

# North Somerset Council

## REPORT TO THE ADULT SERVICES & HOUSING POLICY & SCRUTINY PANEL

**DATE OF MEETING: 7<sup>TH</sup> MARCH 2019**

**SUBJECT OF REPORT:  
NORTH SOMERSET SAFEGUARDING ADULT BOARD ANNUAL REPORT  
2017/2018**

**TOWN OR PARISH: ALL**

**OFFICER/MEMBER PRESENTING:  
TONY OLIVER, INDEPENDENT CHAIR, NORTH SOMERSET SAFEGUARDING  
ADULTS BOARD**

**KEY DECISION: NO**

### RECOMMENDATIONS

That the Adult Services and Housing Policy and Scrutiny Panel note the Annual Report of the North Somerset Safeguarding Adult Board (NSSAB) and comment on issues arising from the report that they wish the Board to consider, or to feed into their own future planning.

That the Adult Services and Housing Policy and Scrutiny Panel endorses the NSSAB Business Plan for 2018/21.

#### Reasons for the Recommendations:

A key purpose in presenting the report is to ensure that the Adult Services and Housing Policy and Scrutiny Panel is informed about the performance of the Board, can hold the Board to account for their performance and identify any issues specifically relating to the Council that they determine require action.

A further key purpose of this report is to secure the endorsement of the Adult Services and Housing Policy and Scrutiny Panel to the Strategic Plan for the North Somerset Safeguarding Adult Board (NSSAB).

## 1. SUMMARY OF REPORT

- 1.1 The Care Act 2014 requires each LSAB to publish an annual report.
- 1.2 The key purpose of the annual report is to summarise the work we have undertaken in 2017/18 and to assess the impact on service quality and on safeguarding outcomes for adults at risk in North Somerset. Specifically, it evaluates our performance against the six principles of adult safeguarding, recognising the values

and principles contained in the “Making Safeguarding Personal” initiative, as well as other statutory functions that the NSSAB must undertake.

The six principles are listed below:

Empowerment  
Protection  
Prevention  
Proportionality  
Partnership  
Accountability

## **2. POLICY**

- 2.1 The NSSAB is a statutory body and local authorities have a duty to ensure that the Board is enabled to operate effectively.
- 2.2 It is a requirement of (the statutory guidance) The Care Act 2014 that the NSSAB Annual Report is produced and that it is sent to the Leader of the Council together with the Chief Executive of the local authority, the Chairman of the Health and Wellbeing Board, the Police and Crime Commissioner and the local Healthwatch.

## **3. DETAILS**

### NSSAB Annual Report 2017/18

- 3.1 The NSSAB’s strategic objectives remain the same as last year and are focussed on the six principles of adult safeguarding listed above. The strategic plan has been refreshed by the three strategic leads: local authority; police and BNSSG CCG and informs the sub-groups of their future priorities.
- 3.2 The future ‘next step’ strategic intentions identified have been incorporated into the NSSAB Strategic Plan for 2018/21. In addition to issues arising from the annual report the refreshed strategic plan’s intentions have been identified against a range of national and local drivers including:
  - a) national safeguarding policy initiatives and drivers;
  - b) recommendations from regulatory inspections across partner agencies;
  - c) the outcomes of Safeguarding Adult Reviews (SARs), Learning Reviews and other review processes both national and local.
- 3.3 The annual report 2017/18 includes:
  - A brief overview of the local area safeguarding context with some key context data;
  - A summary of activity of the Board during 2017/18;
  - A summary of activity of the Board’s sub-groups against the six principles of adult safeguarding (as listed above).
  - An overview of performance in key statutory functions notably the Safeguarding Adults Review (SAR) Panel;
  - An overview of the Independent Chair and the Board’s governance and accountability arrangements;

- The Foreword produced to accompany the annual report draws out the headlines in terms of performance. The full report is attached for your information.

3.4 The annual report illustrates a range of improvements that have been secured in the delivery of safeguarding across North Somerset. They also identify a range of improvements that are required in the future and these are reflected in the refreshed NSSAB Strategic Plan for 2018/21.

3.5 The Adult Services and Housing Policy and Scrutiny Panel is requested to note the annual report and to comment on any issues which they believe the Board may wish to consider in the future.

#### **4. CONSULTATION**

4.1 The NSSAB works closely with Safer and Stronger Communities across North Somerset since there is a range of areas of shared interest. PREVENT, for example, features as a key objective.

#### **5. FINANCIAL IMPLICATIONS**

5.1 The safeguarding board has budgets built through the contributions of partner agencies.

#### **6. LEGAL POWERS AND IMPLICATIONS**

There are no direct legal implications arising from this report.

#### **7. RISK MANAGEMENT**

7.1 A representative of the CQC is a member of the NSSAB and attends twice a year. If the NSSAB was ineffective this would be a reputational risk to the Council.

#### **8. EQUALITY IMPLICATIONS**

8.1 No formal equalities impact assessment is carried out on the strategic plan. However, performance data being collected by the Board will include reference to gender, race/ethnicity, disability and other protected characteristics to ensure that the profile of safeguarding data is tested and any related issues identified and acted upon.

#### **9. CORPORATE IMPLICATIONS**

N/a

#### **10. OPTIONS CONSIDERED**

N/a

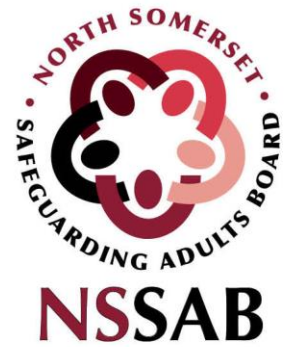
#### **AUTHOR**

Tony Oliver, Independent Chair, North Somerset Safeguarding Adults and Children Boards

#### **BACKGROUND PAPERS**

<http://www.northsomersetsafeguarding.co.uk/userfiles/downloads/403/lsab-annual-report-final-2017-2018.pdf>

# North Somerset Safeguarding Adults Board



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## ANNUAL REPORT

2017 - 2018

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## 1. FOREWORD

Welcome to this, the Annual Report of the North Somerset Safeguarding Adults Board (NSSAB) for the period April 2017 to March 2018.

This document provides an insight into the work which the Board, its executive group and its sub-groups have completed between April 2017 to March 2018 towards achieving our strategic objectives and progressing our business plan.

The purpose of this report is to provide readers with a summary of activity undertaken by the Board and its sub groups over the reporting period. This year, rather than duplicating information which has already been reported elsewhere, where relevant, we are inviting you to make greater use of the Boards' web site and the websites of our partners to obtain more detailed information should you so wish.

The financial and resource pressures I reported in last year's report have resulted in the Board losing its part time business manager and thus many business hours. It is partly for this reason that we have chosen to alter our reporting style.

To minimise the effect of reduced business support, the Board and its sub groups have had to develop smarter ways of working to ensure that we continue to monitor the delivery of quality safeguarding adult practices across North Somerset.

This has only been possible with the ongoing professional enthusiasm and commitment of all involved in Board and sub group business without which we would be unable to deliver our strategic objectives as set out in our business plan.

Our strategic objectives of the Safeguarding Adult's Board remain the same as last year and are focussed on the six principles of adult safeguarding:

- Empowerment: Promoting person-led decisions and informed consent.
- Protection: Support and Protection for those in greatest need.
- Prevention: It's better to act before harm occurs.
- Proportionality: proportionate and least restrictive/intrusive.
- Partnership: Working together.
- Accountability: There is a multi-agency approach for people who need safeguarding support.

The Adults Board continues to work in close collaboration with the Safeguarding Children Board which helps to reduce duplication of work and provides a better understanding of the transition into adult services by those young people whose continue to need adult services.

A summary of member attendance is provided in [Appendix A](#).

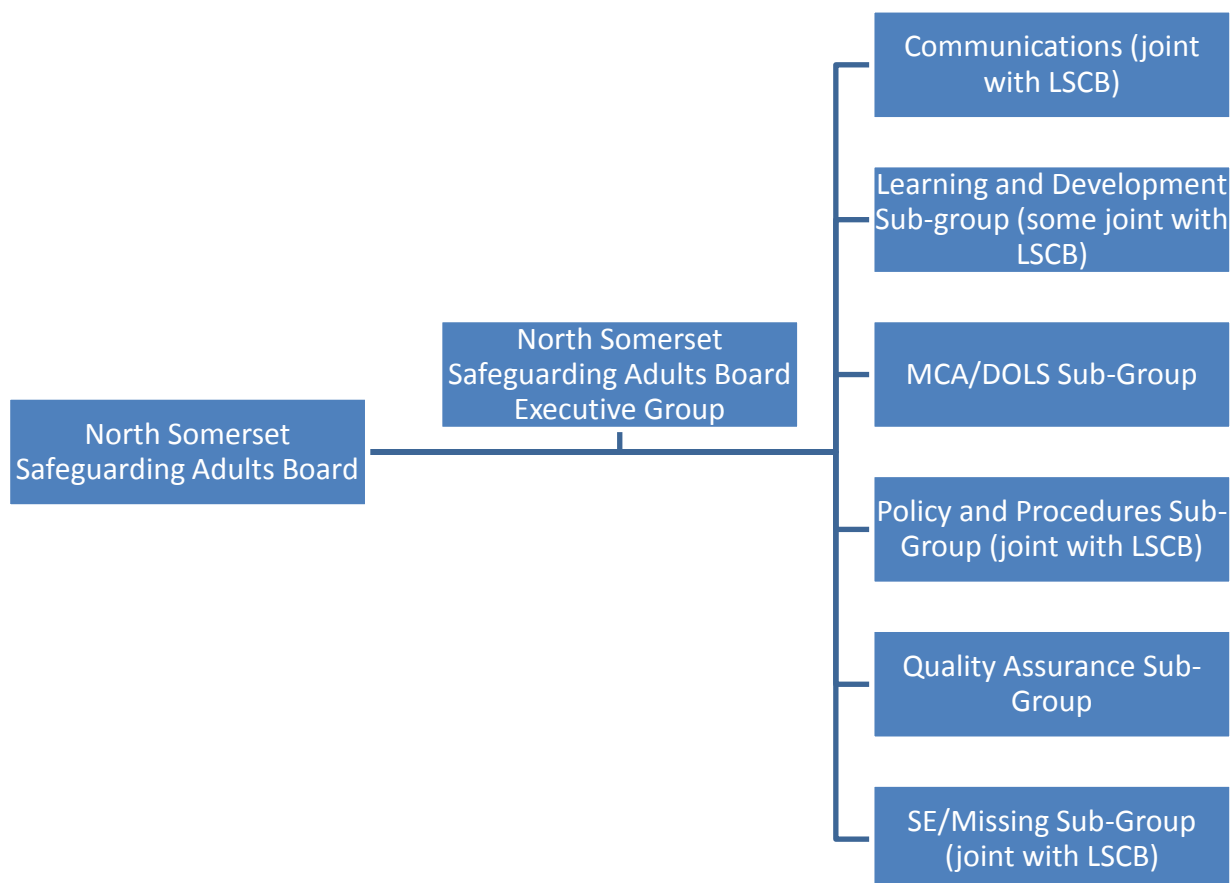
A handwritten signature in black ink, appearing to read 'Tony Oliver', with a long horizontal line underneath it.

Tony Oliver  
Independent Chair, North Somerset Safeguarding Adults Board  
September 2018.

## 2. NORTH SOMERSET SAFEGUARDING ADULTS BOARD STRUCTURE

The North Somerset Safeguarding Adults Board is a statutory body established by the Care Act 2014. Its main objective is to protect all adults in its area who have need for care and support and who are experiencing, or at risk of, abuse or neglect against which they are unable to protect themselves because of their needs. It achieves this by co-ordinating the work of its member agencies through its sub-groups to determine shared policy, facilitate joint training, raise public awareness and monitor and review the quality of services relating to safeguarding adults at risk in North Somerset.

The North Somerset Safeguarding Adults Board and its Executive Group meets four times a year respectively. The structure of the Board is as follows:



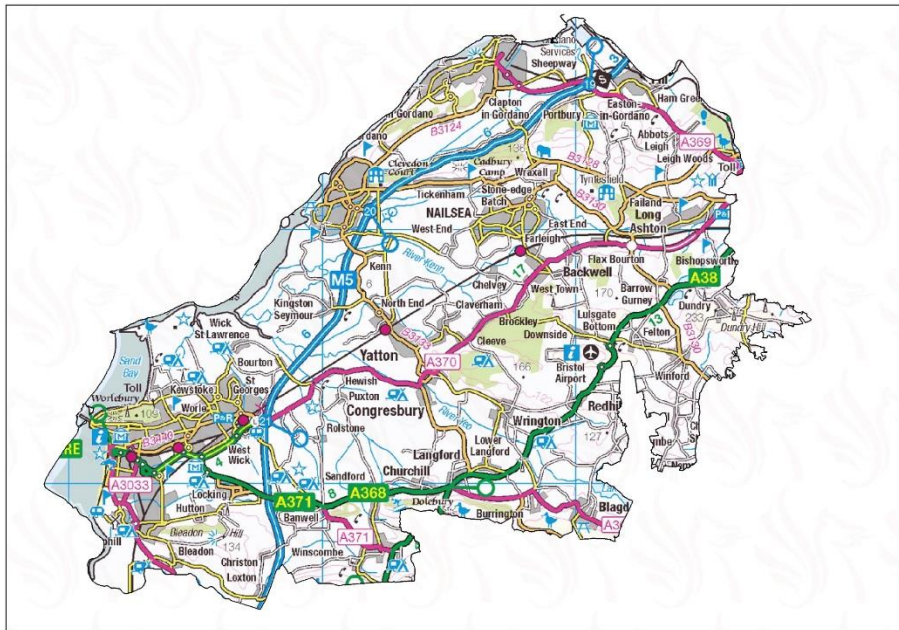
A full list of [Board Members](#) and the Board's [Memorandum of Understanding](#) can be found on our website.



### 3. LOCAL DEMOGRAPHICS

North Somerset Council is a unitary authority in the South West of England which borders Bristol, Somerset, and Bath and North-East Somerset, and is part of the West of England Partnership.

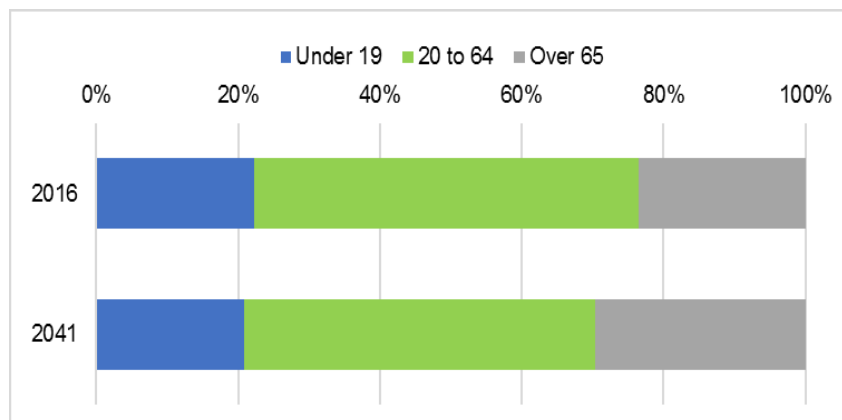
There are four main towns within North Somerset: Clevedon, Portishead, Nailsea and Backwell, and Weston-super-Mare.



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Office of National Statistics mid-year estimates 2016 give the North Somerset population as 211,500 people. Of the 211,500 people, 47,100 are children and young people (under the age of 19 years), 114,700 are between 20 and 64 years of age, and 49,700 are older people (aged over the age of 65 years).

The North Somerset population is projected to increase from 211,500 people in 2016 to approx. 251,700 people in 2041, an increase of 40,200 people. Of this increase just 5,600 are projected to be young people under the age of 19 years.



## 4. SUMMARY OF ACTIVITY DURING 2017 – 2018

- The work of the Board and its sub-groups has been informed by clear agreed priorities and underpinned by an up to date and well-structured Strategic Business plan. This is available on our website. [2018 Strategic Business Plan](#).
- SMARTER working has been implemented due to the lack of a Board manager with more executive and strategic leads' involvement resulting in greater partnership working.
- The development of a joint North Somerset Safeguarding Boards website has raised the profile of the North Somerset LSAB as well as providing professionals with a useful tool. [www.northsomersetsafeguarding.co.uk](http://www.northsomersetsafeguarding.co.uk)
- Learning Reviews and SARs. The SAR panel was convened on six occasions throughout 2017/18:
  - one resulted in a Domestic Homicide Review (DHR);
  - one case which did not meet the criteria has tasked the Board to raise awareness around the use of the drug 'Spice' via the Joint Communications sub-group; workshops and training events;
  - two cases resulted in no further action;
  - one case is still outstanding waiting the result of the coroner;
  - one learning review which resulted in the following action plan: [MsX Action Plan](#)
  - The LSCB carried out a Serious Case Review. The child is now an adult, an action plan against the recommendations of the independent reviewer's report is being developed and will be reviewed at both the LSAB and LSCB.
- Although some sub-groups struggled with attendance there were new Board and sub-group members recruited. These include:
  - Principal Officer, Trading Standards to encompass modern slavery and tackling broader exploitation; now co-chair of the joint SE/Missing sub-group. This sub-group has evolved into Tackling Exploitation and Missing.
  - Strategy and Development officer has joined the LSAB Policy & Procedure's sub-group. This sub-group separated early 2018 from the LSCB following a one-year trial.
  - The LSCB lay member who has experience with adult disabilities has joined the joint LSAB/LSCB Communications sub-group.
- Data provided by partners and scrutinised by the Board includes:
  - Recognising financial abuse: this data is now included in North Somerset Council's quarterly data return. A [Financial Abuse Tool Kit](#) has been developed and uploaded onto the website.

- Missing Adults and links to Domestic Abuse
  - Police Data now includes an additional category: 75+
  - NICHE and QLIC Sense is now used by the police.
  - Health data. This is work in progress. Data will be provided to all regional Boards across the BNSSG area.
- Awareness raising for Board members through presentations, good practice examples of multi-agency working and national updates: The following went to the Board:

Presentations:

- Trading Standards
- Banking Protocol and Operation Signature
- Homelessness
- Modern Slavery

Good practice examples:

- Making Safeguarding Personal
- Think Family
- National Probation Service

National updates:

- Transforming Adult Care
- MCA/DoLS

- The following audits took place and the findings were reported to Board:
  - Making Safeguarding Personal. A national audit also took place in March 2018 the final report is due to be published in May 2018
  - DoLS audit
- Providers and Commissioning has been a regular Board agenda item with detailed discussions around safer recruitment and the sharing of good practice. The representatives on the Board disseminate information to provider forums.

## 5. SUB-GROUP REPORTS

The following section summaries the activity of the Board's multi-agency sub-groups during 2017/2018. Each sub-group was asked to report back what they had achieved under the six key principals:

- 5.1 Empowerment
- 5.2 Protection
- 5.3 Prevention
- 5.4 Proportionality
- 5.5 Partnership
- 5.6 Accountability

### 5.1 EMPOWERMENT: Promoting person-led decisions and informed consent

#### Communication and Publicity sub-group:

##### Key actions achieved:

- To ensure comprehensive public information and advice about keeping safe and identifying abuse is available the sub group has run:
  - poster campaigns to raise awareness about Stop Adult Abuse Week, Anti-Slavery & Human Trafficking, Domestic Abuse, FGM, Internet safety and CSE.
  - an awareness article on CSE was published in the North Somerset Life, which was distributed to all households in the North Somerset area
- To improve engagement with hard to reach groups membership of the sub group includes representation from the Marketing and Communication Team, North Somerset Council, BNSSG CCG, Avon Fire & Rescue, Community Team for People with Learning Difficulties and a lay person.
- The sub group has established that the Anti-Slavery Partnership is a Regional Body upon which North Somerset Council are already represented through CSDAT.

##### Key areas of progress:

- The sub group has gone some way to improving engagement with hard to reach groups, for example we are in liaison with the following:
  - the housing association that work with the traveling community,
  - the Chair of the LGBT Forum
  - the Equality and Diversity Officer
- The joint safeguarding boards website has been launched to provide accessibility for all in terms of a tool kit for professionals and for raising awareness for the public. The sub-group now has responsibility of ensuring that the website is up to date.

##### What difference have we made:

- Membership has become more diverse.

- Overall attendance has increased.
- The sub group has provided a co-ordinated response to awareness campaigns.

### **Learning and Development sub-group:**

#### **Key actions achieved:**

- Increased usage and referencing to the Making Safeguarding Personal tool kit across agencies
- Increase in Modern Slavery and financial scamming training to front line staff in adult social care.
- Better understanding of the interplay between mental capacity and safeguarding received by trainees in the period as reflected in the CPD on-line report.

#### **Key areas of progress:**

- Trainees report more ownership over referring into the National Referral Mechanism (a system whereby victims of modern slavery can access support) and with working across sectors for example with banks and building societies.
- Sharper understanding of the broader legislation at work by practitioners to support people in their individual circumstances.

### **MCA/DoLS:**

#### **Key actions achieved:**

- DoLS Audit with neighbouring authority (Somerset) completed 2017.

#### **Key areas of progress:**

- Audit offered assurance that DoLS assessments within the locality are legally defensible.

#### **What difference have we made:**

- Highlighted the need to strengthen 'the voice of the person' in assessments. This achieved through work at quarterly BIA forums.

### **Policy and Procedures**

#### **Key actions achieved:**

- Several key policies have been published on the joint North Somerset Safeguarding website, empowering partner agencies. [Multi-agency policies and procedures](#)

#### **Key areas of progress:**

- There is an ongoing programme of work, supported by the Strategy and Policy Team within North Somerset Council which is ensuring policies are updated. Updated multi-agency policies are being published on the North Somerset Safeguarding website.

#### **What difference have we made:**

- Partner agencies have been able to operate independently.

## **Quality Assurance sub-group**

### **Key actions achieved:**

- The sub-group's remit is to ensure regular and robust file audits with appropriate reporting to the LSAB. The group carried out a Making safeguarding personal deep dive audit.

### **What difference have we made:**

- Conclusions were drawn around use of mental capacity assessments and involvement of the adult at risk.
- It was found that mental capacity assessments were not always formally evidenced and that the adults' views and wishes were referenced in the great majority of cases however, independent representation of the voice of the service user at safeguarding meetings required improvement.

### **Key areas of progress:**

- Increased Making Safeguarding Personal focus in training and discussions at Good Practice Forum.

## **5.2 PROTECTION – Support and protection for those in greatest need.**

### **Communication and Publicity sub-group:**

#### **Key actions achieved:**

- The sub group has raised awareness of different types of abuse, the signs of abuse and to encourage people to act on this in accordance with safeguarding adults and children's policy through on-going programme of campaigns.

### **Learning and Development sub-group:**

#### **Key actions achieved:**

- Joint working with the Children's Board on the SCR led to a greater understanding of the Think Family Strategy and the cross overs between the work being done by front line services. This has seeped back into Learning and Development interventions.
- The creation of the peer support initiative for social workers has given practitioners a sense of togetherness which they have anecdotally reported has benefitted service users and more confidence in their decision-making.

### **MCA/DoLS:**

#### **Key actions achieved:**

- Collection of quantitative data in relation to IMCA and Paid Representative provision.

**Key areas of progress:**

- Comprehensive data collected and analysed in relation to IMCA / Paid Representative advocacy provision for April 17, Jun 17, Oct 18, & Jan 18.

**What difference have we made:**

- Assurance given that those most in need of IMCA & Paid Representative advocacy are receiving this within a timely fashion.

**Policy and Procedures****Key actions achieved:**

- Meeting the needs of young adults at risk of abuse
- Contribution to the newly launched Boards' website

**Key areas of progress:**

Protocols, policies and guidance have been drawn up in relation to:

- Self neglect
- Meds errors
- Pressure ulcer
- Organisational abuse protocol
- Financial abuse toolkit
- Modern slavery

These are available on our North Somerset Safeguarding Board website: [Multi-agency policies and procedures](#)

**What difference have we made:**

- Feedback from social workers has been received that the self-neglect protocol is valuable in providing a structure to this complex area of work, particularly as a multi-agency document.
- North Somerset is 'ahead of the game' in terms of the new DH Pressure Ulcer Safeguarding Guidance' as we are working to similar principles already. We promote a proportionate response by only dealing in cases where neglect is suspected.
- We have seen a significant drop in organisational safeguarding activity and an improvement in CQC ratings locally. This improvement has been supported by the organisational safeguarding protocol and improvement in early interventions as supported by this document.
- Staff in the local authority and other partner agencies now have a range of tools set out in a guidance document to support a response to financial abuse. There is value for both those working under s.42 of the Care Act and outside of it.

**Quality Assurance sub-group****Key actions achieved:**

The sub-group were tasked as follows:

- (i) To ensure appropriate safeguarding concerns are raised;
- (ii) To ensure the relevant information is shared with the right people at the right time the sub-group:
  - Produced a Threshold Support Tool for providers

- Introduced a Safeguarding Adults Referral Form (these can be downloaded from the website: [Multi-agency Policies and Procedures](#))
- (iii) Ensure effective communication and coordination of organisational activity to monitor provider safeguarding activity:  
The sub-group:
- Scrutinised enquiries in care homes;
  - Scrutinised the reduction in concerns around care homes;
  - Analysed who raised concerns.

#### **What difference have we made:**

- Referral form will improve the quality of information initially received and simplify the S.42 decision making process. The impact so far is minimal as the document is underused. Further work is required to ensure it is promoted and consideration of review of our safeguarding procedures may be required to potentially mandate it's use if full benefit is to be gained.
- Conclusion drawn that care homes were generally a protective factor given that concerns are 'over-reported' in comparison to those in their own home as the proportion of substantiated concerns in care homes is far less in care homes compared to own home and the proportion of inconclusive outcomes is also lower, suggesting that better quality information can be gathered through enquiries involving care homes.
- Reduction in care home concerns was seen in the context of an overall improved position with nursing care providers. Evidence of self-disclosure and significant reduction in concerns being reported by CQC. Improved position supported by CQC compliance data.
- Sources of contact that had reduced were analysed and evidence of good practice within Weston General Hospital was identified. Forthcoming changes in process within the police is awaited and the board acknowledge that this is required.

### **5.3 PREVENTION: It's better to act before harm occurs.**

#### **Communication and Publicity sub-group:**

##### **Key actions achieved:**

- The sub group worked with Trading Standards to develop the awareness campaign about on-line safety and scams, which included publication of an information leaflet.

##### **Key areas of progress:**

- Within the reporting period the sub group are aware of several forthcoming learning reviews and will be taking forward the recommendations over the coming year.



**What difference have we made:**

- The sub group has built a link with Trading Standards and produced good quality guidance in a key area for safeguarding.

**MCA/DoLS:****Key actions achieved:**

- Proactive management of contentious cases, encouraging and developing the practice of round table meetings for disputed cases.

**Key areas of progress:**

- Substantial increase in the number of round table and Part 8 reviews in 2017 / 2018.

**What difference have we made:**

- Issues are resolved quicker at a local level without the need for lengthy Court proceedings.

**Policy and Procedures****Key actions achieved:**

- Development of advice around online safety and scams
- Engagement with the local early intervention strategy

**Key areas of progress:**

- An online safety and scams leaflet has been produced and published
- Early intervention is now expected to be built in to all policies as opposed to a stand-alone piece.

**What difference have we made:**

- Public have access to online safety and scam information.

**Quality Assurance sub-group****Key actions achieved:**

- The sub-group analysed:
  - Repeat referrals
  - Data around fraud
  - Data around sexual exploitation
- Bi-monthly provider monitoring meetings have been reinstated.

**What difference have we made:**

- Analysis was made of individuals who had been involved in more than one enquiry over a 12-month period.
  - We learned that issues had often been addressed early on but that different services used paperwork differently and were more confident as to when it was proportionate to undertake a second enquiry.
  - We learned that some cases involve irretractable levels of complexity and will result in repeated concerns.

- We learned that some teams required supported to plan how to manage repeated concerns around the same issue through care management and risk management plans.
- We learned that some services would benefit from the introduction of a safeguarding coordinator role and this has been implemented where necessary.
- We learned that fraud as a specific act is hidden within the financial and material abuse category and that the relationship category of 'fraudster' is very rarely used meaning that there was insufficient explicit data upon which to draw any conclusions.
- By closer links with drug and alcohol services we learned that there are very low numbers of cases where sexual exploitation is recorded as the nature of abuse. Local addiction services have been invited to contribute to board and sub-group work in the 18/19 year.

### **Sexual Exploitation/Missing**

#### **Key Actions achieved:**

- Introduction of Safeguarding awareness training for taxi drivers, soon to be widened to include licensed premises & hotels.
- Change of Council taxi policy to make this training mandatory.
- Financial scamming and on-line abuse awareness raising through the Joint Communications sub-group.
- A multi-agency guidance for professionals who work with vulnerable adults around "sexting".

#### **Key areas of progress:**

- Monthly awareness sessions now set up – includes SE, general safeguarding, exploitation, rogue traders and reporting methods.

#### **What difference have we made:**

- Over a third of all taxi drivers have now attended a session and have been given an information card and contact details for reporting purposes.

### **5.4 PROPORTIONALITY: Proportionate and least restrictive/intrusive.**

#### **Learning and Development sub-group:**

##### **Key actions achieved:**

- CPD on-line report indicates a much better understanding of the thresholds and strategies that can exist in adult safeguarding following NSC training.

##### **Key areas of progress:**

- The development of the Threshold Tool Kit and its usage into training sessions has been positively received.

## **MCA/DoLS:**

### **Key actions achieved:**

- Refinement of national ADASS triage tool in line with local need.

### **Key areas of progress:**

- Confirmed agreement that current system of triage is the most appropriate for the local population.

### **What difference have we made:**

- Ensuring that the resources allocated to DoLS work are employed in the most efficient fashion. E.g. Those who benefit most from the scrutiny of the DoLS receive it first.

## **Policy and Procedures**

### **Key actions achieved:**

- Ensured appropriate concerns are raised
- Relevant information is shared with the right people at the right time

### **Key areas of progress:**

- Adverse incident form published and now renamed as 'Threshold Support Tool'
- The Safeguarding adults' referral form published

### **What difference have we made:**

- There are examples of the threshold support tool being effectively used to support safe proportionate decisions. Its use still needs to grow among partners.
- Safeguarding referral form has been used on occasions but again there have not been enough examples of its use to draw any conclusions. Further promotion is required. Appropriate use of this tool will serve two main purposes:
  - i. provide documentary evidence for people raising the concern of the action they have taken;
  - ii. enable local authority decision makers to make well informed safeguarding decisions more efficiently.

## **Quality Assurance sub-group**

### **Key actions achieved:**

- Reviewed "NFA" (no further action) outcomes.
- Care leavers safeguarding activity has been analysed.

### **What difference have we made:**

- Established that the majority of cases where NFA is recorded as an outcome, this option is used in error. 100% of the 10 cases audited were found to demonstrate that action was taken in response to the safeguarding incident.
- We have changed paperwork to ensure a more accurate reflection of actions taken and give this a focus in safeguarding coordinator training. Year-end data currently shows that changes have made little or no impact however we believe this to be a data issue and are working to develop an accurate understanding prior to September 2018.

- We have achieved clarity around the local authority safeguarding adults responsibility to 'Care Leavers'. A [Transitions Position Statement](#) around safeguarding responses to younger adults has been published. The level of demand from this cohort is better understood.

## **5.5 PARTNERSHIP: Working together.**

### **Communication and Publicity sub-group:**

#### **Key actions achieved:**

- Membership of the sub group includes representation from the Marketing and Communication Team, North Somerset Council, BNSSG CCG, Avon Fire & Rescue, Community Team for People with Learning Difficulties and a lay person.
- The sub-group has held awareness events of different types of abuse and the signs of abuse. This links to 5.2.
- For Stop Adult Abuse Week the sub group worked in partnership with neighbouring authorities (Bath & North East Somerset, Bristol, Somerset and South Gloucestershire) as well as Libraries, Children Centres and GP surgeries.

#### **Key areas of progress:**

- Looking at alternative options with consideration of improving engagement with voluntary sector: At the end of the reporting period the plans for the next Provider Event was being put into action.

#### **What difference have we made:**

- There is greater partnership working across neighbouring Boards which has meant a consistent regional approach.

### **Learning and Development sub-group:**

#### **Key actions achieved:**

- Regular information sharing sessions and building of good practice
- The Approved Mental Health Practitioner for North Somerset, from Avon and Wiltshire Mental Health Partnership Trust produced a guidance document for safeguarding in mental health specifically to support ambulance staff.
- The local authority's Safeguarding Adults Manager shared the safeguarding Learning and Development pathway with the Housing Team which has led to better synergy in learning.

### **MCA/DoLS:**

#### **Key actions achieved:**

- Ensure that complex MCA / deprivation of liberty work is shared across partner agencies.

#### **Key areas of progress:**

- Partners have been involved in bringing cases to the Court of Protection involving 'community' deprivation of liberty. Work has been spread across adult social care, mental health, learning disabilities, and continuing health care.

- Positive feedback from the Court of Protection regarding a case that did not have the direct oversight of the DoLS Office.

**What difference have we made:**

- Individuals who are deprived of their liberty in the community have had the scrutiny / oversight of the Court.

**Policy and Procedures**

**Key actions achieved:**

- Joint development of policies
- Developed joint working with the Local Safeguarding Children Board
- Greater use of resources including involvement of the strategy and policy development team
- Clarified NSC representation on Anti-Slavery partnership

**Key areas of progress:**

- The joint development of key safeguarding policies with the CCG representative taking the lead is an example of excellent partnership working.
- The anti-slavery partnership is a regional group upon which NSC are already represented through CSDAT. They provide a link through to adult safeguarding.

**What difference have we made:**

- A period of joint working with children's P&P has built better links which continue to exist.
- Engaging the S&PD Team brings a coordinated approach to policy development

**Quality Assurance sub-group**

**Key actions achieved:**

- The sub-group has begun to form areas of focus for audit work.

**Sexual Exploitation/Missing**

**Key actions achieved:**

- Representative from CSE/Missing/Children's services now regularly attending licensing Responsible Authorities meeting.

**What difference have we made:**

- Successful interventions and multi-agency visits at premises following safeguarding/CSE concerns.

**5.6 ACCOUNTABILITY: There is a multi-agency approach for people who need safeguarding support.**

**Communication and Publicity sub-group:**

**Key actions achieved:**

- To ensure the perspective and voice of the adult with learning disabilities a representative from the learning disabilities team has joined the sub group.

**Key areas of progress:**

- The sub group is sharing learning and development across partner agencies.

**What difference have we made:**

- There is multi-agency representation on the sub group. This enables wider dissemination of key messages.

**Learning and Development sub-group:****Key actions achieved:**

- The group identified and delivered Safeguarding Adults training to leaders, and courses were designed to target more senior staff in all organisations.
- Agreement across agencies in the sub group to try and work more closely with the CQC to better assess the effectiveness of learning interventions for care home staff.
- Our health representative is taking safeguarding training into GP surgeries as the responsibility of each practice manager
- Production of Training Standards document to streamline training across Bristol, South Gloucestershire and North Somerset in line with the Bournemouth training competencies.

**Key areas of progress:**

- We have increased the uptake of level 2 training for managers.
- We are working to create new e-learning courses that we can use across agencies.

**MCA/DoLS:****Key actions achieved:**

- Development of a MCA Audit tool to be used across services to allow for local benchmarking.

**Key areas of progress:**

- Agreement as to what criteria should be included in tool.

**What difference have we made:**

- Shared understanding between partners as to acceptable standards in regard to implementation of the Mental Capacity Act.

**Policy and Procedures****Key actions achieved:**

- SAR protocol
- Publication of key policies enables safeguarding practice to be held to account.

**Key areas of progress:**

- A [SAR Protocol](#) has been developed
- Key policies are available online ([Multi-agency policies and procedures](#))

### **What difference have we made:**

- There is a clear referral route for SAR requests. We have seen this used effectively on several occasions over the period. SAR Panels have been convened on six occasions. One learning review has been undertaken in this period and other SAR referrals have led to specific actions e.g ongoing work with public health re Spice and young people.
- Key policies are available online and these have been used by organisations and individuals in raising complaints.

### **Quality Assurance sub-group**

#### **Key actions achieved:**

- Analysed quarterly data and 16-17 year-end data
- Spikes in data have been analysed;

#### **What difference have we made:**

- The group has identified and challenged the local authority on the number of cases carried over from the previous financial year which led to focussed work with specific teams leading to a massive reduction in outstanding section 42 decision and enquiry outcomes. Year-end data submission for 17/18 has vastly improved with outstanding cases now being measured in ten rather than hundreds.
- The QA group have been able to provide assurance to the board that Neglect is the highest nature of abuse locally due to the volume of care homes and is supported by a high level of self-disclosure within these services and that the large proportion of cases where 'Social care or support service' is alleged as perpetrator is due to the impact of one large scale provider concern. Please also see care home related feedback under 'Protection' above.

## **6. PARTNER ORGANISATION SUMMARY OF DATA:**

**6.1 NORTH SOMERSET COUNCIL (1<sup>ST</sup> APRIL TO 31<sup>ST</sup> MARCH 2018):** A summary of local authority data presented to the Board over the 12-month period is detailed in [APPENDIX B](#) of this report.

**6.2 AVON AND SOMERSET CONSTABULARY (1<sup>ST</sup> APRIL TO 31<sup>ST</sup> MARCH 2018):** The data submission for North Somerset over the 12-month period is detailed in [APPENDIX C](#) of this report.

**6.3 BNSSG** are in the process of agreeing with regional chairs and Board managers what health data they will provide in the future. This will be consistent for all Boards across the BNSSG area.

## **7. INDEPENDENT CHAIR'S GOVERNANCE**

The NSSAB Independent Chair continues to request that Board partners produce relevant and meaningful data. Work is on-going to produce "health" data as noted in Section 6 of this report. Analysis of data continues to be a main agenda item on both the quarterly Executive and Boards where it is scrutinised by Board members.

The Quality Assurance sub-group reports back to the LSAB their recommendations from multi-agency audits.

Easily accessible safeguarding adult policies, procedures and guidance are now available on the new joint safeguarding boards website.

The NSSAB Independent Chair encourages challenge at the Board and its Executive.

The NSSAB Independent Chair oversees the Board's business by regularly attending the Board's sub-groups.

The NSSAB Independent Chair presents the annual report to the local authority's Adult services and housing policy and scrutiny panel.

The NSSAB Independent Chair regularly attends training courses to dip sample quality of training and to keep abreast of safeguarding developments, locally, regionally and nationally.

## **8. NEXT STEPS**

### **8.1 Business Planning 2018 – 2021**

The Board's three Strategic Leads: North Somerset Council, BNSSG CCG and Avon and Somerset Police, together with the Independent Chair have produced a three-year strategic plan which identify the priorities for the Board and its sub-groups. This is available on our website. [2018 Strategic Business Plan](#).

### **8.2 Sub-group priorities 2018–2019**

Individual sub-groups have highlighted their priorities as follows:

#### **Communications and Publicity (joint):**

- Appoint a further Co-Chair for the sub-group.
- Develop the joint newsletter.
- Develop information leaflets for different aspects of safeguarding and measure their effectiveness.



- To ensure advice and support is available to adults at risk of abuse and communities the sub group is aware that we need to oversee the content on the website.

### **Learning and Development:**

- Support the adult team to create a useful and creative conference for providers at the end of this year
- Refresh the group identity and add new members. Make the group's TOR relevant to the group's membership.
- Create joint actions for the group including producing briefing papers on L&D in safeguarding, guidance for practitioners and a better monitoring and evaluation framework.
- Create strategic plans for L&D across agencies in adult safeguarding with better join up with Quality Assurance and Exploitation

### **MCA/DoLS:**

- Complete MCA audit as a paired exercise between local partners
- Consider qualitative issues with IMCA provider (new contractor)
- Plan / prepare for DoLS replacement scheme, Liberty Protection Safeguards (LiPS)

### **Policy and Procedures:**

- Continue the policy update workplan. Start with information sharing then on to local procedures;
- Consider if there is a more effective way to get the policy review done in bulk.
- Publication of more policy material online.
- PiPoT (Person in a Position of Trust)

### **Quality and Performance:**

- Greater link to learning from DHR's/SAR's/LLR's
- Focus upon qualitative audit and measuring impact
- Focus upon multi-agency information to inform audit work
- Partnership approach to sub-group leadership
- Programme of audits must be Specific Measurable Achievable Realistic Timebound (SMART)

**APPENDIX A:**

**NSSAPB Membership and attendance 2017 - 2018**

<b>Organisation</b>	<b>Member</b>	<b>June '17</b>	<b>Sep' 17</b>	<b>Dec '17</b>	<b>Mar '18</b>
<b>Independent Chair</b>	<ul style="list-style-type: none"> <li>• Tony Oliver</li> </ul>	√	√	√	<b>A</b>
<b>Deputy Chair</b>	<ul style="list-style-type: none"> <li>• Delyth Lloyd Evans (Lay member)</li> </ul>	<b>A</b>	√	<b>A</b>	√
<b>North Somerset Council</b>	<ul style="list-style-type: none"> <li>• Director of People and Communities</li> <li>• Executive Member</li> <li>• Assistant Director, Support and Safeguarding Adults</li> <li>• Head of Commissioning</li> <li>• Service Leader, Strategic Safeguarding and Quality Assurance</li> <li>• Safeguarding Adults Manager</li> </ul>	<b>A</b> <b>A</b> √ √ √ <b>A</b>	√ √ √ √ √ √	√ <b>A</b> √ √ √ √	<b>A</b> √ √ √ <b>A</b> √
<b>BNSSG Clinical Commissioning Group</b>	<ul style="list-style-type: none"> <li>• Director of Nursing and Quality or</li> <li>• Head of Safeguarding</li> </ul>	√	√	√	√
<b>Avon and Somerset Police</b>	<ul style="list-style-type: none"> <li>• Detective Superintendent</li> </ul>	√	√	√	√
Avon and Wiltshire Mental Health Partnership NHS Trust	<ul style="list-style-type: none"> <li>• Service Manager</li> </ul>	√	√	√	√
Weston Area Health Trust	<ul style="list-style-type: none"> <li>• Director of Nursing</li> </ul>	√	<b>A</b>	√	√
North Somerset Community Partnership	<ul style="list-style-type: none"> <li>• Assistant Director of Quality, Nursing and Therapies or Director</li> </ul>	√	√	√	√
Care home provider representative	<ul style="list-style-type: none"> <li>• Director – Community Therapeutic Services</li> </ul>	<b>A</b>	√	√	<b>A</b>
Domiciliary Care provider representative	<ul style="list-style-type: none"> <li>• Registered Manager – Brunel Care</li> </ul>	<b>A</b>	√	√	√

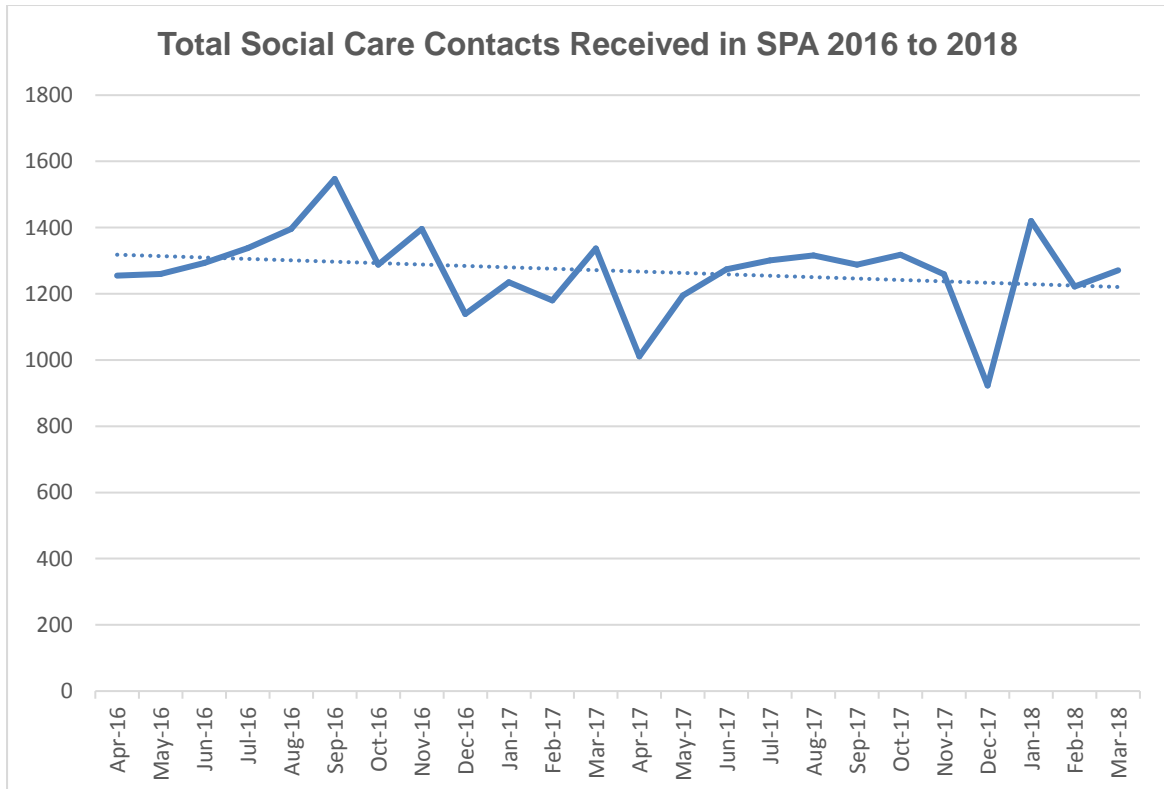
Organisation	Member	June '17	Sep' 17	Dec '17	Mar '18
Housing Provider representatives: Alliance Curo Hanover (over 55 year olds)	<ul style="list-style-type: none"> <li>Operation Managers</li> </ul>	 √ √ A	 A √ A	 A A √	 A √ A
National Probation Service	<ul style="list-style-type: none"> <li>Senior Probation Officer, North Somerset</li> </ul>	√	√	A	A
Healthwatch North Somerset	<ul style="list-style-type: none"> <li>Chief Executive</li> </ul>	√	√	√	√
Community Safety Drug and Alcohol Team (NSC)	<ul style="list-style-type: none"> <li>Manager, Safer and Stronger Communities</li> </ul>	A	A	√	A
North Somerset Safeguarding Children's Board	<ul style="list-style-type: none"> <li>Assistant Director (Support and Safeguarding)</li> </ul>	A	√	√	√
Chairs of sub-groups if they are not already Board members.	<ul style="list-style-type: none"> <li>Policy and Procedures</li> <li>Communications and Publicity</li> <li>Learning and Development</li> <li>MCA and DoLS</li> <li>SE/Missing</li> <li>Quality Assurance</li> </ul>	n/a √ √ A n/a n/a	n/a √ √ √ √ n/a	n/a √ A √ √ n/a	n/a √ √ √ √ n/a
CQC (to attend twice yearly)	<ul style="list-style-type: none"> <li>Inspection Manager (North Somerset)</li> </ul>	A	A	A	A
NHS England (attending by exception only)	<ul style="list-style-type: none"> <li>Deputy Safeguarding Lead</li> </ul>	n/a	n/a	n/a	n/a
Avon Fire and Rescue (Correspondent members only)	<ul style="list-style-type: none"> <li>Head of Risk Reduction, Service Delivery</li> </ul>	n/a	n/a	n/a	n/a

## APPENDIX B

### Contacts

Initial contacts are recorded by Care Connect who provide basic advice and guidance and signposting to universal services. Where there is a Social Care element they will pass the contact to the Single Point of Assessment (SPA) team.

Numbers of Social Care contacts received by North Somerset Council's SPA service are displayed in Figure 1 below.



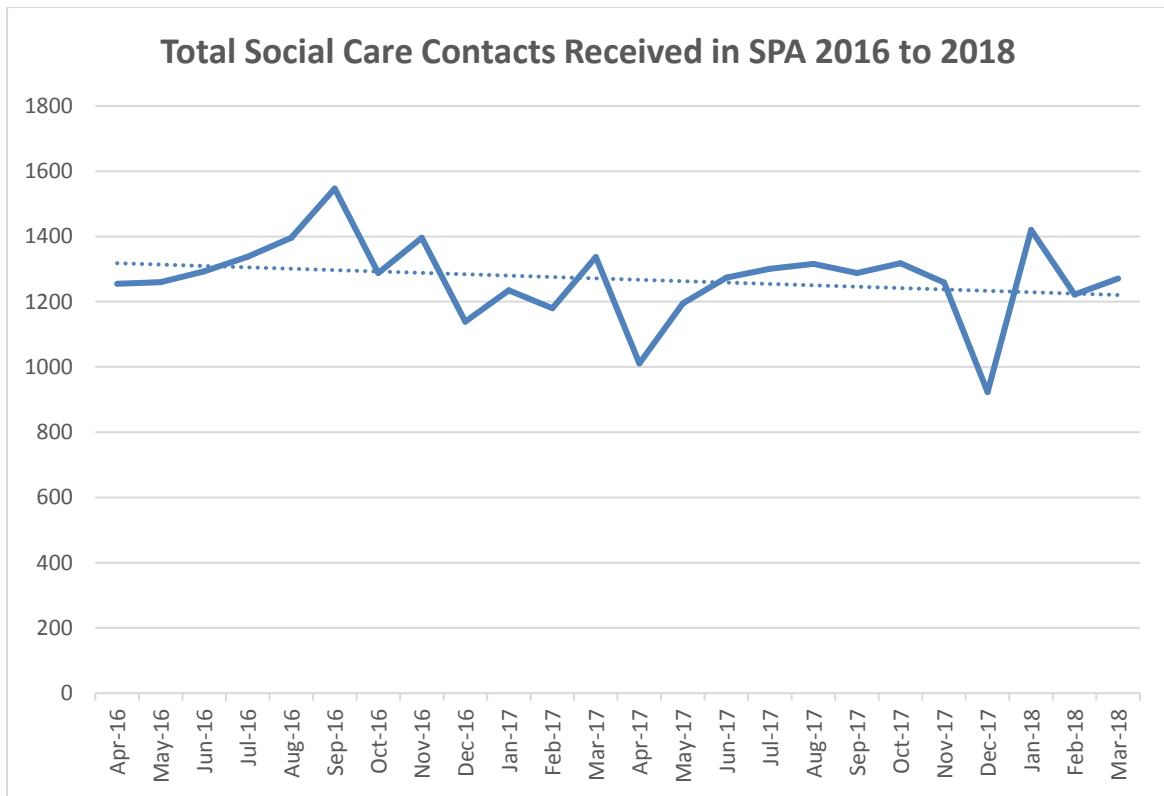


Figure 1

Although there have been fluctuations over the last 2 years, the overall trendline shows that demand has reduced during this period. Average monthly contact numbers during 2017/18 were around 1,300 per month.

The most common reasons for contacts were:

- Requests for Assessments
- Safeguarding Concerns
- Advice and Guidance.

Where contacts cannot be resolved within the SPA team they are passed either one of the 4 Locality Social Work teams, the Learning Disabilities team, the Mental Health team or the Safeguarding team for further investigation depending on the nature of the contact.

Figure 2 shows the numbers of contacts passed onto teams to be processed

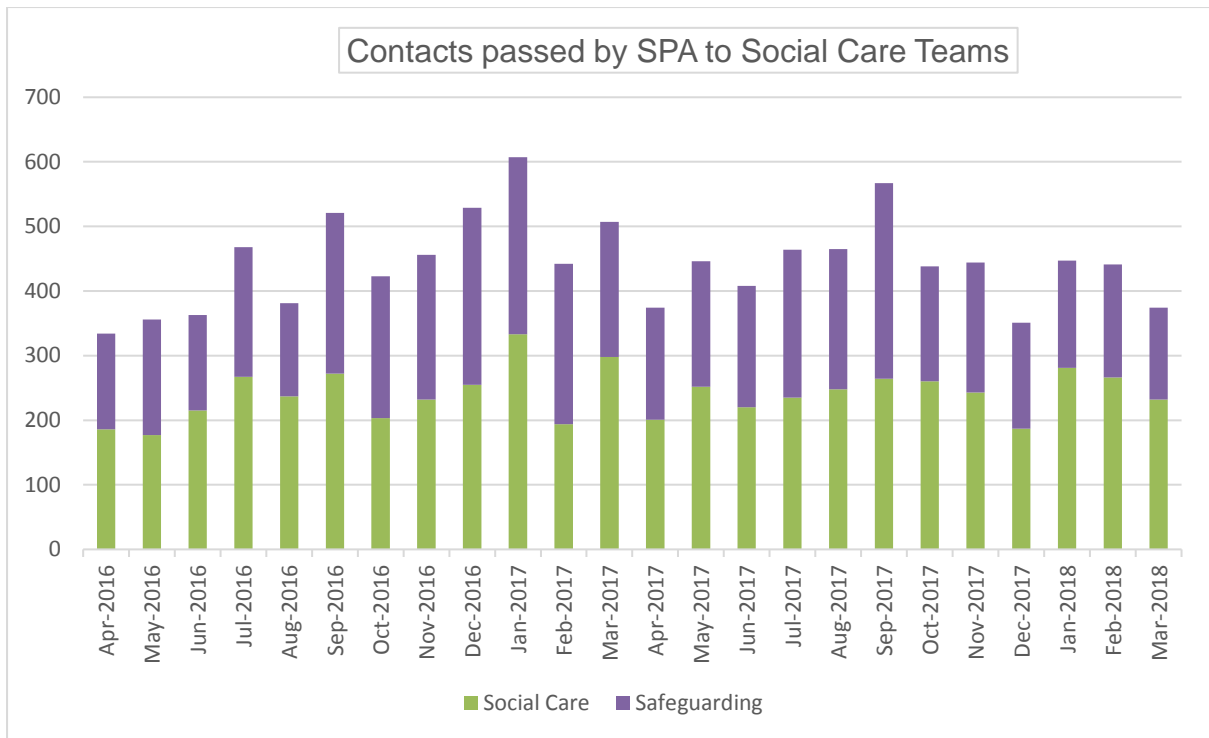


Figure 2

### Assessments

If further investigation is required, the teams will carry out an assessment or a review. New requests for services (which are not in receipt of Long-term services at the point of contact) are assessed, and if Long-term services were in place prior to the contact a review will be completed. The number of Assessments of new cases recorded completed by the Social Care Teams is displayed in Figure 3 below.

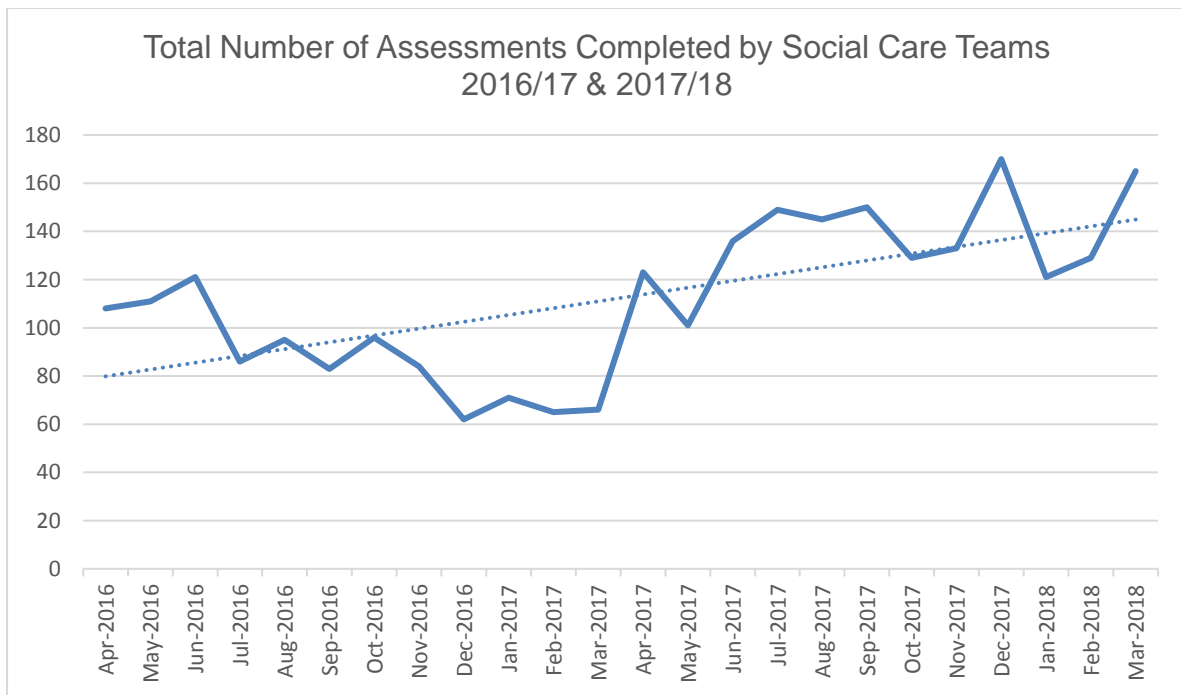


Figure 3

There has been an increase in the number of completed assessments over the last two years from 1048 in total for 2016/17 to 1651 in 2017/18, a 58% increase between the two years.

### **Reablement Support**

Short term reablement support is provided where a service user needs time and professional input to be able to maximise their independence, often after a hospital stay or illness

Nationally we collate short-term support by the route of accessing Social Care and by age range.

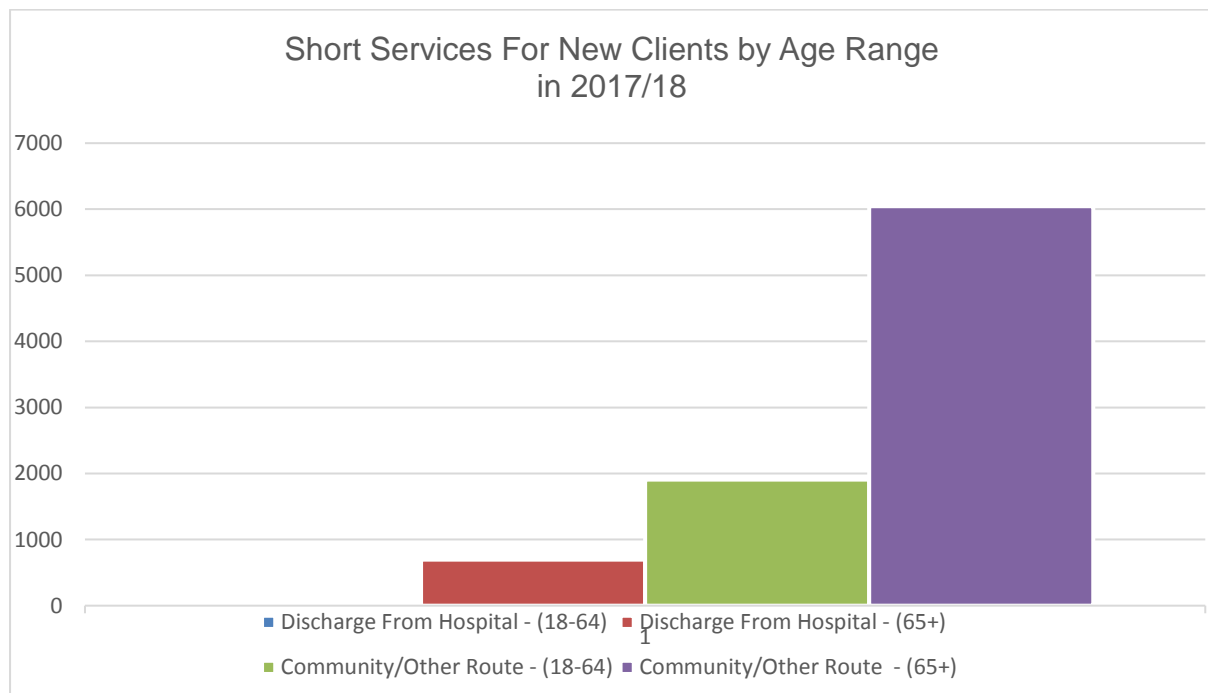


Figure 4

In the 18-64 age range, almost all requests for service came from the community, whereas in the 65+ age range approximately 25% of the requests came as a result of a hospital discharge

### **Long Term Support - Community**

North Somerset Council supports on average 1,300-1,400 service users in the community, either through homecare services, day care placements, or sometimes both. These services are called Long-term Community Services, and the numbers month by month during 2017/18 are shown below.

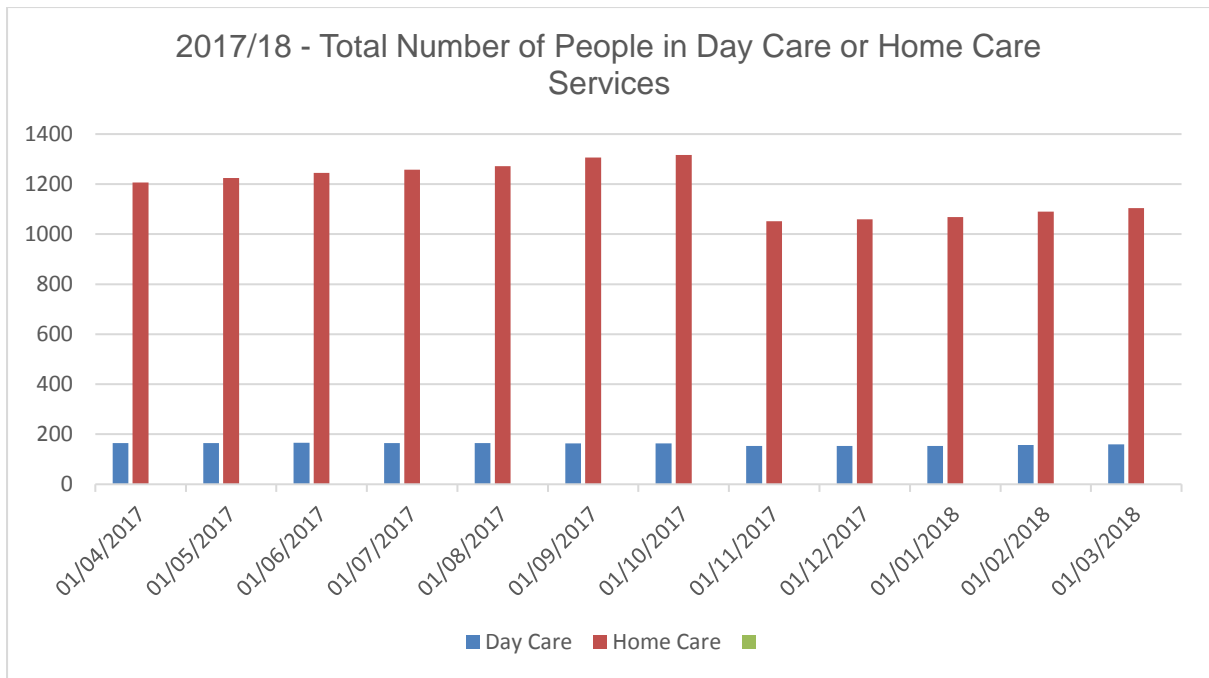


Figure 5

The graph indicates that there is a very consistent number of Day care services being provided. The largest variation in Home Care Services being provided, which decreased in November 2017 and has remained lower than the April 2017 to October 2017 period through to March 2018.

### **Long Term Support - Care Home Placements**

When Community services are no longer able to support a service user they are admitted to a care home to better support their specific needs.

Numbers of permanent placements in care homes are kept to a minimum so as to promote independence for as long as possible.

In the 18-64 age range the average numbers in placement at the end of the month have increased from around 200 to approximately 2015 – as evidenced by the linear trend line in Figure 6 below



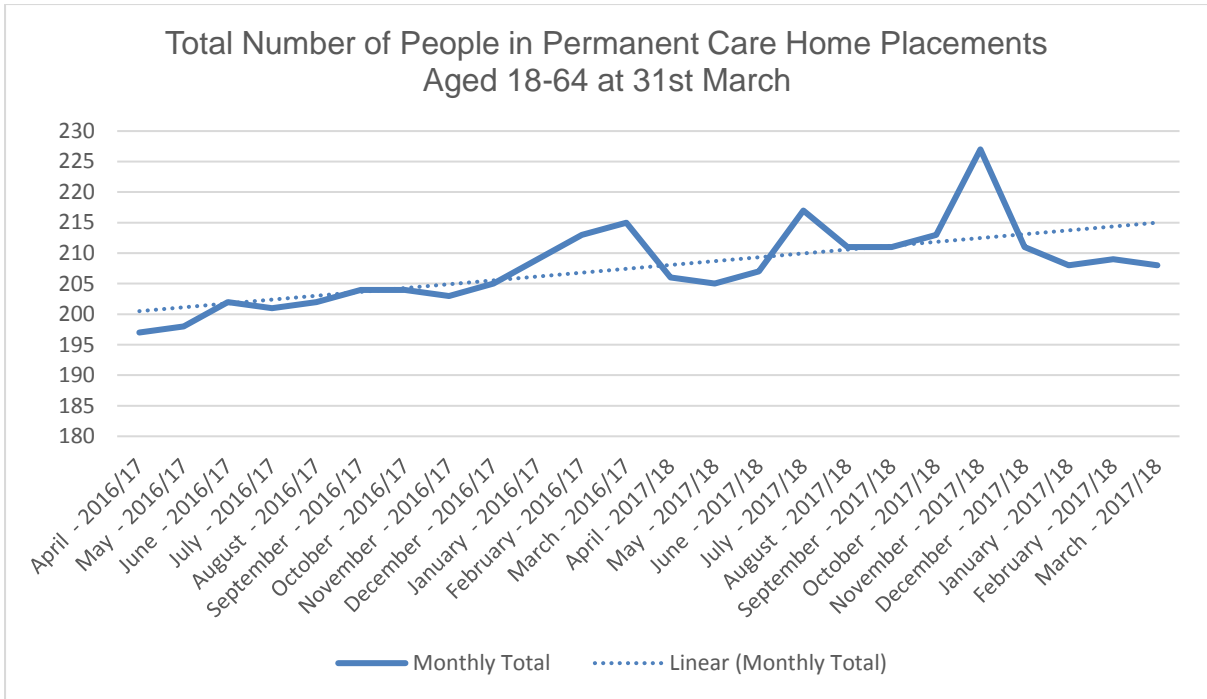


Figure 6

As would be expected, the numbers in permanent placement aged 65+ are much higher – see Figure 7.

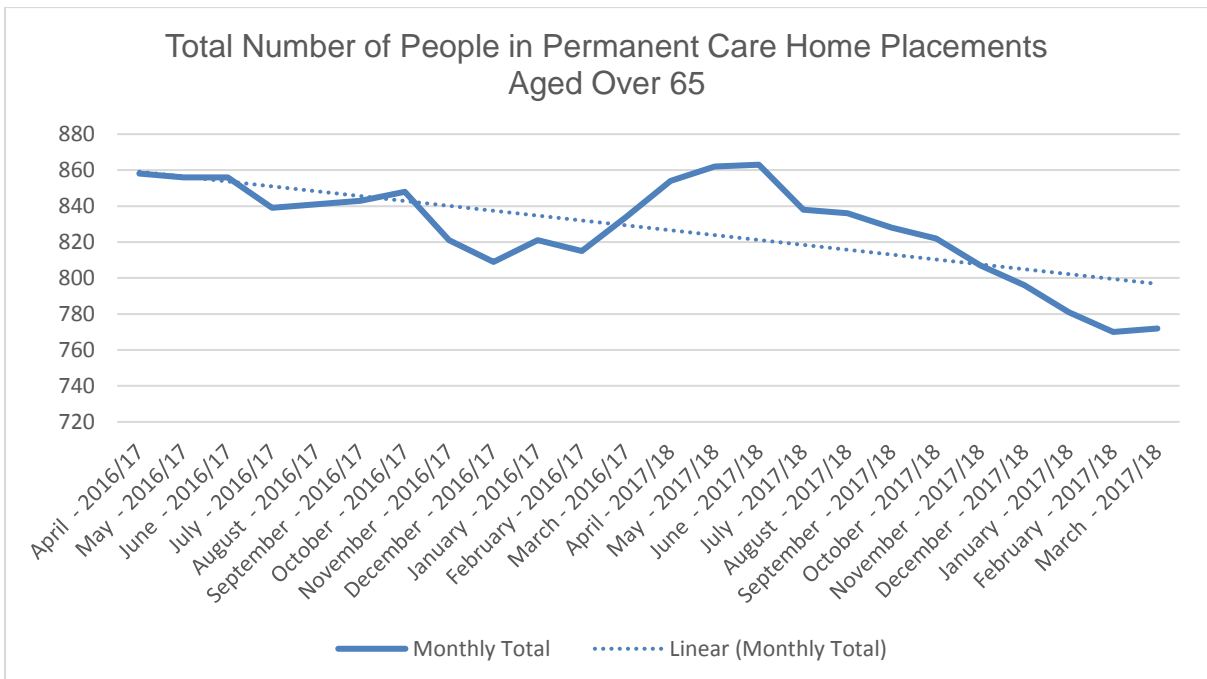


Figure 7

Much work has been done over the past two years to avoid unnecessary admissions to care homes, and to provide community-based services where at all possible, and this is reflected in the downward trend in the numbers of placements for this age range.

## Carers Services

Unpaid carers consist of family and friends who provide support to North Somerset residents to help them live independently in the community. North Somerset Council is committed to supporting these unpaid carers to enable them to continue providing this essential service.

To do this we provide a service to assess carers needs to see if there are services they require to support them in their role. This is provided by a partner agency under contact to North Somerset Council.

Referrals can be made by the individual carer, their family / friends, GPs or Social Care, and is totally voluntary on the part of the carer.

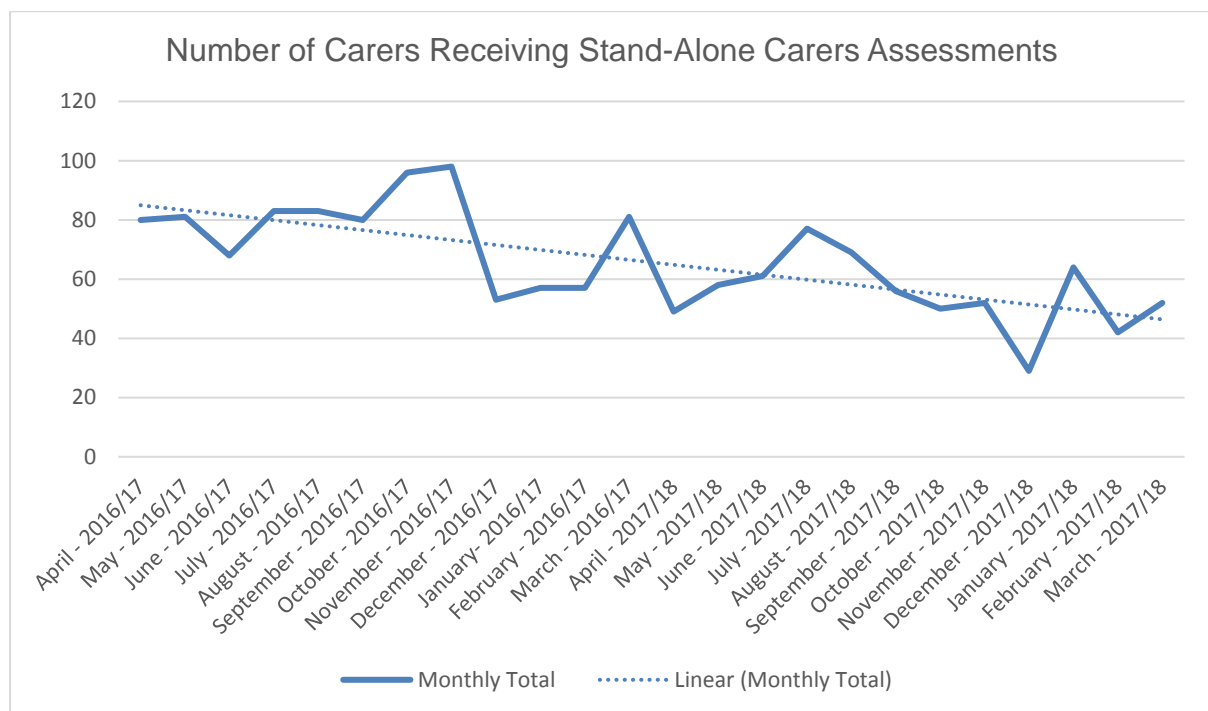


Figure 8

This indicates that there has been a yearly average reduction in the number of assessments or reviews undertaken between 2016/17 and 2017/18 from 76 to 55.

In 2017/18 the lowest number of Assessment and Reviews was in December 2017/18, following a slightly lower than average November that year. However, unlike the previous year this trend did not follow through to March, with an above average January.

**APPENDIX C: AVON AND SOMERSET CONSTABULARY (1<sup>ST</sup> APRIL TO 31<sup>ST</sup> MARCH 2018)**

	12 Months Rolling				Latest Quarter starting			
	Current	Previous	Change	% Chg	Jan 2018	Jan 2017	Change	% Chg
<b>Safeguarding Adults</b>								
Number of Safeguarding Adult Crimes	432	400	+32	+8.0%	93	105	-12	-11.4%
Safeguarding Adult Crimes under Investigation	775							
% Safeguarding Adult Crimes fully Resolved	17.8%	17.3%	0.6%		6.5%	17.1%	-10.7%	
Number of Safeguarding Adult Incidents	209	183	26	14.2%	50	49	-1	2.0%
<b>Vulnerability Flag</b>								
<b>12 Months Rolling</b>								
<b>Latest Quarter starting</b>								
	Current	Previous	Change	% Chg	Jan 2018	Jan 2017	Change	% Chg
Percentage Domestic Related	17.4%	16.5%	0.9%		21.5%	16.2%	5.3%	
DA Percentage High Risk	61.3%	69.7%	-8.4%		60.0%	70.6%	-10.6%	
DA Percentage Medium Risk	38.7%	30.3%	8.4%		40.0%	29.4%	10.6%	
DA Percentage Standard Risk								
Percentage Hate Crime Related	3.5%	4.5%	-1.0%		5.4%	4.8%	0.6%	
<b>Victim Details</b>								
<b>12 Months Rolling</b>								
<b>Latest Quarter starting</b>								
	Current	Previous	Change	% Chg	Jan 2018	Jan 2017	Change	% Chg
Aged 18-24	14.4%	12.8%	1.6%		12.9%	19.0%	-6.1%	
Aged 25-49	36.1%	45.3%	-9.1%		33.3%	46.7%	-13.3%	
Aged 50-75	29.6%	19.3%	10.4%		28.0%	18.1%	9.9%	
Aged Over 75	9.3%	11.8%	-2.5%		9.7%	8.6%	1.1%	
Repeat Victim (currently unavailable)								
<b>Mental Health</b>								
<b>12 Months Rolling</b>								
<b>Latest Quarter starting</b>								
	Current	Previous	Change	% Chg	Jan 2018	Jan 2017	Change	% Chg
Detained under S136 (no data pre Nov15)	1	0						
Average time detained (in hours)	16.2604463							

Missing Adults	12 Months Rolling				Latest Quarter starting			
	Current	Previous	Change	% Chg	Jan 2018	Jan 2017	Change	% Chg
Number of Missing Adults	295	303	-8	-2.6%	70	99	-29	-29.3%
Number of Missing Adult Reports	427	396	31	7.8%	99	140	-41	-29.3%
Number of Repeat Missing Adults	109	129	-20	-15.5%	28	50	-22	-44.0%