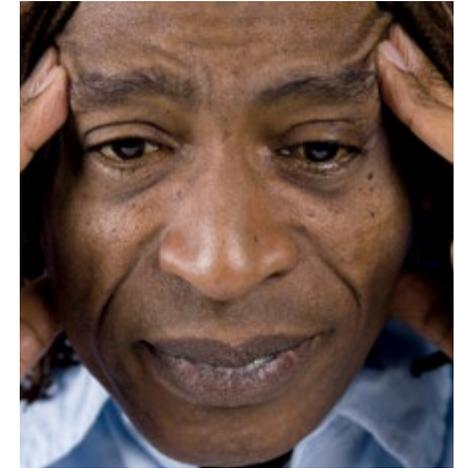


# Bexley Safeguarding Adults Board

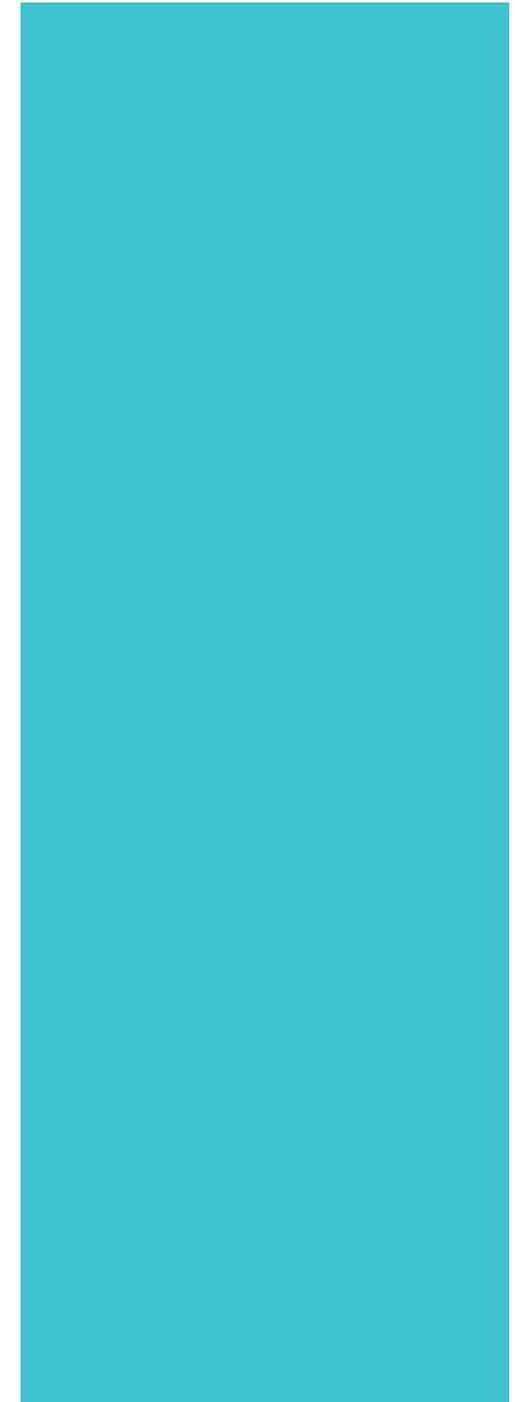
ANNUAL REPORT 2016/2017



# **Bexley Safeguarding Adults Board ANNUAL REPORT 2016/2017**

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# Independent Chairperson, Annie Callanan's Statement:

I am delighted to introduce the Bexley Safeguarding Adults Board (BSAB) 2016-17 Annual Report in this my second year as Independent Chair and covering our second full year in operation implementing the Care Act 2014.

We have, as a Board, reviewed our partnership creating a slimmer and more focused structure. We now have a strong and coherent Chairs Group and have worked hard to continue to broaden our partnership across the sector and beyond the Bexley Safeguarding Adults Board in London and Nationally.

We developed a relevant and practical work plan to deliver our commitment to working across all agencies, supporting operational services work to prevent abuse from happening. We are also working to ensure that when and where abuse does happen, we are assured that all agencies are equipped to respond appropriately.

We have increased awareness of adult abuse in Bexley through our Publicity & Communications Campaign, 'Keeping safe in Bexley,' which worked in close partnership with partnership communication teams as well as the local libraries and agencies providing care in Bexley. We supported the Local Authority's Training and Development Programme, which offered a proactive and supportive opportunity to work

proactively with all Directorates across Bexley including, the Police and Fire Services as well as a variety of community groups, to bring about real improvement in responding to vulnerable adults.

We achieved this by establishing a programme of Safeguarding Adults Risk Assessment Audits throughout the partnership (15 individual teams) and assessed effectiveness through peer-to-peer Challenge Events (4 held this year), so that learning is shared which has led to improved engagement. This year we will build on that to consider Themed Audits, which will allow us, as a Board, to identify those cross sector areas where services are working well and identifying areas of improvement for the next years' work plan.

We continue through our Local Implementation Network (LIN) to learn from MCA and DOLS challenges and will continue to increase our support through the National changes so that vulnerable adults are being properly assessed in relation to their capacity to make their own decisions about their care and life choices and their rights protected when their liberties are curtailed.

We are working more closely with the Local Safeguarding Children's Board (LSCB) and meeting regularly with the Chief Executive Officer at Bexley Council to explore ways to improve cross Board

work and maximise our joint impact and achievement in these challenging times.

We continue to work across the partnership starting with our links with Bexley Voluntary Services Council (BVSC) to build closer engagement where we can continue to make Bexley a safer place for all adults to live and work and where diversity is celebrated and valued.

We will, in this next year, appoint a Vice Chair and two Lay Members to strengthen the Boards transparency as well as improving performance and quality information. We will continue to keep all agencies informed of our expectations and offer support and guidance wherever possible through the use of our new website – [www.safeguardingadultsinbexley.com](http://www.safeguardingadultsinbexley.com), e-briefings and attending forums.

In conclusion, I would like to say, 'Thank you,' to the all Board Members for your dedication and hard work to drive the Board's key objectives across Bexley in 2016-2017 and look forward to achieving our goals for Bexley in 2017-2018.

**Annie Callanan, Independent Chair,  
Bexley Safeguarding Adults Board  
(BSAB)**

**If you are concerned that an adult you know may be at risk of abuse, harm or neglect from either an individual or an organisation, please make contact with the Safeguarding Adults Team by calling 020 8303 7777**



# Our Statement of Purpose:

The Bexley Safeguarding Adults Board (BSAB) is to protect and promote individual human rights so that adults stay safe and are at all times protected from abuse, neglect, discrimination, or poor treatment.

## We will:

- Not tolerate abuse
- Reduce risk to adults in vulnerable situations, as well as reacting effectively when it happens
- Ensure local systems aim to protect people at risk are proportionate, balanced and responsive
- Work together to prevent harm and improve services
- Ensure there is communication with the public to develop awareness of the need to safeguard and protect adults in vulnerable situations from harm
- Provide information and support on how to access services to ensure the safety of adults in vulnerable situations
- Hold local agencies responsible and to give good reason for practice relating to Adult Safeguarding, Deprivation of Liberty Safeguards and Mental Capacity.



# BSAB Structure and Objectives:

The BSAB is accountable for its work to its constituent agencies and through the People Overview and Scrutiny Committee of Bexley Council and to the respective Local Strategic Partnerships as well as the Health and Wellbeing Board.

The Independent Chairperson, will be responsible for reporting to these groups. Board members are accountable to their own organisations, and to the Board within the remit of the stated roles and responsibilities. Those who sit on the Board will hold responsibility for feeding back to and representing the views of their own agencies when decisions are taken.

The Bexley Safeguarding Adults Chairs Group (BSACG), led by the Independent Chairperson, reports directly to the Board. The BSACG focuses on the delivery of BSAB strategic objectives and priorities and is a multi-agency forum made up of the Chairs from the BSAB Sub Groups. The Sub Groups are co-ordinated by identified representatives from key partner agencies who are responsible for making a written report to the BSACG on a quarterly basis.

Each Sub Group operates to terms of and reference and work plan agreed by the Board, which focuses on the delivery of SAB strategic objectives and priorities. Short term task and finish groups have also been set up as required and these focus on the implementation of specific objectives or projects, such as: Self-Neglect and Hoarding.

## 2016-2017 BSAB BOARD STRUCTURE:



# Objectives of the Chairs group and Sub-groups:

## The BSACG will:

- contribute evidence and information to the Safeguarding Adults Board Annual Report
- provide a quarterly report to the BSAB on the outcomes of the work undertaken by the group
- consider the impact of guidance, legislation, case law, multiagency procedures and protocols on operational practice
- share new research evidence and take responsibility for dissemination of research to inform practice
- support the development of local practitioner forums and to feedback issues and concerns to the group and where appropriate to the Board
- ensure the development of local inter-agency protocols and guidance regarding thresholds consistent with principles of alert, referral, decision, safeguarding strategy, assessment, planning, review, recording and monitoring
- develop agreed protocols for Board approval to allocate and clarify agency roles and responsibilities including having effective adult safeguarding employment practice and processes
- disseminate information on policy, procedures and best practice
- provide information to the BSAB regarding other matters regarding the wider Safeguarding remit, e.g. matters of safety in the home or community, to enable the BSAB to commission reports and work for progress to be reported to the Board
- ensure that an equality impact assessment on safeguarding adults' policy and procedures is in place and reviewed as required.



# Our top '10' achievements:

## We have:

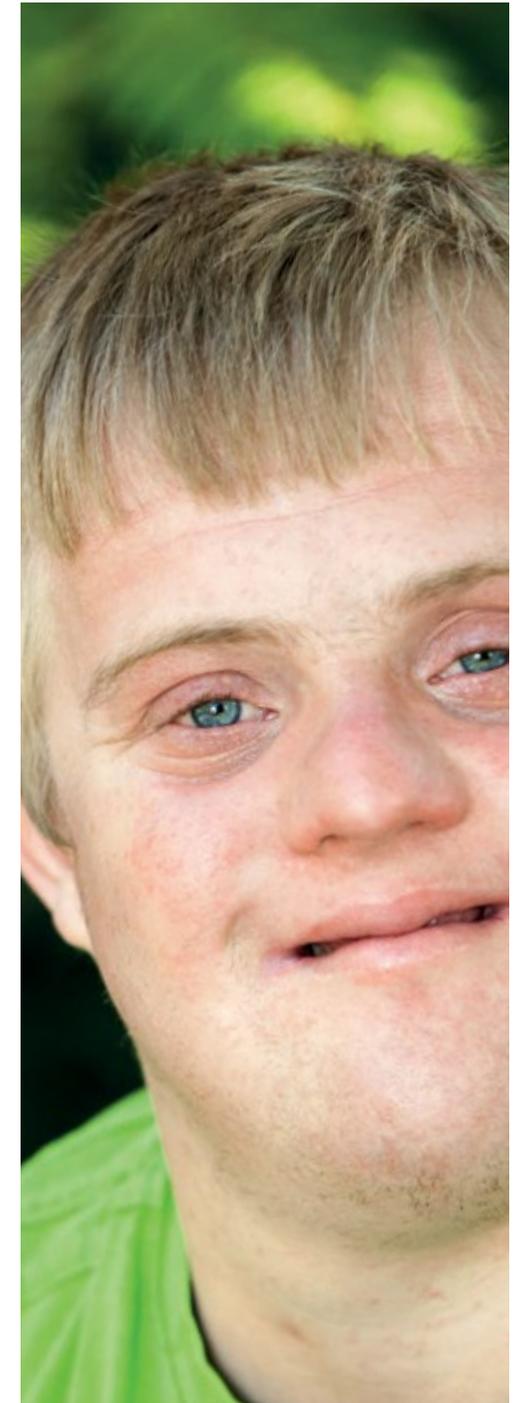
1. Held our Annual Development Day, where we hired Sean Blair from ProMeet to come and deliver a bespoke work programme revision to set the objectives and key priorities of the Board. We identified the following Objectives:
  - Communication Strategy – exploring new ways of sharing information
  - Engagement - shared commitment that it's everyone's business in a more proactive role and work to identify the core membership of the Board
  - Establish 'Critical' Attendees for Multi-Agency Training for 'added-value'
  - Feedback from Sub Groups directly to Board and back down to frontline
  - Explore how Providers are being Pro-active and Preventative
  - Feedback on our Quality Assurance teams with Commissioned Services
  - Further Lay Person Involvement by reviewing Job Descriptions
  - Strategic Review of how the Board functions - membership and how it works, links to other Boards
  - Identify and explore - Who are the 'unknown' people at risk?
2. Held 3 Challenge Events – reviewing a multi-agency audit to evidence the effectiveness of policies and procedures for the recruitment and supervision of people working with vulnerable adults. We aim to ensure compliance with national guidance, including integration of best practice and learning Information and practice sharing to improve the way adult protection is managed in Bexley.
3. Concluded Bexley's first Serious Adult Review (SAR) and held a SAR Workshop with key partners in order to cascade learning points which we have anonymously published.
4. Began analysis of National SAR cases and how the best practice and learning lessons could be applied in Bexley to promote a culture of prevention and responsiveness to the needs of residents.
5. Developed a baseline Training Survey for all providers in Bexley working with vulnerable adults.
6. Created a Communication Strategy, which will support the awareness raising of adult safeguarding and associated aspects of self-protection with partner agencies and service users and carers.
7. Held consultation events to create the Board's new website – [www.safeguardingadultsinbexley.com](http://www.safeguardingadultsinbexley.com) – the site acts an online forum for information sharing and signposting for both the public and professional user.
8. Continued to support the London Borough of Bexley, Safeguarding Adults Team to deliver 'free' multi-agency training sessions to any agency working with vulnerable adults in Bexley.
9. Created SESAB, South East Safeguarding Adults Board, which comprises of all the Business Managers across 5 Regional Local Authorities to share information and work-streams as needed to give support to those Board members that work cross-borough (in some instances 1 agency had 3 boroughs) this has shown a reduction in resources and has assisted in gathering of information when applicable.
10. Continued commitment from key partners through a multi-agency funded budget. Those contributed in 2016 - 2017 were:
  - London Borough of Bexley, Adult Social Care
  - NHS Bexley Clinical Commissioning Group (CCG)
  - Metropolitan Police Service, Bexley
  - Lewisham and Greenwich NHS Trust
  - Dartford Gravesham NHS Trust
  - Oxleas NHS Foundation Trust
  - London Fire Brigade, Bexley

## **2016-2017 Members of the Board:**

- London Borough of Bexley
- London Metropolitan Police, Bexley
- Lewisham and Greenwich NHS Trust
- Bexley NHS Clinical Commissioning Group
- Oxleas NHS Foundation Trust
- London Fire Services, Bexley
- Inspire Community Trust
- Age UK, Bexley
- Mencap, Bexley
- MCCCH, Bexley
- Healthwatch, Bexley
- The Learning Centre (TLC), Bexley Campus
- Bexley Voluntary Service Council (BVSC)
- MIND, Bexley
- South East Coroner's Office
- London Ambulance Services, Bexley
- Care Quality Commission (CQC)
- Probation Services, Bexley
- Advocacy for All, Bexley

## **Other Key Achievements in 2016-2017:**

- Implemented the application of the Safeguarding Adults Competency Framework across partner agencies in Bexley
- Created a SAR Protocol for referrals
- Identified data and information streams
- Continued to link with hard to reach groups
- Greater engagement from Commissioning services
- Created and reviewed BSAB Risk Register
- Offered a one-day Mental Capacity Act and DOLS Training for the Board
- Strategically linked with Transitions Team
- Created closer links to other Boards – for example: BSCB
- Reviewed and updated the Risk Audit Tool for agencies and organised 2017-2018 Challenge Events
- Recognised and supported Housing Services to create a Housing Forum to be re-launched (summer 2017)
- Closer links with BVSC for reaching out to Bexley's BME communities and forums



# Our Safeguarding Adults Board Joint Statement:

This year's statements have been combined across the partners based on two questions: 1) How have they contributed to Board in 2016-2017; and 2) How has the Board contributed to your organisation. This decision was made to create a joint response on how we are making a difference as one Board for the residents of Bexley.

## 1) How have you contributed to the Board in 2016-2017; not just monetarily, but in time and dedication to achieving positive outcomes?

- The London Borough of Bexley (LBB), Adult Social Care is the lead agency for adult safeguarding and is a statutory member of the Board.
- Attendance at the SAB from LBB is at the highest level, including the Chief Executive, Director of Adult Social Care & Health and the Lead Member for Adult Social Care amongst others.
- LBB have membership of all of the SAB sub groups and the Publicity & Communications are chaired by the Head of Adult Safeguarding and the Lin by the MCA/DOLS Lead.
- LBB leads the multi-agency local adult safeguarding system that

seeks to prevent abuse and neglect and stop it quickly when it happens making enquiries, or request others to make them, when it was thought that an adult with care and support needs may be at risk of abuse or neglect

- LBB has continued to provide a learning and development opportunities, not only for its own staff, but has included key partner involvement, including service providers, Advocacy services and the emergency services.
- Ongoing work with commissioners of services, quality assurance personnel, adult safeguarding, the Clinical Commissioning Group and the Care Quality Commission to review services and support service quality improvements. This has led to more informed, information led and proportionate means to address emerging

concerns regarding whole services or organisations.

- Dartford & Gravesham NHS Trust has shown commitment to the work of Bexley Safeguarding Adults Board (BSAB). The Trust is represented at Board Level by the Director of Nursing & Quality; the Safeguarding Adults Lead for the Trust regularly attends the Boards sub-groups and is the Vice Chair of the SAR sub-group. The Safeguarding Lead has attended various training sessions and updates including the MCA & DOLS briefing- new legislation requirements, held on behalf of BSAB.
- The key partners that contributed to the SAR were: LBB, Dartford Gravesham Trust, Oxleas NHS Foundation Trust and the Bexley CCG. The briefing workshop that was held in regards to the SAR was facilitated by those partners

alongside the commissioned Reviewers to provide an interactive session that was able to demonstrate the importance of raising safeguarding concerns and how concerns can lead to multi-agency change in practice.

- The Safeguarding Lead at Dartford Gravesham Trust is currently assisting the BSAB with an Independent Management Review (IMR) of a more recent SAR.
- The CCG is a commissioning organisation and safeguarding is a thread that runs through every stage of our commissioning process.
- The CCG is a statutory member of the Board. The Director for Quality, Governance and Performance is the Executive Safeguarding Lead for safeguarding in the CCG and he and the Safeguarding and Quality Lead attend Board Meetings.
- The BSAB Sub Groups are Chaired by Board partners:
  - CCG - Performance Management and Quality Assurance
  - LBB - Publicity and Communications
  - Oxleas - Best Practice and Learning Lessons

- London Metropolitan Police - Training and Development
- Healthwatch - Serious Adult Review (SAR)
- LBB - Local Implementation Network (LIN)
- The Board partners are involved as members across most if not all the Sub Groups; LBB and the CCG have membership of all the sub groups and are active participants within it.
- As members of the Chairs Group the partners especially the CCG is able to share key themes from all the sub groups represented.
- The three statutory partners: London Borough of Bexley, CCG and the London Metropolitan Police, have also supported the Board as panel members at the Challenge Events where information gathered from practice audits have been peer-reviewed.
- CCG involvement as the Chair of the Performance Management and Quality Assurance Sub Group has been key in ensuring that a programme of practice audit is in place for 2017/18 which will ensure that quality intelligence is gathered from a sample of both commissioned and non-

commissioned services in the borough.

- Key statutory and associate members participated in the BSAB's Development Day, which offered the Board direct strategic contribution to the development of the BSAB Joint Work Programme for 2017/18.
- The Safeguarding, Quality and Commissioning Teams at the London Borough Bexley and Bexley CCG continue to work in partnership to monitor and improve the care and support of adults at risk receiving care both in the community, care homes and hospitals through multi agency meetings and by doing joint monitoring visits. The information gathered is recorded and reviewed and emerging themes such as the length of time DBS returns are taking is challenged at a senior level by the BSAB Independent Chair through to the National and London Safeguarding Adults Boards.
- One of the Board's priorities for 2016-2017, was to keep agencies accountable in relation to their Mental Capacity Act and Deprivation of Liberty Safeguards. The CCG have worked with GPs who look after



the Care Homes, hospitals and other health providers to gain assurance that they are compliant with safeguarding and mental capacity legislation to ensure that patient's human rights are being upheld. This work has resulted in an increase of Deprivation of Liberty Safeguards applications from the hospitals and in improved processes being put in place by GPs to ensure that Mental Capacity Assessments are completed and best interest decisions recorded. Any areas of concern are managed through the CCG governance framework.

- The CCG support the work of the Board in gaining assurance of safeguarding compliance by ensuring that safeguarding is a key element through all stages of the commissioning and review process.
- To support the application of the safeguarding competency framework, the CCG has whilst in partnership with social care colleagues across LBB and Lewisham and Greenwich Trust, a dynamic providers' forum is now established. There have been 4 forums which amongst other achievements have resulted in improved communication between the Queen Elizabeth. Hospital

discharge team and the care homes. The Care Home Forum has also provided an opportunity for providers to network, reflect on practice to learn from each other and access training and support which will help staff achieve the relevant competencies.

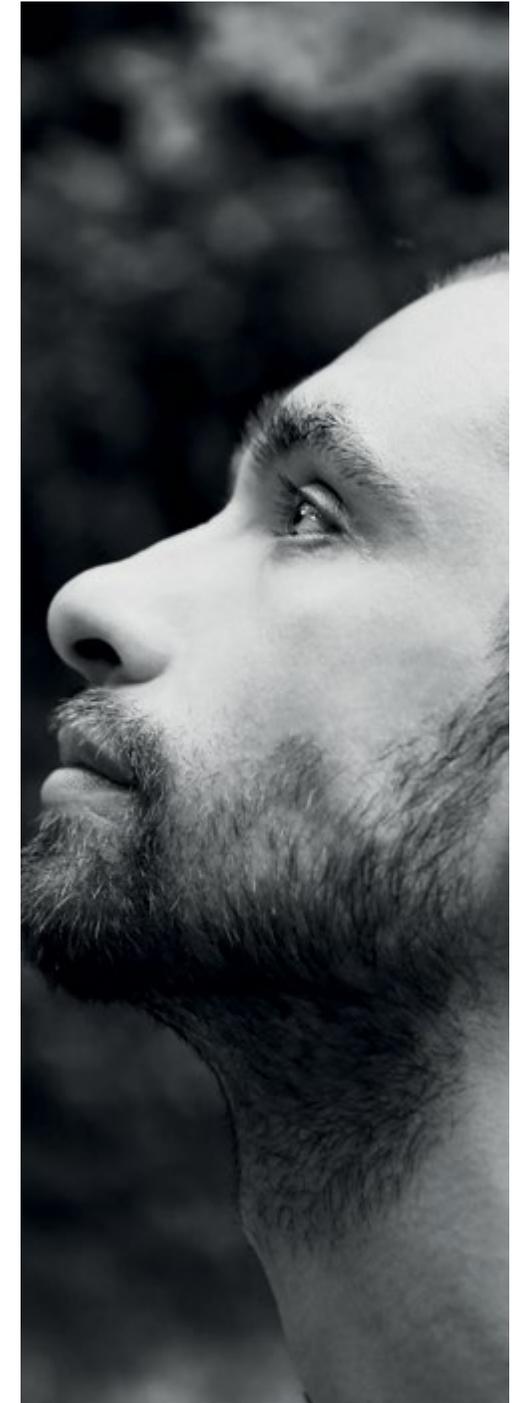
- Key partners like Lewisham and Greenwich Trust (LGT) ensures attendance at the board meetings and development days. The Trust has a system of cascading down key developments and information from the Bexley Safeguarding Adult Board via the Trust's own Safeguarding Committee. For example, the actions required are taken through the Trust's Safeguarding Assurance Group. Also, LGT have participated in the SAR briefing workshop and identified any learning for the Trust and LGT is a key member to Board Sub Groups, as well as, LGT's Adult Safeguarding Manager is the Vice Chair for the BSAB Performance Management and Quality Assurance Sub Group and links back to key agencies within the Trust Safeguarding Assurance Group.
- Statutory partners are invited and participate in most if not all the relevant Sub Groups. For example the London Metropolitan Police

is actively involved in several Sub Groups and always flexible to attend as and when needed.

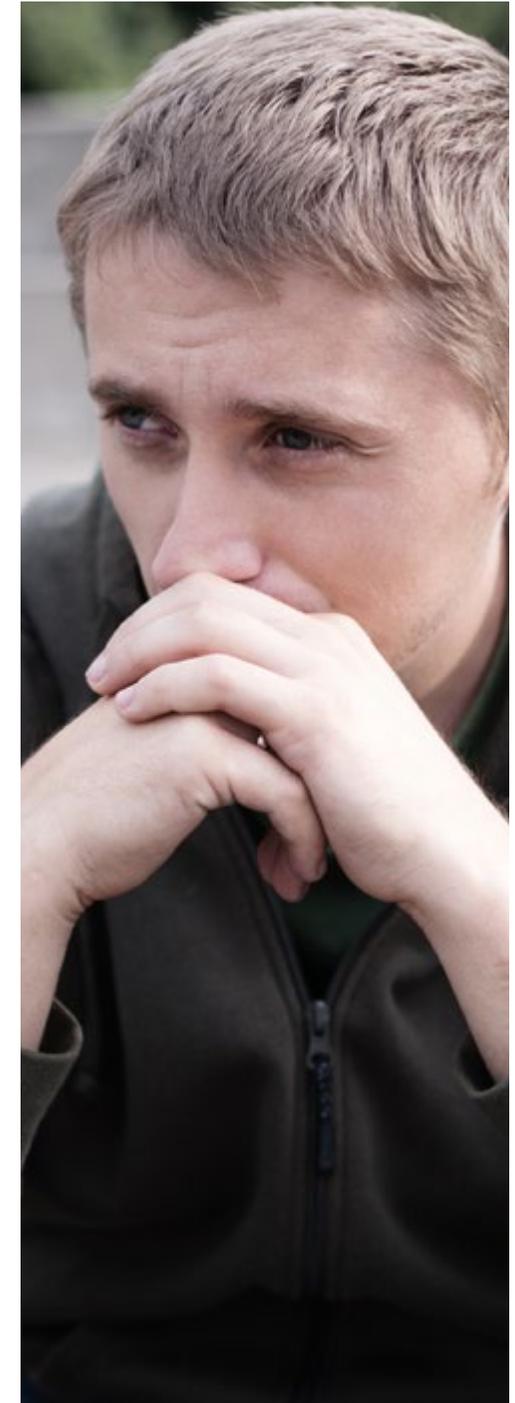
- Oxleas has provided consistent representation to the Board throughout the year and has both shaped and been shaped by it.
- Oxleas has provided data to the Board on both client referrals and training.

## 2) How has the Board contributed back to your organisation in 2016-2017?

- The valuable learning from the Safeguarding Adult Review commissioned by the SAB has wide and far reaching lessons about self-neglect for all agencies. LBB has embraced these and has already provided awareness raising across Adults and Children's Social Care, Housing, Environmental Health and its partner agencies, undertaken a number.
- The safeguarding adults audit undertaken by all members of the SAB during the year and the subsequent challenge events have identified singular and common areas across services where improvements could be made. LBB is committed to working with its partners to address some of the challenges identified such as better common understanding and application of the Mental Capacity Act.
- The SAB has galvanised improved partnership working and has facilitated this through protocols such as the Information Sharing Agreement, enabling agencies to share information appropriately and for the wider prevention or detection of abuse or neglect.
- The Bexley SAB is developing effective relationships with other forums/Boards such as the Children's Safeguarding Board, Community Safety Partnership and the London SAB. This better joint working improves the safeguarding arena in Bexley.
- As new members Dartford and Gravesham NHS Trust has been welcomed into the Bexley Safeguarding Adults Board since August 2016. This has seen the collaboration between the Trust and the Board members; helping to maintain strategic relationships between agencies and offers assurances to both organisations regarding safeguarding adults.
- The CCG, through the serious incidents process became aware of a case of death from self-neglect and felt that this should be reviewed by a multidisciplinary panel. The case was referred to the safeguarding Board and was taken forward as a Safeguarding Adults Review – from which has come valuable learning for all agencies.
- The Board have facilitated networking opportunities for partner agencies to unite and focus in on key priorities for the safeguarding agenda in Bexley. The development away day in particular enabled the forging of relationships and the recognition of common priorities for all partner agencies.
- The audit and challenge events have supported an understanding of areas for development for both the CCG and for commissioned agencies to ensure that there are robust training and safeguarding policies and procedures in place which include the Prevent agenda. This has encouraged questions internally and externally about. For example, the content of safeguarding training and has encouraged discussion on how to gather and use this information.
- The CCG developed with partner agencies a Pressure Ulcer Protocol for Nursing Homes, which the Board were supportive in making comments for improvements, gaining agreement and ratifying.
- The Board has provided free training opportunities for members – for example in MCA and DoLS.
- The Board developed an information sharing protocol which has been agreed by all partners – this is very helpful in understanding what should be shared.



- Oxleas is fully informed on the safeguarding developments within Bexley which are used to inform the Trust's Safeguarding strategy and strategic action plan. The Board also provides a forum for challenge and accountability to ensure that the Trust is meeting its statutory obligations under the Care Act (2014). The Board supports the Trust via its sub groups by identifying areas where improvement plans may have to be considered or instigated to enhance quality assurance and improving safeguarding arrangements.
- Within the London Metropolitan Police, improvements in various adult safeguarding police processes such as: Missing People, Mental Health training, vulnerable adults ASB panel.
- With the close work with the Domestic Violence, Mental Health and Safeguarding Teams across LBB and Oxleas, the London Metropolitan Police have the Highest Domestic Abuse conviction rate in MPS.
- In-house changes in performance focus towards safeguarding vulnerable victims across the London MPS.
- Improvements in MASH processes around safeguarding adults by linking all cases now discussed with adult safeguarding team and working closer in partnership.
- The Board has reinforced partnership working and strengthened the wider safeguarding work of partners; for example, Oxleas NHS Foundation Trust, where the presence of the Police and Fire Service reinforces the work of the High Risk Panel and ensures that there is a consistent response to high risk service users in the community and that care plans take into account the bigger picture and not just mental health needs.
- By being a clear channel for information and policy updates, the Board has supported Oxleas in streamlining and updating its referral routes for all safeguarding concerns.



# CASE STUDY – 1:

## Case example for evidencing improvement in quality of care delivered

Many adult safeguarding concerns relate to an individual, however, there are occasions when the care provided within a whole service gives rise to concerns.

In Bexley information is routinely shared and evaluated based upon risk within the multi-agency Quality, Commissioning and Safeguarding (QCS) forums. Through regularly receiving and considering information about registered providers ability exists to early identify and address service concerns.

There are occasions where there are identified serious concerns about the immediate quality and safety of care being delivered within a care service in Bexley; such was the instance of a local care home during 2016.

Concerns were first identified due to a high number of safeguarding issues coupled with the poor reports generated through QA visits.

The principle issues included; high numbers of falls by residents recorded, Staff morale affected by management changes and difficulty with filling all shifts, high staff resulting in high staff turnover, issues with recruitment practices including DBS checks, whistleblowing concerns, poor quality care plans and risk assessments, inadequately competent staff and lack of supervision for staff.

The service provider, along with the Care Quality Commission (CQC), CCG and other placing authorities came together in under the Serious Concerns safeguarding process to review the levels of risk for all people at the home, to see what the provider was or needed to do to rectify the situation and to see how the wider partnership could assist but also to seek assurance that people were safe and improvements being made.

The Serious Concerns meetings involved LBB Safeguarding Adults Team, LBB and CCG Commissioners, CQC, Quality Assurance Officers and the service provider led to an 'Improvement Plan' which was implemented by the provider.

The CQC undertook an inspection, on the back of the issues identified and rated the service as 'Inadequate' and required a number of key issues to be resolved.

The Improvement Plan was reviewed weekly by safeguarding and QA staff.

Visits by LBB and CCG to the home on an announced and unannounced basis, including weekends, took place frequently to review risk and to identify improvements or to support the provider to make necessary changes.

Meetings were jointly held with the provider and friends and families of people in the home to keep families

informed, seek their views about the quality of the service and to provide reassurance that all agencies were working hard to make rapid and sustainable improvement to the safety and quality of care within the home.

The work went on for several months, such was the level of changes required, and resulted in a further inspection by the CQC, which identified and acknowledged a significant change to the service.

This was a positive example of where agencies worked hard to improve the service experienced by residents within one care home. The work carries on today and visits by QA staff continue provide assurance of the sustained changes for everyone in the home.



## CASE STUDY – 2:

### Dartford Gravesham Trust, case example on importance of joint-working

The Trust continues to balance the health needs of its patients alongside the increasing pressures of community health and social care. This at times can see the delay in discharging patients to a suitable safe environment.

During the past year the Trust has seen a number of patients that frequently attend the Emergency Department due to poor health, change in Social Care arrangements or for support regarding their mental health. The Trust works with in a multi-agency way in order to achieve the best possible outcomes for the patients and is able to demonstrate that its Core Values are at the heart of patient care.

One particular patient was known to have multiple admissions to the hospital via the Emergency Department due to poor control of their diabetes. The patient lives alone in a flat and has very little contact with family or friends. They are known to the Community Mental Health Service; however it is their physical health needs that currently have the biggest impact on their life.

The patient is known to have poor compliance with the Community Nursing Service, who administered the insulin twice a day, they also have lack of understanding of their illness and the consequences of neglecting themselves. The patient was known to be verbally

aggressive at times, with the possibility of physical aggression, which has caused concerns for the Community Nursing Team. The Community Teams also became quite exhausted by the patient's behaviours; consequently the continuous risk of becoming seriously unwell was high

The patient has been assessed on numerous occasions as lacking capacity regarding their diabetes. The patient has been supported by Independent Mental Capacity Advocate (IMCA) regarding future accommodation and their complex health needs. It had been thought that a residential type setting would be in the patient's best interest regarding the management of their diabetes. The lack of compliance and poor control of their diabetes could have serious implications on their health; the patient was at risk of dying.

During the patient's hospital admissions they were safeguarded by the Deprivation of Liberty Safeguards, which were often challenged by the IMCA as to whether the patient should be remaining in hospital. As the patient's condition improved they frequently expressed the wish to be discharged, despite remain critically unwell. Discharge home from hospital in a timely way was often unable to be supported by the Community Nursing Team. They felt that they were

unable to continue to support the patient to remain in their own home due to the risks they posed by their difficult behaviour and reluctance to engage with their service. The case was presented to the Court of Protection who required a comprehensive care plan regarding the care that the patient would get following discharge. The Court of Protection extended the DOLS that had been put in place by the Trust during their admission until a robust care plan was put in place for the patient when they were discharged.

The patient was managed on the ward whilst the care plan and safe discharge was being co-ordinated. During the admission, time was spent with the patient to help them understand how to manage their condition in a better way. The patient was discharged to their home but was soon admitted again with similar health concerns. They were once again discharged home whilst the Court of Protection decided what would be in the patient's best interest regarding the management and treatment of their diabetes.

The Court of Protection found that the patient needed to return to their own home environment as they would be very miserable living in a residential setting even though the risks to the patients' health were very high and could result in



death. The Community Nursing Team has managed to offer the right support via the care plan which has enabled the patient to remain in their own home. The patient has not had any further admissions to hospital.

The patients care in the Trust was person centred; it involved working very closely in a multi-disciplinary way to enable the patient to successfully return home. This was very important to the wellbeing of the patient. The success is that the patient has remained at home and has not presented at the emergency department for quite some time.

## CASE STUDY – 3:

### Case example for evidencing improved service user engagement:

The patient council, chaired by the CCG received feedback that there are issues with access to GP surgeries for people with a Learning Disability. The CCG took this forward as the topic for the 'Big Health Check Event' and engaged with Health Watch who carried out a survey and made a number of recommendations for improvement.

This information will be analysed by the Quality and Safety Committee and strategies will be agreed for improvement.

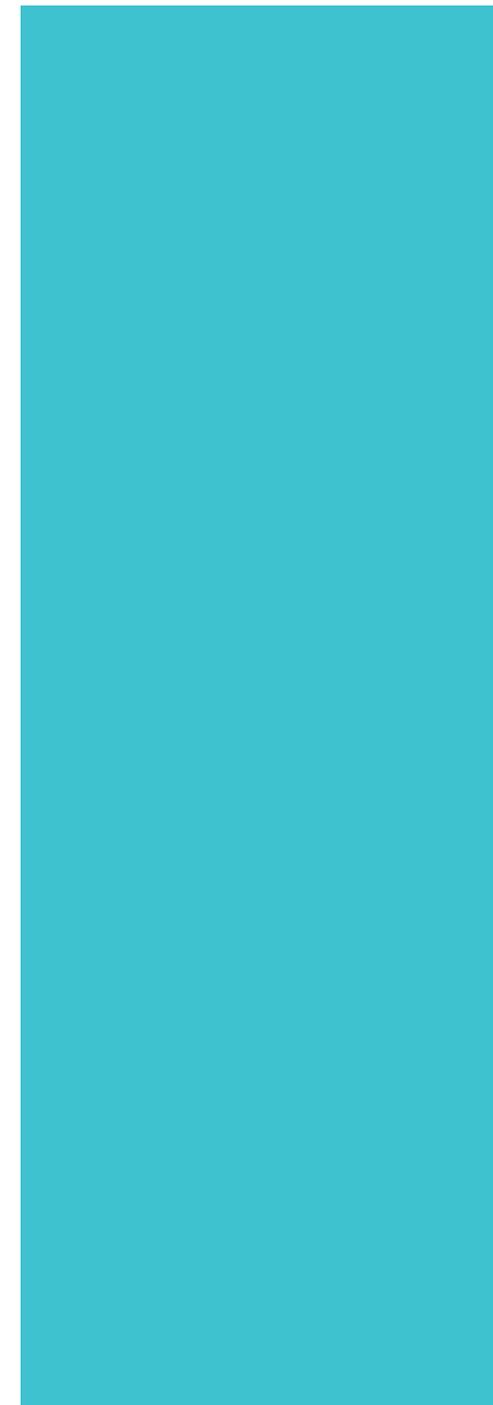
The patient experience team are always active in preventing safeguarding issues occurring for example a young man who required a hospital procedure was too afraid to go and was becoming increasingly ill due to the lack of medical intervention. The CCG patient experience team were contacted by Mencap and were able to coordinate services so that the learning disability nurse at the hospital became involved and was able to support this young man to feel confident enough to proceed with the treatment he needed.

## CASE STUDY – 4:

### Particular examples are working more closely with Housing to identify people at risk of losing their tenancies and to share risk information appropriately.

Communication and information sharing are essential in managing risk. There is now a joint protocol between the two agencies with the result that staff from both understand more clearly how and when to update each other. This allows for greater clarity in making referrals and, once housed, an early warning system if circumstances are deteriorating. The outcomes of

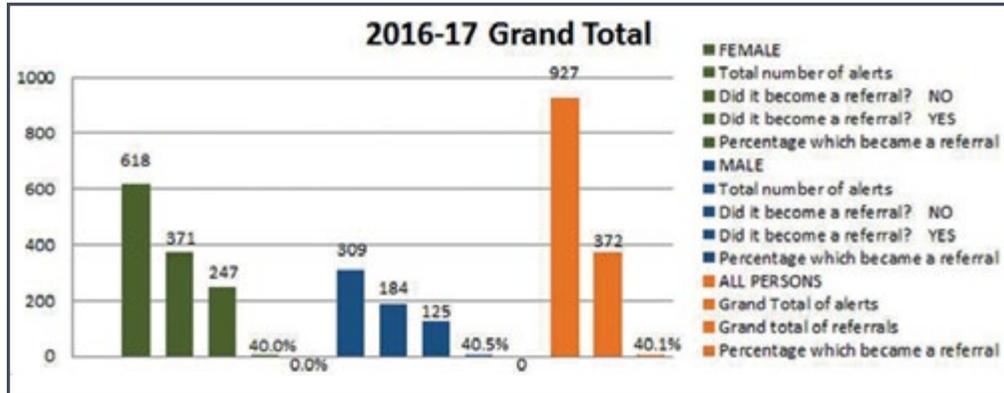
this are a safer service and more secure tenancies for people with mental health problems. The general trend is towards more complex referrals involving much networking and safeguarding planning with a variety of agencies, and an increased emphasis on community safety and policing



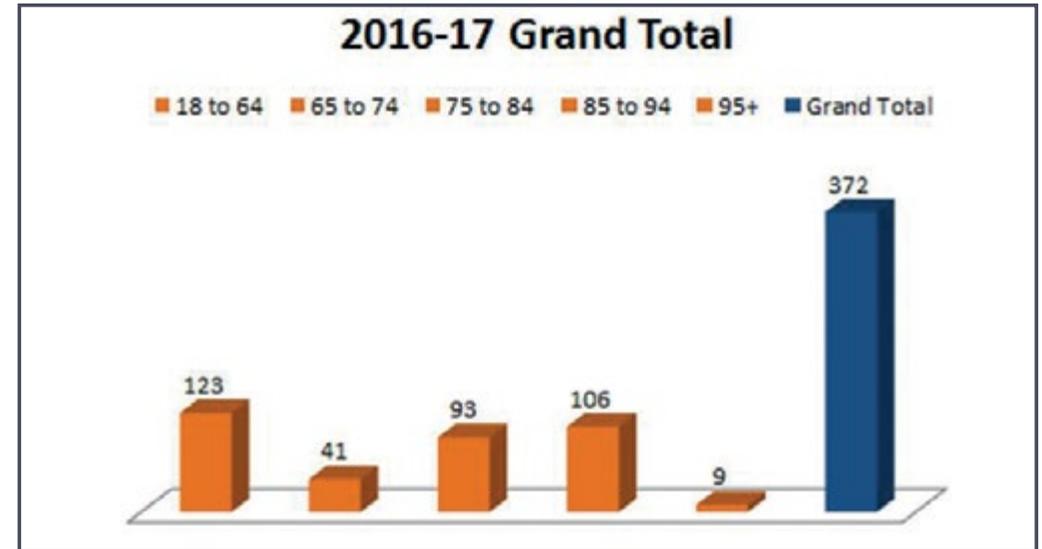
# DATA 2016-2017: Source London Borough of Bexley

## Annual safeguarding adults information:

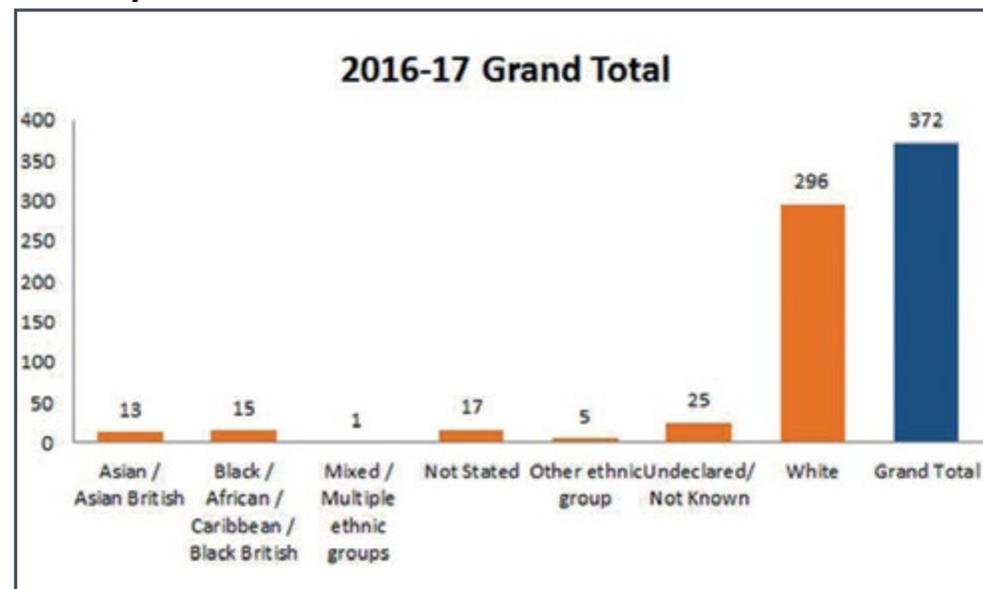
Breakdown by gender and whether or not an alert became an enquiry:



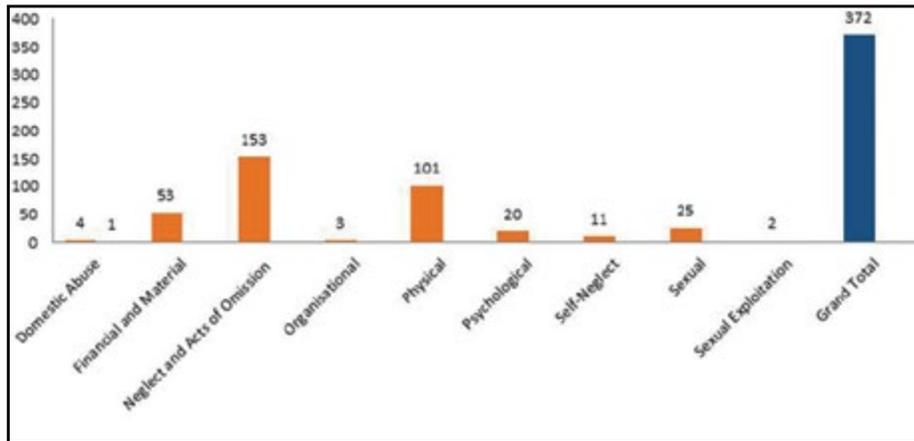
Age:



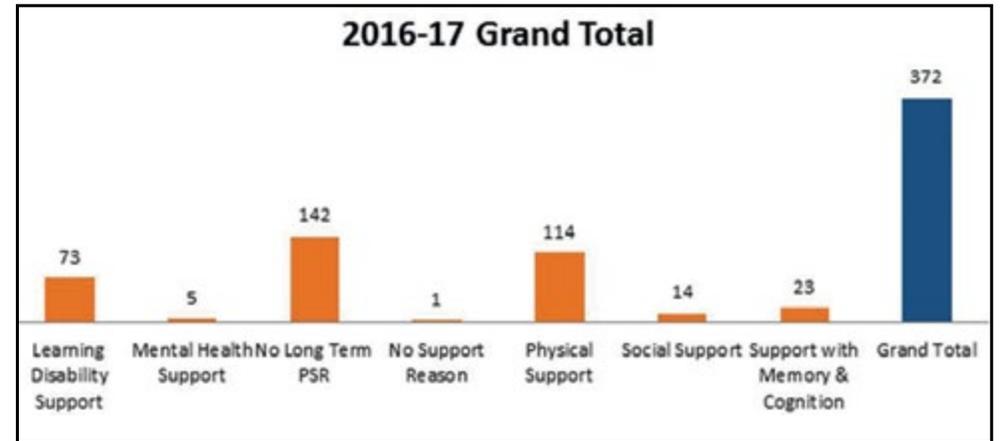
Further breakdown of referrals  
Ethnicity:



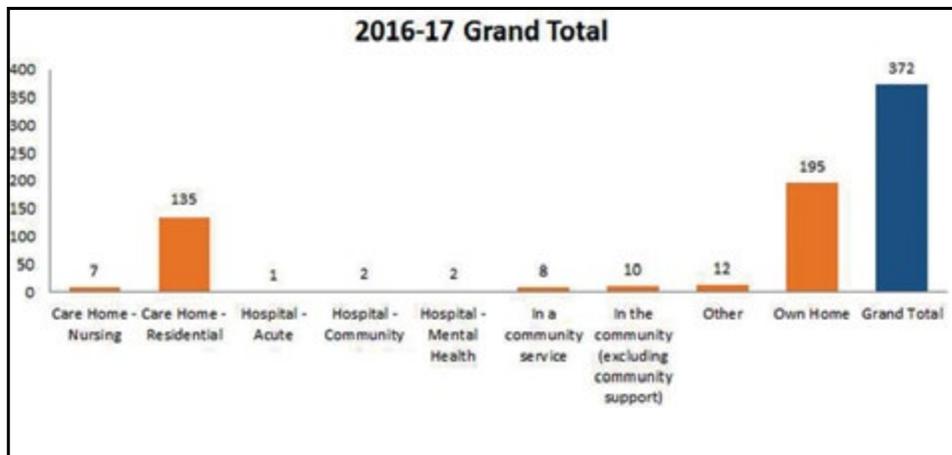
### Types of Abuse (by category):



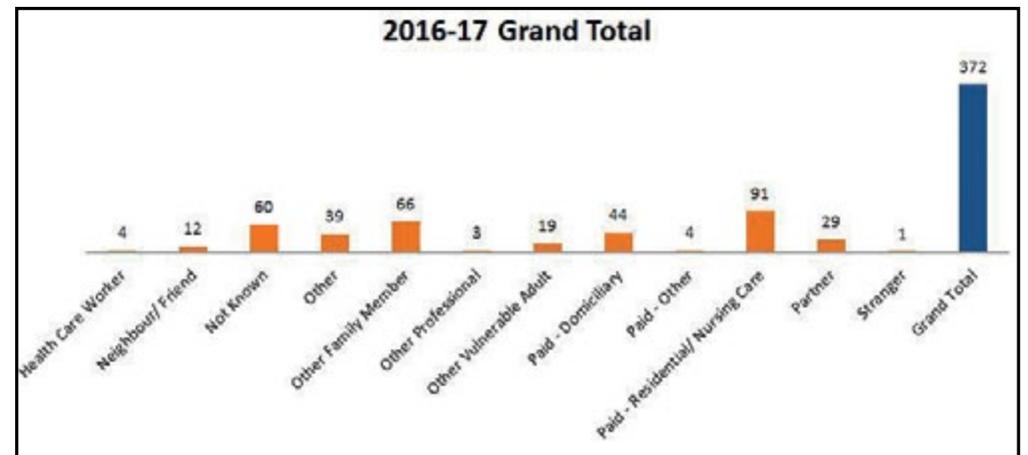
### Long-term service needs:



### Location of alleged abuse:



### Relationship to the alleged victim:

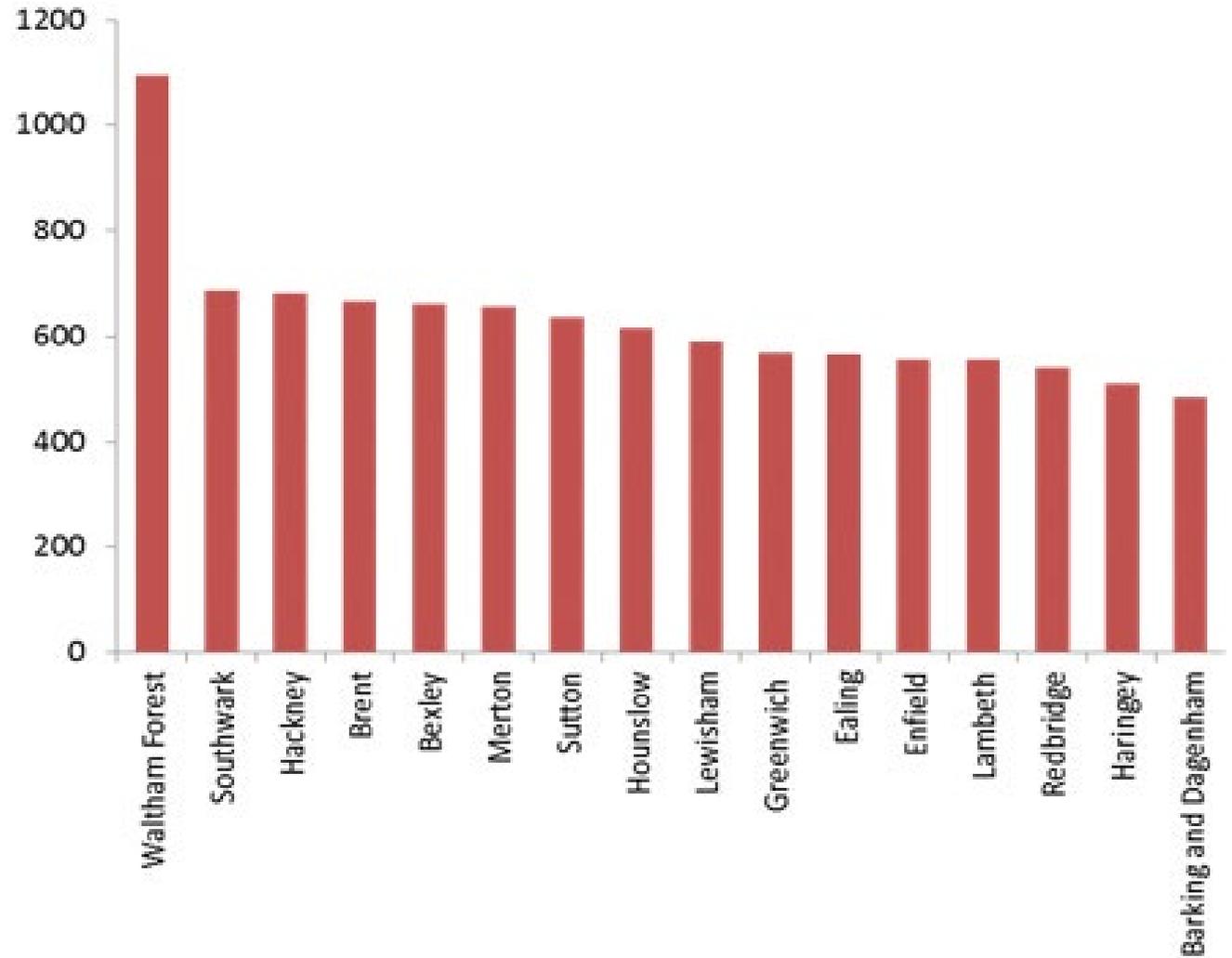


## Deprivation of Liberty Safeguards

### New Applications Received during 2016/17:

	Number of New Applications
Bexley 2016/17	736
Bexley 2015/16	660
Comparator Group Average 2015/16	628
London Average 2015/16	649

Rank	Local Authority	Number
1	Waltham Forest	1095
2	Southwark	685
3	Hackney	680
4	Brent	665
5	Bexley	660
6	Merton	655
7	Sutton	635
8	Hounslow	615
9	Lewisham	590
10	Greenwich	568
11	Ealing	565
12	Enfield	555
14	Redbridge	540
15	Haringey	510
16	Barking and Dagenham	485
	Comparator Group Average	628
	London Average	649



## What the DoLS data tells us:

- Total of 736 new DoLS applications received during the year (2016/17) of which 611 were granted
- 11.5% increase in the number of applications received compared with previous year
- An average of 61 new applications received each month
- In 2015/16, we ranked 5th out of 16 comparator boroughs for number of new applications received
- The average age of individuals subject to a DoLS application is 78.6
- 70.5% of applications were for individuals residing in care homes

## Reason DoLS Applications Not Granted:

Reason not granted	Number not granted	Percentage not granted
Assessment Criteria not met	89	61.8%
Change of Circumstances	39	27.1%
Death of Person	16	11.1%

## Active DoLS Authorisations:

- A total of 1017 individuals had an active DoLS authorisation in place at some point during 2016/17
- This is an increase compared to the previous year
- 970 individuals in 2015/16)
- 110 individuals (approx. 10.8%) had multiple DoLS authorisations during the year.

Age Band	Male	Female	Total
18 to 64	122	87	209
65 to 74	50	55	105
75 to 84	153	176	329
85 and over	121	400	521
<b>Total</b>	<b>446</b>	<b>718</b>	<b>1164</b>

	Number of applications worked on during 16/17	Percentage of Applications 16/17
Granted	1020	87.6%
Not Granted	144	12.4%

# SERIOUS ADULT REVIEWS (SAR) -

**As per the Care Act 2014, we have concluded Bexley's first Serious Adult Review in December 2016. Our statutory responsibility is to publish the SAR's findings, they are as follows:**

In July 2015, the Bexley Safeguarding Adults Board (BSAB) received a Safeguarding Adults Review (SAR) notification from the Bexley Clinical Commissioning Group (CCG) relating to the death of a Bexley resident potentially due to self-neglect. A Practitioner Briefing Sheet will be produced by the BSAB, outlining the key themes and findings to emerge from the review. A decision has been taken not to publish this report in the best interest of the family.

## **BSAB Recommended Professional Learning:**

- Vulnerable Adults identified by Practitioners having a history of self-neglect should have self-neglect embedded in their profiles and shared as appropriate with all key practitioners involved in their case.
- Risk assessments should be considered to ensure unsafe risks are recorded and shared as

appropriate with key practitioners in their case including asking service-users' families and carers for information about risk and include it in that person's risk profile as well as ensuring access to appropriate advice and support is available.

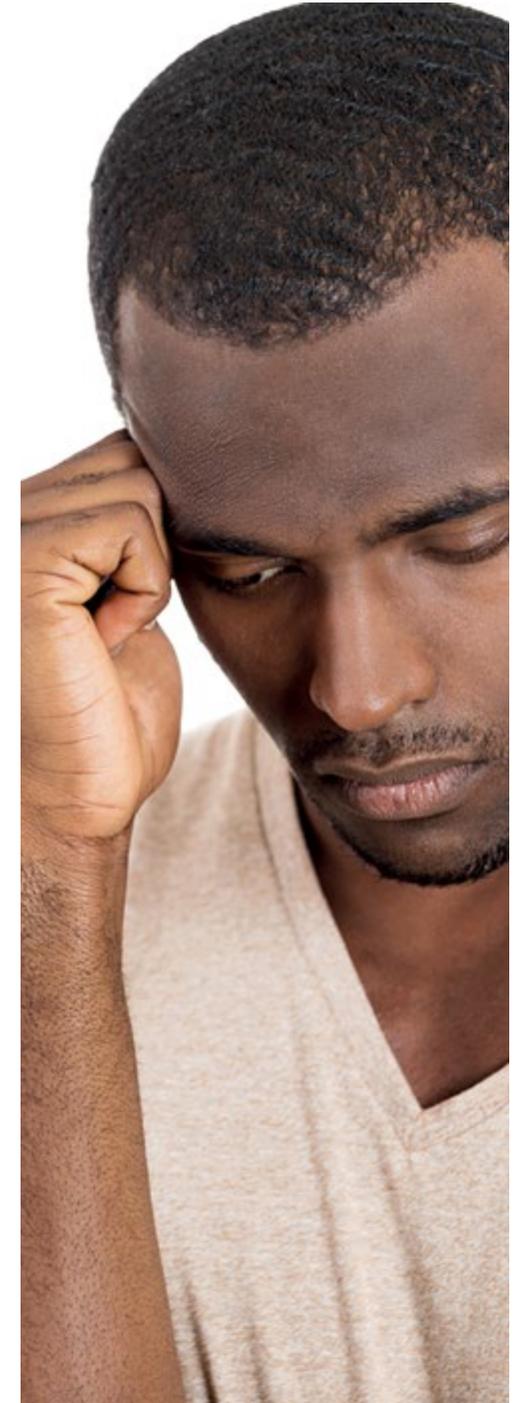
- All relevant staff should be competent to manage safeguarding adult referrals including self-neglect and challenging behaviours when working with hard to reach groups.
- The Assessment and Treatment Care Pathway should be followed to ensure a patient-centred planning meeting is carried out within three-weeks, if none has been carried out within the previous six-weeks.
- All In-Patients mental capacity it to be considered at the point of contact as to their ability to consent at that time to the proposed actions/action plan/ care plan; and being continuously reviewed throughout their stay keeping in mind that mental capacity is time and decision-specific.
- When a patient is subject to an emergency admission and is unknown by the unit or community team, a comprehensive assessment of the family or carer's knowledge and experience of the patient should be undertaken.
- Clinical teams should ensure that families and carers are fully engaged in the planning and delivery of care and understand the Referral Pathways for Safeguarding Adults when considering mental health, mental capacity and self-neglect concerns.
- Organisations should ensure collaborative working across Adult Social Care, Children's Social Care and Community Based Health services (including: GPs, District Nurse, and Physiotherapists), agreeing Joint Referral Pathways and Information Sharing Protocols.
- A process for escalating refusal for health or social care services, when there is a concern.

**Since the SAR concluded:**

- The Board held a SAR Workshop on the 15th December 2016, to analyse and create a baseline in order to respond locally to the findings from the Reviewers.
- The Review Team involved throughout the SAR has convened twice since December 2016 to evaluate and create a workplan on the learning.
- The Board has linked with the Bexley Safeguarding Children's Board to share practice lessons and work together to shape the workplan.
- The Independent Chair is planning a workshop for frontline workers involved in the SAR to go through the lessons.
- The Review of the workplan will be carried out through the SAR Sub Group, Chaired by Healthwatch with a direct report back to the Board and Independent Chairperson at any time.

**Additional BSAB SAR information:**

- We have started a second SAR which we aim to conclude by September 2017.
- We have included Learning Disability Mortality Reviews (LDMR) into our SAR Sub Group.
- We have in place a SAR Protocol with referral information however, we are working on guidance for professionals on how to report a serious incident.



# Strategic Plan 2017 - 2018

ITEM	OBJECTIVES/PRODUCTS	RAG RATING	SUB GROUP/ LEAD PERSON	DUE DATE	OUTCOMES AIMS	STATUS/COMMENT
1	<p>Develop multi-agency training across partners:</p> <p>Training Survey for Professionals working in care and support</p> <p>Training Needs Analysis following the outcome of the Survey</p>		Training & Development Sub Group	July 17	<p>Partnership working with different key agencies across Bexley to keep them accountable alongside each other and share their understanding of risk and intervention.</p> <p>Preventing abuse with the empowerment to professionals across the service areas are given the opportunity the feedback on their training needs.</p> <p>Empowering professionals with a set of expectations from BSAB for best practice.</p>	<p>High Priority</p> <p>MCA/DOLS Training &amp; Development of GP's and Health Professionals to be included in the MA Training Survey</p>
2	<p>Ensure reflective practice opportunities are across agencies in Bexley particularly focusing on Managerial Training (Levels 2/3) :</p> <p>Clear expectations for agencies working in care and support in Bexley</p> <p>Reviewing this at the Annual Challenge Events</p>		Training & Development Sub Group	September 17	<p>Empowering key leads of agencies understand their role under safeguarding adults in Bexley.</p> <p>Empowering staff by offering line managers training.</p> <p>Preventing abuse in the community by ensuring all levels have training</p>	<p>High Priority</p> <p>At the moment this is organised by ASC/SAT</p> <p>BSAB to consider a Training Coordinator role with Administration functions to support the work of the BSAB.</p>
3	<p>Ensure that the Training Needs identified at Challenge Events are recorded and reviewed as part of the Annual Training Programme Review.</p>		Training & Development Sub Group	November 17	<p>Prevention of abuse by identifying gaps in Training Needs across partner agencies.</p> <p>Keeping professionals accountable to their own training gaps and identifying ways to empower them to develop their workforce.</p>	<p>High Priority</p> <p>The Audit Tool needs to include a section on the training the BSAB expects of agencies.</p>
4	<p>Establish the Referral Procedures for a Serious Adult Review (SAR) and a Serious Incident (SI):</p> <p>To ensure to include the process for Commissioning and Perimeters of External/Internal Review</p> <p>Who refers? Where? How? Links to key statutory agencies – including Coroner.</p> <p>SAR/SI Best Practice &amp; Learning to be available to professionals across the partnership.</p>		SAR Sub Group	July 17	<p>Empowering and encouraging professionals to make their own decisions.</p> <p>Preventing (in SI) cases any further harm.</p> <p>Proportionality towards the case with willingness to participate as a partnership and offer the least intrusive response appropriate to the risk presented.</p> <p>Protecting the public with support and representation for those in greatest need by reviewing cases for learning and offering best practice solutions.</p>	<p>High Priority</p> <p>SAR Toolkit and Guidance has been created, it needs to be updated to include the identified key points noted.</p>

5	SAR/SI Best Practice & Learning to be available to professionals across the partnership		SAR Sub Group	July 17	<p>Ensuring professionals are given a proportionate view of the cases reviewed under SAR/SI.</p> <p>Empowering professionals to give feedback and agencies to implement best practice and learning updates across the partnership.</p>	<p>High Priority</p> <p>To evaluate and offer the best learning; events and communication strategies to include ways of reaching the right professionals with the right learning as near to the closure of the SAR/SI Review as possible.</p>
6	<p>Create / Update Bexley Safeguarding Adults Board Communication Strategy:</p> <p>Plan any marketing requirements, such as postcards, posters, pull-up displays as and when needed/if needed</p> <p>Include up-to-date Safeguarding information within Information for Carers</p> <p>Collect and press release good news stories - case studies, etc</p> <p>Hold and attend events – promotion via pull-up displays, printed information (postcards, factsheets)</p> <p>Links with Community Safety Partnership Board (CSPB) regarding the themes such as - Mate / Hate Crime and Domestic Violence; Identify ways to combine Domestic Abuse Strategic Partnership Group work with Safeguarding Adults</p> <p>BSAB Website Governance</p> <p>Develop an Easy Read Fact Sheet aimed at people alleged to have caused harm, informing them of the safeguarding procedures</p>		SAR Sub Group	July 17	<p><b>All Publicity and Communications Campaigns should include the following:</b></p> <p><b>Empowerment:</b> How are people being supported and encouraged to make their own decisions and informed consent.</p> <ul style="list-style-type: none"> <li>• What resources are available and where do the public know to access this?</li> <li>• What support is available and how do the professionals inform the community of their offer?</li> </ul> <p><b>Prevention:</b> Ensuring the professionals and public know it is better to take action before harm occurs.</p> <ul style="list-style-type: none"> <li>• What and where are the BSAB partners communicating with their customers and the public?</li> <li>• Ensuring workforces and public know how to make a referral</li> </ul> <p><b>Proportionality:</b> Ensuring the right agency/partner is leading on the communication to achieve the best outcomes to ensure the least intrusive response appropriate to the risk presented.</p> <p><b>Protection:</b> Publicity &amp; Communication offers support and representation for those in greatest need.</p> <p><b>Partnership:</b> What is the local offer for local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.</p> <p><b>Accountability:</b> P&amp;C offer accountability and transparency in safeguarding practice to both the partnership and the public.</p>	<p>High Priority</p> <p>At the moment this is organised by ASC/SAT</p> <p>BSAB to consider a Training Coordinator role with Administration functions to support the work of the BSAB.</p>

7	<p>Review and Update Audit Tool and Performance Measures and hold Challenge Events ensuring to include additional questions relevant to Bexley:</p> <p>Training Needs Analysis Questionnaire</p> <p>Reaching BME/Hard to reach groups</p> <p>Involvement with other Boards in Bexley – HWBB, CSPB, LDPB, BSCB</p> <p>Follow up on HR policies include responding to possible PREVENT related concerns about staff</p> <p>Self-Neglect and Hoarding</p> <p>MDS / Sex Trafficking</p>		Performance Management & Quality Assurance Sub Group	Annual deadline June	<p>Offering partners an opportunity to evidence their Safeguarding Adults practices to the BSAB for assurances.</p> <p>Accountability on what is 'expected in Bexley' for best practice</p> <p>Empower partners to peer challenge for learning.</p>	<p>High Priority</p> <p>The London SAB has issued a new Audit Tool for completion by end of June 17.</p>
8	<p>Develop or Review a consistent MCA/DOLS toolkit – model for Bexley</p> <p>Guidance/Toolkit for making MCA/DOLS meaningful</p>		LIN Sub Group	December 16		Start the discussions on: How we can be consistent?
9	<p>Strategically link with: Transitions and Children's Services regarding DOLS:</p> <p>Ensure Transitions Team are invited to LIN on a regular basis</p> <p>Develop Transitions based Survey for Training Needs Analysis Review for CSC/Education professionals.</p>		LIN Sub Group	July 17	<p>Preventing young people from harm by ensuring professionals and carers understand MCA/DOLS across the Transitions partnership.</p> <p>Empowering young people and their families to make informed decisions with consent.</p> <p>Empowering professionals to make the least intrusive decisions for young people in Transitions.</p> <p>Accountability towards safeguarding young people with respect to their own decision-making and understanding.</p>	<p>High Priority</p> <p>Joint work with Transitions/ Education and BSCB regarding the improvements to the Transitions MCA/DOLS awareness and practice</p>

10	<p>Review and analyse recommendations from Regional / National learning into adult safeguarding issues for best practice and learning:</p> <p>Link with London SAB Learning Database</p> <p>Link for National Database – <a href="http://www.hampshiresab.org.uk/learning-from-experience-database/serious-case-reviews/">http://www.hampshiresab.org.uk/learning-from-experience-database/serious-case-reviews/</a></p>		Best Practice & Learning Lessons Sub Group	July 17	<p>Best Practice &amp; Learning Lessons should focus on the benefits to Bexley professionals and public on the below:</p> <p>Empowerment:</p> <p>People being supported and encouraged to make their own decisions and informed consent.</p> <p>Prevention:</p> <p>It is better to take action before harm occurs.</p> <p>Proportionality:</p> <p>The least intrusive response appropriate to the risk presented.</p> <p>Protection:</p> <p>Support and representation for those in greatest need.</p> <p>Partnership:</p> <p>Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.</p> <p>Accountability:</p> <p>Accountability and transparency in safeguarding practice</p>	The London SAB is due to launch by end of May 17
11	<p>Contribute towards the Communication Strategy by identifying a pathway to disseminate best practice information and learning lessons; including:</p> <p>SAR Event: Multi- agency Learning Event with more frontline staff</p> <p>Ensure involvement with existing groups – i.e. Commissioning groups of Residential/Nursing and Dom Care are given working opportunities to learn</p>		Best Practice & Learning Lessons Sub Group	July 17	<p>The SAR Learning Event to Operational Level Staff Groups (multi-agency) will give an opportunity for agencies to openly discuss how their agencies will implement and take away practical applications to making adults safe in Bexley and with partners that support Bexley residents.</p>	<p>High Priority</p> <p>The SAR Learning Event should be organised to take place before September 17</p>

12	<p>Review and analyse recommendations from Regional / National learning into adult safeguarding issues for best practice and learning:</p> <p>Link with London SAB Learning Database</p> <p>Link for National Database – <a href="http://www.hampshiresab.org.uk/learning-from-experience-database/serious-case-reviews/">http://www.hampshiresab.org.uk/learning-from-experience-database/serious-case-reviews/</a></p>		Performance Management & Quality Assurance Sub Group	Quarterly	<p><b>Challenges to the SAB to a greater or lesser extent are:</b></p> <p>Board funding – to deliver priorities and for SARs as required</p> <p>Board attendance and participation</p> <p>Board members representative reflect the SAB’s terms of reference/memorandum of understanding (for example: Board members are strategic decision makers in their organisation)</p> <p>Sub Groups attendance and participation</p> <p>Board governance arrangements</p> <p>Partner agencies risk management processes –</p> <p>Feedback from Audit Tools and Challenge Events</p> <p>Partner agencies systems to assure Board of their fitness to deliver on Board policies</p> <p>There is a lack of engagement or involvement, the Board does not know what their experiences are)</p> <p>Learning from, and positively responding to, SAR’s and national and or local enquiries</p> <p>Partner agencies information sharing arrangements</p> <p>Dissemination from Board to staff and adults at risk</p> <p>Raising the public profile of safeguarding vulnerable adults.</p> <p>Effectively managing the linkages with other parts of the strategic architecture such as Health and Wellbeing Boards, Overview and Scrutiny Committees and Community Safety Partnerships</p> <p><b>The following headings offer clustering risks around themes:</b></p> <ul style="list-style-type: none"> <li>• Reputation</li> <li>• Strategic leadership (credibility)</li> <li>• Statutory / regulatory / legal</li> <li>• Financial</li> <li>• Information Governance</li> <li>• Operational delivery</li> </ul>	This should follow the Challenge Events on an annual basis
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13	<p>BSAB Annual Report:</p> <p>Review Annual Report Data and identify key statistics and desirables to be reported</p> <p>Construct a plan and process for consistent feedback from service users and carers involved in safeguarding procedures</p>		Board Support	Annual April deadline	<p>The Annual Report should evidence the below:</p> <p><b>Empowerment</b></p> <p>People being supported and encouraged to make their own decisions and informed consent.</p> <p><b>Prevention</b></p> <p>It is better to take action before harm occurs.</p> <p><b>Proportionality</b></p> <p>The least intrusive response appropriate to the risk presented.</p> <p><b>Protection</b></p> <p>Support and representation for those in greatest need.</p> <p><b>Partnership</b></p> <p>Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.</p> <p><b>Accountability</b></p> <p>Accountability and transparency in safeguarding practice.</p>	<p>Annual Report due by 30th April for June OSC</p> <p>Executive Summary or Full decisions on SARs</p> <p>Achievements of Board</p> <p>BPLL Case Studies</p> <p>Annual Stats – Performance Data</p> <p>Easy Read</p>
14	<p>Identify and capture more data and information streams for BME communities and hard to reach groups</p>		Annie / Anita	September 17	<p>Ensuring inclusion and partnership across all the vulnerable people in Bexley.</p> <p>Empowering community and religious leaders to become involved with safeguarding adults.</p>	<p>Research National and Local pathways for collecting data and involvement from BME groups as well as other hard to reach groups</p>

## **Executive Summary:**

This year, the long-standing Bexley Partnership has continued to influence key agencies in Bexley through offering consistency and concise leadership as the Safeguarding Adults Board. As Lead Cabinet Member for Adults' Services, I am assured that the skills, experience and knowledge embedded in the Board will continue to bring about real change in Bexley for vulnerable adults. The Board's ability to challenge, empower and support partners have given greater scope for prevention and development. I am pleased with 2016-2017's outcomes and achievements as presented in this this annual report. In closing, I am thankful for all the hard work and commitment by partners to overcome any new challenges that the future will hold.

**Councillor Brad Smith, Cabinet Member for Adults' Services, Bexley**



