



Newham London

# Safeguarding Adults Annual Report

1 April 2012 – 31 March 2013

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## **FOREWORD FROM GRAINNE SIGGINS (DIRECTOR OF ADULTS SERVICES)**

Safeguarding Adults is everyone's business and this year the importance of partnership working has never been more significant. The disturbing evidence contained in the Winterbourne and Francis reports, which highlighted a catalogue of distressing incidents of institutional abuse, poor care and neglect in hospitals and residential settings in other parts of the country has been a timely reminder that all Safeguarding Boards must be vigilant in its oversight of all its commissioned care. A critical role of the work of the Newham SAB lies in monitoring and scrutiny of safeguarding performance and helping to ensure safe and high quality care is delivered to Newham residents in all the various care settings including care homes, hospitals, and domiciliary care and in the wider community.

It is critical that safeguarding continues to be a cornerstone of all the partner agencies' work.

This year Newham's Safeguarding Adults Board has demonstrated that it is committed to ensuring the strategies and frameworks for safeguarding adults are in place to deliver a strong joined up approach to support our community's most vulnerable residents.

The Board and partner agencies have undertaken a number of events, detailed in this report with users of services with the aim of listening to users experiences and understanding their perspectives. The clear message from these feedback discussions, interviews and surveys with users of services is that users want to be more integrally involved and empowered in all aspects of their care planning, including the safeguarding process.

This is an important area of development that the Board has included as a key priority in its new three year strategy.

## **MESSAGE FROM THE INDEPENDENT CHAIR:**

The Adult Safeguarding Board in Newham has never been more central in working to assure the protection of all vulnerable adults, from those receiving care and support from social care and health to those living in the community in Newham.

This annual report describes the challenges and achievements of the Newham SAB which has seen very significant organisational changes particularly across the local health sector.

Over the next twelve months there will also be new legislation relating to adult protection, which will put the work of Safeguarding Boards on a statutory footing and will require all Safeguarding Boards to publish an annual report.

This underlines the importance of Newham SAB reporting its work to the public and detailing the range of ways it undertakes the role of assuring quality of care to the vulnerable.

Newham SAB has a key role in challenging and holding agencies to account to ensure their continued commitment to properly resource the delivery of safe and good care particularly during this period of major organisational change and financial pressures. It is critical that safeguarding continues to be a cornerstone of all the partner agencies work.

As independent chair I feel it is a priority that the Board develops as a learning organisation particularly through the review and analysis of Serious Case Reviews. This process ensures that cases are subject to independent rigorous analysis to identify key areas for improvement.

Newham SAB remains very committed to staff and member training safeguarding, I hope that the partner's programme of training will help to deliver good practice, increase community awareness of safeguarding issues and improve interagency communication.

Key safeguarding statistics across all the agencies, detailed in this annual report are regularly subject to scrutiny by the SAB. This year has continued to see an increase in the number of safeguarding alerts and the sources of these referrals, which indicates an improved awareness of safeguarding concerns but also means more work for all agencies in risk assessment and prevention.

Finally as independent chair I very much welcome and recommend this annual report and would like to thank all of those involved with the SAB for their hard work and commitment to this crucial area of work.

## THE SAFEGUARDING ADULTS BOARD

**Chaired by: Catherine Jeffrey  
since July 2009**

**Representatives from:**

- **Newham Council**
- **Newham Healthwatch (formerly Links)**
- **Clinical Commissioning Group (CCG)**
- **North East London and City NHS (NELC)**
- **East London Foundation NHS Trust (ELFT)**
- **Care Quality Commission**
- **Newham Probation Service**
- **Newham Public Protection Unit (Metropolitan Police Service)**
- **London Fire Brigade Newham**
- **Barts Health (formerly Newham University Hospital Trust)**
- **Safeguarding Adults Team**
- **LBN Legal Services Division**
- **London Ambulance service**

The Partnership Board promotes, informs and supports the work to safeguard adults in Newham. It does this by ensuring that

safeguarding adults is a theme that is strategically driven, adequately represented across the borough and included in strategic thinking, documents and plans. The partnership and multi-agency approach to safeguarding adults is essential for arrangements to be effective in terms of information sharing, pooling expertise and the coordination of interventions. Newham Safeguarding Adults Board has an Independent Chair to lead the partnership board. The chair will participate in the review of the board, its membership and terms of reference in the year ahead

## THE WORKING GROUPS THAT SUPPORT THE SAB

The subgroups have been established to carry out specific functions identified by the Board to meet its priorities and/ or emerging priorities. The membership of the working groups reflects the expertise required and involves operational managers, frontline practitioners, commissioners, providers, and representatives from other Partnership Boards, including carers and users of services.

### The Serious Case Review Panel

The SCR Panel comprises representatives from the SAB and provides oversight and scrutiny of any ongoing serious case reviews. The panel met 4 times this year to oversee the work and actions in relation to the ongoing serious case review, which is reported on further in this report. Its other role has been to review the recommendations arising from the recommendations arising from the Winterbourne View Serious Case Review and Concordat and most recently from the Francis Report into the issues arising at Mid Staffordshire NHS Trust.

### Children and Adults Joint Strategic Working Group.

This group has met twice this year and will continue now changes within Children's

Services have been implemented. Its role has been to identify and align the key priorities in both areas and to synchronise these going forward. Key areas have been:

- Serious Case Reviews
- Safer recruitment
- Developing stronger transition pathways
- Areas for joint training

### **The Training Sub Group**

This year saw the development across the Partnership of a strong training agenda. This is despite the fact that the chair of this sub group (the SAB's representative from Newham University Hospital) left his role. Other changes which impacted on this group were the transformation of Newham hospital into Barts Health and other changes in the roles of key health and other agencies. However LBN strengthened its Workforce Development team and has been working to develop a safeguarding training plan which meets with Newham's own strategic objectives as well as the national agreements in place. Going forward this sub group will develop mechanisms to ensure this is properly reported upon and to provide scrutiny of this.

### **Winterbourne Multi Agency Assurances Group**

This was set up following the publication of the Government's report into the failings at Winterbourne View. The role of this group is to review local practice and implement the government's recommendations. It has responsibility for the implementation of the Concordat (the high level multi agency commitment to change) It is attended by the Independent Chair of SAB and other SAB representatives

### **Winterbourne View Provider Group**

This working group comprises local provider services for people with learning disabilities.

This task and finish group has met to review local provider practices, and to seek assurances that checks and balances are in place to minimise the risk of such a failing occurring in Newham or with Newham residents

### **2012 Safeguarding Adults Reference Group**

From March 2011 to July 2012, Newham hosted and vice chaired, the multi agency pan London Olympic reference group, The group was chaired by the Detective Chief Inspector from Central CSU, with members from other local authorities, LOCOG safeguarding, emergency services, Voluntary groups such as Age UK and Red cross.

A key outcome from this group was the development of a risk register to provide information, advice and to raise awareness of issues that may arise from a safeguarding perspective, which was disseminated to all London safeguarding Adults chairs and Directors

### **Keep Safe Reference Group**

This group is a reference group of customers, organisations, police and statutory and voluntary groups who are working together to reduce Hate crime, improve reporting and education via a number of projects and initiatives across customer groups. Next year the group will be chaired by our Voicability advocacy organisation.

## **REVIEW OF THE YEAR**

The financial year up to 31st March 2013 has seen a number of local and national challenges, which have impacted significantly upon safeguarding adults' arrangements in Newham.

Locally these have included the ongoing effects of the Comprehensive Spending Review, the Adults Transformation Programme and the re-shaping of NHS Newham. Nearly all of our partners have been required to make continued reductions in spending, whilst at the same time

ensure that the Council's key priorities around Safer Newham are maintained.

On 1st April 2012 Newham University Hospital Trust merged with nearby Whipps Cross, Barts and the Royal London Hospitals to create the Bartshealth NHS Trust. This is a major transformation of acute services in East London and has required the development of strong links with health and social care colleagues in Waltham Forest and Tower Hamlets to develop consistency in the safeguarding pathways. This work started in 2012 but will continue throughout 2013 and beyond to ensure that the role of safeguarding adults in hospital settings is acknowledged; and where actual or potential abuse is identified that cases are referred on appropriately. It is particularly important for these pathways to be established in light of the Mid Staffordshire NHS Foundation Trust Public Inquiry by Robert Francis QC, which was published in February 2013.

NHS Newham has seen other radical changes in the way in which local health services are commissioned and delivered through the newly formed Clinical Commissioning Group (CCG), which came in to effect on 1st April 2013. Newham Clinical Commissioning Group has taken over responsibility for planning and commissioning a range of health services, including Secondary Care, Community and Mental Health Services for Newham residents and visitors to the Borough. The SAB welcomed its CCG partner to the Board during 2012. The aim of the CCG in Newham is to work in partnership with the local community and local health and social care stakeholders to understand local health needs. As this officially came in to being in the new financial year 2013/14 this will be reported on more fully in next year's annual report.

Among the key national drivers for safeguarding adults this year have been the Care and Support White Paper and the Health and Social

Care Bill and the publication of the government report into Winterbourne View.

The Care and Support Bill sets out the government's intention to place all SABs on a statutory footing. As this went in to print the timescale for implementation was not fully known but Newham's SAB has been working to the principles set out in the Bill, namely;

- Local authorities will be responsible for establishing and running Safeguarding Adults Boards.
- Boards must co-ordinate and ensure the effectiveness of what each of its members do
- The local authority, Clinical Commissioning Group and chief officer of police must be core members (Boards have the power to determine other appropriate members).
- The Board must publish a strategic plan each financial year setting out how it will protect people at risk of harm and what each member is to do to implement the strategy.
- At the end of the financial year the Board must publish an annual report on its achievements, members' activity and findings from any Safeguarding Reviews during that period.
- It must consult its area's Healthwatch and involve the community in preparing the strategy.

In December 2012 the government published its report into Winterbourne View. The report, which followed in the wake of the Panorama TV programme, highlighted many failings, not just those occurring at Winterbourne View itself, but also of the regulatory and monitoring arrangements of other agencies. The report set out requirements for the strengthening of accountability, increased regulation of care providers for people with learning disabilities by the Care Quality Commission, and more integrated approaches from the NHS and local government. The Newham response has been to set up two working parties to review local practice and implement the government's

recommendations. One is a multi-agency working group, which has responsibility for the implementation of the Concordat (the high level multi agency commitment to change) and the second group comprises local provider services for people with learning disabilities and seeks assurances from these providers.

The quarterly SAB meetings have seen strong and sustained attendance levels, which has supported the Board's capacity to steer its strategic direction and achieve its priorities for the year. The Board has clear objectives contained in its Safeguarding Adults Strategic Plan and an agreed strategy for achieving these.


Last year the way in which Adult Services as a whole reported on its performance changed. Previously the Care Quality Commission (CQC) looked at the performance of all councils who provide Adult Social Care and published an annual statement telling us where they thought we could improve. Government has now withdrawn this annual inspection and has asked all councils to produce a Local Account instead, The first local account was produced last year and provides a way of engaging Newham's residents about our Adult Social Care performance; providing information that will allow local people to hold us responsible if they think we are not doing well enough.

The strategic Plan was updated in May 2012, the priority being consideration to how best to ensure Newham's citizens can live safely and free from harm. To this end an extended SAB took place in May 2012 to agree these along with considerations for how the Board can measure its own effectiveness. The key principles underpinning this was based on the following measures and linked to the Local Account:

- Empowerment
- Protection
- Prevention
- Proportionality

- Partnership
- Accountability

Despite the many challenges, the Safeguarding Adults Partnership Board has had its busiest year yet. The safeguarding team has seen a small increase in referrals received, but in line with many other authorities has seen a slight plateauing of alerts received.

The Adults Transformation Programme  has delivered a model of care based on more effective use of universal service provision in Newham that enables people to create their own sustainable solutions to their social care needs. This model of care is targeted on prevention and enablement, maximising choice and control, whilst ensuring vulnerable people requiring on-going support are assisted to determine their own solutions from a more responsive market place. Whilst these changes are embedding the Safeguarding team continues to meet regularly with colleagues to triage existing safeguarding cases to assess the duration of each case, the risk and future planning to ensure these are dealt with smoothly.

## **OLYMPICS 2012**

As one of the host boroughs, planning arrangements to ensure the safety and wellbeing of customers and visitors at the 2012 Olympics and Para Olympics was a key priority for all partners throughout the first part of the last financial year. The planning and arrangements for safeguarding adults at the 2012 games was ultimately the responsibility of LOCOG, the DASS and appropriate leads in other organisations, but throughout 2012 the SAB ensured this was a key agenda feature. A risk register was disseminated to Board members and contingency arrangements were scrutinised throughout. For SAB the priority was the welfare of vulnerable adults travelling to and from the games and for those where their daily lives may be subject to

disruption or placed at increased risk. As we all know the event was a great success- not only nationally, but at a local level where contingency arrangements worked as planned. Well done and thank you to all partners!

## FUNDING ARRANGEMENTS FOR THE SAFEGUARDING ADULTS BOARD

Newham Council currently funds the Safeguarding Adults Team at an annual cost of £255,000. We have estimated that the total costs of running the board are an additional £36,000 per annum. Partner agencies give their time and commitment to the work of the Board but in the past we asked for a financial contribution of £6,000 per annum to support the costs of the Board. This year we deferred request of this in anticipation of guidance on this issue from the statutory requirements in the Care and Support White Paper. Clarification on this is yet to emerge.

In the interim we will seek further guidance on this for 2013/14, but it is anticipated that a financial contribution will be sought.

### Breakdown of expenditure

Independent Chair	£7.500
SCR	£5.000
Annual report & other publicity	£6.000
SAPB Admin costs	£7.000
Training	£10.500
	£36. k

## ENGAGEMENT WITH CUSTOMERS

There continues to a strong emphasis on service user involvement throughout every step of the safeguarding process and service user views are listened to. As a demonstration of

this, customers and carers who have attended User events have consistently told us that a priority for them is to be able to report adult abuse easily and speedily when they need to. To this end on 1st April 2012 a dedicated safeguarding adults telephone contact number went live specifically for customers and carers to use to report abuse. A series of articles and advertisements appeared over a number of weeks in the local newspaper to promote this. This is a direct line that is available 365 days a year with trained staff available to answer this at any time. Our thanks to staff at Telecare for agreeing to respond to calls out of hours.

In May 2012 we held a successful Financial Resilience event in which customers and carers were invited to hear advice and information from a range of professionals and experts on managing and protecting finances, mental capacity issues, court of protection and making wills. During the event there was an opportunity for customers and carers to speak directly with police, solicitors, advocates and safeguarding adults and mental capacity leads. A similar event will take place again during 2013.

Safeguarding adults' forms and procedures are being updated to ensure there is even greater participation from customers and carers, to enable their views and input to be heard throughout. These mechanisms are being embedded into practice to ensure Social Workers clarify how customers who go through the safeguarding process feel about the experience and how they are safer as a result.

The London Borough of Newham launched its new Information Advice and Guidance website, which gives customers and carers clear information on a range of services and how to access these, including safeguarding adults. The link to this site can be found here at:

<http://adultsocialcare.newham.gov.uk/pages/safeguarding-adults.aspx>



Customers and their carers or advocates have regularly attended the Risk Enablement Panel and we continue to see greater participation of customers, their families, and /or advocates at strategy meetings.

## SERIOUS CASE REVIEWS


During 2012/13 there were three serious case reviews undertaken. The SCR Panel has been monitoring progress of these and as at 31st March 2013 one of these reports is about to be released for publication.

## REVIEW OF MENTAL CAPACITY/ DEPRIVATION OF LIBERTY SAFEGUARDS (DOLS) ISSUES

Below is an extract of the key activities for mental capacity and Deprivation of Liberty Safeguards during 2012/13.

The full report is available separately from Cathy Newcombe.

### Deprivation of Liberty Requests

The Deprivation of Liberty Safeguards (DoLS) came into force 1st April 2009. These safeguards focus on those people who, for their own safety and in their own best interests, need to be accommodated under care and treatment regimes that may have the effect of depriving them of their liberty, but who lack the capacity to consent. The safeguards ensure that any decision to deprive someone of their liberty is made following defined processes and in consultation with specific authorities. London Borough of Newham has been undertaking this role on behalf of Newham PC  from April 2013 direct responsibility for responding to DoLS in hospitals moves to local authorities.

During the period April 2012 to March 2013 Newham received a total of **80** deprivation of liberty requests, **60** from care homes and **20**

from a hospital setting. This is a small increase in comparison to the previous year, when a total of **77** referrals were received over the same period. Of these 80, **50** were authorised and **30** refused. At the end of December Newham had 18 customers subject to a deprivation of liberty authorisation, **12** in care homes, **6** in hospitals.

In the last quarter **22** deprivation of liberty requests were assessed and processed. **16** requests were from nursing or care homes (LBN referrals) and six from hospital settings (PCT referrals). **Six** of these referrals were urgent authorisations, requiring the assessments to be carried out within seven days. A total of **10** deprivation of liberty panels, chaired by a senior manager from LB Newham, were held during the quarter. Of the total referrals **12** were authorised, and **10** were refused. **Eight** of the refused requests came from a nursing/care home setting, and two were hospital patients. In all of these cases the requests were refused because it was assessed that no deprivation of liberty was occurring.

### Best Interests Assessors

Newham currently has **17** practicing best interests assessors (BIAs). Three of the BIAs are employed by East London Foundation Trust (ELFT) and 14 work for London Borough of Newham. A further LB Newham social worker completed the BIA course in December and is awaiting his results. BIAs are now paid £150 per service user assessed, on the understanding that the majority of the work involved in this process is carried out in their own time. BIAs will all be going through a re-warranting process in 2013. This will involve the submission of a portfolio.


The BIAs meet with the practice manager in a forum setting every two months. It is a Department of Health requirement that all BIAs complete at least one days refresher training every year. 15 of Newham's BIAs attended a

one day refresher course in April 2012. A further refresher course is planned for April 2013; some of Newham's mental health assessors and an IMCA have been invited to attend this session. Other training, including a BIA national conference in January 2013, has also been provided.

## **Mental Health Assessors**


Newham has eight mental health assessors who can be called upon to undertake mental health and eligibility assessments.

## **Changes to the Deprivation of Liberty safeguards**

From April 2013 local authorities take over full responsibility from PCTs for deprivation of liberty requests originating from hospitals.  practice manager has been involved in discussions about this process with East London and the City NHS Trust.

## **MCA Training and Liaison**

The practice manager is regularly involved in facilitating training workshops for a range of staff, including the regular Mental Capacity Act Forum which is open to all professionals in Newham working with vulnerable adults. In the last quarter the session covered restraint, restriction and deprivation of liberty. She has provided a number of training sessions to health and social care staff, including three for care home staff, one for volunteers and one for hospital staff in this quarter. The practice manager continues to liaise regularly with professionals and providers, giving guidance, advice and support on the Mental Capacity Act and the deprivation of liberty safeguards. She has been involved with a number of joint assessments of complex cases, working closely with local authority and health professionals. She is a regular member of the risk enablement panel. She is a member of the transitional reference group and the nursing homes forum.

She chairs the Newham mental health police and ambulance liaison meeting  attends the London wide Mental Capacity Act leads group.

## **MCA Audits and Reviews**

The practice manager carried out a peer review of the implementation of the MCA deprivation of liberty safeguards in a nearby borough. The DOLS coordinator there will carry out a similar review in Newham in 2013. Newham also participated in a national deprivation of liberty research project organised by Bristol University, the results of which will be published in 2013.

## **Plans for the coming months**

- An audit of social care mental capacity assessments
- MCA Workshops – Hoarding, Working with IMCAs, Tenancies and People who Lack Capacity
- Meeting with Newham University Hospital staff re. use of the MCA and the Deprivation of Liberty Safeguards
- Working with Senior Safeguarding Advisors to produce policy and guidance on safeguarding IMCA referrals
- BIA refresher training April 2013
- BIA re-warranting process May 2013
- Contributing to University of East London BIA course May 2013
- Review of DOLS IMCA referrals for services users subject to DOLS and their family representatives

## MENTAL CAPACITY ACT DEPRIVATION OF LIBERTY SAFEGUARDS

Key performance Indicators Q1, Q2, Q3 & Q4 April 2012 – March 2013

	LBN Q1	PCT Q1	LBN Q2	PCT Q2	LBN Q3	PCT Q3	LBN Q4	PCT Q4	Total
Standard Deprivation of Liberty requests received	16	5	17	5	11	4	16	6	80
of which - also included an urgent authorisation	5	0	5	0	3	2	5	1	21
DOLS requests authorised	7	4	13	4	8	2	8	4	50
DOLS requests rejected	9	1	4	1	3	2	8	2	30
Total number of customers subject to DOLS	15	6	17	7	16	6	12	6	18

## BEST INTERESTS ASSESSORS COMPLETING ASSESSMENTS

Completed 4 or more assessments April – March 2013	10
Completed 3 – 4 assessments April – March 2013	3
Completed 2 - 3 assessments April – March 2013	3
Completed 1 - 2 assessments April – March 2013	1
Completed 0 assessments April – March 2013	0
<b>Total</b>	<b>17</b>

Percentage of Dols requests responded to within required time scales 100%

**KEY ACHIEVEMENTS FROM PARTNERSHIP SERVICES**

This year some of our partners have kindly provided us with an update of their key achievements in relation to safeguarding activity.

**Name of Partner Organisation:** East London NHS Foundation Trust

<p><b>1. How has your organisation demonstrated that people’s lives are improved as a result of safeguarding?</b></p>	<ul style="list-style-type: none"> <li>• Challenges for next year?</li> <li>• Challenges for next year?</li> <li>• Priorities for the next year?</li> </ul>
<p><b>Achievements</b></p> <ul style="list-style-type: none"> <li>• Deloitte audit raised from Limited to Substantial assurance</li> <li>• Serious Incident system links to SCR</li> <li>• SAAF – 15 Green 2 Amber &amp; no Red scores.</li> <li>• Benchmarking partner with NELFT</li> </ul>	
<p><b>Challenges</b></p> <ul style="list-style-type: none"> <li>• DV reporting and follow up from pilot</li> <li>• Qualitative information on incident outcomes</li> </ul>	
<p><b>Priorities</b></p> <ul style="list-style-type: none"> <li>• Develop Level 2 &amp; 3 training</li> <li>• Case audits across services</li> <li>• Develop SA&amp;DV champions</li> <li>• Service user engagement</li> </ul>	

**Name of Organisation:**  MPS Newham

<b>1. How has your organisation demonstrated that people's lives are improved as a result of safeguarding?</b>	<ul style="list-style-type: none"><li>• What has your organisation achieved?</li><li>• Challenges for next year?</li><li>• Priorities for the next year?</li></ul>
<p><b>Response:</b></p> <p><b>Achievements:</b></p> <p>In conjunction with the MPS-wide drive to incorporate the safeguarding of vulnerable adults within the existing child-oriented MASH system we have developed a process whereby this is dealt with through our existing MASH desk. Thus, since April 1st around 120 vulnerable adults have been brought to our attention via the Merlin system of which approximately 10% have been referred onwards for further attention.</p> <p>To recognise the additional work that this will inevitably bring, we have augmented our MASH desk by one extra detective constable. We have also re-aligned our management model to emphasise increased supervision of that unit by a dedicated Detective Inspector whose responsibilities include the whole Public Protection Portfolio- MASH, Jigsaw, and Missing Persons.</p>	
<p><b>Safeguarding Priorities:</b></p> <ul style="list-style-type: none"><li>• To hold people causing abuse accountable for their actions.</li><li>• Where criminal proceedings are deemed inappropriate, to work with partnership agencies and to identify courses of action.</li><li>• The MPS Newham to concentrate on the correct identification and recording of incidents/offences.</li><li>• The MPS should look towards training both at a local and Pan-London level - with central support for any local initiatives.</li><li>• Training needs to include all staff, including investigators and patrol officers.</li><li>• MASH</li></ul>	

**Name of Organisation:** London Fire Brigade Newham

**1. How has your organisation demonstrated that people's lives are improved as a result of safeguarding?**

- **What has your organisation achieved?**
- **Challenges for next year?**
- **Priorities for the next year?**

**Response:**

The London Fire Brigade (LFB) as a category 1 responder regularly encounter members of the public that are deemed to be vulnerable, but are often not known to partner agencies.

It is our aim to assist partner agencies in raising the safeguarding agenda both within our own service and the community, ensuring that the needs of the vulnerable are considered and met at all times. Particular attention is to be paid to those most in need of our services, but who may not be in a position to ask for it due to age, disability, deprivation etc.

**Achievements for this year are:**

- Single point of access established within the local authority incorporating the safeguarding alert system.
- A large number of vulnerable residents passed to local authority partners for further investigations.
- Management representation on a newly created High Risk residents sub-group.
- Borough Station Managers have all attended LBN Safeguarding training.

**Challenges for the next year:**

- To continue to support multi-agency priorities within the borough and ensure personnel and resources are available to assist partners, within proposed reducing borough resources.

LFB Safeguarding adults priorities within Newham for the coming year are, to ensure that those adults most vulnerable from the risk of serious injury or death as a result of fire and who are most in need of our services, receive advice/support. We will also ensure we:

- Maintain a seat on the SAPB
- Promote the safeguarding adults agenda
- Ensure partners embed the HFSV referral form within their own practices
- Ensure information sharing and confidentiality with partner agencies as part of the High risk residents sub group.

**Name of Partner Organisation: London Probation Trust Newham**

<p><b>1. How has your organisation demonstrated that people’s lives are improved as a result of safeguarding?</b></p>	<ul style="list-style-type: none"> <li>• <b>What has your organisation achieved?</b></li> <li>• <b>Challenges for next year?</b></li> <li>• <b>Priorities for the next year?</b></li> </ul>
<p><b>Response:</b></p> <p>A Pan London ACOP Portfolio Lead for Safeguarding adults has been appointed</p> <p>Every Local Development Unit (LDU) including Newham, has a nominated Safeguarding Adults Portfolio lead at Middle manager grade</p> <p>The priority this year, is to embed attendance at the local Safeguarding Adults Board, and to raise awareness amongst staff in the LDU.</p>	

**Name of Partner Organisation: Newham Safeguarding Children’s Board (NSCB)**

<p><b>1. How has your organisation demonstrated that people’s lives are improved as a result of safeguarding?</b></p>	<ul style="list-style-type: none"> <li>• <b>What has your organisation achieved?</b></li> <li>• <b>Challenges for next year?</b></li> <li>• <b>Priorities for the next year?</b></li> </ul>
<p><b>Response: Achievements 2012/13:</b></p> <ul style="list-style-type: none"> <li>• Establishment of Joint Children/Adults Safeguarding sub-group accountable to both the NSCB and NSAB, April 2013. (Terms of reference attached).</li> <li>• Joint Social Workforce Lead for Children and Young People Service (CYPS) and Adult Services continues in post enabling a joined up approach to workforce planning across the social care sector</li> <li>• Introduction of a protocol between London Multi-Agency Public Protection Arrangements (MAPPA) Strategic Management Board and the NSCB which provides a high level framework to guide borough-based arrangements designed to enhance co-operation and communication between safeguarding children and MAPPA structures (April 2013)</li> <li>• Introduction of a Multi-Agency Performance Framework for the NSCB with data from Probation, DV services and the Police (Dec 2012)</li> <li>• A joint review by the police and Local authority of the Newham Multi Agency Risk Assessment Conference (MARAC) which has made recommendations to address the areas of MARAC under performance. Strategic Steering Group established to oversee recommendations and improvements. (May 2013)</li> </ul>	

- Adult Mental Health had effectively used the learning from Serious Case reviews to identify and protect children from being harmed (Ofsted Pilot Inspection, Dec 2012). Adult services, including Adult Mental health, are participating in the June 2013 multi-agency safeguarding audit.
- Probation Trust conduct monthly peer review audits from which safeguarding children has been identified as a priority area of improvement with audit findings are reported to the Performance and Quality Assurance Sub-group of the NSCB.
- Six weekly Transition tracking meetings established to monitor progress of individual cases (2012)
- Transition Safeguarding Protocol in place and being well-used (2012)

## **Priorities for 2013/14:**

- Delivery of Joint Adult/Children Safeguarding Sub-group work plan (being drafted following inaugural meeting on 19.6.13)
- Improve the MARAC performance in relation to referrals received, repeat referrals, referral numbers from the police, Lesbian, Gay Bisexual and Transgender (LGBT) victims and referrer where the victim has a disability. (MARAC Review, May 2013 recommendation).
- Ensure there is consistent representation at MAPPA meetings, including from Adult Social Care and Housing, and that there is sufficient oversight and scrutiny of the work of the MAPPA and MARAC by the NSCB (Ofsted Pilot Inspection, Recommendation)
- Ensure there are effective risk management plans in place in all Probation cases where there is a risk of harm to children (Ofsted Pilot Inspection, Recommendation)
- Transition Work stream priorities are completed
- Complete the Winterbourne Stock-take

## **Challenges for 2013/14:**

- Establishing the number of local children living in homes where there is known substance misuse, mental ill-health of a parent/carers and/or domestic violence
- All relevant data is provided by partners to compile a comprehensive NSCB Performance Report, on a quarterly basis
- Extending the reach and capacity of the Children's Social Care and NSCB audit programme to cover the above priorities.



**Name of Partner Organisation: London Borough of Newham Community Infrastructure (Housing Services)**

1. How has your organisation demonstrated that people’s lives are improved as a result of safeguarding?	<ul style="list-style-type: none"> <li>• What has your organisation achieved?</li> <li>• Challenges for next year?</li> <li>• Priorities for the next year?</li> </ul>
<p><b>Response:</b></p> <p><b>Housing – General</b></p> <p>Overall tenant satisfaction up by 3 percentage points to 79%</p> <p>Overall leaseholder satisfaction up by 12 percentage points to 47%</p> <p>Improving conditions in the private rented sector - Introduced a property licensing scheme to regulate private sector landlords and improve conditions generally for tenants within the borough’s private sector rent stock.</p> <p><b>Improved access to housing</b> - Allocations policy reviewed and an online housing register introduced October 2012.</p> <p>Following the introduction of the Localism Act in April 2012, we introduced fixed term tenancies for new council tenants on 01.04.13. This exclude sheltered housing for older people who will still receive life-long secure tenancies.</p> <p><b>Increased tenancy sustainability</b> - Reduced Council tenant rent arrears to an average arrear of £40 per tenant. The lowest figure recorded, an excellent and timely performance bearing in mind the forth coming challenges raised by ‘welfare reforms’.</p> <p><b>Telecare + Sheltered Housing Finances</b> - The Telecare &amp; Sheltered Housing services have both come under close financial scrutiny as a result in Supporting People and other budget reductions. The Telecare service provision has been reviewed during 2012/13 and budget has been reduced by £200k, without adverse affect on the service provision.</p> <p><b>Telecare Service</b> - In 2012 we were represented at the Safeguarding &amp; Adults Olympic Planning Committee, whereby we worked closely with external agencies to ensure safeguarding was a priority in the Borough during the Olympics.</p> <p>We regularly attend the safeguarding adults at risk steering group chaired by the Metropolitan Police.</p> <p>As part of our Telecare Services Association Code of Practice accreditation, we review our Safeguarding Adults Procedure annually.</p> <p>We are working closely with the Safeguarding Adults Team on a programme of refresher training for all the control centre staff.</p> <p>We continue to provide the Safeguarding Adults telephone referral and advice out of hours monitoring service.</p>	

## • **Challenges for next year?**

- Achieving budget reduction targets set for the service whilst limiting adverse affects on service provision.
- The Sheltered Housing Service is being reviewed this year to address future service demands and budgetary reductions.
- There has been a 99% increase in homeless approaches to Newham Council when comparing April 2012 to April 2013 from 176 to 351 households.
- Provision of new properties:
- HCA/GLA Affordable housing contract -
- New build 104
- Street acquisition 60
- De-conversions/ extensions 56

## • **Priorities for the next year?**

- Preparing for further welfare reforms notably, the total household Benefit Cap and Universal Credit.
- Implementing the actions resulting from the Sheltered Housing Review.
- To achieve a successful Telecare audit to be carried out by the Telecare Services Association in order to retain our 'Platinum accreditation' of their Code of Practice.
- To ensure that all staff are appropriately trained on safeguarding issues.

**Name of Partner Organisation: Barts Health NHS Trust**

<b>1. How has your organisation demonstrated that people's lives are improved as a result of safeguarding?</b>	<ul style="list-style-type: none"><li>• <b>What has your organisation achieved?</b></li><li>• <b>Challenges for next year?</b></li><li>• <b>Priorities for the next year?</b></li></ul>
<p><b>Response:</b></p> <p>Bart's Health has focused its first year as a new organisation on building its safeguarding processes to promote a standardised approach to training, development, awareness, processes, policies and procedures across its 6 hospital sites. Over the previous year, the new safeguarding team has seen an increase in awareness on the wards and an increase in the number of contacts it has had with the clinical staffing teams for support and advice.</p> <p>Over the next year, Bart's Health plans to continue to work closely with the Local Authority leads to define best practice within the clinical setting in relation to key safeguarding issues such as DoLs, pressure ulcers and caring for patients who lack capacity.</p> <p>The challenges in achieving this are predominantly around embedding the changes and best practice across a large organisation.</p>	

## REVIEW OF TRAINING

This last year continued to be one of constant change, restructuring of services and severe economic restraint, these issues impacting on the ability of organisations to release staff for off site training.

In addition the service level agreement (SLA) with the local safeguarding adult board came to an end and the training sub group of the partnership board dissolved which created challenges for the delivery of a multi agency training programme.

The newly formed Quality & Workforce Development Team (LBN, Adult Services) took over responsibility for the administration of the multi agency training programme in July 2013 and continued to run the programmes that had

been agreed within the previous service level agreement.

Despite the difficulties experienced, particularly the lack of any administrative support to this programme, the courses delivered again exceeded the original targets, with the majority of courses fully subscribed.

There were twenty one 1 day courses at an introductory level – “Good Practice in Safeguarding Adults – The Newham Perspective’, an increase of five from the previous year, and seven two day courses for staff undertaking investigations – “Safeguarding Adults – The Role of the Investigator.”

The courses were open to all partner organisations.

The courses commissioned are identified below:


Course title	Number of courses	Costs
Good Practice in Safeguarding Adults – The Newham Perspective	21	£3,234.00
Safeguarding Adults – The Role of the investigator	7	£14,700.00
Minute taking at safeguarding meetings and conferences	1	£315.00
Total costs	29	£7,959.00

Advertising for these courses was done through distribution of flyers using a series of specific databases to ensure all partner organisations were informed of the programme. Additionally

information was distributed through a variety of newsletters and mail shots for partners. The courses were also publicised at relevant forums and meetings

## GOOD PRACTICE IN SAFEGUARDING ADULTS – THE NEWHAM PERSPECTIVE

This course is targeted at any worker at any level in local agencies that may work with adults who are at risk of abuse including social care and health workers, the emergency services, housing, recreation and leisure services.

 These are from the national safeguarding competencies:

Participants will be able to:

- Understand what safeguarding is and their role
- in safeguarding adults.
- Recognise an adult potentially in need of safeguarding and take action.
- Understand the procedures for making a 'safeguarding alert'
- Understand dignity and respect when working with individuals.

All courses took place as planned with the majority having high or maximum attendance therefore being cost effective. In addition five extra courses were commissioned to meet demand.

The twenty one courses offered a total of 420 places, most of which were allocated in advance.

## SAFEGUARDING ADULTS – THE ROLE OF THE INVESTIGATOR

This two day course is targeted at social workers, senior practitioners, team managers, experienced health practitioners and senior staff and managers in all relevant settings.



The course objectives were adapted from the national safeguarding competencies:


- Explain the purpose of undertaking a safeguarding investigation and the factors that need to be considered, including when to notify and/or involve the police.
- Understand their role and the role of others (including vulnerable adults, police advocates and IMCAs) in ensuring that a multi agency investigation is carried out effectively to required timescales and processes.
- Explain how to keep vulnerable adults safe, ensure their rights are upheld and choices respected, taking into account mental capacity and best interest.
- List key factors to consider in achieving best evidence including good practice in interviewing.
- Develop strategies to minimise risk for the vulnerable adult, perpetrator, staff or organisations.
- Explain the potential impact of abuse on vulnerable adults and their informal carers, on staff and organisations.
- Consider ways of supporting victims of abuse and their carers through the process of an investigation, including working proactively with those who are resistant, or refuse to engage with services.
- Explain the relevant legislation and guidance which underpins good working practice in safeguarding adults.
- Present reports that are concise, objective and consistent with local requirements.

- Explain and demonstrate good practice in relation to chairing strategy meetings or case conferences

Seven courses were commissioned offering a total of 112 places.

## **Taking minutes at safeguarding meetings and conferences.**

This new one day course is for workers who are expected to take minutes at meetings or conferences relating to the safeguarding of children and young people or adults. Commissioned across both services, the pilot course was evaluated highly, but has been redesigned to give participants more practical exercises relating to minute taking.

-  Explain and carry out with confidence the role of minute taker at safeguarding meetings
- Explain how to prepare for a meeting and outline the tasks that need to be completed after a meeting, including distribution of minutes to agreed timescales
- Explain the role of the chair in relation to safeguarding meetings and how the minute taker works with the chair before, during and after the meeting
- Understand and improve listening and writing skills to ensure that minutes are timely, relevant, accurate and concise
- Consider what should be recorded and what should not be recorded in minutes of safeguarding meetings
- Understand the context of safeguarding meetings and the terminology used.
- Understand the emotional impact that may accompany minute taking at safeguarding meetings, the importance of debriefing

and the importance of developing effective coping strategies.

- Explain any local requirements for taking minutes.


One course was offered with 16 places.

## **Evaluation summary**

Participant evaluations at the end of the courses remain consistently high with the training course generally rated as excellent or good. Participants enjoyed working with all the trainers involved, finding their delivery style and knowledge of the subject excellent.

With the introductory course – Good Practice in Safeguarding Adults – participants particularly enjoyed working with people from different organisations and disciplines, finding it useful to hear a different perspective on situations.

Concerns expressed included the fact that people who did not work directly for the council would have liked more local information, particularly leaflets or handouts, and the opportunity to meet key people including members of the Safeguarding Adults Team.


(The  concern was also evident with Safeguarding Investigator's course.)

Trainer feedback from the introductory course highlighted that participant understanding of the Mental Capacity Act was frequently low, even when they had received training. It is intended to offer accredited training for some worker groups in the next programme, this providing an opportunity for workers to complete a written assignment linking classroom based learning to their working practice. This should embed learning more than is happening at present.

Similarly a proportion of workers regularly struggled with the issue of whistle blowing.

Though they understood what it is and their responsibilities in relation to it there was a lack of confidence in their ability to do this for a whole variety of reasons. The next programme intends to address this through a series of short practical workshops where participants learn practical strategies and techniques in addressing and reporting poor practice.

The Safeguarding Adults Course – The Role of the Investigator again was highly evaluated. Participants did express that it was hard work but the focus on completing an investigation from beginning to end helped them to understand and be confident with the whole process. The future programme will offer an additional day for managers of establishments where an investigation is taking place.

 trainer expressed concern that several workers were attending this course for the second time within a year, as a refresher. This was not particularly useful as exactly the same exercise was being used as previously and was not going to give the workers any new learning. It was agreed that further courses and seminars would be embedded into future programmes so that workers could extend their knowledge and skills further.

The pilot course on taking minutes was very well received and has been adapted to provide more practical exercises. It is crucial that all participants are required to take minutes at safeguarding meetings though so there needs to be a more targeted selection of participants by managers.

As in the previous few years most participants were from London Borough of Newham or the private, voluntary and independent sector but this year saw a growth in attendees from dental and GP surgeries and the Fire Service.

There still remains a problem of late cancellation or failure to attend and the lack of administrative support and systems meant that the team were unable to collect cancellation fees. Similarly there is also concern about people arriving very late for training or leaving early. This is disappointing as most courses have a waiting list of people wishing to attend yet some courses which should have been full have spaces because of unauthorised absence.

### SUMMARY OF SAFEGUARDING ADULTS STATISTICS

The information contained in this report highlights key extracts from the Abuse of Vulnerable Adults (AVA) returns, which was submitted to the NHS Information Commission for the year ending 31st March 2013. The annual AVA return provides the detailed summary of all safeguarding adults' activity in Newham and is used to identify trends and safeguarding priorities.

#### HOW MANY CASES OF ABUSE HAVE BEEN REPORTED IN NEWHAM?

Table 1a

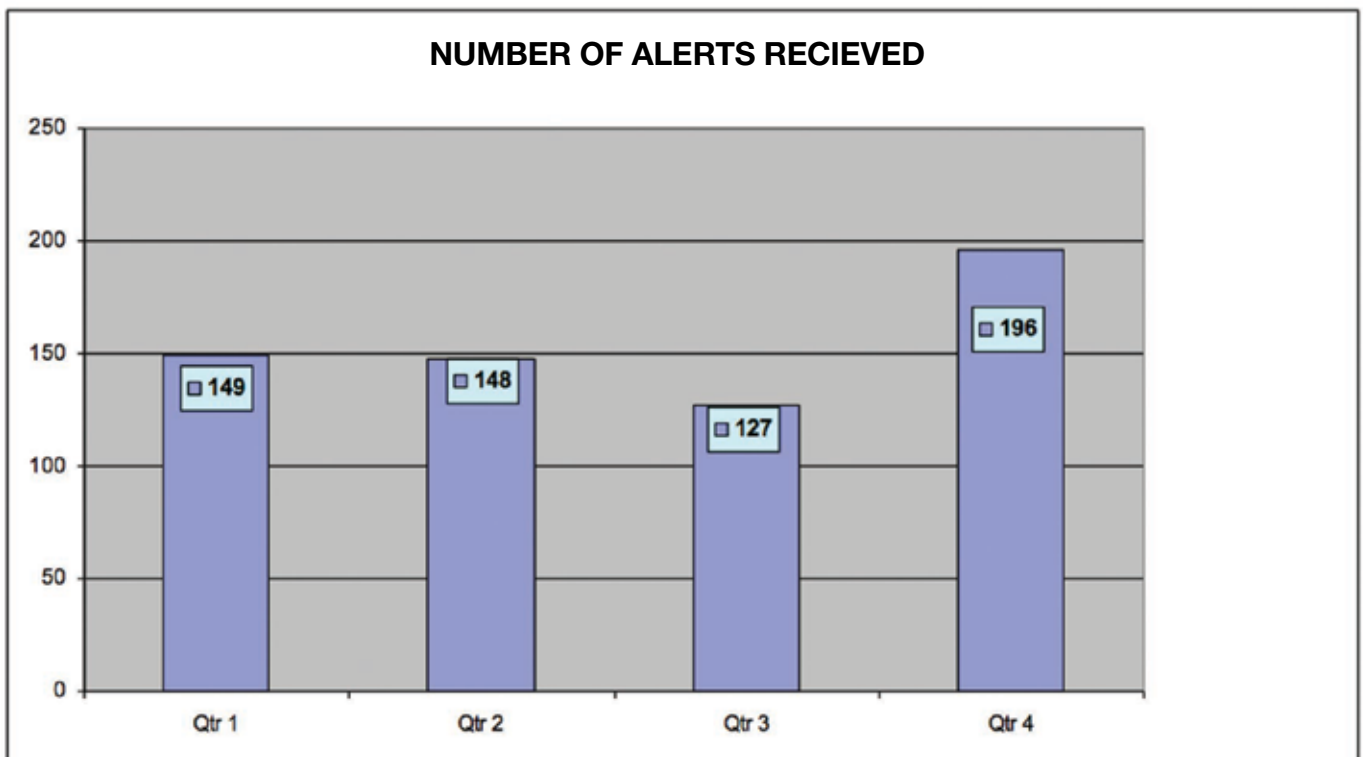
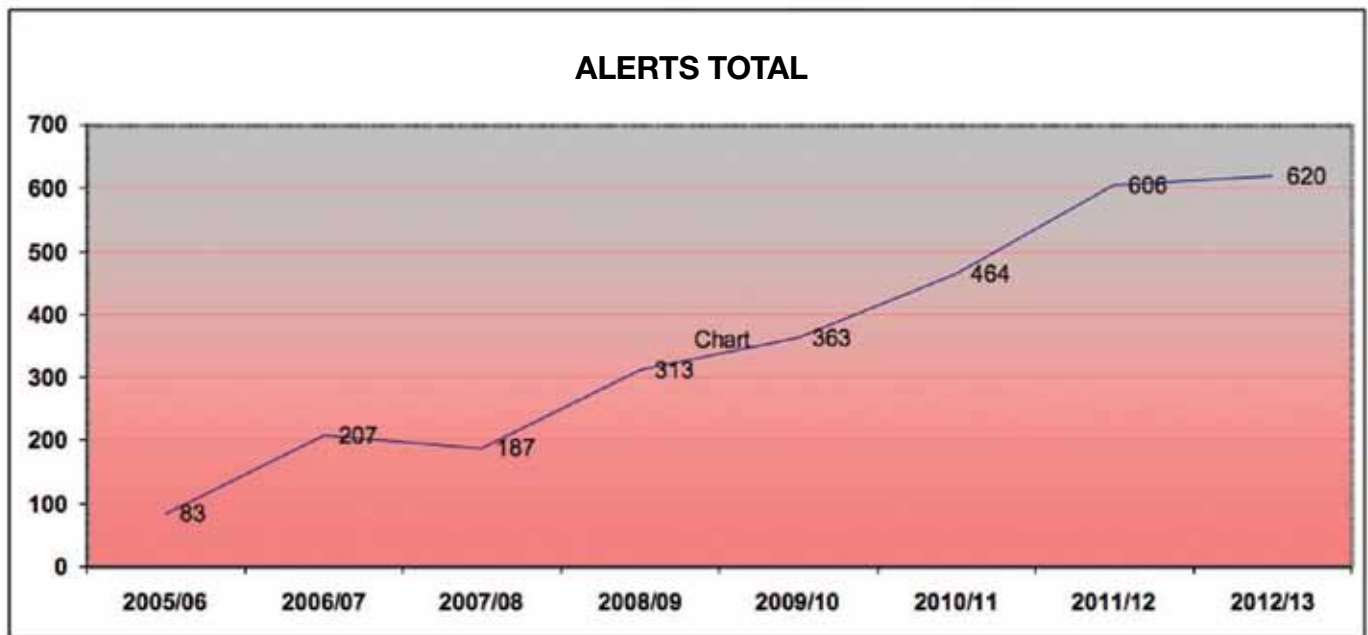




Table 1b



**TABLE 1a and 1b**

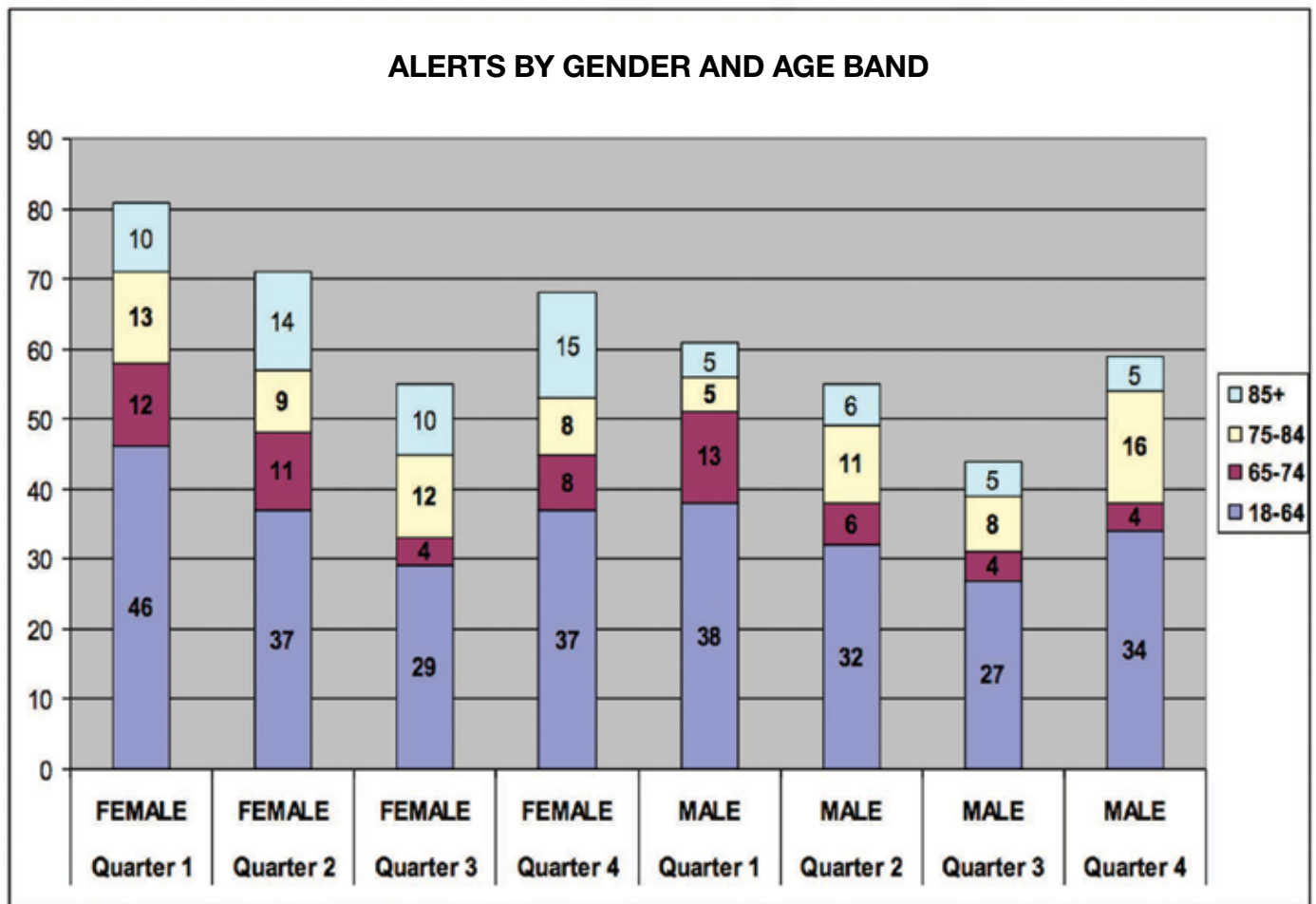
The total number of alerts received was 620 of which 494 went through to the referral stage. All alerts are received through the Access to Services team, where they are logged and screened. Sometimes alerts are raised which do not meet the safeguarding adults criteria or is for information only. Such cases are screened out, but may be signposted on to other services such as Contract monitoring or Domestic Violence services. A number of notifications of grade 1 or 2 pressure sores are received as alerts, which initial checks indicate do not have

a safeguarding element to them. Whilst people are strongly encouraged to report abuse, robust screening ensures that only those which meet the safeguarding criteria are passed to referral for ongoing investigation.

It is encouraging that across Newham the message is reaching people that the abuse of adults at risk will not be tolerated and actions will be taken to protect people. The dedicated safeguarding adults telephone line and the introduction of the IAG website have added further commitment and strength to these messages this year.

## WHO WAS ABUSED?

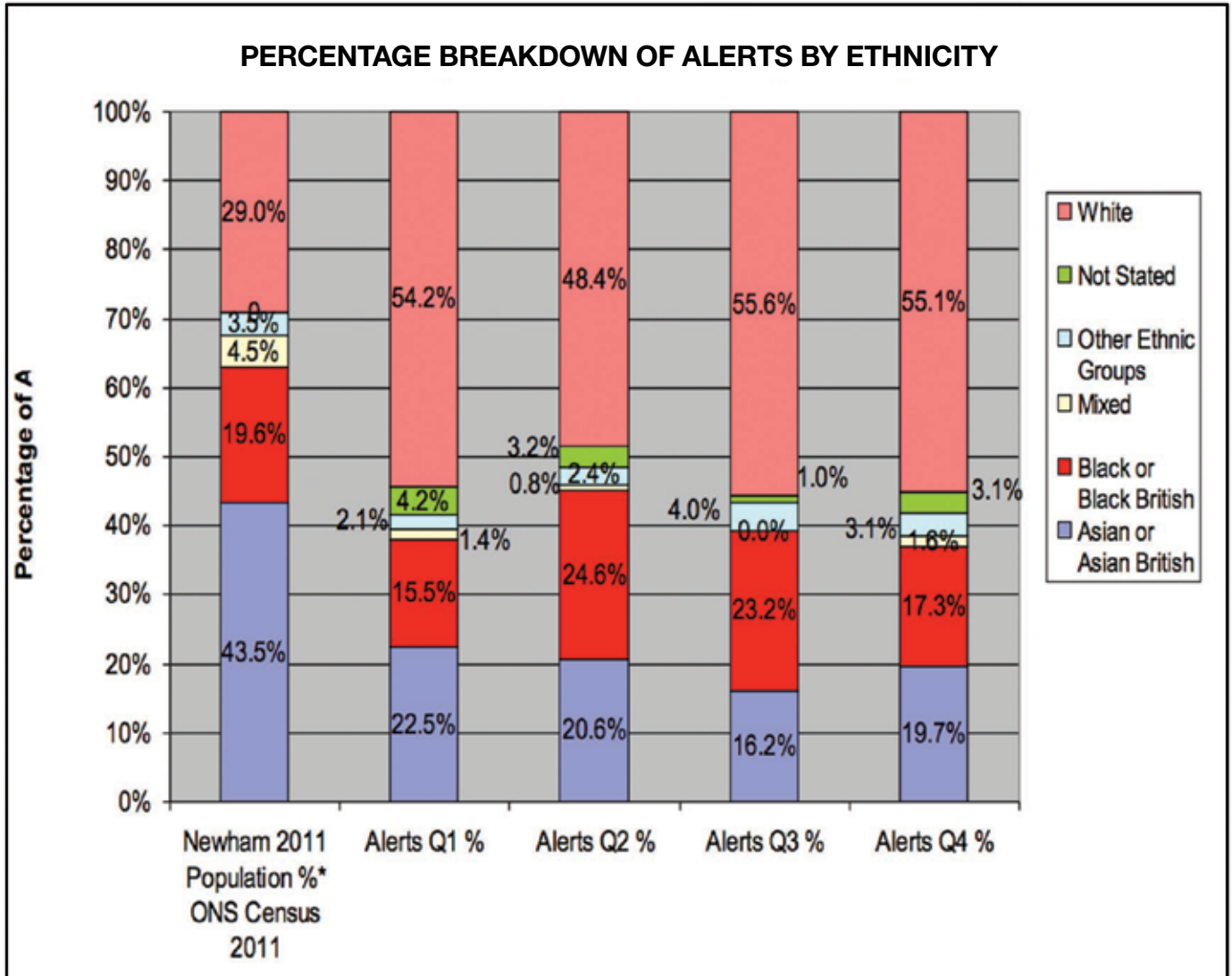
Table 2a



In Newham we have an unusually young age profile in comparison to the rest of England. Newham has a larger than average proportion of people aged 20 to 39 years with a correspondingly smaller than average proportion aged 40 and above. People aged 65 and over make up relatively small proportion of the Newham population in comparison to London and England as a whole. In 2011, 6.7% of Newham population was estimated to be aged 65 and above compared to 16.5% nationally[1]

The data in table 2a shows that over the year 150 alerts relating to women aged 18- 65 years of age and 131 alerts relating to men aged 18-65 years were received, which equates to 56.5% of total alerts received. In most London boroughs the elderly aged 65+ years are the most reported group, but in Newham, based on local and national demographic data, figures suggests there is still a comparatively high reporting of the over 65 years age group.

Table 3



Newham has the most ethnically diverse community in England and Wales (72% of the population are from black, Asian and minority ethnic groups)[2]with over 100 languages spoken.

The data collection for the annual safeguarding submission is not broken down in a way that represents Newham’s full diversity. Data from this table highlights that those from the ‘white’ origin category represents a disproportionately higher referral rate. However 44.5% of referrals come from people aged 65+ years and

the older population in Newham, which is predominately white and does not represent the overall ethnic breakdown. Among black and Black British groups we have seen slightly higher referral rates than the suggested 2011 population census indicates. The ethnic groups most under represented are the Asian communities, where under reporting is only about 50% of anticipated figures. This group has historically been a hard to reach community and work is ongoing to encourage reporting of abuse from Asian communities.

<sup>(1)</sup> The Office for National Statistics 2011: [www.ons.gov.uk/ons/rel/npp/national-population-projections/2010-based-projections/stb-2010-based-npp-principal-and-key-variants.html](http://www.ons.gov.uk/ons/rel/npp/national-population-projections/2010-based-projections/stb-2010-based-npp-principal-and-key-variants.html)

**Table 4a Service User Category**

Service User Category	Service User Sub-category	Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
Learning Disability Total		34	28	23	24	109
Mental Health Total		39	34	27	34	131
	<i>Of which: Dementia</i>	13	12	4	11	40
Other Total		7	6	1	2	16
Physical Dis Frailty & Sensory Imp		60	47	42	59	210
	<i>Of which: Sensory Impairment</i>	5	2	1	3	11
Substance Misuse Total		2	11	6	9	28
<b>TOTAL</b>		<b>142</b>	<b>126</b>	<b>99</b>	<b>127</b>	<b>494</b>

**Table 4b**

Age Group	Service User Category	Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
<b>18-64</b> Age Group	<b>Learning Disability Total</b>	<b>33</b>	<b>25</b>	<b>24</b>	<b>23</b>	<b>105</b>
	Mental Health Total	21	19	18	21	79
	Other Total	5	4	0	1	10
	Physical Dis Frailty & Sensory Imp Total	23	12	10	20	65
	Substance Misuse Total	2	9	4	6	21
<b>18-64 Total</b>		<b>84</b>	<b>69</b>	<b>56</b>	<b>71</b>	<b>280</b>
	<b>Further Breakdown of 65+ Service User Category</b>					
	Learning Disability	1	3	0	0	4
	Mental Health	18	15	7	12	52
	Other	2	2	1	1	6
	Physical Dis Frailty & Sensory Imp	37	35	33	40	148
	Substance Misuse	0	2	2	3	7
<b>Total 65+</b>		<b>58</b>	<b>57</b>	<b>43</b>	<b>56</b>	<b>214</b>
<b>Grand Total</b>		<b>142</b>	<b>126</b>	<b>99</b>	<b>127</b>	<b>494</b>

The data for the AVA submission in terms of service user categories can be confusing to analyse because older adults aged over 65 years are grouped in the 'Physical Disability Frail and Sensory Impairment' category. This category should not include older adults with a pre-disposing diagnosis of learning disability

or mental health illness, but it is possible that people who had one of these diagnoses before reaching 65 years have been included as an older adult rather than being distinguished as being an older person with a learning disability or mental health diagnosis.

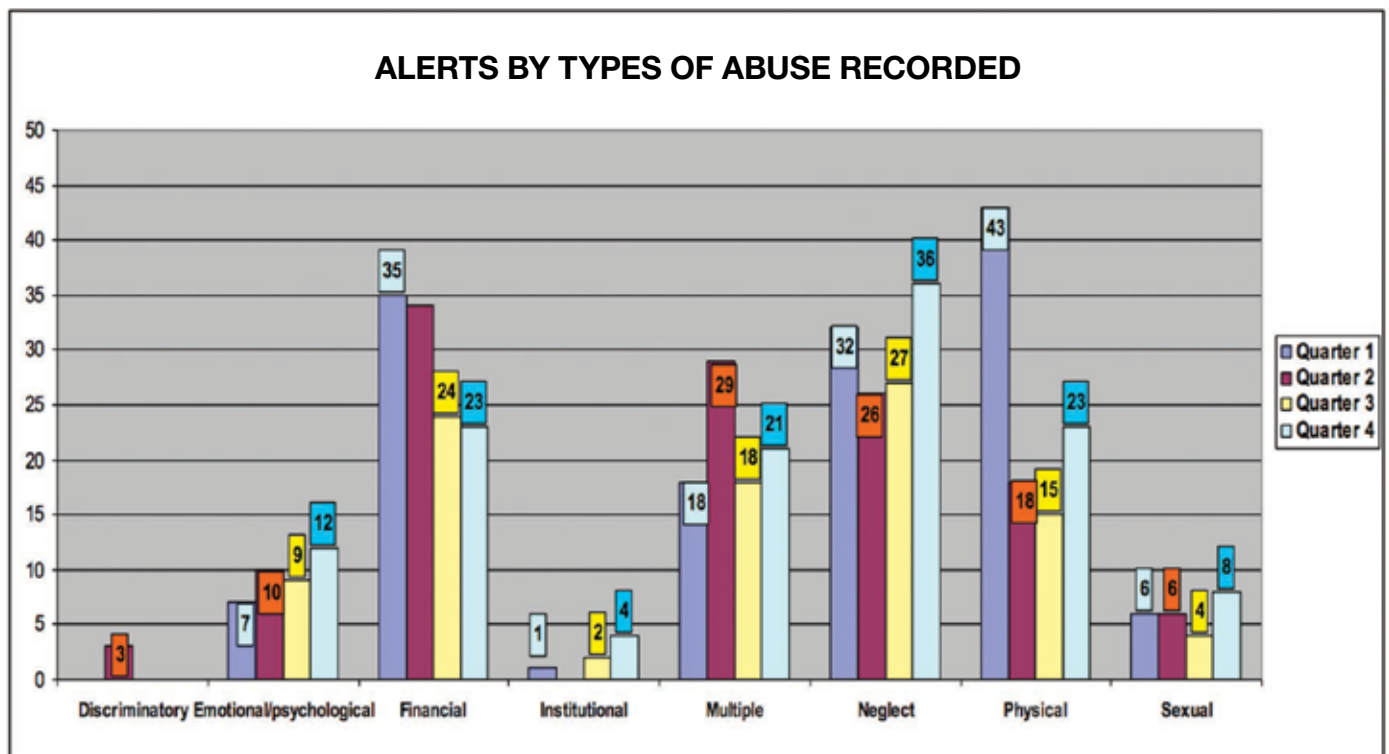
The data in table 4b shows the single most reported group in Newham are people over the age of 65 years, however when the figures are looked at as a whole from across the different service areas, the 18-64 age groups combine to make up the majority of referrals at 55.5%.

Alerts for PWLD significantly drops in the 65+ category and is largely accounted for by low mortality rates for PWLD. These figures are

representative of national trends and reflect that there are a significantly higher number of older adults per head of the population compared to the other service user groups. However there continues to be a marked increase in referrals for people with mental health and substance misuse needs. This highlights the continued vulnerability of people within these groups and the increased awareness amongst staff and customers of the safeguarding agenda.

## TYPES OF ABUSE

Table 5



The most commonly reported type of abuse is neglect, followed closely by financial abuse and neglect. In the first quarter of 2012 there was a sharp increase in the number of alerts relating to physical abuse. Aside from obvious signs of physical abuse, such as hitting, pinching,

slapping etc, poor skin management such as pressure sore care, or dehydration or poor weight management can manifest themselves as physical abuse. During this period there were two multiple concerns in provider settings ongoing in which the details of a number of

residents would have been recorded, which may have accounted for this spike.

The safeguarding team receives good co operation from care providers when safeguarding alerts are raised, along with a genuine commitment to improve practice.

The number of neglect cases has risen this year, representing 24% of all referrals. This is consistent with national trends and the impact of the Panorama programme uncovering oor practice at Winterbourne View may have had an impact on public awareness here. Financial abuse came a very close second in terms of most reported abuse. With the increase in

referrals to our Client Affairs team, which now sits within the same division as the Safeguarding Governance team, those very vulnerable adults in the community are now able to use the council services to protect their finances. A financial resilience event took place in May 2012 organised jointly by the Safeguarding Governance and Client Affairs teams.

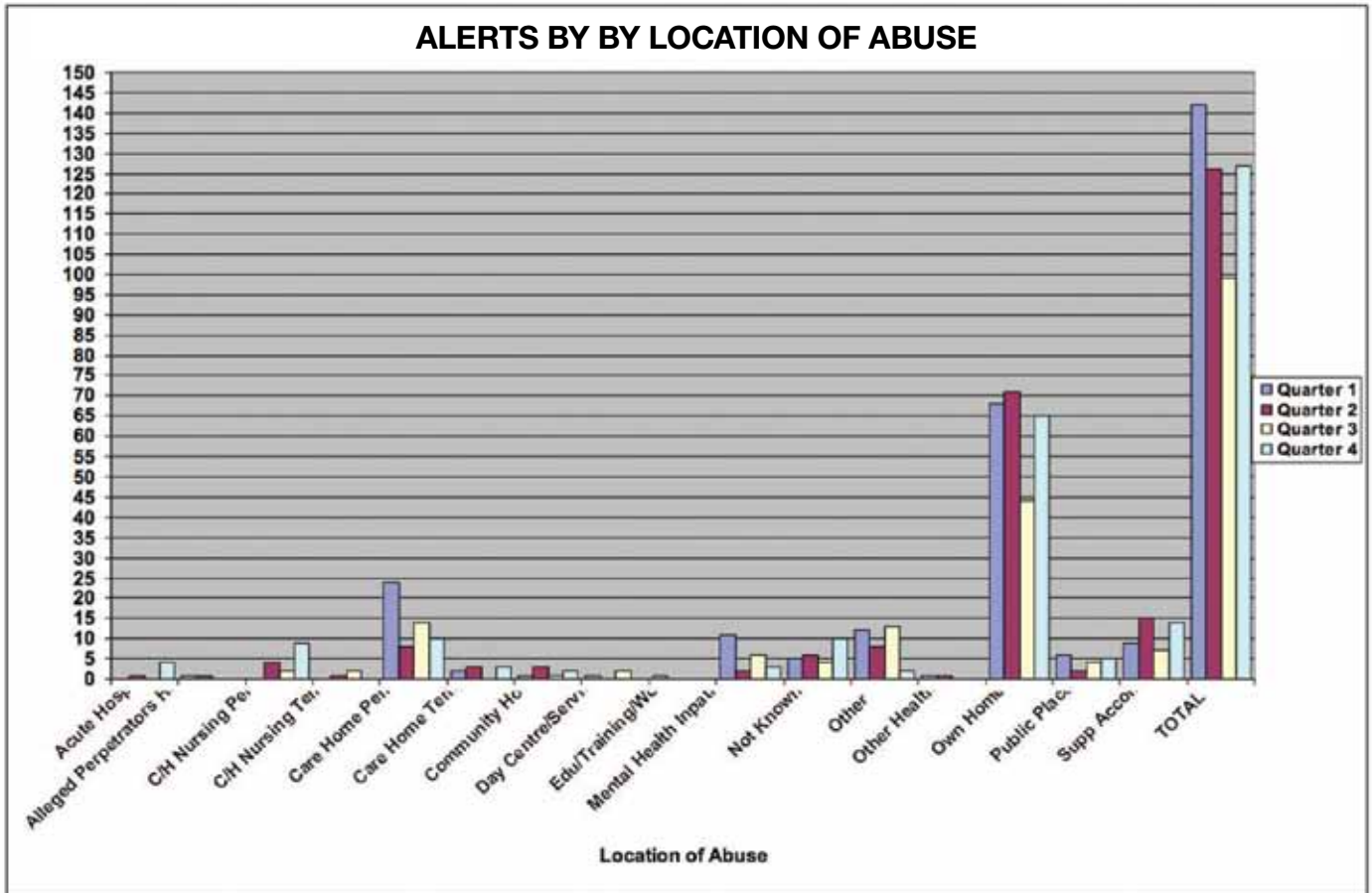
Data shows there has also been a rise in reports of neglect and once again is the third most reported type of abuse reported. Grade 3 and 4 pressure ulcers are now reported as a safeguarding referral and is likely to be one of the reasons for this increase.

## WHERE DID THE ABUSE HAPPEN?

**Table 6a**

Location of Abuse	Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
Acute Hospital		1		4	5
Alleged Perpetrators Home	1	1			2
Residential/ Nursing Home Perm		4	2	9	15
Residential/Nursing HomeTemp		1	2		3
Residential Care Home Perm	24	8	14	10	56
Residential Care Home Temp	2	3		3	8
Community/private Hospital	1	3	1	2	7
Day Centre/Service	1		2		3
Edu/Training/Work	1				1
Mental Health Inpatient	11	2	6	3	22
Not Known	5	6	4	10	25
Other	12	8	13	2	35
Other Health	1	1			2
Own Home	68	71	44	65	248
Public Place	6	2	4	5	
Supp Accom	9	15	7	14	45
<b>TOTAL</b>	<b>142</b>	<b>126</b>	<b>99</b>	<b>127</b>	<b>494</b>

Table 6b



The data in table 6a and 6b shows that in Newham, most abuse continues to be reported as occurring in the service user’s own home, accounting for almost half of all alerts received. Abuse at home figures are consistent with national trends, but it is also recognised that abuse is still more likely to go unreported in people’s own homes (or where customers live with parents or other family members).

Whilst this may indicate that living at home is risky for vulnerable adults, it has to be seen in

the context that many thousands more people live at home than in any of the other categories.

Referrals from the Acute Trust at Newham account for 5 which remains low, is unlikely to be representative of all people’s experiences and inconsistent with the findings of the Francis Report. Work is continuing with the safeguarding lead at Bart’s Health to raise the safeguarding profile and develop more robust pathways to increase referrals from the trust.



**Table 7**

Primary Source	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Anonymous	1	1	1	6	9
Care Worker/Coordinator	12	8	5	14	39
CMHT	10	5	1	1	17
Day Centre	2	2			4
Education/Training/Workplace	3				3
ELFT	5	5			10
Family/Friend	15	28	15	24	82
Nurse	15	10		3	28
Other	48	25	29	15	117
Police	6	2			8
Residential/Nursing	12	5	1	3	21
Service User	1	14	46	56	117
Social Care Staff	10	14	1	3	28
Supported Living	2	7		2	11
<b>Total</b>	<b>142</b>	<b>126</b>	<b>99</b>	<b>127</b>	<b>494</b>

Whilst a high number of alerts are flagged by the service user, there is an equally high number where the originator is not identified by anything but 'other' This needs to be clarified in the coming months, but was generally seen

to be improving each quarter, with a significant improvement between Quarter 1 and Quarter 4. Health alerts originating from the hospital are not apparent on this table and will be identified as a priority for 2013/14

## RESULTS OF SAFEGUARDING INVESTIGATIONS

**Table 8a**

Result of Case Investigation	Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
Inconclusive	16	13	7	7	43
Not Substantiated	23	26	14	5	68
Partially Substantiated	7	6	3	2	18
Substantiated	26	24	12	8	70
<b>TOTAL</b>	<b>72</b>	<b>69</b>	<b>36</b>	<b>22</b>	<b>199</b>

Table 8b

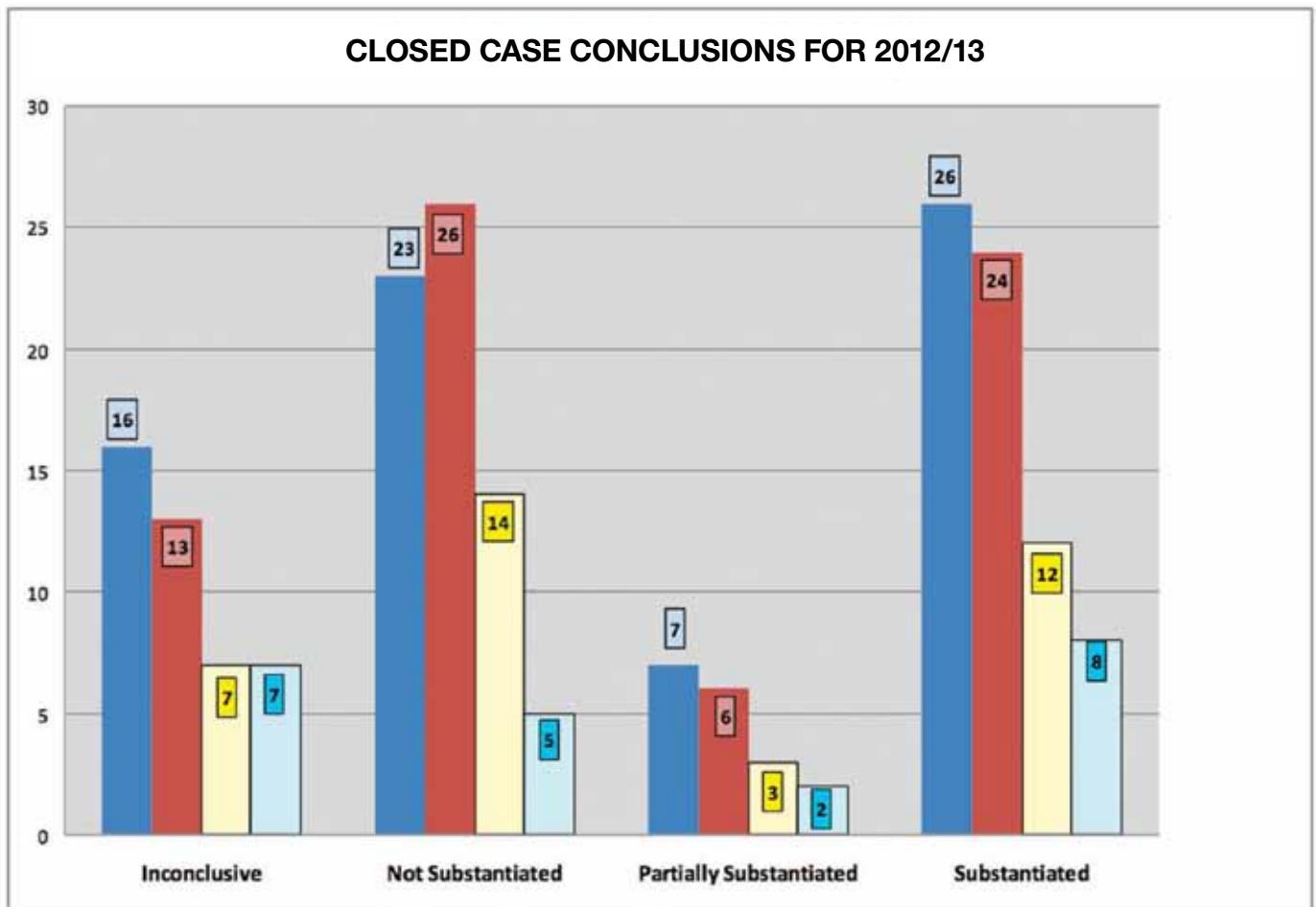


Table 8a highlights that approximately 40% of all referrals have been concluded and outcomed. The recording of the outcome of a safeguarding event is crucial to ensure the person has been safeguarded and that the accuracy of the allegation in the original alert is confirmed, however the complexities of each case mean that there are always varying timescales to completion. Sometimes cases remain open whilst we are awaiting details from a coroners inquest or from the police where a criminal investigation is ongoing.

Although this year there has been a slight decrease in the number of outcomed cases,

there has been a significant increase in the number of substantiated cases. This would suggest that the initial screening at the point of receipt of alert is working more robustly in ensuring that inappropriate alerts which do not meet the criteria are not getting through Priorities for 2013/14.

### **NEWHAM SAFEGUARDING ADULTS BOARD STRATEGIC PRIORITIES**

At the point of going to print the SAB had met to discuss its strategic plan and agree its key priorities and this was awaiting sign off.

In summary the Safeguarding Adults Board will continue to strengthen its partnership arrangements, improve its governance, business arrangements, and operational effectiveness to deliver against its priorities.

The Safeguarding Board in Newham has 5 key priorities which underpins its work and will be reflected in its strategic plan.

1. Ensuring effective leadership and governance of all safeguarding adults processes and practice;
2. Prevention - Ensuring systems are in place to predict high risk and prevent possible abuse;
3. Responsive - Ensuring a coordinated and effective response to abuse with timely outcomes
4. Strengthening joint working and practice across agencies and the wider community
5. Identifying emerging good practice to ensure continuous improvement

**The SAB will seek to achieve these priorities in the following ways:**

- I. By ensuring the safeguarding of vulnerable adults in Newham is the highest priority for all organisations.
- II. Providing independent governance and audit of safeguarding practices.
- III. Promoting, informing and supporting work to safeguarded adults in Newham across all the partnership agencies.
- IV. By developing Newham's strategic safeguarding policies, and ensure the inclusion of these policies in all agencies strategy documents and plans.

**THE PARTNERSHIP BOARD WILL ENSURE THAT THE WORK OF THE BOARD IS PROPERLY RESOURCED.**

More information on definitions and a whole range of issues for all partners working in the area of adult abuse can be found on the IAG page on:

**<http://adultsocialcare.newham.gov.uk/pages/safeguarding-adults.aspx>**

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