

Dudley Safeguarding Adults Board **Annual Report** 2014/15



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Executive Summary

Each year the Dudley Safeguarding Adults Board publishes an Annual Report which reports and reflects upon the board's activities over the past year. This is the executive summary of the Annual Report for 2014/15

Dudley Safeguarding Adults Board works to protect adults aged eighteen and over from neglect, harm or abuse. The board is made up of representatives from Dudley Council's adult social care team, West Midlands Police, Dudley Clinical Commissioning Group (CCG), Dudley Acute Hospital Trust, Dudley Fire Service, Healthwatch Dudley, Dudley & Walsall Mental Health Trust, as well as voluntary sector organisations.

These partners work together in a joined up way to ensure that they are protecting adults from across Dudley borough, as effectively as possible.

Dudley Council is the lead agency on the board and is responsible for investigating and decision making in all safeguarding cases, where there are concerns about any abuse, neglect or harm of adults. It is a complex and sensitive area of work, requiring close partnership working to ensure that no one slips through the net and that all people are protected from harm - particularly vulnerable adults.

The board ensures that all agencies work together to protect adults from abuse and indeed from the risk of abuse. It monitors the number of safeguarding referrals and information about the safeguarding assessments.

The board also provides information to organisations and agencies on national safeguarding situations and experiences - to improve local practice. As well as working to promote awareness of adult safeguarding and abuse, to prevent it from happening and to ensure that people know how to report issues or concerns.

The Care Act 2015

Over the year 2014/15 an important piece of new legislation was about to be introduced which has made safeguarding a far more visible and high profile issue. The Care Act 2014 was introduced by the government in April 2015 and much work went on in the year prior to this by the Dudley Safeguarding Adults Board to ensure that the board and its partners were fully Care Act compliant.

The Care Act provides clarity on the responsibilities of a Safeguarding Board, as well as making it a statutory requirement. It also defines exactly who the duty to safeguard applies to. This is defined in the Act as an adult who:

- Has needs for care and support (irrespective of whether the council is meeting these needs) and,
- Is experiencing, or is at risk of abuse or neglect and,
- As a result of their care and support needs is not able to protect themselves from either the risk of, or the experience of abuse or neglect.

Abuse as defined in The Care Act can include:

- Physical abuse
- Emotional/psychological abuse
- Domestic violence
- Sexual abuse
- Financial abuse
- Modern slavery
- Discriminatory abuse
- Organisational abuse
- Neglect and acts of omission
- Self neglect

The Safeguard 'threshold'

- In 2014 a new pathway for safeguard referrals was introduced which incorporated a 'safeguard threshold'. This means that there is now a formal agreed criteria for whether or not a reported issue or concern needs to be investigated any further. This decision is made by a senior social worker. If an issue does meet the new threshold then it follows a new 'pathway' which fully involves the victim and/or their carer - if they have one.
- The council's adult social care team also during 2014, developed a team specifically to support people who are 'at risk.' This is in recognition that not everyone meets the safeguard threshold but still requires support to live a life free from abuse and neglect.

Key focuses 2014/15

Throughout the year the board worked hard to implement their 2014/15 business plan which focused around six key principles - empowerment, prevention, proportionality, protection, partnership, accountability. Each of these six areas has been the key areas which have been focused upon.

Empowerment

The board have worked hard to ensure that victims of abuse and carers are providing information on what they want to achieve from their own safeguarding investigations. They are providing information on their own experiences and this is being taken on board. The board signed up to the 'Making Safeguard Personal' project which aims to ensure that views of victims are captured throughout safeguarding episodes.

The role of advocates is also being promoted to make sure that people are being supported throughout the safeguarding process. Advocacy services are now asked to help at a much earlier stage in the safeguard process and are now fully involved in the decision making process.

Work has also gone on to promote the issue of adult safeguarding and to ensure that people are clear as to what abuse is and how to report it. A new safeguarding website was launched in April 2014. This contains lots of information on both adults and children's safeguarding, along with a 'Report it' button. Throughout 2014 1050 alerts were received via the website.

Protection

The board has worked hard to make sure that Mental Capacity, Best interest and the Deprivation of Liberty are central to the safeguarding process.

A Supreme Court Judgement in March 2014 had a big impact on the number of people in hospitals and care homes who may be deprived of their liberty in their best interests and need a 'Deprivation of Liberty' order. The board has held meetings with care homes who have reviewed their care plans of residents to make sure they are using the least restrictive practices and have requested Deprivation of Liberty Safeguard orders for people who they felt met the new criteria.

Mental Capacity Act training has been delivered to two hundred members of staff and an action plan to raise the awareness of 'Best Interest' has been formulated.

The board has been identifying repeat safeguarding concerns and emergency themes from safeguarding issues in line with the Winterbourne View recommendations (Winterbourne View was a private hospital where people with learning disabilities were widely physically and psychologically abused by staff up to 2011. A serious case review took place as a result and was published by the Department of Health which cited many recommendations to avoid any repeats of this type of abuse in any organisation).

Prevention

The focus here through 2014/15 has been on the promotion of safeguard training to a much broader audience, to raise awareness on how abuse can be prevented. Along with these efforts has been work to promote safer recruitment of people in 'positions of trust'. The board has been keen to learn lessons from case studies and nationwide serious case reviews.

A whole range of tailored safeguarding awareness training courses have been provided over the past year to all sorts of groups and organisations across Dudley borough. The board was even asked to provide training to a local building society and to the Diocese of Worcester.

Three multi-agency practice learning events were held in 2014 where serious case reviews were considered and assessed. These were learned from and communicated through each agency.

Proportionality

Threshold training was provided to operational staff to make sure that there is an understanding of what actually constitutes a safeguarding issue. This will mean that people will be confident about reporting a safeguard issue and will eliminate unnecessary reporting.

It was also agreed that all of the board partners will immediately contribute staff and information to assist a safeguarding investigation. This will then be able to be conducted in a timely and proportionate manner.

Methods of restraint have also been identified and recorded to protect adults at risk and shared with local services and organisations. A Department of Health report called 'Positive and safe' was produced in response to the Winterbourne review where the incorrect use of restrictive practices was identified. Research showed that organisations are often unsure about the correct use of restrictive practices, with some services relying too heavily on the use of restraint. Guidelines have been produced for services which were shared with all borough wide organisations.

Partnerships

To meet the now statutory requirements of The Care Act the board consolidated its footing amongst partners.

The board also extended its wider partnership working with children's services, community safety, health and wellbeing services, health workers and councillors.

Board members were also asked over the period to commit additional financial and manpower resources to the board itself. This is to support the increased efforts in training, promotion and prevention work that the board has committed to deliver.

It is recognised that the financial pressures facing Dudley Council will impact considerably on the availability of resources and manpower and the board members have been regularly advised about this throughout the year especially when it has impacted upon the ability to deal with safeguard concerns within the borough.

Accountability

The board has asked for real assurances from all organisations across Dudley borough to recognise their responsibilities for safeguarding - as now laid down in the new Care Act. This has meant sometimes scrutinising incidents which have occurred in partner's settings.

The board also established a serious adult review panel which has begun to collect information and performance data to analyse information relating to specific serious incidents. Learning is shared and lessons are learned to ensure that people subject to abuse receive timely support from organisations.

Further training has been identified to meet competence levels required to properly and fully address safeguard concerns.

Performance Data

A full breakdown of safeguarding incidents can be found in the complete annual report.

- In summary, 1,713 adult safeguarding incidents were reported between 1 April 2014 and 31 March 2015. Of these 726 (42.4%) were carried forward through the safeguarding process as referrals.
- The majority of these were for females (59.8%), the majority being in the 85 plus age group (35.7%).
- The majority of these incidents took place in the victims own home (46.1%).
- The abuse category neglect and acts of omission was recorded as the highest proportion of all incidents at 29.5%. If all neglect categories are combined this increases to 43.7%.
- The number of completed referrals (where all investigations have been completed and an outcome agreed) was 567. The majority of these were either fully or partially substantiated.

Message from our independent Chair

Welcome to Dudley Safeguarding Adult Board's annual report for 2014/15.

A major piece of legislation, The Care Act 2014, now provides clarity on the responsibilities of a safeguarding board and determines precisely how we undertake our safeguarding duties. It is important that anyone reading this report is aware of how The Care Act has now defined what we must achieve and how we must achieve it.

The duty to safeguard applies to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and
- is experiencing, or at risk of, abuse or neglect and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect

Abuse can include

- Physical Abuse
- Emotional /Psychological Abuse
- Domestic Violence
- Sexual Abuse
- Financial Abuse
- Modern Slavery
- Discriminatory Abuse
- Organisational Abuse
- Neglects and Acts of Omission
- Self-Neglect

How we deliver safeguarding services is of the utmost importance. Here across Dudley Borough we strive to ensure that all agencies engage with the person in need of safeguarding in a way that he or she is able to be involved and they can then exercise choice and control. By making safeguarding personal we actually listen to what people want and actually do what they ask. This way of working is the right thing to do but it must be recognised that it can also give rise to challenges when unwise decisions, particularly with regard to self-neglect can leave people vulnerable.

The Care Act also gives Safeguarding Boards a legislative footing for the first time, a most welcome development. There are requirements in respect of membership and role. It pleases me to report that Dudley's Safeguarding Board meets the requirements of the Act and has done so for several years.



The attendance and contribution of constituent agencies has improved even more during the past year. Partners both support each other and hold each other to account in respect of safeguarding practice. One such example of holding to account was when the board sought assurance from Russell's Hall Hospital about allegations of unlawful restraint made in the national media. The resultant report, which in the event found no evidence of such practice, was published in September 2014 and can be found on our website.

The Care Act sets out three core duties for a Safeguarding Board. The first two relate to the publishing of a strategic plan and annual report. The third states that we must conduct a Safeguarding Adult Review (SAR) when

- An adult dies as a result of abuse or neglect, whether known or suspected and there is concern that partner agencies could have worked more effectively to protect the adult.
- An adult has not died but serious abuse or neglect is known or suspected.

The purpose of such reviews is to promote effective learning and improvement activity to prevent future deaths or serious harm occurring again. To ensure that Dudley would be in the best position to discharge its responsibilities to undertake SARs when necessary, we developed a SAR sub group of the board.

Dudley Safeguarding Adults Board is not alone in working to keep adults safe and well. The Health and Wellbeing Board and Safe and Sound, Dudley's Community Safety Partnership both play vitally important roles in promoting health and reducing the risk of harm. Likewise the Safeguarding Children Board has a mutual agenda particularly in respect of issues affecting those making the transition from childhood to adulthood. Domestic abuse, substance misuse, mental health, sexual exploitation and radicalisation all need to be managed in a cohesive and integrated way. It is important that each board works closely and constructively with each other to achieve the best for those people in Dudley who require our support.

During the year, Andrea Pope Smith retired from her post as Director of Adult, Community and Housing Services in Dudley. Her contribution to safeguarding and the safeguarding board in Dudley were first class. Likewise Beryl Nock, who represented Age UK on the board, stood down during the year. She too was a valuable contributor. I wish them both all the best for the future.

Dudley Council has made a number of key appointments over the last year and now has a new Chief Executive, a new Director of People and a new Chief Officer Adult Social Care. Sarah Norman, Tony Oakman and Matt Bowsher will collectively and individually be a huge influence on safeguarding in Dudley. I wish them every success.

Looking to the future, there are undoubtedly going to be unprecedented challenges in delivering safeguarding services. Ever increased demand at a time of public sector funding cuts and resource reductions will necessitate new and innovative ways of working. It will be the responsibility of Dudley Safeguarding Adults Board to both promote more effective partnership working and challenge individual agencies when necessary. My role as Chair of the Board is to independently ensure this is robustly undertaken.



Roger Clayton Independent Chair Dudley Safeguarding Adults Board October 2014

About Dudley Safeguarding Adults Board

The board

The Safeguarding Board works to protect adults who may be being neglected, harmed or abused, or are at risk from these things.

The board is well established with wide senior representation from Dudley Council, West Midlands Police, Dudley Clinical Commissioning Group, Dudley Acute Hospital Trust, Dudley Fire Service, Dudley Probation Service, Healthwatch Dudley, Dudley & Walsall Mental Health Trust, the Black Country Partnership Trust, voluntary sector agencies and providers.

Safeguarding needs to operate on a number of levels across a range of organisations to be effective - it is recognised that safeguarding has to be everyone's business.

Who is an adult at risk?

The Care Act 2014 describes an adult at risk as someone who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs)
- Is experiencing or is at risk of abuse or neglect and;
- As a result of those needs is unable to protect him or herself against the abuse or neglect or the risk of it. This definition is now adopted by partners of Dudley Adult Safeguard Board.

The board works to protect people in a variety of ways

- It develops policies and procedures so that organisations work together to protect adults at risk and prevent abuse.
- It monitors how abuse is dealt with and works to improve how this is achieved.
- It provides information to agencies on national situations to improve local practice
- It seeks to promote awareness of abuse to prevent it from occurring.

How to report a concern that someone is or may be being abused

We continue to work hard to make sure that everyone within Dudley borough is aware of our reporting procedure.

The Department of Health "No Secrets" document states "there can be no secrets and no hiding place when it comes to exposing the abuse of adults at risk".

We continue to have a central contact number where anyone (member of the public or professional agency) can report any concerns they may have. This number is the councils Access Team (0300 555 0055). Alternatively there is a safeguarding website: www.safeguarding.dudley.gov.uk which provides information on how we work to protect adults, along with an online reporting tool.



The safeguarding process

When a call is made to the Access Team regarding a safeguarding concern, the information is collated and a senior social worker and manager agree whether it meets the 'safeguard threshold'.

In 2014 a new pathway for safeguard referrals was introduced with the aim that the most appropriate team dealt with the issues. The referrals that meet the threshold are passed to the appropriate teams.

A strategy meeting or discussion takes place and a qualified social worker or other professional best placed 'to deal with the issue' will investigate and produce a report for a case conference.

This ensures that any abuse is reported to all agencies involved in the situation.

A plan to protect the person concerned will then be developed with all actions planned to assist with this being documented. The victim and/or their carers are always invited to the case conferences to receive this information.

In 2014 the Council's adult social care division developed a team specifically to support people who are "at risk" recognising that not everyone meets the criteria for specific service thresholds but requires support to live a life free from abuse and neglect.

The safeguarding team within the council is made up of one team manager, two assistant team managers, minute takers and a board administrator. The managers receive the cases which meet the safeguard threshold and ensure that the appropriate teams then receive them. They subsequently chair some of the safeguarding meetings, provide support to staff and work with colleagues to ensure that protection plans are established and actioned. They contribute significantly to the operational partnerships that are reflected strategically within the board, alongside other team managers and administrative staff within other adult care teams who also carry out this safeguarding process.

The safeguard board has been advised when the pressure of the numbers of people referred has meant there has been a delay in dealing with the issues presented.



The National Context

The Department of Health published a "statement of government policy" on Adult Safeguarding in May 2013.

This document set out six safeguard adult principles for boards to consider:

- **Empowerment**
- **Prevention**
- **Proportionality**
- **Protection**
- **Partnership**
- **Accountability**

Dudley decided to use these principles as the focus for their 2014/15 business plan.

The Care Act 2014

In 2014 the board focused on ensuring that it was ready for The Care Act implementation which came into effect in April 2015.

The main changes included:

- Adult Safeguard Board becoming statutory
- The development of a Safeguarding Adult Review (SAR) panel to hear cases where an adult with care and support needs had died in its area of abuse or neglect, whether known or suspected and there is concern that partner agencies could have worked more effectively to protect the adults.
- Adults Safeguard Boards will be expected to produce an annual report and a business plan. Within Dudley all these elements were part of the Adult Safeguard Board but the Care Act consolidated the practices in place.

Deprivation of Liberty Safeguarding (DoLs)

In 2014 two events significantly affected the Deprivation of Liberty process. The House of Lords Post Legislative Scrutiny Committee on the Mental Capacity Act 2005 published a report which concluded that the DoLs were not "fit for purpose". A few days later a Supreme Court judgement (known as Cheshire West) overturned the definition of the meaning of what it is to be deprived of ones liberty, by broadening the scope. This has led to a sharp increase in DoLs cases and in 2014 local authorities struggled to cope with the numbers required. This has led to a review of the Deprivation of Liberties in 2015.

Each local authority safeguard board had oversight of these issues and local authorities had to provide additional resources to this statutory process.



How we make a difference

Our business plan for 2014, as indicated earlier focuses its work plan around government policy on safeguarding which is based around six principles.

1. Empowerment

What did we say we would do?

- Ask victims of abuse or their carers to provide information on the outcomes they want from safeguarding and feed back their experiences.
- Promote the role of advocates to ensure people are supported throughout the safeguard process.
- Ensure that vulnerable adults are clear about exactly what abuse is and how to report it.

What did we do?

- In June 2014 Dudley & Walsall Mental Health Trust, Healthwatch Dudley, Black Country Partnership and Dudley Clinical Commissioning Group collectively, on behalf of the board, committed to participate in a national survey to interview victims of abuse. This project demonstrated issues about the mental capacity of victims to participate and the importance of the timeliness of asking victims about the process. This information has contributed to the 'Making Safeguard Personal' project. This aims to ensure that wherever possible the views and desired outcomes of the victim of abuse are captured and recorded throughout the safeguard episode to ensure a more personalised approach. Dudley signed up to this project in September 2014 and started work under the policy and implementation sub group of the board to capture this information electronically at various stages of the safeguard process to ensure that it is fully person centred



- The community safety team extended its annual consultation event to include organisations that support vulnerable adults and identified priorities that were important to those groups such as hate crime.
- Partnerships with children services continue to identify processes within domestic abuse to identify and support vulnerable adults and provide training for practitioners to ensure that victim's outcomes are considered within the support process.
- The board received a report from Dudley Advocacy Services concerning the referrals received in relation to adult safeguarding. One hundred and ten cases were referred in advocacy of which fifty-one represented either safeguarding or deprivation of liberty issues from March 14 to April 15. Advocacy services indicated that they are asked to contribute at a much earlier stage in the safeguard process in comparison to previous years and are involved more fully in the decision making process.
- Advocacy services worked closely with Dudley Group NHS Foundation Trust to ensure that patients receive appropriate support in expressing safeguard concerns and other issues within the hospital setting. The benefits of this are huge, people feel empowered throughout the safeguarding process and become involved at a much earlier stage.
- April 2014 saw a new safeguarding website launched. This was a fully integrated website covering both adults and childrens' safeguarding. This followed a three month consultation with children, adults and a number of agencies. The consultation asked these groups what information they would find useful on the website. The request for simple explanations including links on abuse, physical, emotional, sexual and neglect were provided with links to other websites and resources.

The consultation asked groups how they prefer to access the information and report a concern, 85% of those who completed a survey said they would use the 'Report It' option which continued to be used from the previous website. The number of "Report It" alerts made is monitored monthly and changes have been made in the year to enable people to save their documents. This was requested in the comments made via the website. Each month comments are recorded and noted to ensure the service remains efficient. From April - December 2014, 1050 alerts were received via the website.

Case Study

Advocacy services became involved in a case in which a lady with a learning disability still received financial support for care and support services from the local authority where she had previously lived. This local authority wished to move her back to receiving their care and support services. The lady was not happy with this. Advocacy Independent Mental Capacity Act advocacy service fully supported her and a capacity assessment was undertaken where it was clearly agreed that the lady had capacity to make the decision. Her care and support service provision remained in Dudley borough, as she wished.



Challenges for 2015-16

- To monitor 'Making Safeguard Personal' outcomes introduced in April 2015 to ensure that we are listening to the victims voice and developing support which is relevant to the desired needs
- To ensure that transition arrangements between children and adult services and other partners is well evidenced and empowers the young person and their carer by hearing and listening to what they have to say.

2. Protection

What did we say we would do?

- Demonstrate that Mental Capacity, Best Interest and the Deprivation of Liberty are central to the safeguarding process.
- Ensure agencies are applying the safeguarding procedures within their workforce.
- Identify repeat safeguarding concerns and emergency themes from safeguarding issues in line with the Winterbourne recommendations.

What did we do?

- The Supreme Court Judgement in March 2014 had a significant impact on the number of people in hospitals, residential and nursing homes who may be deprived of their liberty in their best interests and require a Deprivation of Liberty order. The board was advised of these changes so that agencies were made aware of this, and several meetings were held with residential and nursing home managers in 2014 organised by West Midlands Care Association. These homes responded by reviewing the care plans of residents, ensuring that the least restrictive care was put in place, and requesting Deprivation of Liberty Safeguard orders for those who they felt met the new criteria.
- In October and November 2014 Dudley Council's adult social care staff delivered threshold training to operational staff and their managers, which reiterated the issues about mental capacity and how it impacted upon safeguard decision making.
- Black Country Partnership Foundation Trust delivered Mental Capacity Act training for two hundred staff between September 2014 and January 2015. The Trust also developed an action plan for its organisation to raise awareness of 'best interest decision making' to ensure their documentation reflected mental capacity assessments.
- Dudley Group Foundation Trust appointed a lead nurse for learning disability to support patients, and to ensure mental capacity and best interest decisions were reflected in their practice.

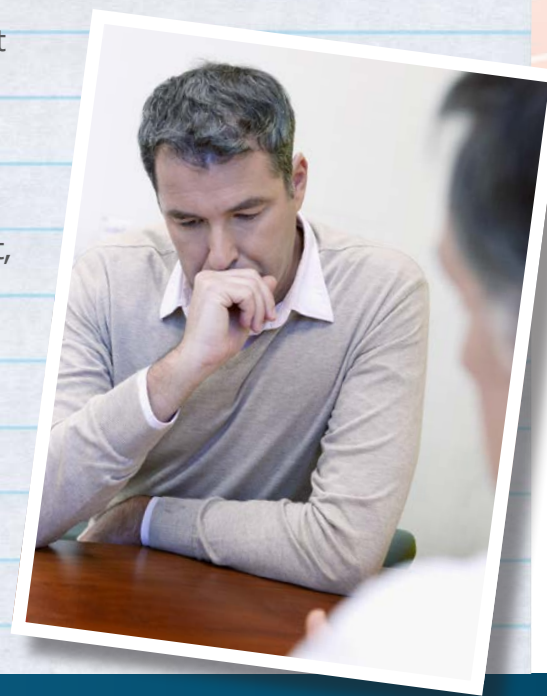
- Dudley & Walsall Mental Health Trust undertook internal audits to ensure their documentation recorded that staff had carried out Mental Capacity Act assessments and Best Interest assessments, both within the community and in hospital settings. Hospital settings also record a Deprivation of Liberty Safeguards (DOLS) checklist as part of inpatient documentation within the Trust.
- The police vulnerable adults website gives frontline staff access to a knowledge base involving the safeguarding of adults particularly where the person lacks capacity.

Case Study

A 57 year old gentleman with known severe learning disabilities had repeated admissions into hospital due to a long-standing bowel condition.

He became very distressed at each admission. The learning disability nurse liaised with surgeons and co-ordinated a best interest meeting as the man lacked capacity to make decisions about his treatment, but clearly indicated his distress about his health and his frequent hospital stays.

The meeting agreed that a good alternative was community based treatment and the gentleman returned home with support and an ongoing treatment plan



- In 2014 the Department of Health published guidelines alongside the six principles, upon which the business plan was based to help them to develop and assess the effectiveness of their own safeguard arrangements.

The Independent Chair of the Board felt that Dudley Safeguarding Adults Board should prepare for The Care Act 2014 implementation and use a toolkit to offer assurance to the board based on these guidelines. Eight board agencies were asked to complete this process:

West Midlands Police

Dudley Council childrens services

Dudley Council adult social care

Dudley Clinical Commissioning Group

Dudley Group of Hospitals Foundation Trust

Black Country Partnership Foundation Trust

Dudley Council community safety

Dudley & Walsall Mental Health Trust

All agencies completed this task and a programme of peer audit was arranged for June 2015.

- To monitor repeat safeguard concerns Dudley Council produced monthly records of commissioned services where safeguard cases had occurred and collated that information with previous months. Dudley Clinical Commissioning Group also developed a similar approach within their healthcare forum.
- This information was shared at bi-monthly multi-agency meetings alongside any other concerns from other agencies. In 2014 several domiciliary and residential care providers were subject to ongoing complex multi-agency safeguard meetings, where the service as a whole was scrutinised. Improvement plans were developed around issues such as supervision of staff; improvements in care plan recording; and training programmes. These plans were monitored over several months until evidence of consistent improvement was noted.
- 2014 saw a task and finish multi-agency group work on the principle of restraint, identifying good practice developing nationally since Winterbourne view recommendations. This document will be reported to the board in 2015.



Challenges for 2015-2016

- The partner agency assurance process shared in 2015 will promote the development of multi agency audits to confirm the assurances given to the Safeguarding Board.
- Repeat concerns will continue to be monitored and information shared robustly with the Care Quality Commission and partner agencies in 2015
- Sharing of practice which recognises issues of mental capacity that protects and empowers vulnerable adults to live the life they choose, or would have chosen, will be monitored. The role of advocacy services consolidated within this process will also be monitored as indicated in the business plan for 2014-2015.
- The financial pressures upon the Council and impact of the number of referrals received means that the biggest challenge is to ensure that services adapt to this and look for support to protect the vulnerable adult



3. Prevention

What did we say we would do?

- Promote broader uptake of safeguard training to raise awareness of how abuse can be prevented.
- Promote safe recruitment in the workforce and procedures that deal with people in positions of trust.
- Learn lessons from case studies and national serious case reviews

What did we do?

- A raft of training courses and sessions has been delivered over the past year, to raise the broad awareness of adult abuse and of the role that safeguarding plays. These have included:
Dudley Council's adult social care teams delivering bespoke training packages to Healthwatch Dudley, tenants and residents associations, Glasshouse College staff, Pocklington Trust volunteers and Woodside Day Centre.
Bespoke 'Keepsafe' sessions presented to Dudley Asian Elders Group and Parkinson's societies.
'Who is after your money' training delivered by trading standards to tenants and residents associations, as well as a local building society
Safeguard training given to Diocese of Worcester Church of England establishments across Dudley borough
Further promotion of E-learning safeguarding training. Take up has been pleasing particularly across the council's access and prevention teams.
The level of training delivered illustrates our borough wide commitment to safeguarding. It was greatly encouraging that a local building society and the Diocese of Worcester approached us for support in safeguarding awareness and developed further the prevention agenda complimented upon by the peer reviewers in 2014.
The support and learning sub-group of the board met throughout the year and managed the training strategy for the board ensuring that partner agencies were able to work together to achieve the desired outcomes.

The Safeguard Consultant has contributed hugely to the consistent and professional multi-agency training provided, alongside dedicated colleagues from Black Country Partnership Foundation Trust and Trading Standards.

Sound bite:

"This was one of the best courses I have attended. It was extremely well delivered and the facts and figures about financial abuse really made me think. I will be much more aware from now on and will cascade the information to my clients and colleagues."
Regarding "who's after your money" course

- Dudley Council updated its safeguarding leaflet to ensure it is Care Act compliant and continued to promote the need to prevent abuse by defining who is an adult at risk, what is safeguarding and types of abuse.
- Dudley & Walsall Mental Health Trust implemented a competency framework that clearly outlines roles and responsibilities and expected knowledge. Other agencies were issued with this document in 2014 to develop their training model for safeguarding.
- Dudley Clinical Commissioning Group (CCG) continued to develop its training programme for G.P. practices throughout the borough to raise awareness of the wider safeguard issues. Monthly safeguarding news and practice have been developed by the CCG in 2014 to disseminate safeguard issues, information and publications to practitioners to keep them updated about recent safeguard developments.
- The Children's Safeguard Board continued to develop multi-agency training. Domestic abuse awareness, child sexual exploitations, forced marriage and honour based violence courses providing updates for staff and helping staff recognise signs of abuse and support for victims.
- In 2014 Dudley Group NHS Foundation Trust revisited its training protocol after board scrutiny of particular cases and monitored its staff training throughout the year. It delivered an E-learning programme for its staff, a safeguarding adult's forum and joined the council in its practice learning events. It concentrated on Mental Capacity Act training to ensure staff were reminded of their responsibilities and became a "champion" in delivering appropriate support to people who have a learning disability and are admitted to hospital.

Safer Recruitment

- The board received an update to refresh its safe recruitment practice amongst its partners in 2014. This included information about volunteers which agencies considered in their assurance work, a more rigorous relevancy test for disclosure of information by the Police and information about the Disclosure and Barring (DBS) update service.
- West Midlands Care Association improved the DBS service to commissioned services in 2014 by receiving approval from the Home Office to receive DBS checks electronically. This improved both the standard of information on referrals and the timescales services had to wait for clearance regarding staff appointments.
- Board partners had to review their agencies safe recruitment practice as part of their responsibility for the assurance work required in 2015. This work extended to checks on volunteers and contractors used by services.
- Position of Trust concerns were also monitored in this assurance framework process. The council's adult social care division took lead responsibility to co-ordinate multi-agency meetings regarding people who were alleged to have abused their position of trust and monitored that the appropriate action was taken and referrals to DBS scheme made as required. They also met with regional leads to consider a position of trust document for the West Midlands which was to be produced after the Care Act implementation in 2015

Learned lessons from National Serious Case Reviews

- The Council's adult social care division held three multi-agency practice learning events in 2014. Eighty-nine staff from various agencies represented on the board attended the training. Three serious case reviews were considered which included:

A young woman from Warwickshire who was killed in August 2010. The five people charged with murder/manslaughter she had considered as her "friends". The event looked at transition arrangements within Dudley when people reach eighteen looked at the recording of mental capacity and risk assessments and the resources we have across Dudley borough to address 'mate crime'.

A 40 year old woman from Nottinghamshire with physical disabilities who had mental capacity to make decisions regarding her treatment and care but sadly died from a massive sepsis leading to multiple organ failure. This case explored how as professionals we need to question a 'climate of optimism' and how capacity for specific decisions is considered and recorded.

The board received copies of the serious case reviews to share within their agencies.



Challenges for 2015 -2016

- 2014 has seen the start of engagement with wider groups. The Care Act brought new definitions of what constitutes safeguarding into the public arena, such as self neglect and domestic violence. 2015 sees the challenge to continue to provide safeguard information to hard to reach groups.
- To ensure that communication of new elements of The Care Act, such as self neglect; domestic violence, advocacy and mental capacity are embedded in training and within partner agency responses to safeguard matters.
- A challenge for 2015 remains the increase in the number of alerts made to the safeguarding teams which has clear implications for people's safety and wellbeing. As public awareness of safeguarding increases so does the number of referrals and alerts. Waiting lists, response times and the application of the safeguard threshold are key challenges and the board must work hard to manage demand effectively and provide an efficient and responsive service at all times.

4. Proportionality

What did we say we would do?

- Provide threshold training for operational staff and decision makers to ensure a consistent response to dealing with safeguard alerts; so that individuals will be confident that professionals will work for their best interests and will only get involved as much as is needed. This challenge arose out of the Peer Review Action Plan in 2013 -14 where it was queried whether too many cases were being considered under safeguarding resulting in no evidence to proceed. The training has improved the proportion of cases that don't progress through the safeguarding process. Between October and December 2014 51.6% of cases weren't progressed and between January and March 2015 this has risen to 56.5%.
- Partners will contribute personnel and information to assist a safeguard investigation which will be conducted in a timely, proportionate manner.
- Local services to identify and record methods of restraint used to protect adults at risk.

What did we do?

- To understand the issues around applying the threshold training a task and finish group met in 2014 to consider threshold application and plan training. The information from this group was then considered by the policy and implementation sub group and the training planned.
- Training was delivered to council managers and senior social workers who have responsibility, as the lead agency in safeguarding, to make threshold decisions. These courses were organised in October and November 2014 and fifty staff were trained. The outcomes for this training will be reflected in 2015 where it will be considered whether more situations are signposted elsewhere outside of safeguarding to ensure a proportionate response to issues as appropriate.

- In preparation for The Care Act, multi agency training was given at the board to consider the requirements; one being the need for other agencies to lead on safeguard investigations. Already evidence suggests that this is strong within the partnership in Dudley and ensures that the response is proportionate and the agency best placed to investigate does so. Examples include:

Dudley Group Foundation Trust regularly investigate incidents that have allegedly occurred within its wards and report back to safeguard managers.

Dudley Clinical Commissioning Group reports back to safeguard managers about pressure sore care, medicine management

Dudley & Walsall Mental Health Trust undertake all their investigations and report back any concerns to the Head of Adult Safeguarding or Care Quality Commission liaison meeting as appropriate.



- Dudley Council's commissioning service, contributes regularly to the monitoring of commissioned services, monitor staffing levels, training opportunities and safer recruitment to contribute to safeguard investigations.
- It is recognised that The Care Act places this partnership on a legal footing and it is anticipated that the partnerships will be strengthened through this legislation; despite the financial and staff resource implications this will bring.

Case Study

A lady was admitted to a hospital emergency department; from there a safeguarding alert was made to the police and the council. The lady was then admitted to a mental health hospital.

A strategy discussion subsequently took place between the manager of the hospital ward, the police and the council adult and childrens services head. All agreed that the police would complete the criminal investigation enquiries; a referral to advocacy was made, a referral to mental health services to allocate domestic abuse worker and the police agreed to jointly interview the lady, taking into account her mental health and capacity.

A domestic abuse risk assessment was also completed. In addition a refuge placement was found for the lady, at her request and her GP informed. Subsequently a police prosecution made.



- As indicated earlier the safeguard board commissioned a task and finish group in 2014 which looked at the Department of Health guidance on a two year initiative entitled "Positive and Safe". This was in response to the Winterbourne review where the misuse of restrictive practices was identified. A subsequent Care Quality Commission inspection of nearly 150 learning disability in-patient services found providers were often uncertain about the use of restrictive interventions with some services have an over-reliance on the use of restraint.

The paper developed provides guidelines for services to promote positive behaviour support and puts in place a process to inform service commissioning about any restrictive interventions used. This work will be completed in 2015 and presented to the board and commissioned services will be informed about its implementation. This will continue to strengthen the learning from Winterbourne and demonstrate proportionality in response to safeguard concerns within the workforce.



Challenges for 2015/2016

- Each agency is to adopt 'making safeguard personal' to ensure that when leading on an investigation it is person centred and considers the outcomes the victim has expressed and is a proportionate response.
- Staff resources across all agencies will continue to pose a risk to the multi-agency partnership and the ability to investigate safeguard concerns.

5. Partnerships

What did we said we would do?

- Meet the statutory requirements outlined in The Care Act. The board will consolidate its constitution, memorandum of understanding and information sharing protocol with its partners.
- Board members to ensure that the wider partnership with children services, community safety, health and wellbeing, health workers and councillors remains priority for its members.
- Agencies will consider their financial contributions to support the work of the board in its training, promotion and preventative work.

What did we do?

- The board considered a constitution, memorandum of understanding and information sharing protocol which was developed in 2014 in preparation for The Care Act.
- These documents will be considered in 2015 and a register kept for board partners.
- Partnership with children services was extended in 2014 with a joint protocol developed with community safety for the Health and Well-being Board.
- Work with Multi-Agency Risk Assessment Conference (MARAC) was extended and adult safeguarding team managers attended fortnightly meetings to ensure victims of domestic abuse were protected in a multi-agency setting together with children and mental health services and other partners from the West Midlands Probation Service and the police.
- The children and adult safeguarding trainers met to ensure that both sets of safeguard procedures are highlighted at training by both adults and childrens services training officers.
- Work with adult social care, children services, community safety police and probation services continued throughout 2014 in relation to substance misuse safeguarding; domestic abuse strategy and the Police Crime Commission Board. All meetings sought to inform partner agencies about development within the borough to protect vulnerable adults and progress within services provided to achieve this.

- West Midlands Fire Service has engaged with board partners to identify risks of fires and how to refer to the fire service for safety checks. In 2014/15 over 2200 home safety checks were undertaken and the vulnerable persons officers within the fire service have worked with people who hoard and people who have physical disabilities to minimize the risk of fires within their homes. They have also supported people with dementia to live safely within their homes.
- In 2014 Dudley Clinical Commissioning Group established a health safeguarding forum which had a responsibility to ensure that the voice of the adult at risk is considered by all health organisations in Dudley and to provide a mechanism for the dissemination of best practice across the health economy.
- The police continued to work with partners in cases which involved people in positions of trust and led two safeguard adult review investigations in 2014 updating partners to their progress throughout.
- Black Country Partnership Foundation Trust and the council's adult social care training team revised a multi-agency training course regarding safeguard practice to ensure it was Care Act compliant. This course was delivered throughout the year to staff working within the borough in commissioned services.



- The policy and implementation sub-group of the safeguard board - a partnership made up of trading standards, housing services, community safety, Black Country Housing, Dudley & Walsall Mental Health Trust and Dudley Clinical Commissioning Group met throughout the year to look at the policies being developed in the West Midlands in preparation for The Care Act. It agreed action for the threshold training; Care Act procedures; Making Safeguard Personal and the need to review information to the board about self-neglect and safeguarding. This partnership provides direction and support to the board and undertakes operational planning for the wider workforces.
- The quality and performance sub-group is another effective board partnership with representation from adult social care, Dudley Clinical Commissioning Group, Dudley Group Foundation Trust and Dudley & Walsall Mental Health Trust. The group monitored and revised the alert form making adjustments as a result of the on-line survey and comments from partners. It was also made aware of the cases to be presented at the Practice Learning Event and the lessons to be explored. In addition it considered the impact of the Supreme Court Judgement in DOLS and what advice residential homes, nursing homes and hospitals were given about restrictive practice. The group also considered the need for a safeguard audit which was multi-agency and started to plan its delivery after the assurance framework had been completed in 2015.
- Housing services extended their safeguard network to include many of the housing associations which have housing stock across Dudley borough. This covered an additional four to five thousand homes across the borough. They now receive updates from the board and other training/awareness-raising activities.
The Social Care Institute for excellence referenced Dudley Council's housing services in a national publication complimenting the service on their safeguarding work
- Dudley Group of Hospitals Foundation Trust consolidates the work of the "unborn network" with Children Safeguarding and Dudley & Walsall Mental Health Trust ensuring that both the adult and child are considered in any actions planned.

- Healthwatch Dudley, as an active member of the safeguard board, contributed to the planning of a safeguarding survey held in June 2014 to listen to the victim's voice. Healthwatch also supported the implementation of 'making safeguard personal' and encouraged the members to listen to the voice of Dudley residents in shaping the work of the board. They also contributed in moving to the current person centred approach.
- 2014 saw the partnership support local councillors with safeguarding awareness training.
- It is helpful to have a local perspective on the partnership and the help and support provided by Age UK in 2014 is recognised. Age UK's contribution to planning for our victims survey was greatly appreciated and added depth and understanding to the process.
- In 2014 the Independent Chair of the Board bought the members attention to the need for agency contribution to the work of the board both financially and with human resource. It was recognised that the partnership was generous in its personnel assets and this was appreciated. West Midlands Police, Dudley Clinical commission Group and Dudley Council also provided a financial contribution to the cost of the board in 2014.
- At a board meeting partners agreed to adopt an annual assurance document developed within the West Midlands. Throughout the later stages of 2014 they considered the requirements and started to work on producing a framework ready for scrutiny in 2015.
It is a credit to the partnership that all agencies asked agreed to complete this piece of work in preparation for board scrutiny.



Challenges for 2015

- To examine the assurance frameworks and to develop peer review and audit.
- To ensure that the duties within The Care Act are upheld and that partners continue to undertake safeguard investigations within the new framework.
- To monitor the board expenditure, to ensure that the board can continue to support and fund its activities as each partner faces financial and personnel constraints.

6. Accountability

What did we say we would do?

- The board is to have assurance that agencies across Dudley Borough recognise their collective responsibility for safeguard arrangements as indicated in The Care Act.
- Performance data will be looked at to ensure that individuals subject to abuse receive timely support from agencies.
- Training within board agencies will meet the levels of specialism and competence required to address safeguard concerns.
- All peer challenge recommendations will be delivered.



What did we do?

- In 2014 both council children services and adult social care services board members sought assurance from Russell's Hall Hospital about allegations of unlawful restraint made in the national media.
This assurance involved a series of meetings with a group of board partners; scrutiny of individual cases and of practices and procedures within the hospital. The subsequent restraint report found no evidence of such practice. The whole process was transparent and clearly showed how partners can hold each other to account whilst working together to improve practice. One of the results of this was the appointment of a learning disability nurse within the hospital who has, within a year, been put forward for a national award as a result of the improvements made within the service.
- Board members also agreed that a serious adult review panel should be established, in line with The Care Act and the peer review recommendations of 2013/2014. This group was established, terms of reference agreed and in 2014/2015 they have started to collect information to analyse three separate deaths which occurred in 2014 which meet The Care Act requirement for this process.
- Board partners such as Dudley & Walsall Mental Health Trust and West Midlands Fire Service have also been involved in enquiries regarding services where colleagues involved are invited to discuss lessons learned. Learning is shared with the board when processes are completed if appropriate.
- The council's adult social care team in 2014 also completed a section 11 audit to demonstrate its partnership working with childrens services. This audit will be challenged by childrens services in 2015/2016.
Board members indicated in 2014 that they considered the safeguarding data needed to be more general and not adult social care focused; to ensure accountability by all safeguarding board partners.
This led to several meetings within the quality and performance sub-group and a revised data set is planned for 2015/2016. The data within the report therefore reflects a more generalised approach to safeguarding for the year 2014/2015 which will be populated with partner agency information for 2015/2016.

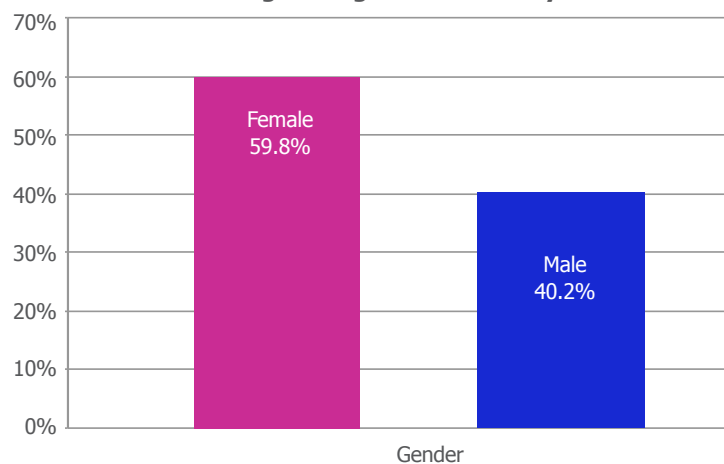
Incidence 2014/15

A breakdown of significant incidents

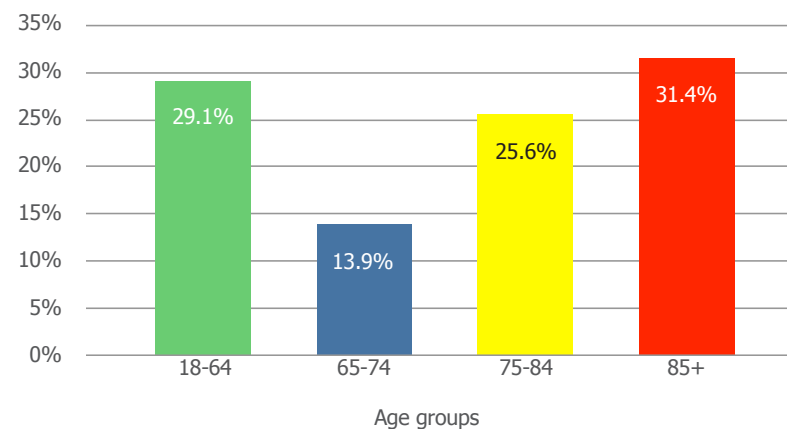
Provided below is an analysis of safeguarding incidents reported to the council during the 2014/15 period.

- The number of adult safeguarding incidents reported between 1st April 2014 and 31st March 2015 was 1,713, of which 726 (42.4%) were carried forward through the safeguarding process as referrals. This compares to 2013/14 data which showed 1,230 incidents, of which 770 (63%) were carried forward. The following graphs illustrate the 2014/15 referral data.
- Overall, the majority of these were for females (59.8%), with the majority of females being in the 85 plus age group, at 35.7% of all female referrals
- The majority of all referrals were also recorded in the 85 plus age group at 31.4%, however, the majority of referrals for males were in the 18-64 age group at 37%

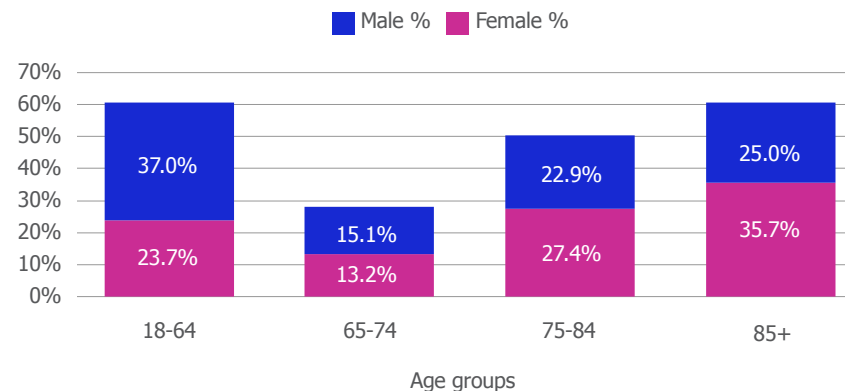
Safeguarding Incidents % By Gender



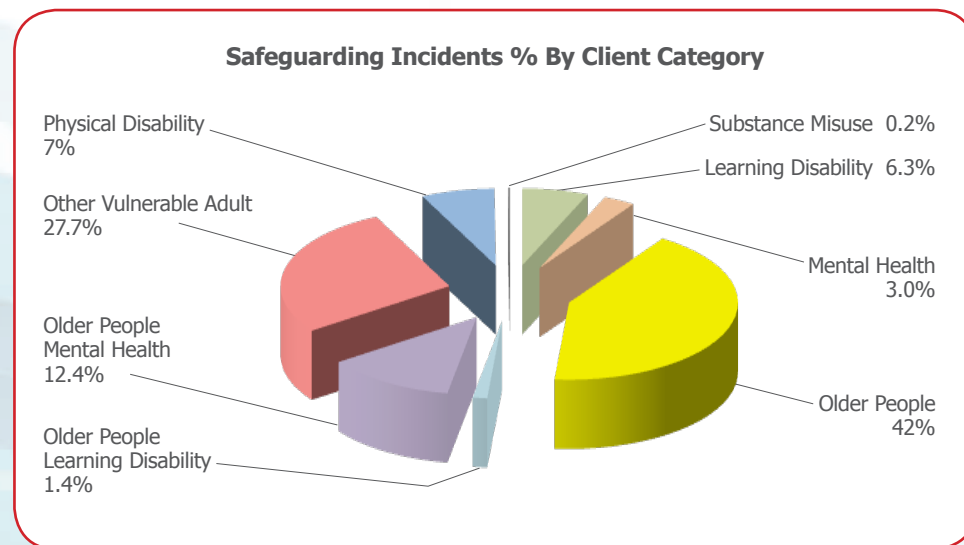
Safeguarding Incidents % By Age Group



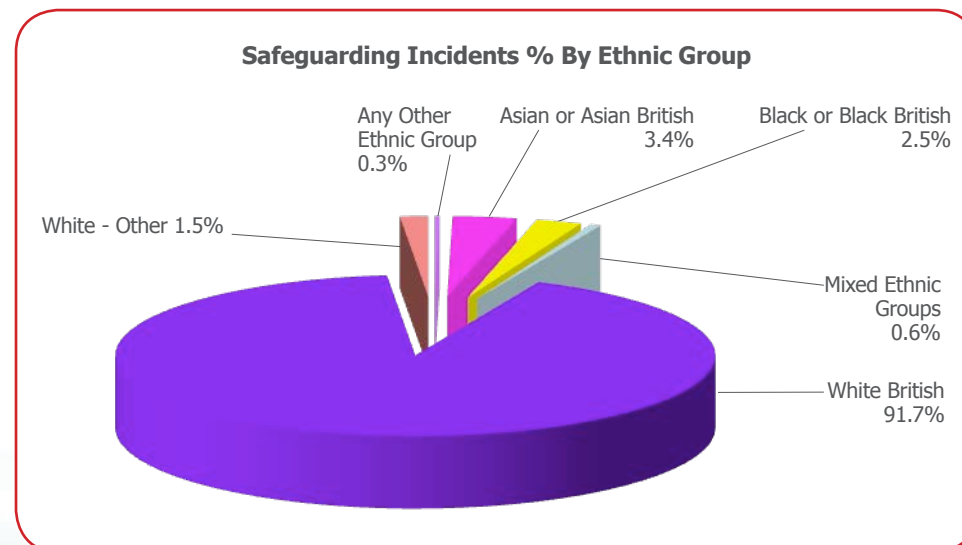
Safeguarding Incidents % By Gender and Age Group



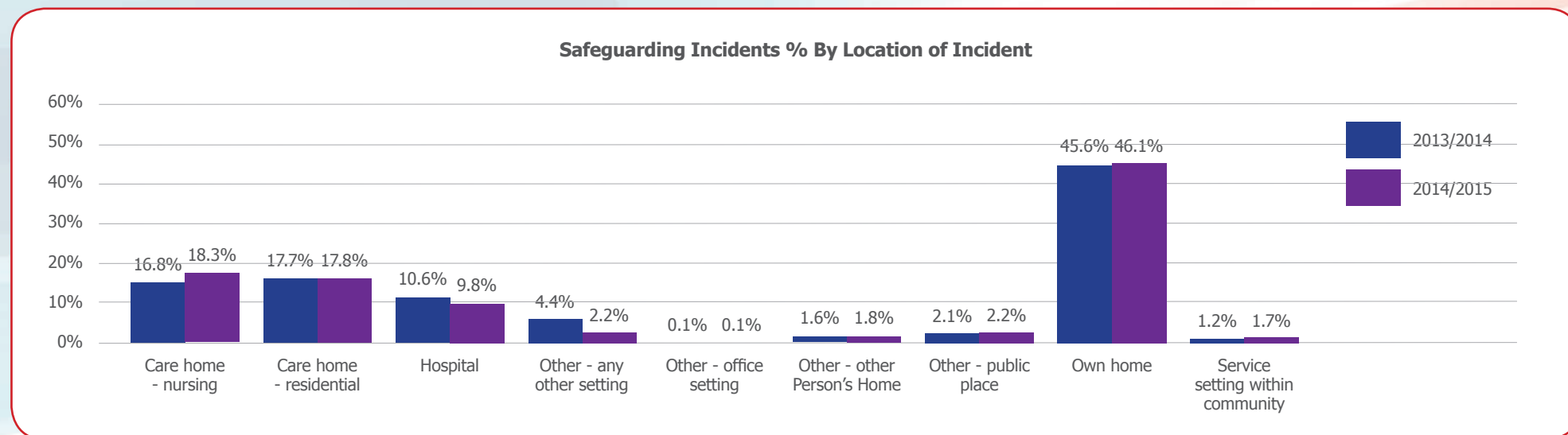
The majority of referrals were recorded for people in the older people client group at 42%, this is also the biggest group in 2013/14, at 58.4%.



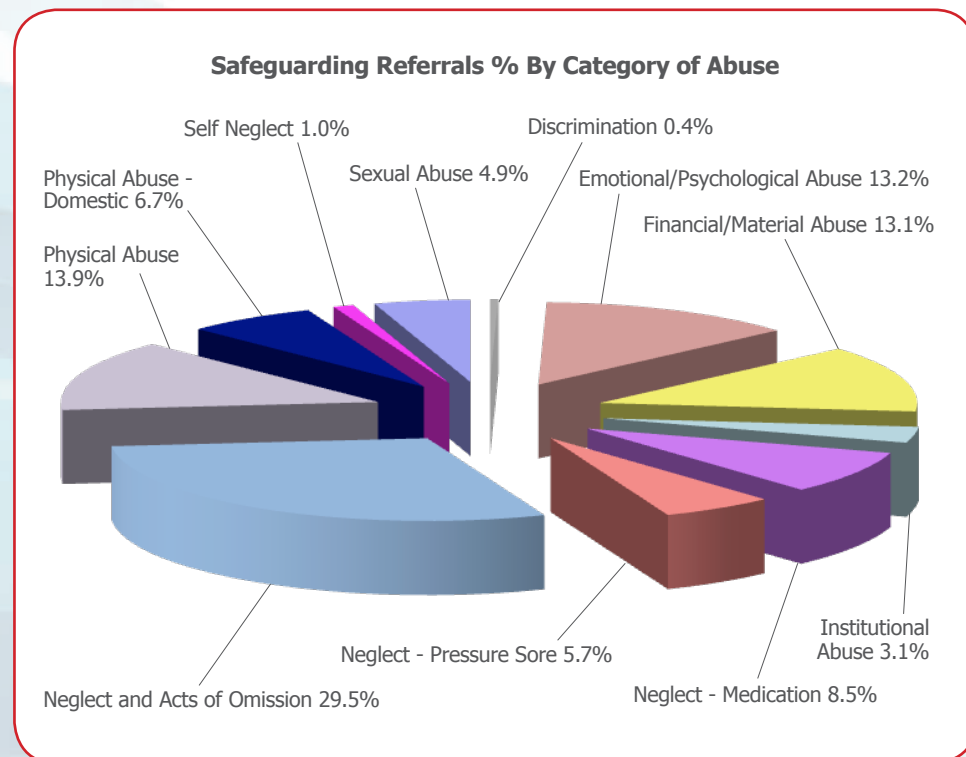
Also the majority of referrals were recorded for people in the White British ethnic origin group at 91.7%, compared with 94% during 2013/14.



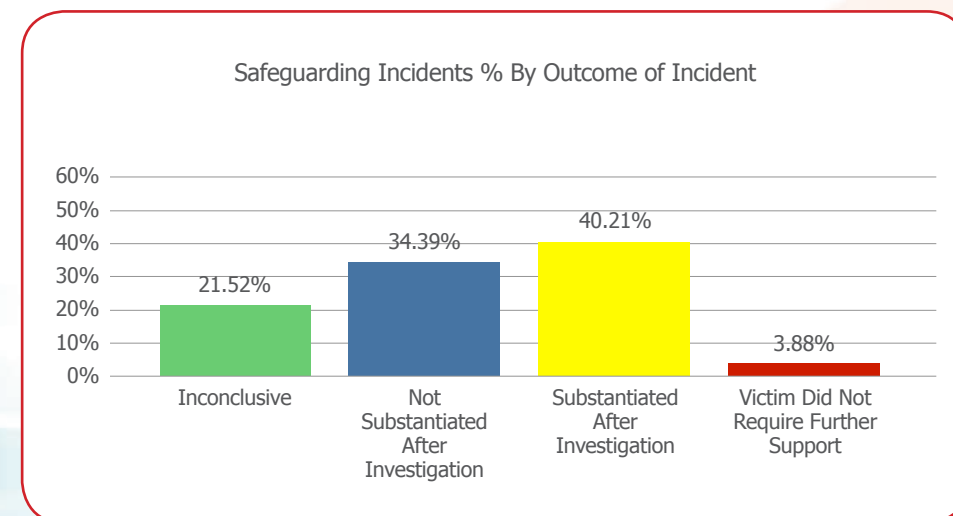
The majority of referrals were recorded as taking place within the victims own home at 46.1%, which is a similar figure to 2013/14 at 45.6%. Of these 335 referrals taking place in their own home 57.6% were for females.



The abuse category of neglect and acts of omission was recorded as the highest proportion of all incidents at 29.5%, a similar proportion to 2013/14 at 26.3%. However, if all neglect categories are combined this figure increases to 43.7% and clearly forms the majority of abuse categories overall



The number of completed referrals during the same period, (where all investigations have been completed and an outcome agreed), was 567. The majority of referrals investigated resulted in the abuse being either fully or partially substantiated at 40.21%, compared with 34.08% during 2013/14. This demonstrates an improvement in those substantiated and suggests that threshold training already started to take effect within the year.



Data is closely analysed by the board against the data set for the previous 2013/14 year. The board closely monitors cases of neglect in commissioned services and have held complex meetings to discuss specific organisations practices throughout the year, along with meeting with them and partner agencies to develop clear action plans.

Multi-agency working

A multi-agency liaison meeting is now held every two months, made up of partners from the safeguarding board and Care Quality Commission. These meetings look at services where there were concerns about safeguarding practice and joint action or single agency response is disseminated to the partner agency group attendees.

In 2014/2015 this data was also regularly shared with the council's adult social care management team and resulted in improvements to the allocation process for safeguard cases and data collection.

Improvements resulting from better multi-agency working have included:

- As indicated earlier in this report the Supreme Court Judgement regarding the Deprivation of Liberties led to a significant increase in the number of referrals received across the borough. The adult safeguard board received reports on this and the council's adult social care team responded by sending six members of staff to undertake training at local universities to support this process. The increase in advocacy services was also reported to the board to ensure that board members were aware of pressures and how they were being dealt with by the appropriate agencies – demonstrating accountability within the legal frameworks.

The Group Foundation Trust met with the council's adult social care team to ensure that the procedures within their setting addressed the Supreme Court Judgements.

- Commissioned services, which continued to refer people to the council for a DoL assessment, were given instructions about their accountability within the process. This was with the support of the West Midlands Care Association who arranged meetings within the borough to facilitate this.
- In 2014 the training courses for 2014/2015 had training outcomes directly

related to the competencies agreed by the board in 2013 – thus providing support for partners in ensuring the right people from organisations attended the specific courses advertised.

- Peer Review recommendations from 2013/2014 were addressed during 2014. Actions taken included:
 - A councillor representative was identified to attend the safeguarding board and has been a regular contributor since.
 - The work with Dudley Group Foundation Trust consolidated the partnership at both an operational and strategic level.
 - The Peer Audit recommended the safeguard threshold training to ensure staff were applying appropriate thresholds in their decision making to provide a proportionate response to safeguarding. This was organised and delivered within the year.
- Throughout 2014 partner agencies disseminated information about The Care Act within their agencies following board briefings.
- Board members also indicated that they shared case studies and serious case reviews within their organisations.
- Black Country Partnership Foundation Trust briefed staff groups about the Deprivation of Liberty Supreme Court Judgement and explored the impact it had on services provided.

- Dudley Group Foundation Trust improved its safeguarding site on the Trusts intranet. Its internal safeguarding board also looked at incident reporting within the Trust and developed its own annual safeguarding report which identified future developments based on incident trends and learning from root cause analysis trends.
- The Police ensured Local Command Teams were aware of board expectations required from The Care Act.
- Dudley Walsall Mental Health Trust continue to use risk assessments as an integral part of the ongoing assessment within safeguarding and share confidentially the outcomes of safeguarding episodes with the relevant teams for the purpose of practice improvement within its organisations.
- Dudley Clinical Commissioning Group designated safeguarding staff report quarterly to the quality and safety committee and the CCG health forum.
- The council's adult social care operational and management teams were briefed by the safeguard lead on 'making safeguard personal' and also about data quality reports within safeguarding. The practice learning events organised by the council's adult social care division sought to deliver lessons learnt from serious case reviews to its operational staff and managers as well as to partner agency audiences to promote good practice, professional curiosity and accountable decision making.



Challenges for 2015/2016

- The assurance framework will lead to peer audit process and then a multi-agency audit, both are planned for 2015.
- The larger organisations within the board have contributed to the assurance framework and learning from that process to be extended to the smaller organisations represented at the board.
- Partner agencies to provide data to the safeguarding board as agreed in a timely and consistent manner to improve partners' contribution to board information and demonstrate breadth of practice.



Dudley Safeguarding Adult Board

Business Plan 2015 - 2016

Prepared by:
Anne Harris
Head of Adult Safeguarding
On behalf of Dudley Safeguard Adult Board

PRIORITY ONE - To keep adults safe and hear their voice

	What are we going to do	Lead person	By when	How are we going to do it	What will the outcomes be	Progress
1.	Partner agencies who investigate safeguard concerns to contribute to the system by reporting outcomes for people involved in the safeguard process.	Head of Adult Safeguarding	Dec 15	When agencies are requested to undertake investigations information will be collated and the outcomes achieved will be reported to the Board.	Practice will be informed to ensure victims' voices are heard. The data will be analysed monthly and the Board will receive assurances that partner agencies are making safeguard personal.	
2.	Transition arrangements are evidenced within agency case records to ensure there are appropriate linkages between Adult & Children's services. 2015 will also see the development of the MASH (Multi-Agency Safeguard Hub) which will support information sharing and partnership.	Head of Adult Safeguarding/ Interim Head of Complex & Inclusion.	March 16	Transition arrangements will be reviewed by a multi-agency Working Group in November 15 who will map transition cases across the safeguard process. The outcomes will be reported to the Board	Learning from the Working Group will be disseminated to partners to ensure that agencies support children in transition through the safeguard process.	
3.	Share practice amongst agencies which recognises issues of mental capacity and empowers people to live the life they choose.	All partner agencies	March 16	Information to be collated on a person's capacity to make decisions related to the safeguard enquiry Information collated on how many cases where support was provided by an advocate. This information will be reported to the Board.	MCA assessments will be reviewed by the Board to ensure that issues related to capacity are understood within agencies and that people are supported in decision making.	
4.	The Board will consider financial and personnel pressures within the local authority and their own agencies and will look at how alternative resources can be used to support the safeguard process.	All partner agencies	March 16	The Board will be advised about the number of safeguard referrals, the pressures this places upon the local authority and partners and how collaborative work can support these pressures.	The Board members to be advised of the risks within the safeguard service delivery to inform agency colleagues and deliver services collaboratively.	

PRIORITY TWO - To Ensure that Adult Safeguarding is made personal by the appropriate support at the right place and time.

	What are we going to do	Lead person	By when	How are we going to do it	What will the outcomes be	Progress
1.	Ongoing engagement with victims to ensure outcomes empower the person and are proportionate to their need though the provision of appropriate support.	Head of Adult Safeguarding	Dec 15	Audit of multi-agency cases to demonstrate a personalised approach which is proportionate to need. The number of safeguard cases where outcomes demonstrate satisfaction will be collated monthly and reported to the Board every six months.	The Board to gain knowledge and assurance that the outcomes are empowering the victim and are proportionate to their need.	
2.	The Safeguard Board will ensure that communication of new elements of the Care Act i.e. self neglect, domestic violence, modern slavery, advocacy, prevent, mental capacity are embedded in all partner agencies.	Head of Adult Safeguarding through work of sub groups.	March 16	Review Board communication and pathways to ensure Care Act compliance strategy to ensure Care Act compliance and that policy and training opportunities have been facilitated through the work of Board partners. A series of workshops on Domestic Abuse, Prevent, Self-Neglect and modern slavery will be organised for operational staff throughout 2015/2016. Number of cases of Domestic Abuse and Self Neglect will be collated in 2015/2016. An audit of Care Act compliance will take place in November 2015.	The numbers of people using Advocacy services will be monitored to ensure Care Act compliance. The number of Domestic Violence, Self Neglect cases collated and audited throughout the year will demonstrate Care Act compliance and further learning required.	
3.	A multi-agency audit to consider proportional decision making at the initial stages of a Safeguarding enquiry to learn lessons and to share practice.	Head of Adult Safeguarding	Dec 15	Partners to take part in an audit of self neglect cases and cases within commissioned services. This will evaluate the 2014 threshold training outcomes.	To continue to inform and develop practice to ensure Safeguarding is person centred and proportional to their needs. To assure the Board about safeguard performance and identify gaps and an Action Plan to address issues identified.	

PRIORITY THREE - To improve safeguard outcome for adults, families and carers by ensuring effective partnership working and accountability.

	What are we going to do	Lead person	By when	How are we going to do it	What will the outcomes be	Progress
1.	To ensure senior representation and lay representation at the Safeguard Board to facilitate the development of assurance structures within its framework	All Board members	Dec 15	Lay Membership sort by April 2015 with the plan to appoint two lay members to the Board.	Decision making and contribution to the Board will be enhanced by the human resources able to support the person centred approach to safeguards.	
2.	Partnership arrangements continue to work with the community to develop awareness and support for hard to reach groups	All Board members	Feb 16	To invite groups to make presentations to the Board outlining their work and the support the Board agencies can provide/ receive from these groups. The Board to set up a Task and Finish group to review how it communicates in November 2015 to review the website and leaflet communication. The Board will review its use of the reporting mechanism for safeguard referrals in November 2015.	Evidence from the Task & Finish Group will improve the Board's communications across the Borough by April 2016.	
3.	To facilitate improved partnerships working by ensuring effective resolution of professional differences through the development of an escalation policy.	All Board members	Nov 15	Adaptation of Children's escalation policy for the Adult Board.	Improved timescales and decision making amongst partners informed by staff feedback and audit.	