

HEALTH AND WELLBEING BOARD

8 December 2015

Title:	Barking & Dagenham Safeguarding Adults Board Annual Report 2014/15		
Report of the Independent Chair of the Safeguarding Adults Board			
Open Report		For Information	
Wards Affected: ALL		Key Decision: NO	
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Summary: <p>The Annual Report highlights the work of the Safeguarding Adults Board (SAB) between 2014 and 2015. It sets out the key achievements, work of the partners and future priorities and seeks to demonstrate how the Safeguarding Adults Board has improved the protection afforded to vulnerable adults in Barking and Dagenham.</p> <p>The report is published on behalf of the Board and its partners and is an opportunity to celebrate the achievements of 2014-15 and plan the year ahead. The report contains contributions from a range of organisations who are involved in safeguarding vulnerable adults in Barking and Dagenham.</p> <p>The Care Act 2014 was introduced in April 2015, and places the Board itself on a statutory footing, together with a new set of duties and powers to act when abuse or neglect of vulnerable adults is suspected. 2014/15 was a year of preparation for these important changes, and we have strengthened the governance arrangements of the Board and reviewed its priorities in order to meet these new statutory obligations, and this work is summarised in the Annual Report.</p>			
Recommendation(s) The Health and Wellbeing Board is recommended to formally receive the Annual Report, and to provide comments on its contents for the Safeguarding Adults Board to consider as it continues to develop its future plans.			
Reason(s): The SAB Annual Report provides an account of the performance of the local statutory			

safeguarding partnership, and it is important that it is considered by the Health and Wellbeing Board and the implications noted.

1. Introduction

- 1.1 The Statutory Guidance supporting the Care Act 2014 requires that local partners must co-operate around the protection of vulnerable adults at risk of abuse or neglect. Specifically, it requires that a Safeguarding Adults Board (SAB) be set up to oversee the strategy and processes that ensure that this takes place.
- 1.2 In addition, certain duties are conferred by the Guidance upon the Safeguarding Adults Board. These include a requirement to publish an annual report for each financial year. The report for 2014/15 is the subject of this paper, and is presented to the Health & Wellbeing Board for comment.
- 1.3 In Barking & Dagenham, the Safeguarding Adults Board has been established for some time, with arrangements in place for leadership by an independent chair. This complied with the statutory requirements, but nonetheless there was a considerable amount of activity in 2014/15 to prepare the Board for statutory status from 1 April 2015. This is set out in the Annual Report, together with accounts of the activity of partners and the Board's subgroups.

2. Structure of the Annual Report

- 2.1 This is the first Annual Report that has been drawn up by the Safeguarding Adults Board under its new statutory status, and it is recognised that the expectations will grow and develop as the Board matures. Following a foreword by the Independent Chair of the Board, and further introductory remarks, the Annual Report is structured so as to present an overview of Board's activity together with the activity of partner agencies (in particular the statutory partners). An account of the outcomes and recommendations from Safeguarding Adults Reviews undertaken during the year is also an important part of the Annual Report.
- 2.2 There is an overview of the Board's structure and governance, and a summary of the strategic plan which has been agreed in broad terms for the coming 18 months.

The Care Act 2014

- 2.3 To ensure that the raft of new duties introduced by the Care Act 2014 were being delivered, the Council operated a comprehensive Care Act programme, one workstream of which concerned the development of the systems and processes to support safeguarding activity, both operational and at strategy level. This included a review of the Safeguarding Adults Board, and was the principal focus of the Safeguarding Adults Board's work during the second half of the year, to establish revised working structures and practices that could facilitate the requirement for the statutory partners to engage with the Board.

The Board and its Supporting Groups

- 2.4 As outlined in the Annual Report, already strong relationships around safeguarding activity have been further supported as part of a streamlined structure which reduces the Board itself to the statutory partners (the Council, Police and Clinical Commissioning Group) and the chairs of the subgroups, with the wider partnership represented in the subgroup membership.
- 2.5 The Safeguarding Adults Board 2014/15 held development sessions for all Safeguarding Adult Board members to participate in and understand the Care Act's requirements and the statutory duty of partnership.
- 2.6 Several different models for the Board and its supporting structure were considered and the model chosen incorporated the views expressed by all the partner organisations on how to best reflect the needs of the locality. Through the supporting structure of standing sub-groups other organisations are fully engaged and contribute to the work of the Safeguarding Adults Board. The Board's subgroups are:
- Safeguarding Adults Review Group
(chaired by the Acting Divisional Director of Adult Social Care);
 - Learning and Development Group
(chaired by the Director of Nursing for North East London Foundation Trust);
 - Performance and Assurance Group
(chaired by the Deputy Director of Nursing, Barking & Dagenham, Havering & Redbridge Clinical Commissioning Groups).

3. Key Achievements for the Safeguarding Adults Board 2014-2015

Care Act Compliance

- 3.1 In addition to the work on structure, membership and governance outlined above, further work regarding Care Act 2014 compliance included the development of supporting materials were produced for frontline and managerial staff, including a list of all the "must do" safeguarding requirements of the Act, and a single checklist for all partner organisations to use to help them ensure their own compliance with the Act.
- 3.2 Commitment to the Board, and clarity about expectations, was supported by the development (and signature by each partner) of a Compact, expanding on the role of a member of the Board and the role of the agencies involved. On a practical level, work was supported by the re-agreement of an Information Sharing Agreement, which had been reviewed for Care Act compliance.
- 3.3 Training and development was undertaken to raise awareness of safeguarding and the new Care Act requirements was arranged on a multi-agency basis. 106 people from 8 organisations attended 17 training courses on safeguarding adults requirements as part of this process.

Public Awareness Raising

- 3.4 Work to raise the awareness of safeguarding issues included the continued use of the identifiable brand for promoting understanding of safeguarding. The 'iCare' Campaign was developed to raise the profile of vulnerable adults at risk of abuse to support concerns to be raised by local communities and professionals.
- 3.5 During the year, on behalf of the Board, the Council commissioned Healthwatch to undertake some survey work on the understanding of safeguarding, and particularly the reporting of suspected abuse. Highlights included 84% suggesting further information was needed, and 56% being confident of where to approach if abuse was suspected.
- 3.6 In part following this survey, it is acknowledged in the Annual Report that more activity on public awareness raising may be required in the year ahead, and that the previously strong levels of publicity work may have been reduced as the focus shifted to statutory compliance. This may also be reflected in a small drop in the levels of alerts seen during the year.

Deprivation of Liberty Safeguards

- 3.7 The report also describes the very substantial increase in the number of Deprivation of Liberty Safeguards applications, following what is referred to as 'the Cheshire West judgement' in March 2014. This is a pattern seen nationally, and is the result of a redefinition by the High Court as to what constitutes a deprivation of liberty and when the safeguards process needs to be adopted.
- 3.8 Prior to the judgement the Council was receiving an average of around 20 applications per year. Since April 2014, this has increased to an average of over 30 applications per month. In total 376 applications were received in 2014/15.

Partner Contributions

- 3.9 In addition to the general overview of Board level activity in the year, each of the major partners has set out their own activity over the course of 2014/15, and such contributions have been structured according to the Care Act's six principles of safeguarding, which are:
- Empowerment;
 - Prevention;
 - Proportionality;
 - Protection;
 - Partnership;
 - Accountability.
- 3.10 The partners which have included an account of their activity are: London Borough of Barking & Dagenham; Barking & Dagenham Police; Barking & Dagenham Clinical Commissioning Group; North East London NHS Foundation Trust; Barking, Havering & Redbridge University Hospitals NHS Trust; and National Probation Service and The Community Rehabilitation Company

- 3.11 As third sector representation on the Board under its old membership arrangements, a contribution has also been included from Carers of Barking & Dagenham, who remain represented on the subgroups of the SAB. Additionally, as local health and social care user champion, Healthwatch have contributed their perspective on local safeguarding systems and strategy.

4. Safeguarding Performance

- 4.1 The Annual Report summarises performance on safeguarding activity during 2014/15. In an appendix, a breakdown of the referrals received (those alerts which pass to the next stage of investigation) is provided.
- 4.2 In summary, for the year, the Council received and processed 1,367 alerts. 283 cases went on to the next stage of investigation ('referrals'). Whilst alerts remain comparable, albeit at a slightly lower level than in previous years, the rate of 'referrals' is comparatively low, with the average referral rate amongst comparator boroughs being 626.
- 4.3 The Safeguarding Adults Board has asked the Performance & Assurance Subgroup to work on understanding this pattern of alert and referral.

5. Safeguarding Adults Reviews

- 5.1 The Safeguarding Adults Board must also 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; or
 - Has not died but the Safeguarding Adults Board knows or suspects that an adult has experienced serious abuse or neglect.
- 5.2 Each member of the Safeguarding Adults Board must co-operate and contribute to the review. The recommendations of a Safeguarding Adults Review must be reported in the Safeguarding Adults Board's Annual Report.
- 5.3 Whilst the Safeguarding Adults Review requirements were not formally in place in 2014/15, one serious case review was held and concluded in early 2015, which is reported in the Annual Report under the title of a Safeguarding Adults Review.
- 5.4 The incident took place in June 2013, with the inquest held in July 2014 and the findings of the Safeguarding Adults Review being reported to the Board in March 2015. Although the review made a number of recommendations, it concluded that there was little that could have been done by any of the agencies to predict or prevent the incident from occurring. Recommendations are summarised in the Annual Report, and were focused on:
- training in suicide awareness and on raising concerns;
 - a review of approaches to carer distress in end of life care cases and related information sharing;

- a review of the effectiveness of the suicide/assisted dying policy by St Francis Hospice, which had already been undertaken by the time the review reported; and
- a recommendation to ensure that St Francis Hospice's safeguarding policy is in line with current pan-London guidance.

6. The Current Year

- 6.1 For the current year ahead, a more comprehensive Strategic Plan is under on-going development and iteration. It is based around six Strategic Objectives, which are the Safeguarding Principles from the Care Act guidance mentioned earlier, namely: empowerment, protection, prevention, proportionality, partnership, and accountability. In addition the theme around Care Act Compliance remains to ensure that systems continue to be bedded in during the year.
- 6.2 Amongst the systems to be properly established to support the operation of the Board are the performance and assurance process, which will ensure that a more systematic view of the operation of safeguarding and quality procedures is put before the Board.

London Safeguarding Adults Policies & Procedures

- 6.3 In particular, at the time of publication of this report, the Borough still awaits the publication of the London Safeguarding Adults Policy & Procedures which will be adopted to govern the local approach to managing safeguarding referrals and investigations.
- 6.4 Based on early drafts, and past practice, the essential processes for handling alerts and investigating them are already in place, but it will be an important programme of work for the coming months to ensure that when they are issued (expected December 2015), they are swiftly localised and implemented, and the workforce trained on their implications. Provisional plans are already in place for this, and the Safeguarding Adults Board and its subgroups are aware of the work that they will need to undertake in order to ensure that the procedures are effectively put into operation.
- 6.5 A Safeguarding Adults Review has been instituted into the death of a service user, and the report is due for consideration by the Safeguarding Adults Board imminently. The review followed the draft London procedures which had been issued for comment, in lieu of the finalised version.

Visibility of the Board

- 6.6 The Board has committed to raising its visibility over the coming year, as a means of continuing to promote the importance of reporting suspected abuse, and awareness of the systems by which it can be reported. The iCare campaign will be reinvigorated and relaunched.

6.7 The web presence of the Safeguarding Adults Board, together with important information on policy and procedure, will be improved.

7. Mandatory Implications

Joint Strategic Needs Assessment

7.1 In 2014, the Joint Strategic Needs Assessment outlined the priorities for the Safeguarding Adults Board as being:

- Improving the effectiveness of the Board.
- Putting the person at the centre of adult safeguarding by ensuring that their outcomes are met and that their views inform practice.
- Learning from serious case reviews.
- Raising public awareness of adult safeguarding.
- Improving understanding and appropriate use of the Mental Health Act and Deprivation of Liberty Safeguards.
- Working with the Children's Board to develop safeguarding strategies that recognize the safeguarding needs of vulnerable adults, children and young people, within families.

7.2 The Annual Report sets out progress which meets all of these requirements, albeit that some continue into the Strategic Plan agreed by the Board. Improving Board effectiveness is an on-going requirement, as is learning from any Safeguarding Adults Reviews. The importance of improving public awareness is acknowledged in this report. Work on Deprivation of Liberty Safeguards has been driven by the High Court ruling. Commitments are contained in the Strategic Plan around continuing to strengthen the relationship between the adults and children's safeguarding systems, and this is facilitated by sharing the Independent Chair between the SAB and LSCB.

Health and Wellbeing Strategy

7.3 Safe services, in which people have confidence that there are system to protect them from abuse and neglect, are effective services. For this reason, the SAB Annual Report sets out a programme of activity which will improve the effectiveness of the services described in the Health& Wellbeing Strategy to meet identified needs.

Integration

7.4 The Safeguarding Adults Board contributes strongly to the network of groups and forums which formally bring partners together for the improvement of services and the better delivery of outcomes for service users. Because the focus is, to an extent, on 'when things go wrong', it provides a powerful vehicle for joint learning across disciplines about how the care and support provided to residents can be improved.

8. Useful Documentation

The Care & Support Statutory Guidance, October 2014

<https://www.gov.uk/government/publications/care-act-2014-statutory-guidance-for-implementation>

9. Background Papers

None

10. List of Appendices

Appendix A - The Safeguarding Adults Board Annual Report, 2014/15