



Harrow

Safeguarding Adults Board

Constitution

January 2024

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Legal Framework – go throughout and change

The Harrow Safeguarding Adults Board [‘HSAB’ or ‘the Board’] is established by Harrow Council (‘the Council’) under section 43 of the Care Act 2014 and the Care and Support Statutory Guidance (October 2014 and later revisions) [‘the Statutory Guidance’].

Aim

The aim of the Board is to ensure the effective co-ordination of services which safeguard and promote the welfare of adults in accordance with the Care Act 2014 and the Statutory Guidance.

Objectives

The HSAB is a multi-agency partnership that coordinates the strategic development and ensures the effectiveness, of the work undertaken by partner agencies to safeguard adults in Harrow experiencing, or at risk of, abuse and/or neglect.

The Board will work to ensure vulnerable adults are supported to make informed choices and maintain control over their lives.

These arrangements do not replace organisational and professional lines of accountability.

Functions

The core duties of the Board are set out in sections 43 and 44 and Schedule 2 of the Care Act and Chapter 14 of the Statutory Guidance issued under section 78 of the Care Act 2014 which require the Board to:

- Publish a Strategic Plan for each financial year detailing how it will meet its main objective and how this will be achieved.
- Publish an Annual Report detailing what the Board has done during the year to achieve its objectives and implement its Strategic Plan and what Members have done to implement the Strategy.
- Conduct any Safeguarding Adults Review in accordance with section 44 of the Care Act 2014. All SARs are subject to the six key principles that underpin all adult safeguarding work:
 - Empowerment
 - Prevention
 - Proportionality
 - Protection

- Partnership
- Accountability

In order to fulfil its core duties, the Board will also:

- Develop and maintain a Risk Register.
- Monitor and evaluate the effectiveness of action plans arising from Safeguarding Adult Reviews and monitor the impact of associated training and learning events.
- Ensure the partnership has up to date policies and procedures for safeguarding adults compliant with national legislation and guidance and accepted good practice.

In all activities the HSAB will promote equality of opportunity and aim to meet the diverse needs and wishes of adults in the area. The Board will ensure there is a strong commitment to Making Safeguarding Personal across the partnership, and that the voice of the citizen is present in the work of the Board and its constituent sub-groups.

Board members

The HSAB has a core membership of Harrow Council, North West London ICB (Integrated Care Board), the Metropolitan Police and other key agencies whose involvement is necessary for the Board to carry out its duties effectively.

The Council's Elected Member with ASC within their Portfolio is an active member of the Board.

A full list of current members is found in Appendix 1.

Co-ordinating the work of the HSAB and other local partnerships

The HSAB will have in place coordination, reporting and scrutiny arrangements as appropriate with key partnerships and stakeholders, where appropriate underpinned by mutually agreed protocols. These will include but will not be restricted to the Health and Wellbeing Board, the Crime and Drugs Partnership, Safer Harrow and the Children Safeguarding Partnership.

Budget

The HSAB budget will be set annually and will be sufficient for the Board to fulfil its function. The Executive Group are ultimately responsible for agreeing the budget and funding.

The budget may be revised during the year. Partners contributions to the Board are from the Harrow Council, the ICB, the Police and other partners with income and expenditure reported in the Annual Report.

Note SARs and discretionary SARs are funded jointly by the three statutory partners and these costs are not included in the budget.

Strategic Plan and Annual Report

The HSAB will publish a Strategic Plan which may will cover multiple years. This will address both short- and longer-term actions. An Annual Plan will be developed and monitored to ensure delivery. There will also be a separate risk register.

The Business Management Group will manage the delivery of the Strategic Plan, Annual Action Plan and the updating of the Risk Register as directed by the HSAB.

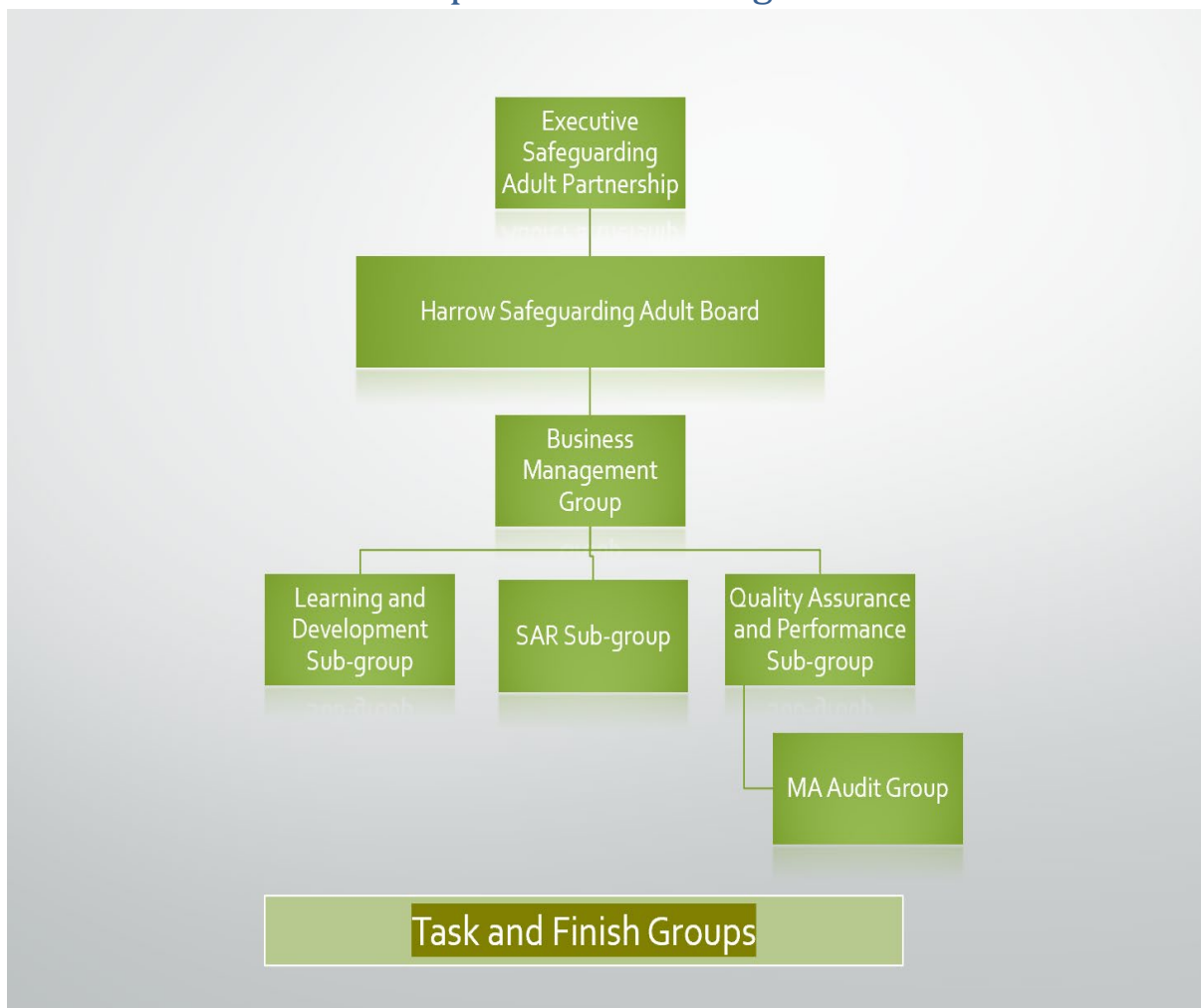
The HSAB will publish an Annual Report in accordance with the requirements of the Care Act. This report will be sent by the Chair to: the Chief Executive and Leader of the Harrow Council; the Police and Crime Commissioner and the Chief Constable; the chair of the Health and Wellbeing Board; the local Healthwatch, and any other relevant Partnership Body.

Policies and Procedures

Policies and procedures will be reviewed every three years or more frequently:

- If there are changes to legislative or statutory guidance in which case the
- Following the publication or dissemination of good practice / research evidence / information from the National Chairs Network etc.
- Changes to case law, judicial review etc
- The relevant policy and procedure will be reviewed within 3 – 6 months or earlier if required

HSAB Governance and Operational Arrangements



The governance structure above sets out how Harrow partners will ensure safeguarding arrangements are carried out effectively. The Safeguarding Adult Board oversees arrangements, and the Executive has responsibility for addressing “reserve matters” as directed by the HSAB including:

- Financial contributions to the partnership
- Resolving commissioning and service delivery issues which the HSAB is unable to resolve

The Independent Chair

The core members of HSAB – the Local Authority, ICB and Police - have determined that there should be an Independent Chair of the Board and Business Management Group. The Independent Chair is accountable to the Corporate Director for Children and Adults Services who also holds the position of Director of Adult Social Services. The Chair carries roles and responsibilities to ensure that the Board works collaboratively and effectively to fulfil its aim, objectives and functions; the Chair should meet the expectations stated in the Care Act Guidance.

The Independent Chair will be appointed for a minimum term of 3 years, following this period a competitive process will be undertaken. The Chair cannot serve more than 1 term.

A 360-feedback process will be used to assess the effectiveness of the chairing arrangements.

The Vice Chair and Chairs of Sub-groups

The Vice Chair of the HSAB will have a 2-year tenure and will be from one of the three core organisations. The Vice Chair will be selected via nominations from the three core organisations. If there is more than one nomination, then a secret ballot will be conducted at the next available HSAB meeting. If more than one candidate receives the same number of votes then the Independent Chair will have the casting vote.

Chairs of sub-groups will have a 2-year tenure. The selection process will follow that outlined above for the selection of the Vice Chair of the HSAB. However, sub-group chair nominations may be from any member organisation, subject to approval by the core members.

The Role and Performance of individual HSAB Members

Members of the HSAB have a responsibility to contribute to the work of the Board. Members are accountable to each other and to the organisation that they represent. Members will:

- Regularly attend and contribute to Board meetings.
- Able to present issues clearly in writing and in person.
- Knowledgeable about the work of their organisation.
- Knowledgeable about the local area and population.
- Committed to promoting the aims of the HSAB.
- Able to commit their organisation to agreed actions.
- Willing to challenge and be challenged.
- Have a thorough understanding of the multi-agency work to safeguard adults.
- Be familiar with government safeguarding legislation and guidance.
- Respond expeditiously to requests for information.

If Board members are unable to attend a meeting, they are expected to send a deputy, able to represent their organisation in the same capacity as the regular attendee.

Board members are expected to:

- Act as safeguarding ‘champions’ within their organisations and at any other partnership meetings that they attend
- Bring any significant safeguarding issues or challenges to the attention of the Board.
- Be responsible for ensuring HSAB guidance, policies, procedures, frameworks or resources are distributed within their organisation, incorporated into internal guidance, and are also expected to oversee the process of embedding them into operational practice.

Decision Making

Members of the Board will operate according to the governance arrangements of their organisation. Most decisions that the Board needs to make can be made with the delegated authority that Members hold on behalf of their agencies – one vote per agency. It is recognised that some matters may need to be referred into their agencies’ decision-making frameworks.

Wherever possible, decisions will be made by consensus. Where the Chair decides that this is not possible, the Chair can ask the three statutory funding partners to take a vote – one for each organisation. This can take place outside meetings if an urgent decision is required.

The principles outlined above will apply to decision making in the Business Management Group and sub-groups.

The HSAB will identify ‘reserved matters’ which it will delegate to the Executive certain for decisions and actions eg, budget, escalating concerns.

Governance Documents

The HSAB constitution shall only be amended with agreement of the Board.

The Business Management Group

The Business Management Group is often described as the ‘engine room’ is responsible for ensuring the work of the sub-groups is on track; that there is coordination between the sub-groups; that reports which do not fit neatly within the sub-groups are reviewed. The BMG will agree the agenda for the SAB. Members include the Chairs of the sub-groups, member agency for the voluntary / community sector and the BMU colleagues. It is chaired by the SAB Chair.

Sub-groups

The HSAB performs a number of its key functions through permanent sub-groups and separate task and finish groups. New sub-groups, can only be established with the agreement of the Business Management Group. Terms of Reference for each sub-group are established and subject to approval by the Business Management Group, or, if decided by the Independent Chair, the Board, and reviewed every 2 years.

All sub-groups will report to the Business Management Group, at each meeting using the Sub-group Chair's report pro forma, with exceptional issues highlighted to the next full Board meeting.

Quorum

The quorum for meetings of the Board and Executive, Business Management Group and sub-groups vary and are referenced with in the separate Terms of Reference – as a minimum the Chair or Vice-Chair; at least two of the funding partners and at least 50% of Members are required. Members are expected to send a deputy in their absence.

Confidentiality

All members of the Board and its sub-groups will treat information received according to the same principles of confidentiality that apply in the organisation they represent.

In general information should be treated in confidence, except where it has been made clear by the chair that it is intended for cascade by partner agencies. Likewise, any specific restrictions on sharing information will be made explicit by the chair (of the Board or sub-groups), including why such restrictions are necessary.

Appendix 1 – Membership of the Board

Name	Agency	Role
Lesley Hutchinson		Independent Chair

Harrow Council		
Name	Agency	Role
Liz Bruce	Adult Social Care	Director of Adults Social Care
Adegoke Anjorin	Adult Social Care	Acting Assistant Director – Safeguarding, DoLS & Provider Services
Natasha Ramchurn	Adult Social Care	Acting Assistant Director – Mental Health, Learning Disabilities & CYADS
Janice Noble	Community Safety	Head of Community Safety
Colin Griffiths	Adult Social Care	Principal Social Worker
Jeffrey Jansen	Business Intelligence Unit	Senior Analyst
Jonathan Kilworth	Business Intelligence Unit	Business Intelligence Partner, ASC
Shellian Campbell	Housing	Head of Housing Needs
Parmjit Chahal	Children’s Services	Strategic Director of Children’s Services
Cllr Jean Lammiman	Harrow Council Elected Members	Portfolio Holder – Adults Services & Public Health

North West London Integrated Care Board & Healthcare Provider Organisations

Name	Agency	Role
Sue Sheldon	North West London Integrated Care Board (NWL ICB)	Assistant Director for Safeguarding Adults and Children, Lead for NWL Child Death Review/LeDeR

Name	Agency	Role
Christine Asare-Bosompem	NWL ICB	Designated Nurse Safeguarding Adults, MCA & DoLS, Prevent Lead, Local Area Contact (LeDeR)
Christina Kelly	Royal National Orthopaedic Hospital NHS Trust (RNOH)	Head of Safeguarding
Trish Stewart	Central London Community HealthCare NHS Trust (CLCH)	Assistant Director of Safeguarding and Children's Public Health Nursing
Donna Thornley (Deputy HSAB/ Subgroups)	CLCH	Head of Safeguarding (North)
Emma Curran (Subgroups)	CLCH	Named Professional for Adult Safeguarding and MCA Lead
Ludmila Ibesaine	London North West University Hospitals NHS Trust (LNWH)	Head of Safeguarding (Children, Young People and Adults)
Angela Sobers	LNWH	Lead Professional for Adult Safeguarding, Trust MCA/DOLS Lead
Catherine Knights	Central & North West London NHS trust (CNWL)	Director of Quality (& SAR CRG Subgroup Co-Chair)
Gary Teera	CNWL	Deputy Borough Director, Harrow Mental Health Services
Hannah Whittingdon	London Ambulance Service	

Metropolitan Police Service & Probation Services

Name	Agency	Role
Sukhdeep Kanwar	Metropolitan Police Service (MPS)	Detective Chief Inspector, Public Protection
Koreen Logie	National Probation Service	Head of Service, Harrow and Barnet PDU

Voluntary, Community & Independent Sector

Name	Agency	Role
Susan Herring	Age UK HBB	Designated Safeguarding Lead
Dawn Sines	Age UK HBB	Deputy Director of Services (Statutory and Trust) & Head of Wellbeing Services
Deven Pillay	Community Connex	Chief Executive & Company Secretary / VCS representative
Asimah Naseem	Community Connex	Head of Service, Care Act & Advocacy Services
Julie Browne	HAD	Co-opted Trustee & Adult Safeguarding Lead
Angela Dias	HAD	Development Leader
Charmian Boyd	Harrow Carers	Chief Executive Officer
Allen Quine	VIA	Service Manager
Sabina Solomon	Mind In Harrow	Head of Services – Prevention & Recovery

Other Statutory Agencies

Name	Agency	Role
Rose Moore	Department for Work & Pensions (DWP)	Advanced Customer Support Senior Leader (ACSSL)
Jack Cooper	DWP	HEO Support to ACSSL
Simon Horn	London Fire Brigade	Borough Commander, Harrow
Samuel Abdullahi	Brent Council	Regulatory Team Leader, Resident Services (works across Brent and Harrow)

Attend In Advisory Capacity

Name	Agency	Role
Kaye Wise	HSAB Business Unit	Learning & Development Manager
Mick Brims	HSAB Business Unit	Strategic Partnerships Manager

Attend In Advisory Capacity As Needed

Name	Agency	Role
Jessica Falmer	Harrow Council	Team Leader, Children & Adults Legal Team / Nominated Solicitor to HSAB
Koreen Logie	National Probation Service	Head of Service, Harrow and Barnet PDU

Receives Papers & Attends As Required

Name	Agency	Role
Alex Dewsnap	Harrow Council	Managing Director
Charlie Sheldon	CLCH	Chief Nursing Officer

The Board does not currently have a 'user group' representative or lay member, however the Board ensures the voice of individuals at risk and citizens are heard and is looking to develop its approach further.

Appendix 2 - HSAB Complaints Process

This Board Complaints Policy only deals with complaints which are specifically about the Board, or a Board process. This is likely to be limited to complaints about Safeguarding Adult Reviews, about Safeguarding Adult Review processes or about other publications or campaigns led by the Board.

When a complaint is received, the Board Business Manager will explore (liaising with partners where necessary) whether the complaint meets the criteria for other statutory complaints processes (for example NHS Complaints, Social Care Complaints, Police Complaints etc). This Board Complaints process should only be followed when other statutory complaints processes are not applicable.

The HSAB position in relation to complaints is based on the following key principles

- Viability – The system for dealing with complaints has to be one that can be adequately resourced in order to provide a robust and timely response. It is essential that only complaints which are legitimately about the Board are dealt with through a Board process.
- Efficiency – The system has to avoid duplicating or overlap with other existing measures. This would include both escalation processes and other complaints systems/processes.
- Informed – The system needs to be delivered by those with the expertise to provide a balanced and knowledgeable response.
- Problem solving – Experience indicates that a positive, solution focussed approach will minimise the number of formal complaints received.

In light of this the Board position in relation to complaints is as follows:

- Complaints from, or on behalf of, an agency are dealt with through an escalation process (see below), rather than a complaints process, with the Independent Chair acting as final arbiter.
- Complaints from a member of the public about a Board process, e.g. a Safeguarding Adult Review, will initially be responded to by the Board Business Manager in consultation with the relevant Head of Service, with a written response within 28 days of receipt. If the complainant is unsatisfied, they should contact the Board Business Manager who will arrange for their complaint to be considered by the Independent Chair, who will consult with the Director of Adult Social Services before responding. The Independent Chair will provide a further written response within 28 days of the complainant contacting the Board Business Manager.
- Where a member of the public wishes to appeal a decision made by the SAB (for example a decision to initiate a SAR) this will be considered as a complaint, as in the paragraph above.
- Where a complaint from a member of the public is about a process which the Board Business Manager has been involved with, the Board Business Manager will consult

with the DASS who will decide whether or not the Board Business Manager is too compromised to respond to the complaint. In those cases (and in all cases where the complaint is directly or substantially about the Board Business Manager), the DASS will consult with the Independent Chair to identify another suitable colleague who can provide a written response to the citizen.

- Complaints from a member of the public about the Independent Chair will be considered by the Corporate Director of Children and Adults Services.

The Board Office will ensure that a record is kept of complaints received, responded to and those referred to partner agencies. Complaints and copies of responses will be securely retained in accordance with the principles of data protection legislation.

Appendix 3 - Board Escalation Process

The Board seeks to promote challenge between agencies to ensure continuous improvement in the safeguarding arrangements across Harrow. In the usual course of Board business partner agencies are expected and encouraged to provide constructive challenge to each other.

Where the Board Member of a partner agency wishes to escalate concerns about a Board process these should be raised with the Board Business Manager in the first instance. The Board Business Manager will send a written response to the Board Member who raised the concern. (For partner agencies who are not members of the Board, concerns should be escalated to their safeguarding lead to raise with the Board Manager).

If the concern remains unresolved, the Board Member should escalate the concern to the Independent Chair who will act as final arbiter.

There may be exceptional circumstances in which partner agencies have concerns about another partner, in relation to Adult Safeguarding which cannot constructively be raised through the existing structures of the sub-groups, Board and BMG.

In these circumstances colleagues should escalate concerns to their Board Member. The Board Member will then decide whether this is a matter which can be resolved through existing partnership arrangements, or whether to escalate to the Independent Chair. This will depend on whether other partner agencies are involved or if the concern is likely to impact on other organisations or partnerships.

Where concerns are escalated which relate to a commissioned service (including health providers) the Board Member and/or Independent Chair should involve the relevant commissioner.

The Chair has the discretion to discuss escalations with the Executive Partnership.