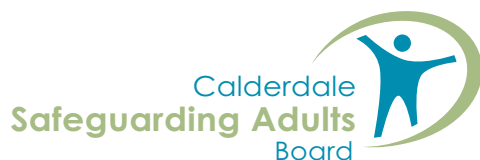




Calderdale Safeguarding
Adults Board

Annual Report

2011 - 2012



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Foreword

In last year's annual report I highlighted four main issues:

- 1 The high level of commitment from the partner agencies** that make up the Safeguarding Adults Board. That continues to be the strength and bedrock of the work we do.
- 2 The importance of effective and workable policies and procedures.** To ensure the protection of adults in Calderdale work has continued throughout the year to amend and improve these and to work with neighbouring councils in West Yorkshire with the aim of aligning our procedures with theirs.
- 3 The key role that the Board has in holding partners to account for their responsibilities and actions.** To do this the Board needs accurate and timely information on what is happening so that it can analyse and plan future actions based on evidence. Much has been done to improve the accuracy of information in Calderdale but there is national recognition that changes need to be made to the data collected to make it more useful and more focused on the outcomes achieved for people who are the subject of safeguarding interventions.
- 4 The challenge of maintaining momentum during a time of major restructuring in the NHS and when public services are operating within severe spending restrictions.** We have been fortunate that, although there have been some changes in personnel, most key members of the board have remained in place and positive relationships are being built with the new Clinical Commissioning Group which will replace the Primary Care Trust in 2013.

The main aim of the partnership which makes up the Safeguarding Adults Board is to ensure that adults in Calderdale who may be at risk of significant harm are able to live in safety. We know from tragic cases in other parts of the country that vulnerable adults have been the victims of serious crime and vicious harassment. An important part of the Board's work is therefore focused on how to pick up concerns at an early stage and on the actions that can prevent abuse. A new Anti-Social Behaviour Vulnerability Panel was set up on a pilot basis in December 2011 to bring agencies together to find solutions to cases where there is a risk of harm and to intervene before the problems escalate. Hundreds of cases have been reviewed since then with high risk cases resulting in urgent actions. It has been agreed to establish the Panel on a permanent basis as a result of its very positive contribution to preventing harm.

The other core activity is taking decisive and effective action to protect adults where abuse has occurred. It is vital that the Board is able to learn from these cases and use that experience to plan improvements. It is for this reason that the Board agreed to commission a Serious Case Review - a detailed examination of what happened, conducted by an independent author. The review concerns a nursing home where

there were concerns about the health and safety of several residents and where intervention took place by social services, the NHS and the Police. Cases of this magnitude are relatively rare in Calderdale so the board wanted to see what could be learnt both about the factors that led up to the problems in this home and the effectiveness of the work to protect the people living there. The Serious Case Review will be completed in Autumn 2012 and its findings will be included in the future work plan for the Board.

I hope you find the content of this annual report useful. It contains details of the activities in the past year and the priorities for the year ahead. We often say that safeguarding is everyone's business and if you feel that your organisation can make a contribution then do get in touch with the Safeguarding Adults Team.

Bill Hodson

Independent Chair

Calderdale Safeguarding Adults Board

Executive Summary

The Calderdale Safeguarding Adults Report 2011 - 2012 details the achievements of the Board over the last 12 months. The Board is a voluntary arrangement of statutory and non statutory agencies with the purpose of achieving continual improvements in practice that safeguard vulnerable citizens in Calderdale.

Key achievements during 2011 - 2012 include the following:

- 1** The Adult Safeguarding Policy and Procedure was updated and implemented on 25th May 2011 to support the partnerships involved in the Board. This was in direct response to a Serious Case Review in Calderdale.
- 2** The formation of an Anti-Social Behaviour Vulnerability Panel which has reviewed hundreds of cases and identified where urgent action is needed.
- 3** The Safeguarding Adults Team was successful in recruiting a replacement Safeguarding Adults and DoLS Co-ordinator with specialist knowledge in the areas of Mental Capacity and Deprivation of Liberty Safeguards.
- 4** The roll out of adult safeguarding training across a range of key partner agencies.

The unacceptable experiences of people being abused in residential establishments was crystallised by the horrific abuse uncovered at Winterbourne View in South Gloucestershire by the BBC and the findings in the Serious Case Review published in the autumn of 2012. This presents challenges both locally and nationally to ensure that statutory agencies develop their practice in this area to ensure people experience individualised solutions that are built upon principles of empowerment, dignity, choice, and partnership and respects their human rights.

In considering statistical information outlined later in this report and variations in the data that were published in the 2010 - 2011 report, it was acknowledged in the last annual report that there were difficulties with adult safeguarding recording systems resulting in variations associated with cleaning up the data rather than changes in practice. Developments continue to be made to the Council's client information system to address such anomalies.

Self referrals only account for 1.9% of the alerts received in 2011 - 2012 highlighting the challenge for all members of the Safeguarding Adults Board to continue to raise the public's awareness of safeguarding, their rights and responsibilities.

Special thanks are reserved for all partner agencies who have heavily contributed to the achievements of the SAB and the completion of this annual report and for Paul Swallow who has produced all the statistical and visual representations within.

Mark Albiston
Safeguarding Adults Manager
Calderdale Metropolitan Borough Council

Section 1 // Achievements 2011 - 2012

Governance

The Safeguarding Adults Board (SAB) met regularly throughout the year with the strategic thinking and direction of the board being supported by the SAB executive and SAB sub groups (Prevent, Protect, Perform), which are responsible for driving forward the operational requirements of the strategic vision.

The Safeguarding Adults Board works in accordance with the Safeguarding Adults Multi-Agency Agreement and all partners to the agreement have committed to work with the Local Authority, as lead agency for adult safeguarding. The agreement clearly defines the roles and responsibilities of each statutory partner agency and the roles and responsibilities of the voluntary and independent sector whether commissioned or not.

The independent chair for the SAB continues to provide enhanced scrutiny and objectivity in relation to Board functionality and business activities, providing increased leadership and focus. The SAB work plan for 2011 - 2102 identified key priorities for adult safeguarding work in Calderdale.

The Safeguarding Adults Team provided continued support to assist the operational and strategic thinking of the SAB. In addition to this function the team began audits of adult safeguarding work across all the operational fieldwork teams in March 2011, as a means of overseeing compliance with locally agreed policy and procedure.

Serious Case Review

The SAB commissioned a Serious Case Review in autumn 2011 and the Author is due to report to an Extraordinary SAB in autumn 2012. The outcome of the Serious Case Review will result in a specific management

plan that will span the work required by all key internal and external partner agencies to ensure that the required cultural and operational changes are realised.

The SAB will also need to consider the issues covered in Serious Case Review of Winterbourne View in South Gloucestershire, to ensure that work is managed in the most efficient manner and realises the changes required to effectively safeguard vulnerable adults in Calderdale.

Safeguarding Adults Multi - Agency Procedures

The revised policy and procedure was implemented on 25th May 2011 and was supported by the roll-out of extensive training to internal and external partner agencies, a web-based version, easy read guidance and supporting leaflets.

The procedures provide a robust framework to ensure that those at risk are protected, and reinforces the roles and responsibilities of all partner agencies as a means of enhancing the arrangements for multi agency working.

The Safeguarding Adults Multi - Agency Procedures remain an organic document subject to a number of internal and external influences. It is anticipated that the continued effectiveness of the procedures will need to be reviewed in light of Calderdale's Serious Case Review and the Serious Case Review of abuse at Winterbourne View.

Multi - Agency Training Programme

Training needs are identified with reference to the National Competency Framework for Safeguarding Adults and organisations are provided with a clear rationale for each

course offered together with clearly stated learning outcomes for each course. Training is delivered in a number of formats which includes: delivered courses, single agency training events, E-learning action learning sets are available and a train the trainer event was staged in 2011.

Promotion of links with Community Safety Partnerships

Safeguarding information is maintained and updated on Calderdale Council's website to support the promotion of adult safeguarding.

SAB will continue to explore linkages to established systems to promote communication and reduce areas of duplicated practice. Specific examples of good partnership working include – Domestic Abuse, Anti-Social Behaviour, Hate Crime, Multi-Agency Risk Assessment and Vulnerability.

Commissioned and Contracted Services

We will continue to ensure that adult safeguarding is a central feature within all service specifications for care services across all sectors. Experience has taught us that abuse is more likely to occur in establishments that do not value the individuality of the person; where poor practice is left unchallenged; where the organisational culture promotes its own needs over those of the people who require support; and where people's informal support networks are not seen as key partners.

Monthly monitoring meetings are now well established in Calderdale and these provide the forum for information sharing, co-ordination and decision making in relation to commissioned and contracted services.

The forum brings together representation from the Care Quality Commission, Health Commissioners, Calderdale Adults, Health and Social Care – Gateway to Care, Contracts and Safeguarding Adults Team to maximise information gathering from inspection and regulated activity.

Due to the increased awareness of abuse in commissioned and contracted services, significant work took place in 2011 - 2012 to bolster the capacity and functionality of the team. In January 2012 the new Contracts Manager was recruited and an extensive recruitment drive commenced for additional staff in the Contracts Section to carry out quality and performance activity and procurement. The increased capacity allowed for work to be commenced around setting up new compliance procedures around quality and performance monitoring, and priority assessment ratings for residential establishments. The new compliance procedures are currently being finalised with a view to be completed in 2012 - 2013.

Section 2 // Calderdale Safeguarding Adults Board Multi-Agency Agreement

The multi-agency agreement signifies that the organisations listed as signatories have committed themselves to co-operate with the Local Authority, as lead agency for adult safeguarding, and with each other to carry out safeguarding adults work in Calderdale.

All partners to this agreement will work towards the prevention of adult abuse and ensure they respond in a timely and effective manner to any concerns of abuse.

The agreement provides the context for adult Safeguarding that promotes:

- /// The capacity to implement adult safeguarding work.
- /// The prevention of abuse through the application of best practice and high standards in accordance with current guidance.
- /// Protecting people from abuse by establishing internal safeguarding adults procedures that are in accordance with the multi-agency safeguarding adults procedures.
- /// Promoting awareness by contributing to the public's understanding of adult abuse, how to report concerns and identify what help is available.
- /// To develop assurance mechanisms so that each organisation can demonstrate that it is implementing adult safeguarding work effectively.

The following are some of the outcomes we aim to ensure for people who use services and their carers:

- /// People are able to live in safe and secure settings where the fear of or actual harassment, abuse and neglect is prevented.
- /// All partner agencies are informed and know what to do to prevent abuse and to respond effectively when abuse has occurred.
- /// The general public know what to do if they are concerned about an adult at risk of abuse.
- /// People experience safeguarding in manner that respects their rights to dignity and associated freedoms in accordance with the Human Rights Act, Mental Capacity Act and Deprivation of Liberty Safeguards.
- /// Support is provided by a skilled, informative and confident workforce and built upon a sound value base.
- /// People raise a good response when they raise concerns about abuse, including:
 - A timely and proportionate response.
 - The right to make decisions and to balance risks with rights.
 - Robust risk management plans which values their individual circumstances.
 - The opportunities to have their situation reviewed on a regular basis.

Section 3 Performance

Volume of alerts

The total number of alerts in 2011 - 2012 was 527 which is an increase on the number of alerts that had been received in the previous reporting year.

There has been an incremental increase in the numbers of safeguarding alerts over the last 5 years, with the exception of the data collected between 2010 - 2011. It is believed that this reduction was due to changes in the data collection system and the change to the operational functions of Gateway to Care.

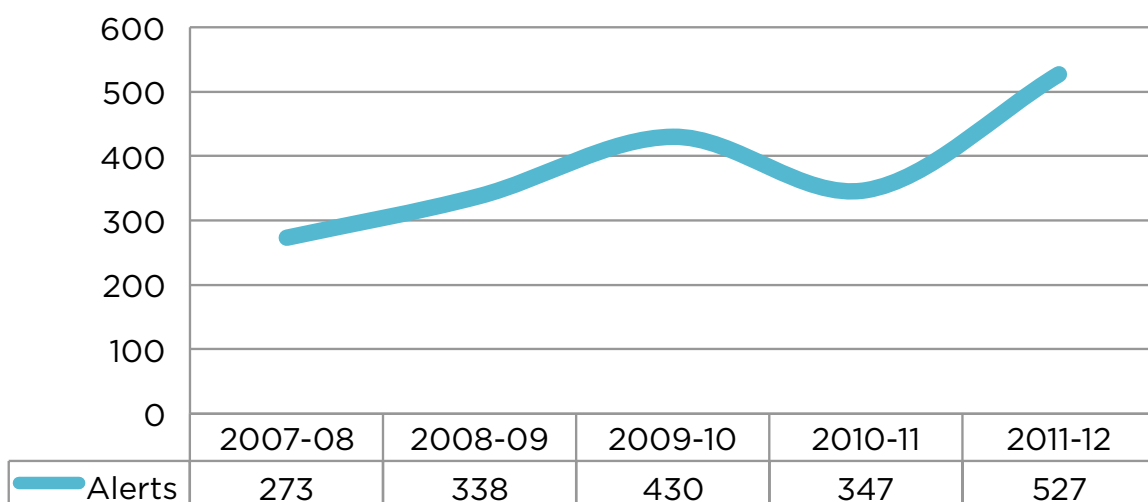
It should be noted that the increase in alerts does not necessarily indicate levels of abuse have increased in Calderdale but could also be the result of awareness of safeguarding and tolerance around custom and practice having evolved. It is anticipated that as our understanding of Adult Safeguarding develops further this will be reflected in the statistical information presented in future annual reports.

However, some caution needs to be applied when analysing such information and all partner agencies need to remain vigilant to the likelihood of or actual abuse that people in receipt of support have experienced.

The abuse uncovered at Winterbourne View highlighted the serious consequences of minimising safeguarding concerns within institutional settings.

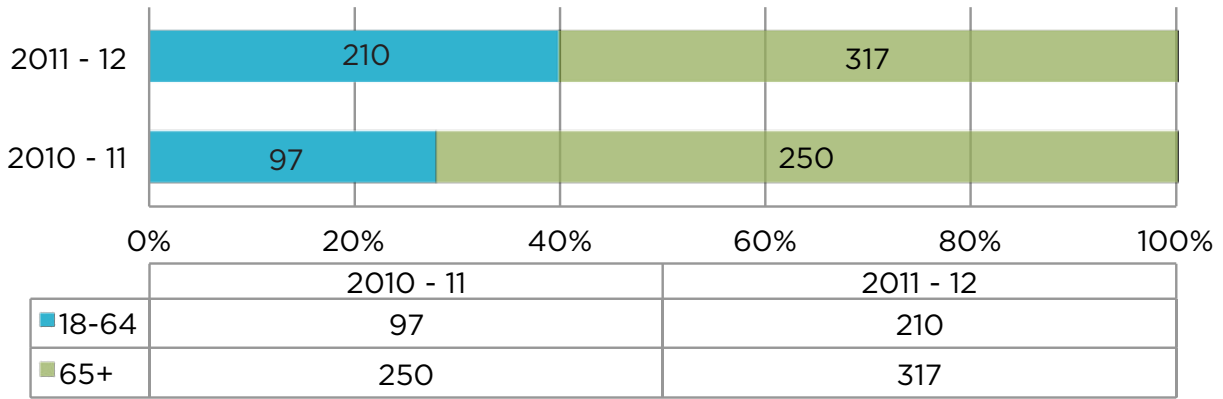
The table below summaries the number of alerts over the last 5 years to demonstrate the increasing numbers of alerts.

Annual Safeguarding Alerts



Age

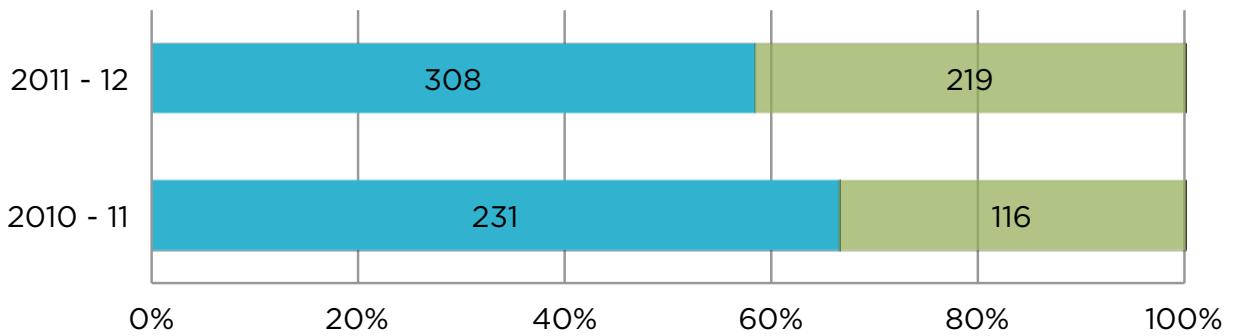
Safeguarding Alerts by Age Band



The majority of adults (317) were over the age of 65 which is consistent with general patterns of activity across health and social care in other areas. There was a greater increase in adults 18 - 64 years when compared to the increase in alerts for adults over the age of 65 years.

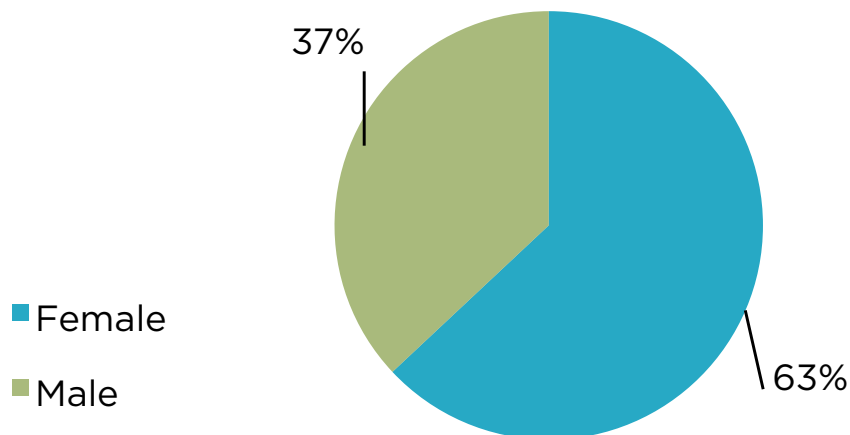
Gender

Safeguarding Alerts by Gender



	2010 - 11	2011 - 12
Female	231	308
Male	116	219

Service Users by Gender

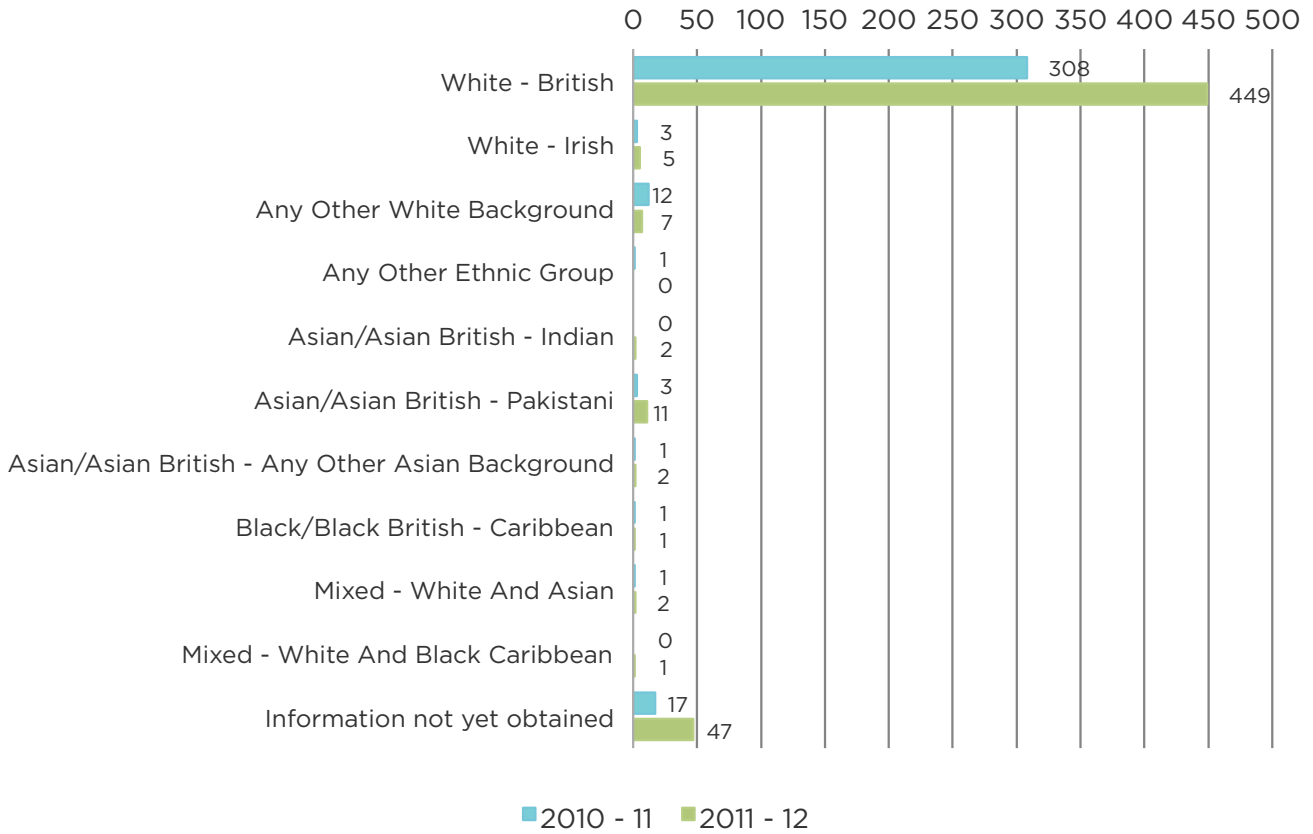


More females (308) were the subject of safeguarding adults alerts when compared to males (219). There was an increase in both females and males alert rates when compared to the previous recording period.

The higher volume of safeguarding alerts for females is not surprising as females account for 63% of all people receiving adult social care support from Calderdale MBC.

Ethnicity

Alerts by Ethnicity

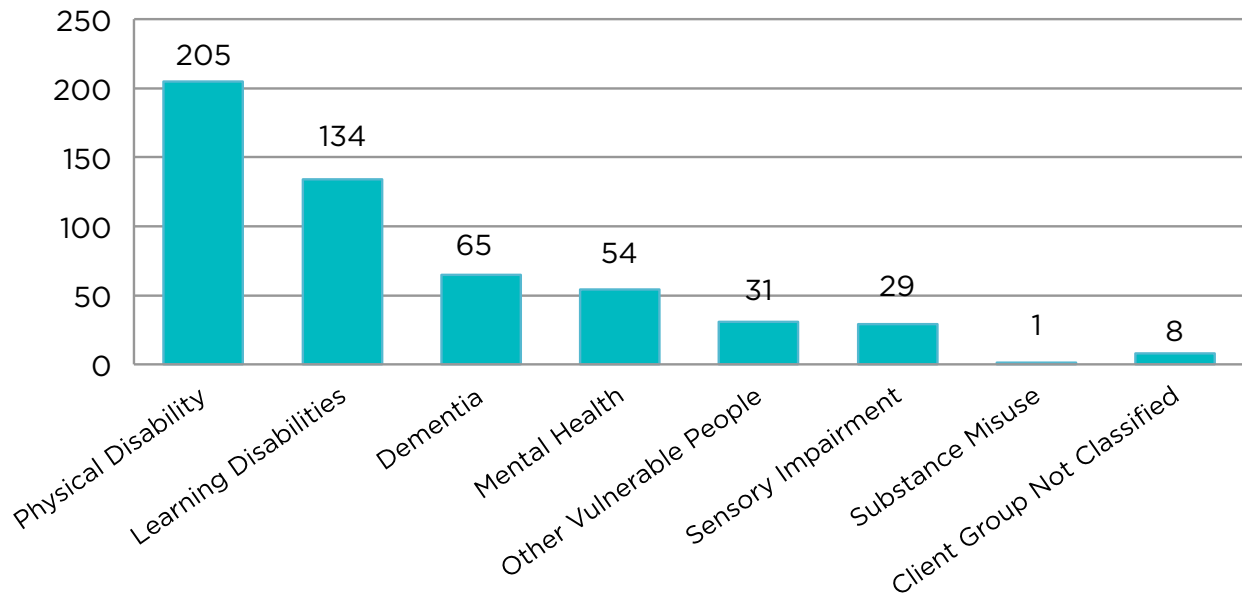


People who identify themselves as being from a white British background continue to account for the majority of safeguarding alerts.

There has been a slight increase in the numbers of alerts in relation to people from black and ethnic minority communities with the biggest increase being experienced by people who identify themselves as being from the Asian / Asian British – Pakistani community.

Client Group

2011 - 2012 Safeguarding Alerts by Client Group

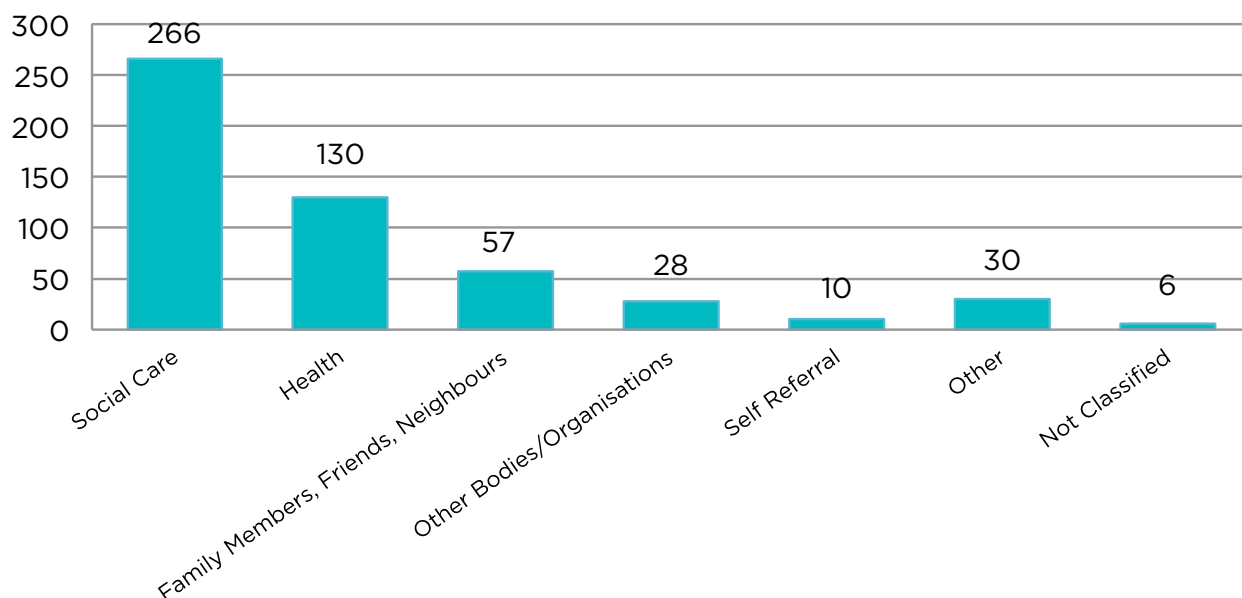


Physical Disability (which includes older people's data) continues to receive the highest number of alerts. Increases in total number of alerts were also received in relation to Learning Disability, Dementia, Sensory Impairment and Mental Health. There was a minimal reduction for other vulnerable people and people without classification, whilst alerts related to Substance Misuse remained the same.

Client Group	2010 - 2011 Alerts	2010 - 2011 Percent	2011 - 2012 Alerts	2011 - 2012 Percent
Physical Disability	170	49.0%	205	38.9%
Learning Disabilities	46	13.3%	134	25.4%
Dementia	41	11.8%	65	12.3%
Mental Health	32	9.2%	54	10.2%
Other Vulnerable People	33	9.5%	31	5.9%
Sensory Impairment	13	3.7%	29	5.5%
Substance Misuse	1	0.3%	1	0.2%
Client Group Not Classified	11	3.2%	8	1.5%
Total	347	97%	527	98%

Alert Source

2011 - 2012 Safeguarding Alerts by Alert Source



The data in this area reflects the trends within other Local Authorities as Social Care and Health accounted for the majority of adult safeguarding alerts. There was a slight reduction in self referrals which only accounted for 10 out of 527 referrals (1.9% of the total number of alerts).

Whilst this position is in keeping with other National trends, consideration will be given to the potential need for targeted resources to raise the profile with people who need support, families, friends and neighbours.

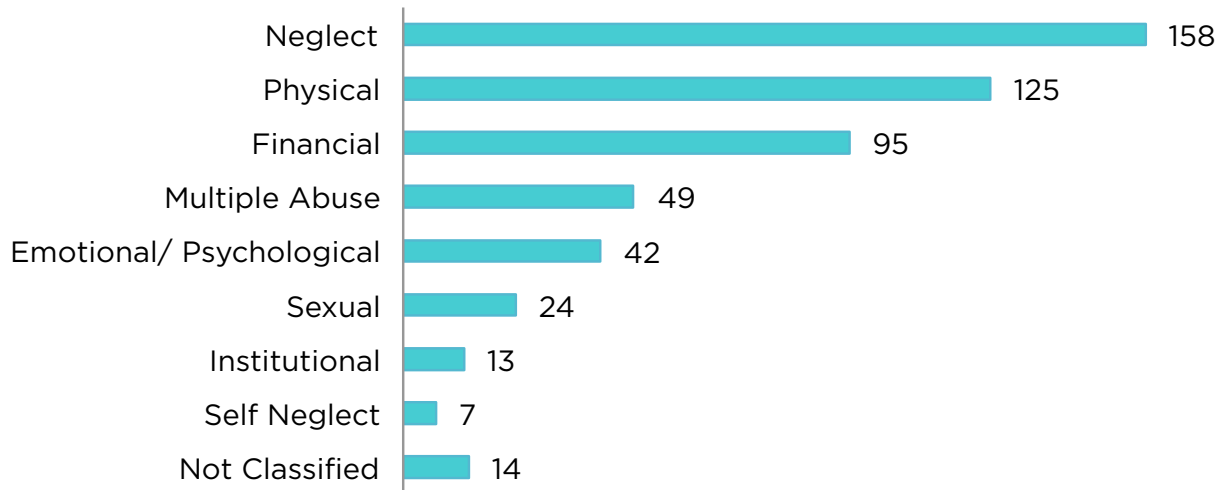
It will also be imperative for social workers and other practitioners to raise the profile of adult safeguarding through all contacts, assessment and planning activity.

Alert Source	2010 - 2011 Alerts	2010 - 2011 Percent	2011 - 2012 Alerts	2011 - 2012 Percent
Social Care	179	51.6%	266	50.5%
Health	61	17.6%	130	24.7%
Family Members, Friends, Neighbours	51	14.7%	57	10.8%
Other Bodies/Organisations	13	3.7%	28	5.3%
Self Referral	15	4.3%	10	1.9%
Other	24	6.9%	30	5.7%
Not Classified	4	1.2%	6	1.1%
Total	347	100%	527	100%

Categories of abuse

Neglect continues to be the main category of abuse alerted to the Department which is followed by physical abuse and financial abuse. It is of concern that there was a slight increase in the number of unclassified abuse types and the Safeguarding Adults Manager will work with Gateway to Care to interrogate this data.

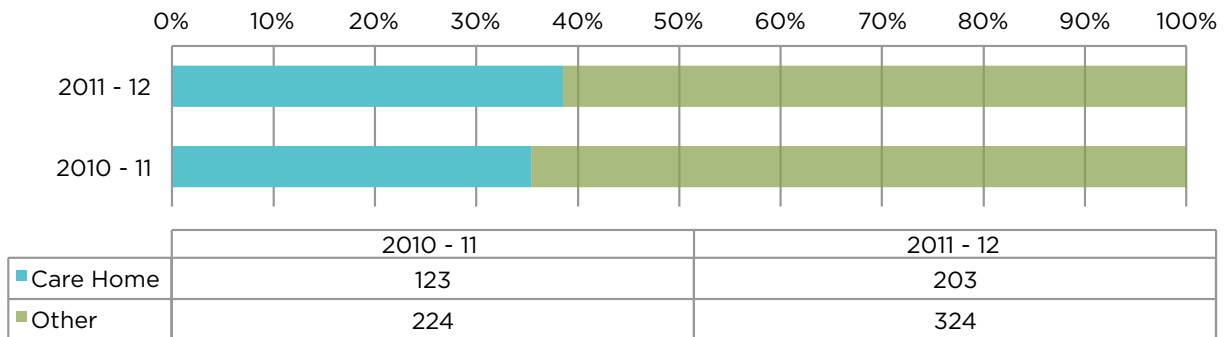
2011 - 2012 Safeguarding Alerts by Abuse Type



Abuse Type	2010 - 2011 Alerts	2010 - 2011 Percent	2011 - 2012 Alerts	2011 - 2012 Percent
Neglect	67	19.3%	158	30.0%
Physical	92	26.5%	125	23.7%
Financial	70	20.2%	95	18.0%
Multiple Abuse	42	12.1%	49	9.3%
Emotional/ Psychological	29	8.4%	42	8.0%
Sexual	20	5.8%	24	4.6%
Institutional	6	1.7%	13	2.5%
Self Neglect	9	2.6%	7	1.3%
Discrimination	1	0.3%	0	0.0%
Not Classified	11	3.2%	14	2.7%
Total	347	100%	527	100%

Location of abuse

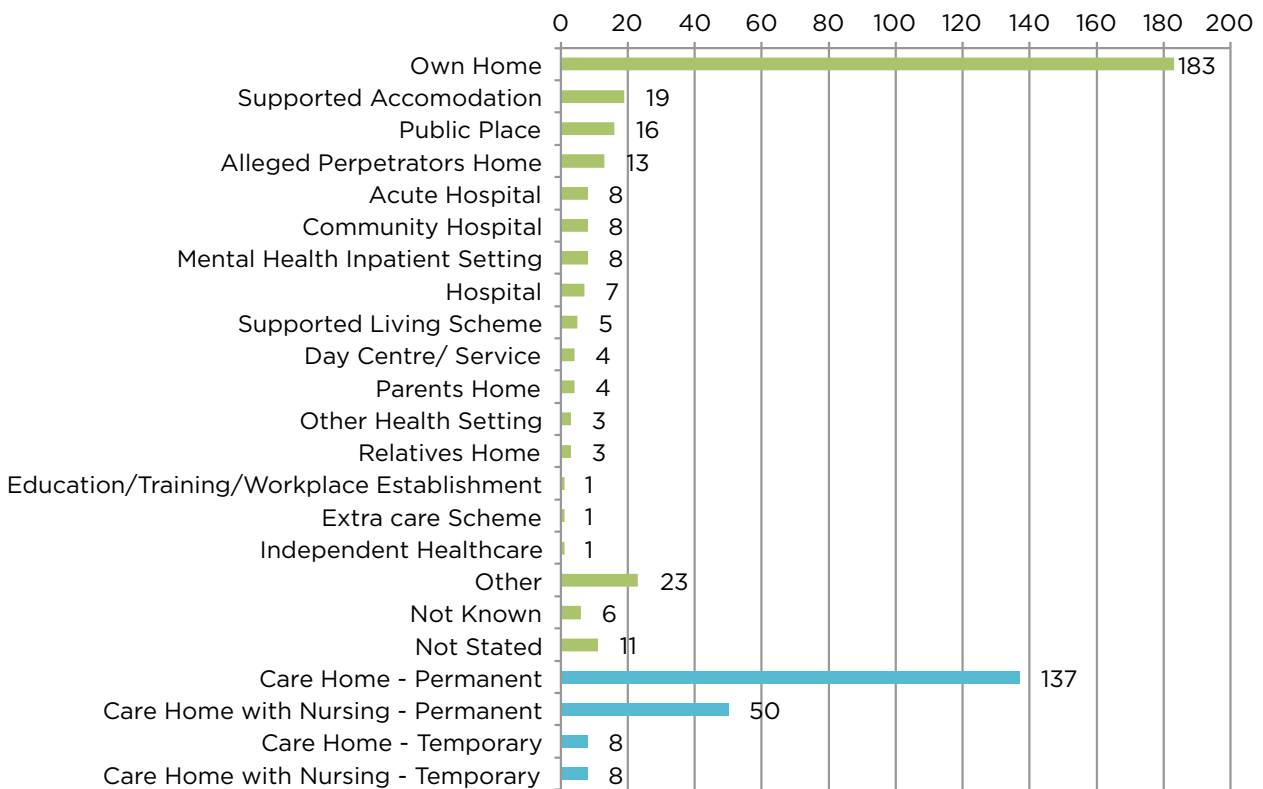
Alerts by Location Type



When considering the location of safeguarding alerts, locations other than care homes continue to provide the highest number. However, when the number of alerts received in a person's own home 187, is compared to those received in all care home establishments 203 there is a greater number of alerts received within care homes.

This is further evidenced through the number of alerts which occur in other collective care settings such as supported accommodation. From the information below it is evident that collective care settings continue to provide the highest number of safeguarding alerts.

2011 - 2012 Alerts by Location Type



Outcomes of Alerts

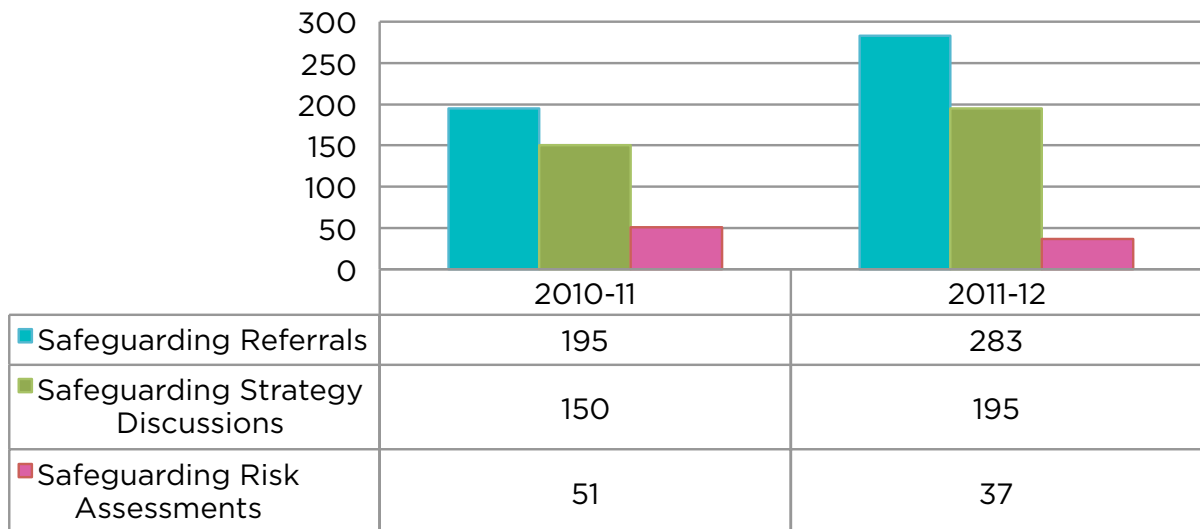
Of the 527 alerts recorded during this reporting period 283 were accepted as referrals and of these 195 had a strategy discussion with 37 having a recorded safeguarding risk assessment completed.

The main area of note is the reduction in the number of safeguarding risk assessments (37) which has reduced from 51 in the previous reporting period.

This issue has been discussed with relevant managers across the different operational teams to develop a clearer understanding of the factors that are contributing to this picture. Whilst much has been done to improve the accuracy of information in Calderdale the main issue remains ensuring that staff fully utilise the safeguarding IT system. There is also national recognition that changes need to be made to the data collected to make it more useful and more focused on the outcomes achieved for people who are the subject of safeguarding interventions.

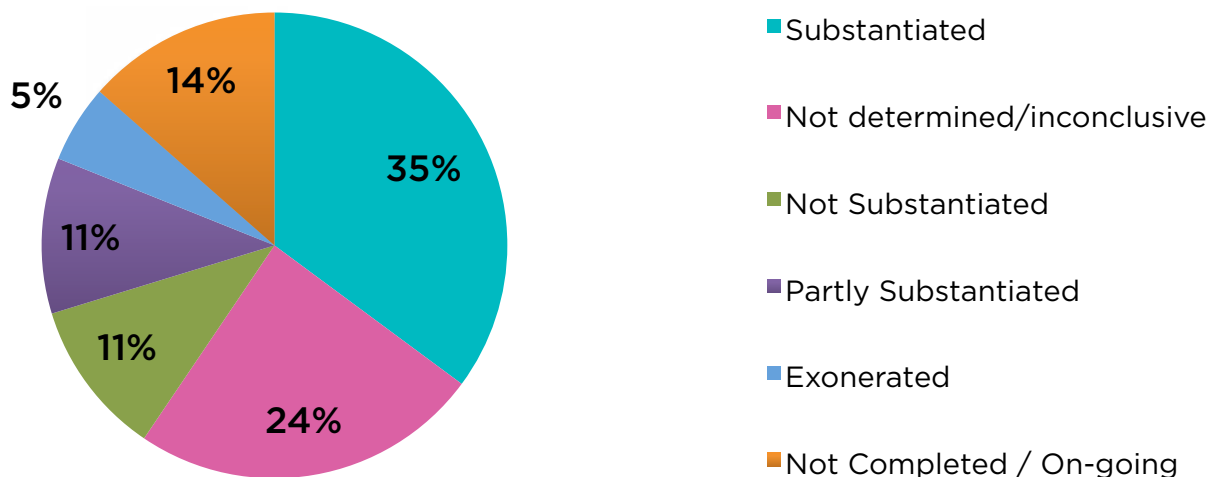
The Safeguarding Adults Manager will need to address this issue as a priority in 2012 / 2013 to ensure we have a reporting system that is capable of capturing more detailed outcomes at different stages of the Adult Safeguarding process. This will allow for more effective interrogation of the Adult Safeguarding process. The data below is based on only 37 cases, which means that it is difficult to draw firm conclusions about what it is telling us.

Safeguarding Referrals, Risk Assessments and Strategy Meetings



Conclusions of Risk Assessments/Investigations

2011 - 2012 Risk Assessment Conclusions



When comparing the data for the last two reporting years (excluding work that is ongoing / not completed) it is evident that the majority of safeguarding investigations have an outcome of substantiated or are not determined / inconclusive. There has been a slight increase in the number of exonerations and a reduction in the work that was not completed during the recording period.

Conclusion	2010 - 2011 Number	2010 - 2011 Percent	2011 - 2012 Number	2011 - 2012 Percent
Substantiated	20	39.2%	13	35.1%
Not determined/inconclusive	6	11.8%	9	24.3%
Not Substantiated	5	9.8%	4	10.8%
Partly Substantiated	5	9.8%	4	10.8%
Exonerated	1	2.0%	2	5.4%
Not Completed / On-going	14	27.5%	5	13.5%
Total	51	100%	37	100%

Vulnerable Adult Outcomes

This data was not collected in the previous reporting period but it is the intention to report on the outcomes for adults who have been the subject of safeguarding adult procedures. Whilst the way in which we collect this information might change the data is essential to collect as this will inform the Council's local account for adult safeguarding and will help demonstrate whether people are safer as a result of the safeguarding processes.

Outcome	No.
Increased Monitoring	24
Moved to Increase/Different Care	9
Community Care Assessment and Services	7
Management of Access to Finances	2
Guardianship/Use of Mental Health Act	2
Application to Court of Protection	1
Referral to Advocacy Scheme	1
Restriction/Management of Access to Alleged Perpetrator	1
Other	5
No Further Action	4

Alleged Perpetrator Outcomes

This data was not collected in the previous reporting period but it is the intention to report on this in the future. Whilst the way in which we collect this information might change the data is essential to collect as this will inform the Council's local account for adult safeguarding especially where the alleged perpetrator is also a vulnerable adult.

Outcome	No.
Continued Monitoring	12
Police Action	10
Disciplinary Action	7
Management of Access to Vulnerable Adult	4
Action by Contract Compliance	4
Exonerated	3
Action by Care Quality Commission	2
Counselling/Training/Treatment	2
Community Care Assessment	1
No Further Action	8

Section 4 // Partner Agencies

Calderdale Adults, Health and Social Care (AHSC)

Adult Safeguarding has continued to be a priority for AHSC and, together with partner organisations, this period has demonstrated our commitment and improved intelligence around this complex area of social care practice.

AHSC will continue to work with all internal and external partners to ensure that the Multi-Agency Policies and procedures, training and support functions remain fit for purpose and responsive to local and national developments.

This will ensure Calderdale continues to provide a workforce that is skilled, knowledgeable and confident to deal with the most complex situations and will help ensure that:

- Adults know how to keep themselves safe and how to make a safeguarding referral.

- All information and decision-making is effectively recorded at each stage of the safeguarding process.
- The performance and quality activity within the Contracts Team is able to deliver a robust quality and compliance process that has clear lines of accountability for safeguarding.
- Advocacy is provided when needed to ensure people are empowered to be involved.
- All relevant partner agencies are appropriately briefed on the outcome of adult safeguarding investigations.

Calderdale MBC provided the following adult safeguarding and related training courses during 2011 – 2012. The information held would allow the Safeguarding Adults Board and associated sub groups to oversee the effectiveness of the training strategy and to direct resources to any partners that are not effectively represented.

Calderdale Metropolitan Borough Council employees

Course Title	Total
Assessing Mental Capacity and making Best interest Decisions	5
Mental Capacity Act - for Carers	1
Mental Capacity Act Awareness	50
Multi Agency Risk Assessment Conferencing Briefings (MARAC)	3
Safeguarding Adults - Managers of Provider services	12
Safeguarding Adults - Basic Awareness	82
Safeguarding Adults - Train the Trainer	11
Safeguarding Vulnerable Adults - Coordinators and Fieldwork Team Managers	27
Grand Total	191

External workforce (i.e. all those employed in the Voluntary, Private and independent sector, NHS, Carers etc)

Course Title	Total
Assessing Mental Capacity and making Best interest Decisions	14
Mental Capacity Act - for Carers	16
Mental Capacity Act Awareness	66
Multi Agency Risk Assessment Conferencing Briefings (MARAC)	2
Safeguarding Adults - Managers of Provider services	12
Safeguarding Adults - Basic Awareness	207
Safeguarding Adults - Train the Trainer	14
Safeguarding Training for Assessors and Managers	13
Grand Total	344

Safeguarding Adults Board Sub Groups

Update for SAB Annual Report 2012 on work of Prevent Sub Group

The prevent sub group purpose is to identify opportunities to 'prevent harm' and promote Safeguarding Adults within Calderdale. The sub group has cross over with the Protect sub group but has refined existing partnership arrangements to incorporate the 'Adult agenda' within MARAC and has introduced the Vulnerability Panel to integrate Anti Social Behaviour and Adult Safeguarding.

The police continue to effectively manage the Multi-Agency Risk Assessment Committee (MARAC) processes specifically linked to safeguarding vulnerable adults subject to domestic abuse. National Indicator 32 is used to update CAADA (Co-ordinated Action against Domestic Abuse) and the Home Office on a quarterly basis regarding progress in Calderdale and meetings are held on the 3rd Wednesday of

the month. Calderdale district currently sits above the national average in Calderdale for our non police referrals. Training is prepared and delivered to all partners by the police.

The Vulnerability Anti Social Behaviour (ASB) Panel is led by West Yorkshire the Police and involves other key Community Safety and Safeguarding partners and provides a forum to integrate ASB & Adult Safeguarding. This panel now meets on a regular basis and looks to promote effective proactive and preventative work in adult safeguarding.

Steps for 2012 - 2013

Emerging from the recent Serious Case Review will be a series of recommendations where opportunities will exist to prevent harm to Vulnerable Adults resident in care settings. The prevent sub group will be fully integrated in developments in future.

Update for SAB Annual Report 2012 on work of Protect Sub Group

The protect sub group's remit is to review and update policies, procedures and guidance in order to enhance the effectiveness of safeguarding in Calderdale. In addition, the sub group can identify learning from case audits and individual cases where there are identified wider practice issues.

We have continued to make improvements to the multi-agency policy and procedures that were launched in May 2011. Some of these are quite minor changes, but a more significant change has been to incorporate a policy on whole service safeguarding situations that require a different approach to those affecting individuals. Plans are being implemented for all incidents in care homes to be investigated by the Safeguarding Adults Team.

A full audit of safeguarding cases coming through the Council took place in summer/autumn 2011. While this found that practice was sound, it identified issues with IT compliance that meant we were not getting adequate data from the Client Information System. This continues to be closely monitored. Audits are being embedded into the work of the Safeguarding Adults Team, so that it can quality assure the safeguarding process.

A new standing multi-agency meeting was set up during the year to examine situations where vulnerable adults are victims in their communities, for example, due to anti-social behaviour. This is ensuring that all agencies share information and work together to find solutions that better safeguard vulnerable victims.

It has been agreed to develop West Yorkshire-wide safeguarding adults policy and procedures that will help to ensure consistency across local authority

boundaries, particularly for partner organisations that have a larger footprint than one local authority. This work has quite a long timescale, as it not due to be implemented until April 2013 and is using the broad approach adopted in the well regarded London-wide procedures.

Update for SAB Annual Report 2012 on work of Perform Sub Group

The performance group is a sub group of the Calderdale Safeguarding Adults Board (CSAB) and exists to:

- /// Quality assure the safeguarding response across the partnership, through an assurance framework for safeguarding adults
- /// Monitoring numbers, outcomes and trends, and ensuring action is taken to address identified concerns.

Membership from statutory partners: NHS Calderdale (Calderdale CCG), Calderdale and Huddersfield Foundation Trust, South West Yorkshire Partnership Foundation Trust, West Yorkshire Police and Adults, Health and Social Care, Calderdale Council. The group has led to:

- /// The development of a quality assurance framework for the Safeguarding Adults Board, including performance management framework, Scorecard and risk register
- /// Making proposals to the SAB on a range of indicators for inclusion in the Scorecard
- /// Assisting agencies in developing performance indicators and metrics needed to populate both the scorecard and the metrics
- /// Worked with AHSC to test the feasibility of using Calderdale council performance system to support the collection and analysis of this information.

Next steps for 2012 - 2013:

- /// Conclude development work on risk register
- /// Support partners in the section 11 audit work (the process used in children's safeguarding) and develop the process for confirmation and challenge.

NHS Calderdale (NHSC)

The past twelve months has seen significant changes as the NHS reforms are implemented and the Clinical Commissioning Group (CCG) commenced operating in shadow form working in partnership with NHS Calderdale.

There is a named clinician (GP) on the Clinical Commissioning Executive who leads on safeguarding and is supported in their role by the Assistant Director of Quality Improvement Safeguarding Adults to ensure safeguarding adults who may be at risk is integral to all services that are commissioned and provided.

Adults safeguarding is a key priority for the CCG and they are strongly committed to actively contributing to the positive partnership working within Calderdale. Evidence to support this is demonstrated by the organisation's contribution to a range of strategic and operational safeguarding activities working across the partnership. The following are examples:

- /// The work to support the quality improvement agenda within nursing homes through the development and introduction of the Quality Premium Scheme that has a direct interface with the Multiagency/Partnership development group for nursing homes.
- /// Its commitment and contribution to the Sub Groups of the Safeguarding Adults Board. The Perform Sub Group,

which is chaired by the PCT's Deputy of Quality and Professional , whilst the Training Sub group is Co-chaired by the Assistant Director of Quality Improvement Safeguarding Adults.

- /// The work undertaken to reduce pressure ulcers. Pressure ulcers are recognised as a potential indicator of neglect. The systematic approach to data collection on pressure ulcers across all care settings and community has informed the work of the Whole System Pressure Area Management Group, which is actively working to reduce the prevalence. The success of the group was recognised when it won the 2011 NHS Calderdale Celebrating Success Award for partnership working.
- /// On-going financial contributions are made to the Calderdale Safeguarding Adults partnership, to support the funding of the Safeguarding Adults Manager and an administrator whose role is to administer the Deprivation of Liberty Safeguarding process and provide support for the Safeguarding Adults Team and Safeguarding Adults Board and Independent Chair.

There has been a partnership approach between the CCG Leads for safeguarding, members of the Adults, Health and Social Care Safeguarding Adults Team and actors Ian Baxter and Narelle Summers to deliver innovative scenario based multi-agency safeguarding training to independent contractors including Optometrists, Pharmacists, Dentists, GPs and their practice staff.

Numbers of staff trained or booked on training session

To date there have been a total of 9 training sessions held and a further 7 scheduled to take place.

Staff Group	Number of staff completed training
Optometry	29
Dental Practice	156
Pharmacy	13
GP Practice	68 (142 places have been booked so far for further training sessions scheduled)

Feedback from completed evaluation sheets has been very positive and suggestions for how the sessions can be improved have been incorporated into the future training sessions. Also GP practices also have access to the Qwango e-learning packages that adult and children's safeguarding awareness, Mental Capacity Act and Deprivation of Liberty Safeguards (DoLS).

South West Yorkshire Partnership (NHS foundation Trust)

In 2011 South West Yorkshire Foundation Trust acquired services from NHS Barnsley and it is now an organisation which spans 4 Local Authorities and has 3,500 staff. Of these, 319 staff are based in Calderdale. SWYFT has a responsibility to ensure achievement of the CQC Essential Standards of Quality and Safety and provides assurance through a governance infrastructure within SWYFT which reports to the Trust Board and through participation in Calderdale Safeguarding Adults Board and Sub groups.

Our commitment to the people who use our services is that we will provide high quality person-centred services which proactively safeguard individuals and provide a well informed, confident, open workforce who know when and how to report safeguarding to the local authority. We are now a Safeguarding Team including safeguarding children and our commitment is to the "think family" agenda.

We have achieved that this year through:

- /// **Training:** Mandatory Training Attendance has increased from 64% to 87% in Calderdale
- /// **Audit:** Clinical Audit has focused on measuring the effectiveness of training in practice and across the service it demonstrated that over 85% of individuals had seen the applicability of training to practice and in there were examples of practice change mostly with regard to reporting practice.
- /// **Patient Safety Reporting:** A new system for incident reporting within the organisation (datix) has incorporated Safeguarding referrals and incidents affording the team more opportunity for scrutiny and ability to support staff to support service users.
- /// **CQC support visits:** Teams of Directors, professionals and service user and carer representatives visit clinical areas and scrutinise care on a rolling programme of unannounced visits. The Essential Standards of Quality and Safety are reviewed including person centred care and patient experience, safeguarding.
- /// **Safer Recruitment:** An implementation plan was agreed by the Trust in relation to the Independent

Safeguarding Authority programme in April Part of this plan was engaging with HR managers and Clinical managers to ensure the Trust worked within the legal framework of the Safeguarding Vulnerable Groups Act.

/// **Policies and Procedure Development:**

The Sexual Relationships Policy was reviewed and signed off by the EMT in May:

- The Domestic Abuse guidance has been reviewed in light of a serious case review that took place in Calderdale and has been developed in to a Trust policy that now includes a risk assessment tool and a multi agency referral process for serious cases to be taken forward to the Multi Agency Risk Assessment Conference (MARAC) meetings.
- The Missing Persons policy has been reviewed and signed off by the Trust board in December. The policy includes lessons learnt from previous incidents and partnership working with the Police ensures a safe return for any individuals who go missing.
- The Safeguarding Adults Trust protocol was reviewed to incorporate learning from previous cases; the protocol was signed off by the EMT in October. The main changes included the statement that staff must not financially benefit from contact with service users other than their salaries.

As a result of one person being referred to ISA because of fraudulently applying for the post of staff nurse an audit took place of 49 further job applications. The audit illustrated robust systems are being applied

by HR and Managers in the safer recruitment process in order to protect service users from abuse.

/// **Learning Lessons:** A work shop for staff working in learning disabilities teams across the Trust took place in May to enable staff to learn the lessons from the Worcester Safeguarding Adults Committee.

/// **Partner Agencies:** Training has been delivered at a workshop attended by sixty police constables. The training was delivered by the Trust following a request from the Wakefield Police Safeguarding Unit. It was agreed that officers needed to understand issues in relation to safeguarding, vulnerability, mental capacity, access to mental health services, and the MARAC referral process.

Calderdale and Huddersfield Foundation Trust

As part of the Transforming Community Service agenda, community health services in Calderdale have now transferred to Calderdale and Huddersfield NHS Foundation Trust (CHFT). Subsequently, in 2011, the new Safeguarding Children and Adults Team was established, now sitting corporately within the organisation. In November 2011, CHFT appointed an Associate Director for Safeguarding to lead the team and to provide a strategic steer within the organisation and in Jan 2012 a Named Nurse for safeguarding adults was appointed to support the workforce at an operational level.

A key priority over the past year has been to review safeguarding training in order to provide assurances about statutory safeguarding responsibilities to both commissioners and to Local

Safeguarding Boards. Initial work over the last year has included:

- /// Reviewing Systems and processes for recording safeguarding training in order to ensure a robust system is in place.
- /// Target audiences have been identified clarifying levels of training for different roles within the organisation.
- /// Internal safeguarding training has been reviewed and developed further and continues to be delivered across the workforce.
- /// Large percentages of the workforce who were trained in 2009 are approaching the need to update, as current training runs on a 3 yearly cycle. This continues to be monitored.
- /// Releasing staff to undertake all mandatory and essential training, including safeguarding, continues to need to balance against maintaining clinical services within the hospital and community but this continues to be a priority.

All new staff continue to access the Trust induction programme and all staff are required to undertake the level 1 training. All training continues to be supported by written briefings..

A new in house training programme has been developed to deliver the key safeguarding messages at Level 2 (adults), with 6 sessions being delivered every month. Bespoke safeguarding adult training has been commissioned and will be delivered bi-monthly, targeting those who are likely to be involved in adult safeguarding strategy meetings.

Training is delivered by face to face taught sessions and e learning is also available. Evening sessions are also currently being trialled.

Other significant work has included:

- /// Internal work with CHFT's risk department in relation to how safeguarding concerns / incidents / complaints are categorised on DATIX.
- /// Safeguarding supervision for staff has been developed.
- /// The Named Nurse for Adult Safeguarding now accesses professional forums to provide support, briefings and updates and to ensure safeguarding remains a priority.
- /// Joint meetings with key managers within CHFT and Adults Social Care in both Calderdale and Kirklees have been established.
- /// CHFT has contributed to the work of the Safeguarding Board and all its workstreams/sub groups.
- /// All safeguarding policies and procedures have been reviewed and update.
- /// Lines of accountability and organisational structures have been reviewed and updated.
- /// All safeguarding meetings have been reviewed and terms of reference updated.
- /// Safeguarding links (with clear expectations of the role) across the workforce have been identified with two workshops delivered.
- /// Posters and leaflets have been updated.

West Yorkshire Police – Calderdale

Safeguarding adults from abuse remains a key priority for West Yorkshire Police and the dedicated Safeguarding unit continues to oversee the support to vulnerable adults in Calderdale.

The multi-agency policies and procedures are embedded within the division but remain under constant review as a result of local and national influences. This helps foster effective multi-agency working relationships with partner agencies which will be built upon by the outcome of Winterbourne View and the current Serious Case Review in Calderdale.

The Vulnerability Anti Social Behaviour (ASB) Panel is led by West Yorkshire the Police and involves other key Community Safety and Safeguarding partners and provides a forum to integrate ASB & Adult Safeguarding. This panel now meets on a regular basis and looks to promote effective proactive and preventative work in adult safeguarding.

The police continue to effectively manage the Multi-Agency Risk Assessment Committee (MARAC) processes specifically linked to safeguarding vulnerable adults subject to domestic abuse. National Indicator 32 is used to update CAADA (Co-ordinated Action against Domestic Abuse) and the Home Office on a quarterly basis regarding progress in Calderdale and meetings are held on the 3rd Wednesday of the month. We are above the national average in Calderdale for our non-police referrals. Training is prepared and delivered to all partners by the police.

Calderdale AHSC and Calderdale police have continued to work together to provide joint training for front line staff and managers who are involved in the safeguarding adults process. This is seen as a valuable example of joint working between partner agencies.

West Yorkshire Probation Trust

In Calderdale we have ensured that more staff have attended the MARAC training to ensure support for victims of domestic violence. Last year we were responsible for managing the future risk of harm of the offender who found guilty and imprisoned in 2011/12. Calderdale SAB commissioned a Case Review in 2010 / 2011 in response to this specific case. The probation team also plays a key role in the supervision offenders convicted of domestic violence offences and manage their risk in the community as a means of safeguarding adults at risk

Housing

From a housing perspective generally, awareness of safeguarding is now much higher on every organisation's agenda and Calderdale's Housing Association Liaison Meetings (CHALMs) continues to provide the opportunity for discussion and sharing learning for social housing providers working in Calderdale. Housing support providers commissioned by the Local Authority are all required to comply with national quality standards on safeguarding (to Level B minimum) as set out in the Quality Assessment Framework. All current providers operating in Calderdale are meeting or exceeding these standards.

Induction training is provided for front line staff about safeguarding vulnerable adults so that alerts are made if staff become concerned about potential abuse. Areas of service include the temporary accommodation and support service at Ryburn House and Doorways where many of the most vulnerable adults living in the community are first seen.

People living in private sector housing may not be seen by social or health services and it becomes even more important that any safeguarding issues are picked up

by other visiting officers. Staff working in, for example, the handy person service deliver small adaptations and repairs to around 1500 households each year to older people and people with disabilities in the community. These types of service can be an important source of information about safeguarding issues.

Supporting People service are commissioned by Adults, Health and Social Care, providers offer support to vulnerable groups of individuals living in the community. Housing support is provided for people with learning disabilities, mental health issues, older people in their own homes or specialist housing, homeless or vulnerably housed people, ex-offenders, people with addiction issues. All services commissioned must satisfy Adults, Health and Social Care that they have adequate policies, procedures and practices to safeguard adults.

From a Pennine Housing perspective specifically, the focus over the last twelve months has been upon the embedding of safeguarding into antisocial behaviour (ASB) and hate crime working practices. Pennine Housing has played a significant part in establishing the Vulnerability ASB Panel, led by West Yorkshire Police and involves other key community safety and safeguarding partners. This came about following a successful workshop event in December, arranged by Pennine and the Police, to raise awareness of the need to integrate ASB & safeguarding. One of the key outcomes of the workshop was to establish the Vulnerability Panel as a mechanism for agencies working in the field of community safety to better prevent and protect vulnerable adults suffering from harassment and discrimination. Previously, multi-agency ASB work has focused on enforcement. The Panel has been meeting since January 2012 and is ensuring a much more co-ordinated

approach and focus on victims. Collective responsibility and shared expertise of panel members is also providing more robust and balanced decision making and gives valued support for individual ASB Officers who no longer feel they are working in isolation to support vulnerable people.

We have also strengthened procedures at the “front end” of ASB via identification of vulnerability and risk assessment into initial ASB reporting procedures. These assessments are being centrally coordinated and monitored by Company’s Interventions team to ensure consistent application of knowledge.

Additionally, all Pennine Housing Officers, Housing Services Managers, Support Officers and Interventions Team attended training delivered by Safety Net to improve understanding of hate/ mate crime faced by people with learning disabilities. This included how housing staff could better access support for the victims and their families. Feedback on the training was very positive.

Other areas of progress include:

- /// Cascading our learning and experiences of mainstreaming safeguarding of vulnerable adults via the Chartered Institute of Housing’s Policy into Practice regional seminar in Nov 2011.
- /// Improving the understanding of safeguarding with third sector service providers and volunteers working in supported housing via revised Cause for Concern procedure.
- /// Taking the opportunity to more effectively embed safeguarding into general corporate policies as and when these reviewed. Policy revisions over the last year include Whistleblowing, CRB checks and ICT.

- /// Inclusion of safeguarding and domestic abuse as part of the “Supporting Vulnerable People” module of the Tenants Academy training programme, launched in the summer.
- /// Ongoing awareness-raising with all staff via inclusion of articles in corporate staff briefings e.g. article on MATE crime during Disability awareness week, reinforcing whistle-blowing responsibilities following the abuse uncovered at Winterbourne View.
- /// Involvement of the Head of Supported Housing Services in discussions led by the Department of Health on the need to strengthen linkages between health/social care and housing on a national level.

Earlier this year Voluntary Action Calderdale facilitated its first safeguarding conference for VCS, this was primarily aimed at children but the big message that came out was overwhelming that groups wanted to see more joint working around children and vulnerable adults.

During 2012 - 2013, we will continue to embed the multi-agency procedures throughout the sector by putting on regular training sessions. We hope to continue to provide a free CRB service. This is extremely important to voluntary groups, especially with funding being an issue. With the current ongoing changes around CRBs and the merging of the service to become the new Disclosure and Barring Service, awareness needs raising and information sessions will be rolled from January 2013.

Voluntary and Community Sector

From a VCS perspective, awareness of safeguarding is now much higher on every organisation’s agenda. The sector has engaged as a whole and takes its responsibilities seriously.

In order to support the VCS as a whole, Voluntary Action Calderdale have a dedicated safeguarding officer that groups can contact directly for safeguarding advice, this includes CRBs, access to model policies and procedures and access to training, as well as this being a feedback route directly to the SAB and the SAB training sub group.

In May 2011, our safeguarding officer attended the ‘train the trainer’ event that launched the new multi-agency policy and procedures and has delivered the training to various organisations. The feedback has been extremely positive.

Section 5 // Priorities for 2012-2013

The SAB has set itself the following high level priorities during the current year which are supported by a detailed work plan:

To safeguard vulnerable adults through further development of the partnership

This includes closer working with the Calderdale Safeguarding Children Board, the Clinical Commissioning Group and with the new Calderdale Health Watch when it is formed.

To ensure continuous improvement in the efficiency and effectiveness of the Safeguarding Adults Board and sub-group infrastructure

This work will recognise the impact of spending restrictions on partner agencies and move to a 'task and finish' approach to work rather than relying too much on standing groups.

To ensure effective communication and engagement with staff and the public in respect of the work of the Board and the wider safeguarding agenda

To quality assure the work of the Board and partner agencies in safeguarding and promoting the welfare of vulnerable adults and challenge any areas of practice needing improvement

This work will include improving the quality and availability of data and information; improving audit activity; taking actions based on evidence; holding another board self-assessment exercise using national benchmarking standards.

To raise further the profile of safeguarding policy and procedures and to ensure that effective multi-agency and single agency training in relation to how safeguarding is delivered, with a measurement of outcomes on practice being embedded across agencies.

Section 6 Mental Capacity and Deprivation of Liberty Safeguards

During 2011 - 2012 Calderdale MBC received 47 DoLS requests (data not recorded in the Annual Report for 2010-2011) and of this figure only 25 were authorised by Calderdale.

	2009 - 2010	2010 - 2011	2011 - 2012
Local Authority	14	18	23
Health	3	2	2
Total	17	20	25

The Mental Capacity Act 2005 contributes to safeguarding by providing a framework for decision making in relation to mental capacity. The Deprivation of Liberty Safeguards (DoLS) amendment of the Mental Capacity 2005 (MCA) came into force on 1st April 2009. The Deprivation of Liberty Safeguards (DoLS) within the Act strengthens the protection for people who lack capacity to decide about their care or treatment and who are deprived of their liberty to protect them from harm.

Implementation of the Mental Capacity Act and Deprivation of Liberty Safeguards has continued throughout 2011 - 2012. We have continued to provide training courses to the Council staff and partner agencies which have been well attended, and this has resulted in better decisions for people who lack capacity and a greater awareness.

This year we have maintained the number of Best Interest Assessors (BIA) at seven, one having left and another having qualified in September. The demanding nature of Assessment work has been highlighted and plans are in place to increase the number of BIAs in the next financial year.

The Safeguarding Adults Team facilitates a bi-monthly BIA Forum, which provides an opportunity for BIAs to review casework and develop good practice, to discuss new case law and any other relevant information sharing and group supervision. The forum

provides support to BIAs and recognises the independence of the assessors in developing their skills and knowledge and the requirements for a DoLS assessment becomes clearly understood. It is intended that Mental Health Assessors may be invited to some of these meetings to discuss local issues and practice.

We continue to maintain strong links with colleagues across the Yorkshire and Humber region through membership of the Yorkshire and Humber Best Interest Assessor and Mental Health Assessor Regional Network (YHBIA/MHA). This regional link is crucial in enabling BIAs and MHAs to be consistent in their practice when discharging our DoLS responsibilities. It supports our BIAs and MHAs to meet their statutory requirements which include annual training updates are undertaken we encourage staff to attend the Regional Training Conferences held 4 times a year commissioned by the Yorkshire and Humber BIA/MHA Training Forum Group. This ensures that they maintain the level of personal development required to maintain their BIA /MHA status.

The profile of MCA/DoLS has been raised nationally in 2011 - 2012 by the developments in case law and practice. These recent developments in National case law have been raised and discussed at the Yorkshire and Humber BIAs & MHAs Regional Training Conferences.

An example of this is the **London Borough of Hillingdon v Steven Neary and Ors [2011] EWHC 1377 (COP)**. These highlighted failure throughout an entire organisation to understand and apply the MCA. The judge suggests in his summary that public bodies have a responsibility to enable people to have their detention reviewed in a court. One aspect of Hillingdon's failure was not to promptly instruct a section 39D IMCA. In addition, this is the first time a judge has mentioned the role and responsibilities of the supervisory body.

Whilst the above case did not occur within the Borough of Calderdale. This has reinforced the need to introduce regular internal audits and update policy and protocols locally to ensure best practice in Calderdale in the coming financial year.

Appendix 1 Safeguarding Adults National Standards

Standard 1	Each Local Authority has established a Multi-Agency Partnership to lead the Safeguarding Adults work.
Standard 2	Accountability for and ownership of Safeguarding Adults work is recognised by each partner organisation's Executive body.
Standard 3	The Safeguarding Adults policy includes a clear statement on each person's right to live a life free from abuse and neglect and this message is actively promoted to the public by the Health and Well Being Board, the Safeguarding Adults Partnership and its member organisations
Standard 4	Each partner agency has a clear, well published policy of Zero-Tolerance of abuse within the organisation.
Standard 5	The Safeguarding Adults Partnership oversees a Multi-Agency Workforce Development / Training Sub-Group. The Partnership has a Workforce Development / Training Strategy and ensures that is appropriately resourced.
Standard 6	All citizens can access information about how to gain safety from abuse and violence, including information about the local Safeguarding Adults procedures.
Standard 7	There is a local Multi-agency Safeguarding Adults policy and procedures describing a framework for responding to all adults 'who are or may be eligible for community care services' and who may be at risk of neglect.
Standard 8	Each partner agency has a set of internal guidelines, consistent with the local Multi-Agency Safeguarding Adults policy and procedures, which set out the responsibilities of all workers who operate within it.
Standard 9	Multi-Agency Safeguarding Adults procedures detail the following stages: Alert, Referral, Decision, Safeguarding Assessment Strategy, Safeguarding Assessment, Safeguarding plan, Review, Recording and Monitoring.
Standard 10	The Safeguarding procedures are accessible to all adults covered by the policy.
Standard 11	The partnership explicitly includes service users as key partners in all aspects of the work. This includes building service user representation into membership, monitoring, development and implement of its work; training strategy; and planning and implementation of their individual safeguarding assessment and plans.

