

South Gloucestershire

# Safeguarding Adults Board

Annual report



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# How to report a concern

There is one central number to call if you are concerned about an adult who is or may be at risk in South Gloucestershire - **01454 868007** 

Please also call this number if you use care services, you are a carer or a professional and you want to:

- talk about any safeguarding issues, worries or questions you have
- make a complaint or give us feedback
- ask for advice

# 1. Introduction by Independent Chair

There has been increasing national prominence and social awareness of the vulnerabilities faced by those adults in our communities requiring care and protection. This reporting period has been an important year in embedding effective multi agency approaches and preparing for the Safeguarding Adults Board becoming a statutory body on 1 April 2015.

Safeguarding is everybody's business and the Board has worked to engage our citizens and communities in how they can better understand and play their part in creating a safer and supportive environment for vulnerable adults. Families, friends and neighbours play a central role in this endeavour and it is important they receive the support they need and deserve.

Every individual is entitled to live their life as independently as they are able. In addition it is important that services are personalised to ensure that they are flexible to the choices and wishes of the recipient. Safeguarding adults is about retaining individuality and dignity in day to day living and these are principles our partner organisations have been keen to live up to.

This annual report gives a summary of the organisations represented on the Safeguarding Adults Board, the work we have undertaken and the plans we have for future developments. The Board provides a collective strategic leadership that aims to deliver the best services available. There is a strong commitment to continuous learning as we gather increasingly better information, develop new approaches and crucially, as we bring together and respond to the views and wishes of those who use or require these services.

The South Gloucestershire Safeguarding Adults Board has the advantage of many highly committed agency representatives who bring initiative and determination to the task of improving our safeguarding capacity albeit within the current resource constraints. The Board has prepared well for its new statutory obligations and has much to do to maintain and further achieve the high standards that safeguarding partners and our communities expect.

The measure of a civilisation is how it treats its most vulnerable members and we aspire to achieve communities where every individual is recognised for their value, potential and importance.



Sally Lewis OBE Independent Chair South Gloucestershire Safeguarding Adults Board

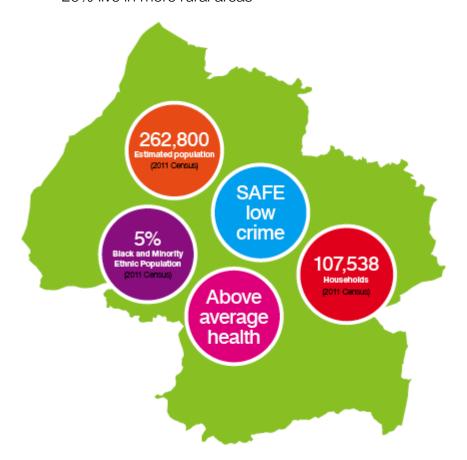
# 2. Living in South Gloucestershire

South Gloucestershire is a mix of long-established urban communities, market towns, small villages and substantial new development. Characterised by very differing communities with individual needs and aspirations, the diversity of its landscapes and neighbourhoods contribute to a high quality of life.

South Gloucestershire's location and its proximity to the city of Bristol present a number of cross boundary opportunities and challenges which are dealt with by working in partnership with the neighbouring authorities of Bristol, Bath and North East Somerset and North Somerset.

South Gloucestershire has been one of the fastest growing areas in the country.

- 62% of the population lives in built up areas adjoining Bristol
- 18% live in the towns of Chipping Sodbury, Thornbury and Yate
- 20% live in more rural areas



The area is served by Avon and Somerset Police Constabulary and a Police and Crime Commissioner.

Services are provided by South Gloucestershire Council unitary authority.

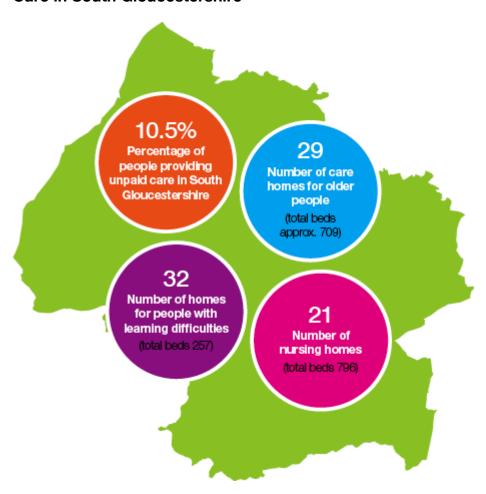
Health services are commissioned by South Gloucestershire Clinical Commissioning Group and

NHS England and are provided by Avon and Wiltshire Mental Health Trust, North Bristol Trust, Sirona Care and Health, Primary Care and other commissioned providers.

There are three custodial establishments in the area, Ashfield and Leyhill prisons for men and Eastwood Park prison for women.

Probation and Rehabilitation Services are provided by the National Probation Service and Bristol Gloucestershire Somerset and Wiltshire (BGSW) Community Rehabilitation Company.

#### **Care in South Gloucestershire**



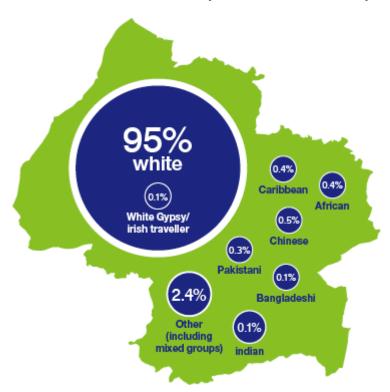
Increasingly people are being supported at home for longer periods. In general homes for people with learning difficulties/disabilities tend to be far smaller than homes for older people.

# South Gloucestershire resident population by age: Census 2011

The growth in older people in South Gloucestershire is above the national average. From a safeguarding perspective a proportion of older people will be perceived as at risk as a result of ill health or disability.



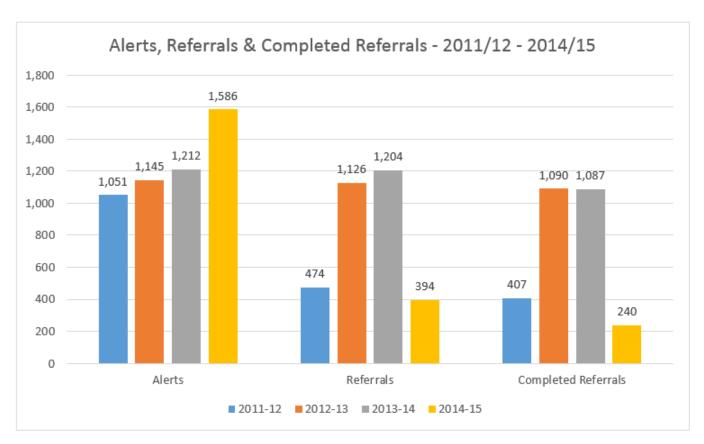
South Gloucestershire Population Ethnic Groups (all ages): Census 2011



# 3. Summary of safeguarding activity in South Gloucestershire

The Safeguarding Adults Board oversees analysed data for safeguarding in South Gloucestershire via the Quality Monitoring subgroup. When someone contacts the council's Customer Service desk about a situation which concerns them a record is made of that contact. This is called an **alert.** Trained staff within South Gloucestershire make a decision based on the information they have been given as to whether the situation is one which requires further investigation within the safeguarding process. If so, a **referral** is generated. The referral will be closed at the end of the safeguarding involvement whether this is after a few days of information gathering and analysis or after several months of investigation including a risk assessment and the development and implementation of a safeguarding plan. This section of the report looks at data we have for safeguarding activity between April 2014 and March 2015.

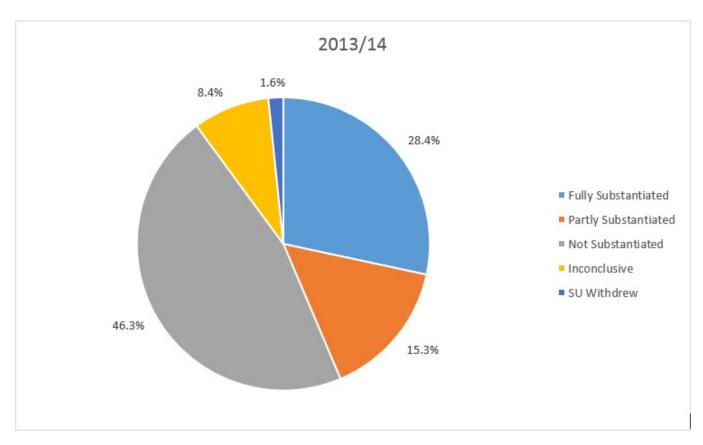
From 2007 there has been a consistent increase in alert rates and this has continued into 2014-5. There was a rise from 1051 alerts in 2011-12 to 1226 in 2013-4 and in 2014-15 there have been 1586 alerts. About 50% of these alerts go on to have further work done. This used to be the point at which the process became a referral, however in order to ensure consistency across the country the point at which an alert is deemed to become a referral has changed and it is now further into the process which means that the number of "referrals" has reduced. The work however has continued to increase as each alert needs to be examined as before.

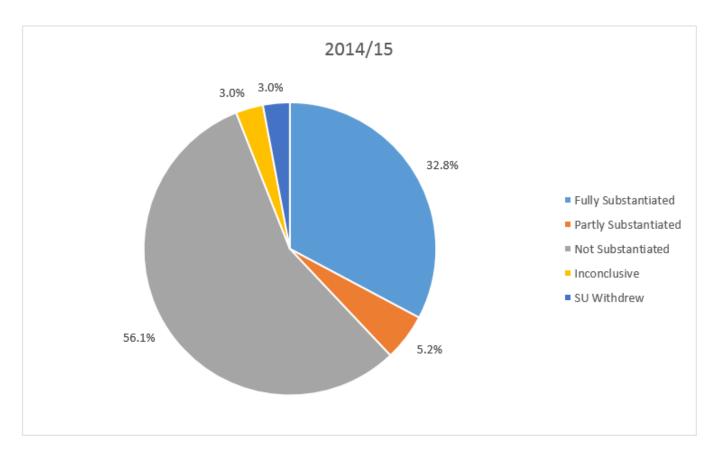


# Completed referral by outcome

All alerts are carefully assessed. With further information gathering, some are found not to be safeguarding, some will concern an episode of abuse that has already been resolved and some will need further investigation. Whenever the episode is closed a decision will need to be made about whether the abuse is thought to have been substantiated. The charts below show a comparison between 2013-14 and 2014-15. The team who undertake most of the individual safeguarding has worked to ensure more clarity and avoid the use of "inconclusive" as an outcome except where there is no alternative. There has been a slight rise in the number which are fully substantiated and a significant rise in those which have not been substantiated, this would mean for example that the threshold of significant harm has not been reached or that there is no evidence the alleged abuse took place.

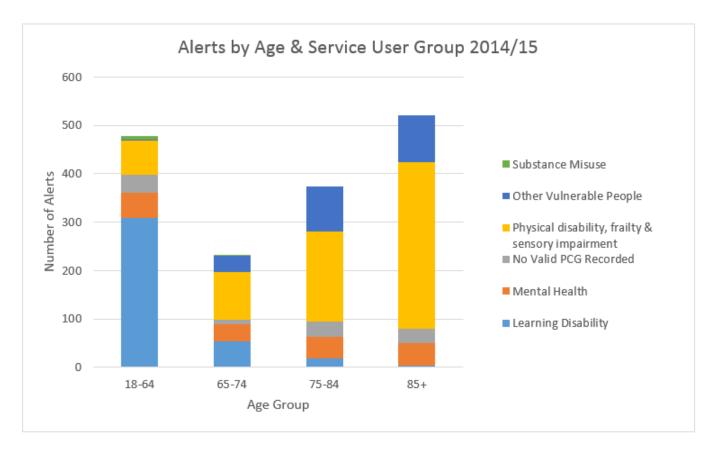
The slight rise in the numbers where the service user withdrew from the process may reflect the work under "making safeguarding personal" (see Spotlight section.)





# Alerts by age and service user group 2014-15

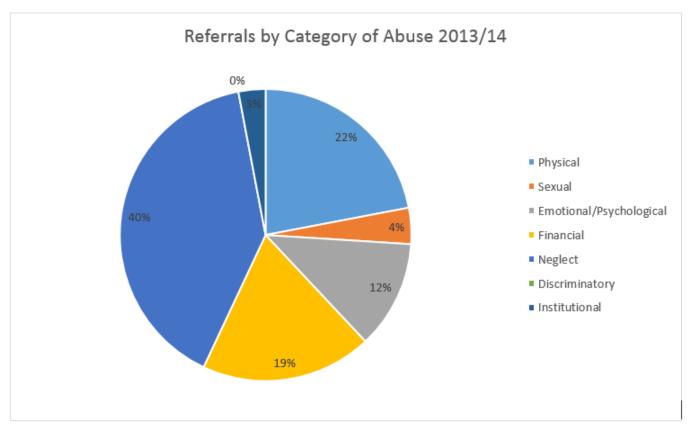
There has been a fairly equal rise in alerts across all age groups. The Department of Health has changed definitions so the subsets within the age groups are not comparable and have become difficult to compare year on year. For example the numbers of people with mental health issues in the over 85 age group is known to have risen, however because people are now defined by the services they receive and many people are supported by mainstream social care services they are not showing as having a mental health issue.

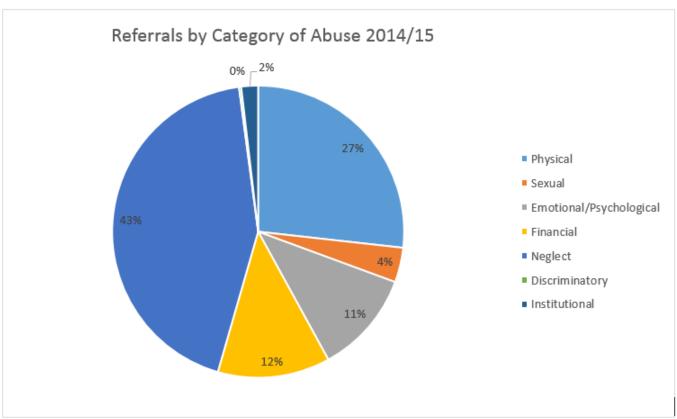


N.B: No valid PCG recorded means that there is no definition of the person's needs on the system.

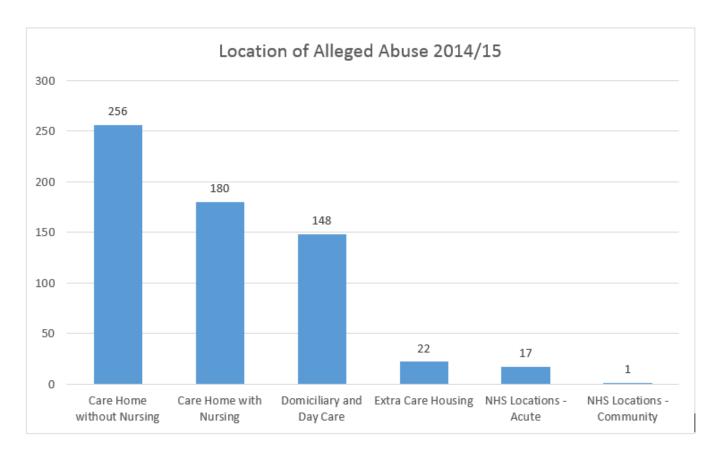
# Referrals by category of abuse 2013-14 and 2014-15

The changes in definition by the Department of Health were implemented in 2013/14 so these charts are directly comparable. This information is based on the referrals not the alerts and shows a slight increase in instances of neglect and a slight decrease in instances of physical abuse referred to South Gloucestershire for investigation.



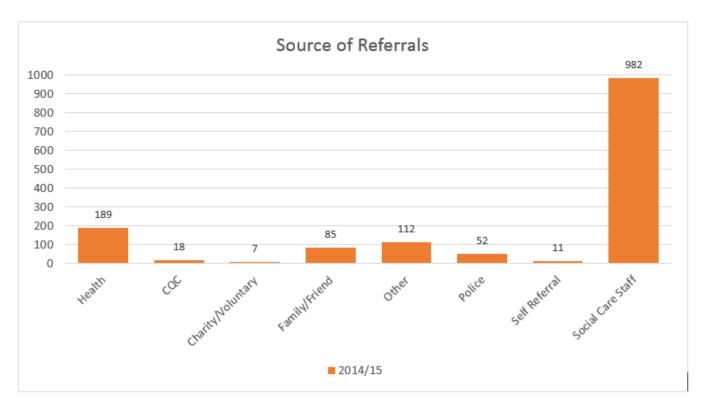


Location of alleged abuse 2014-15



### Source of referral 2014-15

The majority of referrals continue to come from alerts made by social care staff. The numbers coming from health staff have remained static, while the numbers from the police have doubled as have those from family and friends.



# Institutional investigations 2014-15

There continues to be a significant number of full institutional investigations. The level of enquiry is proportionate and varies from a desk top review to a full investigation which can last for many months.

Based on the number registered with the Care Quality Commission, there are 22 care homes with nursing and 61 care homes without nursing in South Gloucestershire. There are 43 domiciliary care providers, 8 supported living services and 6 extra care housing services. There are 861 beds within the care homes with nursing and 968 within the care homes without nursing. The majority of nursing homes are for older people and have between 40 and 80 beds. The care homes range from 4 to 50 beds and many are small with between 4 and 10 beds providing services for people with learning difficulties.

During 2014/15 a significant number of services were subject to examination by the institutional safeguarding team. This was triggered either when someone raised a concern about the whole service or the institution had 3 individual alerts in a six month period. Each investigation involves examining the alerts to establish if there are any themes and also reviewing whether the alerts were substantiated. If there are concerns contact is made with commissioning teams to determine next steps. The aim is to achieve the earliest intervention with providers in order that concerns are tackled effectively and promptly.

There were 84 occasions where concerns progressed beyond the initial screening. Of these 52 went to a full review with other services from relevant agencies and this was sufficient to satisfy the teams that no further action was needed. In five instances the services were within the Bristol area who took the lead with our support and involvement. Of the remaining 27 in South Gloucestershire there was more significant multi-agency engagement and action. In handful it was necessary to stop placing people with a service whilst action was taken to ensure a safe provision. Of the 27 circumstances, 13 investigations related to nursing homes. Three homes were involved twice and one home has remained in safeguarding for most of the year and continues to be monitored. Two care homes and two supported living providers also required this level of intervention. In all of these 27 cases there was strong multi-agency work including Care Quality Commission, local health services and commissioners.

# 4. Why do we have a Safeguarding Adults Board?

From April 2015, as part of the implementation of the Care Act 2014 the Safeguarding Adults Board was placed on a statutory basis. Prior to that it functioned as a multi-agency partnership following the Department of Health's No Secrets Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse (2000).

The aim of the Board is to promote the safeguarding of adults within South Gloucestershire through working together. This involves raising awareness of adult safeguarding to reduce abuse and protect adults at risk. Where abuse is found to have occurred, agencies work together to support future protection and recovery.

The SAB structure can be seen in <u>appendix 1</u>. Fuller details of the purpose and aims are within the terms of reference in <u>appendix 2</u>. Board membership and attendance for the year 2014 can be seen in <u>appendix 3</u>. This shows that even before the Board was placed on a statutory footing there has been a strong commitment from most agencies to attend regularly.

The Board has key relationships with the Health and Wellbeing Board, the South Gloucestershire Safeguarding Children Board, and is working with adjoining Safeguarding Adults Boards to develop consistent policies and procedures.

# 5. Summary of activity to support safeguarding adults and its impact on practice and outcomes for adults at risk

Much of the work of the Safeguarding Adults Board is undertaken by the sub groups. The priorities for the sub groups are determined by the Board business plan see <a href="appendix 4">appendix 4</a>. The Board has made some real progress against its business plan in the last year. The appointment of an independent chair for the Board has been a long term commitment which was achieved during the year. The first South Gloucestershire Stop Adult Abuse Week has moved forward our commitment to engaging with local communities. The pilot questionnaire that was developed to find out what service users think about of the service is part of the Board's commitment to ensuring that safeguarding processes work for adults at risk.

# 5a Quality monitoring subgroup (including audit)

# Purpose

To undertake such work as required by the Board, this will mainly stem from the work plan but includes regular and ongoing work:

- To monitor partner, and specifically South Gloucestershire Council, data and report on this to the Board
- To maintain an Audit sub group which will look in depth at cases (this group currently meets bi-monthly and looks at 10 cases following an agreed theme e.g. financial abuse, neglect)
- To provide reports to the Board at its quarterly meetings
- To provide a report for the annual report

## Membership

The membership is drawn from agencies represented at the Safeguarding Adults Board: South Gloucestershire Council, South Gloucestershire Clinical Commissioning Group (CCG), Sirona, Avon and Somerset Constabulary, Avon and Wiltshire Mental Health Trust (AWP), North Bristol Trust (NBT), NHS England.

The Group meets quarterly one month before the Safeguarding Adults Board. It looks in detail at the data provided to it. The data is mainly provided through South Gloucestershire Council and is in effect a quarterly version of the data presented in the Annual Report. This gives the group the opportunity to look at trends in safeguarding both in individual work and for institutional investigations.

A small group meets bi-monthly to audit 10 cases in depth. This small group is made up of representatives from the police, health and adult services within the council. These reports are provided to the Quality Monitoring subgroup and then on to the Safeguarding Adults Board. The group looks at the process, at the decisions made and at the outcomes for people. Feedback is also given direct to operational teams where appropriate.

#### **Achievements**

The subgroup reports to each SAB meeting any relevant observations arising from the data or audits and/or any causes for concern. The types of issues and trends which have been raised and monitored have included the timeliness of reporting back on safeguarding investigations across the multi-agency partnership, ensuring cases are completed and closed in a timely fashion, trends in where alerts are coming from or the type of alerts.

# Areas for improvement and future developments

The group is currently building on the data it is provided with. North Bristol Trust and South West Ambulance Service started providing data during the year. Sirona will be providing data from the new financial year. This will enable the group to cross reference and integrate data. The group also

monitors institutional investigations and it is planned for this to be further improved through improvements to the council's database which will allow the information to be better reported. In addition the group will focus on any areas identified in the SAB Strategic Priorities and Business Plan (See Appendix 6) which are likely to include more detailed quality issues.

Sheila Turner, Team Manager, South Gloucestershire Council, Chair of subgroup.

# 5b Training and development subgroup

This subgroup captures the main themes and messages around safeguarding at a strategic level via the Board and other subgroups, particularly the quality monitoring subgroup. Key influences on its work are: new legislation, the SAB Business Plan, external audit/review processes, national and regional projects and guidance, learning points from any Serious Case Reviews, changes to local policies and procedures, and needs identified by the workforce. We then translate the priorities into appropriate multi-agency training programmes.

## Membership

The training subgroup has representation from South Gloucestershire Council, Avon and Somerset Constabulary, Sirona Care & Health (South Glos), Avon and Wiltshire Mental Health Partnership (AWP) and the independent, voluntary and private (IVP) sectors. The group meets on a quarterly basis.

### **Achievements**

The group has maintained the multi-agency training "pathway" which consists of five core programmes that are available to a wide range of local organisations. Delegate numbers overall in 2014-15 are on a par with the previous year (total 819). 69% of all delegates work for local adult social care independent, voluntary and private (IVP) agencies (up 8.5% on 2013-14). There was a 6% increase in attendance from council staff, and a 5% drop in the proportion of NHS employees accessing these courses. However, it is hoped a recent workshop specifically for GP Safeguarding Leads will lead to a renewed focus within GP Practices in 2015-16, albeit via a more appropriate "single agency" route.

Training has continued to be arranged by the council for individual agencies. When this happens, attendance data is monitored and the core courses can be adapted to reflect specific work contexts, policies and agreed ways of working. Many agencies across all sectors purchase or organise their own single-agency training as well as, or instead of, accessing the multi-agency courses arranged by the council on behalf of the SAB - hence the decision to coordinate a second Safeguarding Adults Workforce & Training Survey (see below).

Delegate feedback on the core multi-agency courses has remained positive overall in terms of the quality of training, and the degree to which managers and employees in a wide range of agencies report that they are getting the information they need. Responses to follow-up surveys conducted around 3 months after the training continue to show broadly encouraging results on the extent to which the training programmes are increasing confidence and changing practice across workforces (managers and their staff). Full details of the multi-agency courses and information on delegate feedback and evaluation of impact is in <a href="Appendix 4">Appendix 4</a>.

In addition to the "core" activity this year, the subgroup has:

• delivered the re-designed Continuous Professional Development (CPD) Update workshops, aimed at experienced practitioners. These focused on the first of a number of locally-

- identified "themes and priorities": Safeguarding Adults (SGA) and Dementia, and SGA and Personalisation
- worked with IVP sector SAB representatives to co-produce the second SAB Workforce & Training Survey. This audit is in two parts: a questionnaire to gain data and views from individual employees across workforces in South Gloucestershire (over 400 responses in late-2014), and a 2<sup>nd</sup> phase that asks all managers of local services (statutory and IVP sectors) to provide information about the training and development arrangements they make for their staff around safeguarding adults (questionnaire "live" between March and May 2015)
- maintained a leading role in building on the work of the recently-established "Top South West" Safeguarding Adults Trainers Network
- supported ongoing engagement with safeguarding adults training by key statutory sector agencies, including the CCG, Police, Sirona Care & Health, Prison Services and AWP
- continued to focus, with IVP sector representatives, on any new approaches to training and assessing employee knowledge and competence around safeguarding adults issues

# Areas for improvement and future development

- 1. Complete the coordination of the second South Gloucestershire SAB Workforce & Training Survey, collate the results and make arrangements to share the key messages, learning points and examples of good practice across agencies and via the SAB.
- 2. Refresh the multi-agency Workforce Development & Training Plan so that it covers 2015-18 (including reference to the National Capability Framework for safeguarding adults where necessary).
- 3. Work together with the SAB and other subgroups to plan and deliver the first South Gloucestershire SAB Annual Conference (October 2015).
- 4. Maintain the emphasis on ensuring experienced practitioners stay engaged with safeguarding adults learning by:
  - running more CPD Update workshops: focusing on the next two themes of SGA and Domestic Abuse, and Self-Neglect (autumn/winter 2015)
  - commissioning additional multi-agency training programmes on specific SGA-related topics, in response to any identified needs from operational managers and partner agencies
- 5. Use the council's new learning management system to build on existing SAB data about how multi-agency training increases worker confidence and leads to changes in practice. The aim is to get more in-depth and robust intelligence from agencies that better demonstrates the real impact of training on how workforces are safeguarding adults locally (link to priority 1, above).
- 6. Jointly develop better collaboration and resource-sharing to ensure South Gloucestershire is at the centre of joint initiatives and provides consistent messages to workforces locally:
  - sub-regionally through the Top South West SGA Trainers Network (a SGA Trainer Conference is being planned for autumn 2015), and
  - with other West of England local authorities (jointly-commissioned "Duty To Refer" workshops are running June 2015 with the Disclosure & Barring Service)
- 7. Develop the core multi-agency training programmes as needed to ensure these properly

- reflect both national direction (e.g. Care Act/Making Safeguarding Personal) and local priorities and processes.
- 8. Explore different methods and resources employers can use to support and assess their workforce's learning and development around Safeguarding Adults, and share such methods across sectors as required.

Nick Thorne, Training Manager, South Gloucestershire Council, Chair of subgroup

# 5c Communications subgroup

# Purpose

The group has continued to meet at least every two months and to focus on raising awareness of safeguarding adults among service users, carers, providers and the public.

#### Members

The group has an independent chair and consists of members from Freeways, Sirona Care and Health, Knightstone Housing, Milestones Trust, Chescombe Trust and the South Gloucestershire Safeguarding Team. The group is effectively supported by South Gloucestershire Council's Strategic Communications team.

#### Achievements:

- As part of the national 'Making Safeguarding Personal' plan we piloted the service user feedback questionnaire, developed last year, from 1 July 2014 for three months. This had more than a 25% return and the information received has been used by the Access Team to improve the experience of the safeguarding process. The pilot has enabled us to further develop the questions and will include feedback on any police involvement. The questionnaire will be made available to all service users where an investigation progresses to a strategy meeting or discussion from 1 April 2015
- Participated in the first 'Avon-wide' Stop Adult Abuse week 15-21 June to raise public
  awareness of safeguarding and encourage people to report any concerns. We have reflected
  on how this was organised and the possible impact on safeguarding alerts and people
  seeking information from the website. As a result we plan for a more co-ordinated approach
  in 2015 and to focus on health centres and GP surgeries in order to further raise public
  awareness
- Continued to develop the council web pages with a focus on ease of access, reporting concerns and high quality general web information that clarifies and raises awareness of adult safeguarding. The 'report it' function is now readily available
- Developed a joint children and adults safeguarding communication strategy
- Ensured that the Safeguarding Adults Board sends out a summary feedback to all providers and partner organisations so that all are aware of the key messages after each SAB meeting

# Future developments:

- To continue work on updating the safeguarding adults information on the council website and link this to the proposed Avon and Somerset website if funding application is successful for all 5 SABs within the constabulary area
- To expand Stop Adult Abuse Week in June 2015 in collaboration with the other three communication sub groups in the ex-Avon area
- To continue collaborative work with Children's safeguarding to ensure consistent design and mirrored messages in annual reports, online and offline materials where appropriate

- From May 2015 to collate and produce an e-newsletter to share with all providers after each SAB meeting focusing on key issues raised by members of the SAB
- Report to the SAB every three months on the feedback questionnaire audit received from service users who have gone through the safeguarding process

Damaris Howard, Director of Regulated Services, Freeways, Chair of subgroup

# 6. Other key Board activity and achievements

In addition to the work covered by the subgroups the Safeguarding Adults Board has implemented and prepared for The Care Act 2014 provisions for adult safeguarding. The relevant sections of the Act came into force on 1 April 2015. This gave an opportunity to meet another aim which is to provide greater consistency in safeguarding across the local area. A joint Safeguarding Adults Policy has now been agreed by Safeguarding Adults Boards across Bath and North East Somerset, Bristol, North Somerset, Somerset and South Gloucestershire.

The Board has also continued to develop closer working with the Safeguarding Children's Board using the benefits of there now being a joint strategic team within South Gloucestershire Council to identify areas where working together would be beneficial. One example of this is the development of a joint website due to go live in 2015.

# 7. Outcome of key external inspections

# Avon and Somerset Constabulary (ASC)

Her Majesty's Inspectorate of Constabulary (HMIC) reports contain recommendations that require action from specific forces; action from all forces; action from national bodies such as the College of Policing, the Home Office and action from Association of Chief Police Officers (ACPO) Leads. Not all require a response from Avon and Somerset Constabulary. Some recommendations are addressed to a combination of organisations, and some are dependent on action from other agencies taking place in order for forces to progress their part of the recommendation.

The agreed process and approach is set out in the Guidance for Police Business Leads. Progress updates from the Business Leads are recorded within business support.

HMIC have advised that they will be reviewing the progress of recommendations; the recent Child Protection visit is a current example HMIC will be reviewing previous recommendations as a matter of course.

The following is a list of relevant inspections that affect the policing response to vulnerability.

#### **Domestic Abuse**

National and Force Specific Report Published 27 March 2014

Child Protection (pilot visit to ASC)

Report dated 17 July 2014

Crime Data Integrity (CDI)

National and Force Specific Reports published 18 November 2014

The welfare of vulnerable people in police custody

Report published 10 March 2015

In 2015 the force has been inspected in connection with honour based violence, forced marriage and female genital mutilation. There has been a very recent inspection around the force response to vulnerability focusing on missing persons, domestic abuse follow up and safeguarding the public. The next phase is in autumn 2015. Inspection reports are available on the HMIC website: <a href="http://www.justiceinspectorates.gov.uk/hmic/avon-and-somerset/">http://www.justiceinspectorates.gov.uk/hmic/avon-and-somerset/</a>).

# Care Quality Commission (CQC)

The CQC inspects all care homes and domiciliary care services which provide personal care to people. These reports are checked by the Institutional Safeguarding Team. This forms part of the

information used to assess whether a provider may be a subject of concern.

The new inspection format provides a very easy way to see whether a service is outstanding, good, requires improvement or is inadequate. From 1 April 2015 CQC will have the power to put a service into special measures in addition to its existing powers to require actions to bring the service to an acceptable level.

#### A brief summary of the AWP CQC Inspection

- The AWP CQC Inspection took place in June 2014, led by Professor Chris Thompson involving over 70 inspectors
- Many positive themes were identified including kind, caring, compassionate and responsive staff and clear leadership
- Safeguarding processes were complemented
- Despite the above, there were significant areas of concern identified by the CQC including four warning notices and a range of enforcement actions. These did not immediately pertain to the South Gloucestershire Locality of AWP. The issues were largely around the environment, safety and staffing levels on inpatient units in other localities
- A comprehensive Trust-wide action plan was put into effect after the visit including improvements to pharmacy processes, care planning, improved safety and increased learning from incidents
- The CQC revisited in September 2014 and lifted all four warning notices. Praise regarding the speed of improvement was given
- A further CQC visit is expected later in 2015. The Trust is aiming to gain a "good" rating

#### A Brief Summary of the NBT Inspection

- Overall Rating, Rated as: Requires improvement NBT feel that this reflects the organisational change and operational challenges with the move to the Brunel building at the Southmead site
- All areas found to be Good for Caring
- Riverside Inpatient CAMHs. Rated as Good
- Emergency Department (Enforcement Action) Rated as: Inadequate key focus to improve safety and responsiveness
- Outstanding practice CCHP, Cossham Birth Centre Rated as Outstanding
- DoLS Practice in ICU CQC asked for changes to the way Deprivation of Liberty is applied in the Intensive Care Unit

Overall there were 34 'must do' actions and 41 'should do' actions

For further information you can visit the CQC website - <a href="http://www.cqc.org.uk/">http://www.cqc.org.uk/</a>

# 8. Spotlight on Safeguarding Services

This section includes a number of projects /services which are not covered elsewhere but which are intended to improve services to people and therefore reduce safeguarding incidents or improve the service to people following an incident.

### Dementia care

A particular area of concern has been the number of safeguarding alerts in dementia care units. Providers had identified a number of areas of difficulty including getting consistent responses when crises occurred. This was sometimes meaning homes were appropriately reluctant to take people into the home who had more complex needs. Funding from the Clinical Commissioning Group has enabled an increase in staff in the Care Home Liaison team, a team of specialist mental health staff. Early feedback about this improved support is very positive. From a safeguarding perspective it is hoped that improved staff knowledge about meeting the individual needs of people with dementia will reduce the number of incidents between residents. At present this funding is for one year.

# Making safeguarding personal

Work has continued to ensure that people are at the centre of their safeguarding processes. This means checking with people at the beginning of the process what they want out of it and also checking back at the end to see what their views are. In addition we take into account, as the process continues, that people may change their mind about what outcomes they want. As part of this process a pilot survey was undertaken to see what people thought of the actual process. The feedback was largely positive but some issues were raised which have been fed back to the relevant teams. From April 2015 this feedback will become part of the mainstream process to allow the Safeguarding Adults Board to receive ongoing reports about the personalisation of services involved in safeguarding.

# 9. Healthwatch report

Healthwatch South Gloucestershire aims to make health and social care better for everyone, especially those who perhaps face additional challenges in accessing services. Healthwatch plays a central role in enabling people's view and experiences of health and social care to be heard. In 2014/15 Healthwatch heard 374 issues an increase of 32% on 2013/14.

Engagement with communities enables and supports people to understand how the health and social care system works to express their views and share their experience. In 2014/15 Healthwatch has worked with people in the more rural areas of South Gloucestershire and heard how for some residents it is easier to access secondary health care in Bath.

Residents in South Gloucestershire would like more information about how to access services and we have shared this with commissioners. Yate West Gate Minor Injuries Unit is well used by the area's rural communities and Healthwatch has heard lots of positive feedback about the service. The community would like to see the service have longer opening hours and an x-ray service at weekends.

Healthwatch has engaged with the Gypsy and Traveller communities to hear their experiences of barriers to health and social care. Healthwatch has recently taken part in the Gypsy and Traveller conference run by the West of England Strategic Traveller Health Group to raise the health inequalities issues with healthcare professionals.

Healthwatch also worked to hear the views of older people in Cadbury Heath. Healthwatch heard over 30 issues about services including GPs, secondary and primary care which have been fed back to service providers and commissioners.

Healthwatch works with volunteers who represent the views of local people when services are being recommissioned or services are redesigned.

Healthwatch has been working with children and young people, under the banner 'Young Healthwatch' to hear their views on services and several young people from South Gloucestershire are taking part in the programme board for the recommissioning of children's community health services.

Healthwatch has an information and signposting function that is delivered through Well Aware. There were 257,038 views relating to the Well Aware website in 2014/15 (serving B&NES, Bristol and South Gloucestershire) and the top five areas searched for were:

- mental health
- dementia
- befriending
- gardening
- counselling

Healthwatch has the statutory right to access services and observe the services happening and in

2014/15 Healthwatch visited 10 care homes to speak to residents and their families. Reports on the observations and the recommendations are shared with the care home, the local authority and the Care Quality Commission. Volunteers who undertake the visits and Healthwatch staff all have access to safeguarding training and are made aware of the importance of reporting anything they observe when undertaking their work with Healthwatch.

Healthwatch has built a good relationship with the Safeguarding Adults Board and looks forward to working more closely in the coming year to ensure the safety of all vulnerable adults.

# 10. Performance monitoring including SeriousCase Reviews/Domestic Homicide Reviews(DHRs)

There have been no serious case reviews or domestic homicide reviews within South Gloucestershire which have reported back during this period. The Board received a presentation about a DHR from Dorset which had raised key issues about information sharing especially around mental health services and risk assessments. This knowledge will be integrated into future training.

# 11. Analysis of Board effectiveness and areas for development in the coming year

This annual report reflects multi-agency adult safeguarding activity across South Gloucestershire covering the work undertaken during the year and plans for 2015/6.

The business plan carried into 2014/5 has now been completed and a completely new strategic plan has been developed for 2015 – 18.

Key areas of achievement have been reflected in the subgroup reports however it is worth noting in particular:

- The development and signing off by SABs of an Adult Safeguarding Policy across Bath and North East Somerset, Bristol, North Somerset, Somerset and South Gloucestershire
- Piloting the service user feedback process including a questionnaire and feedback to SAB
- Progress in developing a new safeguarding website to be hosted by South Gloucestershire Council alongside online information about the Safeguarding Children's Board.
- Development of a communications strategy which is shared with the Safeguarding Children's Board
- Development and agreement of joint working protocols in situations where investigations involve people with very complex needs

The Strategic plan for 2015-18 at appendix 5 was agreed by the Board in June 2015. The plan was developed by SAB partners and is supported by an annual Business Plan, which is a multiagency document. There are 5 Strategic priorities across the work of the Board:

- Co-ordination, Governance and Accountability of the Safeguarding Adults Board
- Ensuring the voice and experiences of users are central to the work of the Board
- Working with providers to clarify: information flows, accountability and the role of the Designated Adult Safeguarding Manager (DASM)
- Quality Assurance of SAB and member organisations including identifying best practice and lessons learnt
- Develop a framework to improve practice and look at emerging themes e.g. self-neglect, difficult to reach groups, carers, Prevent, modern slavery

This plan is designed to ensure that the principles and guidance from the Care Act 2014 are fully implemented and embedded, that service user and carer voices are heard and incorporated into the work of the Board, performance is monitored and practice continues to improve. This will require considerable investment by Board members to achieve but it is necessary to ensure that the Safeguarding Adults Board is able to oversee Safeguarding services which meet the high standards that our partners and communities expect.

# Appendix 1 – Board structure

#### Chair

Peter Murphy
Director for
Children, Adults & Health
South Gloucestershire Council
From December 2014
Sally Lewis
Independent Chair

Quality Monitoring sub group

Chair

Sheila Turner

Safeguarding Adults Manager

CA&H, SGC

Training and Development sub group

Chair

Nick Thorne

Training and Development Manager, SGC Communication sub group

Chair

Damaris Howard

Director,

Regulated Services

Freeways

Policy and Procedure Sub group: Currently not meeting. Likely to become active as a "virtual" group through updating of Procedures during 2015.

# Appendix 2 – Safeguarding Adults Board terms of reference

Safeguarding Adults board terms of reference – March 2010 (to be reviewed 2015/6):

The South Gloucestershire Safeguarding Adults Board (SAB) is a multi-agency board set up to promote the safeguarding of adults within South Gloucestershire. The Board meets on a quarterly basis, but can convene in urgent situations, such as the need for a serious case review (see below). The SAB believes that all people have the right to live their lives free from abuse and exploitation.

#### The Board aims to:

- provide the lead in promoting safeguarding adults work in South Gloucestershire
- work together to promote the prevention of, investigation of, protection from, and recovery from abuse
- promote the principles of safeguarding adults work; namely respect for human rights, choice, dignity and freedom from abuse and neglect
- promote the end of discrimination against disabled people and older people
- ensure that safeguarding services are available to all people covered by the safeguarding adults policy, regardless of race, ethnic origin, nationality, religion, cultural background, gender, sexual orientation, household/domestic circumstances, age, disability or illness
- ensure that adults in South Gloucestershire are better safeguarded against abuse, including domestic abuse
- · work in partnership with other relevant bodies to create a safer community for all

# **Objectives**

- to ensure there is an effective multi-agency system to respond to and investigate allegations
  of adult abuse and neglect
- to ensure those at risk of abuse have access to effective safeguarding plans
- to support the development of services that provide protection and support to those at risk of adult abuse
- to support the development of services that enable those who have experienced adult abuse to access services which enable their recovery from that experience and that promote positive outcomes during and after the recovery period
- to support the development of services which enable people who have caused adult abuse to change their behaviour
- to monitor the quantity and quality of safeguarding adults work in South Gloucestershire including access to safeguarding services by those who are harder to reach
- to review the policy and procedures and update them in the light of experience and changes in legislation or government policy
- to ensure that the policy includes a "Serious Case" review protocol, to be triggered in respect of any adult covered by the procedures who has died or come to serious harm as a result of

abuse, including neglect

- to support organisations to inform and train staff members to confidently carry out their responsibilities under the policy and procedures
- to develop and promote a comprehensive multi-agency training programme and to support organisations to inform and train staff members to provide quality services to adults at risk of abuse
- to support organisations to provide services that promote prevention of abuse
- to enable adults who may be experiencing abuse to access information about safeguarding adults and the routes by which they can access support and protection
- to raise public awareness of adult abuse and safeguarding adults work
- to promote the work of the Board including the publication of an annual report

#### Remit

The SAB will operate within the definitions of abuse and neglect outlined in "No Secrets" (DoH & Home Office 2000). The SAB's remit will be to encourage the development of policy and procedures consistent with the ADSS National Standards (2005) and any subsequent relevant legislation and national policy guidance.

## Lines of accountability

Members of the SAB are accountable to their respective management bodies. The SAB is accountable to South Gloucestershire Children, Adults and Health Department as the lead coordinating agency for safeguarding adults. As the lead authority, South Gloucestershire maintains an internal governance and scrutiny structure.

Within the council's structures the work of the SAB falls within the remit of the Safer and Stronger Communities Partnership together with engagement by the Health and Wellbeing Strategic Partnership.

# Membership

Membership of the SAB will comprise the designated lead officers (or their nominated delegate) of the key agencies:

- Children, Adults & Health lead role and chair of SAB
- South Gloucestershire Clinical Commissioning Group (CCG)
- NHS England
- Sirona Care and Health
- Avon & Somerset Constabulary
- Avon & Wiltshire Partnership Mental Health Trust
- North Bristol NHS Trust
- Avon & Somerset Probation
- HM Prisons
- Avon Fire & Rescue
- Voluntary service providers by invitation
- Independent sector providers (including housing, Supporting People, day services,

domiciliary care and care home providers) – by invitation

- Strong, Safer Communities Manager, Environment and Community Services,, South Gloucestershire Council
- Team Leader, Workforce Development Chief Executive & Corporate Resources, South Gloucestershire Council
- CQC by invitation

By invitation of the SAB, representative(s) of other relevant agencies providing services to or advocating on behalf of adult service users or acting on behalf of carers.

By invitation of the SAB, senior practitioners from relevant professions and managers with responsibility for work in adult abuse.

#### Minimum attendance

The minimum attendance for quarterly SAB meetings must include the Chair (or nominated delegate) and two non-South Gloucestershire Council agencies who are full members of the SAB.

# Sub groups

To facilitate the effective discharge of its aims and objectives, the SAB maintains a number of multi-agency sub groups. Currently these are

- Training and workforce development
- · Quality monitoring
- Communications and publicity
- Policy and procedures

## Working groups

The SAB may commission short term working groups. These groups will assist the SAB in specific areas of its remit. Recommendations from such groups will be submitted to the SAB for endorsement.

Membership of these groups will be determined by the SAB and may include persons who are not members of the SAB where this is considered to be appropriate and/or necessary.

# Annual report

The SAB will approve and then submit an annual report to the Senior Officers Group of the Safer and Stronger Communities Partnership. The Senior Officer Group is made up of senior representatives of the wide range of agencies represented on the Safer and Stronger Communities Partnership.

This report will outline the work of the SAB and state objectives and priorities for the coming year in the form of a work plan, which is the responsibility of all agencies to implement. Information gained from the monitoring of safeguarding activity in South Gloucestershire over the previous year will be included in the report. The annual report will also be presented to the council's Adult Care and

Housing Committee and the Health and Wellbeing Board.

It is expected that all SAB partner organisations ensure that the annual report is received and considered within their own governance arrangements. An 'easy read' version of the report will be produced and presented to the Health and Wellbeing Board.

# Appendix 3 – List of members and attendance

Name	Position	Partner organisation	Representing
Peter Murphy/ Sally Lewis	Director Independent Chair	South Gloucestershire Council	Chair of SAB
Alex Francis	Healthwatch Development Officer	The Care Forum	Voluntary Sector
Ali Mann	Safeguarding Named Professional	South Western Ambulance Service	Ambulance
Alison Robinson	Nurse Director Head of Quality and Safeguarding	South Gloucestershire CCG	Commissioning Health Services
Catherine Boyce	Strategic Safeguarding Services Manager	South Gloucestershire Council	Children, Adults and Health
Damaris Howard	Director of Regulated Services	Freeways	Independent - Care Home Sector Chair -Communication sub group
Denise Porter	Head of Adult Social Care	South Gloucestershire Council	Children, Adults and Health
Gary Fagg/Sonia Furzland	Team Manager	Knightstone Housing Association	Independent – Housing Related Support Providers Forum
Geoff Watson	Safeguarding Lead	Sirona Care & Health	Community Health
Guy Stenson	Partnerships & Commissioning Service Manager	South Gloucestershire Council	Children, Adults and Health
Jan Gresham	Director of Operations	Milestones Trust	Independent - Voluntary Sector
Janet Rowse	Chief Executive	Sirona Care & Health	Community Health
John Owen	Clinical Director	Avon and Wiltshire Mental Health Partnership Trust	AWP
Lisa Ring/Mike Hook/Tony Yates/ Nick Whitefield	LDU Team Leader for South Gloucestershire	Avon and Somerset Probation Trust	Avon and Somerset Probation
Lynfa Vater	Service Manager	South Gloucestershire Council	Children, Adults and Health
Mark Pullin	Strong, Safer Communities Manager	South Gloucestershire Council	Strong, Safer Communities
Michael Hewitt	Group Manager, Legal Team	South Gloucestershire Council	Chief Executive & Corporate Resources
Michelle Mansfield	Community Services Manager	Brunel Care - Independent Sector	Representative Community Provider
Mick Dixon	Head of Risk Reduction	Avon Fire & Rescue	Avon Fire & Rescue

Murie England	Registered Manager	Stepping Stones to Independence	Representative – Day Services
Nick Thorne	Team Leader, Workforce Development	South Gloucestershire Council	Chief Executive & Corporate Resources Chair – Training sub group
Nicola Caldecoat	NHS England Patient Experience Manager	BNSSSG	NHS
Peter Bagshaw	GP	South Glos. CCG	Commissioning and Provider Services
Rachel Williams/Carolyn Belafonte	Head of Protect Head of Manage	Avon & Somerset Constabulary	Police
Sarah Memery/Sarah Bentley/Vikki Levick	Head of Safety & Equalities	HMP Eastwood Park	Prisons
Sarah Thompson	Safeguarding Manager	South Western Ambulance Service	Ambulance
Sean Collins	Safeguarding Manager	North Bristol NHS Trust	NBT NHS
Sheila Turner	Team Manager Safeguarding Adults	South Gloucestershire Council	Children, Adults and Health Chair – Quality Monitoring sub group
Simon Smith	Director	3 Trees Community Support Ltd	Representing - Independent - Day Services and Supported Living
Steve Peacock	Service Manager, Commissioning & Contracts,	South Gloucestershire Council	Children, Adults and Health
Sue Burn/ Paul Chapman	Inspection Manager	Care Quality commission	CQC

### SAB ATTENDANCE BY PARTNER ORGANISATION APRIL 2014 - MARCH 2015

## 4 meetings held during the year

Partner organisation	Representing	Att.
3 Trees Community Support Ltd.	Day Services and supported living	2
Avon & Somerset Police	Police	4
Avon & Somerset Probation	Probation	3
Avon & Wiltshire Mental Health	AWP	3
Avon Fire & Rescue	Fire & Rescue	1
Brunel Care	Community Provider	2

Partner organisation	Representing	Att.
Care Quality Commission	CQC	1
Freeways	Care Homes	4
Healthwatch	Voluntary Sector	2
HMPS Eastwood	Prisons	2
Knightstone Housing Association	Supporting People	3
Local Authority	South Gloucestershire Council	4
Milestones Trust	Voluntary Sector	3
North Bristol Trust	NHS	4
NHS England	NHS England	4
Sirona Care & Health	Care & Health	4
South Glos. Clinical Commissioning Group	NHS	4
South Western Ambulance Service	Ambulance	2

# Appendix 4 – Multi-agency training courses and feedback

## Core multi-agency training programmes – summary of attendance figures

	Safeguarding Adults course (number delivered)	Total Attendance	Breakdown by sector/agency
1	Safeguarding Adults Alerter (35)	579	Independent, Voluntary & Private sector 68% (up 5%) NHS agencies 15% (down 11%) South Glos Council 15% (up 5%), Other 2% (up 1%)
2	Managing Good Practice in SGA Issues (7)	92	Independent, Voluntary & Private sector 65% (up 2%) NHS agencies 10% (down 7%) South Glos Council 25% (up 5%)
3	Managing and Preventing Institutional Abuse (4)	61	Independent, Voluntary & Private sector 88% (down 1%) NHS agencies 2% (down 7%) South Glos Council 10% (up 10%)
4	Safer Recruitment (1)  - includes children's services	12	Indep, Vol & Private sector (adult care) 33% (down 19%) South Glos Council 33% (up 1%) School/Pre-school 33% (up 24%)
5	Safeguarding Adults CPD Update (2)	75	Independent, Voluntary & Private sector 75% NHS agencies 7%, South Glos Council 16% Prison services 1%, Other 1%

## Delegate feedback - based on responses given immediately at the end of each course

Measure	2014-15 Performance	2013-14 Performance
% reporting Safeguarding Adults training as either Excellent or Good	98.3% • 65.2% excellent • 33.1% good	98.5% • 63% excellent • 35.5% good
% who feel their knowledge & understanding has increased significantly compared to the level they were at pre-course	79%	76%

## Measuring impact on workforce practice

Data gained by contacting managers of employees who have attended multi-agency training, 3-5 months after that training.

Measure	2014-15 Performance	2013-14 Performance	
Managers training: % reporting increased confidence and changed practice following training	89% Increased Confidence 83% Changed Practice	88% Increased Confidence 75.5% Changed Practice	

Measure	2014-15 Performance	2013-14 Performance
Alerter training: % of managers reporting that their employees have high/very high levels of knowledge post-training, compared to pre-training	86% (an increase of 44%, from 42% pre-training)	89.5% (an increase of 53.5%, from 36% pre-training)

# Appendix 5 – Business plan 2014-16

The forward business plan for 2014 -16 will help ensure that all agencies involved in the SAB are fully engaged in the effective prevention of and response to safeguarding concerns. Part of this plan is to give vulnerable adults an even greater voice within the safeguarding process

This work plan sets out the tasks required for each priority.

Task No	Description	Action	Responsible	Target Date	Complete	RAG rating
1.	RAG rating	Recruit, appoint and induct independent chair	SAB - Sheila Turner in conjunction with Bristol	Autumn 2014		Green
2.	Policies and procedures Multi agency policies and procedures are integral to the work of the Board and its member organisations/bodies,	Agree a single policy for Bristol, North Somerset, Bath and North East Somerset and South Gloucestershire	Safeguarding leads for the 4 authorities.(Sheila Turner for South Gloucestershire)	June 2014	June 2014	Green
	consistency across part of the region would benefit all members of the partnership.	Re-write procedures to back updated policy and to incorporate changes from Care Act 2014. Update TOR	Initially safeguarding leads for the four authorities, then local group to ensure meets local requirements	April 2015		
3.	Quality standards Ensure consistency of standards across South West Region.	Establish and use a South West quality standards reporting system to enable comparisons across the region.	South West Regional leads under ADASS leadership	December 2014		Green
	Ensure safeguarding is embedded in corporate and service strategies across the Safeguarding Adults Board member organisations.	To ensure all partners are able to evidence safeguarding procedures both for themselves and any contracted organisations e.g. care homes, domiciliary care, pharmacy, chiropody etc.	All SAB members. Alison Robinson, Guy Stenson and Sheila Turner to check/develop work on provider processes/contracts and look at monitoring processes	December 2014		Green
	Ensure that during the move to personalisation of services through personal health and/or care budgets people are safeguarded.	Ensure there are adequate safeguards in place within personalisation strategies to ensure that people's safety is not compromised.	Denise Porter (south Glos council)  CCG for health PBs?	March 2015		Green

Task No	Description	Action	Responsible	Target Date	Complete	RAG rating
	Safeguarding is effective at all levels	Training for all staff  Training – induction for Board members – including development of an induction pack learning from work on managing risk in families (lessons from child protection, SCRs, DHRs)	Commissioners, Board members  Training sub group  Lynfa Vater/Nick Thorne/Catherine Boyce/Sheila Turner	Ongoing April 2015		Green
4.	Developing partnerships	Continue to work with Eastwood Park, Leyhill and Ashfield prisons specifically in respect of the safeguarding implications from the Care Act 2014.	Sheila Turner	April 2015		Green
	Improve the capability of community pharmacists to recognise and respond to adult safeguarding concerns.	Work with Avon Pharmaceutical Committee to provide information and raise awareness of adult safeguarding for community pharmacies	Sheila Turner	March 2015		Green
	Ensure appropriate representation on Safeguarding Adults Board	Ensure that the changes within health and social care provision and structures are recognised and the appropriate representation and involvement to SAB is arranged.	Chair of SAB	Sept 2014 and then Annual review		Green
5.	Work of sub groups All agencies in the Safeguarding Adults Board share ownership for joint and co-ordinated leadership	Ensure representative membership and leadership of a number of sub groups commissioned by the Board. Including revising membership following re-structuring across all agencies.	SAB	ongoing		Green
		Explore whether there is synergy with sub groups of South Gloucestershire Children's Safeguarding Board and therefore whether some of these can usefully become joint groups.	Strategic Safeguarding Team	March 2015		Green

Task No	Description	Action	Responsible	Target Date	Complete	RAG rating
5a.	Quality Monitoring sub group Services are held accountable through performance measures including quality measures, towards the outcomes for people in the (safeguarding) strategy.	provide data to contribute to a regular reporting suite – this will be reviewed in line with national reporting requirements and regional benchmarking work.	Sheila Turner	ongoing		Green
	The SAB will have access to a full data set across key partner agencies	Key partner agencies to provide data to triangulate with LA data.	Sirona, AWP, NBT	March 2014		Green
		Monitor the repeat referrals which have risen during the year 2013-4, initially through an audit.	Audit sub group	At meeting 19.11.14 to report to SAB 04.12.14		
	Vulnerable people are safeguarded in the community, including care homes and hospitals through an improvement in the quality of care and a reduction of risk.	Ensure robust mechanisms are in place for reviewing activity around institutional safeguarding. Establish and maintain engagement with the S256 work on quality in care homes	Quality Monitoring sub group  Link to S256 work – Sheila Turner	Ongoing Ongoing		Green

Task No	Description	Action	Responsible	Target Date	Complete	RAG rating
5b.	Communications sub group  The Safeguarding Adults Board has achieved high levels of expressed positive experiences from people who have had safeguarding services.	Ensure service user feedback is systematically captured. By piloting feedback questionnaire July – September 2014. Feedback to SAB in December on progress and consider an annual service user commissioned survey if appropriate.	Damaris Howard (Communications sub group)	Report to SAB December 2014		Green
		Work to raise awareness of adult safeguarding – Joint awareness week to be planned for 2015 with Bristol, Bath and NE Somerset and North Somerset.	Communications sub group	Summer 2015	Maybe ongoing	
		To continue to develop the council web pages with a focus on ease of access, reporting concerns and high quality general web information that clarifies and raises awareness of adult safeguarding.	Communications sub group	April 2015		Green

ask lo	Description	Action	Responsible	Target Date	Complete	RAG rating
С	Training sub group Ensure training programme is regularly updated to meet needs of workforce, changing national requirement	Refresh the multi-agency Workforce Development & Training Plan for 2014-17 (including use of the National Capability Framework for safeguarding adults)	Training sub group Chair Nick Thorne	ongoing		Green
	Follow up previous audit of training	Co-ordinate a second South Gloucestershire-wide Staff Development Audit process to gain more detail on how providers undertake SGA learning and development, identify specific areas of excellent practice to share, gain strong local evidence of impact on people's practice in supporting vulnerable adults.	Training sub group Chair Nick Thorne	December 2015		
	Maintain multi agency training	Further develop the core multiagency training programmes to ensure these properly reflect national and local priorities for SGA work: e.g. Care Bill, outcomes-focus, messages from SCRs/DHRs, Quality Monitoring Group. Increase collaborative work with CCG, GPs, Police, Sirona, NBT, AWP partners to ensure a wide range of statutory sector workforces are accessing SGA multi-agency training.	Training sub group – Chair Nick Thorne	ongoing		Green
	Learning from Serious Case Reviews/Domestic Homicide Reviews	Agree process for feedback to Safeguarding Adults Board. Incorporate into training, ensure there is learning across children's and adults services	Strategic Safeguarding Team and Training sub group	2015		Green
	Ensure training is consistent across the South West region	Build further collaboration via the sub-regional SGA Trainers Network, to ensure South Gloucestershire is at the centre of joint initiatives, shares resources well and provides consistent messages to workforces locally	Training sub group – Chair Nick Thorne	Ongoing		Green

Task No	Description	Action	Responsible	Target Date	Complete	RAG rating
6	Development of quality standards for all commissioning bodies	CCG have developed standards – Link to 3	tba			
7	Continue to improve investigation of complex situations involving police and people with complex needs.	Develop a local agreement between the LA and PPU for joint investigations which involve people with significant disabilities which provides opportunities for such individuals to communicate effectively.  Establish joint working protocols. (To include the appropriate use of expert witnesses [including clinicians] to provide independent evidence/advice when necessary to corroborate accounts when service users suffer injury)  Continue programme of joint meetings between adult social care and PPU	Currently being led by Lynfa Vater and Mike Williams, suggestion is short life multi-agency working group  Currently being led by Lynfa Vater and Mike Williams, suggestion is short life multi agency working group  Operational managers from Access Team and PPU	December 2014  December 2014  Ongoing		Amber
8.	Care Act 2014	Look at details of Care Act 2014 and implications in respect of Safeguarding e.g.:  • SAB  • Responsibility for provider failure and links with CQC and QSG  NB Link with re-writing of policy and procedures	Report to SAB  Implementation	Dec 2014 April 2015		Green
9	Multi-Agency Safeguarding Hub (MASH)	This is being established initially with children's services, need to look longer term at adult services	Tba	Tba		
				Key to RAG rating: No colour: not yet planned to start. Green: on track. Amber: delayed but being addressed Red: Delayed, potential for significant impact.		

# Appendix 6 – Strategic priorities and business plan 2015-18



#### SGSAB STRATEGIC PRIORITIES AND BUSINESS PLAN 2015 – 18

- Co-ordination, Governance and Accountability of Safeguarding Adults Board Implementing the Safeguarding Elements of the Care Act 2014

**Publish Annual Report** 

Develop and publish Annual Strategic Plan
Publish Annual Report

Conduct any Safeguarding Adults Reviews in accordance with Section 44 of the Care Act 2014

Based on the 6 Government principles:

Empowerment Protection Prevention Proportionality Partnership Accountability

#### SGSAB responsibilities include:

- Assuring itself that local safeguarding arrangements are in place
- Preventing abuse and neglect where possible Ensuring timely and proportionate responses when abuse/neglect have occurred.

# Ongoing activity of SGSAB is undertaken by the following Sub-Groups: Quality Monitoring Communication

Training Policy and Procedures (not currently active)

#### STRATEGIC PRIORITY 1:

Co-ordination, Governance and Accountability of Safeguarding Adults

Board

- 1. Understand the responsibilities of the SAB post Care Act 2014.
- 2. Safeguarding Adults Board: Review of membership Review of terms of reference
- 3. Sub-groups.
  Review of sub-groups Review of membership of Subgroups Review of terms of reference
- Implementation of formula for partner financial contributions to the Board Review culture of Board, develop induction for board members
- 6. Safeguarding Adults reviews: develop process for managing these including possibility of a SAR sub-
- group
  7. Develop links with other strategic
  safeguarding Boards
  8. Update relevant safeguarding
  policies and procedures
- 9. Agree publication of SAB minutes on

High priority items are in bold

#### STRATEGIC PRIORITY 2

Ensuring voice and experiences of Users are central to the work of the

- 1. Feedback to Board of "soft"
- experience 2.To consider best way of ensuring service user and carer voices are heard and incorporated into the work of the Board eg through considering Lay members on SAB, link with existing groups, focus groups, safeguarding story at the start of SAB
- 3. Good use of the feedback from the SU
- survey
  4. Ensure ongoing development of MSP principles

#### STRATEGIC PRIORITY 3

Working with Providers to clarify: information flows, accountability and the role of the DASM

- Clarify role of DASM
   Identify DASM in relevant organisations
- 3. Review what information needs to come to SAB about providers, including potentially sensitive information
- Clarify relationship between commissioners and SAB and CQC and

#### STRATEGIC PRIORITY 4

Quality Assurance of SAB and member organisations including identifying best practice and lessons

- 1. Review performance reporting framework: quantitative/qualitative,
- multi-partner, equalities. The "so what" question
  2. Understand best practice, look at lessons learnt through SAR's, DHRs
- 3. Self-assessment through EFQM, Peer
- 4. Define the scrutiny and challenge role
- Develop themed deep dive audits as a way of checking practice
- Agree assurance framework for board accountability
   Maintain multi agency training

#### STRATEGIC PRIORITY 5

Develop a framework to improve practice and look at emerging themes eg self-neglect, difficult to reach groups, carers, Prevent, modern slavery

- 1. Identification of emerging themes and
- the implications for South Gloucestershire 2. Developing guidance/policy/awareness
- 3. Carers' issues linking to local
- 4. Self-neglect definition policies and procedures
  5. Use of task and finish groups to engage
- all board members by addressing specific
- Using multi agency training/education to
- 7. Ensuring SAB understands all strands of vulnerability for example mental health
- Develop ways of communicating with hard to reach groups - ensuring that where possible they are able to engage with
- processes

  9. Annual SAB conference

  10. MASH -maintain watching brief and involvement in development of Avon and Somerset MASH

#### Reporting to:

Health and Wellbeing Board Adults and Housing Committee

#### Strategic Links MARAC

Safer South Gloucestershire