead nurse, both members of staff are extremely experienced in supporting patients in these areas. The team has added to its expertise by appointing a nurse with experience as an Approved Mental Health Professional (Mental Health Act) and Best Interest Assessor (Mental Capacity Act/Deprivation of Liberty Safeguards) as Adult Safeguarding Lead. In addition the Learning Disabilities Lead has experience of leading on the Government's anti-radicalisation programme PREVENT and will reinforce the Trust's efforts in this field.

Trust staff alert the Local Authority of safeguarding concerns for inpatients, outpatients and patient attending the Emergency Department. As a team we are developing our skills and knowledge in partnership with other agencies. Working collaboratively with them and our patients to ensure patients accessing services are safeguarded.

Tony Walker, North Cumbria University Hospitals NHS Trust

University Hospitals of Morecambe Bay

At University Hospitals of Morecambe Bay we remain committed to ensure that Safeguarding remains high on the Trusts agenda. A comprehensive Governance structure has enabled significant progress with regards to safeguarding adults at risk who along with Board partners we provide services to. UHMBT have continued to embed the principle of safeguarding as everyone's business. This principle supports and ensures that all staff across the organisation understands their responsibility and accountability in relation to safeguarding adults at risk. Significant progress has been made in relation to policy and procedure within the organisation that underpins the principle of how care is provided. Most significant policy development has been made in relation to:

- Adults at Risk Policy
- PREVENT (Counter terrorism Strategy) Policy
- Mental Capacity Act and Deprivation of Liberty Safeguards Policy
- Domestic Violence Policy

UHMBT fulfils its statutory duties with the appointment of a Named Nurse for Safeguarding Adults. The Trust has gone further to improve the safeguarding adult's workforce with the appointment of a specialist nurse for Learning Disabilities and also collaborative work with the Crime Commissioner in the provision of Domestic and Sexual Violence Advisors. Along with Board members the Trust continues to participate in the LASB and its sub groups to ensure effective collaborative improvement. Internally the Trust Safeguarding Operational Performance Group continues to report directly to the Quality Committee Statutory education of the Trust workforce remains highly productive with over 80% of the Trust educated in safeguarding adults at risk (including PREVENT) and also education around the Mental Capacity Act, Mental Health Act and also Deprivation of Liberty Safeguards. A successful safeguarding conference in 2015 facilitated by the Trust enabled further engagement with both internal and external partner agencies. A Safeguarding Strategy of UHMBT has been developed and has enabled the safeguarding team to further develop the knowledge awareness and individual practitioner responsibly relating to statutory legislation and the important role they play in protecting our patients. A recent audit of Safeguarding Children undertaken by Merseyside Internal Audit Agency (MIAA) provided a significantly high level of assurance that the safeguarding adults at risk policies and procedures were providing robust challenge to internal and external partner agencies.

Mark Lippett, Named Nurse Safeguarding and Child Protection, University Hospitals of Morecambe Bay NHS Foundation Trust

Cumbria Police

NCumbria Constabulary is committed to working with other professionals and partners to provide the necessary support to vulnerable adults living in our communities. Where police attend incidents that highlight vulnerable people are at risk, specialist Public Protection officers are tasked with dealing with the issues in a collaborative way with partners.

Between the 1st April 2015 and 31st March 2016, 7131 referrals were made by Cumbria Constabulary to other agencies. The majority (4781), related to mental health issues. Others included physical abuse (431), financial abuse (158), neglect (101), honour based violence (2) and sexual abuse (189).

Cumbria Constabulary attended a number of strategy meetings held to discuss the safeguarding of vulnerable adults. Where criminal offences were identified, investigations took place and individuals were prosecuted or appropriately dealt with by an out of court disposal.

Doug Marshall, T/Detective Superintendent, Public Protection and Crime Operations, Cumbria Constabulary.

Cumbria Partnership NHS Foundation Trust

During this year Cumbria Partnership Trust continues in its commitment to prioritising Safeguarding Adults not only within the trust but also with our multi-agency partners.

The Safeguarding Team is now fully recruited to in regards of nurses and comprises of a Named Nurse for Safeguarding Adults and two Specialist Nurses for Safeguarding Adults, the team works closely with the Named Nurse and Doctor for Safeguarding Children.

The new structure is supports the Adult Care Groups namely Community Care Group, Specialist Care Group and Mental Health Care Group to ensure that Safeguarding Adults remains high on their agendas and the team will continue to support frontline staff in identifying and effectively supporting not only adults but children who may be at risk.

Following the development of the CPFT Safeguarding Strategy for Adults and Children 2016 -2019 there is a focus on training and developing adult safeguarding supervision. It is recognised that some of the key priorities also involve children for example, Female Genital Mutilation and Prevent. The Safeguarding team are working together to ensure that there is a focus on children and adults in these areas.

Level I safeguarding adults training is provided as mandatory for key groups and Level 2 adult face to face training package will be developed in line with the Intercollegiate Document for Safeguarding Adults. A plan is in place to support frontline staff working in high risk areas offering adult safeguarding supervision.

The Safeguarding Team operates an internal duty nurse system for live safeguarding advice during office hours and there is on-call support at other times.

Other Key Priorities identified include embedding;

- Implementation of the Care Act 2014 including Making Safeguarding Personal and Self Neglect
- Mental Capacity Act and Deprivation of Liberties Safeguards training
- Prevent (The Governments anti-radicalisation programme)
- Domestic Abuse
- Female Mutilation
- Modern Slavery and Human Trafficking
- Suicide and Self Harm

The Safeguarding team is working with other teams and experts within the organisation to ensure that the strategy will be delivered within the timescales. The Safeguarding team is involved with CSAB multi-agency task and finish groups which will also support the strategy and ensures that safeguarding adult processes are embedded throughout Cumbria.

The Safeguarding Policy was updated in 2016 there are supporting chapters including Care Act 2014, Prevent, pressure ulcers, self-neglect and domestic abuse which will be available for staff from February 2017.

Cumbria Partnership Trust has a commitment to multi-agency involvement and has representation at Executive Board, Safeguarding Operations Board, Sub-groups and Task and Finish Groups. The representatives are active with our partners in facilitating, development and improvement of safeguarding practice in partnership with other agencies.

Sarah Gaskell - Named Nurse Safeguarding Adults Cumbria Partnership NHS Foundation Trust

Planned Developments going forward

- I. The Safeguarding Adults Managers have taken a lead with implementing Safeguarding Adults Locality Groups. The function of the groups is to promote the principles of Making Safeguarding Personal in all safeguarding work Locality groups being set up to directly link the strategic delivery plan from the CSAB. The groups will use lessons learnt from SARs and good practice case studies to inform the practice on a local level. These will be chaired by the SAMS to ensure a consistent countywide approach with the focus being:
 - To deliver the Cumbria Safeguarding Adult Board Business Plan at a local level
 - To promote and maintain effective inter-agency working
 - To promote and co-ordinate good practice in Safeguarding Adults work at a local level
 - To receive overview reports from Safeguarding Adults Reviews and other case reviews with a view to dissemination of learning.
 - To contribute to the development and implementation of CSAB policies and procedures at local level
 - Monitor, review and analyse statistical reports on safeguarding activity.
- 2. Safeguarding Adults Support sessions are being developed to support partner agencies including the third sector and voluntary organisations. Feedback will be collated in order that the sessions can be responsive to the needs of individuals and organisations involved in safeguarding adults.
- 3. The electronic recording system hosted by Cumbria County Council, Health, Care and Communities Directorate will be reviewed and updated to ensure our performance can continue to be evidenced and reported upon and include evidence that we have embedded the principles of MSP in practice.
- 4. We will review and refresh our website to ensure it provides clear and accessible information to the whole community and develop a wider Communications plan.
- 5. We will continuously review our system and structure to ensure its effectiveness in delivering our strategic priorities.
- 6. We will continue to strengthen our relationship with key strategic partners.
- 7. SARs Development of a toolkit to enable a proportionate response to concerning cases and develop and implement a cross agency escalation framework
- 8. Dignity and Prevention sub group will focus on Suicide prevention, Complex cases and strengthening Links to Health and Wellbeing Board.
- 9. Learning and Development sub group will focus on training on how to implement the MCA, when and how to request Best Interest Assessments and raising awareness of Making Safeguarding Personal.
- 10. Performance and Quality sub group will focus on updating a dataset to focus on the core dataset from IAS and identifying MSP indicators for inclusion.

Appendix I – Two Year Work Programme 2016-17-18

Priority I	Outcome	Action	Lead
Effective Leadership and Collaborative working	Partners clear about their roles and responsibilities and demonstrate commitment to the Boards activity through	Chair to engage outside of the Board meetings with Chief Executives and key leaders from the strategic partnership This requires ongoing engagement of Chair with partners.	Board Chair and Board Deputy Chair
	Boards activity through their participation at all levels to deliver the Boards Work Programme.	Board attendance is monitored and through the Operations Groups, sub-groups and task and finish groups there is strong engagement from partners in delivering the work programme.	
	Priority is to collaborate more closely with the Children's Safeguarding Board, and the Community Safety Partnership.	Seek to engage Chairs and board managers of the three key strategic partnerships (Children's' Board, Community Safety Partnership and Health and Wellbeing Board to identify areas of collaboration and joint working.	Board Chair supported by Board Manager

Priority 2	Outcome	Action	Lead
Promoting choice and control with a proportionate response	Safeguarding interventions will be focus on the outcomes that are important to the individual.	Partners will ensure that MSP principles are incorporated in all Safeguarding procedures and in training events.	CSAB Partnership members and Safeguarding Leads.
	Individuals will be supported to be as involved in the Safeguarding intervention.	Partners will ensure that their workforce understands the role of Advocacy in Safeguarding and when it is indicated.	
	Safeguarding interventions will deliver the least intrusive response appropriate to the risk presented.	Partners will work collaboratively to create a joined up approach to managing risk, which balances the need to create protective mechanisms whilst acknowledging individual rights and choice.	
	The Safeguarding response will demonstrate the appropriate application of the MCA.	Partners will ensure their staff receive regular training on MCA and develop systems to audit its application in practice.	

Priority 3	Outcome	Action	Lead
Develop Preventative Strategies	Individuals will be protected from abuse and neglect.	Evidence of the achievement of individual outcomes and risk reduction data in Quarterly data returns.	CSAB Partnership members and Safeguarding Leads.
	Individuals and the wider community are able to identify what constitutes abuse or neglect and know how to raise concerns.	Information and advice on Adult Safeguarding is readily available and easily accessible in a range of formats in all organisations and on the Board website.	
	Community services and Third sector organisations are aware of their responsibilities to protect people from harm and understand how they can achieve this.	Community organisations are informed of how to access advice, information and training resources relating to Adult Safeguarding with a focus on preventing harm. CSAB website regularly updated and reviewed.	
	Organisations work collaboratively to prevent abuse and neglect.	Partners will ensure their organisation is represented at every level of Safeguarding activity required by CSAB and ensure their workforce are clear about their roles and responsibilities. Communication and escalation policies are in place.	

Priority 4	Outcome	Action	Lead
Multi-agency workforce development	The Cumbria workforce is skilled and competent in delivering their safeguarding responsibilities.	Formal training opportunities are provided to all staff appropriate to their role. Partners have systems in place to ensure support and guidance to staff is available on request through effective line management structures and identified leads in organisations. Evidence of plans and activity to CSAB Operations Group at quarterly intervals.	CSAB Partnership members and Safeguarding Leads.
	The workforce have a clear understanding of their own and colleagues roles and responsibilities in relation to safeguarding.	Policies and procedures are clear and individuals know how to access them. Opportunities are created for shared learning across organisations.	
	The workforce has a clear understanding and knowledge of the MCA and when it should be applied.	Partners establish effective systems for training and updating their workforces' knowledge of MCA.	
	There is an agreed mechanism for sharing lessons learnt from SAR's and DHR's.	Partners establish effective systems to demonstrate that lessons learnt are disseminated and recommendations are implemented.	

Priority 5	Outcome	Action	Lead
Hold partners to account and seek assurance of effective arrangements	Local Safeguarding arrangements are effective at preventing and responding to abuse and neglect.	Performance data is regularly shared and evaluated through the Operations Group and reported to the Board.	CSAB Partnership members and Safeguarding Leads.
	Knowledge and data informs continuous improvement.	Collaborative work plans and activity are regularly reviewed and prioritised at the Operations Group.	
	Safeguarding Adult Reviews inform and improve policy and intervention.	Improvement plans provide clear actions, responsibilities and accountability.	
	We are clear that we are there to hold partners to account through providing constructive challenge and scrutiny.	Our lay members will strengthen this approach through supporting formal challenge events led by the Chair. This will enable Board partners to report on their contribution to delivering the Board's work programme.	Board Chair supported by Board Manager.
	The Operations Group and Sub Group are fully supported	All Partners to review and assure the dedicated resources to the Operations and Sub Groups are	CSAB Partnership members supported by their
	by all Partners, with effective skilled and empowered resources to deliver the Board	appropriate and supported by the Partner Leadership Teams.	Leadership Teams.
	priorities.		