

# MERTON SAFEGUARDING ADULT BOARD ANNUAL REPORT

1 April 2012 – 31 March 2013



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## Introduction

Living a life that is free from harm and abuse is a fundamental right of every person. In Merton we believe that Safeguarding is everyone's business. This annual report is produced on behalf of Merton Safeguarding Adults Board known locally as the Vulnerable Adults Strategy Team (V.A.S.T). Each year we have been able to watch and report on the developments of the work carried out by Merton and its partners to safeguard our vulnerable residents from abuse. This report outlines the progress made during the year April 2012 – March 2013 and how local and national developments have influenced this. The Board comprises of senior lead managers from Social Services, St Georges NHS Trust, Epsom and St Helier NHS Trust, South West London and St Georges Mental Health NHS Trust, NHS Sutton and Merton, the Metropolitan Police, the Voluntary Sector, Membership as of 31st March 2013 is detailed in Appendix 1. The Terms of Reference for the board is attached in Appendix 2

The role of V.A.S.T. is to promote, inform and support the work of safeguarding adults in Merton. It does this by ensuring that safeguarding adults is a theme that is strategically driven, adequately represented across the borough and included in strategic thinking, documents and plans. This year we have developed strong new partnerships with the newly formed Merton CCG as well as Royal Marsden and Sutton and Merton Community Services.

- **Message from the Chair, Simon Williams Director of Community and Housing**

*I am pleased to introduce our Annual Report for Merton Safeguarding Adults Board known locally as the Vulnerable Adults Strategy Team for 2012-13. This annual report details what we have achieved during 2012/13 and our plans for the future. The report's publication coincides with the governments draft legislation, the health and social care bill which, when becomes law, will influence and enhance the role of the*

*Safeguarding Adults Board. I am pleased to say that VAST has worked hard to ensure that it has strong partnerships and is well placed to implement any policy changes.*

*We can only deliver an effective safeguarding agenda by working in partnership from strategic thinking to operational processes and practice. It is this spirit of co-operation which makes a big difference to our challenging workload and for which I thank everyone involved in the production of this report and, crucially, in the actual delivery of this challenging agenda.*

- **Our lead Councillor for Adults Social Care, Linda Kirby says,**

*"Safeguarding adults is an issue we take seriously in Merton. Abuse in any form is not acceptable and we are pleased that more people understand what this is and are keen to report it when they come into contact with it. Merton's team work hard to ensure that our residents' concerns are dealt with sensitively and efficiently. I am pleased to say that this year saw the launch of the Dignity in Care Visitors scheme in Merton. Volunteers trained up to go into the care homes that we commission to ensure that our residents have a good quality of life. That means: that they are respected, have privacy, a good environment to live in and that their voice is heard. This is a partnership arrangement with Merton Seniors Forum, the Council, MVSC, with the training being contracted to Age UK Merton. The visitors will be offering information and advice to the care home managers about what services and activities are going on in the borough that could benefit their clients and make their work more interesting. We hope this initiative will bring more transparency to what is going on in care homes in Merton and improve the quality of care".*

- **David Flood, Safeguarding Lead St Georges Hospital Trust:**

*“St George’s Healthcare NHS Trust has a commitment and responsibility to ensure that all patients receive safe, effective and dignified care. In particular we have a duty under Outcome 7 of CQC regulations to ensure that those adults most at risk are “protected from abuse and that staff should respect their human rights”. The last twelve months has seen a number of reports that have highlighted considerable concerns with regard to the care and dignity of those most vulnerable within society. Of critical importance was the publication of the Francis Report which documented the significant failings at Mid Staffordshire NHS Foundation Trust. A significant aspect of adult safeguarding is to ensure we have the necessary processes and systems in place when responding to allegations of abuse and neglect, both within our organisation and externally within the communities we serve. St Georges is an active member of the Merton Vulnerable Adult Strategy Team and has positive working relationships with the safeguarding team to ensure any concerns around adults at risk are responded in an effective and timely manner. All staff continue to receive basic awareness training at induction and as part of a yearly update and we are rolling out additional training on Mental Capacity Act and Deprivation of Liberty Safeguards. Following an unannounced visit in January 2013, St Georges was found to be compliant with CQC Outcome 7- this was also reflected in the results of an external audit of St George’s practices which identified that there were “clear governance and reporting arrangements for safeguarding within the health care trust.”*

- **Jenny Kay Director of Quality, Merton CCG June 2013**

*“Merton Clinical Commissioning Group came into being in April 2013. It is responsible for*

*commissioning or ‘buying’ healthcare services for the people who live or work in the borough.*

*Our group of 25 GP practices work together with our partners in the local NHS - pharmacists, dentists, hospitals and mental health providers, the London Borough of Merton and local community groups, to improve health and wellbeing, reduce health inequalities and ensure everyone has equal access to healthcare services. These responsibilities include the duty to safeguard vulnerable adults, and the Director of Quality, Jenny Kay is the CCG’s lead officer for safeguarding.*

*As part of our commissioning responsibilities, we monitor how well these services are provided. We therefore have systems in place to assure ourselves that our ‘provider’ organisations are safeguarding adults in their care. Following the Francis report into Mid Staffordshire NHS Trust and the Winterbourne Review, this has included a particular focus on the care of elderly patients in local acute hospitals and care of patients with learning disabilities in ‘out of area’ placements.*

*We are already working collaboratively with the London Borough of Merton in ensuring that all agencies work in partnership to identify, prevent and manage any safeguarding concerns. In April 2013, responsibility for Deprivation of Livery Safeguards was handed over to the London Borough of Merton from the previous Primary Care Trust.*

*During the next months, as we develop our relationships with our providers and other partners, we will be developing our own expertise and more detailed policies and plans with regards to adult safeguarding.*

## National and Local Progress

### National:

#### Care and Support Bill

Progress is being made nationally for Safeguarding Adults being given statutory footing in the draft care and support bill once the Bill has negotiated the necessary legislative scrutiny channels in 2014. These statutory duties are contained within Clauses 34-36 and Schedule 1 of the Bill.

Clause 34 places a duty upon local authorities to make enquiries, or ask others to make enquiries, where there is reasonable suspicion that an adult within the local authority area with care and support needs is at risk of abuse and neglect. The purpose of such an enquiry would be to establish what action, if any, would be required in relation to the case.

Clause 35 imposes a duty upon the local authority to establish a SAB to bring together the key organisations in the area with functions relevant to adult safeguarding. It is stated that the SAB would be coordinated by the local authority and that core members would be the authority, the relevant Chief Officer for Police and the appropriate Clinical Commissioning Group. The SAB will be expected to produce and publish a Strategic Plan and Report on an annual basis.

Clause 36 stipulates that a SAB will be required to arrange a safeguarding adults review in the event of an adult dying or if there is a concern about the conduct of a member of the SAB involved in the case.

### Local:

#### ➤ High Risk Service Review

This year saw the review of our High Risk Service policy. This was completed in order to gain an independent view of the effectiveness of the policy and procedure. The audit was completed by an independent safeguarding consultant, Mick Haggar. The full report can be found on the safeguarding adults Merton webpage

#### ➤ Independent Safeguarding Case Audit

This year also saw an independent quality assurance audit of safeguarding adult cases completed by an independent safeguarding consultant. The full report can be found on the safeguarding adults Merton webpage

#### ➤ Management review

We completed a management review of a complex case this year with partnership agencies. The meeting was chaired by a member of VAST and an action plan was devised in order to learn from the experience and improve practice across agencies involved with the case. All involved in the process will agree it was a useful exercise to reflect and on practice and current procedure and framework which we work within.

#### ➤ Response to Winterbourne and Mid-Staffordshire Enquiry

In the wake of the Winterbourne View case and the Francis report which detailed findings from the Mid-Staffordshire NHS Foundation, VAST have produced multi agency action plans to respond to these inquiries.

## Safeguarding Board Objectives 2012 – 2013

- Implement the Pan London Safeguarding Process ensuring a coordinated approach to developing awareness of and engagement in safeguarding Adults at risk.

*The London Safeguarding procedures have been in place since January 2011 and continue to be followed across social care teams in the borough. The social care teams continue to develop familiarity with the procedures and support is given by the safeguarding team to team managers and practitioners as and when required.*

- Further develop and implement multi agency performance management and quality assurance measures to ensure robust quality assurance framework embedded across partners agencies with a particular focus on improving practitioners recording.

*This year, Access and Assessment developed our recording policy which provides guidance and advice on what Merton consider as competent recording. This aim of this is to set the standard as to what we expect from practitioners as part of their role. This policy was developed following recommendations from the Serious Case Review held the previous year.*

- To promote and raise awareness with staff and providers around the Deprivation of Liberty Safeguards.

*The referral rate for the Deprivation of Liberty Safeguards (DOLS) remains low in Merton. Part of the reason for this is that the Safeguarding Team are very proactive with discussion of issues with Merton care homes that could be viewed under DOLS. This provides valuable advice and guidance to care homes as to what can be viewed as restriction or deprivation, giving care homes confidence of when to refer. Much preparation work was carried out this year in preparation for the changes of DOLS*

*from 1<sup>st</sup> April 2013 that the supervisory body take over hospitals and overseeing of any authorisations in place. This involved providing training to the local CCG regarding Safeguarding Adults and Deprivation of Liberty Safeguards and the local position for this.*

- To set up a professional forum for Best Interest Assessors who undertake the assessments for the Deprivation of Liberty Safeguards to ensure consistency and quality in assessment.

*The safeguarding adult's team have a dedicated person who oversees DOLS referrals and assessments. The yearly refresher training for Best Interest Assessors continued this year. Further professionals forums are planned to run to provide opportunity to reflect and discuss issues and developments regarding Deprivation of Liberty Safeguards.*

- To look at including the safeguarding adults competency framework in supervision and appraisal for staff at all levels.

*This objective will be carried forward into next year's objectives.*

- Continue to ensure that learning is embedded into processes and practice following lessons from case reviews (including lessons learnt from Serious Incidents with an adult safeguarding component within SWLStG Mental Health Trust).

*This is in place and a good example of this, is the multi agency case review held in March 2013 to reflect on practice and discuss in a multi agency forum what learning and development can be taken from this case.*

- To continue with case file audits in order to identify areas for improvement in

Adult Social Services (both of adult safeguarding case files and DoLS case files).

*The safeguarding support officer continues to regularly audit safeguarding adult cases and report findings to team managers and the safeguarding adults manager. The feedback is then fed back to practitioners through the supervision and appraisal process.*

- To develop a data capturing tool regarding safeguarding plans in line with Pan London Process.

*This objective will be carried forward into next year's objectives.*

- To develop a process for capturing data in relation to Safeguarding Adults and Serious Untoward Incident (SUI) processes across Mental Health.

*This objective will be carried forward into next year's objectives.*

- To continue to raise the profile of adult safeguarding partnership work through regular and annual reporting to Committees, Boards and relevant statutory and governance bodies of all partner agencies.

*The safeguarding adults' manager continues to represent safeguarding adults in Merton through regular attendance of various boards and reporting to committees such as scrutiny and the health and well being board.*

- To work jointly with HR personnel across Merton and Sutton Councils to develop

and implement a safeguarding policy for HR issues.

*In place, our safeguarding adults manager continues to input regularly into this HR process as and when required.*

- To hold a multi agency event in Elder Abuse Week raising awareness of the role and support offered to the community in relation to the protection of adults at risk.

*In 2012, the safeguarding team held an advice and fundraising day in Merton Link to mark Elder Abuse week. We raised over £100 for the charity and provided much information to the public about safeguarding and keeping safe.*

- To provide joint training to children's social care on safeguarding adults at risk.

*Practitioners in access and assessment have access to children's social care training regarding child abuse refreshers, completing the CAF form and Information sharing. We continue to have links with children's services through the department's boards and quality assurance meetings. Access and Assessment also took part in a children's social care serious case review.*

- We will review the high risk service, with a view to developing a self neglect panel which is an opportunity to regularly discuss cases of concern with partner agencies.

*This was independently reviewed during period of December 2012-February 2013. Various recommendations were made in this document and discussed at the May 2013 VAST meeting. Please see report for full details.*

## Review of Training

### Summary of Safeguarding Training 12/13 courses that took place

COURSE	PARTICIPANTS	NUMBERS
Safeguarding Basic	PVI and LBM Staff	121
Safeguarding Basic	Care Home Staff	12
Safeguarding Refresher	Care Home Staff	19
Safeguarding Investigation	LBM and PVI Staff	28
Safeguarding Report Writing	LBM and PVI Staff	18
SAM	LBM Managers	6
Safeguarding Assessing the Alert	LBM and PVI staff	18
Safeguarding Material/Financial Abuse	LBM and PVI staff	13
Advanced Investigating	LBM Staff	10
Chairing Safeguarding Meetings	LBM Staff	9
Report Writing for Social Workers	LBM Staff	8
Advanced Best Practice in Safeguarding for social workers	LBM Staff	12
MCA	LBM and PVI Staff	57
DOLS	PVI and LBM Staff	26

### Evaluation of Courses

In 12/13 we ran a series of courses covering all aspects of Safeguarding, most of which were run in multiples to ensure we had enough places for both LBM and PVI (private voluntary and independent) staff. We split the sessions in some cases into courses just for care home staff, social workers and support staff following on from feedback that we had on the previous year's evaluation. We also offered safeguarding training on provider's sites according to need where whole teams were trained together for example at JMC and Mencap. Last year in

particular we had a lot of Shared Lives carers attending training for the first time. In general the feedback was good and staffs were happy with the training in terms of the course offer and the content.

For this year we are offering the same training to all staff in ASC (adult social care) and the PVI sector and courses so far have been full. We are using an in house provider to give staff more of an advantage in understanding the Merton position as well as the Pan London procedures.

### Funding

Total projected income for this year was £130,130 contributed by London Borough of Merton Community and Housing department.

The total projected expenditure was £131,000. For further detail and DOLS funding detail see Appendix 6.



## Deprivation of Liberty Safeguards (DOLS)

The Mental Capacity Act (MCA) 2005 was amended to provide safeguards for people who lack capacity specifically to consent to treatment or care in either a hospital or care home that, in their own best interests, can only be provided in circumstances that amount to a deprivation of liberty. This is known as Deprivation of Liberty Safeguards (DOLS). These safeguards came into force on the 1<sup>st</sup> April 2009. The purpose of this was to provide a legal framework for acting and making decisions on behalf of these individuals. The safeguards cover a particular group of people; these are:

- People who are 18 years and above with significant Learning Disabilities, Dementia, Autism, Brain or Neurological injury/conditions.
- They apply to people who are in a care home (residential and nursing) and acute hospitals. DOLS does not apply to people detained under the Mental Health Act 1983.
- The DOLS assessment function with the process for referral, allocation and monitoring is undertaken by the safeguarding team.

### Summary of the Deprivation of Liberties Safeguards (DoLS) Statistics

We received nine urgent DOLS requests in this year. Last year we received 10, so we are continuing to receive a steady amount of requests, almost working out 1 a month although requests seem to come in spurts and are unpredictable to when they will be submitted. We are noticing that care homes will call the team more regularly for advice regarding deprivation of liberty safeguards and

we expect that request rates will increase next year. We are currently reviewing our BIA list and intend to train some new practitioners in the coming year and operate a rota system.

Out of these ten, two standard authorisation's were given. Older person was the client group, both in care homes.

### Summary of Safeguarding Adult's Statistics

During this year, Merton has continued to see an increase in the number of referrals received and in the number of referrals that progress through to investigation. This we believe can be attributed to increased awareness among staff in all partner agencies as well as increased community awareness through national safeguarding concerns covered by the media.

The following statistical information has been collated from our monitoring systems.

The table below shows the number of reported cases of adult abuse (alerts and including those that moved on into referral) for the last 5 years.

<b>Period</b>	<b>Number of cases</b>
<b>1<sup>st</sup> April 2012-31<sup>st</sup> March 2013</b>	<b>428</b>
<b>1<sup>st</sup> April 2011- 31<sup>st</sup> March 2012</b>	<b>417</b>
<b>1<sup>st</sup> April 2010 – 31<sup>st</sup> March 2011</b>	<b>376</b>
<b>1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010</b>	<b>248</b>
<b>1<sup>st</sup> April 2008 – 31<sup>st</sup> March 2009</b>	<b>193</b>

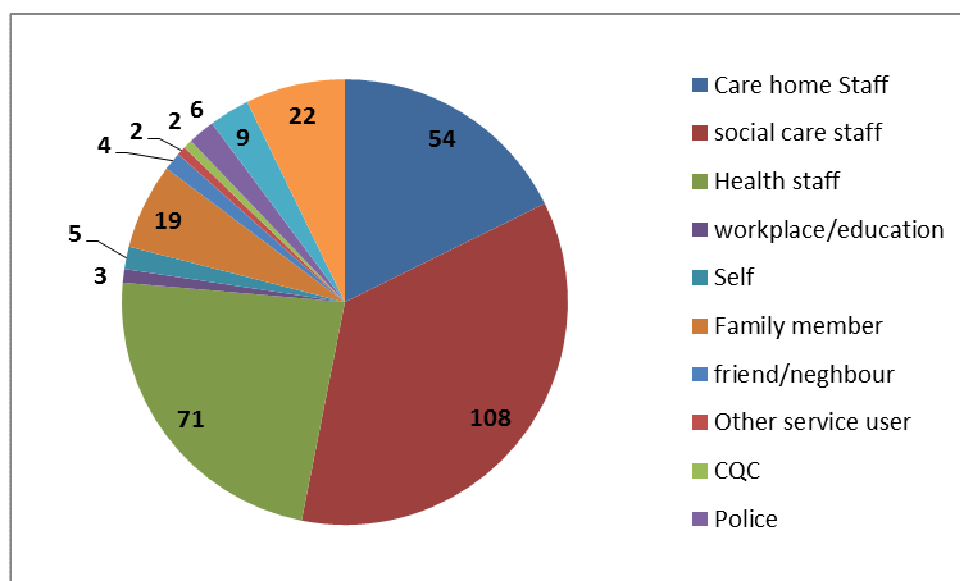
The number of referrals increased from 417 last year to 428 this year and represents an increase of 2.64%. Since 1<sup>st</sup> April 2009 cases reported have almost doubled which evidences the steep rise in reporting. Most London boroughs are reporting an increase in safeguarding referrals generally contributed to more awareness of professionals and the public.

## Number of Cases by Month

	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
<b>2012-2013</b>	42	34	39	31	25	43	34	42	25	44	35	29
<b>2011-2012</b>	16	30	46	30	33	32	33	39	52	39	32	35
<b>2010-2011</b>	26	34	24	23	25	25	33	45	25	40	31	45
<b>2009-2010</b>	17	24	19	14	13	16	17	29	24	33	22	20
<b>2008-2009</b>	11	12	15	13	16	15	28	9	27	8	20	19

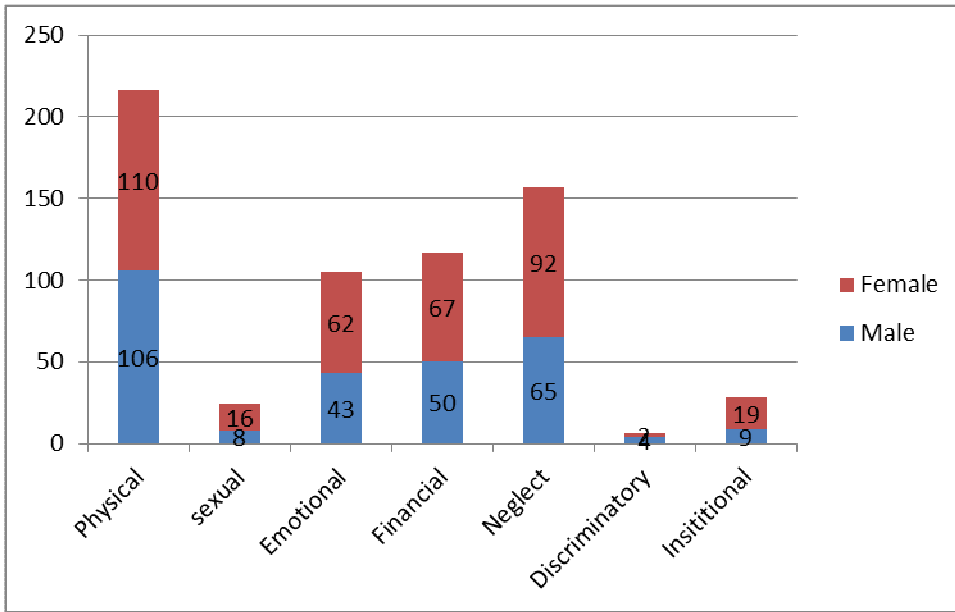
Drawing on comparison data between the distributions of safeguarding alerts over time for each of the last 5 years, broad patterns can be seen each year, with alerts tending to peak each side of Christmas.

## Source of Referrals



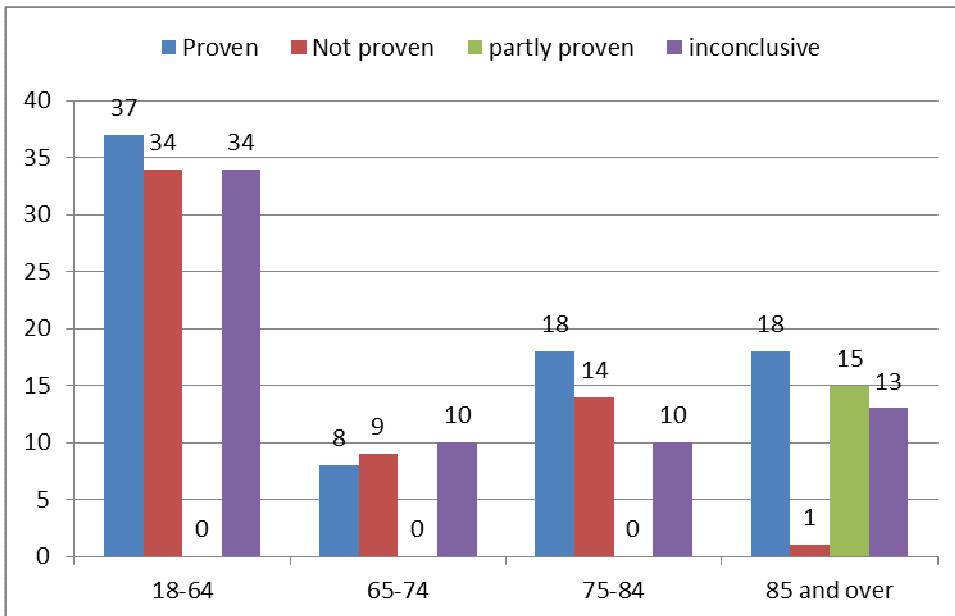
Social care staffs remain the biggest group of referrers this year, followed by health staff. Care home staff follows closely in third. This indicates that professional staff are taking the step to refer. Maybe this is due to receiving the right training and has the awareness of how to report. These figures may indicate that much work needs to continue with educating others about safeguarding adults from abuse and how to refer.

### Gender of Victims



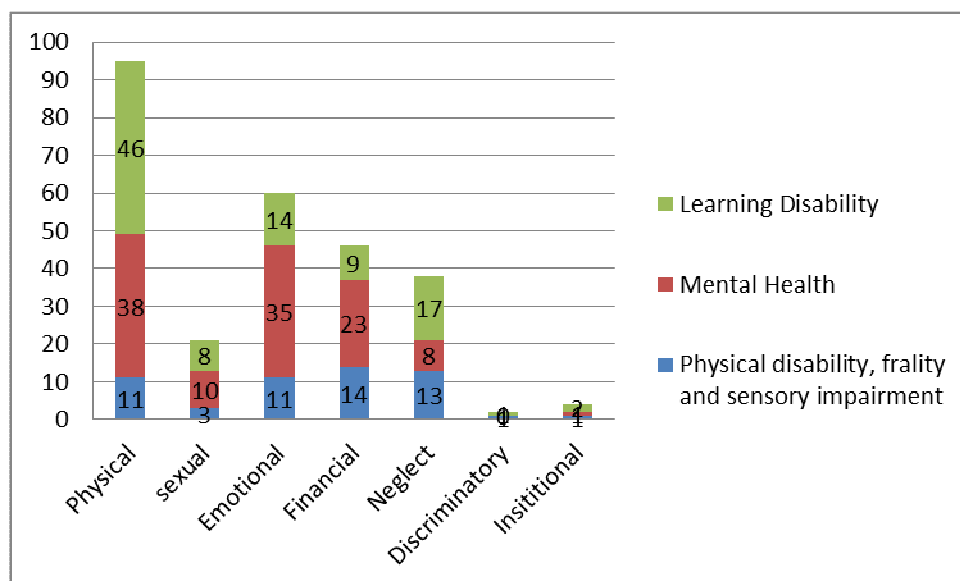
Females, and in particular single people, are more likely to be abused. This is particularly pertinent for older men and women who are more susceptible to ‘sweetheart’ abuse where a younger woman / man becomes romantically involved, usually for financial gain.

### Case conclusion for completed investigations by age



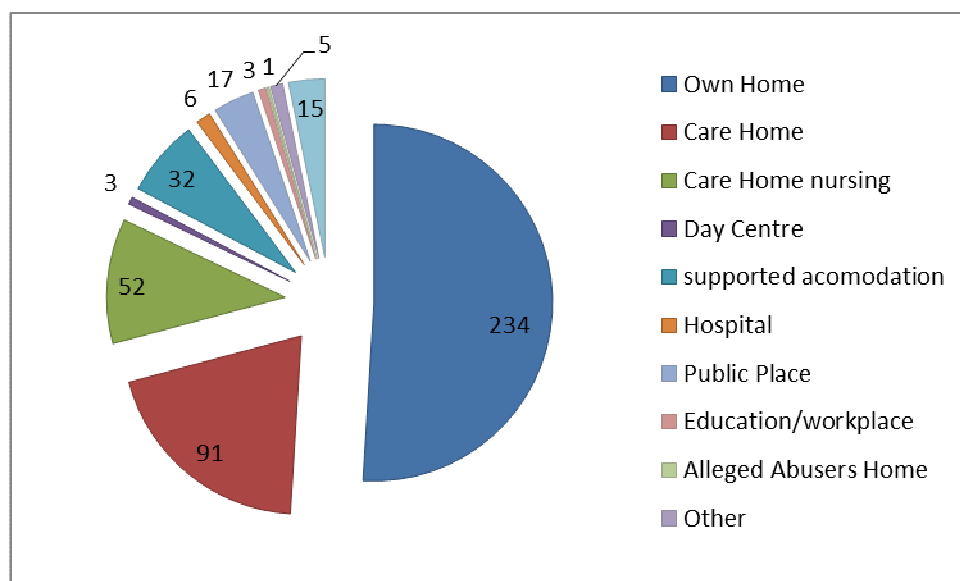
These figures could indicate that the younger a person is the more likely their case will be proven. This may be factors due to the person’s ability to be involved in the investigation. Issues such as Dementia or Alzheimer’s may be an issue in being able to explain what has happened to them.

## Safeguarding Referrals by Client Group



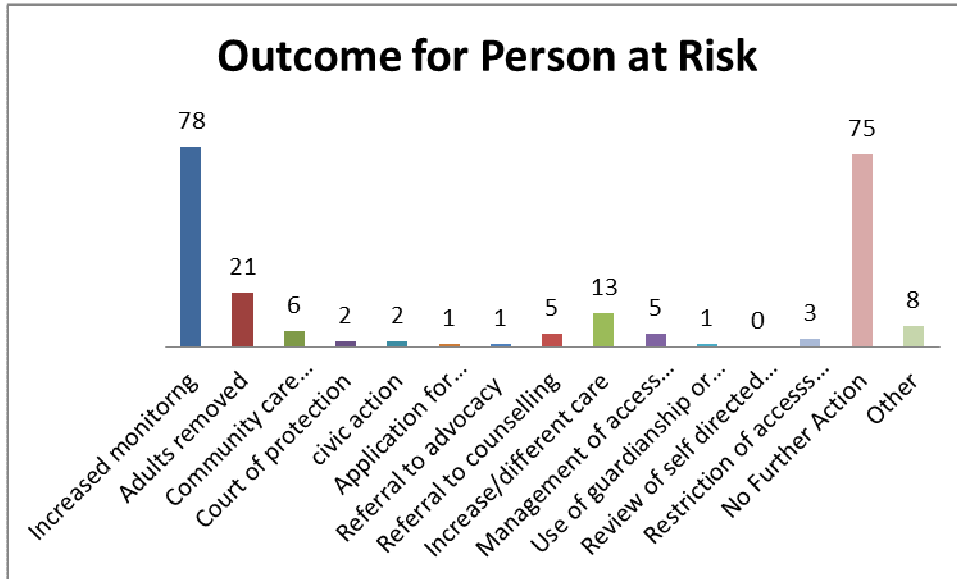
This year saw a rise in referrals in physical abuse for learning disability. This is uncharacteristic of previous years and reason could be the awareness of the Winterbourne View case.

## Location of abuse

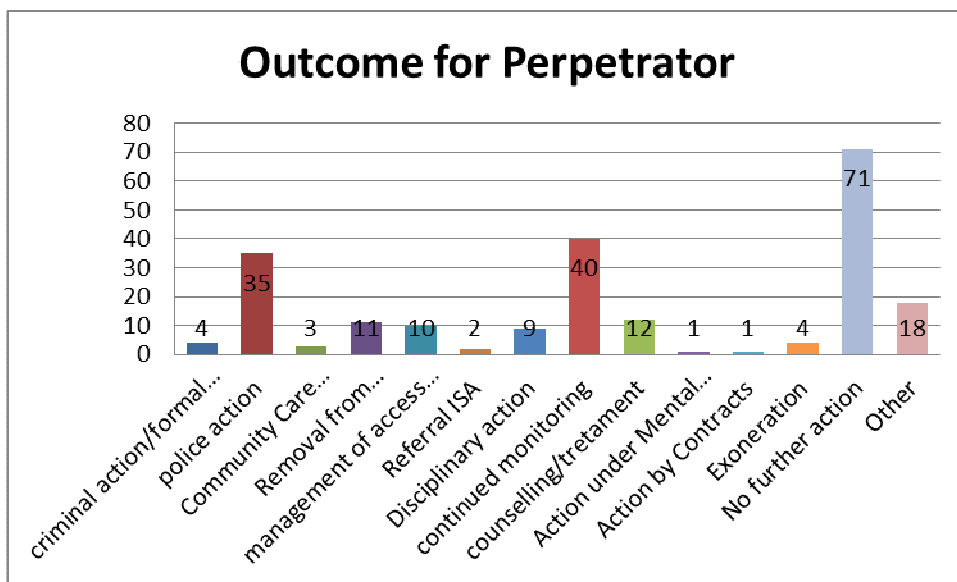


Results indicate that in most reported cases abuse takes place within the service user's own home. This is consistent with the figures from previous years. This is closely followed by alerts relating to residential settings. Nationally, abuse is more likely to go unreported in people's own homes but this is not reflected in our figures. Alerts in relation to people in their own homes suggests that raising safeguarding awareness with service users and carers is taking effect and has enabled them to become more aware on issues of abuse and how to report it.

**Outcomes**



Increased monitoring is the most popular outcome here with no further action following closely.



No further action continues to be the most popular outcome for perpetrators (person alleged to have caused harm). This could be corroborated with cases that are not substantiated however still remains high in comparison to other outcomes. It is worth noting here that there are a good number of outcomes with police action. This could be a good indicator that practitioners are getting better at reporting, our link with the CSU and police recognising abuse cases as a criminal matter.

## Safeguarding Board Objectives 2013 – 2014

- To look at including the safeguarding adults competency framework in supervision and appraisal for staff at all levels.
- To develop a multi agency working policy in responding to people that hoard in the London borough of Merton.
- To develop a structure to collect service user feedback and using it to develop our practice and knowledge in safeguarding adults.
- To ensure that we have robust Quality Assurance processes in place which provides regular auditing of safeguarding adults work which focuses on the quality of work completed and the recording of case work undertaken.
- To carry out an independent audit of our DOLS assessments and authorisations. To alter the BIA management and ensure we can provide BIA training for three practitioners this year.
- To develop a data capturing tool regarding safeguarding plans in line with Pan London Process.
- To develop a process for capturing data in relation to Safeguarding Adults and Serious Untoward Incident (SUI) processes across Mental Health.
- To continue to raise the profile of adult safeguarding partnership work through regular and annual reporting to Committees, Boards and relevant statutory and governance bodies of all partner agencies.
- To revamp and map out the safeguarding adults process in line with London Safeguarding Adult procedures.
- To develop a consistent mental capacity act assessment form for practitioners to use.

## APPENDIX 1

### Safeguarding Adult Membership VAST as of March 2013

Name	Title and Agency	Email
Simon Williams	Director of Community and Housing (Chair)	simon.williams@merton.gov.uk
Julie Phillips	Safeguarding Adults Manager	julie.phillips@merton.gov.uk
Helen Cook	Head of Access and Assessment	helen.cook@merton.gov.uk
Jenny Rees	Head of Service	jenny.rees@merton.gov.uk
Rahat Ahmed-Man	Head of Commissioning	rahat.ahmed-man@merton.gov.uk
Lee Hopkins	Service Manager – Children School and Families	lee.hopkins@merton.gov.uk
Andy Ottaway-Searle	Head of Direct Provision	andy.ottaway-searle@merton.gov.uk
Selena Gardiner	Merton Learning and Development	selena.gardiner@merton.gov.uk
Deborah Wright	Associate Director of Social Work – Mental Health	deborah.wright@swlstg-tr.nhs.uk
Scott Pollock	Safeguarding Lead – The Royal Marsden	<a href="mailto:Scott.Pollock@rmh.nhs.uk">Scott.Pollock@rmh.nhs.uk</a>
David Flood	Safeguarding Lead – St Georges Hospital	david.flood@stgeorges.nhs.uk
Jenny Kay	Merton CCG Quality Lead	Jenny.kay@mertonccg.nhs.uk
Zoe Pullman	Strategic Lead for Victims and Witnesses Safer Merton	zoe.pullman@merton.gov.uk
Jeff Lyle	Borough Commander – London Fire Brigade	jeff.lisle@london-fire.gov.uk
Dawn Helps	Neighbourhoods Manager – Merton Priory Homes	dawn.helps@circle.org.uk
Julie Sobrattee	Safeguarding Lead – St Helier Hospital	Julie.sobrattee@esth.nhs.uk



## APPENDIX 2

### VULNERABLE ADULTS STRATEGY TEAM (V.A.S.T) REVISED TERMS OF REFERENCE 2010

#### Membership:

- Director Of Community & Housing, Merton (Chair)
- Safeguarding Adults Manager, Merton Social Services
- Lead Practitioner, Safeguarding Adults
- Safeguarding Adults Support Officer, Merton Social Services (minute taker)
- Head of Access and Assessment, Merton Social Services
- Safeguarding Lead, S.W London and St Georges Mental Health Trust
- Children's Safeguarding Representative, Merton
- Training Representative – Merton Adult Education
- Service Manager, Access and Assessment, Merton Social Services
- Head of Direct Provision, Merton
- Safeguarding Lead, St George's NHS Trust
- Safeguarding Lead, Epsom and St Helier NHS Trust
- Detective Chief Inspector, Metropolitan Police.
- Director of Wimbledon Guild
- Head of Commissioning, Merton
- Borough Commander, London Fire Brigade
- Safeguarding Lead, Royal Marsden NHS foundation Trust
- Interim Associate Director of Social Work S.W. London and St Georges Mental Health NHS Trust
- Strategic Priority Lead, Safer Merton
- Head of Group HR for Adult Social Services, Sutton and Merton

#### Terms of Reference:

- To oversee the implementation and working of the Pan London policy and procedures, including publication, distribution and administration of the document.
- To agree a strategy and maintain a strategic overview of an inter-agency working protocol relevant to the implementation of the policy and procedures.
- To oversee the development of information systems that supports the gathering of information necessary to carry out the evaluation of policy and practice.
- To oversee the monitoring and reporting of safeguarding concerns and investigations and to undertake a full review annually.
- To agree revisions and changes necessary to the procedures, which are identified as a result of the monitoring process completed by Audit Review And monitoring (ARM).
- To maintain a strategic overview of safeguarding adult training.
- To oversee promotion of the policy and procedures through formal events or information campaigns to ensure a wider professional and public understanding of adult abuse.
- To identify sources of funding required to implement all of the strategies associated with the policy and procedures and to monitor the use of these resources.
- To agree and maintain links with relevant corporate management groups.
- To create and discontinue task groups in line with development needs.
- To commission and oversee the work of the task groups.
- To accept and consider recommendations from the task groups.
- To ensure that agreed multi-agency strategies are implemented within individual agencies.

**Frequency of Meetings:** 6 weekly – 2 monthly

