



Thurrock Safeguarding Adults Partnership Board

Annual Report 2013-14

OUR VISION FOR SAFEGUARDING ADULTS

Thurrock is a place where every adult, in every home, in every community, matters. Our vision is:

“To work in partnership, preventing abuse and ensuring excellent practice and timely responses to the safety and protection of individuals or groups within our communities.”

Safeguarding is everyone’s business and our vision is shared by all of our partner agencies. It cannot be delivered by agencies acting in isolation. It can only be achieved by agencies working together, through common plans and strategies.

Thurrock’s Safeguarding Adults Partnership Board works with agencies to improve practice, reports and responses to adult abuse and ensures that our policies and procedures underpin and provide a solid framework for the protection of vulnerable adults in our community .

In partnership with

Age Concern

Basildon and Thurrock University Hospitals NHS Foundation Trust

East of England Ambulance Service

Essex County Fire and Rescue Service

Essex Police

Essex Probation

Healthwatch Thurrock

Local residential and Domiciliary Care Providers

NHS England

North East London Foundation NHS Foundation Trust

Public Health

South Essex Partnership University NHS Foundation Trust

Thurrock Clinical Commissioning Group

Thurrock Community Safety Partnership

Thurrock Council, Adult Services, Children’s Services, Housing

User Led Organisations

Contents

	Page
Our vision	2
What is Safeguarding Adults	4
Foreword by Chair – Graham Carey	5
National Changes – Care Act 2014	6
Principles of Safeguarding	
Empowerment	7
Protection	8
Prevention	9
Proportionality	11
Partnership	12
Accountability	15
Post Script – Les Billingham	16

WHAT IS SAFEGUARDING ADULTS?

All persons have the right to live their lives free from violence and abuse. This right is underpinned by the duty on public agencies under the Human Rights Act 1998 to intervene proportionately to protect the rights of citizens. These rights include Article 2 “The right to life,” Article 3 “Freedom from torture,” (including humiliating and degrading treatment) and Article 8 “Right to family life” (one that sustains an individual).

Any adult at risk of abuse or neglect should be able to access public organisations for appropriate assistance and interventions which enable them to live a life free from violence and abuse. This will include access to the civil and criminal justice system and victim support services. Remedies available should also include measures that achieve behaviour change by those who have perpetrated abuse or neglect.

Definition of Abuse

Abuse is a violation of an individual’s human and civil rights by any other person or persons. Abuse may consist of single or repeated act. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

“No Secrets”, Department of Health 2000

Definition of a Vulnerable Adult

An adult (a person aged 18 years or over) who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or serious exploitation.

“No Secrets”, Department of Health 2000

FOREWORD BY CHAIR - Graham Carey

This is the sixth annual report for Thurrock's Safeguarding Adult Board that I have had the pleasure of contributing to and much has changed, and improved, over those 6 years. This Board has not, as yet, had cause to consider commissioning a Serious Case Review into the death of a vulnerable adult; nor have we uncovered the level of abuse and ill-treatment that regularly make national headlines. Good fortune has undoubtedly played a part in that but so too did the local authority's decision in 2009 to put significant resources and effort into protecting vulnerable adults. Just as importantly we have to acknowledge that the amount of hard work that adult social care and its partners have put into this agenda over the last 5 years has contributed significantly.

My point, as we reflect in this report upon another successful year for adult safeguarding in Thurrock, and as we prepare to move adult safeguarding onto a statutory footing under the Care Act 2014, is that we ought perhaps to caution ourselves against complacency borne of success. Elder abuse and ill treatment of vulnerable adults continues to be a concern in Thurrock and past success is no guarantee of future success, particularly in this current economic climate. The number of elder people in the borough is growing and will continue to do so. Opportunities for fraud and deception abound and more "vulnerable" adults are living within the community rather than in residential or institutional settings. As changes approach in the year ahead, we, as a Board, must ensure that we remain focused on our primary task of keeping vulnerable people safe from harm.

This report has a new format and has been constructed around the Government's six principles of adult safeguarding. Future reports are likely to follow this format. Also, whereas in previous year we have detailed all recorded safeguarding concerns, this report differentiates between alerts and referrals in line with changes nationally. An alert has to pass a threshold to become a referral which merits attention from the safeguarding team and 25% of alerts failed to meet that threshold and were referred elsewhere. This ought to enable the safeguarding team to concentrate its resources where they are needed most.

There are many partners who need to be thanked for their contribution to our success. All those that work hard on the Operational Group; our health partners; Essex Police; the Probation Service; Healthwatch; Trading Standards; the Care Sector and, Essex Fire and Rescue. I also thank those individuals who have made a particular difference and I begin, as in years gone by, with Jill Moorman and her safeguarding team. Also Les Billingham, Fran Leddra, Sarah Attersall, Louise Brosnan, Bill Clayton and Julie Thompson from the Local Authority. Jayne Foster-Taylor and Andrea Metcalfe from the CCG, Michelle Cunningham from the Community Safety Partnership. Also Neil Woodbridge and Kim James. Finally Councillors Rice, Hebb and Gaywood for their continued support over the year.

NATIONAL CHANGES

THE CARE ACT 2014

Adult safeguarding

The Act sets out the local authority's responsibility for protecting adults with care and support needs from abuse or neglect for the first time in primary legislation.

This is vital to ensure clear accountability, roles and responsibilities 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. Local authorities are given a lead role in coordinating local safeguarding activity. DOH have produced draft guidance which once confirmed become the framework from which our Safeguarding Board will operate. To date the Board has been assessed to be able to meet all of the responsibilities required. The SET group will be embarking on a review of the SET guidelines to ensure that they will be compliant in April 2015 summary below.

- the principles of safeguarding which should underpin all work to protect people from abuse and neglect
- types of abuse and neglect
- local authorities' responsibilities to carry out safeguarding enquiries where it is suspected that someone is suffering or at risk of abuse or neglect
- creating Safeguarding Adults Boards (SABs) in every area to bring together the key local partners to focus on safeguarding strategy and practice
- conducting Safeguarding Adults Reviews where there is a cause for concern about a particular case, to learn lessons for the future
- sharing information between local and national organisations to support reviews and enquiries
- providing independent advocates to enable some people who would otherwise have difficulty to take part in an enquiry or review

<http://careandsupportregs.dh.gov.uk/>

STRATEGY DAY

In order to ensure that the Board will be meeting their responsibilities in line with the new responsibilities Board Members met to develop a clear Strategy Document. This Strategy Document has been completed for implementation in April 2015.

HOW WE HAVE MET THE PRINCIPLES OF SAFEGUARDING

In May 2011 the Government set out its policy on Safeguarding Adults which included a statement of principles from which Local Authorities including social services, housing, health and the police could develop and measure their local safeguarding arrangements. They continue with the Care Act Guidelines. It is these principles which form the framework for this year's annual report.

Empowerment – Personalisation and the presumption of person led decisions and informed consent.

In the majority of safeguarding referrals, where possible, the team have worked with

Vera asked for help when faced with difficult living circumstances and financial abuse from her family. Working closely with housing we were able to assist with a move which has been life changing for her - her words "Thank you for bringing me into the sunshine."

the individual concerned or their representative, which could be a family member or friends or an advocate if they lacked capacity. This has led to positive outcomes for 90% of the cases closed as substantiated or partially substantiated, with the risks reported to have been removed or reduced. Even when the outcome of an investigation is concluded as unsubstantiated, by working with individuals we were able to reduce or remove risk in 28% of the cases. There were 12 incidents where investigations were ceased at the

individual's request, but before each closure the individual was furnished with information to assist with that decision or the ongoing risks.

A new addition to the Safeguarding Team is our Mental Capacity Act and Deprivation of Liberty Lead. As a result we have been able to provide enhanced support to practitioners in locality teams when assessing capacity of individuals as well as providing advice and information to providers and other parties.

The Safeguarding Team has signed up to the next round of "Making Safeguarding Personal" for 2014 to enhance practice and empowerment of individuals and to develop measures of the success of this approach.

How SEPT have involved people in development of safeguarding services

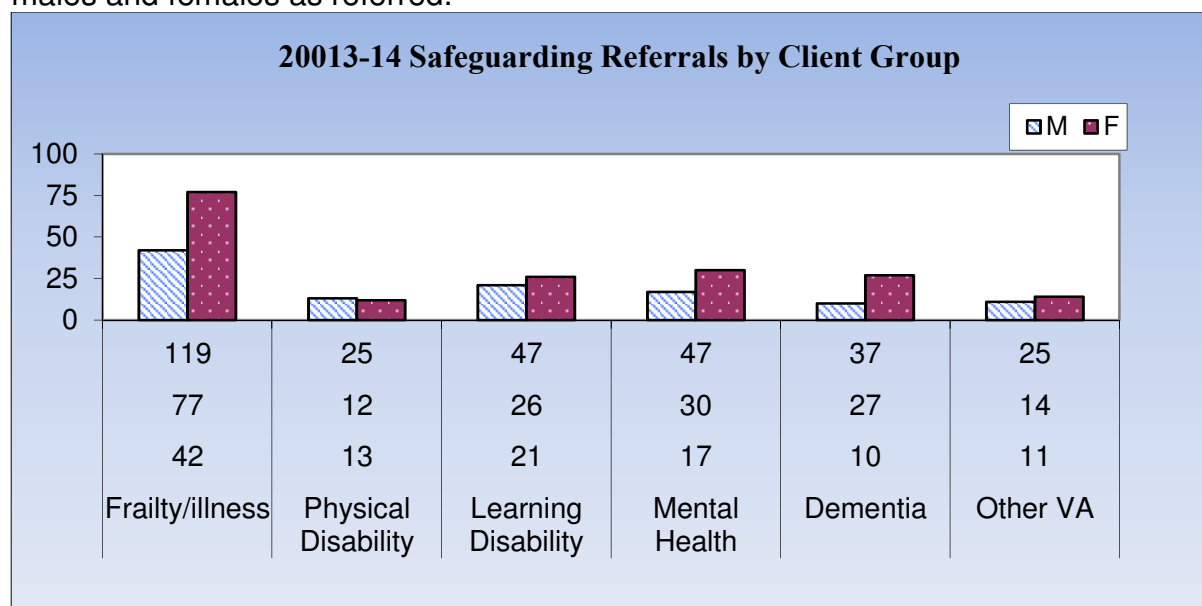
The Trust has developed a Safeguarding Questionnaire for those subject to investigation. Feedback is reported regularly and influences the process of engaging service users, their families and advocates. Two 'Lets Talk' Service User and public events have been held this year.

The outcomes of audits and Service User feedback demonstrates an improved service has been delivered and experienced by Service users.

Elaine Taylor, Associate Director, Safeguarding.

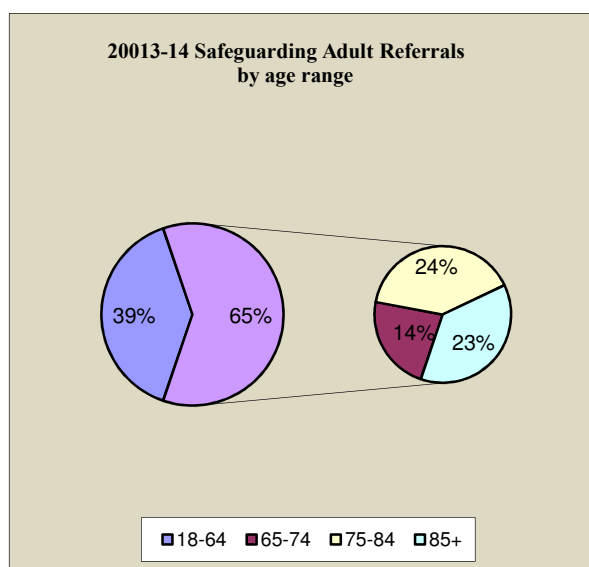
Protection - Support and representation for those in greatest need.

A total of 418 contacts were made relating to safeguarding queries from April 2013 to March 2014, 107 (25%) of those were not processed further and remained as alerts of the remaining 311 which were taken to the referral and investigation stage 36 were managed by SEPT. The following chart identifies the type of vulnerability for both males and females as referred.



A larger proportion over 65s are reported as victims 65%, this chart identifies that it is the older range of this age group who are affected.

Of those aged 85 and over, 28% were potential victims of Financial Abuse, with approximately 50% substantiated, partly substantiated or inconclusive. Likewise for those 40% reported as potential victims of acts of neglect or omission.



Prevention - It is better to take action before harm occurs.

Training remains a key element of our preventative work, both for people to understand what abusive practice is as well as to be confident to report it

The safeguarding basic awareness programme was reviewed and redesigned with the support of the Thurrock Safeguarding Team. This revised programme was used with a train-the-trainer in September of last year. In addition to this the programme delivery was commissioned to an external trainer. Running for ½ day twice a month 419 people have attended, the majority from private, voluntary and independent sector.

In addition, this year saw the Workforce Planning team take on the Corporate Induction Programme. Since safeguarding is everybody's business, this enabled us to strengthen the programme in terms of safeguarding adults and safeguarding children.

Other training opportunities have included sessions on Managing Service Users Finances, Understanding Hoarding and Deprivation of Liberty
Bill Clayton.

Two 2 stay safe events for people with learning disabilities were held, These engaged about 150 residents on how to keep themselves safe both in and out of the home. We also included how to report hate crime.

Community Safety Events 2013/14

An event was held for 15 people with sensory impairments to improve their feelings of safety. As a result they received home security equipment, we are in the process of ordering different types of personal alarms, and a sheltered complex received a visit and talk from the crime prevention officer

The Safeguarding Team and Local Area Coordinators have worked alongside Trading Standards Officers to visit people who we had information may have been targeted by scam mailers. We provided information and advice for many as well as identifying some people who been victims of these scams and we continue to work with these individuals.

In addition to this as part of our days of action in crime hot spot locations our trading standards and housing officers engaged with 525 vulnerable and elderly residents and advised them with regards to bogus callers

30 Neighbourhood watch coordinators have been trained to be dementia friends as part of their stay safe event where they will be in the community offering crime

To Strengthen Communities - professionals from adult social care have been given information so that they are able to provide residents with basic crime prevention advice and home security items.

And as part of our days of action in crime hot spot locations our trading standards and housing officers engaged with 525 vulnerable

and elderly residents and advised them with regards to bogus callers.

Michelle Cunningham, Thurrock Community Safety Partnership Manager

SEPT – Prevention and Awareness Raising

- A series of preventative and awareness raising initiatives have been implemented this year within the Trust and audits have evidenced that staff awareness and response to Safeguarding issues has improved in the timeframe process and quality of investigations. Analysis of all SEPT safeguarding cases are analysed for any trends and reported to the Trust Safeguarding Group
- All relevant staff in the mental health service have received a series of specific training programmes this year including Investigations and PREVENT
- The numbers of referrals this year continues to rise and reflects the training programmes delivered which aim to raise awareness of safeguarding issues. .
- Safeguarding policies were updated in September 2013. The Training strategy has been updated and all Trust staff have been mapped against the level of training required dependant on their role

Elaine Taylor, Associate Director, Safeguarding.

The Corporate Appointee Team relocated to sit with the Safeguarding Adults team in November 2013. This has been very beneficial in sharing knowledge and expertise where there are safeguarding issues and there has been increased liaison with local banks as a result, and we continue to have a strong relationship with the Office of the Public Guardian.

Work in raising staff awareness on Lasting Power of Attorney issues, has continued with drop in sessions in January and February 2014 with more planned through the coming year, including expanding to other groups, for example General Practitioners and Practice Managers.

Sarah Attersall – Financial Management Officer, Corporate Finance.

Vulnerable People's Protocol.

A vulnerable people's protocol has been developed between housing and adult social care. The purpose of the protocol is: -

- The prevention of vulnerable people at risk in their homes or those who face re-housing or eviction, wherever possible, through improved joint working across Housing, Social Care Services and partner agencies.

The Impact of this event was that - All staff were better equipped to deal with vulnerable people in vulnerable situations and it spurred additional valuable activity such as commissioning hoarding training.

Dawn Shepherd, Housing Needs Service Development and Strategy Manager, hosted a morning launch event on the 1st of July 2013.

Continued work on this and other initiatives with Housing are regularly discussed at the Housing Safeguarding Group which is a Sub group of the Operational Board.
https://www.thurrock.gov.uk/sites/default/files/assets/documents/vulnerable_people_protocol_201402.pdf

Proportionality – Proportionate and least intrusive response appropriate to the risk presented.

Over the year 107 of the contacts we received (25%) were screened and deemed to be alerts thus not processed to referrals for safeguarding investigation. This has resulted in information and advice being given to individuals and their families or the referrers and professionals

Our new process of only processing alerts to referrals after sufficient information gathering has also resulted in proportionate responses to health concerns in particular. The main example being on checking on the reasons why a person may have a pressure ulcer and what treatment is already in place. Further work is being undertaken with health colleagues regionally which will formalise this process and ensure that individuals are not subject to safeguarding investigations where this is not warranted, but the appropriate health incident reports are undertaken.

East of England Ambulance Service sends us a copy of every concern they have about a vulnerable adult. These are screened by the Safeguarding Team and directed appropriately, sometimes for a community care assessment rather than a safeguarding investigation being mindful of all of the risks presented in the information shared.

There is good partnership working and effective communication between Thurrock and North East London Foundation Trust Safeguarding Teams. We draw on each other's expertise to ensure the outcome is proportionate to the level of risk or the harm/abuse that has occurred, including appropriate screening of alerts when pressure ulcers are reported.

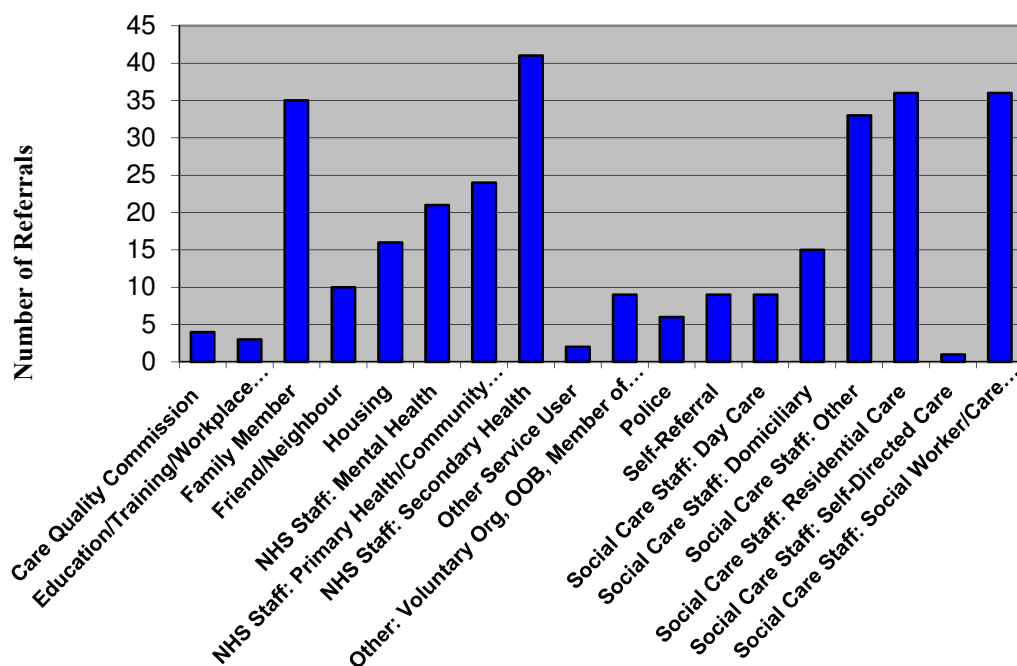
Hilary Hindley, Nurse Advisor,
Safeguarding Adults, NELFT

The numbers of safeguarding referrals made by BTUH have varied month on month, and new systems and processes have been introduced to stabilize and improve the quality of referrals sent to the Thurrock team. An in-hospital feedback loop has been developed; this includes a new safeguarding pathway which is helping staff better understand the essential and important aspects of safeguarding practices. All safeguarding referrals are now screened by the hospital safeguarding team in response to feedback from the Thurrock team about referral quality/completeness and appropriateness. This has ensured joint working continues, whilst tailoring efforts and adding a clearer focus; thus also ensuring that a more effective/efficient process is in place to manage referrals moving forwards. Louise Bell, Adult Safeguarding Lead, Basildon Hospital

Partnership - Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

There is a very good mix of sources of referrals for safeguarding, we have good partnership working with our colleagues in Community Nursing Services and the NELFT Safeguarding Leads as well as with Basildon Hospital Safeguarding Team. Continued work with screening concerns has enabled us to redirect when appropriate and therefore enabling us to identify what are alerts and referrals against the threshold criteria. Honest dialogue between the professionals involved has resulted in good working relationships and speedy resolutions for individuals.

Source of Referral



There is a health mix of referral sources across the spectrum of agencies who work with vulnerable people. Particular areas have been targeted over the past year including GPs and we continue to work with the Central Referral Unit for Essex Police to ensure that referrals are made when vulnerable people are victims of crime to afford them appropriate support. This has also included providing Appropriate Adults for people who are both victims and perpetrators at Thurrock Police Stations.

Local Action Group

Safeguarding adults are key members of our partnership approach to anti-social behaviour. We currently have 6 open cases with vulnerable victims and Police, housing and adult social care all make regular referrals with regards to safeguarding

Anneliese Hillyer-Thake, Head of Safeguarding, East of England Ambulance Service NHS Trust

The East of England Ambulance Service NHS Trust works closely with Safeguarding partners around the Eastern Region. The Trust has a good working relationship with Thurrock Adult Safeguarding Board and a designated local lead for safeguarding who supports local working and local focus.

Hilary Hindley, Nurse Advisor, Safeguarding Adults, NELFT

TBC and NELFT continue to have a strong working relationship by being open, honest and having mutual respect. We both follow the principles as set out in the SET guidelines working together for the benefit of people under our care.

Local Area Coordinators

This is a new plan which helps vulnerable people stay connected with the people and services that can help them. A scheme called [asset based community development](#) strengthens the connections between people and informal associations around common interests and concerns. These connections help the ideas of local people develop the schemes that suit them.

In the first 12 months of Local Area Coordination within Thurrock, we have worked closely alongside the Adult Safeguarding Team in a number of ways.

There have been 6 introductions directly from safeguarding to Local Area Coordination over this period as the team have identified individuals who are vulnerable that would benefit from LAC support. Also during this time, as Local Area Coordinators have built relationships and worked alongside individuals there have been occasions the LAC has raised concerns to the safeguarding team.

An example of where this joint working has provided great results is the work the LAC did alongside a particular individual that had an open safeguarding case. The relational approach of the LAC working alongside safeguarding, allowed open and honest discussions that have led to small steps being taken to building towards this individual's vision of a good life. The safeguarding officer involved and the LAC's unique approach, providing options to the individual and keeping all agencies involved and updated, was pivotal in reducing the concerns, ultimately resulting in the safeguarding being closed. The individual is now talking about the possibility of volunteering which is something that would not have been the case a few months back.

We have also worked closely with safeguarding and trading standards as part of a project to contact individuals that have been subjected to scam mails. As part of this project Local Area Coordination and Safeguarding looked to identify if there was a need for continued/additional support that may be necessary for those identified who were vulnerable.

Jonathan Biddle, Local Area Coordination Manager

Louise Bell,
Adult
Safeguarding
Lead,
Basildon
Hospital

- The Trust values its strong partnership working arrangements with the Thurrock Country Council's Safeguarding Team; relationships are good, and staff in both organizations have worked hard to ensure effective working practices are in place to ensure that both vulnerable adults, the unborn and children are safeguarded and protected. The Trust made a number of safeguarding referrals to the service; these are always investigated promptly, with the outcomes of investigations being shared to ensure strong understanding of key issues and actions taken. Learning from incidents is being regularly embedded into practice across both teams, and new clinical safeguarding and protecting policies are being introduced at BTUH to continue developments.
- Both vulnerable adults and children's safeguarding teams continue to benefit from a shared understanding of requirements, where investigations are completed there is closure of the loop in terms of practices to prevent abuse. Work remains ongoing at the: individual, team, professional grouping and inter-organizational levels.

Accountability - Accountability and transparency in delivering safeguarding.

Within its work in setting a strategy for the board there will be measures included from which to report next year, in line with the requirements of the Care Act.

The Safeguarding team continue to work with referrers to share the outcomes of the concerns that they have raised. In addition to this we often also work with those people who have been involved with the abuse itself in order for them to understand the consequences of their actions and to try to remedy the situation, often in the way of support. The Making Safeguarding Personal project will further enable us to meet and evidence outcomes for individuals and their carers.

SEPT Quality Assurance

Elaine Taylor, Associate Director, Safeguarding.

- A weekly report to the Trust Executive Team gives assurance of Safeguarding activity and compliance to timescales. The Trust Safeguarding Group monitors the Safeguarding action plan for assurance.
- The Trust has reported consistent improvements in the safeguarding process and outcomes of investigations
- The process for investigating cases has continued to improve. 95% of Strategy discussions and Closures comply with the Local Authority procedures.

We have also been ensuring accountability within training.

The safeguarding operation board supported an “Approved Training” status. In short, this allows external organisations to run their own safeguarding basic awareness training and use the “Approved Status” banner provided they adhere to a variety of measures.

- This programme was introduced to support the cascade trainers who went through the programme in September but I will be looking to rolling it out wider to the Private, Voluntary and Independent sector through 2014-15. Issues have been raised at the Safeguarding strategic board for some time as to the quality of external training and how it is supported.

Bill Clayton, Workforce Development

Post Script - Les Billingham, Head of Adult Social Care – Joint Chair

The year 2013/2014 was an extremely challenging one for those of us involved in the difficult task of safeguarding vulnerable adults. Resources are tightening everywhere as central government austerity continues to bite and demand for social care continues to grow. In safeguarding this growth has been exacerbated by the significant increase in Deprivation of Liberty cases brought about by a new legal ruling, which has potentially increased demand in this area exponentially.

In addition the small matter of the implementation of the Care Act has added to the workload! However I remain very confident that in Thurrock we have the right team and partnerships to ensure that we can deliver these changes, and meet these challenges, whilst maintaining the high standards of performance we have achieved over the last few years

For these and many other reasons I would personally like to thank Jill Moorman and the team for delivering a high quality operational service, partners, both within and outside of the safeguarding board environment, for their committed and proactive support, and Fran Leddra, our Service Manager lead on safeguarding, for her contributions to ensuring high quality support to the operational team and to the strategic development of safeguarding locally.