

3.2.03 Safeguarding Adults

Introduction: why is this important?

Government guidance was issued by the Department of Health and the Home Office in 2000 laying out a framework for multi-agency work to prevent and address abuse and neglect of “vulnerable adults”. This guidance has now been replaced by The Care Act, 2014, which establishes adult safeguarding on a statutory basis. The Care Act sets out 6 principles that the Safeguarding Adults Board (SAB) and their partners need to consider, which are:

- Empowerment
- Prevention
- Protection
- Proportionality
- Accountability
- Partnership

The Bradford Safeguarding Adults Board (SAB) is a multi-agency partnership that leads on the development of safeguarding adults work in the Bradford District. The main purpose of the Board is to make sure that adults aged 18 and over with care and support needs because of their age, disability or illness who are not able to effectively protect themselves from abuse, are properly safeguarded. Membership includes representation from the main statutory agencies Bradford Council, NHS organisations, Police, Probation and Fire Service, the housing sector and from independent and voluntary sector organisations.

In 2014 the West Yorkshire Multi-Agency Safeguarding Adults Policy and Procedures were approved and implemented by the Safeguarding Adults Board in Bradford. These provided a firm platform on which to continue to build partnership and cooperative working. From October 2014 to April 2015 the Board ensured that the policy & procedures reflected the Care Act (which became law in April 2015). This significant piece of legislation places emphasis on cooperative working and the effective sharing of information to keep people safe. A significant aspect of this change was the introduction of ‘making safeguarding personal’ which ensures that the safeguarding processes and professionals listen and reflect the views of adults at risk in any measures that are taken to protect them. ‘Making safeguarding personal’ is only truly effective if all agencies work together in partnership and have a shared understanding of this significant change in culture. The adult protection process has always provided the basic framework for cooperation between partner agencies in protecting adults at risk. These significant changes in policy and legislation endorse and strengthen the work of the Adult Protection Unit.

What do the facts and figures tell us?

All data regarding safeguarding adults can be found within the Bradford Safeguarding Adults Annual Report (<https://www.bradford.gov.uk/adult-social-care/adult-abuse/safeguarding-adults-board-sab/>)

What strategies, policies and best practice have been developed locally and nationally?

- Crime and Disorder Act 1998
- No secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse 2000, Department of Health and Home Office
- Mental Capacity Act 2005
- Safeguarding Adults: A National Framework of Standards for good practice and outcomes in adult protection work 2005, Association of Directors of Adult Social Services

- Safeguarding Vulnerable Groups Act 2006
- UK Study of Abuse and Neglect of Older People: Prevalence Survey Report 2007,
- Department of Health and Comic Relief
- Vulnerable and Intimidated Witnesses Practice Guide 2007, Office for Criminal Justice
- Reform
- Detailed information regarding adult safeguarding information (Safeguarding Adult Board Annual reports, performance data, safeguarding procedures etc.), can be found at:- <https://www.bradford.gov.uk/adult-social-care/adult-abuse/safeguarding-adults-board-sab/>
- The Law Commission's Report into Adult Social Care, May 2011
- The Care Act, 2014, Department of Health found at:- <http://www.dh.gov.uk/>
- West Yorkshire Multi-Agency Safeguarding Adults Policy and Procedures
- <https://www.bradford.gov.uk/adult-social-care/adult-abuse/safeguarding-adults-policy-and-procedures/>

What challenges have been identified in a local context?

- Increase capacity to champion safeguarding adults work and to provide professional advice to staff in partner organisations in the district
- There is a very low rate of prosecution of crimes towards "adults at risk". The police need the capacity to respond to the complexity of cases where victims are often unable to give a clear and reliable account of what has happened to them
- The district would benefit from full implementation of the best practice of "Achieving best evidence", enabling vulnerable witnesses to access the criminal justice system, including the use of intermediaries to carry out joint police and health and social care investigative interviews of vulnerable witnesses
- Increase capacity and introduce new approaches to provide the full range of training needed to successfully implement this work, particularly multi-agency training to professional staff, such as social workers and nurses working with people who are living in abusive situations
- Safeguarding needs to be embedded in all elements of personalisation, including risk assessment in support plans, monitoring and review processes, and appropriate information and support to service users should those employed to provide care become abusers
- There is a need to ensure that mainstream services that addressing domestic violence and sexual abuse are accessible for disabled and older women and create services that meet the needs of disabled and older men who have been abused. There is a need to develop services that enable disabled people and those with impaired mental capacity to recover from abuse
- There is a need to ensure all service users have easy access to information about how to get help if they are experiencing abuse. This needs to be provided in diverse formats to meet the access needs of the people affected. The need for a "one point" referral centre has been identified by both staff and service users
- The district would benefit from an awareness raising campaign in neighbourhoods and communities amongst members of the public
- The views of service users who have experienced abuse need to be captured and fed back to develop better safeguarding practices

What do our stakeholders tell us?

During 2014/15, **Yorkshire Ambulance Service** worked in collaboration with care homes to ensure that residents receive the right care, for example, This included improvements to the quality work around the falls strategy. Yorkshire Ambulance Service have also identified a designated safeguarding lead to represent them on all Safeguarding Boards; and refreshed staff training on management and reporting of domestic abuse incidents.

Bradford District Care Trust has representatives on the Safeguarding Adults Board, the Delivery Group and all Safeguarding Adults Board Sub-groups. The Trust has an arrangement for a

member of staff work act as a Safeguarding Coordinator in the local authority's Adult Protection Unit, which promotes a strong working relationship between these two partner organisations. Trust staff make a valuable contribution to the design and delivery of multi-agency safeguarding training. The Trust is part of the **Domestic and Sexual Violence Health Strategy Steering Group**, this group aims to ensure that local health services enable adults to get the help they need at the earliest opportunity.

NHS England has responsibility for sharing learning from safeguarding serious incidents across Yorkshire and the Humber region. This enables us to continuously improve local health services. This means that improvements are made across the regions health services, not just within the services where the incident occurred. The NHS England West Yorkshire Safeguarding Forum has met on a quarterly basis to share learning. In addition learning was shared across GP practices via quarterly Safeguarding Newsletters.

A standard operating procedure, for safeguarding incidents, was developed to establish a strong governance framework surrounding safeguarding incidents NHS England Yorkshire and Humber. This sets out NHS England's role and responsibilities in quality assuring reports and improvement take place. This ensures NHS England is able to deliver their statutory duties in relation to safeguarding.

The Bradford Teaching Hospital Foundation Trust's Adult Safeguarding Lead meets regularly with the hospital based social work team to promote partnership working. Educational sessions on the scams and frauds safer initiative and the 4 women service, have been delivered to frontline workers. NHS Trusts must report all cases of Female Genital Mutilation. Joint work resulted in a pathway for reporting and the facilitation of joint training to raise awareness. Domestic Violence guidance has been produced for health care professionals. Joint work has begun to develop a Domestic Violence and Abuse policy to safeguard victims and families.

Police continue to work with the local authority Adult Social Care department and the NHS to prevent and detect abuse and safeguard those at risk. Risk conferencing takes place through the multi-agency process in Bradford. This has been nationally recognised as an example of good practice.

National Probation Service identifies abuse through offender management and Multi-agency Public Protection Arrangements and shares information with the responsible authorities and statutory agencies. When an offender who presents a risk is identified they are discussed at multi-agency meetings and information is shared with the relevant authorities. Lessons from cases where serious further offences have been committed are disseminated.

The **Director of Collaboration** represents the Clinical Commissioning Groups at an executive level on the Bradford Safeguarding Adults Board. In the Bradford District, the Head of Safeguarding Adults and Safeguarding Manager (Adults) chair two of the Board's sub-groups and actively contribute to the work of the other sub-groups and the wider Board. The Clinical Commissioning Groups' safeguarding team contributes to the design and delivery of multi-agency safeguarding adults training. They regularly attend the DoLS panel to support and advise the Deprivation of Liberty Safeguarding team, particularly in relation to complex cases within the NHS.

The Clinical Commissioning Groups' safeguarding team has worked with colleagues across the three Clinical Commissioning Groups, providers and through the Safeguarding Boards. This ensures a coordinated response to emerging safeguarding issues, including the Savile enquiry and preventing violent extremism. The Clinical Commissioning Groups' safeguarding team worked with local partners in preparation for the Care Act (2014). The Act reinforces the need for flexible and person centred approaches to safeguarding adults, as well as setting out requirements for Clinical Commissioning Groups and other agencies as partners on the now statutory safeguarding Adults Boards.

Recommendations: What do we need to do? How do we ensure this remains a priority?

Governance and Partnership

Ensure that Safeguarding Adults Board (SAB) governance structures and arrangements are strengthened and are robust to enable it to fulfil its strategic role in leading inter-agency partnership working at all levels of safeguarding adults work. It is important to note that partner agencies now have statutory safeguarding duties within The Care Act, 2014, and also must understand and comply with the West Yorkshire Adult Safeguarding Policies and Procedures (which also reflect The Care Act). Agencies and their workers must understand how to recognise abuse, how to respond to it (and report it) appropriately, and have policies and procedures which promote and support effective responses to abuse within their own organisations.

Practice and Quality Standards

Ensure that safeguarding practice is of a high standard in line with agreed policy and procedures and commissioning standards

Empowerment and Engagement

Ensure that people know how to access safeguarding and are supported through the safeguarding process. Also that people have the opportunity to participate fully in the safeguarding process. This is more than consultation and is partnership in the safeguarding process. It is referred to as '*Making Safeguarding Personal*' (MSP) and is an essential and integral element of the Safeguarding element of the Care Act, 2014.

Workforce development

Ensure that a wide and varied range of training and development opportunities are available for frontline staff and managers across all agencies to support the safeguarding of vulnerable adults.

References

The Care Act, 2014,

West Yorkshire Multi-Agency Safeguarding Adults Policy and Procedures, 2015.

<https://www.bradford.gov.uk/adult-social-care/adult-abuse/safeguarding-adults-policy-and-procedures/>

Bradford Adult Safeguarding Board, Annual Report, 2014-2015

<https://www.bradford.gov.uk/adult-social-care/adult-abuse/safeguarding-adults-board-sab/>