APPENDIX 1



Safeguarding Adults Board Annual Report 2017 – 18



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Independent Chair's Foreword and Overview

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This is the first foreword to an Annual Review report which I'm privileged to write on behalf of Barking and Dagenham's Safeguarding Adults Board (SAB) and its statutory partners (Council, NHS and Police). I became the new Independent Chair of the Board half way through 2017/18 in September 2017, succeeding Sarah Baker who had done much to establish the Board in line with the Care Act 2014. Since then I have enjoyed working with so many able, committed and positive colleagues in the borough and among partners.

Any annual report is in part reflection on and accountability for what has happened in the year just ended (2017/18), as well as some commentary about prospects for the current year (2018/19) and subsequently. It also has the key purposes of seeking to give confidence (i) to the Barking and Dagenham public, (ii) to those people who represent their interests, and (iii) to the leadership of organisations that the borough's Safeguarding Adults Board is properly committed to and capable of discharging its responsibilities in the way in which everyone has a right to expect. I hope that the following pages satisfy those challenges without being too lengthy and detailed.

The scale of the challenges for safeguarding adults are considerable – people in the borough, usually in a weaker position in some way (because of frailty, disability, illness, limited language or being of a minority in some other respect); then being at risk of harm, abuse or neglect by some other more powerful person or body. The numbers of concerns expressed about people in the borough and enquiries being undertaken, as can be seen in this report, are many. Protection arrangements then need to be alert, available, appropriate, responsive and personal ('Making Safeguarding Personal').

It is the role of the multi-agency Safeguarding Adults Board to have oversight of all these matters. In short, awareness of the risks and actions required when harm or abuse occurs or is questioned. The Safeguarding Adults Board is able to hold all organisations to account and to seek assurance that people in the borough are being protected appropriately.

I began my Independent Chair role alert to some immediate priorities:

 Re-engaging two parts of the NHS (Barking, Havering and Redbridge University Trust and North East London Foundation Trust), and later also the London Fire Service, more integrally to Barking and Dagenham's



Safeguarding Adults Board.

- Strengthening the performance review and assurance functions of the SAB.
 In particular, the quality and timeliness of data, indications of trends and assurance arrangements within individual organisations.
- Concluding a complex Safeguarding Adults Review which exposed professional ignorance and/or poor practice and management in relation to human trafficking, modern slavery and mental capacity judgements and, as importantly, seeking assurance about swift improvements.

Alongside this I have been able to visit services and talk with people, especially across the Council and NHS organisations serving Barking and Dagenham, and to witness good practice, innovative thinking, high levels of professionalism and huge personal commitment. Personal and inter-organisational relations are generally good in the borough. All partners recognise that there is more for them to do, alone and with others, in relation to:

- Mental Capacity Assessment and judgment, and
- Making Safeguarding Personal.

These two aspects have continued as core priorities into 2018/19. Additionally, to my mind and the Board's, other priorities for 2018/19 have emerged:

- Being confident that the SAB has sufficient knowledge about safeguarding awareness in the wider community; of places or communities which may have less awareness, including knowledge about how to report concerns, and being assured that actions are in place where there are gaps. Related to this is a need to establish meaningful arrangements for feedback to the SAB about safeguarding, including from service user, carer and voluntary sector interests.
- Assuring sufficient knowledge of safeguarding among other than specialist professionals in partner organisations, for example, the Council's community solutions team, enforcement and housing staff or those in primary health care settings, police and fire officers.
- Ensuring that the oversight and governance of different safeguarding and public protection services, partnerships and formal review mechanisms complement each other well, without inappropriate gaps or overlap – hospital discharge, safeguarding children, domestic violence (and domestic abuse more widely), community safety and others.

It would be wrong for me not to comment though that, whatever the safeguarding adults achievements described in this annual report, the pressures on individual



practitioners, managers and partner organisations, indeed across all caring organisations and the community/voluntary sector, are immense. All the statutory partners – Council, NHS, Police and Fire, are experiencing actual reduction in financial resources relative to needs. Difficult priority decisions are needing to be made. Organisational changes (actual or anticipated) are a perpetual possible distraction.

I hope, though that, it will be apparent from the above paragraphs that the SAB has a clear sense of its short term and longer term priorities, that partners are committed to these, but that there is much to do. Nowhere is there any complacency.

I am appreciative personally of the good relationships I have been able to develop quickly within the Council, all NHS bodies, Police and Fire services, and elsewhere. I hope I have been able to use my links across the London Councils Safeguarding Adults Board Independent Chairs Network, local government, adult social care and the NHS to benefit in Barking and Dagenham. I am particularly grateful for the support to the Board and myself from Joanne Kitching, the SAB Business Manager and to the 'lead people' from Council, NHS and Police personally. Thank you.

To people and organisations more widely, I hope that this annual report offers reasonable assurance that the SAB is resolved and determined that people should be protected from harm and abuse in Barking and Dagenham, and that the SAB will be as effective as we can be in our duties, responsibilities and priorities.



Brian Parrott Independent Chair Barking and Dagenham Safeguarding Adults Board August 2018

What is Safeguarding Adults? 2

The Care Act 2014 statutory guidance defines adult safeguarding as:

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

The Care Act 2014 came into force on 1st April 2015. The Act introduced new requirements for safeguarding adults and the arrangements that each locality must have in place to ensure that vulnerable people are protected from risk, abuse or neglect. The Local Authority, NHS Clinical Commissioning Groups and the Police are all statutory partners of the Safeguarding Adults Board (SAB) and other important partners are also involved in various different ways.

The Care Act identifies six key principles that should underpin all safeguarding work. These are accountability, empowerment, protection, prevention, proportionality and partnership.





The SAB's Vision

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Every adult living in the London Borough of Barking and Dagenham has the right to live in safety, free from fear of abuse or neglect. The Safeguarding Adults Board exists to make sure that organisations, people and local communities work together to prevent and stop the risk of abuse or neglect.

In the London Borough Barking and Dagenham we want to embed a stronger and safer culture that supports adults who are at risk of harm. We know that to achieve this we have to work in partnership with the people who use local services and with the wider local community. All agencies working with adults at risk have an essential role in recognising when these people may be in need of protection. Agencies also have a responsibility to work in partnership with adults at risk, their families, their carer(s) and each other. The introduction of the Care Act 2014 has brought in many changes in Adult Social Care Services. The Safeguarding Adults Board has a statutory duty to ensure it uses its powers to develop responsibility within the community for adults who need care and protection.

The prime focus of the work of the Safeguarding Adults Board is to ensure that safeguarding is consistently understood by anyone engaging with adults who may be at risk of or experiencing abuse or neglect, and that there is a common commitment to improving outcomes for them. This means ensuring the community has an understanding of how to support, protect and empower people at risk of harm. We want to develop and facilitate practice which puts individuals in control and generates a more person-centred approach and outcomes.

The Safeguarding Adults Board has developed a Strategic Plan which sets outs how we will work together to safeguard adults at risk.

The Safeguarding Adults Board has a responsibility to:

- > protect adults at risk
- > prevent abuse occurring, and
- respond to concerns.

It may be suspected that someone is at risk of harm because:

- > there a general concern about someone's well being
- a person sees or hears something which could put someone at risk
- a person tells you or someone else that something has happened or is happening to them which could put them or others at risk.



The Board and its Committees

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How the Board works

The Barking and Dagenham Safeguarding Adults Board is made up of the following statutory partners:

- The Local Authority
- The Borough Police
- The NHS Clinical Commissioning Group.

During the latter part of 2017/18, following the appointment of the new SAB Independent Chair from September 2017, a number of changes began to be made to Board arrangements.

The SAB now has two committees, which are chaired by different partner organisations:

- The Performance and Assurance Committee (chaired by the London Borough of Barking and Dagenham)
- The Safeguarding Adult Review Committee (chaired by the Clinical Commissioning Group)

Other members of the Board include:

- · Chairs of the Committees
- a representative from North East London Foundation Trust (NELFT)
- a representative from Barking, Havering, Redbridge University Hospitals (BHRUT)
- a representative from the London Fire Service
- the Council Cabinet Member for Social Care and Health Integration
- · officer advisers.

In addition, the SAB is able to invite other organisations or individuals to attend and speak at the meetings where they have contributions to make.

The Chair of each of the two committees is responsible for:

- Developing a work programme which will is incorporated into the SAB strategic plan and monitored by the SAB.
- Resourcing the meetings of the committee.
- Reporting on the progress of the committee's work to the SAB and ensuring that the membership of the committee draws in the required experience.



In addition, from early 2018 the SAB is in the process of remodelling two other less formal groups:

A **Learning and Development Group** will focus on multi-agency learning needs and ways of overseeing and reviewing their follow through.

A **Communications and Community Engagement Group** will focus on how all multi-agency safeguarding work across organisations and the Board connects to users of services and to the local and diverse communities of Barking and Dagenham.

The nature of these groups can be more flexible and selective as to on what and how it works. A small number of volunteers, not necessarily Board members, from organisations will be involved.

During the year the Independent Chair met regularly with the Barking and Dagenham Safeguarding Children Board Independent Chair. This allows for opportunities to consider safeguarding adults and children at risk, and the issues affecting both areas.

The Independent Chair attended the Health and Wellbeing Board to allow for further consideration and debate regarding the issues of safeguarding within the agenda. The Independent Chair also met quarterly for a Council corporate safeguarding meeting with the Leader of the Council, the Lead Member for Social Care and Health Integration, the Chief Executive of the London Borough of Barking and Dagenham and the Strategic Director for Service Development and Integration, to review performance data for adult social care, including workforce data and associated risks and mitigation. This allows for open debate, discussion, challenge and demonstrates a climate of openness and transparency.

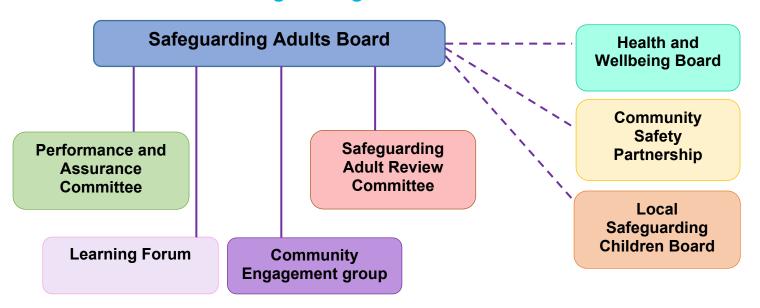
Partners' attendance at the SAB in 2017/18 was as follows:

Independent Chair	100%
London Borough of Barking and Dagenham	100%
Police	100%
NHS Clinical Commissioning Group	100%

The Board is supported by the Council Cabinet Member for Social Care and Health Integration as a participant observer. This enables Councillor colleagues to be kept up to date with safeguarding adult matters. In addition, the Committee Chairs and officer advisors also attend Board meetings.



The Safeguarding Adult Board Structure



The SAB's Statutory Responsibilities

The SAB must publish an Annual Report each year as well as having strategic plan. This Annual Report of the Barking and Dagenham SAB looks back on the work undertaken by the SAB and its committees, throughout 2017/18 and provides an account of the work of the partnership including achievements, challenges and priorities for the coming year.

In addition, the SAB has a statutory duty to carry out Safeguarding Adult Reviews (SARs) where an adult in the local authority area:

- has died as a result of abuse or risk (either known or suspected) and there are concerns that partner organisations could have worked together more effectively to protect that adult.
- has not died but the SAB knows or suspects that adult has experienced serious abuse or neglect.

The implementation of recommendations and action plans from a SAR must be reported in the Annual Report, including any decision not to implement any recommendation. One SAR which was started in 2016/17 was completed in late 2017. No new SARs were commenced in 2017/18. An overview of the SAR is given in chapter 9.



Financial Contributions and Expenditure

Statutory partners make financial contributions to the Safeguarding Adults Board. For 2017/18 the partner contributions to the SAB were as follows:

CCG - £30,000 Police - £5,000 London Fire Brigade - £500

The London Borough of Barking and Dagenham contributes the balance of the total costs of operating the Safeguarding Adults Board, this year amounting to £80,300.

The following table shows a breakdown of the expenditure for 2017/18. This includes staffing costs for the SAB Independent Chair and the Board Business Manager.

Expenditure	Cost
Safeguarding Adult Reviews (SARs)	£24,300
Support services costs, including staffing (SAB Independent Chair and the Board Business Manager) and support budgets	Approx. £91,500
TOTAL	£115,800



Safeguarding in numbers

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There has been one Safeguarding Adult Review reported and published in 2017/18.



The multi-agency learning focused on undertaking mental capacity assessments, information sharing and awareness raising around modern slavery.





1632

safeguarding concerns were raised to LBBD. This is an increase of 177 compared to last year.



462 safeguarding enquiries commenced and 425 concluded during the year.



32% of safeguarding enquires were about neglect and acts of omission which is lower than last year.



74% of risks were investigated in the person's own home.

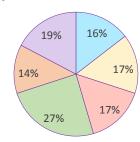


In 64% of cases action was taken and the risk was reduced. This is the same as last year.



Safeguarding enquiries by type of risk

- Physical Abuse
- Psychological Abuse
- Financial or Material Abuse
- Neglect and Acts of Omission
- Self neglect
- Other Risk Types



There has been one Safeguarding Adult Review reported and published in 2017/18.



The multi-agency learning focused on undertaking mental capacity assessments, information sharing and awareness raising around modern slavery.



Safeguarding Performance for 2018/19

2017/18 saw the highest number of safeguarding concerns raised since the introduction of the Care Act in 2015. 1,632 concerns raised is 12% higher than the previous year. It is not easy to draw conclusions from this, with any potential genuine increase in risk being masked by changes in recording practice by practitioners and the public.

Of those concerns, 462 led to safeguarding enquiries during the year. This is a proportionate reduction in the levels of enquiries based on last year, given the increased number of initial concerns. However, it is also reducing when measured on a per-head basis (319 per 100,000, compared to 244 in similar boroughs). The SAB has agreed that some qualitative analysis would be helpful to explore patterns in progression of safeguarding referrals.

The location of risk shows, on the face of it, some marked difference to our similar boroughs, with elevated levels of concerns arising in people's own home (74% in Barking & Dagenham, compared to 57% in similar boroughs), and correspondingly reduced levels in care homes (16% B&D compared to 20% elsewhere). Investigation is being undertaken to determine whether this is a recording issue, with practitioners defining a care home, not entirely unreasonably, as someone's own home.

In 90% of cases during the year, action was taken in response to a safeguarding enquiry and risk was either removed or reduced as a result. It remains a matter of professional assessment in the remaining 10% of cases where this was not the case, and factors such as service user choice and decision making can play a significant role.

The work undertaken by the SAB and partners in response to the findings of major enquiries has shown some impact in respect of mental capacity assessment. From very low figures of 3% (2015/16) and 8% (2016/17), it is now recorded in 21% of cases that the victim lacked capacity. This is much more in line with comparator borough levels of 25% (2016/17). Provision of advocacy or family support was there in 88% of cases, which is the same as recorded by similar boroughs in 2016/17. In a similar vein, the number of Deprivation of Liberty Safeguards processed increased by 24% to 389. The pressure on this system is recognised nationally and reflected locally in the fact that only 9% were completed within timescale.

The annual Adult Social Care User Survey for 2017/18 showed that 79% of people said their services made them feel safe. This is marginally down from 81% in 2016/17, and is also higher than the 65% who indicated in the same survey that overall they felt safe. This gap may be about perceptions of crime and safety in



Barking and Dagenham, and possibly points towards work to improve the 'disability positive' environment of the borough.



The SAB's Partners

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London Borough of Barking and Dagenham

Developments and Improvements in Safeguarding Adults Practice

London Borough of Barking and Dagenham has continued to operate a significant part of the local system for safeguarding vulnerable adults during 2017/18. The restructuring of the Council's operations for care and support took full effect during this period, with the Community Solutions team as the new home for the multiagency safeguarding hub and dividing the former Intake and Access team between Community Solutions and the new Adults' Care and Support Operations service block.

During this period, mental health social work also came back to join other social care operations. This has strengthened the social work function, and there have been notable improvements in the completion of safeguarding investigations as a result.

In respect of the Council's duty to promote a sustainable and good quality market in care services, there continues to be concern about the quality of the local social care market. The Council has worked closely with a number of providers to support improvement or, in some instances, to suspend all placements until improvements are made. We have operated strong links to the Care Quality Commission and the local Clinical Commissioning Group in order to share and evaluate intelligence about market quality and safety.

Contribution to Multi-agency Safeguarding Practice and Partnership Working Arrangements

The Council is also considering opportunities to strengthen the safeguarding strategy function in order to better support the work of the Board, the Independent Chair, and the partnership more broadly.

Objectives and Ambitions for 2018/19

In terms of feedback we have received, it is acknowledged that a number of partners would like to see more feedback on decisions made in respect of the safeguarding concerns that they raise through the Council's reporting mechanisms. We have committed to review the 'closure' process in order to improve this situation, with the introduction of the new LiquidLogic case management system being an opportunity in this regard. However, it must be acknowledged that the Council is operating on significantly reducing resources for adults' care and support, and additional steps in the workflow of safeguarding adults must be carefully evaluated in this context. The



new services Adults' Care and Support and the Disability Service continue to be under review to ensure that the model of delivery is effectively delivering the aims that were intended, and most importantly, support service users to have choice and control over their care and receive care and support of a high quality.

We have also acknowledged that improvements need to be made in the information provided to service users and carers about how and when to report their concerns, and of the standards that they are entitled to expect of their care provider. This would align to the previously acknowledged need to further embed 'Making Safeguarding Personal' and its principles into the everyday practice of our teams. In terms of learning from incidents, we will continue to monitor closely the operation on the hospital discharge pathway, which is likely to further increase as resources reduce and system pressures emerge during 2018/19. The recurrent theme of improving mental capacity assessment and Deprivation of Liberty Safeguards also remains relevant into 2018/19, though data is showing some improvement in 2017/18. The introduction of the post of Principal Social Worker has assisted in this respect, developing a stronger leadership function for professional social work within adults' care and support. The Council has also taken seriously the matters raised in the Safeguarding Adults Review into a suspected case of modern slavery and is working on improving practice in adults' care and support and more widely.

The Metropolitan Police

Developments and Improvements in Safeguarding Adults Practice

In the last year the Metropolitan Police has commenced a significant restructure of local policing. Locally this has seen the three Boroughs of Barking and Dagenham, Redbridge and Havering brought together in to one Basic Command Unit – BCU. The BCU for this area is called East BCU and was one of two introduced to test and develop the concept. It has now been adopted as the force model and we have the advantage locally of having now implemented that format whilst the rest of the Met do so over the next year.

In relation to Safeguarding, the BCU provides some real opportunities not least because cases frequently transcend borough boundaries. It brings together previously separate facets of policing under one local command led by a Detective Superintendent, and sees safeguarding become an integral part of local policing. This, together with a shift of operational focus towards risk and harm, means those who perpetrate or suffer things such as domestic abuse, serious sexual crime, missing episodes, child abuse and exploitation are the priority for all local officers not just specialists.



Contribution to Multi-agency Safeguarding Practice and Partnership Working Arrangements

One of the intentions of the Met in implementing the BCU design is a commitment to multi-agency safeguarding. The local MASH teams remain allowing proper assessment of vulnerability and swift decision-making, with added depth as the three MASH teams can support each other at times of high demand.

The contribution to the safeguarding Board meetings has been by local, senior specialist safeguarding officers.

The domestic abuse risk forum, the MARAC, continues and is chaired by a dedicated senior police officer, with the added benefit of identifying best practice not only from the other parts of the BCU, but also from across London as under the new structure domestic abuse managers work far more closely together.

Our use of control orders to protect the vulnerable, e.g. domestic violence protection orders has seen a big increase as the creation of a specialist safeguarding team for the BCU better identifies risk and maximises opportunities to keep people safe. Often these orders are followed by multi-agency strategy discussions to create an effective safety plan for the future.

Objectives and Ambitions for 2018/19

As an organisation we are just at the beginning of a journey. We have much to do to equip all of our local officers and staff (over 1300 of them) to be proficient in recognising the different forms of vulnerability. The BCU structure is just the beginning. It provides the opportunity to challenge ourselves to think and deliver policing differently. The next year will see a focus on our first response police officers, to provide them with the skills and knowledge to investigate all but the most high risk of domestic crime – by far the biggest volume of vulnerability crime. This will reduce the occasions a victim has to explain what happened and reduce the time taken to investigate by eliminating the handover between teams.

Barking and Dagenham NHS Clinical Commissioning Group

Developments and Improvements in Safeguarding Adults Practice

The CCG has continued to maintain a high focus on Adult Safeguarding work within Barking and Dagenham. The Designated Adult Safeguarding Manager role has been further embedded within the local health economy into its second year as a key member of the local safeguarding workforce. This has led to stronger safeguarding



links with provider organisations and their related workforces and in turn a positive impact on the adult safeguarding agenda of providers. During 2017/18 there has been a higher level of scrutiny around the NHS's role within local safeguarding practices, including the monitoring of health related actions resulting from Safeguarding Adult and Domestic Homicide Reviews (SAR and DHR). The CCG has strengthened the impact of adult safeguarding across Barking and Dagenham by developing and reviewing adult safeguarding policies and procedures as well as the Adult Safeguarding Standards used as part of the NHS Standard Contract for provider organisations.

Contribution to Multi-agency Safeguarding Practice and Partnership Working Arrangements

Throughout 2017/18 the CCG has continued to make significant contributions to multi-agency safeguarding practice and partnership working arrangements. This has included attendance at all SAB Meetings, chairing of the Performance and Assurance Committee, comparison and analysis and provision or narrative of provider data for inclusion within the performance dashboard. As well as this input, the Designated Adult Safeguarding Manager chaired the panel of a Safeguarding Adult Review (SAR) and participated in the work of the SAB Committees, in addition to chairing the local Quality Surveillance Group (QSG) Meeting. The CCG has worked closely with local authority colleagues in the conducting of quality assurance and safeguarding visits to care homes with nursing providers. The CCG has also successfully delivered the Local Area Contact (LAC) provision for the Learning Disability Mortality Review (LeDeR) Programme.

Objectives and Ambitions for 2018/19

The CCG's objectives and ambitions for 2018/19 in relation to safeguarding adults includes the review of internal and provider adult safeguarding training packages to ensure that training provided is appropriate for the role and responsibilities of staff receiving the training. In relation to care homes with nursing, the CCG aims to introduce a schedule of quality assurance and safeguarding visits, both announced and unannounced, to ensure the provision of high quality and safe care. Additionally, the CCG plans to facilitate wider discussions around care provided outside of primary and secondary care to assist the local health economy to understand and address other areas of potential adult safeguarding concerns such as pressure ulcers, management of naso-gastric tubes (used of feeding people that difficulty swallowing) and safe discharges from acute providers.



Barking Havering and Redbridge University Hospital Trust

Developments and Improvements in Safeguarding Adults Practice

Following a successful Trust Safeguarding business case to Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT) a substantial investment to expand the Trust's Safeguarding Team was made. A number of posts were recruited in to which included a Safeguarding Advisor, Harmful Practice; Emergency Department, Safeguarding Advisors and a Safeguarding Adult Advisor to support the work of the Named Nurse, Safeguarding Adults, all of which strengthen the support the team can provide at both an operational and strategic level.

A real focus throughout the year has been on safeguarding training compliance; Safeguarding Adults Level 1 and 2 has consistently been achieved above 95% since April 2017. A revised Mental Capacity Act e-Learning module was launched in October 2017 as "essential" training for all clinical staff achieving 85% compliance by year end.

A Deprivation of Liberty Safeguards patient/carer information leaflet was developed to explain the DoLS process as required by the Mental Capacity Code of Practice. This information was also developed in easy read format.

Contribution to Multi-agency Safeguarding Practice and Partnership Working Arrangements

BHRUT are represented at the Barking and Dagenham Safeguarding Adults Board (SAB) by either the Trust's Chief Nurse, or in her absence the Deputy Chief Nurse, Safeguarding and Harm Free Care. The Named Nurse, Safeguarding Adults is an active member of the Barking and Dagenham SAB committees. The Lead Nurse, Learning Disabilities attends the Barking and Dagenham Learning Disability Partnership Board.

BHRUT staff are trained to recognise and respond to safeguarding concerns which are reported through the completion of a safeguarding concern form. The BHRUT Safeguarding Adults Team and Joint Assessment and Discharge Team work collaboratively with the Barking and Dagenham Business Support Teams to support the safeguarding process by way of appropriate information sharing and attendance at strategy meetings/case conferences and discharge planning meetings.

Objectives and Ambitions for 2018/19

The Trust has developed a combined Safeguarding Children's and Adults Strategy 2018-2020 replacing the previous individual Safeguarding Adult and Children Strategies. The strategy was developed collaboratively with internal and external



stakeholders including representatives from the Trust's Divisions, colleagues from the Tri-Borough Safeguarding Children and Adult Boards and BHR Clinical Commissioning Group. Clinical areas were visited to capture the views of patients and visitors with regard to the proposed strategy. The strategy is aligned to the key safeguarding priorities identified at national and local level and focuses on:

- Think Family include the whole family when planning care
- Service User Engagement plan services based on patient feedback
- Responsive Workforce ask questions and think the unthinkable
- Harmful Practice protect adults and children who may be at risk of harm
- Bridging the Gap for 16-18 year olds prepare young people moving from children to adult hospital services
- Empowerment and Advocacy adhere to the Mental Capacity Act
- Learning from Practice facilitate training and share lessons learnt from safeguarding incidents
- Information Technology utilise information technology to improve service user engagement and appropriate sharing of information.

North East London Foundation Trust (NELFT)

Developments and Improvements in Safeguarding Adults Practice

NELFT continue to develop and embed adult safeguarding into existing governance systems and practices throughout the organisation. This includes the wider governance and safeguarding systems such as the serious incident (SI) process, domestic violence (DV)/other harmful practices. The NELFT adults and children's safeguarding team have merged creating one safeguarding service. In-line with the 'Think Family' approach, this model has been beneficial all operational NELFT teams.

NELFT Safeguarding has contributed to a range of policies within the Trust and multi-agency policies, i.e. the Barking and Dagenham Hoarding and self-neglect policy (August 2017). NELFT have a trust-wide lead for Learning Disability Mortality Review (LeDeR), mental capacity assessment and Deprivation of Liberty Safeguards (DoLS) and Prevent as well as directorate level leadership. A Standard Operating Procedure Policy has been developed for all NELFT staff. The lead also represents at the steering groups for East London.

Mandatory reporting for LeDeR, MCA/DoLS and Prevent is embedded in the trust via safeguarding systems and the Trust incident reporting system (Datix). MCA/DoLS and Prevent training has maintained targeted compliance. Furthermore, MCA/DoLS training requirements has since been revised and is now mandatory to ensure MCA 2005, (and the interface with mental health act) is embedded into everyday practice.



The NELFT Safeguarding Team completed and published a range of audits in 2017. Good practice identified included timeliness and quality of advice given by the safeguarding team; 100% compliance with MSP objectives and an increase in the appropriate use of safeguarding alerts in patient electronic records. Improvements include embedding tools such as child sexual exploitation (CSE), female genital mutilation (FGM) and Safe Lives (DV). This has been strengthened within safeguarding training and discussed at safeguarding supervisor's networks and link practitioner forums.

Contribution to Multi-agency Safeguarding Practice and Partnership Working Arrangements

NELFT continues to prioritise partnership working at both strategic and operational levels and ensure significant contribution to safeguarding learning and development within the multi-agency of LBBD. This includes representation at the SAB, which regular attended by the NELFT Integrated Care Director for Barking and Dagenham. Key pieces of work are supported by the AD Safeguarding and the Safeguarding Adults team.

The NELFT safeguarding team meets regularly with the designated safeguarding professionals at the CCG and to review the safeguarding strategy, safeguarding risks and review any learning and action plans from SAR/DHR/SCRs. All staff have an obligation to provide information to the local authority in relation to safeguarding enquiries as specified in the Multi-Agency Safeguarding Policy and Procedures and the Care Act 2014. NELFT practitioners attend strategy meetings and case conferences as required by the section 42 safeguarding process.

NELFT took part in the planning and development of the modern slavery/trafficking and MCA event in Barking and Dagenham. NELFT successfully piloted mental capacity assessment training utilising actors. This was very well received by NELFT practitioners. The concept was then recommended by NELFT for the SAR learning event in May 2018 whereby the individual who had a learning disability was subjected to modern slavery. The event emphasised the importance of utilising the IMCA advocacy service.

Objectives or Ambitions for 2018/19 in Relation to Safeguarding Adults

The NELFT Safeguarding Adults and Safeguarding Children SOP's are being fully revised and aligned into a single guidance document. This document will include embedded live links to relevant policies and procedures to strengthen the accessibility to relevant information and guidance for NELFT frontline staff. The NELFT safeguarding team are working with CCG colleagues in preparation for the final publication of the 'Safeguarding for Adults: Roles and competencies' - intercollegiate document, which is expected towards the end of 2018. The purpose



is to scope the current training offer within NELFT against the draft document that was released in March 2018. Additionally, there will be a review of the domestic violence, exploitation, MCA and DoLS training packages. The NELFT Safeguarding team will produce a newsletter on a quarterly basis which will be a practice briefing sharing learning and themes from Safeguarding Adults Reviews (SAR), Domestic Homicide Reviews (DHR) and other reviews such as LeDeR and SIs. A re-audit of NELFT's adherence to the DoLS procedures is in the data collection stage. This is part of the evidence to demonstrate embedding of the MCA and DoLS legislation into everyday practice across the Trust.



SAB Self Assessment and Peer 7 Challenge

Elsewhere in this report is some of the detail which illustrates the Board's performance and quality assurance oversight responsibilities. Additionally, at the end of the 2017/18 performance year (in June 2018) the SAB completed an individual partner self-assessment, assurance and audit process, concluding with a live 'peer challenge' exercise of each's submission.

The exercise covered areas such as leadership, strategy, governance and organisational culture; responsibilities towards adults at risk (for staff and commissioned services); approach to workforce and workplace issues in relation to safeguarding; effective inter-agency working; diversity; service users being informed about safeguarding; application of learning from SARs.

Representation at the peer challenge session included the SAB Independent Chair, London Borough of Barking and Dagenham Council, the NHS Clinical Commissioning Group (CCG), the Met Police, Barking, Havering and Redbridge University Trust (BHRUT), North East London Foundation Trust (NELFT) and the Fire Service. There were three main aims for the session:

- Challenging conversations to enhance individual organisation's self-critical perspective.
- Assurance for the Board that all organisations will address statutory and nonstatutory expectations in relation to safeguarding.
- Feedback to the board with regard to its effectiveness in working across the partnership to safeguard adults.

The audits and preparation work undertaken by each individual partner were used to facilitate the discussion and allowed for some extremely useful, honesty and open discussions about positive partnership working and relationships, as well as the challenges faced by individual partners and the Board itself. The session focussed on how partners and the Board could work together strategically to improve structures and processes related to safeguarding as well as ensure that vulnerable people are safeguarded. Discussions focussed on areas for improvement and how organisations and the Board could work together to achieve these.

This was the first time the Barking and Dagenham SAB had undertaken a SAB wide self-assessment, assurance, audit and peer challenge exercise, in this way. Over recent years, derived initially from a London NHS exercise and adopted more widely by the London Councils SAB Independent Chairs Group, such a process had been



followed in some other London boroughs. It had been well regarded by partners. Essentially it was to review the year preceding (2017/18) early in the following year with a view to assuring actions in 2018/19 and looking ahead to the SAB's priorities into 2019/20.

All Barking and Dagenham SAB partners agreed voluntarily to engage in the exercise, with the London Fire Service as new members of the SAB joining in just the peer challenge session. For several partners this meant adapting reviews applicable across more than one London Borough SAB to the specific circumstances of Barking and Dagenham. All did this purposefully and willingly. Each organisation's written submission was shared with colleague partners who attended the peer challenge session in person. Each organisation has received an individual note of the peer challenge session.

Additionally, the peer challenge session identified key outcomes for the SAB as a whole; issues which should be pursued by all Board partners and the Board as a whole in 2018/19 and beyond. The principle ones are these below. They were considered at the SAB meeting in July 2018.

- 1. Being confident that the SAB has sufficient **knowledge about safeguarding awareness in the wider community**; of places or communities which may have less awareness, including knowledge about how to report concerns, and being assured that actions are in place where there are gaps.
- 2. Assuring sufficient knowledge of safeguarding among other than specialist professionals in partner organisations, for example council community solutions staff, enforcement and housing staff or those in primary health care settings, police and fire officers, to illustrate just these.
- 3. Making sure that there are **good links between 'safeguarding'**, **'domestic abuse' and 'domestic piolence'** practice, understanding and reviewing processes across the organisations; that staff understand respective roles and responsibilities; and that there are mechanisms to ensure good communication.
- 4. Seeking to ensure that 'Making Safeguarding Personal' is embedded in practice by all partners, other than in exceptional circumstances when it may be less appropriate, and that its effectiveness is measured.
- 5. Recognising that professionals continue to need support in undertaking mental capacity assessments in an appropriate and timely way.
- 6. Seeking to ensure that there is **learning wherever it is needed from Safeguarding Adults Reviews, Domestic Violence Homicide reviews**



- **and other reviews**, not just in Barking and Dagenham but from across London where shared information is readily available.
- 7. Being assured that the enhanced safeguarding risks at points of practice and organisational interface are fully appreciated and addressed, most obviously in relation to discharge of more vulnerable people from hospital care into community settings and people's own home.

These outcomes from the peer challenge session form the priorities for the SAB in the current and coming year and will feed into production of a SAB longer term strategic plan from 2019/20.



Safeguarding Adult Reviews

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The Safeguarding Adult Review (SAR) Committee, under the Care Act, has responsibility for commissioning and leading on SARs.

During 2017/18 the Safeguarding Adult Review Panel considered one case which did not progress to a SAR. The Safeguarding Adults Board completed one SAR that had been started in the previous year. The S Committee oversaw the review and presented the final report and action plan to the Safeguarding Adults Board for sign off and agreement for publication.

Safeguarding Adult Review 'Drina'

This Safeguarding Adults Review (SAR) 'Drina' was commissioned by the Barking and Dagenham Safeguarding Adults Board into the apparent failure to safeguard Drina, a vulnerable 35 year old Romanian female with learning disabilities. Drina became known to the London Borough of Barking and Dagenham and the Police on the 17th November 2016 having been found when bailiffs attended a house in Dagenham, regarding financial matters. Drina was seen in a dirty and unkempt condition in circumstances that led them to believe that she was being kept as a slave. They immediately reported their concerns to police. Drina was pushed into a van by occupants of the house before police arrived and was taken away from the premises. Drina was later traced by police at a house in Walthamstow and taken to a place of safety. Drina was later determined by the UK Home Office National Referral Mechanism (NRM) to be a victim of Modern Slavery. Drina was repatriated back to Romania on the 19th December 2016. An Independent Reviewer was commissioned to carry out the SAR.

The key findings and learning from this SAR across the partnership were:

- Undertaking mental capacity assessments, human rights assessments, risk assessments and multi-agency meetings to share information across partners
- Use of translators and independent mental capacity advocates to support victims
- Raising awareness of modern slavery and human trafficking to professionals
- Raising awareness of whistleblowing policies and supporting staff to report concerns
- Use of expert medical advice to be sought by the Police to obtain and preserve evidence for potential criminal investigations.

All Safeguarding Adult Review reports published by the SAB can be found at this link

http://careandsupport.lbbd.gov.uk/kb5/barkingdagenham/asch/advice.page?id=c GthvG2UuNE



Quality of Care

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As part of its performance review and quality assurance responsibilities the SAB is routinely advised of significant external statutory inspections (for example, Care Quality Commission (CQC), Her Majesty's Inspector of Constabulary (HMIC) of partners themselves and also individual organisations in the borough, for example nursing and residential care homes and domiciliary care services.

North East London Foundation Trust (NELFT) CQC Inspection

NELFT was inspected in October and November 2017, was rated as 'good' for being effective, caring, responsive and well led. It was rated as 'requires improvement' for being safe.

Following the Care Quality Commission's (CQC) previous inspection in 2016, the trust had implemented a comprehensive improvement plan and the majority of CQC's recommendations had been put into practice.

The 'safe' key question remains rated as 'requires improvement' and there are further improvements that the trust must make in six of the core services. This includes addressing areas such as ensuring staff had completed mandatory training, hand-washing, fire safety, medicines management, use of restraint, updating risk assessments and maintaining clinical equipment. The trust is addressing this as a matter of urgency.

Barking Havering and Redbridge University Hospitals Trust CQC Inspection

BHRUT was inspected on 23rd January 2018. The rating of 'requires improvement' had stayed the same from the previous inspection. The main reasons were that:

- medical staff compliance with mandatory training was below the trust target.
- vacancies and the use of bank and agency staff impacted staff morale in some services. There was a shortage of medical cover on surgery wards, especially in the evenings and at weekends. The emergency department did not use standard tools for assessing risks and severity of the condition of mental health patients.
- although medicines management was good overall, the recording of temperatures for the storage of medicines was inconsistent.
- the environment of the EUCC raised a number of patient safety concerns.



However, the CQC did find that there are good standards of infection control, although the infection control team did not have a system to identify trends in infection. There has been a raised profile for compliance against World Health Organisation (WHO) checklists. In addition, staff demonstrated appropriate knowledge and understanding of safeguarding procedures and how to escalate concerns. There was also evidence that serious incidents were appropriately investigated and that learning and outcomes were shared with staff.

Barking and Dagenham Primary Care Providers

Out of thirty-five GP practices in the borough ten were rated by CQC as 'requires improvement' under the 'safe' rating. Contractual breach notices were issued where appropriate, and all practices rated overall as 'inadequate' were placed in special measures. Primary care also identified a number of common themes in terms of short fallings highlighted by the CQC, which have been used to develop an action plan to support practices to improve. In addition, an independent organisation was commissioned to deliver a support programme for practices rated overall as 'requires improvement' which ran through much of 2017. This provided practical, hands on support to help practices develop Action Plans to address short fallings identified by the CQC and undertake the work necessary to implement them prior to reinspection. Practices that were rated overall as 'inadequate' were eligible to access Peer Support Programme commissioned by NHS England.

The Adult Social Care Provider Market

The Council's Quality Assurance team are continuing to work closely with the new area team at the Care Quality Commission (CQC). The focus on building good working relations has resulted in better information sharing to improve quality and standards in the provider care market. The CQC and the Quality Assurance Team have shared consistent views about the performance of local social care providers over the course of the last year. The risk-based approach to assessing provider performance, and planning appropriate interventions, has continued to ensure that providers are more robustly monitored and by using improvement plans are moving more swiftly away from needing escalated oversight. During 2017/18 eleven local social care providers were rated by the Care Quality Commission as either 'requires improvement' or 'inadequate' out of a total of 101 operating in the borough.

Quantitative and qualitative data is used to assess providers. Information on the number of safeguarding alerts, complaints and calls to the London Ambulance Service are used and performance monitoring data is shared between the Quality Assurance Team with and the Commissioning Team. The Quality Assurance team attend the Local Quality Surveillance Group meeting along with BHRUT, CCG, CQC along with other health professionals including the London Ambulance Service. This



gives professionals the opportunity to share information across neighbouring boroughs and discuss how working together to undertake joint visits and support local providers across the local sub regional footprint.

Service user feedback is gathered regularly via telephone surveys undertaken by a volunteer and quality assurance staff and through visits with service users and also family members. This is used to assess satisfaction with services and to highlight any issues with the relevant professionals, service or provider. Feedback is provided to commissioners to help shape and plan services. Complaints and Members' enquiries are shared with the Quality Assurance team to allow the opportunity for investigation and feedback.

The three main commissioning areas for vulnerable adults include older people, mental health and learning disabilities. Commissioners have been working with community groups, service users and their families to develop a range of principles to ensure the voice of the community is heard within commissioning practice. The central thread of this is for services be delivered as close to home as possible so that service users are supported by family, friends and local networks.

For mental health and learning disability, commissioners have identified the following gaps within our current commissioning portfolio, these include utilising supported living offer, other forms of specialist accommodation such as co-living, a forensic offer and specialist floating support to provide support to people in their own homes. The Commissioning team are currently undertaking a tender process for mental health and learning disabilities to ensure that these gaps are met, and that these services meet the needs of our local population, both now and in the future. To this end we have been engaging with the provider market to ensure that the market can meet our needs and will have service user involvement throughout the process.

Commissioners continue to work in partnership with local providers of services to older people, including but not limited to residential and nursing homes and providers of domiciliary care in an effort to maximise the quality of services available. There are quarterly provider forums for both service types and providers are actively encouraged to help shape the agenda for the meetings so that they are useful and provide a valuable source of information. Over the coming year a tender exercise will be undertaken for all home care and crisis intervention services commissioned by the local authority. The current contracts for these services are due to come to an end in January 2020 and work has already begun to look at how they could be remodelled to ensure they best meet the need of both the local authority and its service users. The Commissioning team are also working to produce information and advice packs for service users to help them navigate the adult social care system. The packs will contain information on a wide range of subjects including the assessment process, services, safeguarding, end of life care and the financial assessment process.



Partnership Priorities for 2018/19 10

The Board regularly considers the work of the SAB in light of the changing context of health and social care nationally and locally and of other partner organisations, emerging risks and financial pressures. The Board recognises the need to have oversight of safeguarding practice to ensure that quality of care is not compromised. The SAB has a role to play in supporting the workforce across the partnership, ensuring that they have the skills and competencies to fulfill their roles.

The Safeguarding Adult Board priorities for 2018/19 are set out below. These are incorporated into the SAB's strategic plan and committee work plans

Awareness raising of safeguarding with the wider community and advice on how to report concerns

Ensuring 'Making Safeguarding Personal' is embedded in practice Supporting professionals in undertaking mental capacity assessments

Joint learning from SARs, DVHRs and other reviews

Increase knowledge of safeguarding among wider groups of professionals in partner organisations Ensuring links between safeguarding, domestic abuse and domestic violence practice Risk in relation to discharge of vulnerable people from hospital into community settings and back home

Healthwatch

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When engaging with the public,
Healthwatch ask specific questions
depending on the area of service we are
inquiring about. We have found, that unless
direct requests or issues are raised, people using services don't speak about
safeguarding matters to us.

The most likely scenario where safeguarding issues might get raised is during Enter and View visits at services like care/nursing homes.

From the visits undertaken by Healthwatch over the last year, the feedback and observations that have emerged haven't raised any safeguarding matters however, some areas of services where standards could be compromised, could lead to preventable and potentiated safeguarding concerns if not raised early and addressed.

We are aware through our involvement with quality surveillance, that health and care monitoring teams working with CQC inspectors and the local authority are scrutinising services and acting on safeguarding concerns.

This provides us with insight and an opportunity to raise issues about services, with officers who have the legal powers to investigate safeguarding issues that are raised through their processes and impose remedial actions to prevent safeguarding events occurring.



Further Safeguarding Information

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For further information about safeguarding and information about the Safeguarding Adults Board please use the following link

https://www.lbbd.gov.uk/residents/health-and-social-care/adults-care-and-support/safeguarding-adults/safeguarding-adults-overview/

To report a safeguarding concern:

Adult Triage, Community Solutions
020 8227 2915
intaketeam@lbbd.gov.uk or safeguardingAdults@lbbd.gov.uk

Out of Hours Emergency Social Work Duty Team 020 8594 8356 adult.edt@nhs.net

In an emergency:
Call 999 and ask for the Police

Call 101 if you are worried but it is not an emergency.

