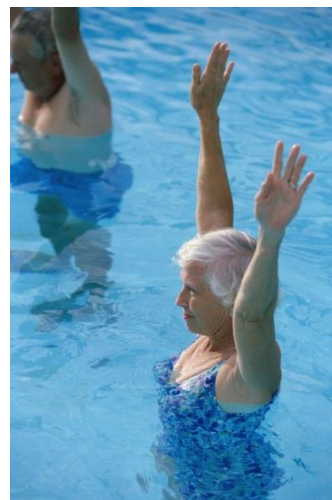




Welcome to MK Together

2017/18



Introduction

- 1 Strong partnerships are at the heart of the way we do things in Milton Keynes. We've long since realised that we will have greater impact on the lives of local people if we work closely together.
- 2 But we recognise that there is more to do. Feedback from a peer review¹ and external inspection² has highlighted areas for improvement, including how we co-ordinate who is doing what, the way we use performance information and how we promote multi-agency learning and development.
- 3 We also know that the costs of the current partnership arrangements are not sustainable. Too much time is taken up in meetings, often with the same people being expected to attend multiple meetings.
- 4 So, following an extensive consultation^{3,4}, we have agreed a new set of partnership arrangements, which we are calling MK Together. These arrangements have been designed to support our core 'people partnerships' to work as effectively and efficiently as possible. We have based them on two principles:
 - Simplicity** - All partners should easily understand how the new arrangements work and how the different partnerships relate.
 - Flexibility** - The arrangements need to be able to adapt to future needs or changes with legislation or emerging local issues.
- 5 The changes we have agreed are far reaching and bold. Our new safeguarding arrangements reflect the national debate following the call for the reform of safeguarding arrangements⁵ and the government's commitment to take action. They also raise the expectation of three key agencies; namely health, police and the council. The focus on these agencies is not intended to diminish the important contribution other partners make to the safeguarding, health and wellbeing of local people, but it recognises that if we are to make further progress, then these agencies will need to take a greater level of responsibility.
- 6 The council has a specific power to scrutinise public services and investigate areas of interest. In the development of these new arrangements we have acknowledged that local scrutiny committees play an important part of our local assurance framework which complements the assurance role of the safeguarding board.

¹ Peer challenge of the Health and Wellbeing Board, December (LGA, 2015)

² Review of the effectiveness of the Local Safeguarding Children Board (Ofsted, 2016)

³ Partnerships – Proposals for Change (Milton Keynes, 2016)

⁴ Statutory Partnerships – Moving Ahead (Milton Keynes, 2017)

⁵ Wood Review of the role and functions of local safeguarding boards (Department for Education, 2016)

The MK Together Team

- 7 MK Together is led by a director and supported by a small team of colleagues. It is largely funded through bringing together the existing partner contributions to support multi-agency safeguarding arrangements and the public health budget. The director has been seconded to the team and is funded by Milton Keynes Council and Milton Keynes Clinical Commissioning Group (CCG).
- 8 The team will co-ordinate the work of those partnerships and boards under the MK Together umbrella. The team will play an important role in the forward plan, facilitating meetings and activities, monitoring the implementation of plans and ensuring that communications and engagement activities are effective.
- 9 However, there is much more to do to ensure we are better co-ordinated. The team are tasked with supporting us to make progress in some specific areas across our system where we have identified that we need to see significant improvement. These areas include:
 - Multi agency policy and planning
 - Multi agency data and performance management
 - Safeguarding assurance
 - Multi agency safeguarding reviews
 - Multi-agency learning and workforce development
- 10 Over time, we expect that the range of partnerships and boards that are supported by the team may change, and that there will be further secondments into the team to work on programmes or initiatives where working in a whole system multi-agency context is preferable to a single agency one. We want the MK Together team to be dynamic and creative and, most of all, an enabler of real change and improvement.
- 11 Every two months the MK Together director will meet with the chairs to assist with forward planning and review the performance and the progress being made.

The Health and Wellbeing Board

Terms of reference

- 12 Health and Wellbeing Boards are a key component of the Health and Social Care Act 2012 and are statutory bodies. Constituted as a committee of Milton Keynes Council, the Health and Wellbeing Board is a Partnership Board. Acting as a key forum for leaders in health and social care they are designed to ensure an integrated and co-ordinated approach across NHS, social care and public health services in Milton Keynes. It has been established to:

- Ensure strong democratic legitimacy and involvement
 - Enhance working relationships between health and social care
 - Develop integrated commissioning of services
 - Target activity in order to reduce health inequalities
- 13 The Board aims to involve local people, including children, young people and their families, service providers and communities in forming strategic commissioning decisions and drive local commissioning to fulfill the ambition of better outcomes for people improved local health and social care provision.
- 14 The remit of the Board has been extended to include being the locality forum for issues relating to the Bedfordshire, Luton and Milton Keynes Sustainability and Transformation Plan. We have removed the starting well, living well and aging well groups and established a single Health and Wellbeing Strategy Group, focused on the development and delivery of the Health and Wellbeing Strategy.
- 15 We have also replaced the former Joint Commissioning Board with a new Integration Board with a wider membership and a more direct line of reporting to the Health and Wellbeing Board and established a six monthly Forum to provide the opportunity for other partners and the public to hear about our work, find out how we are doing and give us their feedback.
- 16 As a result of these changes, the key functions of our Health and Wellbeing Board are:
- a) To assess the strengths and needs of the local population through the Joint Strategic Needs Assessment and the Public Health Report recommending both to Milton Keynes Council's Cabinet and the Milton Keynes Clinical Commissioning Group.
 - b) To agree a Joint Health and Wellbeing Strategy that drives the priorities for the commissioning plans and public health action for health services, social care, education and other services the Board considers appropriate.
 - c) To promote integrated provision and the joint working and to ensure an integrated approach to commissioning is established, including the promotion of joint commissioning, pooled or aligned budget arrangements where appropriate.
 - d) To oversee and formally comment on the Milton Keynes Clinical Commissioning Group's commissioning plans and joint commissioning plans to ensure they take account of the Joint Health and Wellbeing Strategy, referring back to the Clinical Commissioning Group or NHS England where they do not.
 - e) Consider and comment on Healthwatch plans and Annual Report.

- f) To act as the local strategic forum for the Sustainability and Transformation Plan, influencing the planning and design of health and social care services to ensure that the opportunities and challenges in Milton Keynes are understood and addressed.
- 17 The Board will ensure that equality and diversity needs and safeguarding issues are addressed and incorporated in planning and service delivery.
- 18 The Board will ensure it has in place robust performance and quality monitoring measures with regard to the implementation and outcomes for the Joint Health and Wellbeing Strategy.
- 19 The Board will ensure it is informed by innovation and sustainable best practice across health and social care which is then incorporated into commissioning plans.
- 20 The core membership of the board will be made up of:
- The Leader of the Council (Chair the Health and Wellbeing Board)
 - Two CCG representatives (one of whom will be Vice Chair of the Board)
 - Milton Keynes Safeguarding Board Independent Chair
 - Director of Adult Social Services and Children’s Services
 - Director of Public Health
 - Corporate Director – Place
 - Healthwatch representative
 - Acute health services representative
 - Community and mental health services representative
 - A representative of the local voluntary and community sector

The membership of elected councillors will be the Leader of the Council, the Portfolio Holder for Adult Services, the Leader of the main opposition group and a representative from the minority opposition party. No elected councillor may serve on the Health and Wellbeing Board and hold a position of Chair of a Milton Keynes Council scrutiny committee.

The director of MK Together will attend the Board. From time to time other representatives, for example the Youth Cabinet, may be invited to join the Board in an advisory or expert capacity by the Chair.

- 21 The Board will meet a minimum of five times a year. Meetings will be held in public except where exempt or confidential information is likely to be disclosed, and the meeting or part of the meeting is therefore held in private. Every effort will be made to facilitate public attendance.
- 22 Meetings are conducted in accordance with procedural rules applicable to council committees, except where modified by these terms of reference.

- 23 Core voting members (other than councillors) are required to nominate deputies. Councillors, intending to nominate a substitute to attend on their behalf should notify Democratic Services in writing (which can be by email) before the start time for the meeting.
- 24 The quorum for the Board will consist of six members, of whom no more than half will be Councillors. Only core members will have the right to vote.
- 25 The Board will actively seek to communicate and engage with local people and organisations to enable them to fully engage with important local health and social care discussions and decisions. To support this aim, a Forum will be held every six months to share information about the work of the Board and gather feedback. The Forum will be facilitated by the Chair of the Board and supported by members of the Board as appropriate.

The Health and Wellbeing Board – Strategy Board

Terms of reference

- 26 Health and Wellbeing Board partners are committed to delivering the Health and Wellbeing Strategy to bring about improvements in the health and wellbeing of the local people and to reduce inequalities for all ages.
- 27 This Board is responsible for overseeing the successful delivery of the Health and Wellbeing Strategy, bringing partners together and agreeing joint action. The Board is accountable to the Health and Wellbeing Board. The board is required to:
 - a) Publish an annual Joint Strategic Needs Assessment (JSNA), providing a comprehensive health and care needs evidence base to help inform current and future commissioning, service delivery and public health interventions.
 - b) Make progress towards meeting the goals of the *Starting Well, Living Well* and *Aging Well* goals through the delivery of agreed priority actions, regularly viewing and refreshing these actions as appropriate.
 - c) Closely monitor performance and outcome data in relation to the priorities set out in the Health and Wellbeing Strategy and report regularly to the Health and Wellbeing Board.
 - d) Work with the Integration Board to ensure any agreed changes to commissioning or service design are implemented.
 - e) Build capacity across local organisations and non-public sector bodies to facilitate effective joint action to tackle public health issues.

28 The core membership of the Board will be made up of:

- Director of Public Health (Chair)
- CCG senior representatives (two maximum)
- Acute services senior representative
- Community and mental health services representative
- Thames Valley Police representative
- Voluntary and community sector representative
- Milton Keynes Council children's services representative
- Milton Keynes Council adult services representative
- Milton Keynes Council Place directorate representative
- Schools representative
- Business representative
- Healthwatch representative
- Youth Cabinet representatives (up to three)

From time to time other representatives, may be invited to join the Board in an advisory or expert capacity by the Chair.

29 The Board will meet monthly. Meetings will not be held in public. All agendas, reports and minutes will be circulated at least five working days before meeting. Minutes will be circulated within ten working days of the meeting. The Board will provide a written report on both activity and performance to the Health and Wellbeing Board to be considered at each Board meeting.

The Health and Wellbeing Board – Integration Board

Terms of reference

30 Health and Wellbeing Board partners are committed to co-ordinating health and social care commissioning and service design and delivery, taking joint responsibility for implementing strategies to improve outcomes.

31 The Board will be the Sustainability and Transformation Plan (STP) place-based group for Milton Keynes and is accountable to the Health and Wellbeing Board. It will be the operational decision making body for commissioning agreed health and social care services for adults and children and for service design. The board is required to:

- a) Translate the strategic commissioning vision for the health and wellbeing of the people of Milton Keynes, developed by the Health and Wellbeing Board, into commissioning plans.
- b) Co-ordinate the implementation of key strategies and monitor their impact, efficacy and success.

- c) Ensure that commissioning decisions and strategic developments have regard to the local strategies and plans are informed by the Joint Strategic Needs Assessment.
- d) Design the future local solutions to deliver the STP. This includes developing local service models based around the Priority 2 vision and principles, planning local stakeholder engagement and managing delivering change.
- e) Review, update and monitor any partnership agreements, for example those made under Section 75 of the NHS Act 2006.
- f) Oversee the development and management of the Better Care Fund and the related integrated schemes.

32 The core membership of the Board will be made up of:

- Director of MK Together (Chair)
- Milton Keynes CCG Chief Officer and up to three senior leaders
- Director of Adult and Children’s Services and up to three senior leaders
- Director of Public Health or deputy
- Local GP Federation representative
- Acute health services representative
- Community and mental health services representative
- Healthwatch representative

From time to time other representatives, for example from the voluntary and community sector, may be invited to join the Board in an advisory or expert capacity by the Chair.

33 The Board will meet monthly. Meetings will not be held in public. It may be necessary to set aside a section of the meeting for Milton Keynes Council and Milton Keynes CCG to discuss commissioning issues which should not be shared with providers. All agendas, reports and minutes will be circulated at least five working days before meeting. Minutes will be circulated within ten working days of the meeting.

Safeguarding Board

Terms of reference

34 The Safeguarding Board (the Board) is a joint statutory body fulfilling the objectives, functions and responsibilities set out for adults and children’s safeguarding boards in the Children Act 2004, Working Together 2015 and the Care Act 2014.

- 35 Following extensive consultation we have agreed to create a single Milton Keynes Safeguarding Board (MKSB) to strengthen our multi-agency work, bringing together the three key agencies (health, police and local authority) to support, coordinate and monitor effective multi-agency safeguarding arrangements.
- 36 The Board is responsible for supporting the coordination of multi-agency arrangements to protect and safeguard children and adults in Milton Keynes and for monitoring their effectiveness at a multi-agency strategic level and to assure that:
- Local safeguarding arrangements are in place as defined by the Care Act 2014 and the Children Act 2004 and all relevant statutory guidance.
 - Safeguarding practice is person-centred and outcome-focused.
 - Safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.
- 37 To do this, the Board will support the three key agencies, namely health, police and the local authority to oversee and coordinate multi-agency arrangements for protecting children and adults, deliver joint strategies and lead the safeguarding system.
- 38 The Board is also responsible for monitoring and evaluating the effectiveness of what is done by partners individually and collectively to safeguard and promote the welfare of children and adults and advising them on ways to improve.
- 39 The key objectives of the Board are:
- a) To provide appropriate assurance that practice is person centred and improves outcomes for vulnerable children and adults.
 - b) To use the Board's intelligence (gained from its performance and quality assurance activity) to influence the strategic design, commissioning and delivery of multi-agency services to safeguard children and adults and promote welfare.
 - c) To develop multi-agency policies and procedures for safeguarding and promoting the welfare of children and adults, and the action to be taken where there are concerns about safety or welfare, including thresholds for intervention.
 - d) To test out local arrangements to assure the quality of local practice and to identify areas for further improvement.
 - e) To undertake reviews and share learning.

- f) To set standards, monitor and evaluate the effectiveness of workforce development, training and learning, including multi-agency training, to safeguard and promote the welfare of children and adults.
 - g) To agree local practice standards as appropriate and to challenge and tackle poor standards where identified.
 - h) To be responsible for monitoring and reviewing all deaths of children and oversee the learning from the reviews of deaths of people with learning difficulties normally resident in Milton Keynes.
 - i) To be responsible for commissioning and undertaking serious case reviews and other forms of learning reviews following deaths or serious incidents involving children or adults where safeguarding is an issue.
 - j) To produce and publish an annual report on the effectiveness of multi-agency arrangements to safeguard children and adults in Milton Keynes and promote their welfare.
 - k) To produce, publish and implement a strategic plan and annual business plan.
 - l) To hold the risk and challenge logs for delivering the statutory functions required.
 - m) To communicate the need to safeguard and promote the welfare of children and adults, raising awareness of how this can best be done and encouraging people to do so.
 - n) To share local, regional and national information and learning.
- 40 The core membership of the Board (reflecting the key agencies set out in the Woods Review) will be made up of:
- Independent Chair (accountable to and appointed by the Chief Executive of Milton Keynes Council in consultation with key partners).
 - Local authority - Corporate Director (People), Service Director (Adult Services) and Service Director (Children's Services).
 - Police - Local Policing Area (LPA) Commander – Thames Valley Police (Milton Keynes) and the Detective Chief Inspector for Protecting Vulnerable People (PVPU).
 - Health - Chief Officer and Director of Nursing from Milton Keynes Clinical Commissioning Group, the Chief Executive or executive level director of

the acute trust and a director level representative from community and mental health services.

- 41 The Board will meet bi monthly. Meetings will not be held in public. The Board Proceedings will be summarised and published where possible. All agendas, reports and minutes will be circulated at least five working days before meeting. Minutes will be circulated within ten working days of the meeting. The quorum for the Board will consist of one representative from the local authority, police and health plus the independent Chair.
- 42 Each member of the Board must appoint a senior level named deputy in order to ensure maximum and consistent attendance.
- 43 Professional advisors and designated professionals will attend the Board as required for specific items.

Safeguarding Board – Adult Programme Board

Terms of reference

- 44 The Safeguarding Board is supported by dedicated children’s and adults programme boards, responsible for the statutory functions specific to adult’s or children’s safeguarding. These programme boards have replaced the current business management/sub-group chairs groups. For the first six months of the arrangements both Programme Boards will be chaired by the Independent Chair. Suitable chairs and Deputy Chairs will be appointed from September 2017.
- 45 The overarching statutory purpose of a Safeguarding Adults Board (SAB) is to help and safeguard adults with care and support needs. This will require the adults programme board to develop and actively promote a culture with its members, partners and the local community that recognises the values and principles contained in ‘Making Safeguarding Personal’ (a sector led initiative which aims to develop an outcomes focus to safeguarding work, and a range of responses to support people to improve or resolve their circumstances. It focuses on engaging people about the outcomes they want).
- 46 The Adult Programme Board is also concerned with a range of issues which can contribute to the wellbeing of its community and the prevention of abuse and neglect, such as:
 - The safety of people who use health services, including mental health.
 - The safety of adults with care and support needs in residential settings.
 - Effective interventions with adults who self-neglect, for whatever reason.
 - The quality of local care and support services.
 - The effectiveness of prisons in safeguarding offenders.
 - Making connections between adult safeguarding and domestic abuse.
 - Modern slavery and associated issues.

- 47 The Adult Programme Board is responsible for leading and co-ordinating programmes of work (through sub groups, projects and task and finish groups) designed on a multi-agency basis to ensure practitioners:
- Work collaboratively to prevent abuse and neglect where possible.
 - Ensure agencies and individuals give timely and proportionate responses when abuse or neglect have occurred.
 - Make enquiries, or request others to make them, when they think an adult with care and support needs may be at risk of abuse or neglect.
 - Arrange for an independent advocate to represent and support a person who is the subject of a safeguarding enquiry or review, if required.
 - Assure itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.
 - Carry out Safeguarding Adults Reviews when the criteria are met.
- 48 The membership of the Adult Programme Board includes the relevant designated professionals and professional advisors and in addition comprises:
- Director of Adult Social Services
 - Representative of Public Health Services
 - Representative of Place Directorate
 - Head of Safeguarding, Milton Keynes Council (as professional advisor)
 - Representative of the CCG
 - Representative of the Acute Health services
 - Representative of the Community and Mental Health services
 - A Healthwatch representative
 - A representative of the local voluntary and community sector
 - Representatives of Thames Valley Police (PVPU and local command)
 - Representative of the provider sector
 - A representative of the prison
 - Representative of the Ambulance Service
 - Representative of the Fire Service
 - Representative of the National Probation Service
 - Representative of the Community Rehabilitation Company
 - Two lay representatives (experts by experience)
 - The lead member for adult services as a participant observer (holding no vote and not part of the quorum)
- 49 The quorum for the programme board will be one third of the membership. Initially (for a period of around six months) the Independent Chair will also chair the Adult Programme Board.
- 50 The Board will meet bi monthly. Meetings will not be held in public. All agendas, reports and minutes will be circulated at least five working days before meeting. Minutes will be circulated within ten working days of the

meeting. The Board will provide a written report on both activity and performance to the Safeguarding Board to be considered at each Board meeting.

Safeguarding Board – Children’s Programme Board

Terms of reference

- 51 The Children’s Programme Board is responsible for delivering the functions of Regulation 5 of the Local Safeguarding Children Board (LSCB) Regulations 2006, including:
- a) Developing policies and procedures for safeguarding and promoting the welfare of children in Milton Keynes.
 - b) The action to be taken where there are concerns about a child’s safety or welfare, including thresholds for intervention.
 - c) Supporting the training of people who work with children.
 - d) Oversight of appropriate recruitment and supervision of people who work with children and vulnerable adults.
 - e) Investigations of allegations concerning people who work with children.
 - f) The safety and welfare of children who are privately fostered.
 - g) Ensuring the Board is sighted on the work of the strategic child sexual exploitation (CSE) sub group and other affiliated sub groups, task and finish groups, forums etc. as necessary.
 - h) Communicating to people and organisations in Milton Keynes the need to safeguard and promote the welfare of children, raising their awareness and encouraging them to do so.
 - i) Participating in the planning of services for children in Milton Keynes.
 - j) Undertaking reviews of serious cases, learning reviews of other cases and advising the local authority and their board partners on lessons to be learned.
 - k) Publishing an annual report on the effectiveness of child safeguarding and promotion of welfare of children in Milton Keynes.
 - l) Providing challenge to ensure that there is a comprehensive, effective and adequately resourced system wide approach to safeguarding children and promoting their welfare.

- 52 The membership of the Children Programme Board includes the relevant designated professionals and professional advisors and in addition comprises:
- Director of Children’s Services
 - Representative of Public Health Services
 - Representative of Place Directorate
 - Head of Safeguarding, Milton Keynes Council (as professional advisor)
 - Representative of the CCG
 - Representative of the Acute Health services
 - Representative of the Community Health and Mental Health services
 - Representative of the youth offending service
 - Representative of Oakhill Secure Training Centre
 - Representative of the local voluntary and community sector
 - Representatives of Thames Valley Police (PVP and local command)
 - Representative of the Ambulance Service
 - Representative of the Fire Service
 - Representative of the National Probation Service
 - Representative of the Community Rehabilitation Company
 - Two lay representatives
 - Four representatives of the education sector
 - The lead member for children’s services as a participant observer (holding no vote and not part of the quorum)
- 53 The quorum for the programme board will be one third of the membership. Initially (for a period of around six months) the Independent Chair will also chair the Children’s Programme Board.
- 54 The Board will meet bi monthly. Meetings will not be held in public. All agendas, reports and minutes will be circulated at least five working days before meeting. Minutes will be circulated within ten working days of the meeting. The Board will provide a written report on both activity and performance to the Safeguarding Board to be considered at each Board meeting.

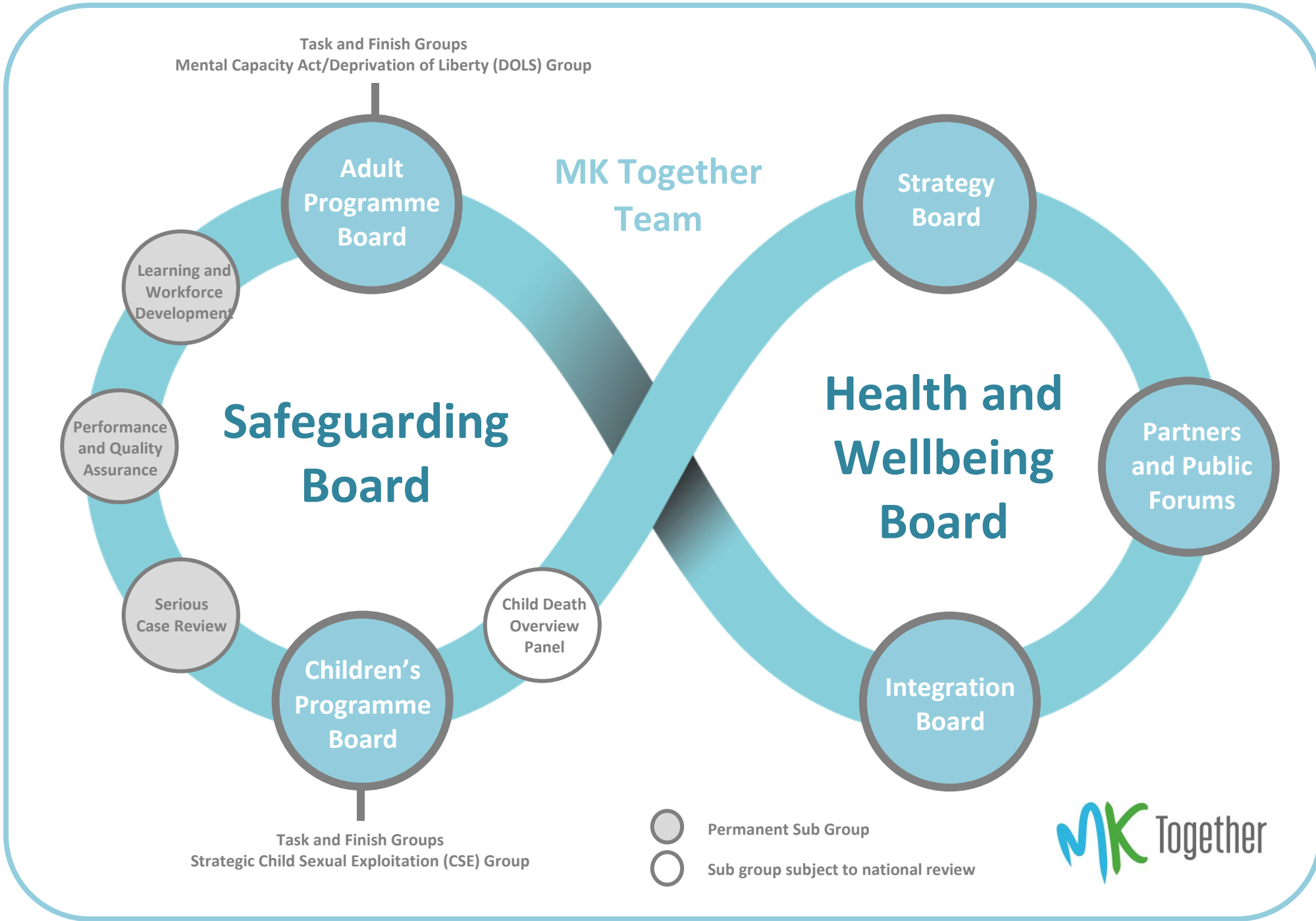
Safeguarding Board – Sub groups

- 55 The Safeguarding Board will support three joint adults and children sub groups which will have responsibility for delivering the relevant work programmes and projects agreed by each Programme Board as part of the business plan:
- a. The Learning and Workforce Development Sub Group
 - b. The Performance and Quality Assurance Sub Group
 - c. The Serious Case Review Sub Group
- 56 In addition it will continue to support Child Death Overview Panel (CDOP) until such time as legislative changes take place, as well as the Mental Capacity Act (MCA)/Deprivation of Liberty Safeguards (DoLS) sub group and the Strategic CSE

group until more appropriate “homes” can be identified for those groups during 2017/18.

- 57 The membership of each of these sub groups will reflect the range of partner agencies that need to be directly involved and will be selected for their professional skills as well as representative abilities.
- 58 Each sub group has its own terms of reference, clear objectives and clear project plans. They are accountable to the Safeguarding Board, reporting through the two Programme Boards, using the Board Report Cards. The sub groups will meet as necessary to deliver their specific projects.
- 59 Task and Finish groups will also be established by the Programme Boards as necessary. Each will be given a clear project plan, with required outcomes, and timelines, as well as carefully designed membership to maximize the skills available to deliver the specific project.
- 60 The Safeguarding Board will also develop a number of forums, led by the interest group they represent, and supported by the Board. The young people’s group is already established and quickly gaining its own identity. The next three to be considered for development are:
 - a. The Communication and Engagement Forum
 - b. The Education Forum
 - c. The Third and Voluntary Sector Forum

Ends



Task and Finish Groups
Mental Capacity Act/Deprivation of Liberty (DOLS) Group

MK Together
Team

Adult
Programme
Board

Strategy
Board

Learning and
Workforce
Development

Safeguarding
Board

Health and
Wellbeing
Board

Performance
and Quality
Assurance

Partners
and Public
Forums

Serious
Case Review

Children's
Programme
Board

Child Death
Overview
Panel

Integration
Board

Task and Finish Groups
Strategic Child Sexual Exploitation (CSE) Group

- Permanent Sub Group
- Sub group subject to national review

