

Safeguarding Adults Annual Report 2015/16



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Working with The Safe Durham Partnership *Altogether safer*

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Message from the Chair



Welcome to this my second annual report as Independent Chair of Durham Safeguarding Adults Inter-Agency Partnership Board. As part of my role and remit I continue to bring an impartial view to the work of the Board offering scrutiny and challenge across all partners.

This document, I hope will offer an insight into the progress the Board has made against its priorities and its 3 year strategic plan. It also highlights our key achievements and our challenges ahead within the arena of safeguarding adults. I hope it demonstrates the openness and transparency with which Durham Safeguarding Adults Board operates.

Over the last year we reviewed our three year strategic plan and as a result have shaped the working groups in moving that plan forward. Much of the work over the last year has been as a result of meeting the statutory requirements placed upon the Board as set out within the Care Act 2014, and the subsequent Care & Support Statutory Guidance 2015 and 2016. I would also like to extend our thanks to Claire Bearder, Group Manager, Safeguarding & Access - Nottinghamshire County Council for her contribution and support to our work in 2015-2016 and particularly our development session in March 2016.

Our vision is: ***"We will support adults at risk of harm to prevent abuse happening; when it does occur, we will act swiftly to achieve good outcomes."***

As Chair of the Board, I am passionate that local practice continues to put the adults at the centre of achieving good outcomes, with a desire to seek the views of users and carers to inform our work, and that all partners continue to support the work of the Board and its vision. This in itself brings challenges with many partners of the Board working in an ever-changing environment with additional challenges of organisational restructures and for some increasing resource constraints. As Chair, I recognise the continued commitment of partners to ensure adults are safe from abuse and neglect in our locality. I am confident that Durham SAB will continue to rise to those challenges ahead and in meeting its priorities as set out within its plan by continuing to work together with practice that is both innovative and forward thinking, that places the individual at the heart of all that we undertake. I would also like to welcome our new partners to the Board and its work, and to extend that welcome to the newly appointed Lay Members of the Board, Chris Cunnington-Shore and Jean Meredith who join Susan Harrison in continuing to bring an independent view and challenge to the work of the Board.

Jane Geraghty, Independent Chair

Message from the County Durham Safeguarding Adults Board (SAB)

SAB was placed upon a statutory footing in April 2015 by the implementation of the Care Act 2014. This has strengthened our arrangements and enabled us to evidence our work through statutory annual reporting. SAB maintains links to wider forums such as the Health & Wellbeing Board and the Safe Durham Partnership, whose work helps to inform annual reports. SAB is supportive of the County Durham Sustainable Community Strategy for an **Altogether Better Durham** by 2030, and of its commitment to listening to and working with local people to meet their needs and aspirations. This echoes the six underpinning principles for safeguarding adults, which are:

Empowerment

"I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens."

Prevention

"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."

Proportionality

"I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed."

Protection

"I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed."

Partnership

"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."

Accountability

"I understand the role of everyone involved in my life and so do they."

Our Work

SAB vision

Our vision that *“We will support adults at risk of harm to prevent abuse happening; when it does occur, we will act swiftly to achieve good outcomes”*.

Preventing and protecting adults from harm is what we do. This report highlights some of that work including short case studies and client feedback, which we hope will help to demonstrate our commitment to achieving good outcomes. We chart progress against our strategic plan and the areas of challenge for us in moving forward.

The main aims of the County Durham SAB are:

- **Safeguarding** and **promoting** the **health and wellbeing** of **adults with needs for care and support** and **carers** through **effective collaborative working** to achieve their **desired outcomes**;
- **Raising awareness** of safeguarding adults and safeguarding adult issues and the promotion of **public confidence**;
- **Communicating** effectively with internal and external partner agencies;
- **Monitoring** the application, compliance and effectiveness of the locally agreed **policies and procedures** across multi-agency practice and each organisation of the Board;
- **Reviewing** and **analysing** safeguarding **activity** across the partnership and identifying **achievable improvements**;
- Undertaking **Safeguarding Adult Reviews** (SARs) in line with statutory requirements, **learning lessons** and **sharing learning**;
- Sharing learning from Domestic Homicide Reviews, Serious Incidents and exploring and embedding ‘good practice’ and in the promotion of a **multi-agency learning culture**;
- Seeking **assurance of safeguarding training provision**, through regular training needs analysis, delivery standards, quality assurance and evaluation; and in **monitoring** the **impact of learning**;
- **Maintaining links and reporting to relevant forums**, such as, the Local Safeguarding Children Board, Safe Durham Partnership, and Health and Wellbeing Board and Overview and Scrutiny Committees;
- Working in cohesive and collaborative ways with statutory and non-statutory partners;
- Engaging with adults, and communities of interest, to **ensure ‘the voice’ of adults with care and support needs is heard**, and is used to inform the work and improvements of the County Durham SAB;
- Annual **review** of the County Durham SAB **governance arrangements**.

Who do we support?

Statutory duty - Care Act 2014

The **local authority** must carry out safeguarding enquiries about:

- Any adult with needs for care and support, **and**
- who is experiencing, or is at risk of abuse or neglect, **and**
- as a result of those care and support needs is unable to protect themselves from either the risk of or experience of abuse or neglect

PHYSICAL MODERN
SELF SLAVERY
NEGLECT SEXUAL
FINANCIAL DISCRIMINATORY
PSYCHOLOGICAL
DOMESTIC VIOLENCE/ABUSE
ORGANISATIONAL
NEGLECT/ACTS OF OMMISSION



Collaborative working with partner agencies enables the local authority to fulfil its duty.

The Care Act has introduced additional categories of abuse: domestic abuse, modern slavery and self-neglect.

SAB has considered how data gathered can help to develop preventative strategies, with an emphasis upon domestic abuse, modern slavery and self-neglect. In looking ahead for 2016-2017, SAB identified a task and finish group to explore sexual exploitation of adults.

The National & Local Context

Since the implementation of the Care Act 2014 there have been further legal and policy updates including:

- The second issue of the [Safeguarding Vulnerable People in the NHS – Accountability and Assurance Framework](#) in 2015, which reiterates NHS England commitment to safeguarding.
- A mandatory reporting duty for [Female Genital Mutilation](#) introduced via the Serious Crime Act 2015. SAB has engaged with colleagues within the Safe Durham Partnership and Local Safeguarding Children Board to ensure appropriate assurance links are in place for the safeguarding of adults. Further multi-agency government guidance is expected in April 2016.
- In December 2015 the Home Office issued guidance that outlines the [statutory framework](#) relating to a new offence of coercive and controlling behaviour in intimate and familial relationships, introduced into the Serious Crime Act 2015. Linked closely to the category of domestic abuse, this new offence serves to support and better protect victims of continuous abuse.
- Revised Care Act guidance was issued, see <https://www.gov.uk/guidance/care-and-support-statutory-guidance/safeguarding>.

In September 2016 joint inspections via the HM Inspectorate of Constabulary will take place, with focus upon how local authorities, police, probation and health services are working together to protect children living with domestic abuse. This work and any subsequent publications may inform the future work of the SAB.

Local Context

In 2014, an estimated 517,773 people were living in 228,000 households in the County Durham area. Latest data from the Office of National Statistics (ONS) tells us that this is likely to grow by a further 4.2% by 2024, to 539,500 people. This is an increase of 21,600 people.

The County extends across 862 square miles covering 12 major centres of population, including Durham City, Barnard Castle, Bishop Auckland, Chester-Le-Street, Newton Aycliffe, Consett and Peterlee.

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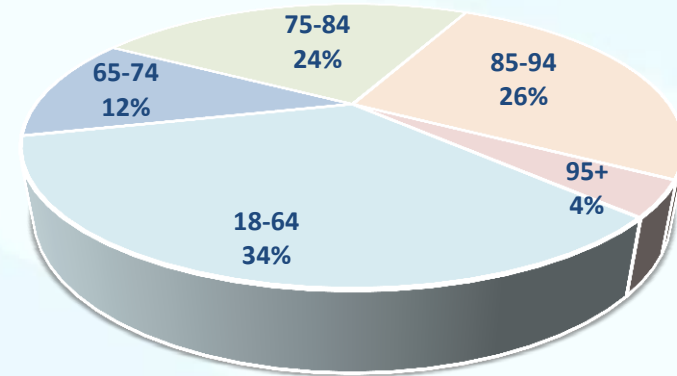
There are 316,000 people aged 18 to 64 living in County Durham. Latest predictions from ONS tell us that this number will fall by 1.1% (-3,600) by 2024 to 312,400.

Predictions are that people aged 65 and over will increase over the same period by 19.3% from 101,500 to 121,100.

Increases are also anticipated for the 85 and over age group of 36.9% (+4,300) to 15,900 from 11,600.

In the context of safeguarding, there were 1,660 reported concerns for older people in Durham for 2015 – 2016. This amounts to 66% of all reports made, and this is consistent with the 2013-2014 and 2014-2015 figures.

Age Profile of Safeguarding Activity



Managing Risk

The revised Care Act guidance strengthens the message of promoting wellbeing, and in particular protection from abuse and neglect,. The guidance also highlights that the identification and management of risk is fundamental to practice, echoed by the local authority's Adult Care commitment to the development and delivery of 'risk' training for 2016 – 2017.

The local authority is required to provide annual data returns to the Health & Social Care Information Centre (HSCIC) about the outcomes of its safeguarding enquiries. The HSCIC provide guidance on the data to be collected year on year.

For 2015 – 2016, risk had reduced or been removed for 61% of safeguarding enquiries, this is in line with the 2014 – 2015 HSCIC published statistics (63% combined).

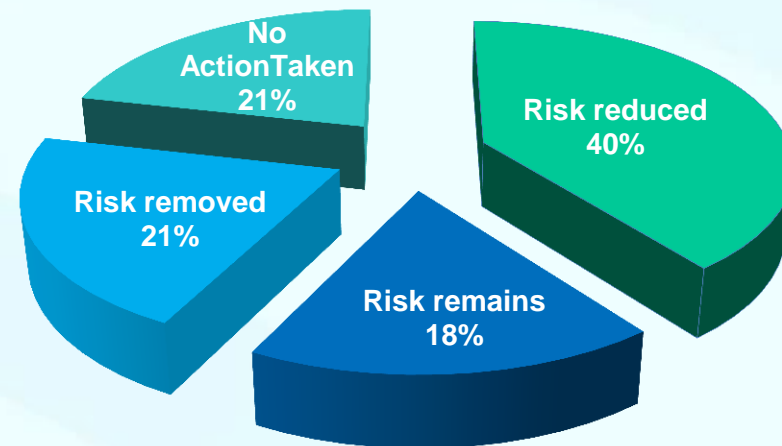
‘Risk remains’ accounted for 18%, higher than the national figure of 8% for 2014-2015. However a case in which risk remains can represent a situation in which an individual chooses to live with a level of risk.

‘No action taken’ accounts for 21% of enquiries, lower than the 2014-2015 national figure of 30%. It illustrates instances of no action taken, or where action may have taken place but no risks were identified. Collectively, the national figures for ‘risk remains’ and ‘no action taken’ is 38% for 2014-15 and locally it is 39% for this year.

Transformational Change – Adult Care

Durham County Council Adult Care continues to work towards its vision for Care and Support. Much of the work undertaken in 2015 – 2016 has explored strengthening the partnership arrangements, developing and improving performance measures and exploration of user/carer voice that is reflective of achieving good outcomes. This work reflects the SAB aim of safeguarding and promoting the health and wellbeing of adults with needs for care and support and carers through effective collaborative working to achieve their desired outcomes.

**Completed Enquiries by Risk Outcome
2015-16**



Safeguarding & Access Service

During 2015-2016, transformation within the adult care service brought about further changes and the formation of the Safeguarding, Practice Development & Access Service. Within this service is the Principal Social Worker for Adults who provides a link with front line practice to enable key strategic messages relating to safeguarding and social work practice to be delivered to the workforce.

Briefing notes have been published to support the wider workforce across Adult Care about issues ranging from independent advocacy and adult protection to self-neglect, and key changes from the Care Act. We reported upon our 'step up' approach in 2014-2015 for adult protection. The term 'adult protection' will be used to define those cases that require the consideration of a full inter agency investigation.

From April 2016, our Adult Protection Lead Officers will support all multi-agency safeguarding work through a centralised adult protection team.

Deprivation of Liberty (DoLS)

Significant resources continue to be made available for support the DoLS process so that the rights of the vulnerable are protected.

Housing Solutions

In September 2015, Durham County Council Housing Solutions (HS) introduced a Safeguarding Single Point of Contact (SPOC) to co-ordinate a safeguarding programme to ensure a consistent approach to safeguarding.

Safeguarding policies and procedures have been reviewed, mandatory safeguarding inductions introduced, including training on 'Making Safeguarding Personal' and a reformed Safeguarding Training Strategy implemented. Safeguarding has been included in all job descriptions when advertised and highlighted in any procurement of services specification.

SAB Governance & Structure

The Care and Support Statutory Guidance describes the main objective of the Safeguarding Adults Board as *“to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area”* who meet the safeguarding criteria as set out in the Act. SAB must also:

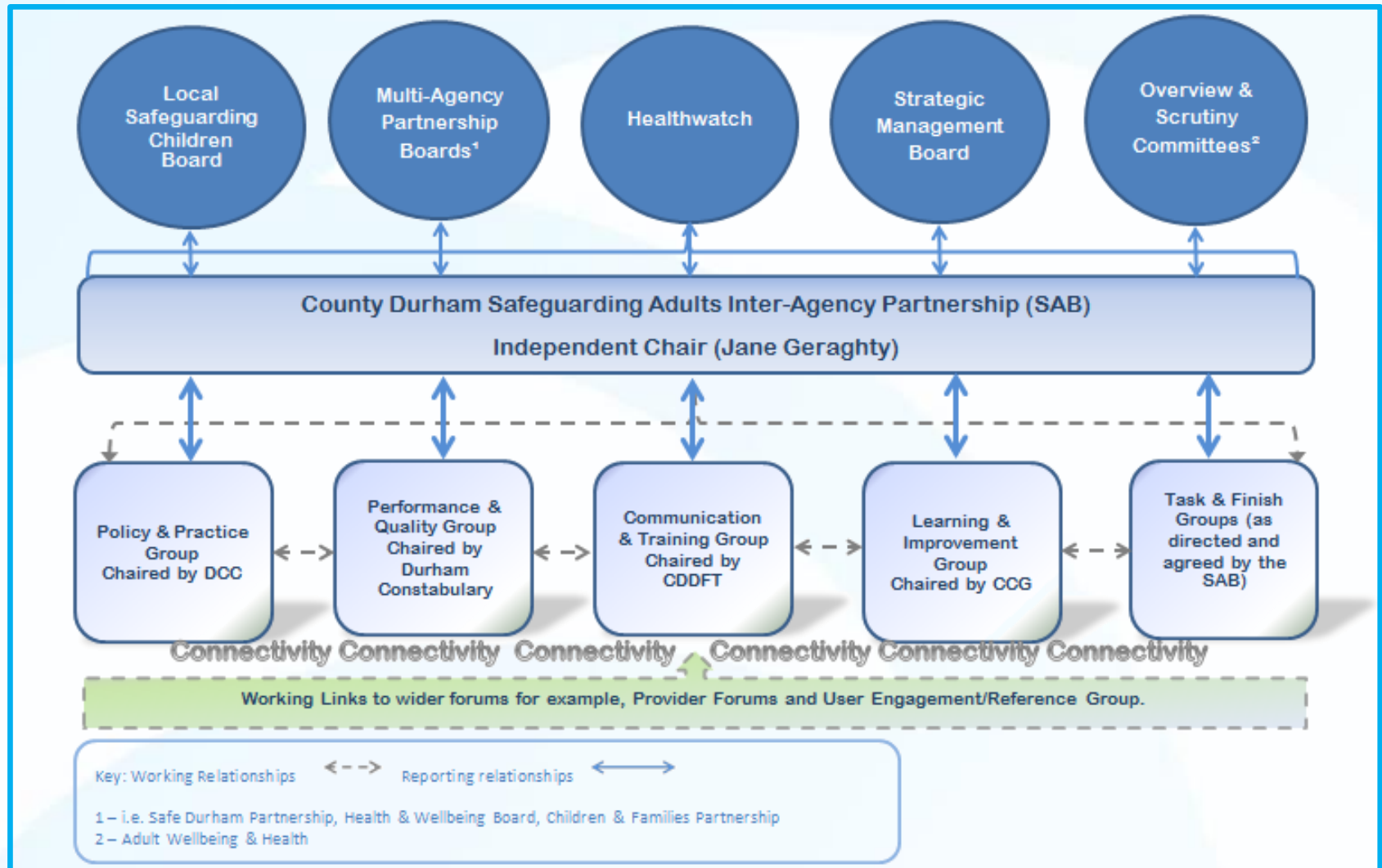
- i) publish a strategic plan for each financial year;
- ii) publish an annual report detailing what the SAB has done during the financial year;
- iii) conduct any Safeguarding Adult Reviews.

The SAB annual report should have prominence on each core member’s website and be made readily available to other agencies.

The Care Act requires Durham County Council Chief Executive to appoint a Chair whom the authority considers to have the required skills and experience, and in doing so, will consult with key stakeholders. In Durham we have an Independent Chair, Jane Geraghty, who also chairs the Local Safeguarding Children Board.

SAB has a formal agreement in place that outlines its governance arrangements, including accountability, functions, membership, and standards and expectations of the Board as a whole and individual responsibilities. Annual review of our governance arrangements is undertaken. A Board governance review for 2015 – 2016 identified actions to take forward in 2016 – 2017.

SAB Structure 2015-2016



SAB Membership

The Care Act 2014 specifies that there are three core members, the Local Authority; Clinical Commissioning Groups (CCGs) and the Police. Appendix 1 illustrates the membership for 2015-2016.

SAB Meetings

SAB and its working groups continue to meet on a quarterly basis. In 2015 – 2016 SAB improved upon its compliance reporting on attendance levels, with six-monthly updates to SAB. In addition, it has begun to receive reports upon a wide range of SAB activities and partner contributions to the work of the SAB, which has served to strengthen commitment to achieve its objectives

Attendance levels are part of the performance framework with a target of 100% (this includes deputy representation). SAB regularly reviews its composite action logs across all of its work streams. There is regular discussion and evidence at each Board meeting of the monitoring of any current or emerging risks, and of challenges identified.

Independent Chair Engagement

The Independent Chair meets quarterly with Chief Officers through Chief Officer Safeguarding Meetings. This meeting is attended by the County Council's Chief Executive, Corporate Director of Children and Adults Services. Chief Officers of the Clinical Commissioning Groups, NHS Foundation Trust and Police also attend.

This forum offers further opportunities for challenge at the most senior level.

In addition to meeting with Chief Officers, our Chair adopts a proactive approach to engagement with

Agency	Number of Meetings
Cabinet Member & Portfolio Holder Adult & Health Services	2
Clinical Commissioning Groups	1
Durham Constabulary	3
Durham County Council - Commissioning	1
Durham County Council – Housing	1
Durham County Council Children & Adult Services	3
Lay Member	1
NHS North England	1

partners of the Board on a one to one basis; meetings for 2015/16 shown above.

Our Chair also takes on an active role in meeting all new members to the Board, as part of their induction. In 2016/17 the Chair will meet with the Adult Care, Principal Social Worker and Adult Protection Lead Officers (APLO's).

Sub-Groups

Our sub-groups play a pivotal role in driving forward the work of SAB and its functions. In 2015-2016, SAB had four key working groups and a time-limited task and finish group:

Communication & Training

Focusing on:

- Safeguarding and promoting the health and wellbeing of adults at risk and carers remains a focus of all learning and development.
- Effective communication strategies inform and educate the public about recognising abuse and neglect of adults with care and support needs, and how to report concerns.
- Workforce competency and confidence in addressing safeguarding adult issues.

Policy & Practice Group

Focusing on:

- Awareness of local and national guidance or recommendations.
- Ensuring policies and procedures meet all legislative requirements.



- Developing a suite of tools related to a broad range of safeguarding adult issues to support practice across all agencies.
- Profile raising and promoting locally agreed multi-agency policy and procedures across the voluntary sector and wider communities.

Performance & Quality Group

Focusing on:

- Developing and establishing reporting links within the partnership, with a particular focus upon 'relevant' data and its monitoring and evaluation.
- Building on the performance framework to ensure it is reflective of local needs and demographics in line with the Care Act 2014

Safeguarding Adults Review/Learning & Improvement Group

Focusing on:

- Ensuring that SAB operates within the framework of the Care Act 2014 and County Durham Safeguarding Adults Inter-Agency Partnership Policies and Procedures, which includes the Safeguarding Adults Review (SAR) guidance.
- Disseminating lessons learned from case reviews, both locally and nationally ensuring that appropriately action is taken across agencies
- To ensure learning from serious concerns investigations across all partners agencies is shared and actioned
- To hold SARs to account to timescales and related agency action plans.

User/Carer Task & Finish Group (time-limited)

Focusing on:

- Developing and improving engagement of adults and carers involved in safeguarding intervention through 3 key identified themes:
 1. User/carers engagement.
 2. Making Safeguarding Personal and achieving good outcomes.

3. Wider engagement opportunities.

This group made significant progress in a short timescale (see key achievements), and further related work is embedded within thematic sub-groups for 2016-2017.

SAB Relationships

County Durham Partnership interface with the SAB, Safe Durham Partnership, Health & Wellbeing Board and Local Safeguarding Children Board.



The Children and Families Partnership is working towards ensuring effective services are delivered in the most efficient way to improve the lives of children, young people and families in County Durham. SAB continues to ensure that any issues of note will be shared appropriately.

The Health & Wellbeing Board promoting integrated working between commissioners of health services, public health and social care services, for the purposes of improving the health and wellbeing of the people in the area. SAB is committed to taking forward any actions of the Joint Health and Wellbeing Strategy in relation to its objective to 'protect vulnerable people from harm'.



The Safe Durham Partnership tackles crime, disorder, substance misuse, anti-social behaviour and other behaviour adversely affecting the environment and seeks to reduce re-offending. SAB continues to link with the Safe Durham Partnership Plan in respect of adults with care and support needs and carers, providing a copy of its ratified annual report and strategic plan on an annual basis. SAB has recently linked with the Safe

Durham Partnership and the Local Safeguarding Children Board to explore 'related abuse agendas' and the governance arrangements to take forward into 2016-2017.



Both Safeguarding Boards are committed to ensuring there is a Think Family Approach to ensuring those most vulnerable within the community are safeguarded, benefiting from sharing the same Chair.



SAB continues to engage and participate in regional activities through its connection to ADASS North East.

This regional network encompasses 11 local authority areas, and continues to explore a range of work through its forward plans, for example, engagement and participation, Care Act 2014 implementation audits, Quality Assurance and Peer Reviews. It also contributes towards the development of Safeguarding Adults Boards through a range of development opportunities.

Equality & Diversity

SAB continues to be fully committed to the importance of equality and diversity, and specifically in relation to access to safeguarding services. SAB recently undertook an annual Equalities Impact Assessment of its strategic plan and continues to revise its documentation, access to information and training programmes with equality and diversity at the fore.

Our Achievements and Progress 2015/16

SAB agreed 7 priorities for its strategic plan, taking into account the key drivers inclusive of but not exhaustive to, the Care Act 2014 and the wellbeing principle, Making Safeguarding Personal, and use of advocacy.

SAB Priorities 2015 – 2018*

Strategic Priorities	What we will achieve
1. Performance Framework	Establish a performance framework that prescribes targets that are then met across the strategic priority areas of this plan and meet national performance requirements.
2. Care Act/ Legislative Compliance	Ensure our adult protection processes comply with legislative requirements and are person centred and outcome focussed.
3. Prevention	Support people to identify and report signs of abuse and suspected criminal offences. This will involve training staff and considering how we make our local community safer in all out work. When abuse occurs, we will provide support aimed at removing or reducing risks or reoccurrence.
4. User/Carer Voice	Ensure the user's voice is heard throughout the adult protection process and user feedback is used to inform future practice. Where an individual lacks capacity, we will act in their best interests.
5. Awareness	Establish and maintain a wide range of awareness raising initiatives across partner agencies that provide individuals with the right information about how to recognise abuse and how to keep themselves safe.
6. Partnership Engagement	Ensure that partners are fully engaged and fulfilling their resources in achieving the objectives of SAB. In doing so, foster a 'one team' approach that places the welfare of individuals before the 'needs' of the system.
7. Learning Lessons and Improvement	Ensure learning from serious concerns investigations, including domestic homicide reviews influences practice development across all partner agencies.

*Annual review is undertaken year on year of strategic priorities in this 3 year plan, for 2016 – 2017.

Key Highlights

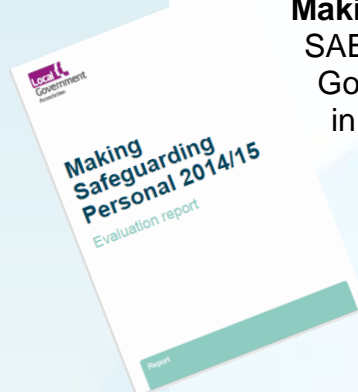
- Reviewed a range of SAB documents, for example, the Safeguarding Framework that outlines links to partnerships and the Terms of Reference across all working groups.
- Formation of a SAB Business Unit with appointed Business Manager and newly appointed Training & Development Officer.
- Developed Partner Activity reporting in line with strategic priorities and strengthened compliance reporting.

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- Joint Lay Member recruitment with the Local Safeguarding Children Board.
- Full membership review to ensure the 'right people are in the right place'.
- Developed Induction Packs for newly appointed Board and Lay Members to aid understanding of the Board, its structure and work, and individual responsibilities.
- Review of the Self-Assessment Tool for partners and embedded strategic priorities to glean evidence and formulate actions for 2016-2017.
- Developed surveys and attended a range of user forums to gain feedback on the impact of SAB raising awareness activities.
- Introduced a forward calendar for the SAB that includes 'horizon scanning' to ensure it remains informed.
- Introduced composite action logs to ensure connectivity across all working groups of the SAB.
- Review of the local authority Social Services Information Database (SSID) to ensure Care Act compliance and in the meeting of statutory annual reporting requirements.
- Multi-agency audit of safeguarding practice.
- Revised the performance framework with a continual focus upon the development of a multi-agency data set.
- Stocktake of Making Safeguarding Personal through a development session.
- Review progress of the strategic plan, and identified actions for 2016-2017 and revised the forward plans for all working groups.
- SAB governance review of 2015-2016 and identified actions for 2016-2017.

Making Safeguarding Personal is a well-established initiative and it continues to be a key driver for the SAB, supportive of one of its key priorities of User/Carer voice. In November 2015, the Local Government Association published its evaluation of [Making Safeguarding Personal](#) which SAB reviewed in its development day in March 2016

Its primary purpose was to establish the impact of Making Safeguarding Personal across key themes namely, outcomes for people using safeguarding services, the impact of the approach on ways of working and professional culture in safeguarding and partnership working and culture change.



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The local authority will participate in a Making Safeguarding Personal temperature check in May 2016.



Joan resides in her own home, she receives support from a domiciliary care service. A concern was reported that Joan was being financially abused by a Domiciliary Care worker.

A social worker visited Joan, and discussed with Joan what her concerns were and what support she may need. Joan told the Social Worker that she had shared her financial details with the Care Worker and this resulted in financial hardship for Joan.

Joan was supported through adult protection and provided vital evidence to support a police investigation. A social worker supported Joan in keeping her details safe, and in understanding the risks of financial abuse to prevent further risk.

Supporting individuals in the least intrusive way is just one element of effective safeguarding, balancing the need for prevention and protection are also fundamental to that practice.

The lives of adults can be very complex.

Where individuals lack capacity, decisions are made in their best interests.

SAB is committed to ensuring its partners and the wider workforce demonstrates a good understanding of applying the **Mental Capacity Act (2005)**, and access to advocacy. SAB has developed strong links to the local advocacy provider forum, and receives regular advocacy updates.

Looking ahead into 2016-2017, dedicated training for the SAB and its partners will take place. The one-day training event through ADASS North East, will focus upon the Care Act, and will include a session on the role of the independent advocate.



A district nurse reported an incident of aggression between Anne and her partner Ben.

The Adult Protection Lead Officer, working with a Social Worker, was able to organise an adult protection visit to Ben and Anne in their home. Ben was struggling at times to cope with caring for Anne, and in meeting her needs.

The Social Worker was able to sensitively explore solutions to support Anne and Ben during the visit. The Social Worker discussed options to support them including the introduction of a home care service.

Anne now receives additional support and continues to reside with Ben; he feels able to access support when needed for his own wellbeing. By including both Anne and Ben, the safeguarding intervention was able to achieve positive outcomes for both, and take their wishes into account.

Progress on Priorities

SAB has ensured that each sub group takes responsibility for identified priorities contained within the strategic plan. Our March development session was an opportunity for all sub-group Chairs to evidence their achievements and identify actions to take forward which contributed to the identification of actions for 2016-2017 (see also - Looking Ahead in 2016-2017).

A set of key questions were posed to each sub-group Chair to establish a framework to challenge the work of each group and to provide focus for future actions in meeting the priorities of the strategic plan:

1. Taking into account the strategic plan and performance framework what has the sub group **achieved** during 2015-2016, and how has it **made a difference**?
2. What are the **challenges** you have faced/are facing and what support do you need to overcome these challenges?
3. What elements of the performance framework are you delivering; **what are the gaps** and what plans are in place to address the gaps?
4. What is the proposed work plan for the coming year **2016 -2017** to achieve the strategic priorities and what will the outcomes be?

The following sections explore each of these areas for all working groups of the SAB.

Performance & Quality

Achievements & Impact against Strategic Priority 1 Performance Framework

- Terms of Reference revised for the group.
- Amendments to sub-group reporting arrangement to incorporate and apply action log
- Development of qualitative approach to capturing performance information, which encompasses the six key principles, as well as the priorities of the strategic plan.

- Multi--agency audit of safeguarding case work focusing on Care Act requirements and the involvement of inter-agency partners. Changes to local authority system and recording practices will 'go live' in April 2016.
- The Self-Assessment tool was revised in line with the strategic plan priorities and to reflect learning from LGA peer reviews and an Adult Safeguarding Improvement Tool
- Briefings for accessing advocacy in line with the Care Act were produced and cascaded by the Policy group. An advocacy survey has been developed, with particular focus upon whether 'outcomes' are achieved. It offers opportunity for advocacy services to feedback on safeguarding practice to aid practice improvement.
- Guidance tips were developed and included on the local authority in-house case recording system (SSID) to ensure a consistent approach to recording outcomes for cases in line with HSCIC guidance for risks removed/reduced/remains. Clear analysis of the outputs of these outcomes provides SAB with a measure of the effectiveness of safeguarding/adult protection arrangements (see also, Page 10).

"We did not know about safeguarding or guidelines."

Adult Protection Survey 2015/16

"I was extremely impressed with the sense of urgency with which my problem was given. The problem was reported and a satisfactory resolution found within the same day. Follow up liaison did occur and the outcome of the investigation was relayed to myself restoring my trust in the provision of care for the elderly."

Adult Protection Survey 2015/16

Challenges

- Despite austerity partners have continued to be committed to ensuring safeguarding requirements are met
- A challenge for the group is ensuring the performance framework contains range of data from all partners that is meaningful, with further work needed. The Police are working towards making changes and have provided examples of internal audit schedules and availability of further information in the future, as have other partners. SAB welcomes new membership from the County Durham & Darlington

Fire & Rescue Service who are actively engaged in the work of the group and the development of a multi-agency data set.


- Making Safeguarding Personal has continued to be a feature of the self-assessment tool for 2015-2016. The Making Safeguarding Personal Evaluation report 2015 and the challenges facing partners to embed MSP have identified actions for 2016-2017.

Performance Framework Links

- Capturing information about whether risk are reduced, removed or remain will begin to inform SAB of the effectiveness of safeguarding arrangements in relation to meeting outcomes in protecting adults and how this links to individuals' choice and control.
- Making Safeguarding Personal is embedded in the new statutory annual returns with an emphasis on achieving outcomes. Future reporting in 2016-2017 will assist the Board in measuring the effectiveness of its arrangements.

Preventing further risk

Notably, repeat instances of abuse have reduced significantly since 2011-2012, which reassures SAB that safeguarding intervention and solutions are effective.

Percentage of invoked referrals which are repeats					
% 2011-12	% 2012-13	% 2013-14	% 2014-15	% 2015-16	Trend
13.25	8.60	5.38	6.13	4.50	

Policy & Practice

Achievements & Impact against Strategic Priorities 2 & 3 Care Act/Legislative Compliance & Prevention.

- Terms of reference revised for the group.
- Amendments to the sub-group reporting arrangement to ensure capture of incomplete actions, and evidence of actions taken to address.
- Briefings on the SAB agreed step up approach of adult protection were cascaded.
- Provider service interface- briefings for commissioned service providers to inform them of their requirements in cooperating with Safeguarding/ Adult Protection enquiries were shared with partners.
- Web-based policies and procedures fully revised and updated in line with the Care and Support Statutory Guidance issued under the Care Act 2014.
- Revision to all literature including Staying Safe, Stop Abuse Now and What happens when abuse is reported (providing information in accessible ways).
- Extensive review undertaken of the Risk Support Tool, with consultation and testing through Social Care Direct, the point of contact for reported concerns and has since been launched.
- Revisions of the Safeguarding Adult Review protocol to reflect Care Act changes, and incorporate new terminology of Safeguarding Adults. It is reflective of participative processes with adults and carers and appropriate representatives, and those who may have caused harm (e.g. peer on peer instances).
- A Designated Adult Safeguarding Manager (DASM) was appointed and a process and referral route is in place. The DASM/LADO annual report is presented to SAB. This role is subject to change in 2016 following the new Care & Support Statutory Guidance.

“The case studies were appropriate – as a police officer we could acknowledge the actions taken following procedures.”

Safeguarding Care Act & You

“Entered into this with some trepidation, possibly, some ‘training’ weariness, quite a lot going on at present, but felt positive at conclusion of training today and valued the training”

Safeguarding Care Act & You

“Awareness of new categories of abuse and risk tool will be extremely helpful; most of the content of today will be used within my daily practice.”

Safeguarding Care Act & You

Challenges

- The Care Act 2014 has created an increased demand on statutory safeguarding in the context of austerity and service reductions across a range of agencies. This will continue to potentially be an area that brings challenges to the progress and buy-in of partners. Any potential risks and challenges will continue to be evidenced through SAB Risk & Challenge Log and Compliance Reporting activity.

Performance Framework Links

- Prevention and Care Act Compliance priorities directly link to the Policy & Implementation Group, Durham County Council – Adult Care internal systems have undergone changes to capture information on 'desired' and 'achieved' outcomes as well as Making Safeguarding Personal.
- The performance framework includes exception reporting from commissioners, key to ensuring that the Board remains assured of the provision of services and standards, and of any steps taken to address issues. Additional actions have been identified for 2016 – 2017.
- Reported concerns will continue to feed into the framework.
- Repeat instances of abuse continue to be monitored in the performance framework, a recent audit of those cases has been undertaken and the Board will receive a report in July 2016, this is supportive of the Prevention priority.
- A range of briefings have been produced and disseminated that include, raising awareness of the Care Act 2014, and the use of advocacy. SAB has received reports in relation to access to advocacy and of surveys sent to advocacy providers, the findings will be analysed by the Performance & Quality group

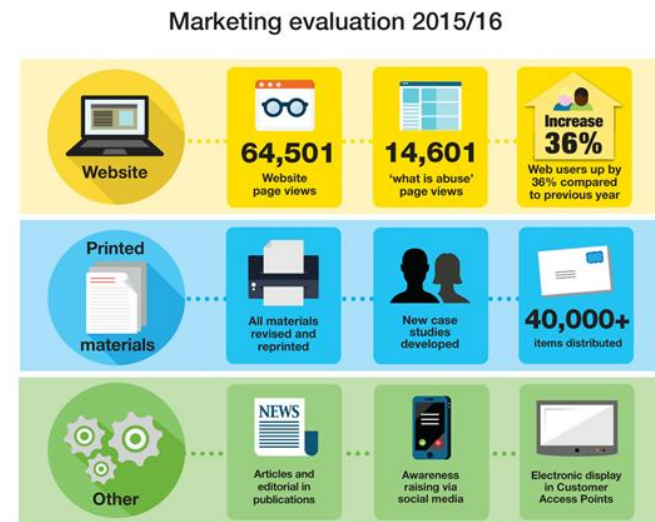
Communications & Training

Achievements & Impact against Strategic Priorities 5 & 6 Awareness and Partnership Engagement.

- Terms of Reference revised for the group.
- Amendments to the sub-group reporting arrangement to ensure capture of incomplete actions, and evidence of actions taken to address.
- Revision of the Level 1 Workbook, and re-launch on the website (reflecting changes from the Care Act 2014).

Safeguarding Adults Annual Report 2015/16

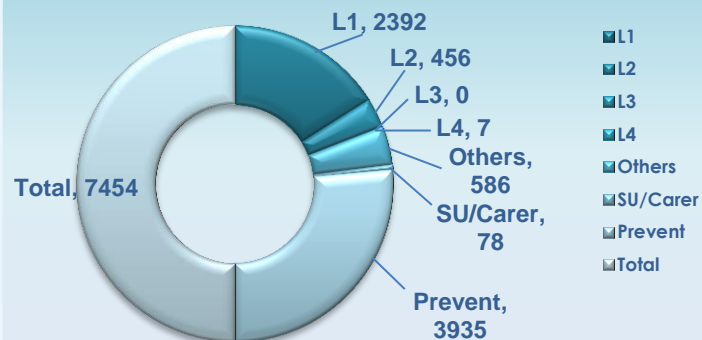
- The website has undergone a refresh and hits continue to increase year on year with an 85% increase on the page 'how to contact us', hits on the website overall increased by 65%.
- Refresh and reprint of SAB documents, posters and contact cards with new imagery and guidance.(These changes are supportive of advice and information requirements in line with the Care Act 2014 and will promote awareness).
- Posters and contact cards provided to a range of events inclusive of the Big Tent Event, the Holocaust event and Women's Day.
- Durham led on a regional initiative for the provision of training for the SCIE Learning Together Model which supported the SAB commitment to learning and improvement
- DCC in partnership with the police and Harbour have provided half day training sessions on Domestic Abuse (new category under the Care Act 2014).
- The CCG has delivered GP Practice Leads development sessions in October and January, and safeguarding events incorporating Prevent sessions at Derwentside in November and a planned practice learning time event for 17th March.
- An article was publicised in the Carers Echo and GP Team Net.
- A training needs survey was developed, cascaded to all partners, to establish training needs and future training development



“A total of 93% of respondents stated in their response that they were either very confident or quite confident in relation to their awareness of adults at risk and of abuse or neglect and how to report a concern”.

“The majority of respondents (79%) knew who their designated lead was in their organisation”

All Attendance by Course - All Levels of Training



The graph shows details of numbers attending all safeguarding training, across all levels and includes Prevent and Service User/Carer training.

Challenges

- The main challenge posed has been the vacant post for Training & Development Officer for the period 2015-26. Training continued to be delivered. Partners' single-agency training also continued across the year. Full details of training delivery and its impact are available via our Training Annual Report.
- There is a need to strengthen e-briefing activities with focus upon partner updates, as to how information is being cascaded internally, e.g. intranet/internet updates and their impact, this will be captured through reporting arrangements of the group.
- A potential gap highlighted was engagement with the voluntary sector to broaden the input on communication initiatives. A forward calendar is now in place to support and target key events throughout 2016-2017. Durham Voice is also a member of SAB and actions have been agreed in consultation for 2016-2017 to promote SAB and its work with the wider voluntary sector.

Performance Framework Links

- Training attendance figures and their collation needs to be more robust across the partnership. Actions to explore data capture tools to support partners to meet elements of the performance framework identified for 2016-2017.
- Non-attendance continues to be an area of challenge with 123 delegates failing to attend training over 2015 -2016. A recommendation of the Training and Development Officer is to explore a Training Charging Policy to support the local training offered and reduce impact of non-attendance and its associated costs. The Board will receive a proposed charging structure early in 2016-2017.
- Durham County Council have delivered a number of events including “Safeguarding, the Care Act and You” - 289 trained up to March 2016. Opportunities to access the training were offered to partners and new Lay Members as part of their induction in 2016-2017.
- A Peer Review sits within the performance framework, and SAB will agree a way forward for 2016-2017 from options provided.

“Presenter was key to this being an enjoyable session – very knowledgeable, good tone & communication. Made a ‘dry’ subject enjoyable in a non-sensational , appropriate manner.”

Safeguarding Training Evaluation

“Useful and in-depth. Relaxed atmosphere so easy to join in discussions etc.”

Safeguarding Training Evaluation

“Facilitators were friendly & approachable videos were good examples of abuse & bad practice”

Safeguarding Training Evaluation

User and Carer Task & Finish Group

Achievements & Impact against Strategic Priority 4 User/Carer Voice

SAB agreed in January 2016 to form a user/carers task & finish group and to explore engagement and views of individuals as a priority. The group met in March 2016 initially to agree key strands of work that included

User/Carer engagement, Making Safeguarding Personal and wider engagement achievements are shown below.

- Developed a structured and robust task and finish group work plan.
- Reviewed and amended the Adult Protection Survey with an opportunity for adults/carers to give feedback on key agencies involved in their case.
- Updated the Adult Protection Survey with a key statement from our Independent Chair.
- Updated the victim leaflet to raise awareness of the survey.
- Devised a short engagement survey with six questions to gain information of the awareness of safeguarding adults in the wider community;
- Developed a Communications and Engagement Strategy with a forward plan of engagement opportunities (the Strategy being launched in 2016 – 2017).
- SAB presence at a range of events to promote and raise awareness of abuse and neglect, the SAB and its work;
- Planned survey activities at engagement forums throughout May 2016, which include Mental Health Support & Recovery, Older Adults Engagement Forum and the Fulfilling Lives Event.

Challenges

- Improving response rates to surveys continues to be an area of challenge for SAB. It is anticipated that the formation of a dedicated centralised service for adult protection will aid improvements in this area.
- Achieving a proportionate and least restrictive response are key safeguarding principles that link closely to adult protection intervention. SAB will continue to explore a range of ways to gain feedback. Development of a user/reference group is key to this work progressing in 2016-2017.

Performance Framework Links

- User/Carer voice is a fundamental element to the performance framework, survey feedback is incorporated on a quarterly basis, and qualitative feedback included to inform the Board.
- The Adult Social Care Outcomes Framework is also included, as it is so closely linked.

Adult Social Care Outcomes Framework (ASCOF) Measure 4B Do care and support services help you in feeling safe?				
Durham 2015-16	North East 2014-15	England 2014-15	Good =	Trend
91.4%	88.8%	84.5%	High	↑

Safeguarding Adult Review/Learning & Improvement Group

Achievements & Impact against Strategic Priority, 7 Learning Lessons

- The group met initially in April 2015 as a scoping exercise to determine the remit, with an ethos that 'learning and improvement' in relation to safeguarding adult reviews should be the key focus with strong connectivity across the working groups of SAB.
- The group spent time developing the Terms of Reference, ensuring that the learning from a range of reviews was included for example, Domestic Homicide Reviews.
- Several partners and board members attended a Sharing Lessons Learned from a recent Mental Health & Domestic Homicide event in September 2015 hosted by NHS England.
- The group reviewed the SCIE Learning Together Model, Safeguarding Adult Review regional learning event that was attended by partners and colleagues across the region, and organised by Durham through ADASS NE funding.
- The group looked at a range of reviews, to ensure learning from serious concerns investigations, including domestic homicide reviews influenced practice development across all partner agencies:



- A range of briefings and updates are developed and cascaded as a result of learning from local cases; some examples are included with the local context section of this report.

Challenges

- Austerity measures and cost implications of instigating Safeguarding Adult Reviews in a range of forms, which has been addressed through risk monitoring at the Board.
- Several SAB members attended an NHS England Serious Incident Event In March 2016. The event provided a brief outline of the different types of reviews/investigations and their similarities and discussed the potential challenges and benefits of undertaking one overall review in some cases. Going forward this will need consideration to reduce duplication and ensure a smoother process for the adults, carers or families involved. Exploration of joint commissioning is included within the Safeguarding Adult Review revised protocol of 2015.
- Ensuring there is a heightened awareness of how to report a case locally in line with the agreed Safeguarding Adult Review protocol, and the actions needed to address this (see next section).

Performance Framework Links

- When developing the performance framework for 2015 -2016, partners agreed that learning lessons and improvement should be included within monitoring arrangements. Moving forward into 2016 -2017 the two most significant local cases will form part of future SAB Development sessions. The learning from these instances will be presented, with opportunities for peer review and challenge.

Safeguarding Adult Reviews

The Care Act 2014 places statutory requirements upon Safeguarding Adult Boards in relation to Safeguarding Adults Reviews (SARs). SABs must undertake SARs where an adult has died as a result of abuse or neglect, whether known or suspected, or is alive and suffered serious abuse or neglect, and there is concern for how the partner agencies have worked together to protect the person.

SAB may also undertake reviews for of any other case involving an adult in its area with needs for care and support as it deems appropriate. The SAB must within its Annual Report provide details of any SAR's undertaken, the actions taken completed or not and any intended actions in relation to those reviews.

During 2015-2016 there have been no SARs undertaken. One case being considered against the local Safeguarding Adult Review protocol and taken forward as a review under another arrangement led by NHS England. This review is yet to conclude but any lessons learned will be actioned and reported in our 2016-2017 Annual Report. The quality assurance and monitoring of any related actions will sit with the SAR/Learning & Improvement group of the SAB.

SAB is committed to learning and improving and for lessons learned and good practice to be a key focus of practice development across all partners. Durham County Council has drawn upon lessons and case studies in the development and delivery of Safeguarding, the Care Act and You training, attended by partners of the SAB. Actions identified for 2016-2017 include heightened awareness of the locally agreed Safeguarding Adult Review protocols and reporting of cases.

**"Excellent update,
informative to enhance my
knowledge which hopefully
will influence my work in
the prisons."**

Safeguarding, Care Act & You

**"Very clear key messages
for practitioners – useful
drawing from lessons from
local cases to embed
learning."**

Safeguarding, Care Act & You

**"Golden thread of the day
'person centred' and grass roots
social work/joint working the
bread and butter stuff and the
cultural shift for safeguarding."**

Safeguarding, Care Act & You

Key Partner Perspectives

Durham Constabulary

Durham Constabulary is a leading force which delivers excellent policing to the people of County Durham and Darlington, inspiring confidence in victims and our communities, by: Protecting Neighbourhoods, Tackling Criminals and Solving Problems.

The force continues to have a designated Detective Sergeant (DS) and Detective Chief Inspector (DCI) for safeguarding. The force is focused upon mental health and in 2016 has taken on-board a suicide prevention initiative where all incidents of attempted suicide or threatened suicide are not only referred into adult services and mental health teams but 100 Police Community Support Officers (PCSO's) have been trained in suicide prevention and available support pathways. These PCSO's work in our communities and visit those adults in need of help and use their training to assess and signpost those in need.

The force in conjunction with the Police Crime Commissioner has commissioned a piece of work to understand exploited adults, in part adults exploited through the sex trade. The profile of Durham and Darlington is complete and looks towards multi-agency processes to safeguard these individuals. As a starting point the force has agreed the ERASE team will work with adults who have just crossed over into adulthood until the risk is reduced.

The force is moving toward qualitative measures and has commissioned Leicestershire police to carry out victim satisfaction surveys in regard to sexual/domestic assaults. Durham is the only force in country to do this and the first feedback from surveys has been actioned to the Sexual Assault Referral Centre (SARC) manager for consideration.

Durham now have a top 10 complainants address list that is looked at and issued to localities for vulnerability issues in those calling for a service, in order for Neighbourhood Policing Teams to use Problem Orientated Policing. This will identify vulnerable adults who are calling police on numerous occasions or where others are calling regarding them and are intended to establish a safety net to prevent serious harm to those individuals.

Areas of learning and improvement

Durham Constabulary has been successful in a bid for £750,000 for a Child Advocacy Centre after identifying that service pathways for child victims of sexual assault are subject to silo activity between agencies when

dealing with the most vulnerable. The strategic board and project manager are being identified for this 2 year innovation proof of concept pilot between agencies to run 2016-2018.

Areas of good practice

Her Majesty's Inspectorate of Constabulary inspection results published February 2015 identified Durham Constabulary were GOOD at identifying repeat and vulnerable victims.

- Our victim live link to Crown Court has been deemed best practice nationally so victims of serious sexual assault can give evidence preventing trauma of court appearances.
- Force has adopted a new victims charter so dedicated DC's deal with vulnerable victims and create a bespoke plan with the victim at the heart of the plan. This plan is monitored through the supervision process and ensures timely updates. Note: victim satisfaction for Durham Constabulary stands at 89%, 3rd in the country.
- Supervision complete telephone ring-backs to victims within the safeguarding arena for feedback, case progressions and concerns ensuring a victim voice to assist with improvements and identifying good processes.

Areas of challenge for 2016/2017

- Managing increasing demand in times of austerity
- Implementation of the Child Advocacy bid.

North Durham & Durham Dales, Easington & Sedgefield Clinical Commissioning Group

Clinical Commissioning Groups (CCG's) are statutorily responsible for ensuring that the organisations from which they commission services provide a safe system that safeguards adults at risk of or experiencing abuse or neglect. North Durham (ND) and Durham, Dales, Easington & Sedgefield (DDES) CCG's are committed to the safeguarding agenda and work closely with provider organisations to ensure that robust systems and processes are in place.

The CCGs support the work of the Board in working towards achieving its strategic plan by active contribution and participation. It has further supported the Board by means of contributions for staffing resources for the periods 2015/2016 and 2016/2017. Over the last year the CCGs have worked with the local authority safeguarding staff in the audit of safeguarding cases and scrutiny of performance data.

The CCG actively participated and contributed to a user/carer task and finish group with a strong focus upon user/carer feedback.

Primary Care Practice Lead Development sessions with a focus upon learning were held in October 2015 and January 2016 with an expectation that the lead from each practice would attend one of the sessions. Topics covered included:

- Safeguarding adults update.
- Experience of lead role to date.
- Radicalisation in our region/Local Police Prevent lead in attendance.
- CQC inspections/adult safeguarding/CQC National Safeguarding lead.
- Discussion around primary care safeguarding referrals to date.

A number of focussed practiced visits have also been undertaken to raise awareness and inform on a range of safeguarding adult topics, inclusive but not exhaustive to individual, collective and organisational responsibilities as well as policies, and access to training.

The Director of Nursing supported by the Designated Nurse continues to take the strategic lead for safeguarding adults. As part of their statutory responsibilities the CCGs continue to play a key role in core board business, with the Designated Nurse actively participating in the working groups of the Board, and taking on a role as Chair for the Learning & Improvement Group Chair and moving forward into 2016/2017 the Communication and Training group; thus, supporting a clear commitment to continued partnership engagement. In line with the expectations of the Local Safeguarding Adults Board (LSAB) the CCG is a key partner. The Durham executive LSAB representative is the Named GP for DDES.

The CCG, through the contractual clinical quality review process and commissioner assurance visits, looks for assurance that providers are meeting their contractual requirements, safeguarding referrals are being received and acted upon and those without capacity are being care for in their best interest. Failure to comply with such standards is measured and acted upon through the quality requirements of the NHS contract schedule. Themed safeguarding reports are received into the quality review process as requested by the CCG.

Areas of learning and improvement

- To continue to use information from the quality team at North East Commissioning Support Unit to identify areas for concern and/or learning to cascade across providers.
- To continue to respond to weekly reports for Serious Incidents where action is needed.
- To continue to monitor key provider action plans through Clinical Quality Review Groups, and identify learning or key messages.
- To continue to act upon key messages from the Board, actively engage and share areas of learning and improvement and share impact of learning with related functions of the Board.

Areas of good practice

As a result of a gap analysis of the safeguarding framework in 2015, the CCG have developed a policy for managing allegations against staff. The purpose of the Policy is to provide a framework for managing cases where allegations are made about CCG staff that indicate that children, young people or adults at risk are believed to have suffered, or are likely to suffer, significant harm or where there is concern for the behaviour of staff or their suitability to work with children, young people or adults at risk.

Adoption of a domestic abuse in the workplace policy initiated by the Police and Crime Commissioner to address gaps in some areas and ensure there is a heightened awareness.

Revision to Domestic violence and abuse/safeguarding adults policies for GP practices, reflecting the changes introduced by the Care Act 2014 and acting as support tool for practice safeguarding leads.

The CCGs for ND and DDES held public engagement events; Safeguarding Adults public information was available at those events.

Areas of challenge for 2016/2017

- Continue to support primary care to strengthen their safeguarding practices and provide advice and guidance on the requirements of the intercollegiate document once published that will outline the competency requirements for training, for NHS organisations, providers and their staff.
- To continue to work with the Local Safeguarding Adult Board Training & Development Officer and related working groups to inform multi-agency training programmes.

- To continue to work with key providers to ensure information in relation to channel referrals is included in Quality Review Group reports.
- To monitor and deliver the requirements of the Intercollegiate document once published.
- To complete identified actions arising from the [NHS England assurance](#) process for adult safeguarding.
- To further promote the Designated Nurses role in relation to the commissioning of services within the CCG.
- To continue to work with the Continuing Health Care Team in North East Commissioning Support to ensure delivery in relation to the Judicial DoLS agenda.

Tees, Esk & Wear Valley NHS Foundation Trust

Tees Esk and Wear Valleys NHS Foundation Trust provide a range of community and in patient specialist Mental Health and Learning Disability services across a large geographical area.

Our vision is to be a recognised centre of excellence with high quality staff providing high quality services that exceed expectations. Providing excellent services working with the individual users of our services and their carers to promote recovery and wellbeing

The Trusts safeguarding activity continues to be monitored internally by the SGA Sub Group chaired by the Executive Director of Nursing and Governance which reports to the Trusts Quality Assurance Group, which in turn reports to the Trust Board.

The Trusts safeguarding adults performance is also monitored by Clinical Commissioning Groups via the Clinical Quality Review Group meetings. The Trust attends and actively participates in the work of the Safeguarding Adults Board and associated sub groups.

The Trust Safeguarding Adults team made up of; 1x Associate Director of Safeguarding, 1x Head of SGA, 3x SGA Senior Nurses and 2x SGA Advisors as well as 2x MARAC Advisors who provide specialist safeguarding support, advice, supervision and training to all Trust staff.

At the end of 2015/16 compliance rates of Trust Staff meeting the mandatory training requirements for Level 1 training was 97% and Level 2 training compliance was 92%.

The Trust Safeguarding Adults Protocol was revised in light of the changes required by the Care Act and in response to external audit recommendations.

The Trust carried out routine audit work to monitor the Trusts compliance with Making Safeguarding Personal. The Trust also routinely monitors compliance with the SGA Protocol via an annual case file audit. The Trust also contributed to multi agency SGA audit activity.

Areas of learning and improvement

- Internal Audit report and Making Safeguarding Personal routine audit work recommended the Trust SGA Protocol needed revision
- Commissioners highlighted compliance with Level 2 training needed to be improved
- Making Safeguarding Personal audit reported not all patients felt fully involved in the safeguarding processes and didn't feel they were always kept informed of decisions
- Making Safeguarding Personal and Protocol Compliance audits highlighted the amount of paperwork for staff in recording safeguarding incidents

Areas of good practice

- Patient Experience survey work highlighted: Feeling safe in inpatient areas is a category of concern. To understand this further, "feel safe" focus groups have been held with patients and the majority said they felt the ward to be safe and staff to be approachable; the issue was much more related to their own personal feelings of safety and was not reflective of the ward environment.
- The Trust monitors its compliance with 'Making Safeguarding Personal' by routine patient survey work and uses the findings from this work to continually improve practice.
- The Trust promotes learning from all incidents and has in place a 'Learning Lessons' bulletin that is issued on a monthly basis and is distributed to all staff. The bulletin incorporates any learning from internal incidents, local incidents SGA Learning Reviews or Safeguarding Adult Reviews. It also includes any learning from national serious incidents.
- Commissioners noted improvements in training compliance figures at year end 2015/16

Areas of challenge for 2016/2017

- Ensuring the Trust is able to implement safeguarding adult priorities of all 5 Safeguarding Adult Boards within its geographical boundaries.
- Further improve Making Safeguarding Personal by emphasising in SGA training, improved information on Trust website and Intranet and posters in all clinical and reception areas. Routine monitoring via patient feedback systems.
- Incorporate the intercollegiate guidelines for SGA training into the Trust training programme once they are published.
- Continue to work with partner agencies in line with the requirements of the MARAC processes and the Domestic Abuse NICE Guidance.
- Work on the Trusts electronic record keeping system to improve safeguarding incident reporting and record keeping and improvements in reporting of safeguarding activity to be completed.

County Durham & Darlington NHS Foundation Trust

County Durham and Darlington NHS Foundation Trust is one of the largest non-teaching trusts in the NHS.

Our vision is to deliver excellent healthcare in hospital, home and community, and we have two strategic priorities to help us achieve this:

- To sustain and develop our position as the healthcare provider of choice for the people and communities of County Durham & Darlington
- To become the best Foundation Trust in the NHS

We provide general hospital services from two main sites University hospital North Durham and Darlington Memorial Hospital .We also provide community hospital services as well as a range of outpatient, community and outreach services

During 2015-16 the Trust internal Safeguarding meeting has continued to meet with a wide representation of staff across the organisation.

In 2015-16 due to the changes in mandatory training 95% of staff received awareness training within the organisation which has been an increase from previous years.

The Trust actively participates in SAB. The Safeguarding Adult Lead has supported the sub groups of the board and actively promotes safeguarding within the culture of the organisation providing support to staff and patients.

The Trust has supported the development of new roles such as Dementia Specialist Nurse to improve knowledge and care for a highly vulnerable patient group. The Trust continue to provide support for patient with Learning Disabilities, this is an integrated programme with TEWV. The initiative has delivered a number of key aspects such as education, patient support & mortality reviews.

An audit of Safeguarding Adult records has taken place to review practices.

The Trust supports campaigns and events throughout the year and actively promotes safeguarding adults in line with Local Authority.

Areas of learning and improvement

- Review from the Commissioners identified that some staff were not aware of the responsibility of social care in the safeguarding process.
- Training reports demonstrate lower compliance with training for level 2 & 3 than desired.
- Annual review indicated that the trust strategy needed to be reviewed and action plans updated.

Areas of good practice

- The Dementia work has seen changes to outpatient waiting rooms and signage in the organisation. The team have also delivered training on sensory awareness and targeted work specifically on dementia awareness.
- The Learning Disabilities team have been involved with patient council, actively engaging with service users to understand any issues that arise, with the implementation of reasonable adjustments.

Areas of challenge for 2016/2017

- To continue progress with training
- Continue to raise awareness of designated role responsibilities, specifically matrons.
- Review and develop strategy with appropriate action.

Looking Ahead in 2016-2017

The SAB Development Session in March 2016 was an opportunity to reflect on our 3 year strategic 'plan on a page' and related priorities. Chairs of the working groups considered the proposed work plans for the coming year **2016 -2017** to achieve the strategic priorities with a focus upon outcomes.

Below are just some of the actions identified to take forward into 2016-2017 (see Appendix 2); each sub group has a clearly defined work plan for 2016-2017:

- To continue to consider the emerging agendas and practice issues with a view to ongoing innovation and development in operational practices and interfaces.
- To explore with partners their role in relation to risk management, recognising risk and links to failing/unsafe service provision as a result of local learning
- To continue to strengthen the information sharing forums and the 'soft intelligence' sharing opportunities that exist and support the prevention agenda.
- To continue to develop practice guidance and toolkits that will inform and link to other working groups; this includes links between learning and improvement group.
- To ensure actions from the self-assessment submissions are addressed and incorporated into quality assurance activity inclusive of governance review actions.
- To explore a range of audit activities and produce a forward plan of partner audits, undertaking audits and analysing the data.
- To strengthen the correlated link with the learning and improvement group for the purpose of informing work plans and sharing for example, findings from audits, survey activities and performance monitoring that may direct changes to policy, practice and/or training.
- Training & Development to undertake quality assurance activities.
- To use the findings from the Training Needs Survey 2015-2016 and act on the recommendations.
- To promote active engagement with providers through learning and development opportunities such as Train the Trainer.
- To link with Commissioners in the development of self-assessment type activities.
- To further explore and agree the SAB approach to sexual exploitation of adults.
- To strengthen links with local Healthwatch and develop a User/Carer forum to ensure wider opportunities for engagement, consultation and participation exist and report upon the impact of that forum to Board.

Conclusion

The annual report is reflective of the body of work undertaken for 2015 – 2016. This year's report has undergone a transformation of the styling and format in part to reflect the new statutory requirements of the Care Act 2014, and Statutory Guidance (2016). Recognition must be given to the contributions of Board members in the formulation of this report.

Key successes to note over the last reporting period includes the widening of Board membership and new relationship links including but not exhaustive to County Durham & Darlington Fire & Rescue Service and North East Ambulance Service (NEAS). Both provided levels of assurance, through self-assessment and statements, and a commitment from NEAS to attend Board on an annual basis. It is particularly reassuring with the continuing pressures faced by public bodies as a result of austerity that the Board has continued to go from strength to strength. Through the continued commitment of agencies involved the Board can evidence that the highest priority is given to the safeguarding adults agenda indicative of the vital importance it has been afforded by the our partners. An expression of thanks is offered to all members of the Board for that continued commitment and support to the Board and its work.

Appendices

Appendix 1.

Organisation	Designated Role
	Independent Chair
Durham County Council	Head of Children's Services
	Head of Adult's Services
	Head of Commissioning
	Safeguarding & Practice Development Manager
	Strategic Manager Housing
Durham County Council	Cabinet Member and Portfolio holder for Adult & Health Services
Tees, Esk & Wear Valleys NHS Foundation Trust	Associate Director of Nursing Safeguarding
County Durham & Darlington NHS Foundation Trust	Associate Director of Nursing (Patient Experience and Safeguarding)
North Durham Dales, Easington and Sedgefield Clinical Commissioning Groups	Designated Nurse Safeguarding Adults
NHS England	Director of Nursing (via NDCCG Designated Nurse)
POLICE	Detective Chief Inspector
Care Quality Commission	Inspection Manager
Her Majesty's Prison Service	Head of Offender Management
National Probation Service	Head of Durham National Probation Service
Portfolio Holder	Councillor
Lay member	Lay Member
Age UK	Deputy Chief Executive
Healthwatch	Chief Executive

*Board membership is subject to continual review, for the period 2016 – 2017 membership includes, two new Lay Members, Higher/Further Education, Fire Service, Durham

Appendix 2



Strategic Plan 2015 – 2018

Our Vision

"We will support adults at risk of harm to prevent abuse happening; when it does occur, we will act swiftly to achieve good outcomes."

Strategic Priorities	Subgroup Leads	What we will achieve	Actions for 2016-2017
1. Performance Framework	Performance & Quality	Establish a performance framework that prescribes targets that are then met across the strategic priority areas of this plan and meet national performance requirements.	<ol style="list-style-type: none"> 1. Revisit and revise the format of the performance report i.e. incorporate partner data; 2. Refresh the annual self-assessment tool to include MSP. 3. Plan inter-agency challenge events on an annual basis to peer review self-assessment tools; 4. Identify a range of audit activities (inclusive of partners and develop a forward work plan of audits)
2. Care Act/ Legislative Compliance	Making Safeguarding Personal/Post Care Act T&F	Ensure our adult protection processes comply with legislative requirements and are person centred and outcome focussed.	<ol style="list-style-type: none"> 5. Monitor outcomes in line with national changes specifically in relation to risk reduced, removed, or remains; to ensure the analysis of qualitative information captures the autonomy of individuals/choice and control in line with MSP and the Care Act 2014; 6. Monitor and report on the impact of legal literacy training.
3. Prevention	Communications & Training; User/Carer Reference; Sexual Exploitation T&F.	Support people to identify and report signs of abuse and suspected criminal offences. This will involve training staff and considering how we make our local community safer in all our work. When abuse occurs, we will provide support aimed at removing or reducing risks or reoccurrence.	<ol style="list-style-type: none"> 7. Analysis of Training Needs Survey to establish a baseline for development of the multi-agency training strategy; 8. Monitoring and evaluation of the impact of training to be included in an annual Training Report that illustrates and evidences wider workforce knowledge 9. Embed feedback from users/carers to inform learning and development. 10. Monitor and report on proposed the sexual exploitation e-learning training.

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4. User/Carer Voice	Performance & Quality; User/Carer T & F; User/Carer Reference.	Ensure the user's voice is heard throughout the adult protection process and user feedback is used to inform future practice. Where an individual lacks capacity, we will act in their best interests.	<ul style="list-style-type: none"> 11. Rollout of Advocacy survey to establish illustration of advocacy view on safeguarding processes and achieving outcomes; 12. Development of a user/carer engagement/reference group to include (not exhaustive to) experts by experience, voluntary sector, faith communities, hard to reach groups and Healthwatch. 13. Development of communication and engagement strategy by the user/carer task and finish group; complete; 14. Engagement opportunities/events to be devised in forward event plan to complement strategy – progressed; 15. Analysis of engagement, consultation and participation and its impact to be included in reporting to Board.
5. Awareness	Communication & Training; User/Carer Reference.	Establish and maintain a wide range of awareness raising initiatives across partner agencies that provide individuals with the right information about how to recognise abuse and how to keep themselves safe.	<ul style="list-style-type: none"> 16. Improve awareness and responses to safeguarding surveys through consistent approach following LA restructure, and Communication & Engagement strategy and work of User/Carer Task & Finish group; 17. Peer review training to be undertaken by Business Manager and peer review activity to be planned; 18. Annual event to be organised and promotion of radio campaign
6. Partnership Engagement	Communication & Training; Performance & Quality	Ensure that partners are fully engaged and fulfilling their resources in achieving the objectives of SAB. In doing so, foster a 'one team' approach that places the welfare of individuals before the 'needs' of the system.	<ul style="list-style-type: none"> 19. Explore broadening membership to CRC's, faith communities, Fire Service, voluntary sector. 20. Completion of self-assessment tools; 21. A composite action plan to be developed from self-assessment tools (and to ensure carry over actions from previous tool are incorporated). 22. Further development of MA training strategy and programmes; 23. Reinvigorate regional training group; 24. Work with commissioners to develop safeguarding elements for provider self-audits; 25. Explore reciprocal audit opportunities with partners; 26. Embed attendance reporting within performance report and strengthen compliance reporting on six monthly basis with partner contributions to work plans. 27. Include partner activity reporting into forward calendar for SAB.
7. Learning Lessons and Improvement	Learning & Improvement	Ensure learning from serious concerns investigations, including domestic homicide reviews influences practice development across all partner agencies.	<ul style="list-style-type: none"> 28. Work with NHS to develop process for mortality reviews, provide a report to SAB outlining options; 29. Explore joint reviews processes where Mental Health is a feature (e.g. MHH reviews, DHR's, SAR's and SCR's); 30. Develop high impact presentation methods for key learning e.g. SARs, reports.

Glossary

Abuse includes physical, domestic, sexual, psychological, financial, material, modern slavery, discriminatory, organisational, neglect, acts of omission, self-neglect.

ADASS (Association of Directors of Adult Social Services) is the national leadership association for directors of local authority adult social care services.

Adult Protection process refers to the decisions and subsequent actions taken on receipt of a referral. This process can include a strategy meeting or discussion, an investigation, a case conference, a care/protection/safety plan and monitoring and review arrangements.

Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain services they need.

Alert is a concern that an adult at risk is or may be a victim of abuse or neglect. An alert may be a result of a disclosure, an incident, or other signs or indicators.

Alerter is the person who raises a concern that an adult is being, has been, or is at risk of being abused or neglected. This could be the person themselves, a member of their family, a carer, a friend or neighbour or could be a member of staff or a volunteer.

Capacity is the ability to make an issue specific decision about a particular matter, at the time the decision needs to be made.

Care setting/services includes health care, nursing care, social care, domiciliary care, social activities, support setting, emotional support, housing support, emergency housing, befriending and advice services and services provided in someone's own home by an organisation or paid employee for a person by means of a personal budget.

Carer refers to unpaid carers, for example, relatives or friends of the adult at risk. Paid workers, including personal assistants, whose job title may be 'carer', are called 'staff'.

CQC (Care Quality Commission) is responsible for the registration and regulation of health and social care in England.

DoLS (Deprivation of Liberty Safeguards) are measures to protect people who lack the mental capacity to make certain decisions for themselves. They came into effect in April 2009 using the principles of the Mental Capacity Act 2005, and apply to people in care homes or hospitals where they may be deprived of their liberty.

Investigation is a process to gather evidence to determine whether abuse took place. This is co-ordinated by the Safeguarding Lead Officer.

Lead Officer is primarily a manager within Adults, Wellbeing and Health who co-ordinates the Safeguarding Adult strategy meeting, investigation, review, debriefing process and lessons learned from safeguarding.

Mental capacity refers to whether someone has the mental capacity to make a decision or not.

NHS (National Health Service) is the publicly funded healthcare system in the UK.

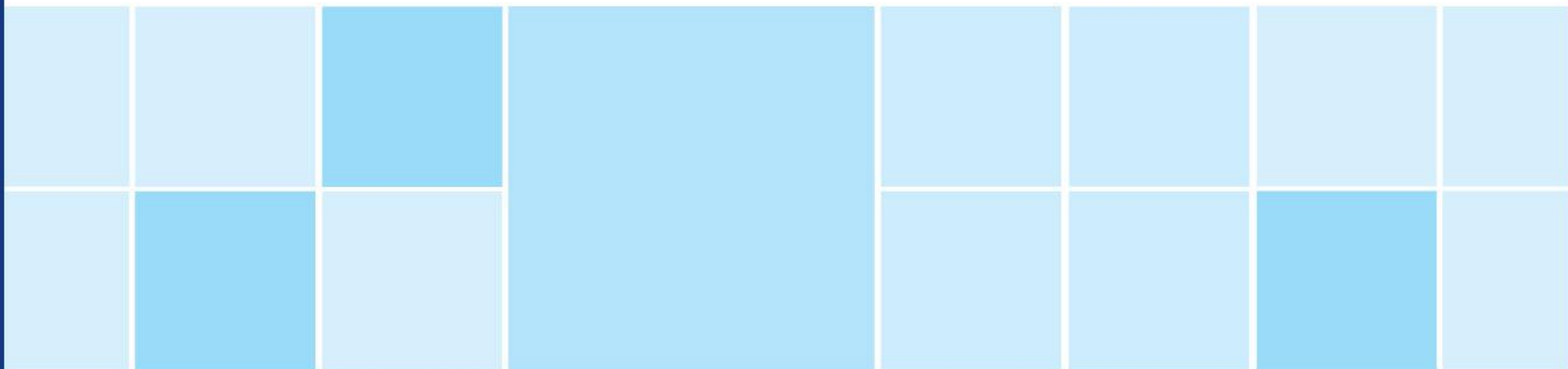
SAB (Safeguarding Adults Board) represents various organisations in a local borough who are involved in safeguarding adults.

Safeguarding Adults Review is undertaken by a Safeguarding Adults Partnership Board (SAPB) when a serious case of adult abuse takes place. The aim is for agencies and individuals to learn lessons to improve the way in which they work.

SI (Serious Incident) is a term used by the National Patient Safety Agency (NPSA) in its national framework for serious incidents in the NHS requiring investigation. It is defined as an incident that occurred in relation to NHS funded services resulting in serious harm or unexpected or avoidable death of one or more patients, staff, visitors or members of the public.

Wilful neglect is an intentional or deliberate omission or failure to carry out an act of care by someone who has care of a person who lacks capacity to care for him/herself.

Safeguarding Adults Annual Report 2015/16



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