

Halton's Safeguarding Adults Board Annual Report 2011/12



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Don't turn your back on abuse



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**Dwayne Johnson**

Chair of Halton's Safeguarding Adults Board
Strategic Director, Communities Directorate,
Halton Borough Council

Foreword

Halton's Safeguarding Adults Board believes that the safeguarding of vulnerable people is everybody's business, with communities playing a part in preventing, detecting and reporting neglect and abuse.

Although safeguarding adults is a complex and challenging area of work, effective measures are in place locally to protect those least able to protect themselves.

As Chair of the multi-agency Board, I am pleased to present this Annual Report, which describes how organisations and individuals, across all sectors, are working together to safeguard vulnerable people.

As well as reporting on its work over the past year, the Board's Annual Report explains the national context in which we all operate and lists our priorities for the coming year.

The last twelve months have been very productive, with a number of developments introduced to help consolidate the results of the Safeguarding Inspection carried out by the Care Quality Commission in 2010, which concluded that Halton is performing excellently in respect of safeguarding adults.

Locally, partner agencies dealt with nearly 1,100 referrals of alleged abuse throughout the year, investigating those concerns, putting safeguarding arrangements in place and supporting people who found themselves in abusive situations.

We have continued to make important links to the Halton Domestic Abuse Forum and the Halton Safeguarding Children's Board agendas and have maintained our communication and scrutiny of what we do through the Local Strategic Partnership and the Shadow Health and Wellbeing Board.

I want to assure local people and partner agencies of our continuing commitment to this work, which is essential to the quality of life and experience of people whose circumstances make them vulnerable, and take the opportunity to thank all those involved for their vital contribution to this essential area of activity.



2. Halton Safeguarding Adults Board Vision

As a Board, our vision for adults who are vulnerable to abuse is encompassed in the following statements:

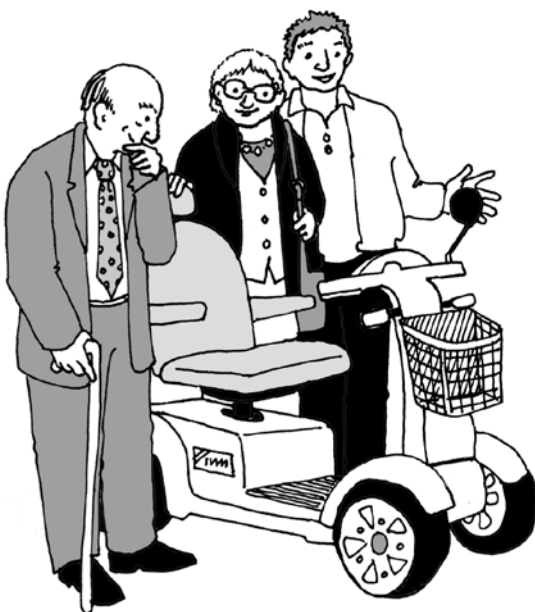
- “A Halton where vulnerable people are safe from abuse/harassment; empowered to make their own choices and choose risks, where professionals are supported and developed to deliver this.”
- “The Safeguarding Adults Board will lead and co-ordinate Multi-agency strategy and direction with energy and commitment, to achieve our shared vision.”
- “By working together with top-level commitment from all agencies, the Board will raise awareness and inspire positive changes in people’s lives.”

Partner agencies represented at the Board are committed to working to the following principles:-

All adults have a right to:

- Live their lives free from violence, fear and abuse;
- Be protected from harm and exploitation, and
- Independence, which involves a degree of risk.

Details of the Board’s Terms of Reference and Membership can be found at **Appendices 1 and 2** respectively.



3. National Context

There have been a number of national developments over the last twelve months that have impacted/will have an impact in the context of safeguarding adults. Some of these main developments are outlined below:

Law Commission’s Review

Following the publication in May 2011 of the **Law Commission’s Review** report into adult social care law being outdated and confusing, the Government has signalled the biggest reform of adult social care law in 60 years, which will mean sweeping changes to adult safeguarding and carers’ rights, and the extension of direct payments to residential care.

Among the Commission’s recommendations were:-

- A set of statutory principles setting out the purpose of adult social care;
- The introduction of direct payments for residential care;
- A statutory basis for adult safeguarding boards;
- A duty on Councils to investigate adult safeguarding cases;
- A duty on Councils to assess carers without them having to request an assessment;
- A duty on Councils to produce a care and support plan for all eligible users and carers, including self-funders; and
- Separate care laws for England and Wales.

This signals a significant step in moving closer to a clearer and more coherent framework for adult social care.

Statement of Government Policy on Adult Safeguarding

In May 2011, the Government published a ‘**Statement of Government Policy on Adult Safeguarding**’. This document sets out the Government’s policy on safeguarding vulnerable adults. It includes a statement of principles for use by Local Authority Social Services, housing, health, the police and other agencies both for developing and assessing the effectiveness of their local safeguarding arrangements as follows:-

- Empowerment – Presumption of person led decisions and informed consent;
- Protection – Support and representation for those in greatest need;
- Prevention – It is better to take action before harm occurs;
- Proportionality – Proportionate and least intrusive response appropriate to the risk presented;
- Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse; and
- Accountability – Accountability and transparency in delivering safeguarding.



This document builds on “No Secrets”, which will remain as statutory guidance until at least 2013. In the principles described above, the Government has taken account of the responses to the public consultation on “No Secrets” in 2008/09, the implementation of the Mental Capacity Act 2005 and the drive towards increasing personalisation of services. This document also outlines the Government’s intent to seek to legislate for Safeguarding Adults Boards (SABs) making existing Boards statutory, whilst maintaining their freedom to operate in locally flexible ways, securing a transparent and accountable mechanism for local communities to ensure the protection of vulnerable adults.

Youth Justice and Criminal Evidence Act (1999)

Amendments to the **Youth Justice and Criminal Evidence Act (1999)** which came into force in England and Wales in June 2011, will make it easier for children and vulnerable victims and witnesses to give evidence in court. The changes included:

- Making all under-18 year olds and witnesses in gun and knife crime cases automatically eligible for Special Measures. These include: giving evidence by live-link or from behind screens and the assistance of an intermediary to help them give their best evidence in court;
- Giving child witnesses (under-18s) more choice about the way they give their evidence, allowing them to opt-out of giving video-recorded evidence and instead give evidence in court.
- Giving victims of rape and serious sexual offences the opportunity to give evidence via video-recorded statements automatically - something currently limited to child witnesses; and
- Ensuring children and vulnerable and intimidated adults can have a supporter in the room when they are giving video-link evidence.

Delivering Dignity

Maintaining people’s dignity is a key consideration in the prevention of safeguarding arrangements. As such, the NHS Confederation, Local Government Association and Age UK joined to establish the Commission on Dignity in Care for Older People in July 2011. This followed the publication in February 2011 of the Health Ombudsman’s *Care and Compassion* report which exposed a number of failures in the care of older people. The Commission’s remit focussed on hospitals and care homes to identify the underlying causes of these persistent failings and to determine changes required within the care system to deliver dignity.

The **Delivering Dignity** consultation report made a number of recommendations to change culture, leadership, management, staff development, clinical practice and service delivery of care homes and NHS hospitals to enable more dignified care. It also set out suggested changes within the wider health and social care system to support hospitals and

care homes in prioritising dignity. The Commission focussed on the care of older people with the belief that, if we get it right for older people, we get it right for everyone. The final report is due to be published summer 2012.

Police Reform and Social Responsibility Act (2011)
The Police Reform and Social Responsibility Act (2011) will ensure that the police service is more accountable to local people by replacing police authorities with directly elected police and crime commissioners. This will replace bureaucratic accountability to central Government with democratic accountability to the public.

Caring for our Future: Shared Ambitions for Care and Support

In September 2011, the Government launched ‘**Caring for our Future: Shared Ambitions for Care and Support**’ – an engagement with people who use care and support services, carers, local councils, care providers, and the voluntary sector about the priorities for improving care and support.

Caring for our Future was an opportunity to bring together the recommendations from:-

- The Law Commission Review, published in May 2011;
- The Commission on the Funding of Care and Support; published in July 2011; and
- The Government’s Vision for Adult Social Care, published in November 2010.

This engagement exercise, along with the recommendations from the reports/papers outlined above will help inform the White Paper on care and support and will be published alongside a progress report on funding.

Winterbourne View

Over the past 12 months there have been a number of high profile adult safeguarding cases and investigations, such as those exposed at **Winterbourne View**, an independent hospital run by Castlebeck Care (Teesdale) Ltd. The Department of Health launched a Serious Case Review into the events at Winterbourne involving all partner agencies and this has resulted in many lessons being learned in terms of ensuring that similar events do not take place in the future. Work has also taken place locally to ensure that the lessons from Winterbourne and other high profile cases have been considered in working practices etc.

Close to Home

The Equality and Human Rights Commission undertook a systematic inquiry into whether the human rights of older people wanting or receiving care in their own homes were being fully promoted and protected. The results of



the inquiry were published in November 2011 (**Close to Home**). The inquiry found that although many older people receive care at home which respects and enhances their human rights, this was by no means a universal experience. It uncovered areas of real concern in the treatment of some older people and significant shortcomings in the way that care is commissioned by local authorities.

The inquiry was undertaken at an important point for social care, when the funding and delivery of care faces fundamental reform and therefore the results presents a good opportunity to make the changes recommended.

There are a total of 25 recommendations within the report, which can be categorised into three categories, as follows:-

- Proper protection;
- More effective monitoring; and
- Better guidance.

Standards for Adult Safeguarding

The publication, at the end of 2011, of the '**Standards for Adult Safeguarding**' was part of a sector-led response in which local government and partners took responsibility for improvement. The development of the standards aimed to use the skills and expertise of professionals, managers, people who use services, councillors and partners within the sector. The standards were developed in partnership by:-

- Local Government Association;
- Association of Directors of Adult Social Services (ADASS);
- NHS Confederation; and
- Social Care Institute for Excellence (SCIE).

Prior to publication, the Standards were piloted by a range of authorities, evaluated and then further revised.

The Standards have been derived from:

- Work with local authorities;
- Care Quality Commission (CQC) performance and board reports;
- The No Secrets Review;
- LG Improvement and Development engagement with safeguarding developments; and
- Broader local government and NHS developments.

The Standards are grouped into four main themes of:-

- Outcomes for and the experiences of people who use services;
- Leadership, Strategy and Commissioning;
- Service Delivery, Effective Practice and Performance and Resource Management; and
- Working Together

Each theme aims to identify the ideal service and the questions that partners need to ask themselves in terms of assessing themselves against them. Further details of these standards can be found at **Appendix 3**.

Vetting and Barring Scheme / Criminal Records Regime

The Government has made a number of commitments to improve disclosure and barring services by scaling them back to 'common sense levels', to ensure a continued service helping to safeguard children and vulnerable adults by those who work or volunteer with them, which operate in a way that reduces the burden on employers and better respects the civil liberties of the individual. As part of these commitments government undertook a review into the **Vetting and Barring Scheme** and the **Criminal Records Regime** and the subsequent recommendations were included within the Protection of Freedoms Bill.

Protection of Freedoms Act (2012)

The **Protection of Freedoms Act (2012)** has now completed its passage through Parliament and has received Royal Assent. The Act will introduce a range of key changes. These will be phased in once the legislative timetable has been agreed. The key future changes include:

- abolishing the registration and monitoring requirements of the Vetting and Barring Scheme;
- redefining the scope of 'regulated activities'; and
- abolishing 'controlled activities';

The provisions also mean that the services of the Criminal Records Bureau and Independent Safeguarding Authority will be merged and a single, new non-departmental public body created. The new organisation will be called the Disclosure and Barring Service (DBS). The planned operational date for the DBS is December 2012.

Whistle-blowing

On 1st January 2012, the **whistle-blowing helpline for NHS staff** was extended to staff and employers in the social care sector. This service is free, independent and confidential. The helpline can be contacted if people have concerns but are unsure how to raise them or want advice on best practice. A web-based service is also being developed.

NHS and Adult Social Care Outcomes Frameworks

The safeguarding of Adults and treating people with dignity and respect feature prominently in the new **NHS and Adult Social Care Outcomes Frameworks** published during 2011/12. Further details of these frameworks are outlined in Section 5 of this report.



Getting it Right for Victims and Witnesses

In January 2012, the Ministry of Justice launched a consultation 'Getting it right for Victims and Witnesses', about the Government's proposed approach to ensure that:

- Victims and witnesses get the support they need, both to overcome the consequences of crime and to participate fully in the criminal justice process; and
- Offenders take greater responsibility for repairing the harm they have caused, through a combination of financial reparation and restorative justice.

The consultation closed on 22nd April 2012 and was aimed at all criminal justice agencies, the victim support and advice sector, local authorities, the judiciary, and all representative bodies and charitable organisations with an interest in this area in England, Wales and Scotland.

4. Structure and Reporting Arrangements

Halton's structure and reporting framework for safeguarding adults has been established and continues to develop in accordance with Government and best practice guidance.

At the centre of local developments is:

- The multi-agency strategic decision-making body, the Safeguarding Adults Board;
- Sub-groups of the Board;
- Links with related services; and
- Individual partner agency developments

Attached at Appendix 4 is a diagram outlining the current structure and reporting framework.

The Board, its sub-groups and reporting arrangements have developed over recent years, reflecting a growing understanding of safeguarding, including a stronger focus on the prevention of abuse, the establishment of better strategic links between partners to ensure effective response to concerns, and the need to engage more effectively with the wider community.

The introduction of the Health & Social Care Act during 2011/12 represents the most fundamental transformation of the NHS since its inception and will have a far-reaching impact on local authority and its partners. As part of this transformation, the Government proposed that statutory Health & Wellbeing Boards be established in shadow form by April 2012, with full implementation anticipated in April 2013.

The Boards will have the following main functions: -

- To assess the needs of the local population and lead statutory Joint Strategic Needs Assessments;
- Promote integration and partnership across areas including through promoting joined up commissioning plans across the NHS, Social Care and Public Health and to publish a Joint Health and Well-being Strategy; and
- To support joint commissioning and pooled budget arrangements where all parties agree this makes sense.

Halton's Health & Wellbeing Board has been meeting in shadow form since December 2011 and it was decided that the Safeguarding Adults Board will report formally to the Health & Wellbeing Board, which in turn forms part of the Halton Strategic Partnership.

Integrated Adults Safeguarding Unit

Due to a number of national and local drivers for change, work has also taken place during 2011/12 on the establishment of an 'Integrated Adults Safeguarding Unit' within Halton, which came into operation on 1st April 2012.

The Unit will lead on adults' safeguarding and dignity work across the health and social care economy. This will be achieved by:-

- Providing support to the Safeguarding Adults Board and its sub-groups;
- Providing support to the Halton Dignity Partnership;
- Ensuring key links continue with the Domestic Violence Coordinator and services;
- Ensuring key links with children's safeguarding;
- Ensuring links with the Local Authority Designated Officer – Children's Services;
- Supporting the development of effective Interagency Safeguarding Adults Policies and Procedures and Dignity Policies;
- Leading on prevention by responding to those cases that do not meet the threshold for a safeguarding investigation;
- Supporting the development of Clinical Commissioning Group to enable the consortium to access specific training etc.;
- Complementing the care home Quality, Innovation, Productivity and Prevention proposal and ensure the wider augmentation;
- Undertaking cases which have a complex safeguarding element including provision of Chairs for safeguarding adults strategy meetings and case conference meetings; and
- Supporting the local authority and its partner agencies to:-
 - Fully embed safeguarding adults policies and procedures and thus deliver consistent and robust outcomes for vulnerable adults
 - Monitor the effectiveness of the delivery of their safeguarding adults activity; and



- Provide advice and support regarding individual safeguarding adults cases.

There are numerous advantages to the Unit, some of which are outlined below:-

- As a Focal Point / 'Hub' for staff, managers, outside agencies etc. to contact when they have safeguarding / dignity issues where advice, support and guidance is required;
- To strengthen the support provided to the SAB, by strengthening the relationship between the local authority and partner agencies and other key stakeholders in Health, voluntary and independent sector;
- To reduce caseload, with respect to complex safeguarding issues, for the Care Management Teams, and further enhance the safeguarding expertise across care management teams;
- To ensure an effective response in relation to Health and reduce the workload/duplication with Continuing Health Care;
- To develop and share safeguarding and dignity expertise; and
- To improve communication between the operational teams, both within the Council and external agencies and partners.

The Unit will provide a hub and spoke model which is multi-agency efficient, flexible and responsive to the needs of services and the local population. The effectiveness of this model will be evaluated during 2012/13.



5. Outcomes for Service Users and Carers

The work of the Safeguarding Adults Board and its partner organisations aims to support the outcomes outlined in the following documents, as follows:-

The Department of Health's (DH) 'Adult Social Care Outcomes Framework' (2012), namely for people to:

- Enhance quality of life for people with care and support needs;
- Delay and reduce the need for care and support;
- Ensure that people have a positive experience of care and support; and
- **Safeguard people whose circumstances make them vulnerable and protect them from avoidable harm.**

The DH 'NHS Outcomes Framework' (2011):

- Preventing people from dying prematurely;
- Enhancing quality of life for people with long-term conditions;
- Helping people to recover from episodes of ill health or following injury;
- Ensuring that people have a positive experience of care; and
- **Treating and caring for people in a safe environment and protecting them from avoidable harm.**

Performance measures developed as a result of the outcomes frameworks outlined above will support any associated inspection regimes undertaken by the Care Quality Commission and other associated regulatory bodies.

Outlined below are a handful of case studies, which demonstrate the impact that adult safeguarding processes have had on the lives of vulnerable people:-

Case Study I

A referral was made to Halton Borough Council after an elderly male had received a bank statement at the residential home where he was residing, which showed a number of discrepancies on it. A Vulnerable Adult Safeguarding investigation followed and identified that a relative of the man had been using his home address to obtain goods and services. The Social Worker undertook a number of joint visits with the Police, and the man was supported to give video evidence, which resulted in the police being able to take the case forward for prosecution.



Case Study 2

A young man with a brain injury, communication, mobility and cognition difficulties was referred for a safeguarding investigation as he was being fed solid foods by his Carer against clinical advice. The resulting meeting had a range of agencies involved: Speech and Language, Neuro Rehabilitation Team, Occupational Therapy and Independent Mental Capacity Advocacy. The input from professionals working in partnership with the man and his Carer ensured that all relevant training, support, advice and guidance were provided and a package of care was implemented. The impact of the intervention was intense at the time, but the conclusion and recommendations improved the quality of the man's life and enabled his Carer to feel more supported by a wider range of professionals.

Case Study 3

A female who was known to Social Services and had mental health issues, was experiencing harassment from her neighbours. Following the initiation of the Vulnerable Adult Safeguarding investigation, extra support and strategies, (including the use of the Community Support Officer) to reduce the risks to the female were put in place. Following on-going review of the situation, involving a range of professionals and partners, the package of support has been adjusted to ensure that it continues to meet the needs of the female and enables her to live safely and independently in the community.

6. Safeguarding Adults Board Priorities 2012 /13

The Safeguarding Adults Board's overarching priority is to safeguard and promote the welfare and dignity of vulnerable adults, both in terms of prevention and as a robust response to concerns.

The importance of including dignity emphasises that vulnerable adults' experience should reflect the right to be treated at all times with dignity as well as to be safeguarded.

The other four priorities flow from this.

Priority 1:

To promote awareness of abuse and of all individuals' right to be safe and be afforded dignity, particularly amongst people who are 'vulnerable' or at risk and others, including the wider community, staff and volunteers.

Still more needs to be done to engage with adults at risk and the wider community, particularly to provide them with information about abuse, including how it can be prevented and what individuals should do if they suspect abuse.

The Board will seek to address this through its marketing campaign, by strengthening links with related services such as Trading Standards and Community Safety, Domestic Abuse and Dignity, by reviewing and, where possible, strengthening safeguarding arrangements in personal self-directed support.

Priority 2:

To increase the contribution from service users and carers, including individuals who use services and wider communities, by seeking to ensure that their views and experience inform the Board's work and service developments, and by ensuring that individualised services are available in a way that keeps people safe but enables them to make informed decisions about risk.

The Board will address this by seeking and responding to feedback (including any learning from complaints/compliments) from communities, people who use services and their carers, by ensuring that individuals are enabled to exercise choice and remain in control of their own lives. Where this is not possible, work will focus on ensuring that Mental Capacity Assessments are in place and Best Interest decisions are made and are supported by advocates where appropriate, so that the needs of people with limited or no capacity are addressed.

Priority 3:

To ensure there is a strong multi-agency approach to assuring the safety, wellbeing and dignity of vulnerable adults.

The Board will continue to strengthen multi-agency work by developing effective processes within a robust performance framework. This will involve embedding good practice, and the review of governance arrangements and lines of accountability, performance reports, policies, procedures and protocols, to ensure they are delivering against priorities and desired outcomes.

Priority 4:

To equip employees with the necessary tools to both safeguard vulnerable adults and ensure their dignity is respected.

The Board will seek to maintain its strong record of promoting and providing training to ensure that everyone involved in the care and support of vulnerable adults has the skills to protect them. Broader safeguarding related workforce issues will also be a priority, including recruitment and selection, hospital admission and discharge, provision of good practice guidance to the wider community, and robust 'whistle-blowing' arrangements.

Appendix 5 identifies the key actions to be taken forward during 2012/13. Work has been undertaken to ensure the Board's work plan and associated activities supports the 'Standards for Adult Safeguarding' as outlined in **Appendix**

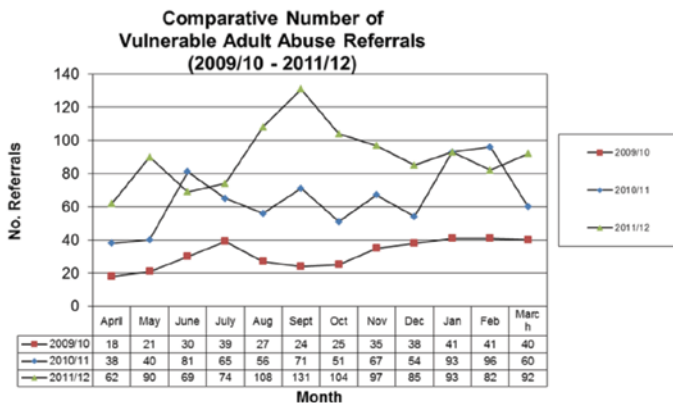


3 and Halton's Clinical Commissioning Group's Safeguarding Assurance Framework as outlined in **Appendix 6**.

7. Adult Safeguarding Data 2011/12

The Board recognises that quantitative data does not reveal the human experience of the people to whom it relates, however, reliable data recording, analysis and reporting systems can provide a useful picture which can inform the Board and partner agencies how well the service is operating and what needs to change and develop. It can tell us what abuse is being reported, how it is being dealt with and what the outcomes are for people who experience and perpetrate abuse, whether intentional or not.

The following chart demonstrates the upward trend in the number of alleged vulnerable adult abuse referrals since April 2009.



NOTE

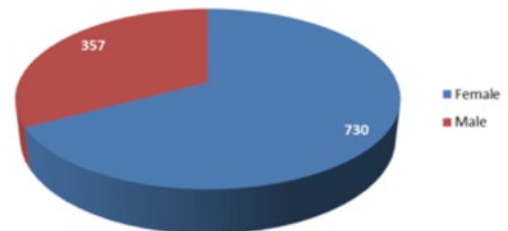
The 'spike' in 2011/12 figures between August and November is attributable to issues raised in relation to St Lukes and St Patricks Nursing homes.

The following four charts demonstrate:

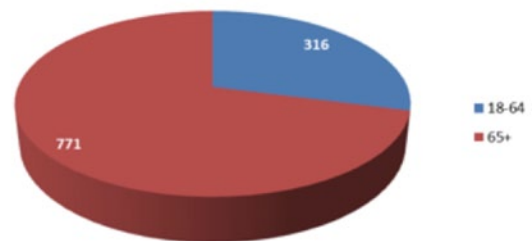
- The number of alleged adult abuse referrals by gender and age group; and
- The number of alleged adult abuse referrals compared with:-
 - The total adult population in Halton; and
 - The total number of adults referred to Halton Adult Social Services.

Halton's referral numbers show the greatest number of alleged victims to be female residents aged 65 and over. As a percentage of the overall Older People's population of Halton, the number of referrals in relation to Adult Abuse is small (about 1%). Adult Abuse referrals to Adult Social Care represents less than one third of all referrals.

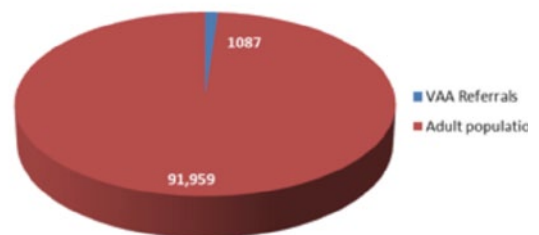
Vulnerable Adult Abuse Referrals by Gender 2011/12



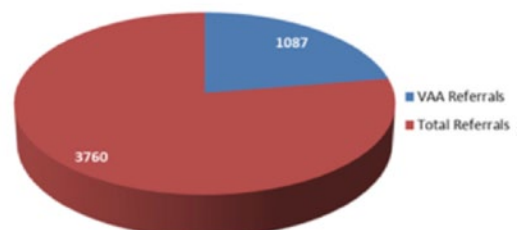
Vulnerable Adult Abuse Referrals by Age Group 2011/12



Proportion of Vulnerable Adult Abuse Referrals compared to Adult Population of Halton 2011/12



Vulnerable Adult Abuse Referrals compared to Total Referrals to Adult Social Services 2011/12





The data provided in the table below relates only to Public Protection Unit investigations and does not reflect investigations across other policing departments that have at various times dealt with vulnerable adult victims.

- Police colleagues have explained that the data supplied from their records cannot be guaranteed to be totally accurate, but if anything is likely to be an under-estimate rather than an over-estimate. More reliable data is anticipated next year.

The method of collection and analysis of data provided by the Police is being reviewed and steps taken, where possible within the constraints of IT systems, to provide a more detailed picture of all Police involvement in cases of alleged vulnerable adult abuse.

NOTE

In respect of the data outlined below:

- “Police involvement” means that a specialist Police Officer has given advice only and not physically left the office; and
- “Police Investigation” means that a specialist Police Officer attended strategy meetings or case conferences or that the alleged perpetrator voluntarily attended the Police station for an interview under caution.



| | Referrals | | | Police Involvement | | | Police Investigation | | | CPS Advice | | | Alleged Perpetrator Charged | | |
|---------|-----------|-------|-------|--------------------|-------|-------|----------------------|-------|-------|------------|-------|-------|-----------------------------|-------|-------|
| | 09/10 | 10/11 | 11/12 | 09/10 | 10/11 | 11/12 | 09/10 | 10/11 | 11/12 | 09/10 | 10/11 | 11/12 | 09/10 | 10/11 | 11/12 |
| Runcorn | 19 | 16 | 11 | 4 | 8 | 6 | 14 | 7 | 5 | 1 | 1 | 1 | 1 | 0 | 1 |
| Widnes | 10 | 27 | 22 | 0 | 7 | 10 | 9 | 16 | 8 | 1 | 1 | 0 | 1 | 1 | 0 |
| Total | 29 | 43 | 33 | 4 | 15 | 16 | 23 | 23 | 13 | 2 | 2 | 1 | 2 | 1 | 1 |



8. Key Developments & Local Activity 2011/12

Strategic Framework and Leadership

The Safeguarding Adults Board's priorities, structure, reporting arrangements, membership and work plan have all been reviewed, taking into account the establishment of the Health and Well-Being Board in shadow form, and the need to look creatively at mechanisms for engaging as partner agencies and individuals at a time of reducing resources and major change.

The revised work plan demonstrates a greater focus on prevention, so aims to strengthen links with Dignity and Domestic Abuse agendas, and examines Safeguarding provision in self-directed support and Personalisation.

During 2011/12, the development of strong links between services that relate to safeguarding vulnerable adults remained a priority and a number of initiatives were introduced. For example, following a report regarding a Serious Untoward Incident (SUI) in 2010 being presented to the Board, it was agreed that all NHS Trusts who interface with Halton would report SUIs with a Safeguarding element to the Board, who would monitor progress on actions to prevent any recurrence of the issues raised.

Following the Safeguarding Inspection which took place in 2010, even though CQC deemed that Halton was **performing excellently** in respect of safeguarding adults, there were some areas where developments could be undertaken. As a result, the HSAB developed an action plan to address these which was fully implemented during 2011/12. Some of the developments included the introduction of nutrition guidelines to support Care Homes etc, along with the provision of support and training to staff within Care Homes, Domiciliary Care, Sheltered Accommodation etc to improve the Health and Wellbeing of older people and their carers.

Links with Related Services

Integrated Adults Safeguarding Unit

During 2011/12, work was progressed on the development/ establishment of an Integrated Adults Safeguarding Unit within Halton. This model of delivery will be piloted for 12 months following which an evaluation of the Unit will take place to ensure that it provides an efficient and effective service. The main advantages to the establishment of the unit include:-

- Provides a focal Point / 'Hub' for staff, managers, outside agencies etc to contact when they have safeguarding / dignity issues which require advice, support and guidance;
- Reinforces the support provided to the SAB, by strengthening the relationship between the local authority

- and partner agencies and other key stakeholders in Health, voluntary and independent sector;
- Reduces caseload, with respect to complex safeguarding issues, for the Care Management Teams, and further enhance the safeguarding expertise across care management teams;
- It ensures an effective response in relation to Health and reduces the workload / duplication with Continuing Health Care;
- Develops and encourages sharing of safeguarding and dignity expertise; and
- Improves the communication between the operational teams, both within the council and external agencies and partners.

Children's Services

Steps have been taken to strengthen links between Safeguarding Adults' and Safeguarding Children's training, for example:-

- Periodic meetings between the Learning & Development Manager, Principal Manager (Safeguarding Adults) and Safeguarding Children's Board Manager to ensure that best practice and consistency is in place between Adult and Children's Services; and
- Joint review of the Transport Division SAFER Training programme.

Strong connections continue to be developed between the Children's and Adults Safeguarding Boards, as it is being increasingly recognised that there are issues which are common to both Boards. A number of individuals are members of both Boards, but this informal relationship is being strengthened by the development of a formal protocol between the Boards. A half day developmental session is being developed for both Boards in the late autumn of 2012, to examine options for closer working.

Hate Crime

Halton's Hate Crime Strategy and Action Plan was reviewed to ensure content was included relating to safeguarding vulnerable adults.

Halton's Learning Disabilities Partnership Board held a Business Planning Event in July 2011, where 'Keeping Safe' was a key theme. The resulting Business Plan included priorities and actions drawn up during the event around safeguarding vulnerable adults and hate crime/hate incidents, including the following, some of which are already being progressed:-

- Help people to understand the danger signs;
- Support for people and staff to understand how to keep safe; and
- Talk to more people who may have been a victim of abuse or hate crime.



The following priorities which were drawn up during an event around personalisation also have the potential to impact on the way in which we support people in staying safe from abuse and exploitation:

- Train personal assistants;
- Checking that support plans are making a difference to people's lives;
- Looking at how we can check how good support plans are; and
- Checking that people are being supported to become more independent.

Discussions have begun, aimed at developing a pilot project in Halton based on the 'Safe Around Town' scheme which is currently running in St Helens. The scheme's purpose is to provide a safe sanctuary for people with learning disabilities in St Helens' town centre. The working group will think about widening the proposed scope of the scheme in Halton to include vulnerable people of all ages and needs in the wider community rather than limiting it to shopping areas. Halton Speak Out has a lead role in the project and it is hoped that collaboration can also be achieved with other voluntary groups, community centres and employers.

Domestic Abuse

A presentation was delivered to the Domestic Abuse Survivors Conference in November 2011, providing a 'snapshot' of the Safeguarding Adults service and its links with Domestic Abuse support services and it highlighted the importance of partnership working, including information-sharing and referral pathways. The event, attended by approximately 125 delegates, including survivors and specialist service providers, explored effective approaches to preventing violence against men, women and children whilst supporting survivors of Domestic Abuse and Sexual Violence.

Dignity

The Halton Dignity Partnership has continued to drive forward Halton's dignity campaign. This has included:-

- Successfully delivering their annual conference strengthening the key message that 'Dignity is everybody's business', helping to raise awareness, consulting local residents and providing evidence to the public and staff that Halton has listened to their views in driving forward improvements in quality;
- Whole-system performance monitoring being introduced across the multi-agencies to improve outcomes from learning, quality, and identifying trends;
- A Dignity Overview & Scrutiny Committee reviewed the effectiveness of dignity standards practice across the whole system and in particular within a hospital setting;
- The involvement and number of frontline staff, carers and public signed-up as Dignity Champions has substantially

increased helping to challenge poor practice and champion change. Their role has been strengthened through the launch of Dignity Champion Expectations of Role and Characteristics;

- A local Dignity Champion register has been introduced to support their involvement;
- The Dignity Basic Awareness E-learning module was launched January 2012 and three further modules are in development. These programmes will deliver dignity training whole-system in the context of Human Rights legislation; and
- Complaints/advocacy awareness sessions are currently in development to equip people with knowledge/information about raising concerns and to support people in feeling able to comment on services or complain without fear of retribution.

Individual Agency Developments

The following section contains information provided directly by Partner organisations in respect of their specific developments to support the safeguarding of vulnerable adults:-

Halton Borough Council

A Positive Behaviour Support Service (relating to adults and children) has been established which has the potential to reduce the number of safeguarding adult referrals involving inappropriate behaviours, (by service users who present with behaviour which challenges services), towards others. The service provides support and guidance to both prevent and respond appropriately to those challenges.

Feedback received during the Care Quality Commission inspection of Adult Social Care in Halton during 2010, and from other research, highlighted that:-

- People wanted a less formal way of raising concerns; and
- Many people were nervous about raising concerns when they, or their family member, were in a vulnerable situation (such as in hospital, care home, in a dependant position etc.)

In response, a working group was formed, which included Social Care Customer Care, Corporate Complaints, Customer Services and Communications & Marketing, to look at developing methods of encouraging the public to provide both positive and negative feedback on services. One of the outcomes was that a logo is to be added to all Council literature, which focuses on how the Council can help the public improve services to them. See below:-



Help Us Help You - we want **your** feedback on Council services

☎ 0303 333 4300 🌐 www.halton.gov.uk/contact



The strap-line 'Help us Help You' is used, moving away from focusing on telling people how to complain and emphasising that the Council welcomes feedback.

Health and private sector partners are being encouraged to adopt the Logo and approach, with their own contact details. Halton Direct Link and the Customer Care Team will monitor the number of Referrals, on a monthly basis, and Communications & Marketing will monitor all artwork produced on an on-going basis to ensure the logo is used correctly.

As a result of the Equality and Human Rights Commission's inquiry into Older People and Human Rights in Home Care (Close to Home), the Council undertook an in-house self-assessment exercise against the recommendations made by the Commission. A report and the self-assessment were presented to the Safeguarding Adults Board and the Board acknowledged that most of the recommendations made by the Commission were already in place within Halton and agreed that any outstanding action would be progressed and monitored through the Dignity Network.

During 2011/12, Councillors have been undertaking visits to care services across Halton in order to obtain and promote the views of vulnerable people who are in receipt of social care. This process supports and contributes to the current Quality Assurance systems across Halton which promote our culture of constructive challenge, learning and continuous improvement within services. Whilst there is no statutory duty to carry out these visits, they have given Councillors direct experience of the services and have enabled Councillors to act as spokesperson for their constituents who may be socially isolated within their local communities because of their disability or diagnosis.

These visits contribute to the Council's commitment to proactively assessing care alongside the key assessors; Quality Assurance Team, Care Quality Commission and Halton LiNK and they will continue during 2012/13 and beyond.

Warrington & Halton Hospitals NHS Trust

Safeguarding vulnerable adults remains a high priority for the Trust and as such has ensured appropriate representation on the Board and associated Sub-Groups. The Trust's overarching responsibility is to ensure that a strategy is in place to protect vulnerable adults who attend the hospital and, where possible, to prevent abuse from occurring.

The key objectives for the Trust continue to be: to promote awareness of vulnerable adult and their right to be safe and to safeguard and promote the welfare and dignity of vulnerable adults.

Awareness raising and referral of safeguarding incidents remain the key priority and focus within the Trust.

Within the Trust there are a number of communication channels and referral systems in place for all vulnerable people. These include Learning Disability, Safeguarding Children, Safeguarding Adults and Domestic Abuse Policies and Procedures.

Over the past twelve months, the Trust has seen the development and implementation of a clinical incident reporting system which ensures next working day review by the clinical governance team who are then able to alert safeguarding concerns to the appropriate clinical Matron for timely investigation. Additionally the Safeguarding Matron will review the incidents that have a safeguarding element to them.

For the period April 2011 - March 2012 - 695 incidents have been reviewed. On reviewing the incident the safeguarding matron will conclude that:-

- The appropriate action was taken;
- Additional information is required; and
- Incident needs further investigation or referral to social care.

In addition, an electronic referral system for out of hour referrals to the Vulnerable Adults (VA) Matron is now in place which allows for real time referrals or concerns to be raised by clinical staff. Since November 2011, 73 referrals have been made using this option.

The Trust has also seen an increase in Deprivation of Liberty Standards (DOLS) assessments over the past twelve months. Working more closely with HBC MCA co-ordinator to improve referral pathways and assessments has demonstrated increased awareness and understanding of this important assessment process.

Safeguarding is now a permanent feature within the Trust Induction programme and the introduction of Consultant training sessions which have been well received and have raised awareness of incidents and the process to follow. These have been well attended and will continue for the future.

Training figures at year end 2011/2012 indicated that 70% of all clinical and non-clinical staff were trained in Basic awareness for adult safeguarding.

The Vulnerable Adults Strategy Meetings are held bimonthly and are chaired by the Vulnerable Adults Matron supported by the Associate Director of Nursing. Learning from incidents is highlighted and discussed in order that the divisional leads can take the lessons back to their own Clinical Governance meetings to cascade to front line staff.

The VA matron also provides a quarterly report to the Trust clinical Governance Sub Committee and an annual report to the Board.



The Trust underwent a Learning Disabilities (LD) peer review in 2011. In total eighteen Trusts participated in the Peer Review. The review focussed on Communication, Reasonable Adjustments, Involvement of Patient and Carer and Consent & Capacity. A full report is available from the VA Matron and the Quality Improvement Matron, who is the Trust Lead for LD.

Bridgewater Community NHS Trust

A sustained drive to promote the safeguarding agenda internally and externally has resulted in greater awareness and understanding of organisational and individual roles and responsibilities. Throughout 2011/12, Bridgewater Community Healthcare NHS Trust – Halton & St Helens Division, has been promoting the agenda with staff, patients and the public to add vigour to existing structures.

Named individuals have been elected safeguarding champions and they, with the support of the organisation have been promoting the safeguarding agenda within teams to ensure there is a shared understanding of the agenda across the Trust.

With representation at both Safeguarding boards and regular meetings with safeguarding leads from partner organisations, Bridgewater provides a range of community health services across the two boroughs and has made vigorous efforts to share best practice with colleagues and promote a culture of appropriate referral.

Between April 2011 and March 2012, the Division made a total of 28 referrals into the safeguarding units. This increase has, in part, been promoted by greater awareness among staff which has been reinforced by the introduction of a mandatory E-learning package with a specific adult safeguarding element.

During January and February 2012, the Division was responsible for a large-scale mailing to all its partners i.e. Clinical Commissioning Groups, dental and pharmacies. Posters, leaflets and business cards detailing how members of the public can access the Halton Adult Social Care team to report concerns of a safeguarding nature were distributed.

In 2011, bus adverts, advertising on TV screens in GP surgeries and articles advising of the help and support available in the borough of Halton were commissioned.

This has resulted in a greater awareness of the safeguarding agenda in the borough and representatives from partner organisations meet regularly to agree on how best the safeguarding messages can be communicated to ensure its communities are aware of the help and support available to them.

This work will be further developed during 2012/13 and internally a safeguarding assurance group will monitor the organisation's compliance with both the adult and children

safeguarding agendas.

This group include the designated safeguarding professionals from NHS Merseyside in order to maintain and create whole system approach to safeguarding agenda. The Named nurse and safeguarding champion are also part of the group.

The nominated executive lead for safeguarding within Bridgewater is Dr Stephen Ward and the organisation has recently undertaken a review of safeguarding structures across the Bridgewater footprint.

The review covered Ashton, Leigh and Wigan, Halton and St Helens, Trafford and Warrington and concluded that all structures were appropriate. This was reinforced by an external review which gave significant assurance. Building on this work the organisation is developing a corporate unit for safeguarding which will support the divisional structures.

“It is essential that safeguarding is embedded in the culture of our organisations. It is not somebody else's business, it is all our business and whilst I am pleased with the work done to date, we must continue to develop and build on the progress to date.” *Dr Stephen Ward*

NHS Halton & St Helens Primary Care Trust (PCT) – NHS Merseyside

Prior to receiving royal assent in 2012, the introduction of the Health and Social Care Bill in 2011 brought about a number of significant changes for Halton and St Helens PCT (NHS Merseyside) prior to it receiving royal assent in 2012, however throughout all of the changes Safeguarding Adults has remained a priority.

Halton & St Helens PCT remains a committed member of the Safeguarding Adults Board and sub-groups.

During 2011/12, the PCT has worked with the acute hospitals and the neighbouring local authorities to review the admission and discharge pathway to/ from residential care to minimise safeguarding incidents.

A safeguarding self-assessment audit was also piloted with some of the health care providers that the PCT commission. The audit asked a number of questions and for evidence about how organisations are ensuring that they are safeguarding adults and what policies and procedures are in place. The PCT will be able to use this information to support health care providers to ensure that they are safeguarding adults. From April 2012, all NHS Merseyside contracts will have safeguarding performance indicators included in their contracts.

The Health and Social Care Act 2012 gives Clinical Commissioning Groups accountability for Safeguarding Adults and Children and the PCT will work closely with them to ensure a smooth transition of responsibilities.



Safeguarding Vulnerable Adult training is always a high priority for staff employed within the PCT and workforce development recently adopted the NW Core Skills Framework which identifies the statutory and mandatory training requirements of staff across NHS Merseyside.

This framework is currently being rolled out across the organisation. Every staff member is required to complete mandatory training within this area and to access a refresher course every 3 years, as a minimum.

Staff working in specific roles will be required to access additional levels of Safeguarding Training to ensure that they have the appropriate skills required for their post.

A central system is now utilised which is able to record training being delivered to all NHS Merseyside staff working within Halton.

St Helens & Knowsley Teaching Hospitals NHS Trust

The Trust has made steady progress over the last year in improving outcomes for vulnerable patients and those who require safeguarding:-

- A new post of Head of Safeguarding and Public Protection was created and recruited to, combining oversight for both safeguarding children and adult activity and providing an improved assurance to patients;
- The Trust Safeguarding Adult and Domestic Abuse Policies were ratified, providing clear and up to date procedures for staff, with accompanying training;
- Overall, there has been a 64% increase in contacts (over a two year period) made to local authority safeguarding processes with Halton accounting for 10%, which is consistent with the Halton patient population at St Helens & Knowsley Teaching Hospitals NHS Trust;
- The Trust focused on safeguarding adult training to all senior managers which led to an increased focus on identifying and managing safeguarding alerts which arise through incident reporting, complaints and HR issues;
- 93% of all Trust staff receive level 1 training. Its training plan focusing on level 2 and 3 delivery is being reviewed;
- All safeguarding training now includes domestic abuse, mental capacity and learning disability awareness enabling the Trust to focus on the most vulnerable groups;
- In May 2011 following a visit by CQC the Trust was required to develop an action plan to improve elements of the way nutritional needs were managed. Following a review visit by CQC in September the Trust was assessed as being compliant; the review also covered safeguarding which was also assessed as being compliant;
- In September 2011, the Trust established its 'Safeguarding and Vulnerability: Adults Steering Group' which provides an overarching oversight of all aspects of patient vulnerability with a comprehensive work plan;
- Early in 2012, the Trust became a pilot site in the

'Transparency Project' alongside seven other Trusts. Publishing data on the Trust's internet site detailing all pressure sores and falls occurring in the Trust each month introduces a high level of openness to its activity and performance;

- In November 2011, the Trust was involved in the Learning Disability Peer Review and hosted a site visit demonstrating work being undertaken to a team of assessors; and
- Work continues around embedding the framework of the Mental Capacity Act in all Trust activity. This involves a review of the policy and the tools which are being used. DOLS activity continues to be low and is being closely monitored with the local mental capacity networks.

The priorities for 2012/13 are to increase the delivery of Level 2 and 3 training, to further embed the Mental Capacity Act and to increase focus on identifying and managing cases of domestic Abuse.

Cheshire Fire & Rescue Services

The Cheshire Fire & Rescue Service remains committed to safeguarding adults at risk and continues to be a member of the Board structures in all four local authority areas it serves.

The Service interacts with adults at risk in a range of contexts:- attendance at incidents; community safety activity such as Home (Fire) Safety Assessment and in its enforcement activity in residential care premises.

The Service plays an active role in partnership working in the area of adult safeguarding so as to develop organisational awareness and deal effectively with those situations where adults at risk may be in need of signposting or referral for assistance.

Current priorities for the Service include:

- Completion of whole-organisation awareness training following the launch of the policy for protecting adults at risk from abuse & neglect, launched in Sep 2011; and
- Whilst the Service has introduced systems and processes for the identification of risk and referral of matters of concern onto partner agencies we believe that more can be done to raise awareness amongst partner agencies in relation to risk from fire. In particular we are seeking to develop partner awareness so that risk from fire is seen as being integral to any risk assessment completed by any agency in relation to any adult at risk.

The Service will be expanding awareness of its Home (Fire) Safety Assessment referral arrangements across the sector but particularly so as to increase referrals from Mental Health Services, Drug and Alcohol Teams and Care Providers and Carers.



9. Learning & Development

During 2011/12, work has continued to support the implementation of the 3-year Multi-Agency Safeguarding Adults Learning and Development Strategy, which was introduced in 2010/11. The purpose of this strategy is to provide a framework and planning for the delivery of learning and development which supports the work of the Board and its partner agencies in terms of the Safeguarding agenda.

It is designed to ensure that staff and volunteers across all organisations who are providing support to vulnerable people in Halton have an understanding about the various factors that can indicate a vulnerable person is, or may be, being abused and know how to fulfil their responsibilities when abuse is indicated and how to prevent abuse wherever possible. By making the training available to all partners, the outcome will be improved safeguarding practices for Halton's most vulnerable adults.

As part of the strategy, a Safeguarding Adults E-learning course was developed and is available via the HBC Internet website. Since 2010-11, the E-Learning course has constituted our Basic Awareness training course and during 2011-2012 the completion rates have steadily increased, as outlined below:-

- Number of employees who have undertaken e-Learning (Basic Awareness) during 2011/12 = 468.

Further E-learning modules have been developed to provide training on Dignity in Halton, and Safer Recruitment. Such training has the potential to prevent abuse and a further two Dignity in Care modules are currently being developed.

Three brief follow-up courses on Domestic Abuse, Stalking and Harassment (DASH), Risk Assessment and Referral Processes took place, for assessment/care management staff and managers. A total of 89 staff attended (86 HBC & 3 from 5 Boroughs Partnership NHS Trust).

Eight Elected Members (four of whom were newly elected in May 2011) have attended dedicated Safeguarding Adults Basic Awareness training.

From October 2011, presentations regarding the safeguarding of adults and children were incorporated into Halton Borough Council's Corporate Induction Programme.

Training was provided for providers of Homelessness services and a Basic Awareness Briefing was provided for Custody Visitors (who conduct visits in either Halton, Warrington, Cheshire East or West Cheshire), and marketing materials and practice guidance were distributed.

Training courses for 2011-12 were advertised widely to organisations and representative contacts across all sectors and dedicated advertising was included in e-newsletters

issued by, for example, Halton & St Helens Voluntary & Community Action, Bridgewater Healthcare and the 5 Boroughs Partnership. Courses available included:

- E-Learning;
- Referrers course;
- Train the Trainer;
- Investigators course (for Halton Borough Council and NHS staff); and
- Charing Skills course (for Halton Borough Council managers)

A new Safeguarding Adults Induction Workbook was developed, intended for use by all staff and volunteers. This workbook has been disseminated widely to local agencies, groups and individuals including Elected Members.

Four multi-agency Joint (Safeguarding Adults and Children) Alerter training events took place during 2011-12. The events, which received very positive feedback from delegates who attended, and were delivered by a drama group and facilitated by HBC & HSCB officers who were present to deal with any queries arising that related to local issues.

The safeguarding (adults and children) customised training provided for transport staff, contracted transport service providers and volunteers, was reviewed and updated with messages about Hate Crime and Hate Incidents incorporated.

During 2012/13, work will take place in exploring the adoption of the Children's Safeguarding Unit's training needs analysis and evaluation process for measuring the effectiveness of safeguarding training courses.

The total number of employees that attended training during 2011-12 are as follows:-

| | 2009-10 Number attended | 2010-11 Number attended | 2011-12 Number attended |
|---|-------------------------------|-------------------------------|-------------------------------|
| Basic Awareness Courses (Inc. Multi –Agency Alerter Training) | 613 | *196 | 591 |
| Total Other Safeguarding Training Courses | 884 | 737 | **238 |

NOTE

*The Basic Awareness attendance figures for 2010/11 were lower than in previous years due to the launch of the E-Learning package, and resources being focused on the implementation of the new package rather than the running of actual courses.

**There has been a reduction in other courses run due to



a change in the delivery of training and development such as e-learning, off the job training etc

10. Publicity & Communication

During 2010/11, a significant amount of work was undertaken across Halton to raise the profile of adult safeguarding within the community.

The challenge in 2011/12 was to build on that work, to ensure none of the momentum was lost and that members of the public, carers, family members were aware of the adult safeguarding agenda and the help and support available to them.

It became increasingly apparent as we reviewed the marketing plan, that we needed to embrace the work of other work streams, namely the Dignity agenda to garner knowledge and expertise and avoid duplication and confusion.

It was also important that we capitalised on the significant work undertaken to date to promote the rights of vulnerable adults in the Halton area. To this end, three key work streams have opted for a closer working relationship.

This move mirrors the work being done at a corporate level to create a multi-agency “hub” which will focus on promoting the rights and responsibilities of agencies working across Halton to promote the rights of some of the most vulnerable adults in our communities.

To ensure consistency of message, representatives from the Publicity and Communications Sub Group, Halton Domestic Abuse Forum Strategic Group and Halton Dignity Partnership, have agreed to promote core messages at definitive times during the calendar year.

Working on a national and local calendar of activity / events, the three groups will promote the help and support they offer to vulnerable adults and carers.

This move is designed to ensure consistency of message, avoid confusion, ensure our most vulnerable adults are aware of the help and support available to them and recognise the key priorities of each group.

Messages will be consistent, timely and appropriate to the audience. Resources will be “pooled” where appropriate so ensuring greater value for money.

This approach will allow for a greater “reach” in our communities and provide the vulnerable with more opportunities to learn about the work being done to raise

awareness of these highly sensitive issues.

Some achievements and developments during 2011/12 include:-

- Marketing posters, flyers and cards distributed to all health centres, pharmacists, GP surgeries and dentists across the Halton area;
- Safeguarding articles run in partner publications e.g. Inside Halton, Bridgewater Bulletin;
- Updated information added to the Halton Borough Council website; and
- Information to raise awareness of the Elder Abuse Awareness Day circulated to media and key stakeholders.

11. Quality & Performance

The interface between the Quality & Performance sub-group and the Policies & Procedures sub-group (of the Safeguarding Adults Board) has been reviewed to ensure clearly defined remits, communication arrangements and efficiency of operation are in place where their functions interface and may overlap. Each of the sub-groups’ terms of reference and work plans have been revised accordingly.

Learning from people (service users and carers) who have experienced the local multi-agency safeguarding adults service is an important element towards improving quality, practice and performance. In Halton, this message is considered to be of significant importance, highlighting it as a key priority of Halton Safeguarding Adults Board work plan, and will be further explored in the forthcoming year.

A focus group of health partners has been set up to share the wider learning from incidents to ensure a joined-up approach with the local authority when investigating safeguarding allegations.

The sub group has analysed relevant national reports and documentation and presented key issues for consideration to the Safeguarding Adults Board.

The Quality and Performance Sub Group continues to analyse the data it receives to ensure that the level of safeguarding activity and any recurrent themes are brought to the attention of the Safeguarding Adults Board. The sub-group is in the process of developing an agreed data set to provide to the Board.

12. Policies & Procedures

Within Halton, all organisations are working pro-actively together to prevent abuse happening and ensure that appropriate steps are taken to respond when it happens or if it is suspected. A key element within this approach includes



policies, procedures and guidance which play an important role by providing a consistent approach; ensuring compliance with statutory requirements and good practice standards; support practice; supervision and line management; and, most importantly, provide an operational framework.

A number of achievements and developments have been introduced during 2011/12 including:-

- Appropriate references to Safeguarding Adults were incorporated into the Sexual Assault Referral Centre (SARC) procedures;
- A number of initiatives were introduced to support the personalisation agenda and to ensure appropriate safeguards are in place for service users, including a comprehensive Handbook devised for Personal Assistants incorporating safeguarding standards and a workshop for Personal Assistants;
- The Council's Confidential Reporting Policy was reviewed using the Safeguarding Adults policies & procedures audit tool and was subsequently updated, making specific reference to Safeguarding. A recommendation was made to other agencies that they perform a similar exercise;
- A new cross-directorate panel procedure is being developed for dealing with positive CRB disclosures i.e. those that show cautions or convictions or other information relevant to recruitment decisions. The aim of the cross-directorate approach is to provide a consistent, high standard process in all instances that might involve applications to work as paid or unpaid employees who could have contact with vulnerable adults or children, as many such positions occur in directorates other than Communities and Children and Enterprise;
- A Service Users' Finances Policy, Procedure and Practice Guidance document has been produced for Halton Supported Housing Network. It has been shared with the Safeguarding Adults Board members and contracted providers, with a recommendation to ensure something similar is available in organisations that have responsibility for the security of service user finances;
- The protocol between Halton Borough Council Adult Social Care and the Police Public Protection Unit is being further revised to include guidance on cases where an alleged perpetrator lacks capacity for criminal intent and the offence (under the Mental Capacity Act 2005) of ill-treatment or wilful neglect of a person lacking or thought to lack capacity;
- A combined Action Plan was developed and is being progressed to combine learning from three different issues;
 - The 'Care and Compassion' Ombudsman's Report into the hospital care and treatment of a number of older people;
 - The 'Six Lives' Ombudsman's report into the care and treatment across health and social care received by six adults with learning disabilities;
 - The development of an Adult Safeguarding pathway within NHS Trusts with which Halton interfaces,

taking into account issues of concern that have occurred locally that provide learning opportunities, and national Department of Health guidance.

- Halton's Safeguarding Adults Serious Case Review (SCR) Procedure was scheduled for review, following the SCR conducted locally in 2010. In collaboration with neighbouring local authorities and Cheshire Constabulary, it was agreed that a 'Pan Cheshire' approach would be sought and this has resulted in a draft document being produced for consultation, 'Pan Cheshire Safeguarding Vulnerable Adults Interagency Serious Case Review Procedure'. This takes into account the Pan Cheshire Safeguarding Children SCR Procedure

13. Practitioners Network

Engaging with staff (practitioners) and operational managers can provide a valuable approach to developing shared learning and practice towards safeguarding vulnerable adults and maintaining dignity and respect.

During 2011/12, a Practitioners Network was established. The focus for the Network during 2011/12 has been the development of an associated action plan to ensure that the Network:-

- Strengthens and promotes inter-agency support, shared learning and understanding;
- Provides a conduit for staff experience, knowledge and learning to inform service developments, quality and work plans;
- Facilitates reflective practice; and
- Develops effective working relationships between different services and agencies.

This will include using learning from the safeguarding experience of Service Users and staff/managers.

The Practitioners Network action plan will be progressed during 2012/13.

14. Safer Workforce

The Safer Workforce Sub-Group is a joint Sub-Group that reports to both Adults and Children's Safeguarding Boards in Halton.

Chairing of the Sub-Group passed from the Children's to the Adults' sector during the year, and arrangements have been agreed for each of the partner members to undertake Chairing for a year, on a rotational basis.

During 2011-12, the Sub-Group revised its terms of reference and membership, changing its name from Safer Recruitment



to Safer Workforce, recognising the broader remit of the Sub Group. Representation now includes Cheshire Police and representatives from the Adult Residential and Day Care Provider Forums. Safer Workforce is also now a standing item on the Provider Forum agendas.

During 2011-12, the Safer Workforce Sub-Group continued its work consulting on a variety of workforce related guidance. This included:-

- A Code of Conduct for Transport staff contracted by the Local Authority;
- Halton Borough Council Confidential Reporting Code;
- Safer Recruitment procedures of St Helens & Knowsley Teaching Hospitals NHS Trust and the Rape & Sexual Abuse Support Centre (RASASC); and
- Safer recruitment training for Bridgewater Community Health Care Trust.

Priorities for 2012-13 include:-

- Development of Safer Recruitment training for the Adults' workforce;
- Overseeing implementation of the changes to the CRB disclosure scheme by the Board partners. This will include consideration of the support needed to promote the changes across the Voluntary, Community & Faith Sector; and
- Reporting on learning from allegations relating to vulnerable adults to the Sub-Group.





Appendix I

Halton Safeguarding Adults Board: Terms of Reference

1.0 PURPOSE

The purpose of Halton's Safeguarding Adults Board (SAB) is to:-

- 1.1 Act as a multi-agency partnership board of lead officers and key representatives, which takes strategic decisions aimed at safeguarding vulnerable adults in Halton;
- 1.2 Determine and implement policy, co-ordinate activity between agencies, facilitate training and monitor, review and evaluate the safeguarding adults/ adult protection service;
- 1.3 Promote inter-agency cooperation, to encourage and help develop effective working relationships between different services and agencies, based on mutual understanding and trust;
- 1.4 Develop and sustain a high level of commitment to the protection of vulnerable adults; and
- 1.5 Ensure the development of services to support people from hard to reach groups.

The terms "vulnerable" and "adult" are as defined in "Adult Protection in Halton – Inter-agency Policy, Procedures & Guidance" available at www.halton.gov.uk/adultprotection or www.halton.gov.uk/safeguardingadults.

2.0 RESPONSIBILITY, ACCOUNTABILITY and REPORTING

- 2.1 Local agencies should work together within the overall framework of Department of Health guidance on joint working. The lead agency with responsibility for the establishment and effective working of the SAB is Halton Borough Council's Communities Directorate.
- 2.2 All agencies should designate a lead officer and, if necessary, a nominated other representative.
- 2.3 All main constituent agencies are responsible for contributing fully and effectively to the work of the SAB.
- 2.4 The SAB reports to the Community Safety Partnership through the Safer Halton Partnership, which is chaired by the Chief Executive of Halton

Borough Council and the Superintendent of Halton Police.

- 2.5 A formal report of the SAB will be compiled annually and presented to the Safer Halton Partnership and other forums by agreement.

3.0 FUNCTIONS

The functions of the SAB are to:-

- 3.1 Ensure that there is a level of agreement and understanding across agencies, about operational definitions and thresholds for intervention;
- 3.2 Develop, monitor, review and evaluate the implementation and effectiveness of Halton's SAB's work plan and sub-groups' work plans for the implementation of strategic decisions and policy;
- 3.3 Develop and keep under review, local policies, procedures, systems and protocols for inter-agency work to safeguard vulnerable adults;
- 3.4 Audit and evaluate the implementation and effectiveness of the safeguarding adults service and associated policies, procedures, systems and protocols;
- 3.5 Promote agreed policies, procedures and protocols to managers, staff, volunteers, service users and the public;
- 3.6 Arrange for information to be gathered and used in the evaluation of the safeguarding adults/ adult protection service, through performance assessment and monitoring systems and through consultation with stakeholders;
- 3.7 Develop a training and development strategy, incorporating joint training where appropriate.
- 3.8 Facilitate training and ensure its delivery and evaluation, to help improve the quality of adult protection and inter-agency working;
- 3.9 Ensure that service developments take into account the needs of all vulnerable adults, regardless of their age, gender, disability, faith / religion, race / ethnicity, sexual orientation, pregnancy/maternity, gender reassignment or marital / civil partnership status, who may experience discrimination and disadvantage;
- 3.10 Ensure that service developments take into account all relevant current legislation, including the Human Rights Act 1998.



- 3.11 Review national guidance and research information as it is issued, consider the implications and make recommendations for local implementation. Action and monitor such implementation;
- 3.12 Respond to consultation exercises where appropriate;
- 3.13 Commission serious case reviews where a vulnerable adult has died or, in certain circumstances, is seriously harmed, and abuse or neglect are confirmed or suspected, acting in accordance with Halton's Serious Case Review Procedure.
- 13.14 Improve local ways of working in the light of knowledge gained through national and local experience, research, Serious Case Reviews, internal and external inquires investigations and case studies. Ensure that practitioners benefit from learning and development attained through the SAB and that lessons learnt are shared, understood and acted upon.
- 3.15 Link with other agencies, sectors and forums that have a responsibility for protecting those at risk, such as Halton's Safeguarding Children Board, Domestic Abuse Forum and the Safer Halton Partnership, to ensure that both adult and child protection arrangements benefit from the learning, developments and work undertaken by the other, where appropriate.
- 3.16 Raise awareness within the wider community, of the need to safeguard vulnerable adults, explain how the community can contribute to this process, and facilitate such involvement.
- 3.17 Support and ensure the implementation of the development of quality standards for vulnerable adults, both locally and nationally.
- 3.18 Carry out an annual audit of alleged adult abuse and adult protection in Halton, through analysis of data and outcomes; report these and forecast developments, through the Annual Report of the Safeguarding Adults Board.

4.0 MEETINGS

- 4.1 The SAB will meet on a quarterly basis, with the schedule of meetings published in advance for a year. Meetings can be called more frequently as circumstances dictate.
- 4.2 The agenda will be prepared by the Safeguarding and Dignity Officer, in consultation with the Chair

of the SAB, and will be issued to all members at least one week before the meeting takes place.

- 4.3 Meeting agendas will progress the work plan.
- 4.4 All SAB members will be able to bring appropriate items to the agenda, through the Chairperson or Safeguarding Officer. Standing items on the agenda will be by agreement of SAB members.
- 4.5 The chairperson will arrange for minutes of meetings to be taken and a copy of the minutes sent to each SAB member and other people by agreement, including the Chairs of the Safer Halton Partnership, Practitioners Network and senior managers of public sector partner agencies.
- 4.6 The accuracy of minutes will be checked at the subsequent meeting.

5.0 SUB GROUPS

- 5.1 Sub-groups are currently as follows:
- Publicity & Communication
 - Children & Adults Learning and Development
 - Quality & Performance
 - Policy & Procedures
 - Practitioners Network
 - Safer Workforce
- 5.2 Other sub-groups may be set up for particular purposes on a short term or standing basis, by agreement of the SAB, to support the work of the SAB, for example:
- Carry out specific tasks;
 - Provide specialist advice;
 - Represent a defined geographical area within Halton's boundaries.

- 5.3 All groups working under the auspices of the SAB will be established by the SAB, report to the SAB, and work to agreed terms of reference and work plans or a specific, stated purpose and lines of reporting to the SAB.

6.0 CHAIRING

- 6.1 The SAB will be chaired by a senior manager of Halton Borough Council's Communities Directorate, as the agency with lead responsibility for coordinating the arrangements for safeguarding vulnerable adults/adult protection in Halton.



7.0 ATTENDANCE CODE OF CONDUCT

Members of the SAB make the following undertakings:

- 7.1 To demonstrate a commitment to attend the meetings.
- 7.2 To submit apologies if they cannot attend.
- 7.3 To seek to arrange for an agreed representative to attend if the SAB member is unable to do so.
- 7.4 To send any agenda items to the chairperson at least two weeks before the meeting. Urgent items that arise outside this timescale can be raised through any other business on the agenda or as agreed by SAB members.
- 7.5 To feed back to their department / organisation / agency / sector and canvas views to bring to meetings where appropriate.
- 7.6 To act as a conduit between the SAB and the department/organisation/agency/sector they represent or whose views they reflect, to further the adoption of policies, procedures, guidance, protocols and other items endorsed by the SAB.
- 7.7 To listen to SAB members and other attendees and address comments to all attending.
- 7.8 Comments made by anyone attending the SAB, that contribute to any form of discrimination in respect of the age, gender, disability, faith/religion, race/ethnicity, sexual orientation, pregnancy/maternity, gender reassignment or marital/civil partnership status of others, or the bullying or victimisation of others, are not acceptable and will be challenged by the chairperson and other SAB members.

8.0 MEMBERSHIP

- 8.1 In order to carry out its responsibilities effectively, the SAB will seek to have members from each of the main agencies in the public, private and voluntary sectors responsible for working together to safeguard vulnerable adults.
- 8.2 Members' roles and seniority will enable them to contribute to developing and maintaining strong and effective systems, policies, procedures and protocols.
- 8.3 The SAB will arrange to involve others in its work as needed, where they have a relevant interest.

- 8.4 Membership is detailed in a separate table that reflects changes and is routinely updated.

9.0 REFERENCES

- 9.1 No Secrets – Department of Health - 2000
- Safeguarding Adults in Halton – Inter-Agency Policy, Procedures and Guidance
- Working Together to Safeguard Children – Department of Health, Home Office, DfES 1999



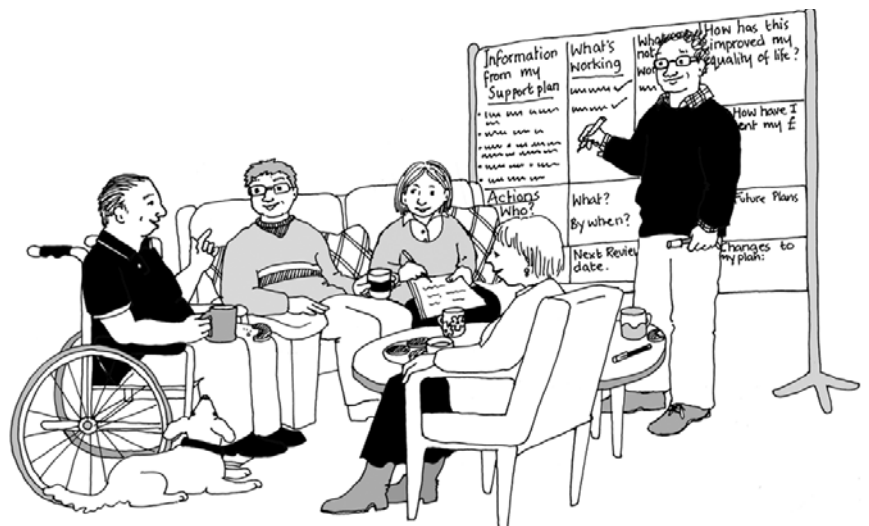
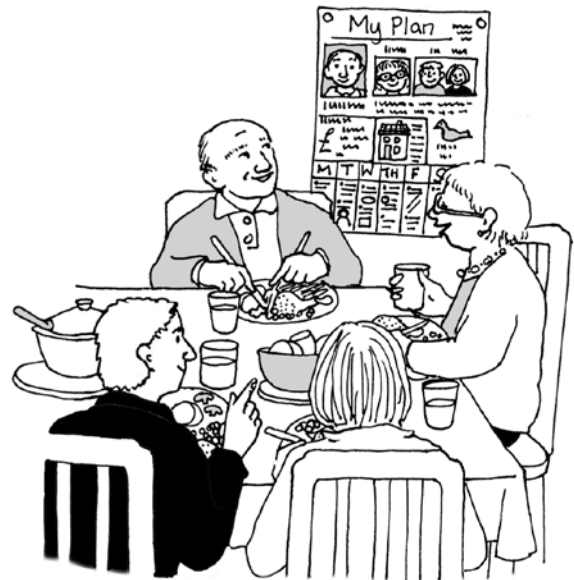
Appendix 2

Halton Safeguarding Adults Board : Membership

(as at 31ST MARCH 2012)

The Board's membership includes strategic level representatives from the following agencies and forums:

- Halton Borough Council
- Halton Safeguarding Children Board
- Domestic Abuse Forum
- Learning Disability Partnership Board
- Halton Community Safety
- Warrington & Halton Hospitals NHS Trust
- St Helens and Knowsley Hospitals NHS Trust
- NHS Halton & St Helens Primary Care NHS Trust (NHS Merseyside):
 - Safeguarding
 - Adults Commissioning
- 5 Boroughs Partnership NHS Trust
- Cheshire Constabulary:
 - Headquarters
 - Northern Public Protection Unit
- Cheshire Fire & Rescue Service
- Riverside College
- Probation Service and MAPPA (Multi-Agency Public Protection Arrangements)
- Consumer Protection / Trading Standards
- Housing Trusts/Registered Providers of Social Housing
- Halton Voluntary Action
- Age UK Mid Mersey
- Care Home Services
- Community Day Services
- Domiciliary Care Services
- Halton Dignity Partnership
- Advocacy services
- Carer Representation (2 Carers)





Appendix 3

Standards for Adult Safeguarding

1. Outcomes for and the experiences of people who use services

This theme looks at what has actually been achieved as regards Adult Safeguarding and the quality of experience for people who have used the services provided.

| Element | Ideal Service |
|---|---|
| 1. Outcomes | <p>1.1 Vulnerable people are safeguarded in the community and in establishments such as care homes and hospitals.</p> <p>1.2 The council and its partners' approach to safeguarding clearly has an outcome based focus</p> <p>1.3 The council demonstrates improved safeguarding outcomes alongside wider community safety improvements</p> |
| 2. People's experiences of safeguarding | <p>2.1 The council has achieved high levels of expressed positive experiences from people who have used safeguarding services</p> <p>2.2 The council has fully engaged people who use services in the design of its services</p> <p>2.3 Delivery accords with the public sector Equality Duty</p> <p>2.4 Safeguarding is personalised</p> |

2. Leadership, Strategy and Commissioning

This theme looks at the overall vision for Adult Safeguarding; the strategy that is used to achieve that vision and how this is led at all levels in the organisations involved.

| Element | Ideal Service |
|------------------|--|
| 3. Leadership | <p>3.1 There is recognised and active leadership by the council on Adult Safeguarding</p> <p>3.2 There is joint and co-ordinated leadership with and by other key partners</p> |
| 4. Strategy | <p>4.1 Safeguarding is embedded in corporate and service strategies across the council and partners</p> <p>4.2 The council has a clear vision, priorities, strategies and plans for Adult Safeguarding that is shared with key partners including the police and NHS</p> |
| 5. Commissioning | <p>5.1 The council and its partners commission safe and cost effective services</p> <p>5.2 The council and its partners have developed mechanisms for people who are organising their own support and services to manage risks and benefits</p> |



3. Service Delivery, performance and resource management

This theme looks at how services are actually provided, including the involvement of people using services, and how the performance and resources of the service are managed.

| Element | Ideal Service |
|--|--|
| 6. Delivery and effective practice | <p>1.1 The council has robust and effective service delivery that makes safeguarding everybody's business</p> <p>1.2 Domestic violence, hate crime, anti-social behaviour and community cohesion work includes 'vulnerable adults'</p> <p>1.3 Adult Social Care Services 'Put People First' and safeguard them</p> <p>6.4 Safeguarding is personalised</p> |
| 7. Performance and Resource Management | <p>7.1 Services are held accountable through performance measures, including quality measures, towards the outcomes for people in the strategy</p> |

4. Working Together

This theme looks at the role and performance of the Local Safeguarding Board and how all partners work together to ensure high quality services.

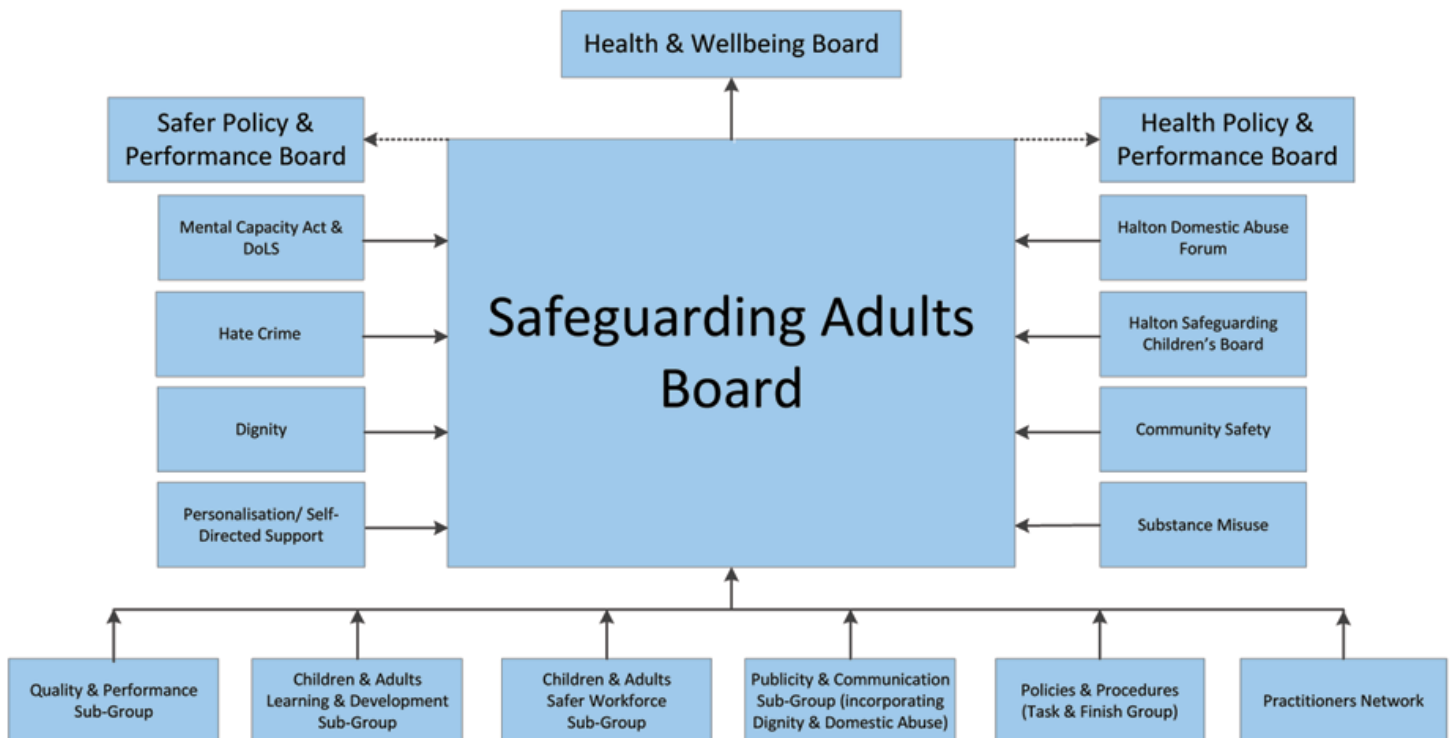
| Element | Ideal Service |
|-----------------------------|---|
| 8. Local Safeguarding Board | <p>8.1 There is multi-agency commitment to safeguarding</p> <p>8.2. Safeguarding is effective at all levels (prevention and intervention)</p> |



Appendix 4

Safeguarding Adults Board: Structure and Reporting Framework

STRUCTURE & REPORTING FRAMEWORK





Appendix 5

Halton Safeguarding Adults Board: Work Plan 2012 / 13

Halton's Safeguarding Adults Board (SAB) contributes to the objectives of the Health and Well-Being Board's Joint Health and Wellbeing Strategy and Halton Strategic Partnership's Sustainable Community Strategy.

The Board will do this during 2012-13 by focussing on the Board key priorities, which in turn are the focus of the SAB's Work Plan as follows :-

Priority 1: To promote awareness of abuse and of all individuals' right to be safe and be afforded dignity, particularly amongst people who are 'vulnerable' or at risk and others, including the wider community, staff and volunteers.

Priority 2: To increase the contribution from service users and carers, including individuals who use services and wider communities, by seeking to ensure that their views and experience inform the Board's work and service developments, and by ensuring that individualised services are available in a way that keeps people safe but enables them to make informed decisions about risk.

Priority 3: To ensure there is a strong multi-agency approach to assuring the safety, wellbeing and dignity of vulnerable adults.

Priority 4: To equip employees with the necessary tools to both safeguard vulnerable adults and ensure their dignity is respected.

NOTE

Timescales for completion of associated actions will be by March 2013.

The priorities and associated actions outlined below have been mapped against the '**Standards for Adult Safeguarding**, published at the end of 2011 as outlined in **Appendix 3** of this report and Halton's Clinical Commissioning Group's Safeguarding Assurance Framework outlined in **Appendix 6**.

Priority 1

| Item No. | Actions by which we will achieve the priority | Responsible body / lead | Links to other area work |
|----------|--|---|------------------------------|
| 1.1 | Review and develop the marketing strategy to particularly engage with adults at risk and the wider community, to raise awareness. | Quality & performance sub-group and publicity & communications sub-group | ADASS Std 3 & 6 CCG Std 9 |
| 1.2 | Distribute information widely and in a suitable format | Publicity & communications sub-group and SAB members | ADASS Std 3 & 6 CCG Std 5 |
| 1.3 | Review and update Halton's Prevention and Early Intervention strategy | HBC - Operational Director (Prevention & Assessment) | ADASS Std 1 CCG Std 3 |
| 1.4 | Continue to ensure Safeguarding related policies, procedures and practice guidance take adequate account of Safeguarding and Dignity standards in terms of both prevention and response e.g. Restrictive Physical Interventions, Exclusion, Nutrition & Hydration, Recruitment & Selection, Whistle-blowing, Supervision | Quality & performance sub-group and all partner agencies represented on the SAB | ADASS Std 4 CCG Std 6 |
| 1.5 | Ensure all reasonable systems and are in place to safeguard individuals directing their own support and assure their dignity | Quality & performance sub-group | ADASS Std 4 CCG Std 6 |



Priority 2

| Item No. | Actions by which we will achieve the priority | Responsible body / lead | Links to other area work |
|----------|---|--|--------------------------|
| 2.1 | Ensure service users', carers' and wider communities' involvement informs the work of the SAB | Task and finish group from members of Quality & performance Sub-group and publicity & communications sub-group | ADASS Std 7 CCG Std 8 |
| 2.2 | Utilize existing, available resources to gain feedback from local communities e.g. existing stakeholder events, User Led Organizations, LINKs, PALS, Local Area Forums, community groups, Halton 2000 Survey, partner agencies' research and intelligence | Quality & performance sub-group | ADASS Std 7 CCG Std 8 |
| 2.3 | Utilize learning and implement recommendations arising from the Service-User and Carer Survey carried out August-November 2011 | SAB and Quality & performance sub-group | ADASS Std 7 CCG Std 8 |

Priority 3

| Item No. | Actions by which we will achieve the priority | Responsible body/lead | Links to other area work |
|----------|---|-------------------------------------|------------------------------|
| 3.1 | Review the structure, reporting arrangements and current activity in order to improve effectiveness and impact on outcomes | SAB | ADASS Std 1 CCG Std 7 |
| 3.2 | Effective use of resources | SAB & Sub-groups | ADASS Std 1 & 5 CCG Std 5 |
| 3.3 | Influence other strategic partnerships and formalise closer alignment with related services, including domestic abuse, dignity, mental capacity, personalisation/self-directed support, safeguarding children, customer care, community safety and hate crime | SAB & Sub-groups | ADASS Std 1 CCG Std 5 |
| 3.4 | To ensure customer feedback informs future strategy and practice | Quality & Performance Sub-group SAB | ADASS Std 2 CCG Std 9 |



Priority 4

| Item No. | Actions by which we will achieve the priority | Responsible body/lead | Links to other area work |
|----------|--|---|---------------------------------|
| 4.1 | Ensure robust policies, procedures, practice guidance and protocols are developed, reviewed, communicated and implemented | Quality & Performance Sub-group | ADASS Std 4 & 7 CCG Std 2 |
| 4.2 | Provide feedback and direction to practitioners and managers | Quality & Performance Sub-Group | ADASS Std 6 CCG Std 6 |
| 4.3 | Improve the way in which we ensure that available learning is recorded, shared, informs and drives service developments: <ul style="list-style-type: none"> • From the experiences of and outcomes for people who use safeguarding services • From the experiences of carers • From events occurring both locally, and in other localities, including Serious Case Reviews and Serious Untoward Incidents | Quality & Performance Sub-group Task Group from Quality & Performance sub-group membership | ADASS Std 1, 2 + 7 CCG Std 9 |
| 4.4 | Develop and maintain a programme of events to develop practice and support and cascade learning | Divisional Manager (Commissioning) leading the Practitioners' & Operational Managers' Network | ADASS Std 3 & 7 CCG Std 6 |
| 4.5 | Improve patient experience and hospital admission and discharge arrangements with regard to Safeguarding and Dignity. | Task Group from Quality & Performance sub-group membership | ADASS Std 2 CCG Std 9 |
| 4.6 | Provide a programme of opportunities e.g. events/workshops/learning sets, to ensure good practice is embedded | Sub-group Chairs of Learning & Development Sub-group and Quality & Performance Sub-group Agency line managers | ADASS Std 6 & 7 CCG Std 8 |
| 4.7 | Implement the Safeguarding Adults Learning & Development/Training Strategy | Learning & Development Sub-group | ADASS Std 7 CCG Std 6 |
| 4.8 | Develop and 'roll out' Safeguarding Adults Safer Recruitment training | Learning & Development Sub-group | ADASS Std 7 CCG Std 6 |
| 4.9 | Implement revised Vetting and Barring and CRB requirements | Safer Workforce sub-group | ADASS Std 1 CCG Std 6 |



Appendix 6

Halton's Clinical Commissioning Group's Safeguarding Assurance Framework

1. Do we understand our responsibilities with regard to safeguarding?
2. Are adults and children safe in our organisations?
3. How well developed are our adult and children safeguarding processes?
4. Are we an active members of the local adult and children's safeguarding board?
5. How well do we share information with our partners?
6. Does our workforce understand their adult and children's safeguarding responsibilities?
7. Do we know the quantum of safeguarding incidents?
8. How good are we at implementing change following safeguarding investigations or reviews?
9. How good are we at engaging service users/patients in our approach to safeguarding?





Appendix 7

Useful Information

Safeguarding Adults in Halton

Information available via Halton Borough Council www.halton.gov.uk/safeguardingadults includes:

- **Safeguarding Adults in Halton** – Inter-agency Policy, Procedures and Guidance, Version 7 Revised 2010
<http://www3.halton.gov.uk/ignl/pages/86821/86830/103251/103558/intagencyppgjan2008v6.pdf>
- **Policies, procedures, protocols, practice guidance, leaflets, training course details and other useful website links**
<http://www3.halton.gov.uk/healthandsocialcare/103161/214240/>

Standards for Adult Safeguarding

This information is available via: <http://www.idea.gov.uk/idk/aio/29270716>

Department of Health

Information available via www.dh.gov.uk includes:

- **No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse**
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4008486
- **Statement of Government Policy on Adult Safeguarding**
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_126748
- **Caring for our Future: Shared Ambitions for Care and Support**
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_129923

Vetting & Barring Scheme

Information about the review and changes to the scheme is available via: <http://www.homeoffice.gov.uk/crime/vetting-barring-scheme/>

Care Quality Commission (CQC)

Inspection reports of Adult Social Care including Safeguarding Adults services is available via: www.cqc.org.uk/



This Annual Report was compiled by:

People & Communities Policy Team, Halton Borough Council on behalf of Halton Adults Safeguarding Board

This report is available in alternative formats upon request

For more information please contact Helen Moir, Divisional Manager, Halton Borough Council in any of the following ways:

Email: helen.moir@halton.gov.uk

Tel: 0151 906 4847