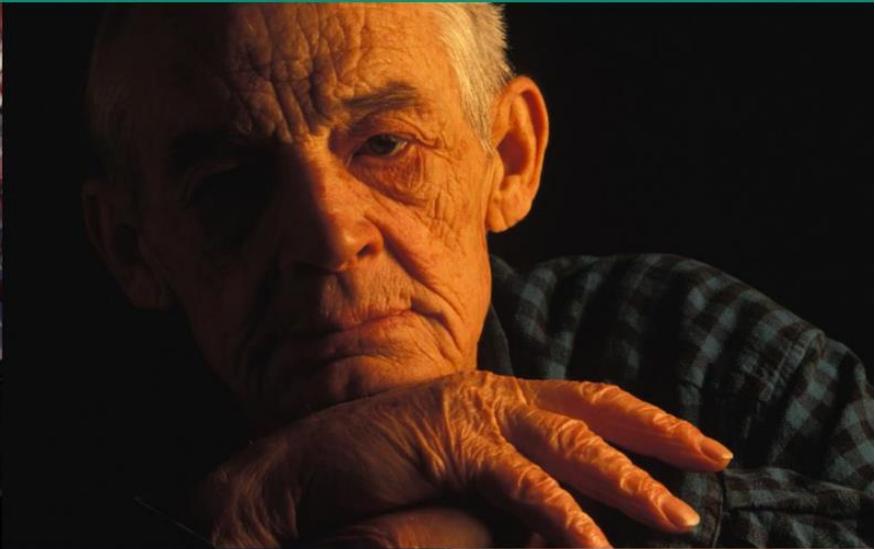


Safeguarding Adults Annual Report 2018/19



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Executive Summary

Safeguarding Adults is a strategic priority for West Berkshire Council and a core activity of Adult Social Care.

2018/19 has been an exceptionally busy year for the Safeguarding Adult Service in West Berkshire council. Delivery of the safeguarding function is shared between the operational social care teams who complete the majority of investigations into allegations of abuse and a small safeguarding team that provide a triage and scrutiny function, signing off all investigations and leading on investigations into organisational abuse. They also coordinate the response in relation to Deprivation of Liberty Safeguards (DoLS).

The Service has had some significant personnel changes in the past twelve months. There is now a permanent Service Manager in post and investment in the service has led to the recruitment of a Safeguarding Social Worker and part time admin support within the service. Two qualified Best Interest Assessors (BIA) are now based within the Safeguarding Service which allows us to build some ongoing capacity within the service and assist and support BIAs based within the locality teams.

We have now been using a threshold decision making tools for over twelve months and as a result have been able to capture the large amount of work that we do as a service with concerns which so not meet the S42 Enquiry threshold, however do require sign-posting or liaison with other professionals to support the person or their Carer. We have seen an increase of safeguarding concerns of 46% in 2018/19 compared to the previous year. Completed S42 Enquiries has risen by 72% over the same period.

Organisational Safeguarding has been a particular pressure on the service over the past twelve months. We have had one local care home who were under an organisational safeguarding for over six months, two local domiciliary care providers who were also under organisational safeguarding and also one Berkshire wide provider who has been under a police investigation and serious provider concerns framework which West Berkshire Safeguarding Service has been the lead agency on.

Introduction

Safeguarding is a statutory responsibility for all Local Authorities and as such is a strategic priority for West Berkshire Council and core activity for Adult Social Care.

This annual report evidences the key measures and trends used to monitor activity for Safeguarding Adults in West Berkshire to ensure risks are being identified and managed appropriately. Utilising the set of indicators and statutory reporting requirements for 2018/19, analysis of performance has developed comprehensively across the year to produce this report.

This report also focuses on the activities of the safeguarding network in West Berkshire during the reporting year.

Networks

The Care Act 2014 required all Local Authorities to form a Safeguarding Adults Board (SAB) to provide the strategic overview and direction of safeguarding, provide governance and quality assurance to the process. This includes the commissioning of Safeguarding Adults Reviews when a person has died or been significantly harmed and the SAB knows, or suspects, that the death resulted from abuse or neglect.

West Berkshire Council is a member of the West of Berkshire Safeguarding Adults Board; a tri borough Board in partnership with Reading Borough Council and Wokingham Borough Council alongside other key stakeholders including, but not exclusively, Thames Valley Police, Berkshire Healthcare Foundation Trust, Royal Berkshire Hospital Foundation Trust and the local Clinical Commissioning Group. The SAB has produced its own annual report which can be viewed on its website www.sabberkshirewest.co.uk

The SAB Business Strategy 2018-21 has been redeveloped over the past six months and has now identified the following priorities:

Priority 1: We will provide the partnership with the tools and framework to work effectively with people who Self-Neglect.

Priority 2: The SAB will work collaboratively with Local Safeguarding Children Boards, Community Safety Partnerships and Health and Wellbeing Boards to provide the workforce with the frameworks and tools to work with Vulnerable Adults who are at risk of Domestic Abuse.

Priority 3: We will understand the main risks to our local population in regards to Targeted Exploitation and agree how best to equip the partnership to Safeguard vulnerable people against these risks.

Priority 4: The SAB will understand from key stakeholders, why there has been an increase in organisational safeguarding and seek assurance from commissioners, that there are adequate preventative measures in place that is consistent across the partnership where practical.

West Berkshire has implemented a new case management system, Care Director. This includes functionality that allows us to record and tracking safeguarding and Deprivation of Liberty Safeguard assessments. This will allow us to strengthen our oversight because we will be able to track and monitor case management as well as scheduling of DoLS reviews.

The Safeguarding Adults Board are developing the [business plan for 2018-21](#), to detail the way in which partner agencies will contribute to delivering agreed priorities, this will published on SAB website when available.

Volumes and Performance

Safeguarding activity

Concerns and S42 Enquiries

For 2018/19:

- 712 concerns were opened, this is a significant increase (46%) increase in number of Concerns opened
- 546 S42 enquiries opened, a 72% increase compared with 2017/18. Much of this increase is attributed to organisational investigations and provider concern

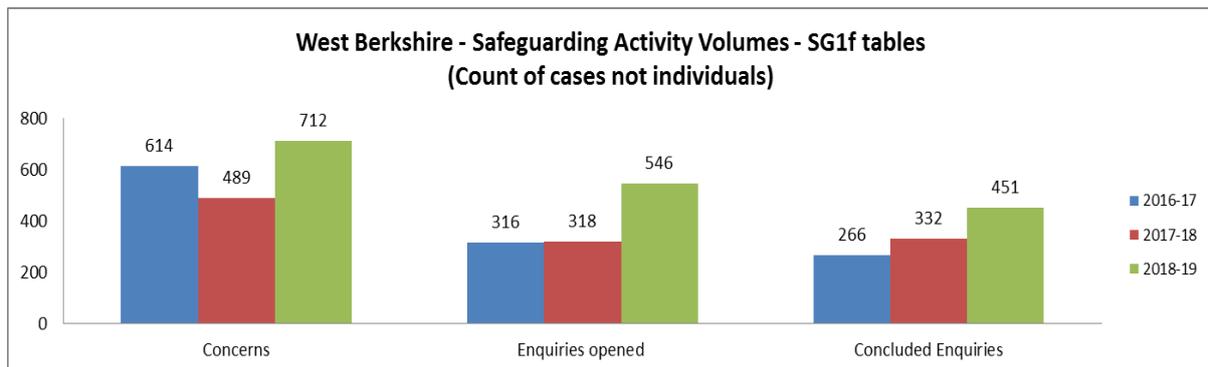
It should be noted that regardless of this streamlined process, **all** notifications received by the safeguarding adult's team deemed not to meet the threshold for Safeguarding (often social welfare concerns from providers) are referred onto the relevant Adult Social Care teams to ensure they are reviewed by the relevant service and appropriate action taken. Locally this is now being monitored to understand the true volume of activity that the Safeguarding team are working with. The data indicates a significant volume of activity and during 2018/19 in addition to those concerns that meet the threshold for safeguarding.

Department of Health guidelines are that when a care home provider is under Organisational Safeguarding, that a S42 Enquiry should be opened for ALL residents of that care home. This has had a significant impact on the levels of S42s opened as West Berkshire Council have undertaken this work as per the guidance. This has however identified significant differences in ways of working to our fellow West of Berkshire Safeguarding Adults Board colleagues. Reading and Wokingham Safeguarding Services have not formally opened a S42 Enquiry for all of those

residents in care homes under Organisational Safeguarding in their areas and therefore this will have an impact on the comparative data and on our SAC Returns.

Table 1 – Safeguarding activity for the reporting period 2016/17 – 2018/19

	Concerns	Enquiries opened	Concluded Enquiries	Concern to Enquiry Rate
2016-17	614	316	266	51%
2017-18	489	318	332	65%
2018-19	712	546	451	77%



Source – Safeguarding Adults Collection (SAC) statutory return SG1f tables and SG2 tables detail concluded enquiries

In some cases it is sufficient for the Local Authority to note the concern with no further action required. Noting those concerns that require no further action enable the Local Authority to spot trends and monitor patterns across the District. Section 42 of the Care Act determines that where a Local Authority receives a concern and has reason to believe a person within its area who has care and support needs and is experiencing or is at risk of abuse or neglect and by virtue of their care and support needs cannot protect themselves against that abuse or neglect, the Local Authority is required to make, or cause to be made, enquiries into that concern. These are known as, and reported as, S42 Enquiries

We monitor the % of concerns that subsequently require a S42 enquiry. This is known as a conversion. During 2018/19 546 s42 enquiries were opened, with an increased conversion rate from concern to s42 enquiry of 77%. All organisational investigations automatically had a S42 opened therefore increasing the conversion rate. Concluded Enquiries increased by 36%. Care Director provides the mechanisms to highlight all ongoing S42 investigations to ensure conclusion.

Individuals with safeguarding enquiries

Age group and gender

Tables 2 and 3 display the breakdown by age group and gender for individuals who had an s42 safeguarding enquiry in the last three years.

- The majority of enquiries continue to relate to older people - the 65 and over age group accounted for 72 % of enquiries in 2018/19.
- Higher proportion of 85+ opened (38%) - this has been impacted by the Organisational investigation at a Nursing home
- In line with national average greater proportion of safeguarding concerns received for females.

Table 2 – Age group of individuals with safeguarding enquiries opened, 2016/17– 2018/19

Table SG1a Opened s42 Enquiries	Number of individuals by age				
Classification	18-64	65-74	75-84	85+	Total
2016/17 Total	106	31	56	97	290
2017/18 Total	109	41	66	84	300
2018/19 Total	138	57	115	186	496

Table 3 – Gender of individuals with safeguarding enquiries opened, 2016/17– 2018/19

Table SG1b Opened S42 Enquiries	Number of Individuals by gender		
Classification	Male	Female	Total
2016/17	111	179	290
2017/18	133	167	300
2018/19	167	329	496

n.b. Tables 2 and 3 relate to the number of distinct individuals and will be less than the count of cases in table 1.

Primary support reason

Table 4 shows a breakdown of individuals who had a safeguarding enquiry by Primary Support Reason (PSR). The PSR refers to the Primary Support Reason in terms of the service being provided by Wets Berkshire Council and as many of the individuals within the care homes we have placed under Organization Safeguarding

are privately funded, we do not hold the PSR or commission a service for those individuals. Mental Health and LD has dropped significantly and the service is looking into this in depth. We will be working with our Mental Health and Learning Disabilities colleagues to try and understand why this has been such a large reduction.

Table 4 – Primary support reason for individuals with a safeguarding enquiry opened (SG1c)

Table SG1d Opened S42 Enquiries	Number of Individuals by PSR - Note individuals can have more than one PSR							
	Classification	Physical Support	Sensory Support	Support with Memory & Cognition	Learning Disability Support	Mental Health Support	Social Support	No Support Reason
2016/17	36%	3%	27%	17%	12%	4%	0%	2%
2017/18	32%	1%	25%	20%	8%	3%	12%	5%
2018/19	43%	1%	11%	9%	3%	1%	32%	0

2018/19 - S42 enquiries opened for 'No support reason' has further increased significantly from 2017/18 (32%). Guidance confirms, *"We would expect PSR to be determined through a social care assessment or review and then recorded on the local system. We do not expect local authorities to assess PSRs as part of the safeguarding process and therefore would expect PSR data to be taken from existing information on the local care management system."*

Where an individual was not receiving, nor did they need, any social services support at the time of the safeguarding incident, the PSR will remain unknown. There appears to be a high number of S42 cases that have no support reason as the PSR. In 2018/19 there were a number of organisational safeguarding investigations which West Berkshire took the lead for; many of these individuals did not receive a service direct from West Berkshire (self funders or funded by another Local Authority)

High WBC figure of No support reason, means that other PSR reasons have dropped.

Case details for concluded enquiries

Type of alleged abuse

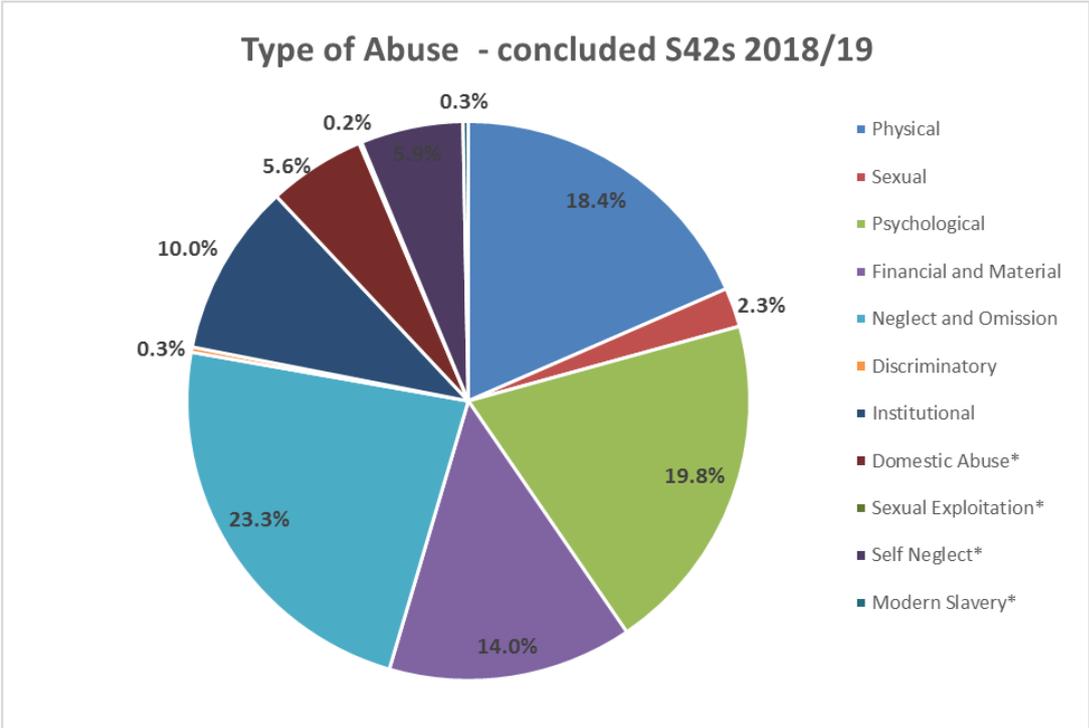
Table 5 shows concluded enquiries by type of alleged abuse in the last three years.

The most common types of abuse for 2018/19 were neglect and acts of omission 24%, Organisational abuse has seen a significant increase at 10% (8% higher than last year). As this only relates to concluded enquiries and an organisational investigation at a large Care Home is yet to conclude we expect this number to increase next year.

Table 5 – Concluded enquiries by type of abuse

Type of Abuse	2015/16	2016/17	2017/18	2018/19
Physical	74	78	92	122
Sexual	20	18	15	15
Psychological	66	84	82	131
Financial and Material	62	67	108	93
Neglect and Omission	86	100	120	154
Discriminatory	0	4	3	2
Organisational	7	9	14	66
Domestic Abuse*	28	22	32	37
Sexual Exploitation*	1	0	5	1
Self Neglect*	45	21	26	39
Modern Slavery*	0	0	0	2

Graph 1 - Type of abuse 2018 -19 by concluded enquiries



Location of alleged abuse

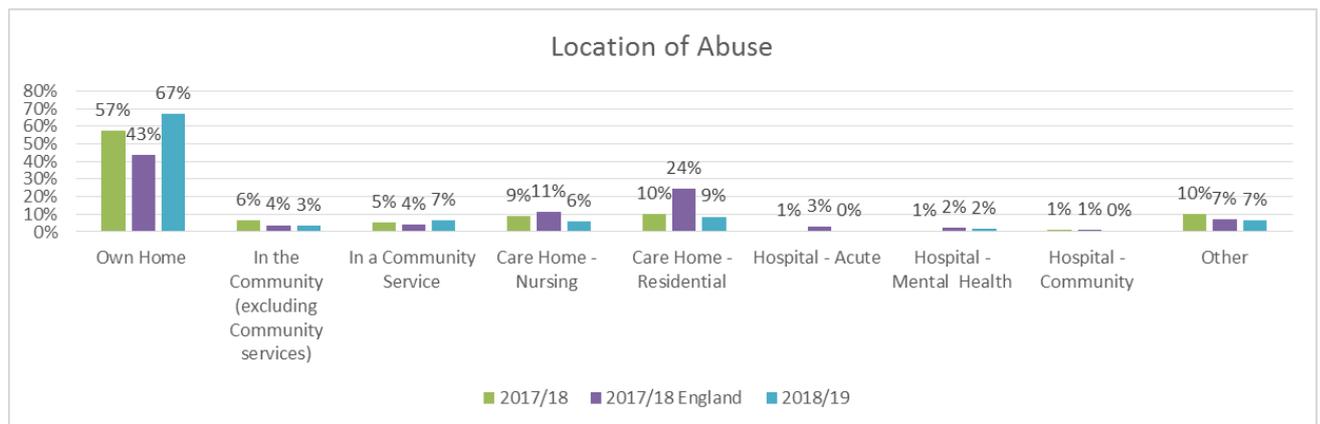
As with previous years the most common locations where the alleged abuse took place were a person's own home 67%. This is much higher than the national average, however consistent with national trends. This is a positive picture in terms of location and the fact that West Berkshire Council are reaching people when they are in their own homes rather than in another location, however it does give us food for thought and allows us to focus on the issues around safeguarding people in their own homes and who are the perpetrators of this abuse. This will be the basis for our work with domiciliary care providers next year.

A person's own home consistently remains the place in which an abusive incident is more likely to occur. This demonstrates the continual need to raise awareness of safeguarding amongst all sectors of society and improving mechanisms to report those incidents.

Table 6 – Location of abuse by concluded enquiries

Location of Abuse	2016/17	2017/18	2017/18 England	2018/19
Own Home	68%	57%	43%	67%
In the Community (excluding Community services)	3%	6%	4%	3%
In a Community Service	5%	5%	4%	7%
Care Home - Nursing	5%	9%	11%	6%
Care Home - Residential	10%	10%	24%	9%
Hospital - Acute	1%	1%	3%	0%
Hospital - Mental Health	3%	1%	2%	2%
Hospital - Community	0%	1%	1%	0%
Other	5%	10%	7%	7%

Graph 2 - Location of abuse 2018-19 by concluded enquiries



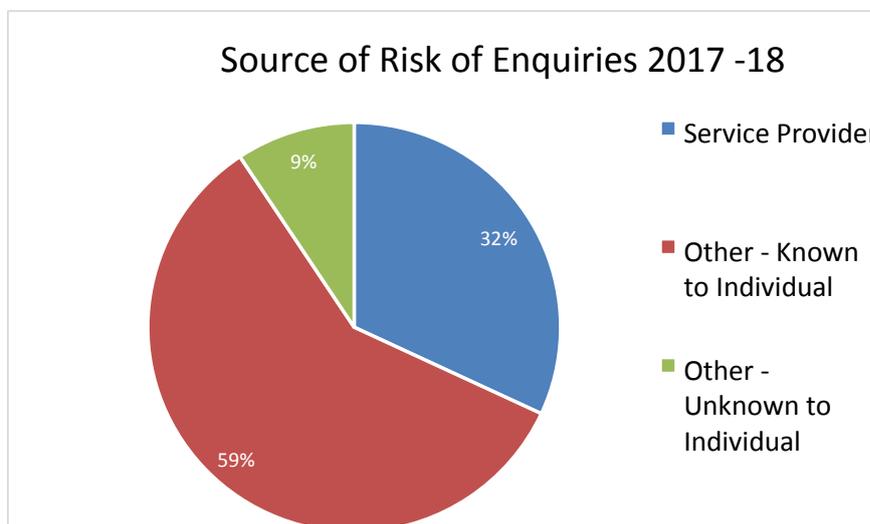
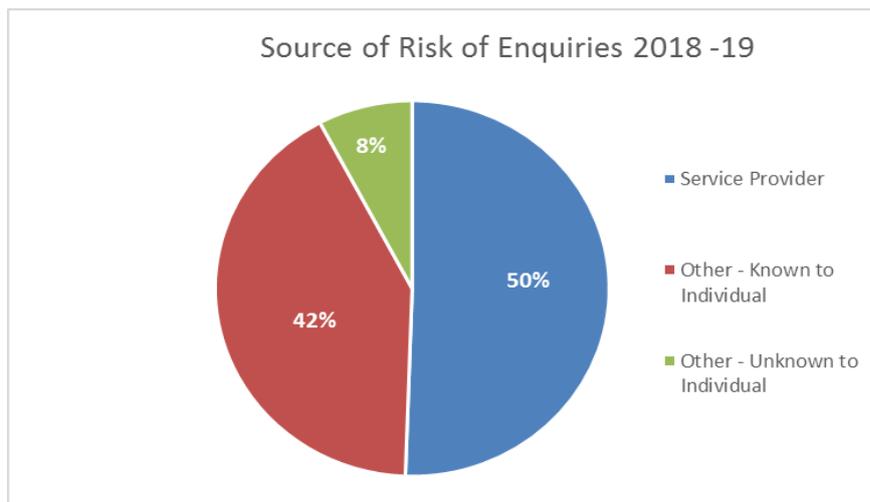
Source of risk

Graph 3 demonstrates those sources of risk for concluded enquiries.

The majority of concluded Safeguarding enquiries involved a source of risk known to the individual, only 8% were ‘unknown’. This is consistent with the National picture and will be further investigated and examined to inform us of the work required in the next year. Care Director is being set up to allow the service to identify “known” person in more detail and develop some data in regards to this.

In 50 % of cases the source of risk was a ‘service provider. The service provider support category refers to any individual or organisation paid, contracted or commissioned to provide social care. This is an increase from previous years.

Graph 3 – Concluded enquiries by source of risk



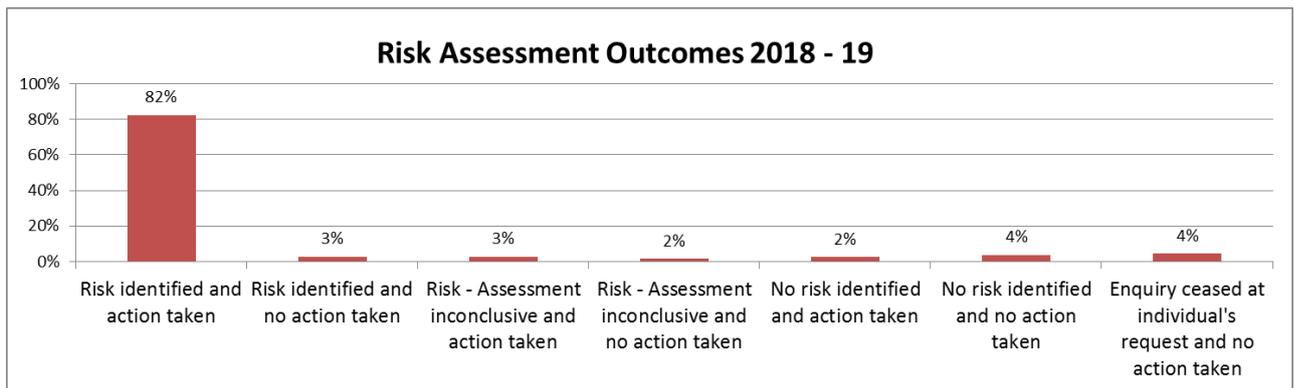
Risk Assessment Outcomes, Action taken and result

Management of risk data is drawn from concluded cases. Data has been initially drawn from the 451 concluded enquiries.

Risk identified and action was taken in the majority, 82%, of cases. Risk identified but no action was taken in just 3% of cases; there are times where an individual can refuse support / intervention and have the capacity to make such decisions.

For the remaining cases, the risk assessment was inconclusive, there was no risk identified or the enquiry ceased.

Graph 4 – Concluded enquiries by risk outcomes 2017 -18

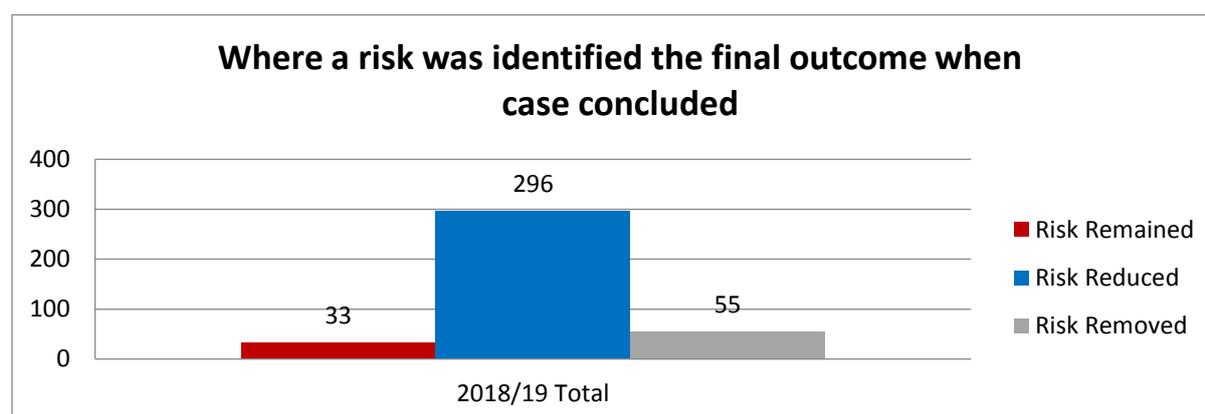


Outcome of concluded case where a risk was identified

Graph 5 shows where a risk was identified the final outcome. (Relates to 384 concluded enquiries)

Positively, risk was removed for 14% of cases and reduced for a further 77% of cases. Risk remains for only 9% of cases. It is acknowledged that there are some situations where an adult makes decisions that we don't necessarily agree with, but where they have capacity to make such decisions this needs to be respected. This is comparable with previous years.

Graph 5 – Concluded enquiries by result, 2017 – 18



Mental Capacity and Advocacy

In order to achieve good outcomes for individuals subject to a concern or enquiry, it is important to hear their voice. There is a statutory requirement to offer the services of an advocate to a person subject to a safeguarding intervention or review, where that person meets certain requirements if there is no other suitable person able to advocate (for example a close family member or friend if appropriate).

In 2018 -19, where the individual lacked mental capacity **94%** were supported by an advocate, family or friend. It should be noted the national average for providing advocates in England, recorded for 207/18, was 79%.

Making Safeguarding Personal

Making Safeguarding Personal (MSP) is a national initiative to improve the experiences and outcomes for adults involved in a safeguarding enquiry.

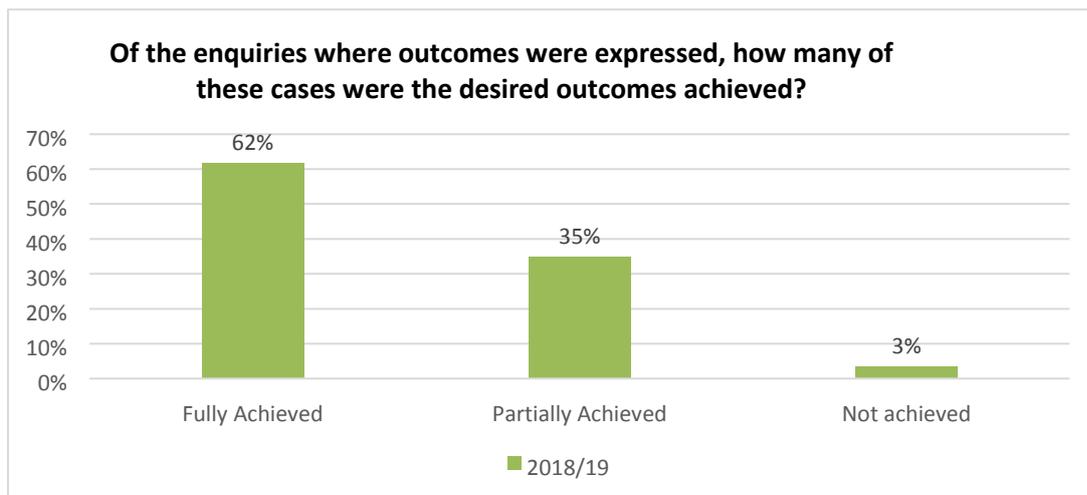
This initiative was adopted by the Government and enshrined in the Care Act 2014. By definition, a personal response to a safeguarding incident will mean different things to different people. Therefore obtaining data for outcomes has presented challenges. In 2018/19, 76% of all clients for whom there was a concluded case were asked about the outcomes they desired (either directly or through an advocate). Wets Berkshire Council has an excellent record in terms of referral for safeguarding advocacy which is well above the National average.

In order to benchmark usefully, options for outcomes were included as a guide, with an additional box for free text to capture those desired outcomes and wishes that were not reflected in the options provided. Clients can choose as many outcomes as they wish and so multiple choices are normal. The option 'to be and to feel safe' was most frequently selected.

Of those who were asked and expressed a desired outcome, 62% were able to achieve those outcomes fully, with a further 35% partially achieved.

The 3% who did not achieve their outcomes refers to individual who did not for a variety of reason engage in the safeguarding process. This cohort includes the difficult to engage group of service users and the Safeguarding Service and the Principal Social Worker are undertaking support and guidance for practitioners to enable them to more robustly safeguard these individuals.

Graph 7 – Concluded enquiries by expressed outcomes achieved.



Deprivation of Liberty Safeguards

The Deprivation of Liberty Safeguards (DoLS) is an amendment to the Mental Capacity Act 2005 and applies in England and Wales only. The Mental Capacity Act allows restraint and restrictions to be used – but only if they are in a person's best interests.

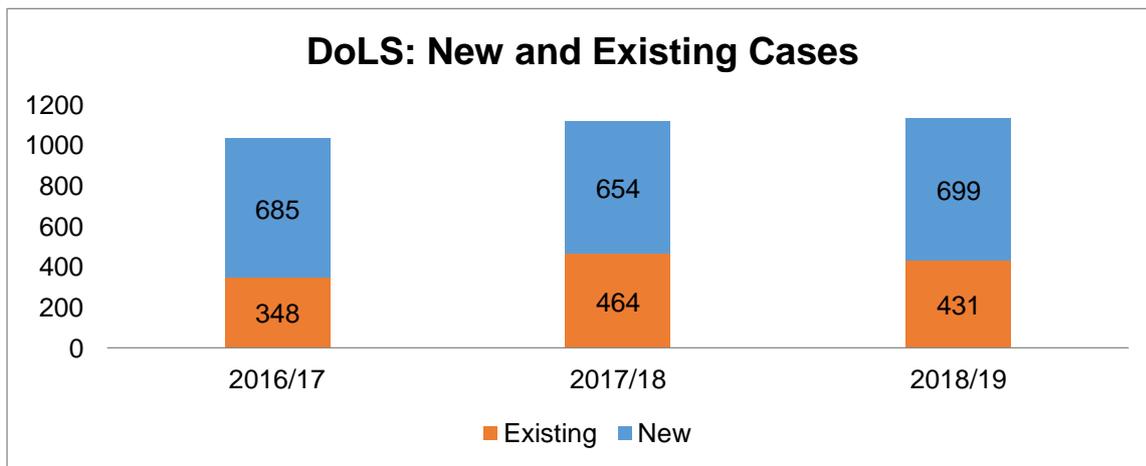
Extra safeguards are needed if the restrictions and restraint used will deprive a person of their liberty. These are called the Deprivation of Liberty Safeguards.

DoLS authorisations must be applied for by care homes, nursing homes or hospitals (The Managing Authority) where they believe a person is living in circumstances that amount to a deprivation of liberty and that person lacks the capacity to consent to their care, treatment and accommodation, in order to prevent them from coming to harm. They apply to the Local Authority (The Supervisory Body) whose role is to arrange for the persons circumstances to be assessed in order to determine whether to grant or refuse an authorisation for those circumstances. Those living in other settings must have their deprivation considered by the Court of Protection.

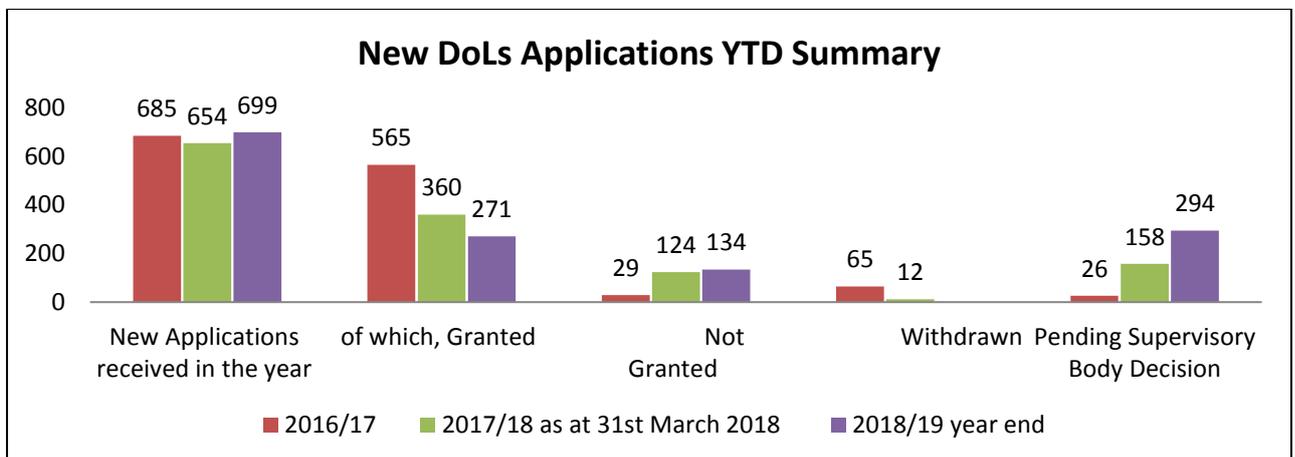
The table and graph below shows volume of applications

DoLS cases (new applications and existing cases)	2016/17	2017/18	2018/19
New and Existing	1033	1118	1130
<i>of which, New</i>	685	654	699
<i>Existing</i>	348	464	431

Graph 8 – Total number of DoLS applications received



New Applications by outcome



The number of 'pending' applications that we are reporting for 2018/19 is significantly higher than in previous years. Scrutiny and sign off or "Pending" has increased due to the resource to undertake this crucial work. Both the Service Manager and the Team Manager in the Safeguarding Service undertake the scrutiny of paperwork for DoLS applications and due to the increase in safeguarding enquiries; particularly Organisational Safeguarding, the focus of the service has been on keeping people safe and as a consequence the scrutiny and decision/sign off process has been very slow. This has however been addressed in April/May 2019 and this will be reported in next years Annual Report.

DoLS applications continues to rise nationally and remains an increasing pressure locally; as a service we are reviewing how applications are being managed.

The Future

The Safeguarding Service is working closely with the Adult Social Care staff to meet the needs of the population and their safeguarding responsibilities.

Audits continue to be completed of at least 10% of S42 Enquiries and the feedback from these will continue to feed into the training and support provided to the Adult Social Care Staff. It is hoped that standards of Enquiries will improve as a result of this.

It is anticipated that the introduction of a formal approach to risk management with our partners and the members of the Safeguarding Adults Board will enable us to prevent safeguarding incidents from occurring.

Going forward the Service is planning to work more closely with the Building Communities Together team, Public Protection, Trading Standards, Blue Light Service, MEAM, our new TVP Safeguarding Adults Officer and other agencies will enable the service to concentrate on prevention as well as completing reactive work.

This will include working alongside our Care Quality Team to support providers prior to them being found to be having safeguarding and care quality issues.