



ANNUAL REPORT 2019/20

Dudley Safeguarding Adults Board

(including Covid-19 updates)









Contents

What is Safeguarding for Adults?	3
What is Dudley Safeguarding Adults Board?	3
Message from the Independent Chair	4
What is Dudley like?	6
Performance Data	
Partnership Working	11
Dudley CCG West Midlands Police	
Dudley Group of Hospitals NHS Trust	
Black Country Partnership NHS Trust	
West Midlands Fire Service	19
Safe and Sound – Dudley's Community Safety Partnership Hate Crime	
Multi-Agency Safeguarding Hub	
Multi-Agency Training	24
Deprivation of Liberty Safeguards	26
Safeguarding Adult Reviews	26
Appendix 1:	
Falls Prevention Pathway – Safeguarding case study	28
Appendix 2: Dementia Services - Safeguarding	31



What is Dudley Safeguarding Adults Board?

The core duties of the Dudley Safeguarding Adults Board (DSAB) are described in Chapter 14 of the Care Act Statutory Guidance, issued under section 78 of the Care Act 2014. This requires the DSAB to:

- Publish a strategic plan for each financial year detailing how it will meet its main objective and what individual members will do to achieve the work plan.
- Publish an annual report that details what the DSAB
 has done during the financial year to achieve its
 objectives and strategic work plan and what individual
 members have done to implement the strategy, with
 specific emphasis being given to the positive impact
 this has on the lives and outcomes of adults with care
 and support needs who have experienced, or are at risk
 of experiencing abuse and neglect.
- Conduct a Safeguarding Adults Review in accordance with Section 44 of the Care Act 2014.

In order to fulfil its core duties, the DSAB will develop a range of initiatives, plans, policies and procedures for safeguarding and promote the welfare of adults with care and support needs, in relation to:

- Adherence to the six declared principles of adult safeguarding
- The role, responsibility and accountability with regard to the actions each agency and professional group should take to ensure the protection of adults.
- Establish a method for analysing and interrogating data on safeguarding concerns and the outcomes of individual enquiries, which increases the DSAB's understanding of the prevalence of abuse in its area.
- Establish methods of analysing and interrogating adults' satisfaction with the outcomes that were achieved through the safeguarding process, which supports the DSPP to embed person centred approaches to safeguarding, as required by Making Safeguarding Personal.
- Establish how it will hold individual DSPP members to account and gain assurance of the effectiveness of their organisation's arrangements.
- Determine its arrangements for organisational selfassessment, DSPP self-audit and peer audits.
- Establish mechanisms for developing policies and procedures for protecting adults. The DSAB should formulate these in collaboration with all relevant agencies and will also need to consider how the views of adults with care and support needs, their families and informal carers will be represented.
- Identify types of circumstances that give grounds for concern and when they should be considered as a safeguarding concern and passed to the Local Authority for consideration of a S42 safeguarding

- enquiry. This should include referral pathways and guidance on thresholds for intervention.
- Embed strategies and ways of working that support staff to minimise the potential impact of issues relating to race, ethnicity, religion, gender and gender orientation, sexual orientation, beliefs, age, disadvantage and disability on abuse and neglect.
- Identify mechanisms for monitoring and reviewing the implementation and impact (on practice and culture) of policy and training.
- Develop effective mechanisms and protocols that support the effective commissioning of Safeguarding Adults Reviews, which includes local mechanisms that ensure lessons learnt are understood and embedded at all levels of staffing structures across the local safeguarding partnership. This will include identifying other processes that could be used to review the effectiveness of local safeguarding responses.
- Develop mechanisms for ensuring the Annual Strategic Plan and Annual Report are conducted and published in a timely manner, so as to enhance the accountability of the DSPP to the local community.
- Evidence how individual members of DSPP have challenged one another and held other local boards to account, for example the Health and Wellbeing Board.
- Review and comment on the impact for safeguarding adults that arises from individual DSPP members organisational strategic decision making, including decisions that impact on the resources available to support the DSPP.
- The Dudley Safeguarding Adult Board will engage in any other activity that facilitates or is conducive to, the achievement of its objectives.

In all its activities the DSAB will support the equality of opportunity for all individuals and meet the diverse needs and wishes of local adults in Dudley and will advocate that the duty to safeguard and promote the welfare of all as 'everybody's responsibility'.

The financial contribution for DSAB work in 2019-20 was £51,347. This was made up of contributions from Dudley MBC, Dudley Clinical Commissioning Group and West Midlands Police and was used to fund DSAB staff salaries and expenses, the 2019-20 training programme, Safeguarding Adult Reviews and other miscellaneous costs, e.g. publications and venue and hospitality costs. Wider partners provide staff and resources for meetings and training courses.



Message from the Independent Chair

I am pleased to present the Annual Report of the Dudley Safeguarding Adults Board for 2019-20. The Report looks at the work of the Board from April 2019 to March 2020 and highlights areas of good practice and learning which is a key role for the Board. Since becoming Independent Chair for Dudley in September 2019, we have appointed a new Safeguarding Partnership Manager to oversee the multiagency safeguarding arrangements across the life course. This is in response to the formation of the Dudley Safeguarding People Partnership (DSPP).

Our statutory partners, West Midlands Police, Dudley Clinical Commissioning Group and Dudley Metropolitan Borough Council work collectively with a range of partners and organisations across the life course to deliver effective safeguarding. This has been particularly challenging this year whilst faced with the global pandemic, Covid 19. With this in mind, this year's annual report is shorter to allow our colleagues to focus their efforts directly on our community.

I have seen first-hand the amazing and inspiring work carried out daily by our partners, key workers and voluntary organisations to keep people safe in the Borough. It has always been our priority to ensure that people who need our help, receive that help and in a way that meets their personal needs. The DSAB has continued to have oversight for adult safeguarding and I wish to thank everyone for their continued hard work and resilience during this unprecedented time. We know there will be lessons to be learnt nationally and globally from the Covid crisis. I also want to take this opportunity to recognise the significant impact this crisis has had on our older and more vulnerable community, here in Dudley.

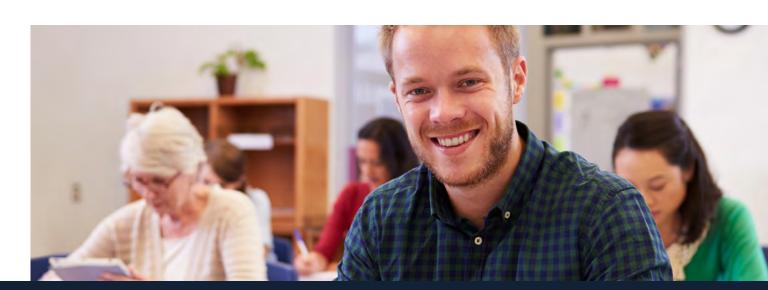
We will continue to ensure that safeguarding adults remains a priority and I look forward to updating you in our next annual report about the work we are doing around our new priorities for 2020-22. These are;

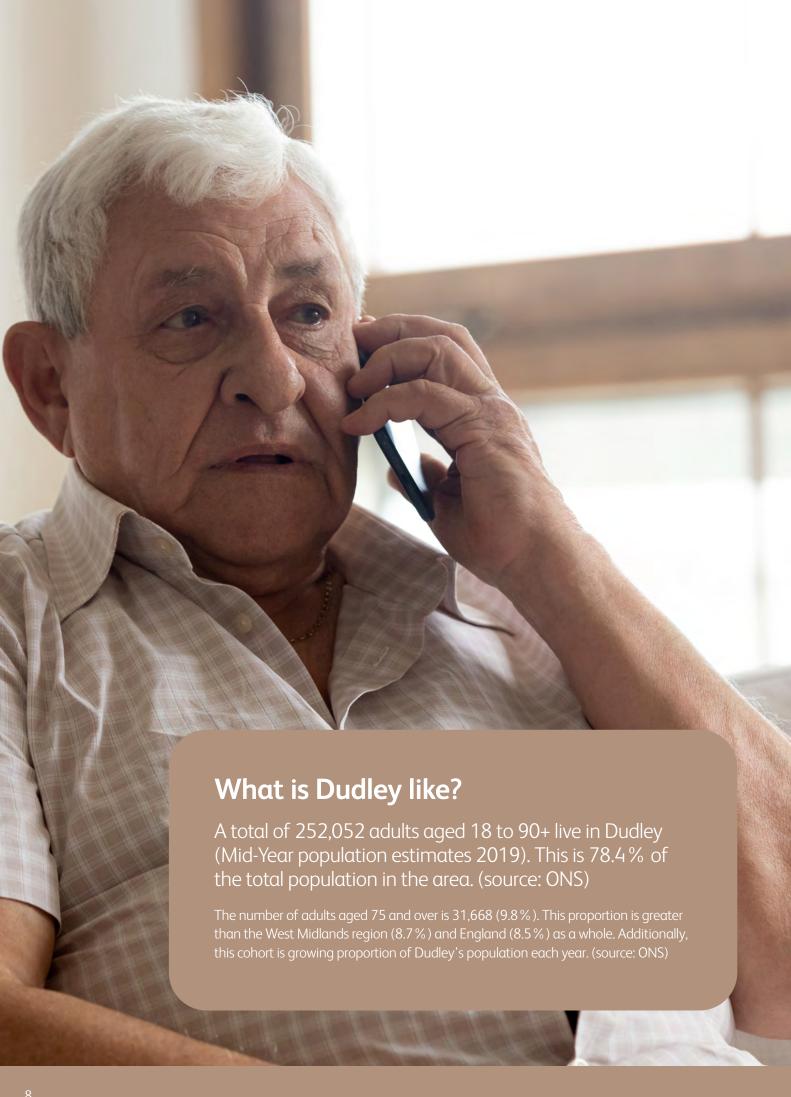
- 1. Preventing violence across the life course
- 2. Neglect across the life course
- 3. Exploitation across the life course

Over the next year, we will continue to deliver high quality social work, ensuring all partners are supported to deliver the best service for our citizens. We will respond to the inevitable winter pressures and those that have arisen from the pandemic. Most importantly, we will continue to act in the best interests of adults with care and support needs.

Finally, I would like to thank the chairs of the subgroups and to the Safeguarding Business Unit for their hard work and support.

Dr. Paul Kingston, Independent Chair of Dudley Safeguarding Adults Board





Deprivation and Income

Dudley has a good track record in preventing homelessness. The service receives around 2,500 enquiries per year. In most cases homelessness is prevented by help and assistance from the service. In cases where homelessness cannot be prevented, and the household is 'in priority need' (usually households with children or households with vulnerable people such as disabilities/care and support needs) the households are provided with an alternative housing option.

This was a small number in 2019/20 of 5 households and a further 5 households were included in this category as they received housing and wrap around support as part of Dudley's Housing First project for rough sleepers/serially excluded/multiple needs. 1,067 homeless preventions were recorded and a further 46 households were offered accommodation to relieve or prevent homelessness but were refused by the household.

Of greater concern to the Borough is the number of people who were found to be homeless but not in priority need (usually households without children and people with no care and support needs). This was 231 households in 2019/20. Services such as mediation, negotiation with private or social landlords, help and advice with discretionary housing payments or other measures are used to try to prevent them becoming homeless and the Homeless Team work with people to secure alternative accommodation if homelessness cannot be prevented.

Dudley has a small number of rough sleepers. The figure fluctuates but is generally under 5 people at any point in time. There are specific services and outreach in place to identify and help those sleeping rough.

Overall, the affordability of housing for those falling into housing need is of greatest concern. Of the 2,500 households who fall into housing need each year, 75% of these households can only afford to access social rented housing, the most affordable rent levels in the Borough. The lack of smaller (1 and 2 bedroom) properties in the social rented housing stock alongside the impacts of the Right to Buy and an ageing social housing stock that requires substantial investment impact on the ability to meet local housing need.

(Homelessness Prevention Strategy 2020-22)

Fuel Poverty in Dudley, whilst increasing in absolute terms, has continued to decline as a percentage of population overall. Latest figures in 2018 showing it affected 14,565 (10.6%) of adults within the Borough. (source: PHE Public Outcomes Framework)

Domestic abuse-related incidents and violence rates for Dudley are derived from the West Midlands force area at 26.5 crimes per 1,000 people for 2018/19. It should be noted this measure will be influenced by other areas outside Dudley, however this is lower than the West Midlands region (28.3 per 1,000) and England (27.4 per 1,000). (source: PHE Public Outcomes Framework)

Life Expectancy, Health Conditions and Health Inequalities

Life expectancy within Dudley is 79.0 years for men and 82.8 years for women. This is higher than the wider region (men 78.9, 82.7), however lower than England (men 79.6, women 83.2). Within Dudley, life expectancy is 9.0 years lower for men and 7.6 years lower for women in the most deprived areas of Dudley than in the least deprived areas. (source: PHE Public Outcomes Framework)

Dudley had a diagnosis rate of 2,386 for patients in the Borough with dementia. However, total prevalence including those yet to be diagnosed is modelled in excess of 4,000. (source: Dudley CCG Dementia Strategy 2017-2019).

The suicide rate in Dudley has increased since 2013-2015. For 2017-19, there were 10.6 per suicides per 10,000 population (or 87 persons) which is the highest rate recorded since records began in 2001-03. This is not significantly different to the West Midlands (10.2 per 10,000) or England (10.1 per 10,000). (source: PHE Public Outcomes Framework)

Performance Data

Safeguarding Concerns

The number of adult safeguarding concerns reported between 1st April 2019 and 31st March 2020 was 5299, a significant increase of 34.5% on the previous year:

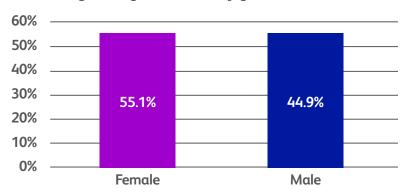
- 2018/19 **3941** total concerns
- 2017/18 **3051** total concerns
- 2016/17 **2809 total concerns**

During 2019/20, 773 concerns were progressed through the safeguarding process as enquiries (14.6%). This is lower than previous years:

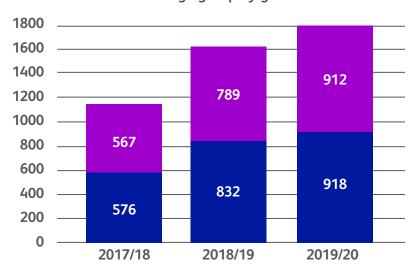
- 2018/19 **19.1%**
- 2017/18 **23.8%**
- 2016/17 **29.6%**

Although there has been a decrease in the overall proportion of concerns within the 18-64 age group compared to last year, it remains the highest proportion by age group overall (34.5%).

Safeguarding incidents % by gender



Concerns 18 - 64 age group by gender



Concerns by source

	2017/18		2018/19		2019/20	
Concern Source	No.	%	No.	%	No.	%
Court	1	0.0 %	1	0.0%	0	0.0%
CQC	40	1.3 %	42	1.1%	45	0.8 %
Dudley MBC	498	16.3%	450	11.4%	579	10.9%
Education	0	0.0%	0	0.0%	0	0.0%
Health	636	20.8%	955	24.2%	1115	21.0%
Housing	87	2.9%	140	3.6%	161	3.0 %
Independent Provider	465	15.2%	500	12.7%	617	11.6%
Other	484	15.9%	651	16.5%	1126	21.2%
Other LA	24	0.8%	44	1.1%	34	0.6%
Police	157	5.1%	191	4.8%	229	4.3 %
Self/Relative/Carer	617	20.2%	931	23.6%	1364	25.7%
Voluntary Organisation	41	1.3 %	36	0.9%	26	0.5 %
Not Recorded	1	0.0%	0	0.0%	3	0.1%
Total	3051	100.0%	3941	100.0%	5299	100.0%

The proportion of concerns received from Self/Relative/Carer source has consistently increased over the past 3 years with the percentage of concerns from Dudley LA reducing and most other source types remaining constant.

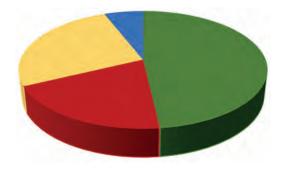
Similar to previous years, the majority of incidents occurred at the victim's own home (60.2%) - 50.3% of these incidents were for males and 50.1% were recorded with an alleged perpetrator known to the victim.

Overall, 48.1% of incidents were recorded with an alleged perpetrator known to the victim with 26.3% recorded with Service Provider as the alleged perpetrator. Of the records with a Service Provider recorded as the alleged perpetrator the majority were within the victim's own home at 42.1% with those within a residential setting 35.3% and 17.1% within a nursing setting.

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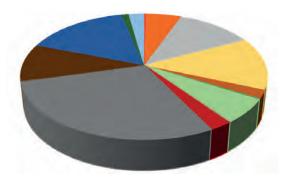
As in previous reporting the combined categories of Neglect & Acts of Omission (which we have chosen to sub categorise) forms the highest proportion of all enquiries at 37.3%

Enquiries By Alleged Perpetrator



Per	petrator	No	%
	Known to Victim	374	48.1%
	Not Recorded	1	0.1%
	Self-Neglect	152	19.6%
	Service Provider	204	26.3%
	Unknown to Victim	46	5.9 %
	Total	777	100.0%

Enquiries By Category of Abuse



Abuse Category		No	%
	Discrimination	2	0.2%
	Domestic	59	5.6%
	Emotional/ Psychological Abuse	125	11.8%
	Financial/Material Abuse	143	13.5%
	Institutional Abuse	24	2.3 %
	Modern Slavery	1	0.1%
	Neglect - Medication	65	6.2 %
	Neglect - Pressure Sore	28	2.7 %
	Neglect and Acts of Omission	301	28.5%
	Physical Abuse	103	9.8 %
	Self-Neglect	168	15.9%
	Sexual - Sexual Exploitation	12	1.1%
	Sexual Abuse	25	2.4%
	Total	1056	100.0%

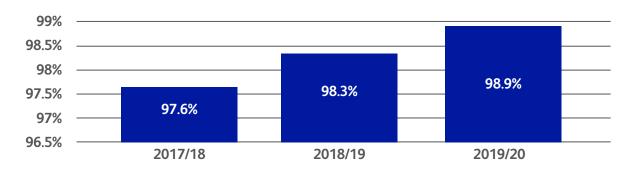
The number of concluded enquiries (564) has increased during 19-20 by 4.1% after decreasing during the past 2 years.

Performance regarding concluded enquiries where an outcome was expressed and that outcome was fully or partially achieved continues to improve compared with previous years, with a combined fully and partially achieved figure of 98.9%

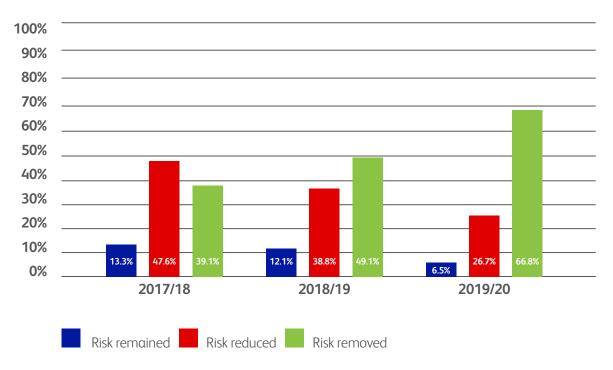
An element of risk was identified for 382 concluded enquiries.

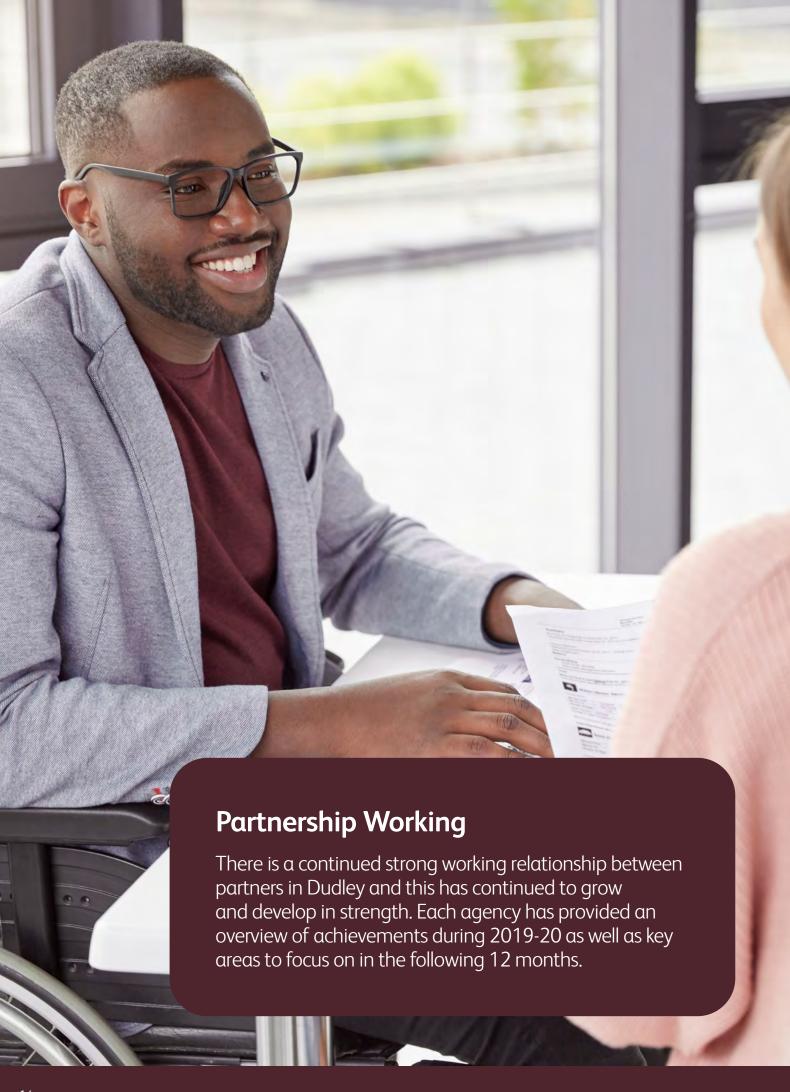
The risk was removed for 255 (66.8 %) of these with 102 (26.7 %) resulting in the risk being reduced.

Concluded enquiries where outcomes were expressed (Combined fully and partially achieved)



Concluded enquiries where risk was identified





Dudley MBC

Adult Social Care systems have been developed and implemented to ensure that the response to concerns is proportionate and timely. Despite experiencing, approximately, a 36% increase in concerns since the implementation of the Adult MASH, the conversion rate of concerns remains low.

This demonstrates two essential elements of safe practice, namely the profile of safeguarding is high and the decisions relating to thresholds for enquiry are consistent and informed. Additionally, the social care team have manged the Deprivation of Liberty requests proactively with an approach of using technology and equivalent assessments resulting in very low numbers of people waiting to be assessed or reviewed. This meant that most individuals who require the protection of the legal safeguards contained with the framework receive it.

There has been excellent work carried out in relation to falls prevention and dementia. Integrating all services operating in the Borough with a focus on falls prevention and augmenting those services where gaps were identified, has had a number of positive consequences and has delivered improved patient experience and service efficiencies.

The triage process has also facilitated patients being seen by the most appropriate team rather than the service best known to the referrer. As a consequence of this, there has been a reduction in direct referrals to Stream 3 for Consultant Geriatrician review. This means those in need of clinical review are able to be seen more quickly and those with an acute need can be seen urgently. Facilitated by the new falls specialist nursing role, those cases requiring urgent review are seen within three weeks of entering the pathway. Prior to the launch of the pathway, the waiting time to receive clinical review within the consultant led clinic was 18 weeks.

Dudley Borough has a dementia strategy that has been developed in partnership with Dudley Clinical Commissioning Group, Dudley MBC (Adult Social Care and Public Health), Dudley and Walsall Mental Health Partnership Trust, Dudley Group NHS Foundation Trust, Black Country Partnership National Health Service Foundation Trust and Alzheimer's Society. Full details of the key achievements and progress can be found in Appendix 2

The development of the Dudley Safeguarding People Partnership has supported and developed even stronger relationships between the statutory partners and stakeholders. These partnerships are built on effective communication and trust and will facilitate any required responses now and in the future. The future of adult safeguarding in Dudley is positively dynamic.

Key achievements

- The implementation of the appropriate adult policy
- An updated and relaunched Mental Capacity Assessment and Best Interests policies
- An ADASS Peer challenge was completed with positive feedback about safeguarding
- Dudley Financial Alliance was convened
- Dudley Financial Abuse Toolkit created
- Multi-Agency Risk Management Protocol was updated and issued
- Quality Assurance Framework was implemented
- Establishment of the Adults at Risk Team within safeguarding

Areas for development for 2020/21:

- Work is being progressed on the development and launch of a Fracture Liaison Service for Dudley Group.
- Develop Dudley Community Rapid Response Team Pilot
- Further development of integrated falls pathway
- A new case management system (Liquid Logic) will be introduced, allowing for more accurate recording.
- Preparation for the Liberty Protection Safeguards Implementation.
- Section 75 dissolution (Social Services Community Mental Health staff returning to the local authority after approximately fifteen years of secondment to the Trust)
- Relocation of Adult MASH to Ward House (secure environment) – this actually took place a couple of weeks before the lockdown so was never fully implemented.
- A robust triage system has been implemented which is reflected in MASH policies and procedures. There are strong professional connections with the Children's MASH and the aim is to develop a joint strategic MASH subgroup to focus on a family approach.
- Enabling staff to undertake visits by providing appropriate PPE as Covid restrictions remain
- To continue a training offer to be moved to virtual wherever possible

Dudley CCG

Dudley Clinical Commissioning Group (CCG) firmly believes that every person has the right to live a life free from abuse and neglect and have continued to maintain a high focus on Adult Safeguarding to meet its statutory requirements as outlined in the Care Act (2014). This is done by ensuring that safeguarding adults is embedded in commissioning arrangements and by close monitoring of how providers fulfil their statutory duties and responsibilities. The contracting process reflects the safeguarding requirements of the Care Act 2014 and supports outcomes-focused, person-centred safeguarding practice through 'Making Safeguarding Personal' and 'Think Family'.

Key achievements

- Dudley CCG has undertaken further work in 2019/20 with the other Black Country CCG's to enhance the safeguarding data available as part of the assurance process. This has been achieved through the development of a safeguarding dashboard which provides a mechanism for highlighting areas of good practice and identifying any areas that need development. The dashboard was produced in partnership with the trusts and includes information in relation to training compliance, along with information relating to the Mental Capacity Act, Deprivation of Liberty Safeguards and Prevent.
- The CCG have continued to work closely with Dudley MBC colleagues in conducting quality assurance and safeguarding visits to care homes. The Designated Nurse for Adult Safeguarding chairs the Care Home Practitioners Forum where the CCGs, health care providers and Local Authority share information relating to concerns about providers and to identify if support can be provided when there are concerns which may not meet the threshold for safeguarding.
- Further development on the information-sharing processes between GP practices and domestic abuse coordinators (MARAC) to ensure all GP practices have the ability to share information to inform risk assessment and receive notification of their patients and any associated children who are victims of highrisk domestic abuse. As well as continued roll out of the IRIS with primary care including GP registrars and pharmacists.
- The CCG have continued to fulfil requirements from all statutory guidance and has maintained a focus on safeguarding development and training with an emphasis and focus on domestic violence, adult neglect/self-neglect

- Representation on Prevent Strategic Group and Counter Terrorist Local Profile updates. Attendance ensures CCG compliance with legislative duties for the Counter Terrorism Act 2015 and the opportunity to further monitor what health providers are delivering to support Counter Terrorism/Prevent requirements.
- Local Area Contract (LAC) provision for the National Learning Disability Mortality Review (LeDeR)
 Programme. The Designated Nurse for Adult Safeguarding is the Local Area Contact for Dudley and attends the Black Country LeDeR Steering Group. Their views will highlight best practice; potentially avoidable contributory factors and action plans/ lessons learnt necessary to change health and social care service delivery for those with a learning disability
- Black Country STP Learning Event Reflecting Back to Make Brighter Futures – was held in May the focus on Domestic Abuse - coercive and controlling behaviours where powerful speakers shared their personal experiences
- Participation at regional and local safeguarding networks to share best practice and information on key developments in the safeguarding arena, updates and current trends/information are shared via the DCCG newsletter along with e-mails to safeguarding leads providers and practice managers.

Areas for development for 2020/21:

- To continue offer of bespoke training and safeguarding supervision to support staff achieving their appropriate levels of competence in accordance with the Intercollegiate document.
- Continued safeguarding practice development and support linking with the changing commissioning arrangements across the health care economy.
- Planning and supporting providers for the changes in the Mental Capacity (Amendment) Act 2019 and implementation of Liberty Protection Safeguards to ensure appropriate safeguards are in place for the most vulnerable in our population
- Continuing to work in close partnership with Dudley People Partnership to support and progress future safeguarding arrangements across the Borough

West Midlands Police

The Adult Care Abuse Investigation Team which is part of the Public Protection Unit - conducts secondary investigations into allegations of Death, Neglect and Physical, Sexual or Financial Abuse where the victim is a person with care and support needs and where the suspect is another service user or a person in a Position of Trust.

The team is committed to safeguard and protect vulnerable members of the Dudley Community by conducting timely investigations and ensuring that perpetrators of offences are brought to justice where possible.

A person with a care and support need has as much right as anyone to live a life free from abuse and neglect and, as a result of this ethic, WMP has secured positive outcomes for vulnerable individuals in Dudley either through the criminal justice pathway or through personal safeguarding.

WMP are a statutory and key member of the Safeguarding Adult Board which ensures a high focus on Adult Safeguarding as outlined in the Care Act (2014).

Key achievements

- Implementation of the One Panel meeting which combines both the reviews for Serious Case Reviews and Safeguarding Adult Reviews.
- Continued contribution to multi-agency safeguarding and partnership working agreements, including personally attending or providing a representative at all DSPP meetings and participation in the work of all the sub groups.

Areas for development for 2020/21

- To continue to work in close partnership with Dudley People Partnership to support future safeguarding arrangements across the Borough and to learn from lessons where the standard of care afforded to a vulnerable person within the Dudley Borough has not been as effective as it could have been.
- A Detective Inspector to receive training as a report writer for the Dudley Safeguarding People Partnership in order to support the other authors across the Safeguarding Partnership and provide advice on guidance in the Safeguarding Adult Review process.



Dudley Group of Hospitals NHS Trust

The Dudley Group NHS Foundation Trust recognises that effective, timely and robust safeguarding is fundamental to protecting adults with care and support needs in our care and within the wider community. The focus in 2019/20 reflects the approach of Dudley Safeguarding People's Partnership by ensuring an integrated safeguarding adult and children service with an emphasis on ensuring staff are equipped with the knowledge and skills to recognise and act on abuse across the life course.

There has been a new appointment to Head of Safeguarding in December 2019 and a renewed focus of increased visibility of the safeguarding team around the Trust, to ensure that the service is proactive in supporting staff and raising awareness of safeguarding issues. The provision of the safeguarding training has been reviewed and updated to increase accessibility and improve the quality and relevance to staff undertaking training. There has been an improved focus on ensuring actions and learning from Safeguarding Adult Reviews and Domestic Homicide Reviews are implemented and shared. This is work that will continue to be improved upon over the next year.

In February 2020 an Independent Domestic Abuse Advocate commenced within the Trust, in partnership with Black Country Women's Aid, as a part of a funded project with Dudley Safe and Sound and Dudley Public Health. This is already having a positive impact on our patient's attending the Emergency Department. There has been a review of the safeguarding service available to community staff in recognition of the vulnerability of the patients seen in their homes and plans progressed to ensure they are in receipt of accessible and effective safeguarding support and advice. The Trust safeguarding team continue to work closely with partner agencies through engagement with joint working initiatives and local priority agendas.

The Trust Learning Disability Team continue to ensure the safety and wellbeing of

patients with learning disabilities. The team support all Trust staff to recognise the

increased vulnerability of patients with learning disabilities particularly those with

reduced capacity and ensuring their involvement in decision making.

Key achievements

- Recruitment to Head of Safeguarding
- Recruitment to new post of Associate Nurse for Safeguarding
- Recruitment to new post of Named Midwife for Safeguarding
- Safeguarding supervision
- Increase in number of trained supervisors
- Increased availability of safeguarding sessions
- Increased compliance from community midwives
- Positive feedback from CCG regarding provision of supervision
- Renewed training strategy providing wider variety of learning opportunities and more frequent training requirements
- Comprehensive review and update of Safeguarding Hub pages on Trust Intranet to provide easier access to information and signposting
- Independent Domestic Violence Advocate in place and ready to support the Trust in ensuring victims of domestic abuse are supported and protected
- High quality independent management reviews with excellent critical analysis and identification of learning evidenced in feedback from Case Review authors
- Recognition from Dudley Clinical Commissioning Group regarding overall improvement of the Trust safeguarding service
- Routine Enquiry for domestic abuse screening by midwives being sustained at 90-100% compliance following review of process
- Dudley maternity services selected for national pilot for GCP2A
- Increase in named nurse time out in wards and departments
- Promotion of safeguarding across the organisation by increased invisibility of safeguarding team and new safeguarding posters distributed
- Safeguarding Learning Events relaunched in Sept 2019 and opened to partner agencies
- Continued meeting of time sensitive responses to MASH questionnaires, Section 42 enquiries, scoping exercises and Internal Management Reviews
- Active representation, involvement and action to improve safeguarding services across the Black Country STP
- Embedding of the new Named Midwife for Safeguarding role

- Participation in the NHS Improvement Standards benchmarking exercise for improving outcomes for patients with learning disabilities
- Celebrated 100 years of Learning Disability Nursing by sharing evidence of the impact the team has had on increased and accessible information for patients with learning disabilities
- Provision of learning disability training from Paula McGowan, campaigner for people with autism and learning disabilities
- Provision of Transition Clinics for patients with learning disabilities 18-25 year olds
- Increased number of LeDeR reviewers trained in Trust to support the Trust in learning from the death of adults with a learning disability
- Working in partnership with local self-advocates –
 Dudley Voices for Choice as experts by experience

Areas for development for 2020/21

 Increased staff and public awareness of local and national safeguarding agenda, priorities and learning across the Trust

- Improve staff awareness, confidence and skills in identifying, risk assessing and supporting victims of domestic abuse
- Improved governance and accountability for implementation and embedding of recommendations from external and internal safeguarding reviews
- Improved safeguarding documentation systems and processes
- Improved access to safeguarding support and supervision for community-based staff
- Improving evidence that adults have been listened to and their wishes and feelings taken into account
- Embed the Learning Disability Standards which measures the quality of care provided to people with learning disabilities, autism or both
- Demonstrating the learning from the LeDeR process
- Improving the application of Mental Capacity Act 2005

Case Study

Adult A attended the Emergency Department after West Midland Fire Service had concerns for their welfare following a fire at the home address. Adult A's house had evidence of lots of burnt matches, candles, full ash trays, burnt clothing and burn marks in the bed. Adult A's neighbours had also reported that the gas hobs are often left alight and unattended. No acute medical problems were identified however there were concerns regarding discharge home due to the identified fire hazards.

Adult A was seen by Older People's Mental Health Team who found no evidence of any acute mental health issues or impairment of cognitive function. Adult A received excellent multi-disciplinary care during the discharge process. They were seen by the Discharge Team, Front of House Social Worker and the Emergency Response Team (ERT). There was clear evidence of 'making safeguarding personal' as the documentation clearly outlined their wishes and feelings. Consideration of their capacity to make the decision to return home and understanding the risks was documented. Adult A did agree to a package of care.

To reduce the risk of fire smoking in bed was discussed and it was suggested that they swap to a vape. The Fire Service had supplied Adult A with a fire blanket.

It was discussed with Adult A about their alcohol consumption as this was thought to be a feature. Support from the Drug and Alcohol Liaison Team was discussed and offered however Adult A declined this offer.

A Telecare Pendant referral was completed.
Adult A's daughter was involved in the discharge planning. The Discharge Co-ordinator showed good practice in pre-empting future safeguarding concerns and specified if Adult A was to cancel the package of care a safeguarding should be raised.

The care provided to Adult A was proportionate, preventative, showed good partnership and empowered Adult A to make their own decisions. This is a good example of how some of the principles of The Care Act can be applied.

Black Country Partnership NHS Trust

The Trust staff and safeguarding teams work to support the safeguarding of their most vulnerable children, adults and families. The Teams continued to promote best practice, ensure safeguarding was everyone's business and incorporate the Think Family approach across all areas of practice. As always, the Safeguarding Teams supported the statutory requirements under Working Together.

Key achievements

- Safeguarding teams continued to work and support all Trust staff and partners despite continued challenges relating to resource
- Staff volunteered and were trained in the LeDeR review process in order to support this process
- New staff were added to the Safeguarding Teams which allowed improved resilience and cover across the teams
- The supervision of vulnerable adults continues
- The Team supported all aspects of safeguarding reviews for adults and children

Areas for development for 2020/21

The Trust merged with Dudley and Walsall MHT
in April 2020 to become Black Country Healthcare
NHST. The main aspect will be to work with all of
the Teams to bring the safeguarding together to
ensure equity of service delivery across the Trust,
with harmonising of policy, procedures and related
safeguarding practice



West Midlands Fire Service

At the end of 2019 the National Fire Chief's Council (NFCC) published the Fire and Rescue Service Guidance and Self-Assessment Toolkit and this has been used to shape and inform the implementation of the safeguarding action plan. West Midlands Fire Service continues to develop and improve its internal policies, processes and procedures to ensure safeguarding is at the heart of the prevention work it undertakes. An internal review of the Prevention department has introduced changes to provide a more streamlined and cohesive approach to its preventative and safeguarding activities.

Key achievements

• WMFS has revised its Safeguarding policy and process and the new Safeguarding Policy improves the oversight of recording of safeguarding concerns raised and actions taken as a result. This allows for quality assurance and analysis of data from concerns. This can also identify training needs. The new process also makes explicit the requirement to attempt to establish what those referred to safeguarding want to achieve as a result. There is a requirement to include this on any referrals made. There is comprehensive guidance to support our workforce to do this. The revised policy was published in Feb 2020.

Areas for development for 2020/21

Outcomes from the continued work to improve and modernise internal safeguarding processes and procedures include:

- An internal safeguarding activity process review will be completed shortly, with policies, procedures, guidance and toolkit being brought together in the WMFS MESH (intranet accessible by all personnel) system
- A more effective 24/7 safeguarding triage and advice system, supported by better trained and supported duty officers
- A new, senior and dedicated Safeguarding Lead Manager post has been established and is currently being recruited to, to support future improvements
- A new WMFS Safeguarding Oversight and Assurance Group is being established
- A dedicated Safeguarding Competency and Supervision Framework has been developed, which will drive the Service's safeguarding training programme
- A dedicated People in Positions of Trust Policy has been developed

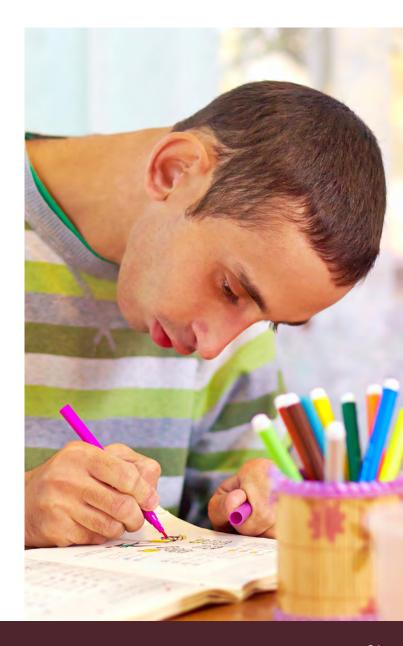
- A suggested common (across the seven metropolitan areas of the West Midlands) year-end assurance statement has been developed, along with common adults and children safeguarding referral forms following full support for, and completion of, the above Service's Safeguarding Policy will be further revised with the Service's Joint Consultative Committee and other stakeholders will be consulted in line with the Service's Employee Relations Framework.
- A brigade-wide review of the Complex Needs Officers (CNO) process and procedures is currently being under-taken which will improve communications internally and externally and allow a consistent approach across all areas. A programme of CNO recall days, regular one to ones and supervision is being mapped out to support CNOs in a more structured and balanced way.
- Training for operational crews in the function of the CNO role and their area of work is being planned in the form of Tactical Decision-Making Exercises (TDEs).
 To protect front line staff delivery of this work was paused due to the introduction of the COVID-19 restrictions and alternative ways to continue delivery are being explored.
- A review of the training package used for the new entrants coming into the organisation has led to improvements being made to its content. This has allowed us to provide a more focussed approach to the training relating to safeguarding and our preventative work and will ensure that this learning is embedded from the very outset of the new entrant's career with WMFS. The restrictions in place as a result of COVID-19 have meant that we have adapted our delivery to use technology and systems to support and improve training as well as our working practices.
- Work continues to improve organisational ICT software systems to support the recommendations coming from SARs, those in Dame Hackett's report into Grenfell and to support alternative methods of service delivery brought about by restrictions linked to the current pandemic. The Fire Safety Guidance for Professionals and Carers is due to be updated and re-issued in this financial year. This has also been delayed due to work being paused due to the coronavirus restrictions.
- From the Safeguarding Adults Reviews which occurred during the period 2019/20, a number of recommendations and outcomes were produced for WMFS and work will continue during 2020/21 to address and satisfy these.

Healthwatch Dudley

Healthwatch Dudley values the important work and priorities of the new Dudley Safeguarding People Partnership and throughout the last year have continued to raise awareness of key safeguarding messaging, promote training opportunities and encourage people to raise concerns

Healthwatch Dudley re-joined the Board in July 2020 and has been working with the Safeguarding Partnership Business Manager, to identify opportunities where our experience of community influence in decision making can have the greatest impact, ensuring local people have a loud and clear voice in improving safeguarding systems and practices.

Healthwatch Dudley also conducted a series of engagement sessions with people who use care and support and NHS services to provide clear feedback about experiences during Covid '19 and priorities for improvement.



Safe and Sound – Dudley's Community Safety Partnership

Safe & Sound is Dudley's statutory Community Safety Partnership. Priorities for the Community Safety Partnership are identified through Dudley Borough's Strategic Assessment and consultations in line with legislative requirements. 2019/20 priorities included: -

- Tackling and Reducing Violent Crime (including gang and knife related crime)
- Reducing Reoffending (including links to Youth Offending Service – under 18s and First Time Entrants)
- Reducing Victimisation (including Domestic Violence and Abuse and Violence Against Women and Girls Agenda)
- Reducing Vulnerability (including Substance Misuse, Mental Health, Modern Slavery, Prevent)
- Reducing Burglaries (links to organised car crime)
- Anti-Social Behaviour

The partnership also considered issues in respect of online safety and harm. The partnership continued to link with Dudley's Safeguarding Adults Arrangements, Dudley's Safeguarding Childrens Arrangements, Dudley's Health and Wellbeing Board and Dudley's Youth Offending Service Management Board and contributed to a range of agendas and priorities for the Borough.

There were also formal links to work that takes place at a regional level for example, Modern Slavery, Domestic Abuse, Preventing Violence Against Vulnerable People and Reducing Reoffending. A robust Safe & Sound communications plan was implemented, which incorporated various community safety "topics" including Domestic Abuse, Hate Crime, Darker Nights, Online Harms and Modern Slavery to name a few. The relevant help hub pages on the Safe & Sound website are regularly updated to ensure relevant information is available and accessible this allows members of the public and professionals to know how to report concerns / incidents and access support as appropriate.

In 2019/20 Safe & Sound organised several events that were well attended and successful, these included community cohesion, hate crime, modern slavery and domestic abuse and we contributed to the CCG's harmful cultural practices event.

Domestic Abuse:

Data sets were agreed in respect of Domestic Abuse and Sexual Violence. Updates and data have been received from West Midlands Police, the IRIS Project, Black Country Women's Aid, CHADD and the Domestic Violence Voluntary Perpetrator Programme throughout the year. This has informed the partnership of the scale and complexity of issues in respect of Domestic Abuse and Sexual Violence and informed responses as far as been possible.

The current Domestic and Sexual Violence and Abuse Strategy underwent a light touch refresh following consultation with the Domestic Abuse Forum and strategic partners. The Service Directory has been refreshed and updated, this is available on the safe and sound website.

Dudley were involved in submitting a successful regional bid (MCHLG) in respect of support in refuge accommodation, in addition to a Black Country wide bid regarding support for children affected by Domestic Abuse (support for Operation Encompass)

A Forced Marriage / Honour Based Abuse / Female Genital Mutilation self-assessment was undertaken by partners.

Domestic Homicide Reviews 2 and 4 were submitted to the Home Office to undergo the quality assurance process. Feedback is expected in 2020/21. Action Plans are in place and some learning has been shared.

The DMBC Domestic Abuse Workforce Guidance was agreed by HR and Unions and is now a live document.

Community Cohesion / Hate Crime:

A consultation process took place in order to update the current Community Cohesion and Hate Crime Strategy. This included input from community forums, professionals via the hate crime event in October 2019 and an online public consultation survey.

Work took place to promote hate crime week, including the annual '3rd party tea party', a new leaflet produced, information shared with schools, press releases and an online hate crime video was created and shared.

Over 2000 hate crime leaflets were distributed across the Borough, these include information around what constitutes a hate crime / incident and how to report, including links to the new West Midlands Police Hate Crime App

Hate crimes are reviewed daily by Police colleagues and a partnership response takes place as and when required.

Modern Slavery and Human Trafficking

Modern slavery training across the Local Authority continued to be rolled out. Training was also delivered to partners including health, DWP, Community, Voluntary and Faith sector and schools. A leaflet was developed for raising awareness of Modern Slavery with members of the public and staff unable to attend face to face training sessions. Work continued to take place with partners to identify victims / concerns and respond as appropriate.

Prevent

The 2019/20 Prevent Delivery Plan was developed following information received in Dudley's Counter Terrorism Local Profile. The Plan had 5 objectives to enable a focus on the Prevent agenda through the Prevent Delivery Group. Work to safeguard individuals was undertaken through Dudley's Channel Panel

Violence Prevention

During 2019/20 work commenced on the development of a Violence Prevention Strategy for the Borough taking a Public Health approach. There was a significant amount of "consultation activity" during the summer and autumn of 2019. The Strategy – "Safer Dudley – Strategy to Prevent Violence in Dudley" will be completed and launched in 2020/21. The Violence Prevention Group sought to coordinate work across the Borough to reduce violence and have a greater understanding of evidenced based practice.

Reducing Vulnerability

Work that has taken place through the Substance Misuse Alliance, the Rogue Landlord Operational Group and the Safer Places Group has contributed to reducing a range of vulnerabilities for individuals, families and communities.

Key achievements:

- Partners have worked hard to ensure the best outcomes for individuals, families and communities.
 Dudley remains the safest Borough within the West Midlands Police Force area.
- The events that took place in 2019/20 were extremely successful and received excellent feedback.
 Knowledge gained should lead to better outcomes for individuals, families and communities.
- High numbers of attendance at the modern slavery training
- Positive feedback in respect of the implementation of the Communication Plan and website updates and developments.

- Young people and adults were invited to respond to the annual consultation that contributes to setting the priorities, the consultation on the Community Cohesion and Hate Crime Strategy and the development of the Violence Prevention Strategy. Their contributions have informed priority setting and strategy development.
- Service user feedback is obtained from domestic abuse specialist services and reported back to the Domestic and Sexual Violence and Abuse Strategic group
- Work has been undertaken with partners and the community in Lye to improve cohesion in the area.

Areas for development for 2020/21

- Priorities for the Community Safety Partnership are identified through Dudley Borough's Strategic Assessment and consultations and in line with legislative requirements. 2020/21 priorities will include-
- Tackling and Reducing Violent Crime (including gang and knife related crime)
- Reducing Reoffending including links to Youth
 Offending Service under 18s and First Time Entrants
 and a focus on females who offend
- Reducing Victimisation (including Domestic Violence and Abuse and Violence Against Women and Girls Agenda)
- Reducing Vulnerability (including Substance Misuse, Mental Health, Modern Slavery, Prevent, Hate Crime)
- Reducing Burglaries (links to organised car crime)
- Anti-Social Behaviour (Including the development of a place-based approach to ASB and other "issues")
- The priorities are the same as 2019/20, however there will be an additional focus on work in respect of females who offend and a place-based approach to ASB and other issues.
- Work will continue in respect of Online Risks and Harms and an approach to listening and involving "people" will be developed.
- The priorities will be taken forward through subgroups of Safe & Sound (Dudley's Community Safety Partnership) and link in with the sub-groups of Dudley Safeguarding People Partnership, Dudley's Health and Wellbeing Board and Dudley's Youth Offending Service Management Board.

Hate Crime

377 hate crimes were recorded in Dudley in 2019 / 2020. Racial Hate Crime is the most commonly reported strand accounting for on average $82.5\,\%$ of hate crimes reported. Homophobic reports accounted for an average of $11\,\%$, Disability an average of $4.5\,\%$, Religious an average of $1.5\,\%$ and Transgender hate crime an average of $0.5\,\%$

Derogatory name-calling stands out as the predominant cause of recorded racially / religiously aggravated intentional harassment alarm or distress, which tend to be triggered by an incident such as road, traffic, parking / parking space or neighbour dispute related incidents.

A number of offences also took place as a result of the offender being identified and challenged for inappropriate behaviour such as re-entering a premises from where they had already been banned, prevented from stealing, recognised from a previous offence, or whilst under arrest.

Offences directed at victims through their occupation are also high, these included Police Officers, Security Guards, Door Staff, Taxi Drivers, Bus Drivers, Support Workers, Environmental Protection Officer, Housing Manager, Shop Staff and Bar Staff.

Partners in Dudley from statutory and voluntary, community and faith sectors work closely together to raise awareness of what constitutes a hate crime or incident and encourage those that experience hate crime or incidents to report what has happened to them.



Multi-Agency Safeguarding Hub

The Adult MASH continues to work with a steadily increasing demand. It is successful in ensuring that adult safeguarding contacts are appropriately prioritised and that responses are proportionate. The MASH will continue to provide signposting and prevention in many cases or direction to an assessment in others, meaning that a safeguarding enquiry is only recommended when proportionate and appropriate. Themes and trends from safeguarding contacts are available for use to respond and to inform work alongside local authority commissioning to drive up standards within commissioned providers.

The information sharing processes with partners continue to ensure that risk assessing the contacts and all decisions are multi-agency. Outcomes for service users are improved by this information exchange which allows a better understanding of the presenting issues and a more joined up approach.

Making Safeguarding Personal guidance is implemented by contact with service users to ensure that goals and outcomes that are important to the people, are achieved.

Adult MASH has responded to a considerable increase in demand without a significant negative impact on response times and the quality of outcomes. Continuing good relationships and information sharing with partners.

Areas for development for 2020/21

- Modern Slavery needs to be further embedded in operational responses.
- There will be a move to a new case management system, which will create opportunities for more accurate recording of data which will be used to improve response times and the quality of responses.
- To improve links and interaction with our colleagues in the Emergency Duty Team and Children's MASH.
- The Adults at Risk Team is one year old and has been a success in addressing need with cohort of people who can be challenging to engage with. A goal for this year is to bring more consistency and clarity to its criteria and processes.

Adult MASH Case Study

B is 60-year-old woman who has experienced depression and dependency.

She was referred to Adult MASH due to a disclosure she had made about domestic abuse from her husband. This disclosure had been made to a nurse.

She explained that her husband was controlling and coercive and had occasionally hit her.

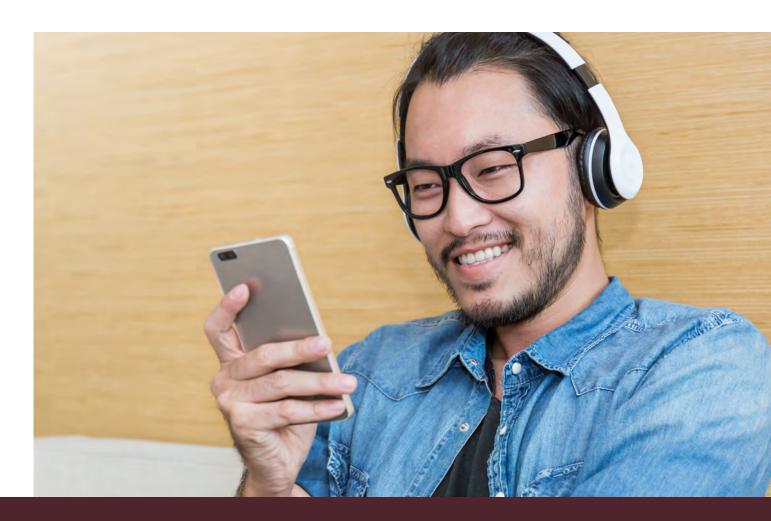
Adult MASH were able to understand the risks through information sharing with partners, particularly police and health colleagues which gave context to our intervention and information about her background.

The Adult MASH social worker was then able to speak with B ensuring that she was free to talk and alone. B explained that she did not want any action taken. Discussions were had about possible options and support, but B did not want to take this forward.

The Adult MASH social worker took full account of B's wishes but also was able to understand that there is a context of disempowerment

that exists in respect of domestic abuse. For this reason, she made the decision to share information with B's GP and to make a referral to MARAC. The safeguarding process was then closed at B's request, but information sharing took place with GP and MARAC to assist with appropriate responses to any future disclosure and as a mitigation of risk.

I feel that this shows a good example of the difficult decisions made daily by Adult MASH social workers to assess risk and external influences on people's decisions, but also to respect those decisions. The need for a balance between supporting self-determination and protection.



Multi-Agency Training



220 hours of training accessed for Adults Courses which meant that over 2,800 hours of training was taken by individuals in the Dudley Borough.



100 delegates failed to attend which lead to 528 hours wasted of valuable CPD and networking time.



41 courses were delivered during the financial year



Delegates representing **34 different services** or organisations have been able to network and build relationships on multiagency training.



824 places were offered via DSAB for training courses, 595 bookings were made on the combined DSAB/DSCB Event Management system.



495 delegates have successfully completed approved training.

During September 2019 the processes that the DSAB operated under changed as Dudley created a Safeguarding partnership. In March 2020 DSAB Adult safeguarding training became the responsibility of the Dudley Safeguarding People Partnership.

Use of Phew system remains popular within the DSPP, and we will be using Phew moving forward as our eLearning platform as it allows us to create online training modules that represent Dudley Policy and process.

Training around Mental Capacity Act, Basic Safeguarding awareness, Safeguarding Level 3, Self-Neglect and Hoarding, Who's After Your Money, were some of the 10 courses we delivered in 19/20.

We also ran some courses jointly with the Dudley Safeguarding Children Board:

- 56 hours of training accessed for joint courses which meant that over 1,700 hours of training was taken by individuals.
- 12 courses were run during the financial year
- 379 bookings made on the DSAB/DSCB Learning system.
- 124 delegates failed to attend which lead to over 600 hours wasted of valuable CPD and networking time
- Delegates representing 41 organisations have been able to network and build relationships on multiagency training.
- 172 have successfully completed training

Feedback from DSAB Online Safety Training

100% of attendees felt that the course met its training aims.

80% said they felt more competent in the area of Online Safety for Adults.

They also said that the training would improve future practice by:

- My daily practice involves supporting vulnerable individuals to maintain their safety when using the internet
- It may enable helpful advice for service users
- It's made me more aware of online safety. Both at work and home with my children.
- Maintaining current levels of online safety
- Be more aware of informing others on how they can protect themselves and protect myself.
- Awareness of issues can help me keep an eye out for service users that may be being abused

"For a basic introduction and awareness this was appropriate. A more in-depth session would be useful" "great training - informative and eye opening. Thank you"

Deprivation of Liberty Safeguards

Deprivation of Liberty Safeguards (DoLS) are part of the Mental Capacity Act 2005. The safeguards aim to make sure that people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom.

The safeguards set out a process that hospitals and care homes must follow if they believe it is in the person's best interests to deprive a person of their liberty, in order to provide a particular care plan. The care home or hospital send a referral to the Local Authority who commission a Mental Health Assessment and Best Interest Assessment and if agreed an authorisation of the DoLS can be granted for up to 12 months

Deprivation of Liberty in the Community (CDoL) was introduced in 2014 and is a protection for people over 16 who are in supported living, extra care housing or in their own homes. A designated worker from the funding organisation completes an application to the Court of Protection and the court decides if they will grant an authorisation for up to 12 months.

There have been 909 requests for DoLS in 2019/20 with a total of 311 assessments taking place. The introduction of a more streamlined SMART process to triage referrals means referrals are assessed and authorised within a shorter time frame.

Dudley MBC Adult Social Care continue to triage, assess and manage all DoLS referrals and currently has one of the lowest waiting lists in the Midlands.

Support has been provided to practitioners' families, CCG and Care Homes around the legal aspects of DoLS and the process.

Areas for development for 2020/21

- To continue working with regional colleagues to benchmark good practice
- Through training and auditing of assessments there will be a focus on embedding necessary and proportionate principles into all Assessments
- Improving the content of the assessments to ensure they are precise, specific and legally literate.

On 1st April 2022 DoLS will be replaced by Liberty Protection Safeguards (LPS) as introduced in the Mental Capacity (Amendment) Act 2019. Through 2020/21 plans will be developed to ensure LPS is implemented in a timely manner.

Safeguarding Adult Reviews

All safeguarding is complex, challenging work but this is never more so than when an individual dies or is seriously harmed through abuse or neglect. The impact on families, carers and the professionals involved should not be underestimated and is never taken lightly by any organisation or professional.

A vital role of DSAB is to seek assurance on the effectiveness of local safeguarding activity and to ensure practice continually improves. It is required to commission Safeguarding Adults Reviews (SARs) to identify whether lessons can be learnt about the effectiveness of multiagency working to safeguard adults at risk.

The Safeguarding Adult Reviews (SAR) sub-group is multiagency and has responsibility for ensuring that the SAR protocol is revised at least annually and that any SAR referrals comply with the process. The sub-group also has responsibility for identifying and cascading the lessons learnt from any reviews.

In 2019/20 two SARs have been commissioned which met criteria, and an independent, external Review Author was appointed; this supports the SARs credibility and helps to create a more conducive environment to facilitate and encourage discussion amongst involved stakeholders. These are expected to be concluded in 2020/21.

Key achievements

- The SAR protocol has been reviewed to ensure continuous improvement and consistency with Regional SAR procedures.
- Engaged with the Safeguarding Adult Board Managers National and Regional Networks to share good practice developed by other SABs and maintained links and reporting relationships with Community Safety Partnerships that are managing Domestic Homicide Reviews (where they involve adults with care and support needs)
- Briefings have been delivered through DSAB which aimed to promote good multi-agency working guidance, challenge and focusing on supporting people and families being realistic about their capabilities

Areas for development for 2020/21

- To establish a rapid review process for Adult reviews
- Develop training to ensure that partner agencies had the skills to write Internal Management Reports (IMR) that would be required when completing a SAR.
- Learning from parallel processes such as Domestic Homicide Reviews (DHRs), Serious Incident Reviews (SIRs), Coroners Inquests and Learning Disabilities Mortality Reviews (LeDeR). Each process may review cases and issues from different perspectives but highlights the importance of working together to ensure consistency between parallel processes.
- Continue to develop the Learning and Improvement
 Sub Group which is considering safeguarding reviews
 across the life course to ensure we deliver learning
 messages about improvement and change, leading to
 better awareness of the SAR process and how learning
 can be translated into practice for professionals



Appendix 1:

Falls Prevention Pathway – Safeguarding case study

Dudley Falls Prevention pathway is an integrated pathway reducing falls for the population of Dudley.

The pathway has had many positive effects on patient experience and has been successfully received by patient groups, team members and key stakeholders. Teams within the pathway have been able to come together to combine existing best practice from across health and social care and develop new ways of working to enhance staff effectiveness. All staff have been upskilled as a result of the integrated approach and now have improved knowledge of health and social care services.

Brief outline summary of Integrated Falls Pathway:

A single point of access - the Falls Single Point of Access (SPA) acts as a hub for receipt of all referrals into the pathway. A triage tool ensures patients are directed to the appropriate stream within the pathway.

An integrated falls prevention assessment is used across all teams within the pathway, looking at multiple factors presenting a risk of falls including lifestyle choices and practices, environmental factors, gait and balance problems, therapeutic interventions required, clinical and medication concerns, whilst also identifying wider social issues including addressing community connectedness.

A post assessment action plan, developed with the CCG provides GPs with a summary of treatment and interventions provided to each patient, highlighting areas for their attention or input and detailing services and information patients have been directed to.

Specialist falls exercise programmes are available with proven benefit in the reduction of falls for participants.

A specialist medication review function to reduce falls caused by high risk medications or complex polypharmacy, working with GPs to promote medicines optimisation and to identify patient cohorts for review.

Monthly MDT meetings take place to facilitate interaction and discussion of patients within the multi-disciplinary team. The meeting allows representatives from each stream of the service to discuss patients presenting with complex needs to improve outcomes in these cases.

Policies and procedures to support the smooth running of the integrated pathway have been developed and a system of moving patients between streams, depending on patients' clinical needs, is in place.

Patient data is recorded by all teams on a database, hosted by Dudley Group, developed to enable patients and their treatment to be tracked across the pathway, irrespective of team.

Post Assessment Treatment Routes

Post assessment interventions are provided by the various teams and disciplines which make up the pathway.

Stream One Falls Advisors prescribe and install low level aids and adaptations to address identified home hazards and compensate for any identified deficit in functional capability in order to promote continued independence. Other issues identified during the assessment process are also addressed through referrals to partner agencies within the Local Authority, community health sector and the wider community.

Stream Two is staffed by Allied Health Professionals and Therapy Assistants. Treatments focus on regaining functional ability through a combination of specialist exercise, physiotherapy, vestibular treatment and occupational therapy intervention focused on re-enablement. Stream Two sits within the broader Dudley Rehabilitation Service (DRS), enabling patients whose falls are attributable to a deterioration in a chronic neurological condition or a stroke to be seamlessly reassigned to a more appropriate team rather than requiring a secondary referral. This provides an improved experience and outcomes for these patients.

Stream Three Falls Nurses assess patients in a clinic setting and aim to see patients within 3 weeks of referral into the falls pathway. The Falls Nurses see patients where the cause of falls is unclear and there are concerns around an undiagnosed medical condition. Following assessment, the nurses request any follow up investigations needed before the patient is seen by the falls specialist Consultant Geriatrician.

The **Falls Pharmacist** function is provided by the Older Persons Specialist Pharmacists (OPSP) and Technician within the CCG commissioned Primary Care Pharmacy Service. Together they provide medicines expertise and support to all treatment streams in the falls pathway by conducting a holistic medication review with patients who are identified as at an increased risk of falls, either due to a specific 'high risk' medication or the complexity of the patient's polypharmacy. If any issues are identified during the review, a plan is agreed with the patient or carer to either change, reduce or stop the implicated medication. The Technician also works with CCG GP surgeries to identify patient cohorts who meet certain criteria for proactive review.

Falls specialist exercise is the final core intervention across the three treatment streams, with three levels of instruction offered to patients following physical assessment and testing, as part of the assessment process. All programmes delivered are recommended in the NICE guidelines and are evidenced as effective in both the primary and secondary prevention of falls.

Stream Zero aims to promote bone health and reduce the prevalence of falls through action on modifiable risk factors at a population level. The team consists of a Programme Manager, Senior Health Improvement Practitioners, and Health Improvement Practitioners from a range of Public Health teams as well as the Park Activators and is led by the Consultant lead for Healthy Ageing.

Additional Key Achievements

The introduction of a standard multi-factorial assessment for all patients within the pathway, irrespective of the Stream they are being treated in, has greatly improved consistency for patients. It has also led to a substantial upskilling of the social care staff in Stream one who now undertake a more clinical review, including blood pressure readings, gait and balance analysis and an assessment of cognitive state, in line with their health colleagues.

This universal assessment tool has also effectively reduced duplication of effort allowing utilisation of services across the borough to be substantially improved.

There has been knowledge enrichment across all teams, with Adult Social Care staff gaining clinical and pharmaceutical knowledge and Clinicians and Allied Health Professionals from Dudley Group gaining an understanding of the patient's wider social context and appropriate non-clinical solutions. This has helped to create a more rounded team whose members are able to conduct a truly holistic assessment of each patient's circumstances.

Patient experience has been standardised and significantly improved with patients able to move around within the pathway from stream to stream seamlessly whilst remaining within one service. Waiting times have been reduced and patients whose needs would be better met by a specialist rehabilitation team are now transferred seamlessly, resulting in improved experience and outcomes for these patients.

The three completely new elements of service provision within the pathway have been extremely effective:

The Falls Pharmacy team has proved successful in medicine optimisation and the removal of high-risk medications leading to a reduced falls risk for reviewed patients. Targeted searches have commenced to identify patients most likely to benefit from interventions within the pathway and planned Fracture Liaison Service and patients identified as at risk from Osteoporosis have been prescribed bone strengthening medication.

The Falls Specialist Nurses in Stream Three have transformed the experience of patients with the highest level of need for clinical review. Prior to the launch of the pathway referral to treatment (RTT) waiting times were at the 18-week limit set by NHS England. The Nurses now assess all patients waiting for Consultant review within 3 weeks of the referral being made and are able to prioritise those with urgent review needs. Work has also been progressed on the development and launch of a Fracture Liaison Service for Dudley Group.

The Stream Zero initiative has linked the population level interventions around falls prevention and bone health to the existing patient specific services for the first time. This has enabled the pathway to effectively reach the whole adult population of Dudley and achieve long term and sustainable improvements to health outcomes through embedding falls prevention messages and strength and balance exercise into the wider exercise provision available within the borough, both within Local Authority delivered and commercial environments. The Stream Zero initiative has also demonstrated successful collaboration and co-operation with teams that sit outside the pathway through the use of Park Activators within the Healthy Places team to implement elements of the falls strategy.

Appendix 2: Dementia Services - Safeguarding

Dementia is an umbrella term used to describe a range of symptoms associated with cognitive impairment. The most known types of dementia are Alzheimer's, vascular dementia, Lewy bodies and frontotemporal.

There are currently over 4000 people in Dudley living with dementia. Dudley CCG has a target diagnosis rate of 67% (National England Benchmark) This equates to 5152 people living in Dudley by 2025 (of which 100 people are under the age of 65) currently the diagnosis rate is 64.8% and there is evidence of an increase in the rarer forms of dementia.

The Dementia Strategy for Dementia 2017-2019 was based on national guidance set out in Living Well With Dementia: A National Dementia Strategy 2009 (NDS,) the subsequent Department of Health Quality Outcomes for People with Dementia, the NICE Quality Standard for Dementia, the report from the West Midlands Quality Review Service "Review of Dementia Services for the Dudley Health Economy, Dementia and People with Intellectual Disabilities (2015), the Prime Ministers Dementia Challenge for 2020, The Care Act of 2014, 2020 challenge on Dementia Implementation Plan.

Through regular steering group meetings, the strategy aims to support people living with dementia and their carers to be cared for in their preferred place of care and reduce the number of people prematurely entering long term care.

The strategy is underpinned by the commitment to the values of dignity and respect and the principles of person centred/led support

Service improvement is achieved by:

- Developing and re-designing clear pathways for people to access and move through services
- Improve the person's experience and quality of life
- Reducing the incidence of dementia in the long term, through raising awareness of the link between health lifestyles and brain health
- Strengthening joint working across agencies and developing new models of service provision
- Standardising one holistic assessment process across all agencies
- Improving the service in line with evidence-based research and meet or exceed the recommendations in relevant protocols, process or quidelines.
- Monitoring and evaluating the impact of these changes by consulting with people living with dementia and their carers
- Challenging against stereotypes

Key achievements 2019/20

High Level Activity

Delivery on the dementia strategy and "Making it Happen" is being achieved through high level activity planning. Key areas have been identified, with nominated leads who are representative of the dementia strategy group to ensure that areas of development are achieved. Where necessary relevant professionals or partnership members are co-opted to support the developmental work. This high-level activity is reported back to the strategy group and a RAG rating system is used to track progress against key milestones. This happens on a bi-monthly basis.

Enable equal, timely access to diagnosis treatment and support

Dudley Clinical Commissioning Group is required by NHS England to achieve a minimum diagnosis rate of 67% against the suggested prevalence rate. Whilst this figure has not been achieved, Dudley CCG has identified funding to enable GPs greater access to scans and a single point of referral multi-disciplinary Memory Assessment Service based on a multi-disciplinary model comprising of Mid-Grade Psychiatrist, Consultant, Psychologist and Specialist Dementia Nurses has been commissioned. This will be a point of referral for GPs who lack experience or confidence in diagnosing dementia, whilst also providing a review service every six months for people who do not have a confirmed diagnosis of dementia but have the signs of cognitive mental impairment that could develop into dementia.

Dudley CCG has commissioned a two-year contract for two Admiral Nurses (who are trained specialists) to support post diagnostic needs particularly where the person is not living well with their dementia due to the complexity of need. Dudley Walsall Mental Health Trust will provide direction and line management support of these professionals.

To support people with sensory impairments, sight and hearing, dementia awareness raising amongst the Dudley Sight and Hearing support teams has taken place. With support from NHS England dementia awareness sessions have taken place with local opticians and associated hearing test centres. This level of support has also been extended to local dental practices. The positive outcome has seen a protocol being established that allows practitioners to refer people into the dementia pathway via a referral form linked into GP practices.

Preventing and responding to crisis

The Dementia Strategy aims to support prevention of crisis by signposting and linking people into a range of preventative support services provide by the local authority, health and voluntary sectors. Some people living with dementia will experience a period of crisis that requires specialist interventions.

The Older Adults Community Mental Health Team, has become an enhanced team and has remodelled crisis assessment and home treatment service to offer crisis response after 1700 hrs over seven days and the Home Treatment service is seven days per week from 0800 hours to 2200 hours, working with people with dementia in their own homes or if in care homes. Where this support cannot be safely managed in their home/care home environment or within the acute hospital there are dementia assessment and treatment beds available at Holyrood, Bushey Fields Hospital.

For people who are receiving treatment in hospital it is imperative that staff have a good understanding of dementia and how clinicians need to modify their behaviour when interacting with a person with dementia to help avoid the person remaining in hospital longer than necessary. Within the acute hospital, Russell's Hall, there is an identified lead mental health practitioner nurse who has introduced a rolling programme of dementia friends awareness sessions, identified dementia champions amongst all levels of staff and has influenced the introduction of dementia friendly design principles i.e. signage.

Adult Social Care Occupational Therapy Services have drawn on the expertise of the building design principles applied to the dementia gateways to work in partnership with Worcester University to develop a bespoke training course for its staff. This dementia aware and caring for people in their own homes training has been delivered to OT's in housing and adult social care, building services asset management team and adults learning and development team. Consequently, it has been identified how teams within the council can work better together to influence future new builds with low cost design features and best practice by drawing on internal expertise.

Adult Social Care Occupational Therapists are working with dementia advisors to identify people who may benefit from property adaptations that can be made using the Disabled Facilities Grant being introduced when they are first diagnosed with dementia. The aim being the persons become familiar with the changes at a time when they can learn and retain skills so that there is the potential to avoid premature admittance to residential care due to inappropriate bathing facilities that has affected the persons self-confidence; reduce the risk of falls when using inappropriate facilities that may result in accident, injury and an unplanned stay in hospital.

The use of assistive technology and digital technology to enhance interaction between the person with dementia and those caring for them (paid/unpaid carers) continues to be explored. Reminiscence Interactive Therapy Activities (RITA) which is a touch screen PC or iPad provides people with dementia the opportunity to produce life story records, communication collages and participate in activities. Devices have been upgraded in the dementia gateways and additional devices introduced into a ward at Bushey Fields, Carers Network, three residential care homes, telecare and community care service. Evidence suggests that when a person is feeling uncomfortable and may be displaying behaviour that is socially unacceptable or demanding and impacting on others they can be distracted, and behaviour de-escalated by using the many programmes available as it will prompt discussion around familiar topics. The communication collage that will give clues to who the person is, what their needs, dislikes, preferences can be shared by the person with professionals they may meet when in hospital, or whilst in respite care

Playlist for Life has been introduced into Dudley. This is an interactive tool that uses music to trigger memories which can then prompt interaction between the person with dementia and their carer. This is a low-level intervention that can have a calming effect if a person is feeling anxious, and an activity that can help to reduce the feeling of isolation or loneliness because it can be shared with other people.

Support for people in care homes

In addition to the development of the crisis assessment and home treatment service referenced above the team will link with care homes during weekdays to avoid admission to hospital by people with dementia by providing a support and education role for staff.

With support from a nurse practitioner all care home staff will have received training on dementia care- the aim being to avoid inappropriate admission to hospital by supporting staff to identify and manage urinary tract infections and distinguishing the effects of delirium.

In addition to this all care home staff have been supported by Macmillan Nurses linked to Mary Stevens Hospice to undertake bespoke training for end of life and palliative care to support people to be cared for in their preferred setting rather than in hospital.

Informed and effective workforce

Adult Social Care Learning and Development Team have worked with the dementia services to develop a bespoke training programme to raise awareness of what dementia is and best practice guidelines for staff to provide appropriate and timely support to people living with dementia. This half day training is aimed at all levels of staff across the Council.

There are a number of employees within the Council who have been trained by regional Alzheimer 's Society as Dementia Champions and these staff provide regular opportunities for employees to achieve Dementia Friends Awareness status as part of the national Prime Ministers challenge 2020.

There are also independent volunteers, Age UK and Local Alzheimer Society volunteers who deliver Dementia Friends Awareness to GP surgeries, community groups, voluntary groups, and youth organisations.

Dudley CCG deliver regular GP training focuses on presentation of dementia, improving support in primary care and palliative care and what resources are available within the wider community.

Providing quality in end of life care

A care home impact team made up of nurse practitioners has been established to support care homes that have high levels of admissions to hospital and present with Care Quality Commission and safeguarding concerns. This also includes support from palliative care specialists.

Links have also been made with the advanced care planning group, chaired by a lead hospital consultant in palliative care to ensure that the documentation "planning for your future care" are provided as an easy read version.

Supporting carers of people with dementia

The Dudley Carers Network supports carers by offering carer assessments, managing the allocation of availability of a short-term sitting service, and encourages membership of the Carers Alliance.

Every township hosts a Dementia Café which is a safe space that carers and the person who is living with dementia can attend once a month. These cafes are run by the local Alzheimer's Society and provide an information giving service alongside peer support and a social activity.

Alzheimer's Society continue to offer their Carers Information Programme. Level one at the point a person receives a diagnosis of dementia to alert carers to how the relationship with their loved one can be affected by dementia; level 2 is offered six months later and provides support for the carer and person to live well with dementia.

Public Health continue to provide a series of self-management programmes for carers to develop their own coping strategies. The programme is delivered by trained volunteers and GP's and Dementia advisors are the main source of referrals of people onto these programmes.

Developing dementia friendly communities

Dudley is recognised, via the National Dementia Action Alliance Organisation that was developed as part of the Prime Ministers challenge on Dementia 2012, as "working towards being a dementia friendly community", the local Dudley Dementia Action Alliance is made up of representatives from the health and social care statutory services, voluntary organisations, independent volunteers, carers of people with dementia and representatives from local businesses, community groups, faith groups, libraries, opticians, dentists. The group meets bimonthly and is currently proactive in engaging with local retailers, arts, culture, leisure and recreational venues, there is engagement with schools, colleges, emergency services, housing and transport. A success of this group has been the development of a travel DVD developed with West Midlands Travel that profiles best practice standards of its employees to support people with a range of vulnerabilities.

Promoting health and well being

Working with Public Health and its Health Improvement Team has seen the development of key messages aimed at members of the community to raise awareness of the steps they can take to reduce their risk of developing dementia. These key messages are linked into GP surgeries via their information TV screens to target all age ranges but primarily to attempt a change in lifestyle choices amongst the 40-50 years+ age group.

Healthier lifestyle messages are also raised by professionals who are supporting individuals with dementia and their carers following the principles of Making Every Contact Count.

Adult Social Care has also worked closely with Trading Standards to support them with the introduction of their Scams Champion Training programme. When these sessions are delivered to members of the financial organisations / businesses / external organisations as well as council employees there is also a dementia friends awareness session provided as part of the raising awareness campaign. Because of this opportunity more people have become aware of telephone blocker equipment which is available to support vulnerable people.

Areas of development for 2020/21 and beyond

- Further awareness raising of the link between healthy lifestyles and prevention of dementia, and how, once a diagnosis has been given maintaining healthier lifestyle choices can influence maintaining the wellbeing of individuals.
- Develop and integrate services that support people living with a learning disability who are diagnosed with dementia. Often the ability to communicate how an individual is feeling or experiencing differences to their well-being becomes a barrier to early diagnosis. This can be improved by ensuring that all GPs review people from the age of 30 years and thereafter annually to establish markers that will aid the confirmation of diagnosis of dementia. Ensure that the diagnosis process used by GP's / Memory Assessment Services is accessible to people with learning disabilities, improve access to support opportunities for people with a dual diagnosis particularly those under 65 years of age.
- Developing links with housing options, both internal and external to the Council, to ensure that dementia friendly design features are factored into adaptations to existing homes and new build properties.
- Review how current post diagnosis support is organised and develop a shared protocol to enable people with dementia to access the resources at the time they need to.
- Protect people with dementia from harm i.e. detection and prevention of scams, protection from dishonest handypersons' and general safety when "out and about"
- Coproduce services and support opportunities with the provider market, including the voluntary and third sector shaped to respond to the dementia challenge locally.
- People from older age groups within black and minority ethnic communities are living with dementia due to vascular risk factors, we need to extend our prevention activities to be more inclusive of this group of people to avoid them becoming isolated and their condition being diagnosed at an advanced stage or when the family is in crisis
- Encouraging GP's and other clinicians to review the materials for assessing diagnosis to ensure they are culturally sensitive and easily understood.

- Increase access to affordable respite care (residential and provided in own homes)
- Hospital avoidance and improved discharge support
- Address the needs of people with dementia who are under the age of 65 years by establishing a co-produce "young persons" support service
- Review the current offer of post diagnostic support to promote the well-being of people with dementia. Occupational Health services, sight, hearing and dental support.
- Dementia Friendly Communities maintain recognition status, influence dementia friendly design features in homes and spaces accessed by the public so that people feel included in their community i.e. shops, transport, leisure facilities, housing
- Raise awareness of the benefits of participating in dementia research
- Support to working carers
- Increase use of assistive and digital technologies

