Safeguarding Adults

Executive Summary

The Local Authority has a responsibility to take action to work in partnership with other key agencies in North Somerset to safeguard and protect vulnerable adults. This includes taking action to follow up any concerns that are raised.

From 2003 to 2009 there was a steady increase in the number of referrals alleging abuse of an adult at risk in North Somerset. Since 2009 the level has fluctuated slightly but no further significant increase has been seen. The total number of alerts for 2011/12 was 744. This compares to 734 in 2010/11. The percentage of alerts that become referrals (they do constitute an allegation of significant harm to an adult at risk) was 43% in 2011/12. This compares to 57% for national data in the same time period. The percentage of repeat referrals has dropped by 1% between 2010/11 and 2011/12.

The nature of abuse has been similar over recent years with the most common types of abuse being physical (31.89%), neglect (24.1%) and financial (15.1%). The pattern of abuse differs slightly to the pattern shown across the rest of England with a higher proportion of institutional abuse (19% North Somerset; 3% England) and a lower proportion of emotional / psychological abuse (9% North Somerset; 16% England).

The data for North Somerset is showing a similar pattern to the national data in relation to the percentage of referrals that are substantiated. North Somerset 2011/2012 report 38%; the national data reports 32% were substantiated. The number of referrals from Primary Health care is low.

North Somerset has a Safeguarding Adults Partnership Board with membership from all the key agencies. This Board meets regularly to: ensure the right polices and procedures are in place to respond to alerts; keep the adult involved in the process; ensure staff have the right training, and make sure information is shared. The number of concerns that are reported continues to steadily increase and all indications, based on the information we have about population growth is that they will continue to increase, therefore the Board also considers how best to target work to prevent abuse.

Challenges for consideration
The key challenges for consideration are:

1. To ensure that adults at risk are involved in the decision making about how to respond to allegations and involved in some of the more strategic work across the area. For example reviewing policies and designing factsheets;

2. To ensure that all adults potentially at risk in North Somerset know how to raise concerns, and;

3. To ensure that the North Somerset Policy is in line with any new legislation.

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Why is this important?

All adults may at sometime in their life be at risk from abuse. In situations where the adult is considered ‘vulnerable’, or an ‘adult at risk’ the local authority has a responsibility to act to investigate the concerns. A vulnerable adult / adult at risk is defined as any person aged 18 or over who is, or may be, in need of community care services by reason of mental or other disability, age or illness and who is, or may be, unable to take care of him/herself or unable to protect him/herself from significant harm or exploitation.

Nationally

The No Secrets guidance (Department of Health 2000) is currently the key Government guidance in relation to safeguarding adults. It places the lead responsibility on the Local Authority but recognises that for safeguarding and protection work to be successful partnership working is essential. This guidance will remain as statutory guidance until at least 2013.

The draft Care and Support Bill (2012) sets out the Governments intention to seek to legislate for Safeguarding Adults Boards, making them statutory. In sets out the six principles to govern their actions:

• Empowerment – taking a person-centred approach, whereby users feel involved and informed.
• Protection – delivering support to victims to allow them to take action.
• Prevention – responding quickly to suspected cases.
• Proportionality – ensuring outcomes are appropriate for the individual.
• Partnership – information is shared appropriately and the individual is involved.
• Accountability – all agencies have a clear role.

These principles are already adopted locally and form part of the Terms of Reference of the local Safeguarding Adults Partnership Board.

Locally

North Somerset has a well established Safeguarding Adults Partnership Board, currently as a voluntary arrangement, which has senior representation from statutory and non-statutory agencies. These include:

• North Somerset Council

• NHS Bristol, North Somerset and South Gloucestershire Cluster (until 31st March 2013)

• Avon and Wiltshire Partnership Trust

• Avon and Somerset Police

• Weston Area Health Trust

• North Somerset Community Partnership
- Residential and Nursing Care provider representative
- Domiciliary Care provider representative
- Avon Fire and Rescue Service
- Great Western Ambulance Service
- Probation Service
- Carer Representative
- Community Safety Board

Members of the Board meet quarterly to:

- Protect and empower adults at risk of harm, ensuring agencies work together to achieve this goal;
- Determine policy and facilitate training;
- Raise awareness of safeguarding adults;
- Monitor and review practice in relation to safeguarding adults in North Somerset;
- Promote best practice in the use of the Mental Capacity Act 2005, and;
- Promote use of Deprivation of Liberty Safeguards (DoLS).

The Board has an independent Chair.

The Board is supported by 4 sub groups which drive forward specific work and enable the Board to meet the targets identified within the Business Plan. Each Sub Group is accountable to the Board and provides an update on a quarterly basis. These Sub Groups are:

- Learning and Development
- Mental Capacity Act and Deprivation of Liberty Safeguards
- Communication and Publicity
- Policy, Procedure and Standards
What are the needs of the population?

From 2003 to 2009 a steady increase was seen in the number of referrals alleging abuse of an adult at risk in North Somerset. Since 2009 the level has fluctuated slightly but no further significant increase has been seen. The increase was most likely due to the raised awareness of adult safeguarding and the increase in training for staff.

Graph 1: Number of Referrals 2003 - 2012

The local Safeguarding Adults Partnership Board considers the key messages from the data on safeguarding adult referrals on a quarterly basis and provides a summary of these within the Annual Report. The key messages for the year 2011 / 2012 are:

- The total number of alerts for 2011 / 2012 was 744; this compares to 734 (2010 / 2011).

- The percentage of alerts that become referrals (they do constitute an allegation of significant harm to an adult at risk) was 43% (2011 / 2012); this compares to 57% for national data (2010 / 2011).

- The percentage of repeat referrals has dropped by 1% between 2010 / 2011 and 2011 / 2012. A repeat referral is when a safeguarding referral is made concerning an adult at risk who has previously been the subject of a separate safeguarding referral during the same reporting period.

- Compared to the data for 2010 / 2011 there has been a rise in referrals from ‘out of county placements’ (people placed in services in North Somerset by funded by other Local Authorities). This is likely to be a consequence of the increase in the use of North Somerset placements in North Somerset by other Local Authorities.

- The distribution of referrals across the categories of the Nature of Abuse for the year 2011 / 2012 is similar to the distribution seen for the year 2010 / 2011 and similar to patterns reported in national data. There has been a rise in the
number of instances of Discriminatory Abuse which may point to better recording and reporting of Discriminatory Abuse. See table below.

Table 1: Referrals by Nature of Abuse

<table>
<thead>
<tr>
<th>Nature of Abuse:</th>
<th>2008-2009</th>
<th>2008/9 % of total</th>
<th>2009-2010</th>
<th>2009/10 % of total</th>
<th>2010-2011</th>
<th>2010/11 % of total</th>
<th>2011-2012</th>
<th>2011/12 % of total</th>
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<tbody>
<tr>
<td>Physical</td>
<td>101</td>
<td>28.5%</td>
<td>106</td>
<td>31.9%</td>
<td>147</td>
<td>28.6%</td>
<td>127</td>
<td>31.9%</td>
</tr>
<tr>
<td>Sexual</td>
<td>15</td>
<td>4.2%</td>
<td>28</td>
<td>8.4%</td>
<td>27</td>
<td>5.3%</td>
<td>23</td>
<td>5.8%</td>
</tr>
<tr>
<td>Emotional/Psychological</td>
<td>37</td>
<td>10.5%</td>
<td>30</td>
<td>9.0%</td>
<td>46</td>
<td>8.9%</td>
<td>36</td>
<td>9.0%</td>
</tr>
<tr>
<td>Financial</td>
<td>68</td>
<td>19.2%</td>
<td>78</td>
<td>23.5%</td>
<td>78</td>
<td>15.2%</td>
<td>60</td>
<td>15.1%</td>
</tr>
<tr>
<td>Neglect</td>
<td>96</td>
<td>27.1%</td>
<td>63</td>
<td>19.0%</td>
<td>116</td>
<td>22.6%</td>
<td>96</td>
<td>24.1%</td>
</tr>
<tr>
<td>Discriminatory</td>
<td>2</td>
<td>0.6%</td>
<td>0</td>
<td>0.0%</td>
<td>1</td>
<td>0.2%</td>
<td>5</td>
<td>1.3%</td>
</tr>
<tr>
<td>Institutional</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
<td>99</td>
<td>19.3%</td>
<td>51</td>
<td>12.8%</td>
</tr>
<tr>
<td>Multiple Abuse</td>
<td>35</td>
<td>9.9%</td>
<td>27</td>
<td>8.1%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>354</td>
<td>100%</td>
<td>332</td>
<td>100%</td>
<td>514</td>
<td>100%</td>
<td>398</td>
<td>100%</td>
</tr>
</tbody>
</table>

- The pattern of referrals differs slightly to the pattern shown across the rest of England (2010/11 AVA Report) which is possibly due to the number of Care Homes in North Somerset where institutional abuse would be an increased factor. See table 2 below.

Table 2: Referrals by Nature of Abuse compared to England in 2010/11

<table>
<thead>
<tr>
<th>Nature of Abuse:</th>
<th>North Somerset</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>29%</td>
<td>30%</td>
</tr>
<tr>
<td>Sexual</td>
<td>5%</td>
<td>6%</td>
</tr>
<tr>
<td>Emotional/Psychological</td>
<td>9%</td>
<td>16%</td>
</tr>
<tr>
<td>Financial</td>
<td>15%</td>
<td>20%</td>
</tr>
<tr>
<td>Neglect</td>
<td>23%</td>
<td>23%</td>
</tr>
<tr>
<td>Discriminatory</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Institutional</td>
<td>19%</td>
<td>3%</td>
</tr>
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</table>

- The level of referrals for people from a category other than ‘White British’ is 5.6%; this has remained at a similar level to 2010/11. Based on the knowledge of the population this suggest there is a need to ensure awareness is raised in minority ethnic groups and steps are being taken to address this.

- The data for North Somerset is showing a similar pattern to the national data in relation to the percentage of referrals that are substantiated. North Somerset 2011 / 2012 report 38%; the national data reports 32% were substantiated.

- The number of referrals from Primary Health care is low. Further work is currently being undertaken to investigate the reason for this.

- There were 14 Whole Home Safeguarding Investigations active through the year April 2011 to March 2012. In all cases North Somerset Council led the investigation into the alleged abuse in partnership with the relevant multi-
agency partners. Where people were placed within the services from commissioning bodies outside of North Somerset the relevant people were contacted and invited to be part of the investigation and response.

It is difficult to estimate of the total population how many could be considered ‘vulnerable adults’ or ‘adults at risk’. The most recent population figures for North Somerset estimate a population of 212,194 (Office of National Statistics, 2010). Of this total population 169,087 are aged 18+ and 43,505 are aged 65+. In 2011/12 the number of people who received services from Social Care was 5,017 (2.97%). The number of safeguarding referrals represented 0.19% of the 18+ population, and included vulnerable adults who were either receiving services funded by themselves or by another council, or health, or who were not receiving services at all.

Since 2003 the average rise in the number of referrals received for ‘Safeguarding Adults’ has been 23.2%, partly due to improved recording and also awareness of safeguarding adults at risk from abuse. This coupled with the predicted growth of the 65+ population would suggest that the number of alerts and resulting referrals for ‘Safeguarding Adults’ will continue to increase.
Current service provision

In response to the No Secrets guidance (May 2000) North Somerset Council produced North Somerset’s Policy and Procedures to instruct practitioners on how to respond to alerts of abuse. This Policy and Procedure is available to all Partner Agencies. Alongside the Policy sits guidance documents to provide additional clarity and advice to workers. Such guidance includes areas such as:
- Positive Risk Taking, and;
- Involving Informal Carers in Safeguarding.

In accordance with the Policy an appropriately trained worker is allocated to all safeguarding alerts / referrals and they work with staff from all the key agencies (health, social care and police). Safeguarding is considered integral to the work of all practitioners and the lead person for any referral is determined by the primary needs of the service user and their commissioning team.

Specialist training is mandatory to all staff supporting vulnerable adults across North Somerset. The Learning and Development Sub Group monitor the implementation and effectiveness of the training. They also work with Partner Agencies to ensure staff are trained in accordance with national competencies and that training commissioned from independent providers support this.

Advocacy support is available to all adults at risk identified as part of the safeguarding referral process.

What do people think?

Feedback is sought on the work of the Safeguarding Adults Partnership Board in a variety of ways due to the range of stakeholders involved and interested in the work.

Adults at Risk

Locally, to date, there is limited feedback from adults who have been part of the safeguarding process. From the last audit undertaken it was evident that:
- Whenever possible, people should be aware of, and involved in the process;
- Alleged adults at risk should be offered an advocate to support them through the process, and;
- Alleged adults at risk should be informed of the outcome of any safeguarding process that has occurred.

The Partnership Board are committed to establishing a more structured and comprehensive approach to involvement of service users in the work of the Board and safeguarding more widely.

Providers

A local Providers’ Event held in October 2012 gave Providers the opportunity to feedback directly to Board members their experience of the safeguarding process, to enable learning and improvements to the process, and to facilitate sharing of good practise to prevent abuse. Proposals are being considered on actions this event has
identified and on the value of future events.

Councillors

The North Somerset Safeguarding Adult Partnership Board presents their Annual Report at a seminar for all elected Council members because they consider it an important area of work. The seminar provides Councillors, representing the residents of North Somerset, opportunity to comment on and discuss the content of the report. The Annual Report is approved by the Council Executive.

Governance

The Partnership Board is accountable to the People and Communities Board. The Annual Report is presented to this Board.

Other

The Safeguarding Adults Team accepts, whenever possible, opportunities to raise awareness of adult safeguarding across North Somerset. This includes presentations at local forums / groups; display boards in community venues; attending local community events to talk directly with the general public who attend. All such opportunities enable views of the wider population to be heard.

What works?

As promoted in No Secrets (May 2000) sharing information is essential to the success safeguarding work. Within North Somerset examples of good practice to promote sharing of information include:

- partnership working on joint health and social care referrals
- health and social care staff co-located
- regular meetings of key partner agencies to share intelligence and prevent escalation of concerns
- use of forums to promote good practice and share information
- joint facilitation of training
- access to training for all independent providers

Consistent with this North Somerset Safeguarding Adult Partnership Board recognise that they need to use local data, examples of good practice, lessons learnt from Serious Case Reviews as well as the recommendation from national reports to reduce the prevalence of abuse.

Examples of the work of the Safeguarding Adults Partnership Board include:

- The implementation of a local procedure to monitor the number of alerts and referrals within Care Homes / linked to a Provider. This information is shared with partners where appropriate. Monitoring this enables patterns to be detected and provides a basis for further analysis where necessary to ensure appropriate people are alerted in locations where institutional abuse may be occurring.

- Following the Panorama Broadcast in May 2011 about the shocking events at Winterbourne View the North Somerset Safeguarding Adults Partnership Board
took appropriate action immediately to ensure that all the requirements of the interim reports were met. The Board are currently overseeing an Action Plan to implement the recommendations from the Serious Case Review.

- The Board reviewed their Terms of Reference and included the principles of Adult Safeguarding outlined in the Statement of Government Policy on Adult Safeguarding (DH 2011).

- The Board made good use of the South West Quality and Performance Framework to assess their performance as a board and as individual organisations. This enabled the business planning and priority setting to be sharpened.

- Following Winterbourne View the profile of Whistle Blowing has increased. As part of their response to this the North Somerset Safeguarding Adults Partnership Board requested that all partners ensure they have Whistle Blowing policies and procedures which are suitable and fit for purpose and that consideration be given to how reports from whistle blowers would be received and how the whistle blower will be supported.

Challenges for consideration

In response to the financial impact of the Comprehensive Spending Review in 2010 all public sector partners have experienced a time of continuing change and adaptation. This has challenged the Safeguarding Adults Partnership Board through changes in representation but thankfully it has not diminished the commitment to work jointly to address safeguarding issues. The Business Plan details the planned work of the Partnership Board. The key priorities for 2012 – 2013 are:

Engagement with service users: ensuring that service users have a voice on the North Somerset Partnership Board and they are able to contribute to the development of policy and procedure.

Review the Factsheets and Information available to service user and carers: linking to greater involvement there is a need to ensure information is available to explain that a safeguarding referral has been made and what this means.

Develop links to Black and Ethnic Minority Groups in North Somerset: there is a need to ensure that there is awareness of safeguarding within these groups and confidence that concerns would be reported.

Respond to the new legislation: North Somerset No Secrets Policy must continue to meet legal and national requirements. This includes, but is not exclusive to:

- Implementation of the outcomes of the No Secrets Consultation;
- The requirements on Safeguarding within the new Health and Social Care Bill,
### Version Control

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**References and data**


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Guidance on the Statutory Chief Officer Post of the Director of Adult Social Services Department of Health May 2006

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‘A Vision for Adult Social Care’ DoH 2010

Draft Care and Support Bill, Department of Health July 2012

[www.n-somerset.gov.uk](http://www.n-somerset.gov.uk)