

## APPENDIX 1

### Protocol in support of the relationship between the Tower Hamlets Health and Wellbeing Board, the Tower Hamlets Local Safeguarding Children Board and the Tower Hamlets Local Safeguarding Adults Board

March 2014

#### 1. Introduction

1.1 Health and Wellbeing Boards (HWBB) were established by the Health and Social Care Act 2012. They are intended to be a forum where key leaders from the health and care system work together to improve the health and Wellbeing of their local population and reduce health inequalities.

1.2 The Children Act 2004<sup>1</sup> requires each local authority to establish a Local Safeguarding Children Board (LSCB). It is the key statutory mechanism for agreeing how the relevant organisations in each local area will co-operate to safeguard and promote the welfare of children and to ensure that these agencies are effective. It operates under guidelines known as 'Working Together to Safeguard Children'<sup>1</sup>; the latest version came into effect from 15<sup>th</sup> April 2013.

1.3 Safeguarding Adult Boards (SABs) are not currently statutory bodies but will assume this status with the passage of the forthcoming Care Bill. Currently Boards operate within the framework promoted by 'No Secrets'<sup>2</sup> which was published by the Department of Health and the Home Office in March 2000 and by 'Safeguarding Adults' which was published by the then Association of Directors of Social Services in October 2005<sup>3</sup>. In March 2013, NHS England published a document 'Safeguarding Vulnerable People in the Reformed NHS- Accountability and Assurance Framework'<sup>4</sup> which gave guidance on the relationships between the Safeguarding Boards and the HWBB (section 4.2).

1.4 Following discussions between the Independent Chair of Tower Hamlets Safeguarding Adults Board, the Independent Chair of the Local Safeguarding Children's Board and the Chair of the Health and Wellbeing Board, it was agreed that there should be a formal agreement outlining this relationship.

1.5 This Tower Hamlets Protocol sets out the distinct roles and responsibilities of the Boards, the interrelationships between them in terms of safeguarding, and wellbeing and the means to ensure effective co-ordination between the Boards.

<sup>1</sup> <http://www.education.gov.uk/aboutdfe/statutory/g00213160/working-together-to-safeguard-children>

<sup>2</sup>

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/194272/No\\_secrets\\_guidance\\_on\\_developing\\_and\\_implementing\\_multi-agency\\_policies\\_and\\_procedures\\_to\\_protect\\_vulnerable\\_adults\\_from\\_abuse.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/194272/No_secrets_guidance_on_developing_and_implementing_multi-agency_policies_and_procedures_to_protect_vulnerable_adults_from_abuse.pdf)

<sup>3</sup> <http://www.adass.org.uk/images/stories/Publications/Guidance/safeguarding.pdf>

<sup>4</sup> <http://www.england.nhs.uk/wp-content/uploads/2013/03/safeguarding-vulnerable-people.pdf>

Comment [PP]:

Comment [PP]: S.13

Comment [PP]: The Statutory Guidance

Comment [PP]: This is incorrect as we now have the Care Act as per your cover sheet and reference is made here to the Care Bill? Care Act very specific about SAB's S.42-45 and S.68 Schedule 2

1.6 This agreement will be discussed at the next meetings of both Safeguarding Boards and then circulated to the Health and Wellbeing Board for ratification.

## **2. The purpose of and principles of the Health and Wellbeing Board**

2.1 Each top tier and unitary authority must have its own Health and Wellbeing Board. The Tower Hamlets Health and Wellbeing Board has agreed terms of reference which outline its underlying principles, key responsibilities, its role, purpose and membership. This document is included at Appendix 1.

## **3. What are the functions of Health and Wellbeing Boards?**

3.1 Health and Wellbeing boards have strategic influence over commissioning decisions across health, public health and social care through their Joint Strategic Needs Assessment (JSNA) and the development of their Health and Wellbeing strategy.

3.2 Boards are intended to strengthen legitimacy by involving democratically elected representatives and patient representatives in commissioning decisions alongside commissioners across health and social care. The boards also provide a forum for challenge, discussion, and the involvement of local people.

3.3 Boards will bring together Clinical Commissioning Groups and councils to develop a shared understanding of the health and wellbeing needs of the community. They will undertake the JSNA and develop a joint strategy for how these needs can be best addressed. This will include recommendations for joint commissioning and integrating services across health and care.

3.4 Through undertaking the JSNA, the Board will drive local commissioning of health care, social care and public health and create a more effective and responsive local health and care system. Other services that impact on health and wellbeing such as housing and education provision will also be addressed.

## **4. The Purpose of the Tower Hamlets Local Safeguarding Children Board (LSCB)**

4.1 Section 14 of the Children Act 2004 sets out the objectives of LSCBs, which are:

- (a) to coordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area; and
- (b) to ensure the effectiveness of what is done by each such person or body for those purposes

4.2 Regulation 5 of the Local Safeguarding Children Boards Regulations 2006 sets out that the functions of the LSCB in relation to the above objectives under section 14 of the Children Act 2004, are as follows:

- developing policies and procedures for safeguarding and promoting the welfare of children in the area of the authority, including policies and procedures in relation to:

- the action to be taken where there are concerns about a child's safety or welfare, including thresholds for intervention;
- training of persons who work with children or in services affecting the safety and welfare of children;
- recruitment and supervision of persons who work with children;
- investigation of allegations concerning persons who work with children;
- safety and welfare of children who are privately fostered
- co-operation with neighbouring children's services authorities and their Board partners;
- communicating to persons and bodies in the area of the authority the need to safeguard and promote the welfare of children, raising their awareness of how this can best be done and encouraging them to do so;
- monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve;
- participating in the planning of services for children in the area of the authority; and
- undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned

4.3 The role of the LSCB is to scrutinise and challenge the work of agencies both individually and collectively. The LSCB is not operationally responsible for managers and staff in the constituent agencies.

## **5. Tower Hamlets Safeguarding Adults Boards (SAB)**

5.1 The focus of the work of Safeguarding Adults Boards is the prevention of harm to 'vulnerable' adults. The forms of abuse which the Board aims to prevent and address are:

- physical abuse, sexual abuse, psychological abuse, financial or material abuse, neglect or acts of omission, discriminatory abuse.

5.2 The role of the SAB is to ensure effective safeguarding arrangements are in place in both the commissioning and provision of services to vulnerable adults by individual agencies and to ensure the effective interagency working in this respect.

5.3 The Board has identified agreed objectives and priorities for its work which include clear policy, procedural and practice arrangements, mechanisms to secure coordination of activities between agencies, the provision of training and workforce development in support of safeguarding and quality assurance and performance management arrangements to test the effectiveness of safeguarding and the impact of the Board.

5.4 Effective communication and engagement between the Boards. Safeguarding is everyone's business. As such, all key strategic plans, whether they be formulated by individual agencies or by partnership forums, should include safeguarding as a cross-cutting consideration to ensure that existing strategies and service delivery, as well as emerging plans for change and improvement, include effective safeguarding arrangements.

## 6. Interrelationships

6.1 The Health and Wellbeing Strategy is a key commissioning strategy for the delivery of services to children and adults across the Borough and so it is critical that, in compiling delivering and evaluating the strategy, there is effective interchange between the Health and Wellbeing Board and the two Safeguarding Boards. Specifically there need to be formal interfaces between the Health and Wellbeing Board and the Safeguarding Boards at key points including:

- The needs analyses that drive the formulation of the Health and Wellbeing Strategy and
- The Safeguarding Boards' annual business plans. This needs to be reciprocal in nature assuring that Safeguarding Boards' needs analyses are fed into the JSNA and that the outcomes of the JSNA are fed back into safeguarding boards' planning;
- Ensuring each Board is regularly updated on progress made in the implementation of the Health and Wellbeing Strategy and the individual Board plans in a context of mutual challenge;
- Annually reporting evaluations of performance on plans to provide the opportunity for reciprocal scrutiny and challenge and to enable Boards to feed any improvement and development needs into the planning process for future years' strategies and plans.

6.2 Whilst currently there is no statutory requirement to secure a formal relationship between the Health and Wellbeing Board and the safeguarding boards there is draft guidance steering in this direction that may become a requirement. For example in Working Together 2013 page 51 states "The NHS Commissioning Board (now NHS England) will also lead and define improvement in safeguarding practice and outcomes and should also ensure that there are effective mechanisms for LSCBs and Health and Well-Being boards to raise concerns about the engagement and leadership of the local NHS."

6.3 The guidelines also stipulate that the LSCB annual report should be submitted to the Chair of the HWBB. It is probable that these requirements will be replicated for Adult Safeguarding Boards when they are made statutory in the next year or so. The Tower Hamlets Health and Wellbeing Board received both safeguarding annual reports in September 2013 and will continue to receive these on an annual basis.

6.4 The opportunities presented by a formal working relationship between the Tower Hamlets Health and Wellbeing Board and the two safeguarding boards can be summarised as follows:

- Securing an integrated approach to the JSNA, ensuring comprehensive safeguarding data analysis in the JSNA
- Reflecting safeguarding issues raised by the LSCB and SAB business plans with the HWB Strategy and related priority setting
- Ensuring safeguarding is "everyone's business", reflected in the public health agenda

- Evaluating the impact of the HWB Strategy on safeguarding outcomes, and of safeguarding on wider determinants of health outcomes (such as domestic abuse)
- Cross Board scrutiny and challenge and “holding to account” the Wellbeing Board for embedding safeguarding, and the Safeguarding Boards for overall performance and contribution to the HWB Strategy.

## **7. Arrangements to secure co-ordination between the Boards**

7.1 In order to realise these opportunities, it is proposed that the following arrangements would be put in place to ensure effective co-ordination and coherence in the work of the three Boards.

- i. Between April and July each year, the Safeguarding Boards will share their proposed business plans with the Health and Wellbeing Board for challenge.
- ii. Between May and September each year, the Health and Wellbeing Board will present to the Safeguarding Boards the review of the Health and Wellbeing Strategy, an update on the JSNA with the proposed priorities and objectives to enable the safeguarding boards to scrutinise and challenge performance of the Health and Wellbeing Board.
- iii. Between September and December each year, the Independent Chairs of the two Safeguarding Boards would present to the Health and Wellbeing Board their annual reports outlining performance against business plan objectives in the previous financial year. This would be supplemented by a position statement on the Boards’ performance in the current financial year. This would provide the opportunity for the Health and Wellbeing Board to challenge the performance of the Boards, to draw across data to be included in the JSNA and to reflect on key issues that may need to be incorporated in any refresh of the Health and Wellbeing Strategy.

## **8. Conclusion**

8.1 The roles of the LSCB and LSAB in relation to the HWB would be one of equal partners underpinned by this protocol sharing influence and mutual challenge on safeguarding and health across the lifecourse. Each is accountable to each other and the LSCB has a statutory responsibility to challenge and hold agencies to account for the safety of Tower Hamlets’ children. A similar responsibility will be given in law to the LSAB. This protocol is designed to ensure these functions are discharged effectively in Tower Hamlets without duplicating functions or creating additional structures.

### **Supporting Documents**

- Tower Hamlets Health and Wellbeing Board Terms of Reference
- Tower Hamlets LSCB Terms of Reference
- Objectives and core essentials of the Tower Hamlets Safeguarding Adults Board