

SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2013/14

To	Health and Wellbeing Board
Date	10 July 2014
From:	Claire Bruin, Service Director, Adult Social Care, Childrens, Families and Adults
1.0	PURPOSE
1.1	Presentation of the 2013/14 Safeguarding Adults Board Annual Report.
2.0	BACKGROUND
2.1	<p>The Annual Report provides a background to safeguarding work in Cambridgeshire and a summary of the work undertaken by the Safeguarding Adults Board (SAB) and Adult Safeguarding Team within the period April 2013 to March 2014.</p> <p>The SAB brings together representatives of the main agencies in the statutory, voluntary and independent sectors, that work together to safeguard adults at risk of abuse or neglect and both promote and safeguard people’s rights under the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS).</p> <p>The work programme for 2013/14 has resulted in significant achievements in developing continuous improvements in how safeguarding is provided within Cambridgeshire.</p> <p>Some of the notable achievements are:</p> <ul style="list-style-type: none">• GPs adult safeguarding and MCA/DoLS training is being rolled out across Cambridgeshire and Peterborough with support from Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) and NHS England.• Production of a number of short films that explains clearly and simply what safeguarding means and how to report abuse.• The successful evaluation of the Chronic Exclusion Project now in its third year by Making Every Adult Matter (MEAM). <p>In Cambridgeshire we are working closely with all our partners to protect vulnerable people from abuse and we recognise and acknowledge the vital contribution made by staff from a wide and diverse range of statutory, private, community and voluntary sector organisations, in detecting and reporting abusive behaviours and practices.</p> <p>It is these staff, through their hard work, skilful intervention, commitment and courage that has resulted in positive outcomes for a large number of vulnerable people, their families and carers.</p>

3.0	SUPPORTING INFORMATION
3.1	<p>Since 2002/03 when the government launched No Secrets, the framework for safeguarding adults, the number of incidents reported each year has risen from less than 200 in 2002 to 1370 in 2013/14. Since 2011/12 there has been a steady upward trend in the number of referrals received. Raising awareness has been a key activity for the SAB since 2002 and as awareness has grown alongside increasing numbers of people involved with statutory agencies, it was anticipated that referrals would increase. A key responsibility for the SAB is to understand the detail behind the referrals and use this information to prioritise actions.</p>
3.2	<p>Management information has improved in the last two to three years with the development of a formal return by the Department of Health that assists in the capture of information to support the understanding of what is happening locally. This information has helped to identify a number of common issues facing Local Authorities that are being discussed at national and regional level. The two main areas of discussion are set out below.</p> <ul style="list-style-type: none"> • The interplay between compliance against contract standards, poor practice and safeguarding adults from abuse. This raises the issue of whether there should be greater clarity around the threshold for a safeguarding investigation to be triggered when contract compliance or poor practice is identified. • The discussion around the high number of incidents where a service user is the alleged perpetrator and living in a residential/nursing home or specialist service for people with dementia, mental health issues or learning disabilities. The issue focuses on whether these situations should be considered under safeguarding processes or whether there should be an alternative approach focusing on the skills and experience of the providers to manage the triggers that lead to the behaviours that are currently being recorded under safeguarding procedures.
3.3	<p>Management information shows that the person's own home is the most common location for incidents of abuse and there is an interplay with the number of alleged perpetrators who are relatives or family carers. It is positive that we are receiving referrals regarding people living in their own homes, especially as we are supporting more people to remain in the community rather than moving into a residential/nursing home. However, it is difficult to completely remove the risk of abuse in such circumstances because people understandably may not want to change their living arrangements. The development and monitoring of follow up plans to monitor and review these situations is particularly important.</p>
3.4	<p>The management information also shows that the second highest group of alleged perpetrators are "social care support or service provider – private sector". The majority of our direct delivery of care is through the private sector and it is incredibly important that service users, their families, other professionals and other staff working within these services are able to recognise abuse or potential abuse and raise their concerns. The SAB needs to continue to raise the profile of safeguarding and ensure that all agencies working with vulnerable people are equipped to identify concerns that could indicate that vulnerable people may be at risk of abuse as early as possible and share this information across agencies.</p>

4.0	LOOKING FORWARD TO 2014/15
4.1	<p>The Care Act received Royal Assent on 14 May 2014 and from April 2015 Local Authorities will have new statutory duties for helping and protecting adults with care and support needs who are experiencing, or at risk of, abuse or neglect as a result of those needs. This will require each Local Authority to:</p> <ul style="list-style-type: none"> • Establish a Safeguarding Adults Board • Carry out safeguarding enquiries and take action, as required • Conduct Safeguarding Adult Reviews (similar to Serious Case Reviews for children) where there is a cause for concern about a particular case, to learn the lessons • Sharing information to support reviews and enquiries • Provide independent advocacy where required <p>Locally we are well placed to respond to the new statutory duties, and the SAB has agreed to review current arrangements, processes and procedures to ensure that the requirements set out in the Care Act 2014 are delivered from April 2015.</p>
4.2	<p>During 2014/15 the SAB will continue to develop its work programme through sub groups with the overarching aim of protecting people with care and support needs from abuse, and including the areas of work set out below:</p> <ul style="list-style-type: none"> • Strengthening communications for service users, their relatives and the general public around safeguarding. • The provision of training courses to meet the needs of the social care and health workforce, to enable a better understanding of the decision making process in safeguarding whilst taking into account the legal requirements of the Mental Capacity Act and the Deprivation of Liberty Safeguards. • Providing training for GPs for adult safeguarding and MCA/DoLS across the County. • Using the Cambridge University evaluation of outcomes in adult safeguarding to enable people to have more control over the process and thereby achieve the resolutions (or outcomes) they want and that the professionals involved in this process will have a clearer sense of how they are benefiting their clients. • Working with the local independent health and social care watchdog Healthwatch Cambridgeshire who as part of their role will gather views and experiences of people using health and social care services and feed these back to regulators, commissioners and providers. • Working with the performance and information staff to develop a set of safeguarding Performance Indicators linked to the national management information requirements that can be built into the safeguarding monitoring reports which are presented to the SAB.
5.0	ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY
5.1	<p>The work of the SAB contributes to three of the priorities in the Health and Wellbeing Strategy.</p> <ul style="list-style-type: none"> • Priority 2: Support older people to be independent, safe and well. • Priority 4: Create a safe environment and help to build strong communities, wellbeing and mental health.

	<ul style="list-style-type: none"> • Priority 6: Work together effectively. <p>The members of the SAB have to work effectively together to raise awareness of safeguarding within specific groups and the general public and to oversee the arrangements for safeguarding adults with care and support needs who are experiencing abuse or who are at risk of abuse. Through this work the SAB contributes by keeping older people and other adults safe, which can support them to remain confident to live full and independent lives and maintain their health and wellbeing. Further work to raise awareness in the general public will help to develop safer environments and build stronger communities where people feel confident to raise concerns about potential abuse.</p>
6.0	RECOMMENDATION
6.1	<p>The Health and Wellbeing Board are asked to discuss and comment on the annual report with a particular focus on:</p> <ul style="list-style-type: none"> • How we ensure the general public are made aware of adult safeguarding • Supporting the roll out of adult safeguarding training for GPs

Source Documents	Location
Cambridgeshire Safeguarding Adults Board 2012/13 Annual Report	http://www.cambridgeshire.gov.uk/downloads/download/147/cambridgeshire_safeguarding_adults_board