



**Bexley
Safeguarding
Adults Board**

ANNUAL REPORT 2022-2023

We're better with you!

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Statement from our Independent Chair: Andy Rabey



I am pleased as the new Independent Chair to the Bexley Safeguarding Adult Board to introduce to you the 2022-23 Annual Report.

I am keen to build on the good work undertaken and overseen by the previous chair Eleanor Brazil and whilst the previous two annual reports have been delivered during the difficulties of Covid, this report is reflective of the work carried out in the aftermath of the Pandemic. Since my appointment in June 2022, it has been a joy to go out and meet with the differing partnership agencies, including voluntary groups, and I look forward to doing more of this in the coming year.

The Bexley SAB outlines in this report the salient work carried out by agencies across the Bexley partnership and reflects the commitment to protecting adults with care and support needs. We have included a section on our Safeguarding Adult Reviews carried out in the last year and highlight where policies and practice were unable to protect adults with care and support needs. Our collective aim through the SAR process is to ensure lessons are learned to improve future policy and practice.

We report on how the collaboration of services has been key to ensuring that people in Bexley remain 'safeguarded'. We evidence this through the introduction of the Integrated Care System. The ICS launched both nationally and regionally across the Southeast London Boroughs continuing to provide an opportunity to bring together agencies and voluntary groups under the banner of an Integrated Care Board. I am hopeful that this will further align services in protecting and enhancing the health and wellbeing of our community. I am excited by the opportunities this presents and look forward to seeing it flourish.

Another key focus for me will be listening to the experiences of people affected by safeguarding, particularly those with 'lived-experience.' This year, I have visited and listened to members of Bexley Mencap about their experiences of living in Bexley; I have attended and supported the Bexley Volunteers Forum; and have met with the Bexley SAB Quality Checkers who work to seek assurances of health and social care provisions for people with a learning disability across Bexley.

I consider meeting and listening to professionals, as well as people involved with safeguarding services one of the most important aspects of my role and I look forward to meeting with more voluntary groups and individuals over the coming year.

In closing, I hope you enjoy reading this annual report and if you have any questions or comments for the Bexley SAB, please email us at bsab@bexley.gov.uk

A handwritten signature in blue ink that reads "A Rabey".

What is our role and purpose?

The Bexley Safeguarding Adults Board (BSAB) is a statutory body established by the Care Act 2014. We are made up of senior people from organisations as well as lay members that have a role in preventing the neglect and abuse from adults.

Our main objective is to protect all adults in Bexley who have care and support needs, who may be experiencing and/or at risk of abuse/neglect when they are unable to protect themselves.

Part A: Our Statement of Purpose

The Board 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.

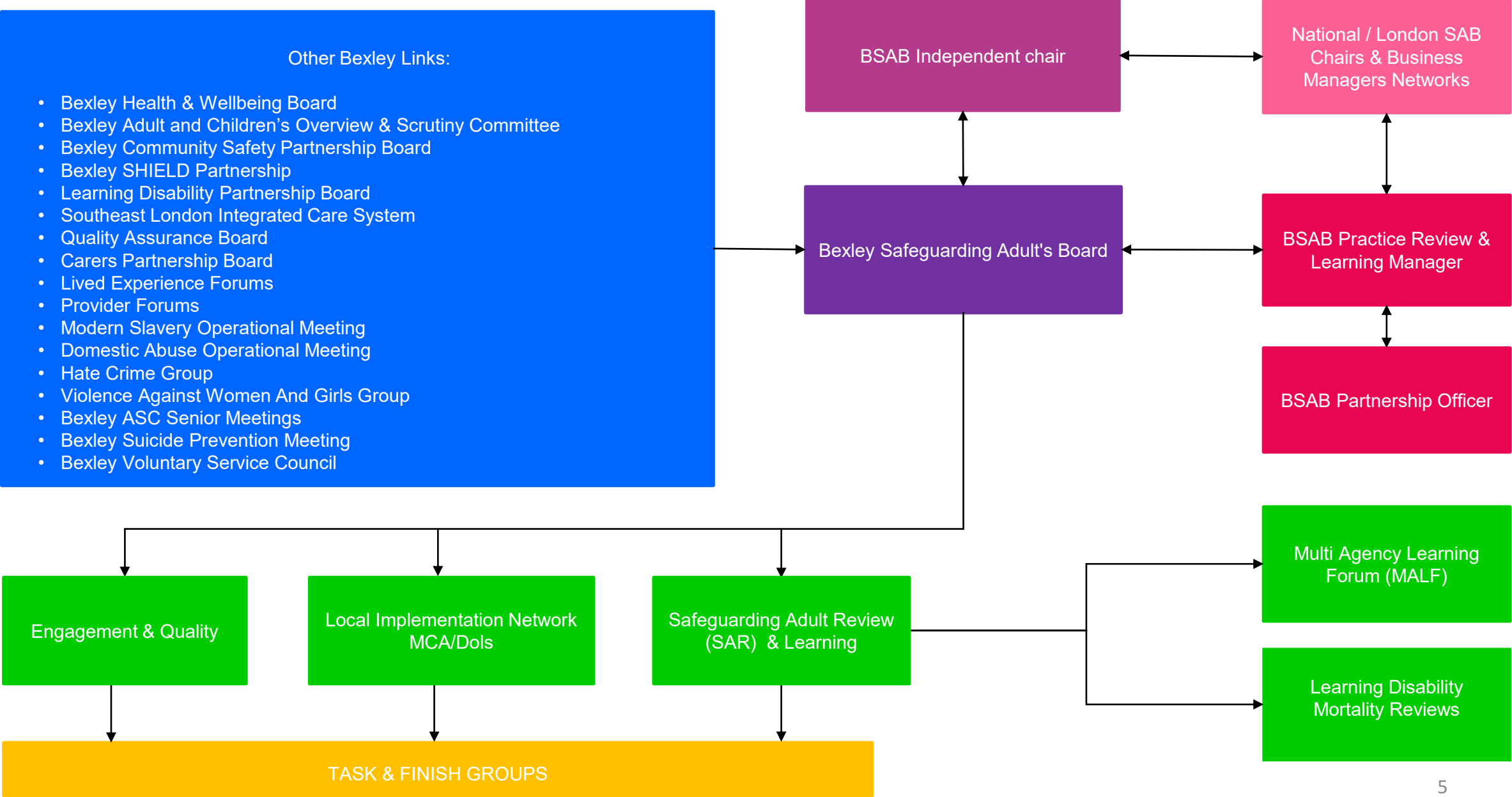
For more information visit the [About Us](#) page on our website.



Care Act 2014

CHAPTER 23

2022-2023 BSAB Structure



Key Safeguarding Data

This section shows how challenging and complex capturing safeguarding adult activity can be.

We've focused in our report on critical Safeguarding Adult (SA) Data relevant to our work as a partnership with recommendations for action where appropriate.

Part A: Pages 7 – 14 shows the NHS Digital Safeguarding Adult Collection (SAC).

It is important to note that the full data set is published on the NHS Digital website [Data \(digital.nhs.uk\)](https://digital.nhs.uk)



Understanding Section 42



Section 42

Enquiry by local authority

This section has no associated Explanatory Notes

(1) This section applies where a local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there)—

(a) has needs for care and support (whether or not the authority is meeting any of those needs),

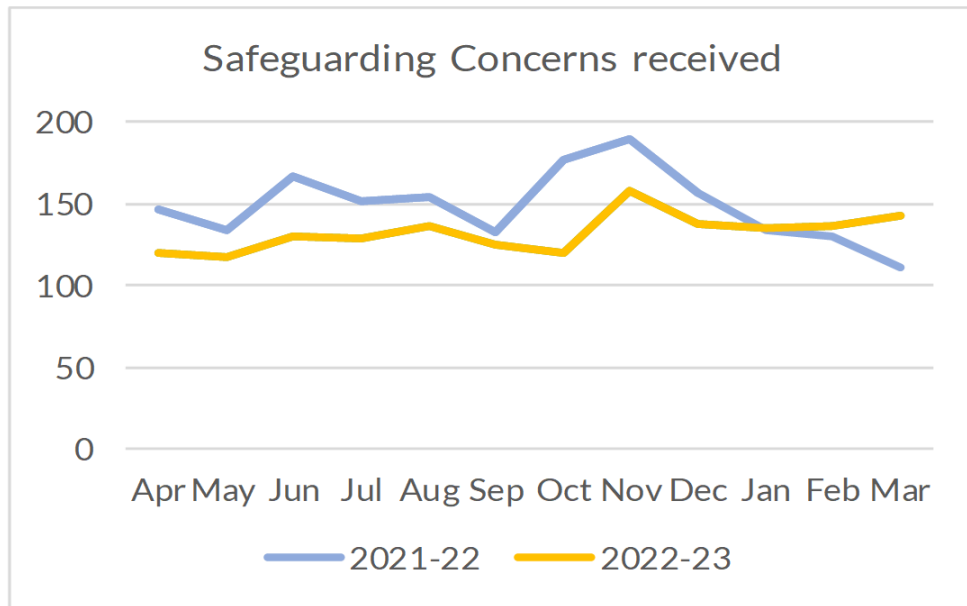
(b) is experiencing, or is at risk of, abuse or neglect, and

(c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

(2) The local authority must make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult's case (whether under this Part or otherwise) and, if so, what and by whom.

The terminology used for when a SA Concern meets this criteria is called a 'conversion' and the process is called 'an enquiry.'

Concerns received

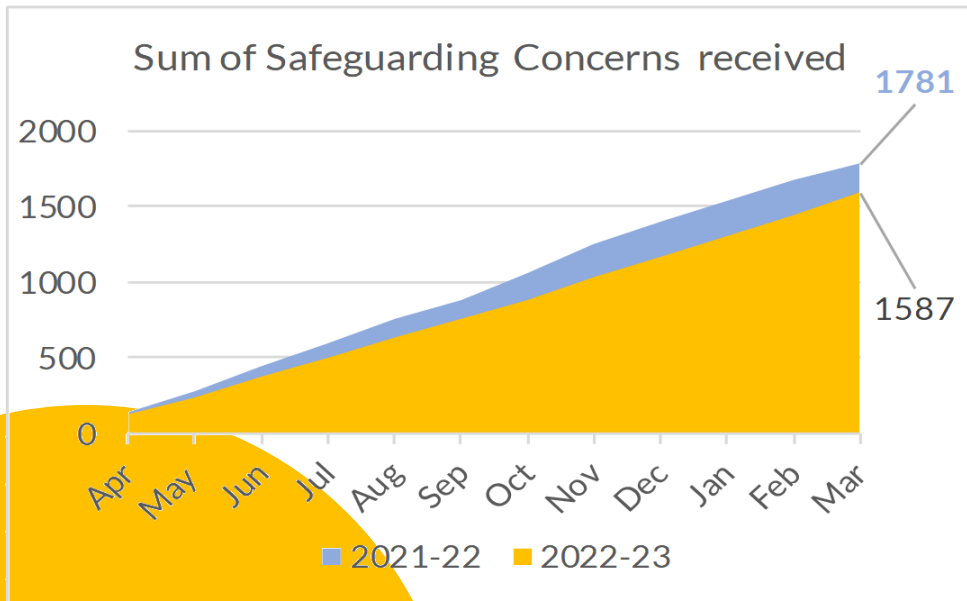


The top graph shows the last 2 years SAC data with respect to the total number of SA Concerns received. The data shows similar trend lines from April to January but then in February - March 2023 there is a divergence in the trend with an increase towards the end of the year.

Usually, we would see peak times of year where SA concerns are more expected; for example, winter season has greater hospitalisation and greater involvement of other agencies which may notice concerns.

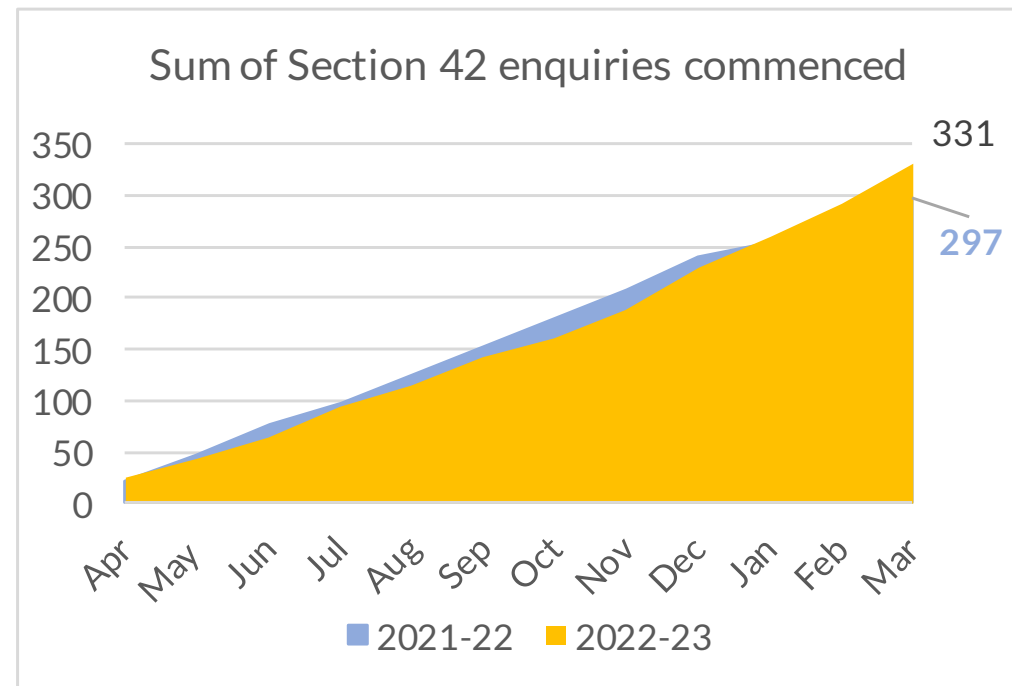
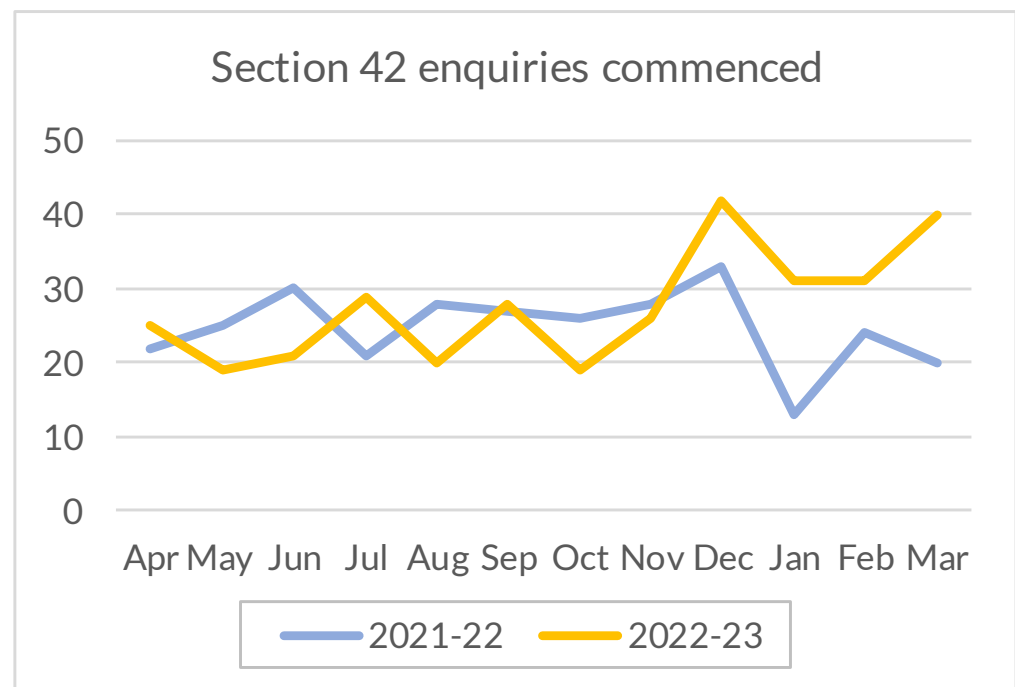
This will be an area to monitor as a BSAB over the next few months to see if the trend as continued to climb from April onwards or does it flatten. We will work with the LA to monitor any relevant points contributing towards this pattern.

Finally, as a BSAB, we've provided a few safeguarding adult events during the end of the year, so and we know where there is a greater focus and awareness made with professionals this can also impact on increases of concerns being raised.



Section 42 enquiries commenced

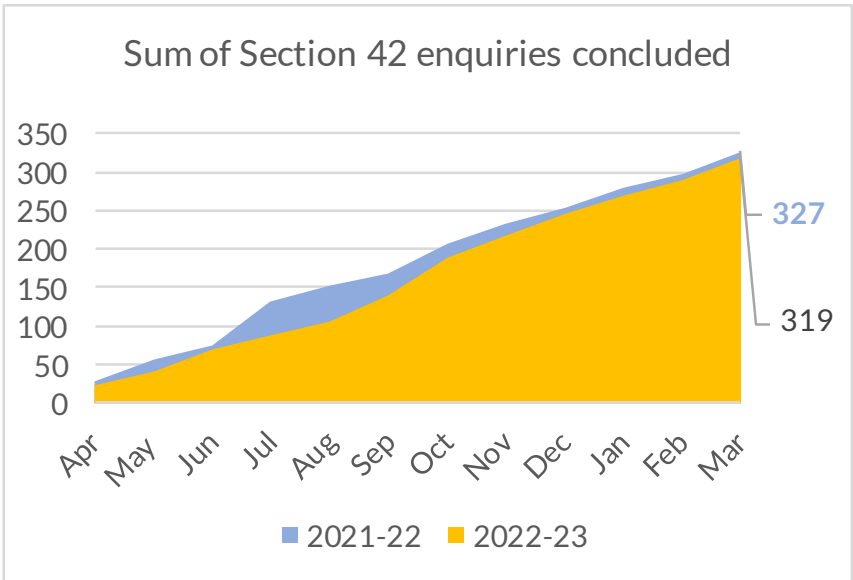
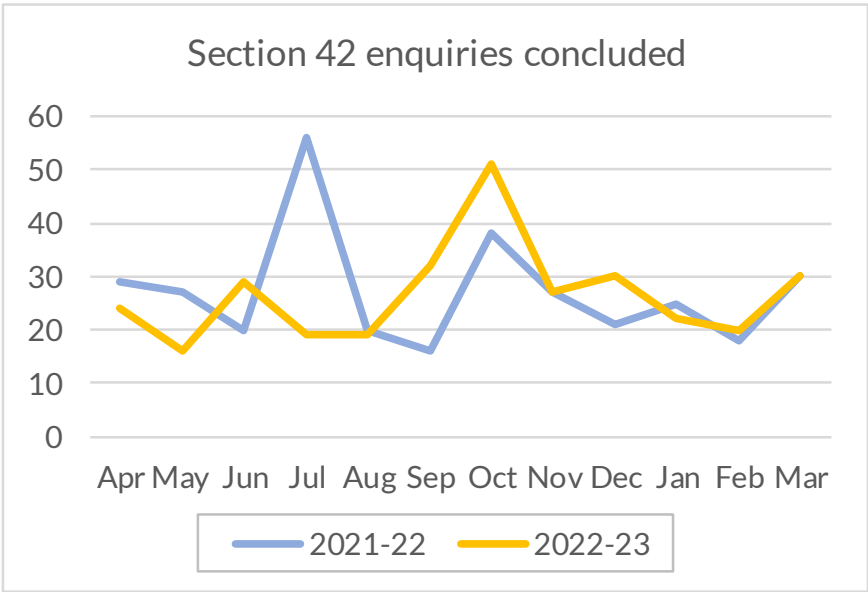
We can see in the graphs below for Year 2022-23 there was an increase in conversions, matching the divergence found with concerns raised (see page 7), which will also be of an interest to us over the next few months to see if the trend has continued and what actions the LA have taken about this uptrend.



Section 42 enquiries concluded

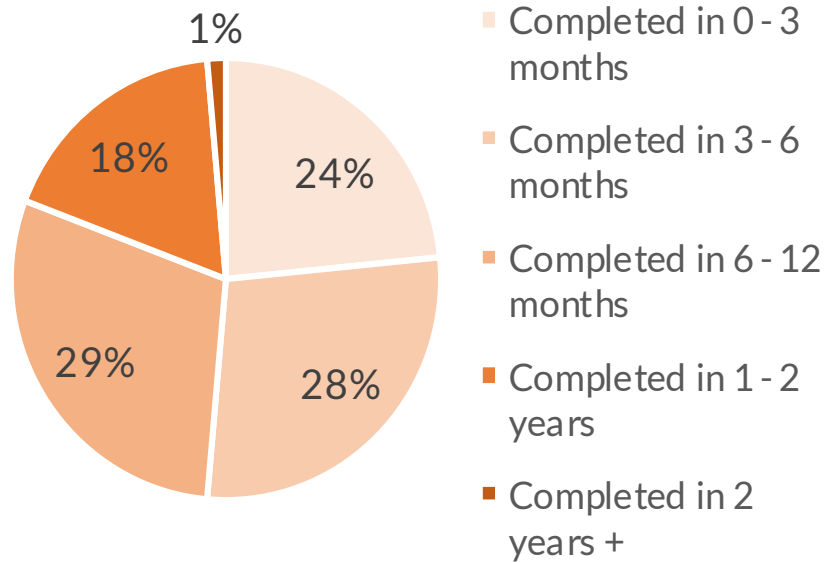
The graphs below indicate how many s.42 enquiries concluded for the last 2 years and shows that like Year 21-22, Bexley had a sharp increase at year-end in 22-23 with concluded cases.

This increase corresponds with the increase of complex cases across health and social care as found on page 7 where there is also a sharp increase found with concerns raised, as well as, with conversions found on page 9. It will be of interest to the board to know what has caused the sharp incline pattern.

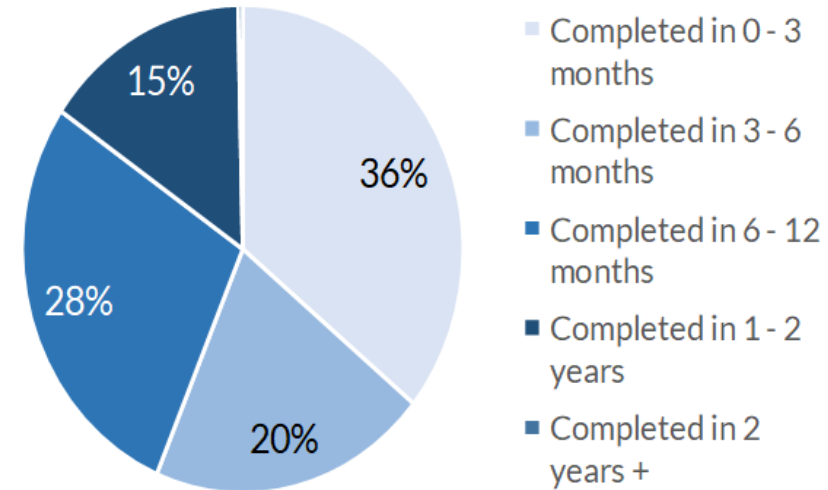


Timeliness

S42 Enquires completed in 2021/22



S42 Enquires completed in 2022/23



This is the first time the BSAB has included 'Timeliness' of a s.42 enquiry in its Annual Report. Historically, there have been concerns raised to the BSAB by professionals that there was a long wait and delay with s.42 concerns raised. There has been a lot of work completed by LBB in 2022-23 to minimise safeguarding wait times.

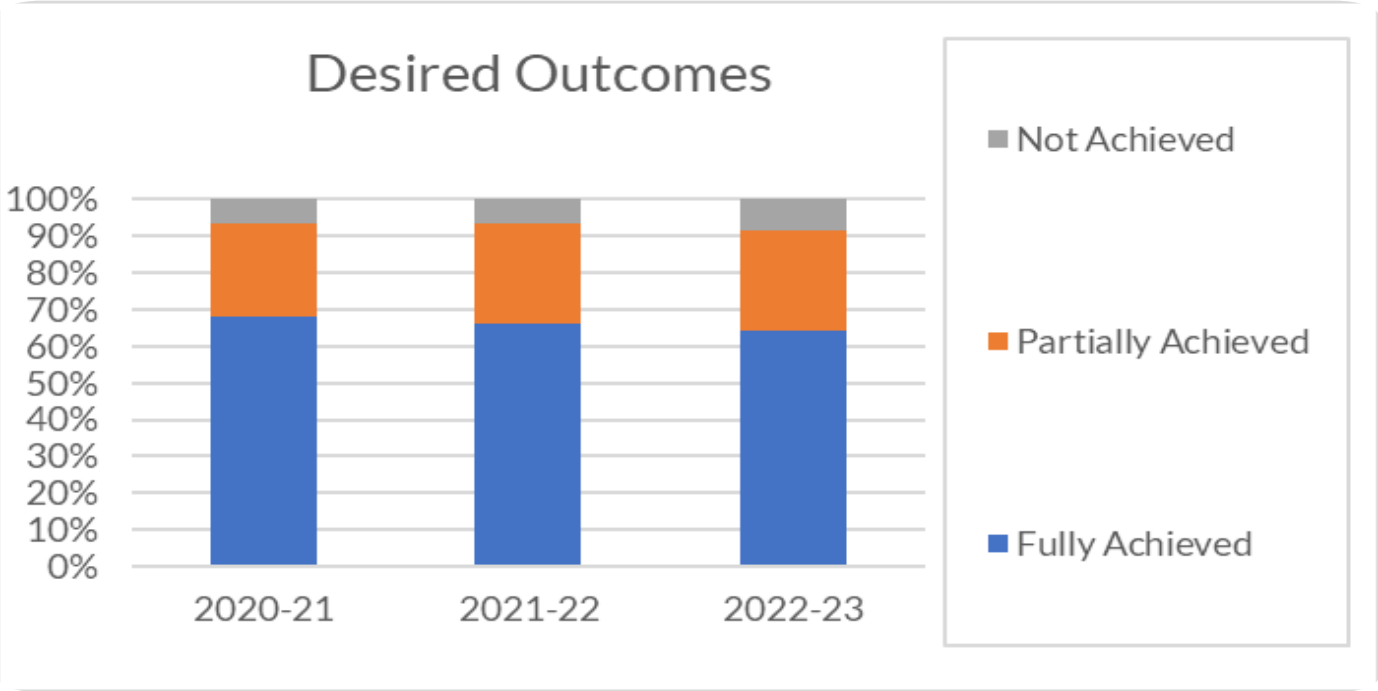
We know that the speed in completing a s.42 referral does not always reflect in a quality of outcome and recent SAR learning has identified this and BSAB has determined that in line with the new strategic priorities it will be a focus of attention within the coming year.

Desired Outcomes

The Desired Outcomes data notes what the individual wants at the onset of the s.42 Enquiry Process against whether this has been met.

Noting that 48 cases (individuals) were not asked/known/recorded on what their Desired Outcomes would be is of concern to the BSAB and we will seek assurances from the LA on what systems are in place to address this.

The BSAB work with adults with 'lived-experience' will hopefully assist in identifying more detail in the future and Making Safeguarding Personal is a mandate for all partners through the Care Act 2014. The BSAB will be advocating in its new strategic priorities to have engagement and coproduction evidenced in s.42 across the partnership for 2023-2026.



desired outcomes were fully or partially achieved (where asked and expressed)

Desired Outcomes

London 21-22 94%

Below

Comparator group 21-22 94%

Below

In 48 cases, desired outcomes were not asked/known/recorded.

Risk Outcomes

The data here shows an increase in the number of outcomes where risks have remained and there are plans in place by partners to look further into this data and report back to BSAB in the next year.

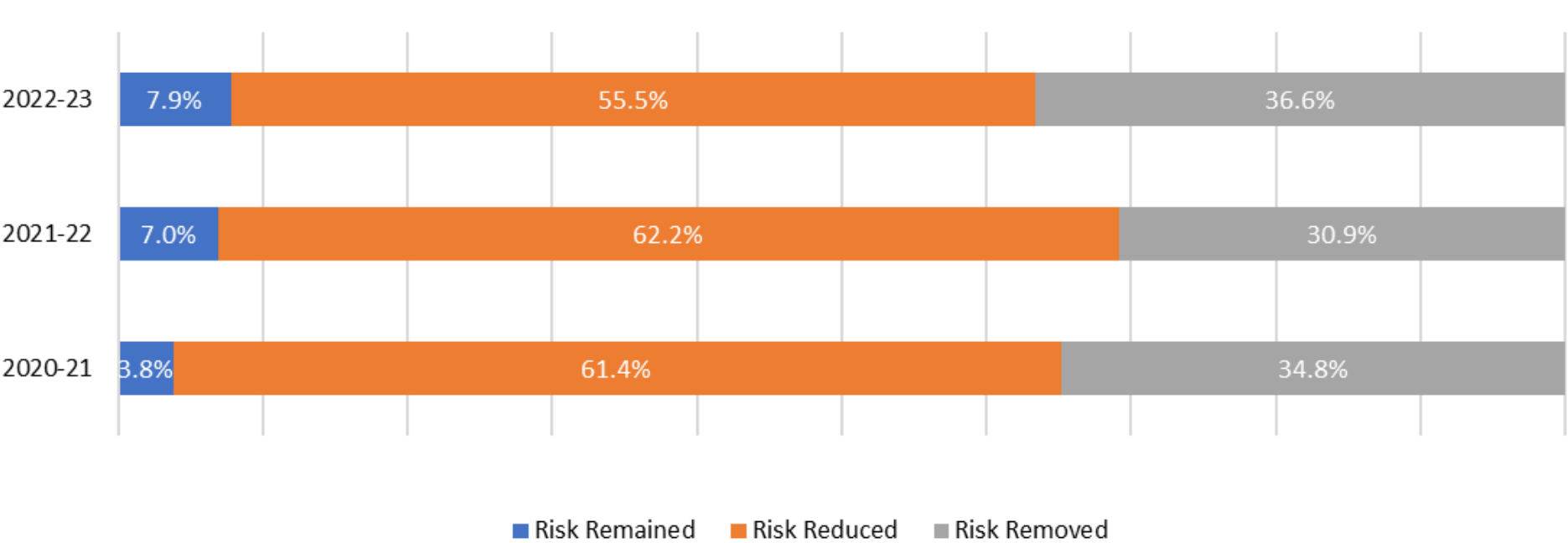


risks were reduced or removed
(where identified)

Risk Outcomes

| | | |
|------------------------|-----|-------|
| London 21-22 | 91% | Above |
| Comparator group 21-22 | 90% | Above |

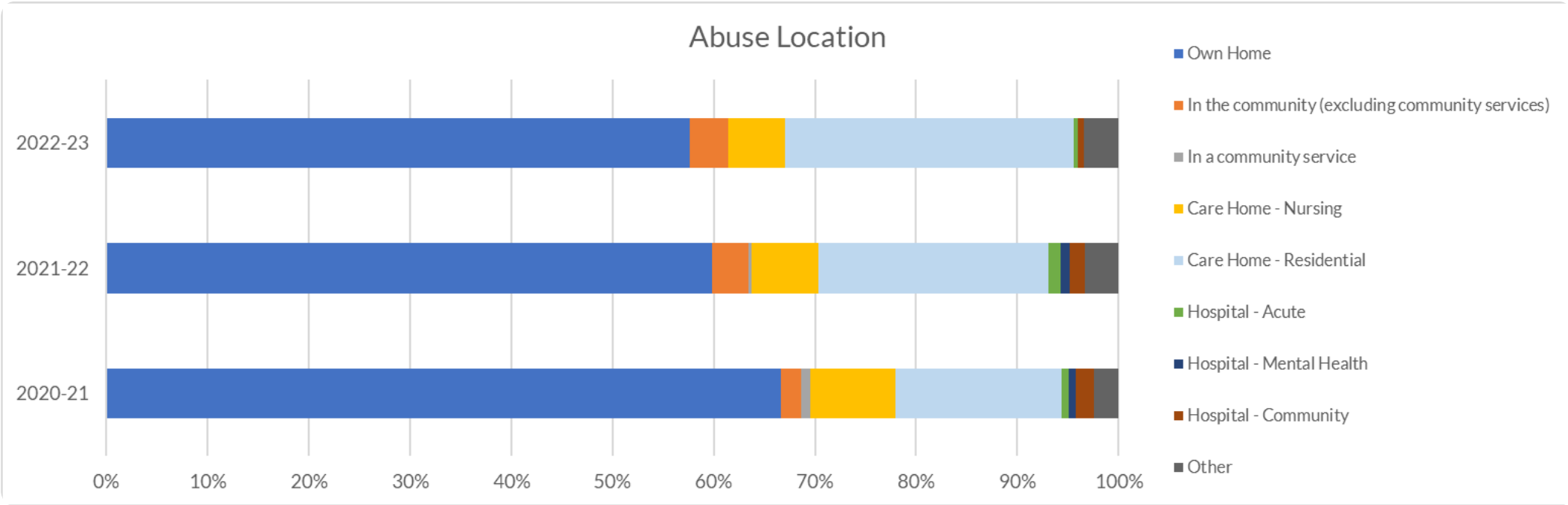
In 68 cases, the risk assessment was inconclusive, identified no risk or ceased at individual's request.



Location of abuse

The data below shows a year-on-year increase for 'Care Home – Residential' and 'In the Community' with a continued decrease in 'Own Home' and in 'Care Home - Nursing', as a locations of abuse.

The BSAB has been informed that the Quality Assurance Team within the Safeguarding Adult Team works with commissioned Providers for oversight when s.42 concerns are raised. The BSAB will be seeking further information from the LA on this ongoing increase trend for both 'Care Home - Residential' and 'In the Community' as a partnership for support and oversight.

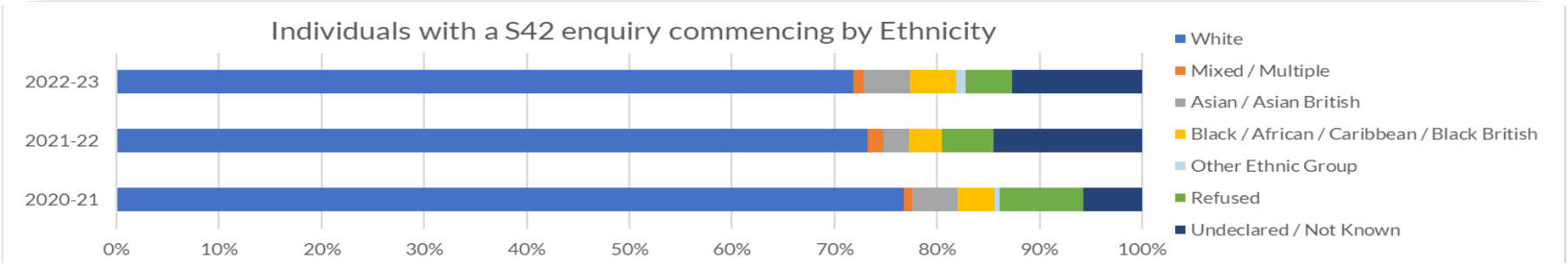
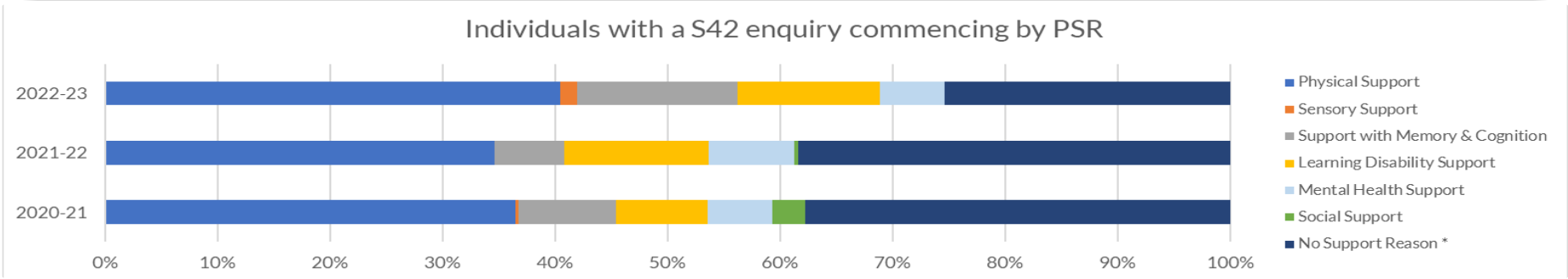


Demographics

The data graphs below report against Primary Support Reason (PSR) and then by Ethnicity. There has been a year-on-year decrease in No Support Reason (No services) and the BSAB will seek further information from the LA on this key area. Noting there is also a decrease in Mental Health Support cases, which does not correlate with the work of the BSAB and findings from SARs locally. As reported, there is an increase in Physical Support and in Support with Memory & Cognition as Primary Support Reasons.

As noted on page 14, Locations of Abuse, it would be good to understand if there is a correlation with Care Home - Residential and the increase with Physical Support/Memory & Cognition and what work the LA is doing to support residents on this increasing area.

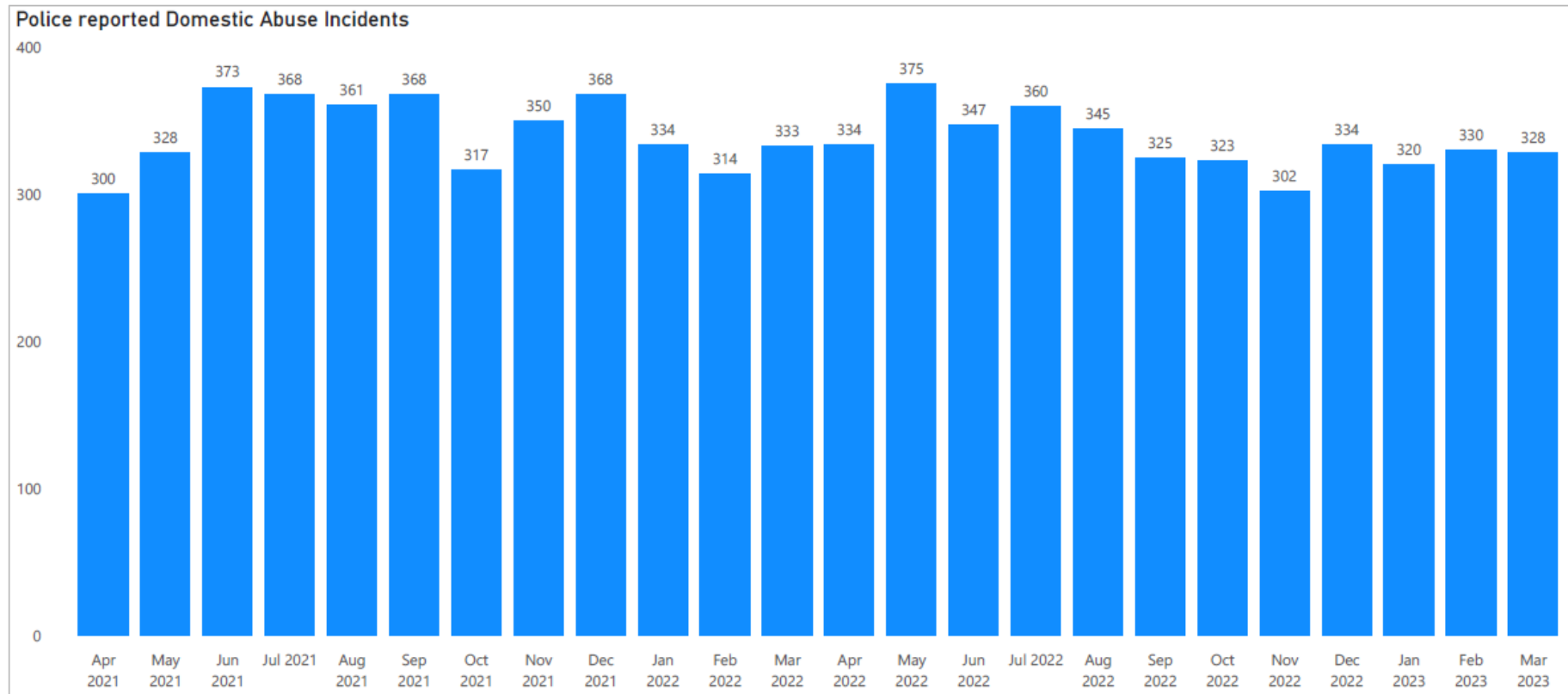
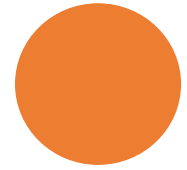
The data for Ethnicities with s.42 enquiries is showing small variations across all ethnicities from previous year. However, the two key areas of interest to the BSAB are: 1) the 'Undeclared/Not Known;' and 2) Increases across both Black/African/Caribbean/Black British as well as Asian/Asian British. We know that from the [2021 Census](#) indicates an increase in population from these 2 ethnic groups and the BSAB will be looking at whether a correlation exists.



Police Reported Domestic Abuse Incidents - Bexley

The BSAB will seek an update from Community Safety Partnership Board on Domestic Abuse Data as the decrease is not correlating with SAR Notifications, SAR Conversions and DHRs in Bexley.

The Metropolitan Police reported a total of 4,023 domestic abuse incidents in 2022/23, compared to 4,114 in 2021/22 – a decrease of 2.2%.

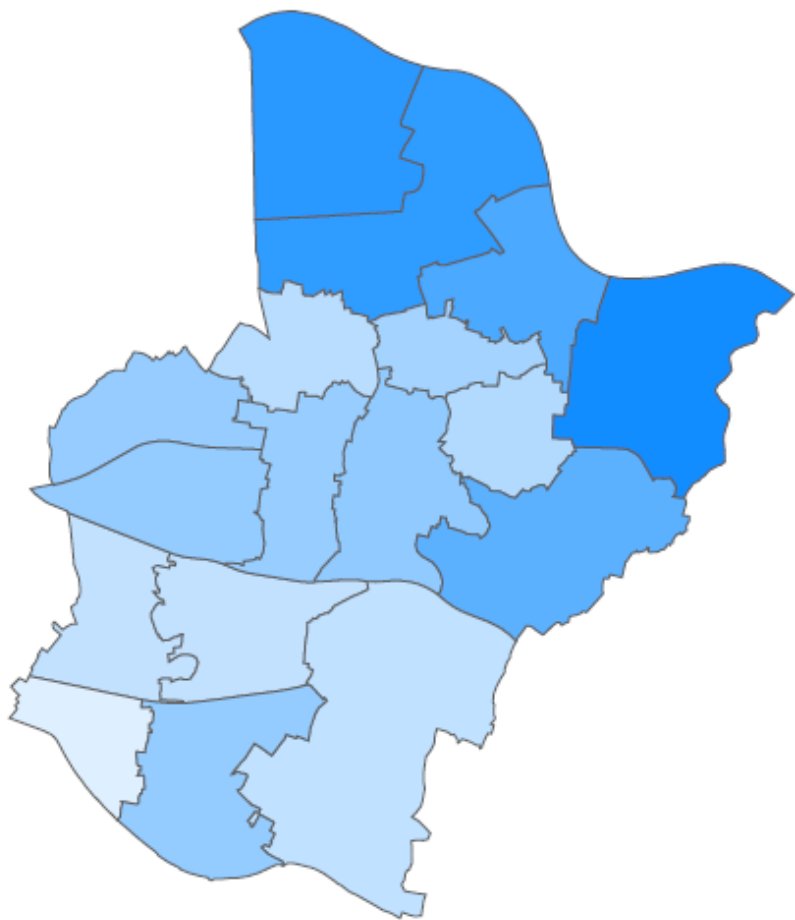


For 2022/23, the highest number of DA incidents were seen in Slade Green & Northend (10.91%), followed by Thamesmead East (9.93%) and Belvedere (9.65%). The ward with the fewest domestic abuse incidents was Longlands (2.38%).

Total Domestic Abuse Incidents by Ward 2022/23

| Ward | Domestic Abuse Incidents | % Domestic Abuse Incidents |
|------------------------|--------------------------|----------------------------|
| Slade Green & Northend | 431 | 10.91% |
| Thamesmead East | 392 | 9.93% |
| Belvedere | 381 | 9.65% |
| Erith | 336 | 8.51% |
| Crayford | 307 | 7.77% |
| Bexleyheath | 220 | 5.57% |
| Falconwood & Welling | 215 | 5.44% |
| Sidcup | 214 | 5.42% |
| East Wickham | 213 | 5.39% |
| Crook Log | 210 | 5.32% |
| Northumberland Heath | 190 | 4.81% |
| Barnehurst | 166 | 4.20% |
| West Heath | 155 | 3.93% |
| St Mary's & St James | 143 | 3.62% |
| Blackfen & Lamorbey | 141 | 3.57% |
| Blendon & Penhill | 141 | 3.57% |
| Longlands | 94 | 2.38% |

Total Domestic Abuse Incidents by Ward 2022/23





Modern Slavery Data

The next section covers the safeguarding category of Modern Slavery.

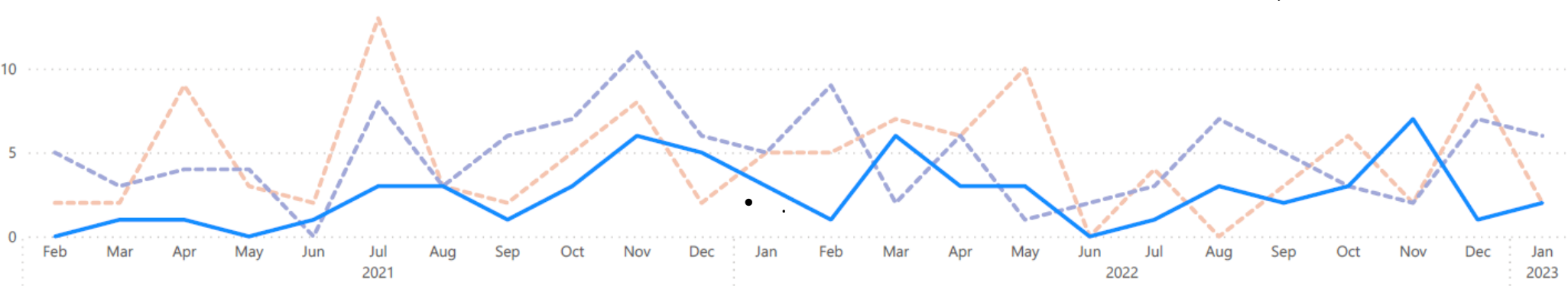
The BSAB Practice Review & Learning Manager Co-chairs the Modern Slavery Working Group, where they oversee the work across the partnership for addressing any concerns.

BSAB queries will go back to the Community Safety Partnership Board for oversight.

Modern Slavery Data: Number of Referrals by Month & Referring Agency

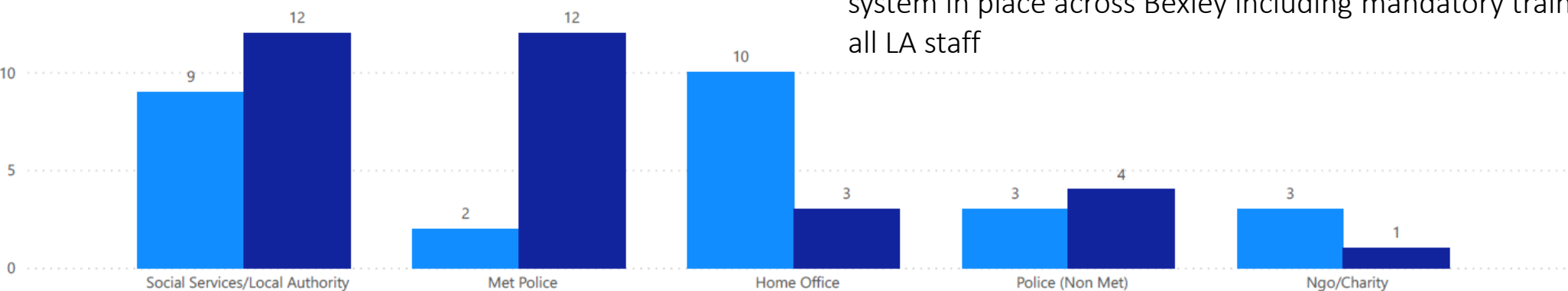
Number of Referrals by Month

Lewisham Greenwich Bexley



Referring Agency

Feb 2021 - Jan 2022 Feb 2022 - Jan 2023



the Christchurch Ward.



A map of the state of Georgia, showing its county boundaries. The county of DeKalb is highlighted in a dark blue color, while the other counties are in a light blue color. The map is oriented with the state's capital, Atlanta, in the center.

| Ward | Offences |
|------------------------|-----------|
| Barnehurst | 1 |
| Blackfen and Lamorbey | 1 |
| Blendon and Penhill | 1 |
| Falconwood and Welling | 1 |
| North End | 1 |
| Northumberland Heath | 1 |
| St Mary's | 1 |
| East Wickham | 2 |
| Sidcup | 2 |
| St Michael's | 2 |
| Brampton | 3 |
| Crayford | 3 |
| Erith | 3 |
| Belvedere | 4 |
| Thamesmead East | 6 |
| Christchurch | 10 |
| Total | 42 |

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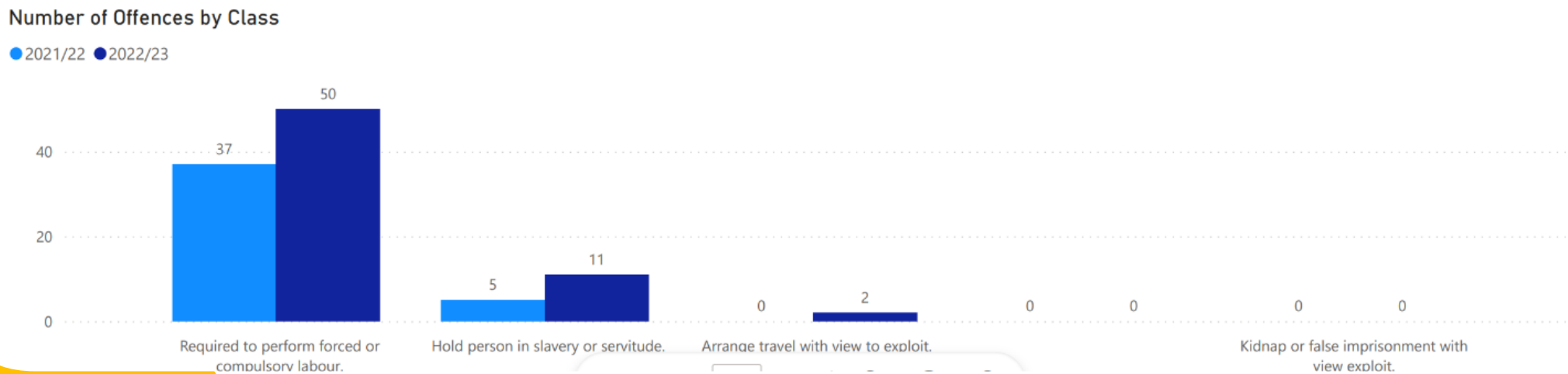
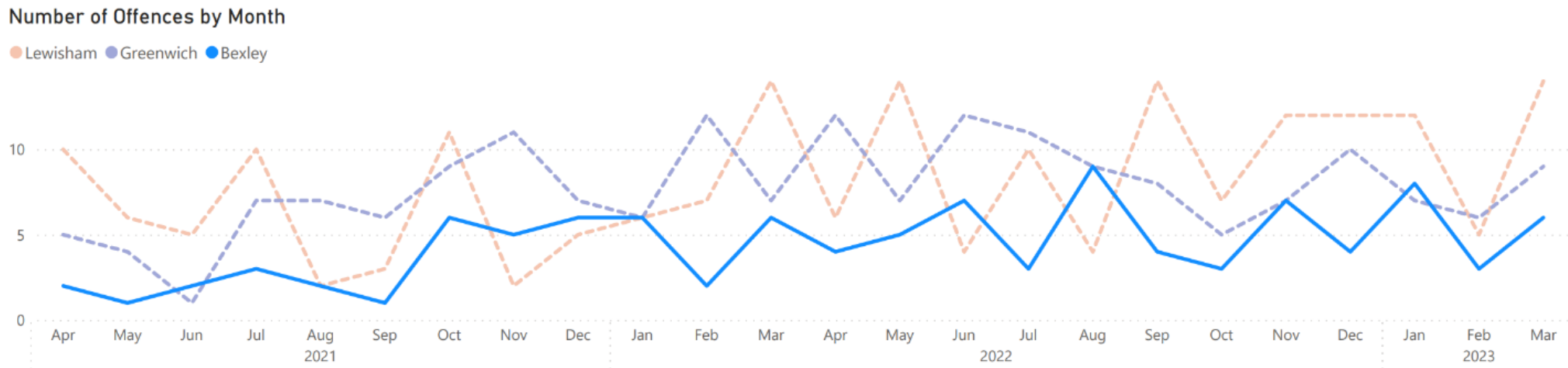
| Ward | Offences |
|------------------------|-----------|
| Brampton | 1 |
| East Wickham | 1 |
| Longlands | 1 |
| St Michael's | 1 |
| Blackfen and Lamorbey | 2 |
| North End | 2 |
| Northumberland Heath | 2 |
| Sidcup | 2 |
| Erith | 3 |
| Barnehurst | 4 |
| Belvedere | 6 |
| Falconwood and Welling | 6 |
| Crayford | 8 |
| Thamesmead East | 8 |
| Christchurch | 16 |
| Total | 63 |

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Source: Metropolitan Police Service - Modern Slavery External Business Intelligence Tool

Modern Slavery Data: Number of Offences by Month

The data below shows Bexley's offences whilst lower than Lewisham and Greenwich, they follow the same trend. The class of offences is highest against 'forced or compulsory labour' and has increased from previous year by 1.3% as well as the 2.2% increase of those 'holding a person in slavery or servitude.'



Modern Slavery Data: Victim Ethnicity and Nationality

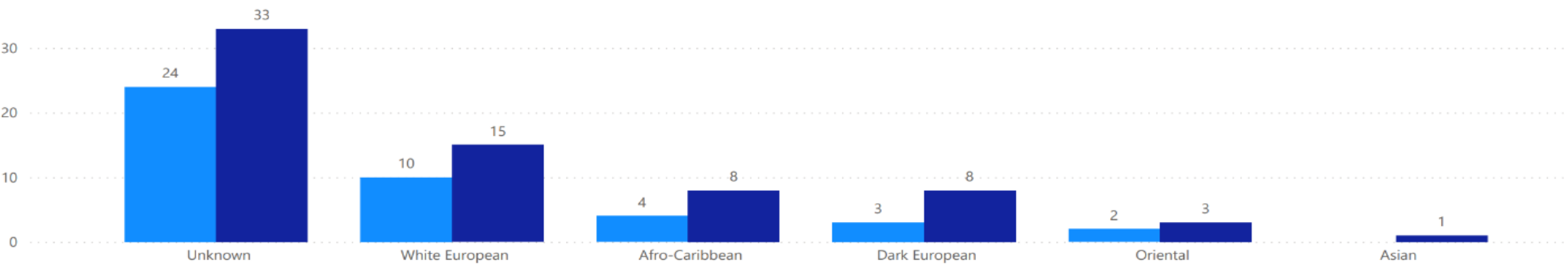
The data below shows and increase across all categories, but mainly in those victims that do not disclose their ethnicity nor nationality. This is reportedly due to either not recorded by the referrer or not given by the victim.

The 2nd highest nationality is still those with UK citizenship and has a combined increase with Unknown of 1.5% from the previous year.

Victim Ethnic Appearance

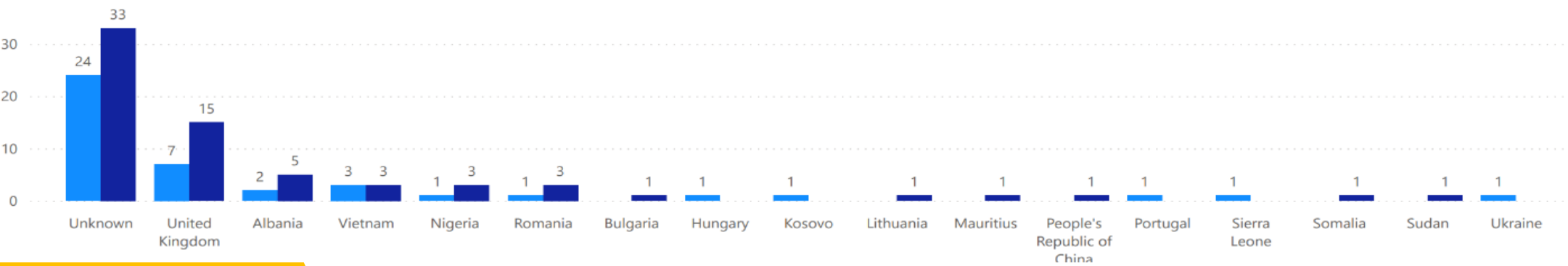
Source: Metropolitan Police Service - Modern Slavery External Business Intelligence Tool

2021/22 2022/23



Victim Nationality

2021/22 2022/23

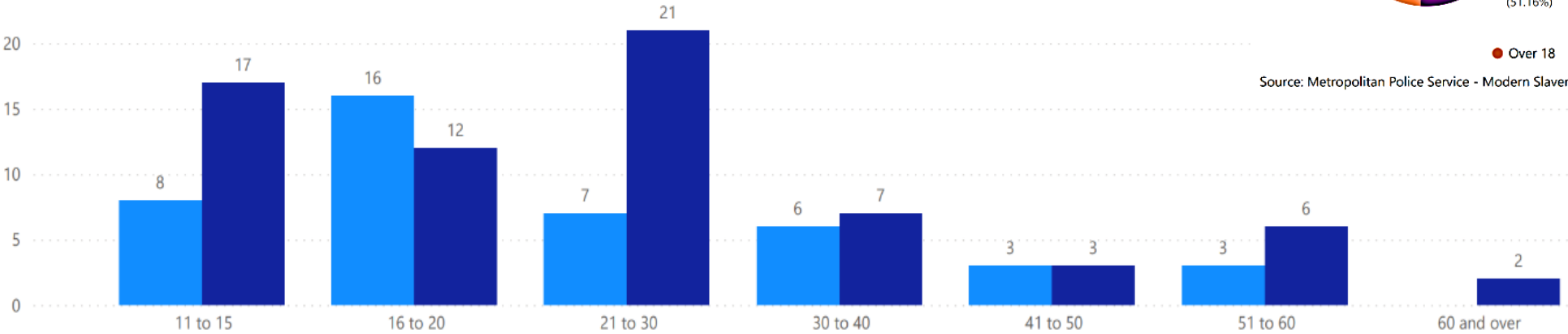


Modern Slavery Data: Victim Age and Sex

The data below shows an overall increase across the various age groups. The highest group is 21-30 years with the 2nd highest group reported as 11-15 years. Additionally, those in the 60+ group have also increased as none reported last year in this group.

Number of Victims by Age Group (Apparent Age)

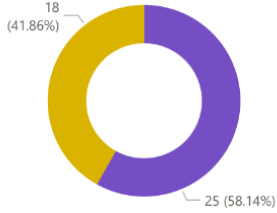
● 2021/22 ● 2022/23



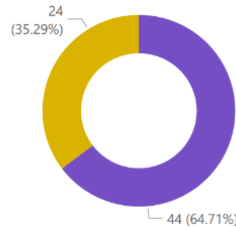
The data to the right shows that males are higher victims than females for the last 2 years with an increase of 1.8% from previous year.

The data also shows that last year there was an increase of 1.8% for over 18's impacting on adult services across the Southeast London region.

Sex (2021/22)

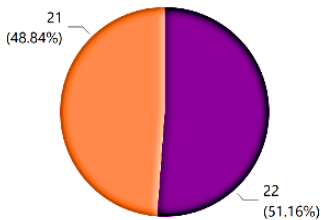


Sex (2022/23)

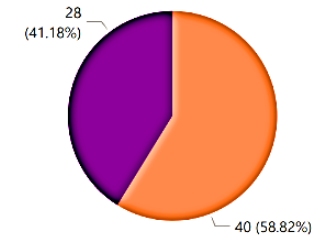


● Female ● Male

Adult or Child (2021/22)



Adult or Child (2022/23)



● Over 18 ● Under 17

Source: Metropolitan Police Service - Modern Slavery External Business Intelligence Tool

Safeguarding Adult Reviews

What is a Safeguarding Adult Review (SAR)?

In 2014 the Care Act introduced Safeguarding Adults Reviews (SAR's), which became law from 1st April 2015.

SARs are a statutory requirement and engagement is mandatory, the lack of information submitted and/or poor attendance, can lead to poor learning outcomes, including financial implications.

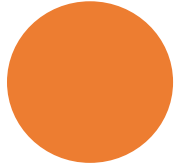
Additionally, lack of full engagement may lead to recommendations seemingly to appear 'unfair' however engagement with the SAR process is to fully understand why decisions were made and actions taken to evidence learning will mitigate against this from happening.

In the event a BSAB partner challenges a SAR, we may ask for further evidence and addendums to be made before signing off and publishing for learning.

The SAR is a way in which we can improve our services and multi-agency learning by:-

- Looking at events which have resulted in a death or serious injury, with the aim of preventing what happened to one person (or a group of people) from happening to others.
- Identifying where responses to the situation could be improved or learned from.
- Independently scrutinizes the evidence provided based on what happened, offers support to how things could or should be done differently; then produces recommended actions to improve services.

What does section 44 of the Care Act 2014 tell us about the SAR Criteria?



44. Safeguarding Adults Reviews

- (1) An SAB **must** arrange for there to be a review of a case involving an adult in its area with needs for care and support (whether or not the local authority has been meeting any of those needs) if—
 - (a) There ***is reasonable cause for concern*** about how the SAB, members of it or other persons with relevant functions worked together to safeguard the adult, **and**
 - (b) Condition 1 or 2 is met.
- (2) Condition 1 is met if—
 - (a) The adult has died, **and**
 - (b) The SAB ***knows or suspects*** that the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died).
- (3) Condition 2 is met if—
 - (a) The adult is still alive, **and**
 - (b) The SAB ***knows or suspects*** that the adult has experienced serious abuse or neglect.
- (4) An SAB may arrange for there to be a review of **any other case involving an adult in its area with needs for care and support** (whether or not the local authority has been meeting any of those needs).
- (5) Each member of the SAB **must co-operate** in and contribute to the carrying out of a review under this section with a view to—
 - (a) Identifying the lessons to be learnt from the adult's case, **and**
 - (b) Applying those lessons to future cases.





Bexley SAR Protocol and Updates:

This year we updated our SAR Protocol, which includes the following key areas:

1. New SAR Notification Process
2. New SAR Scoping Process
3. New Decision Making Process
4. New Learning & Delivery Plan Process
5. New Key Performance Indicators (KPIs)
6. New SAR Subgroup Chairing Roles & Responsibilities
7. New SAR Pathway for Escalation National SAB

For the full SAR Protocol, please visit the BSAB's website –

[SAR Protocol & Toolkit - Bexley Safeguarding Adults Board \(safeguardingadultsinbexley.com\)](https://safeguardingadultsinbexley.com)

We have already arranged with Bexley's Performance & Analysis Team to provide stronger SAR data for partners as much of the current data on SARs is not up-to-date or accurate. For example, NHS England Digital SAR data is not accurate. This has been escalated and reported for the last 4 years to NHSE but there has been change. The errors lay in the reporting by Local Authority vs. Safeguarding Adult Boards.

Many SABs are not just 1 LA, thus, the data reported is not accurate nor does it report on any SAR commissioned under the number 5. Thus, making Bexley SAB look like an outlier, when in fact, we are not.

Likewise, National SAB Chairs and Managers Networks both have reported an increase in SAR Notification and Conversions. Bexley SAB Business Team and Independent Chair, do not see the increases as a negative position, but it shows the Bexley (and others) SAR Protocol is working and partners are wanting to escalate and review with the intent to share good news stories and areas for improvement across the partnership.

Bexley SAR'S carried out and published:

It's been reported Nationally that this past year, 2022-23, there's been a rise in SAR Notifications and Conversions. Bexley has too seen an increase in SAR Notifications, leading to an increase in commissioned SARs (see chart below and on page 25 for more detail):

| SAR Notifications | Notifications that met Criteria | SARs with the same theme to be joined together (i.e. Learning Disability) | Total Number of SARs Commissioned | SARs Completed | SARs Published | SAR carry over to 23-24 |
|-------------------|---------------------------------|---|-----------------------------------|----------------|----------------|-------------------------|
| 23 | 15 | 13 | 6 | 0 | 0 | 6 |

Since several SAR Notifications had similarities, we've adapted our SAR Protocol to allow these cases to link for a Thematic Review Style as well as Rapid Reviews to link with 'known' themes at time of notification. This is a new concept nationally, which Bexley SAB is championing and sharing across other SABs to adopt; including attending other SAB meetings to share this new way forward.

For example, we received 5 Notifications where adults with learning disabilities were identified - so, following this new protocol we've been able to hold 1 SAR instead of doing 5 separate SARs. We will be linking the cases together to do a Learning Disabilities Systems Review using all 5 cases as examples. Bexley SAB feels that this is a much-improved way of conducting SARs for most-effective learning to be applied.

Majority of the SARs commissioned have been between the ages of 18-64. It is often perceived that only older adults are most at risk, but in Bexley we've seen that 18-64 is the highest range for death and/or serious incidents.

There was 1 SAR was carried over from 2022-23, which has now concluded. This SAR is known as, SAR-Rachel, but we've agreed not to publish the report in full as it is not in the best interest of the adult. However, to comply with the Care Act, we've added in the learning themes to our Learning & Development Programme for 2023-24, as well as, sharing a SAR-Rachel anonymized Learning Brief across the network so that learning can be shared.

All published SARs and SAR Resources can be found on the Board's [website](#).

Bexley's Top 10 SAR Themes

Here are the 2022-23 Top SAR Themes identified in Bexley.

The Bexley SAB has worked hard on how we support and share the learning across the partnership for 2022-23 and beyond.

All Bexley SAB Learning & Development Events are linked to the following SAR Themes and other SAR Recommendations as found in -

- 15 completed SARs,
- 1 Multi-Agency Review,
- Multiple LeDeR

Also, where appropriate other Review (such as: DHR, LCSR) actions have safeguarding learning for us to have oversight.

In 2022-23, our Top SAR Themes are:-

1. Mental Capacity and Coercion
2. Court of Protection and Escalation
3. Information Sharing & Recording
4. Domestic Abuse and Coercion
5. Think Family
6. Suicide Awareness and Prevention
7. Safeguarding Adults Process and Reporting
8. Making Safeguarding Personal and Self-Neglect
9. Safeguarding Literacy, Knowledge and other key legislation
10. Risk Assessment and Understanding Escalation Panels

This page shows evidence submitted by partners to the SAR Subgroup for 2022-23 oversight.

If you wish to see the detailed plan, please request this from Bexley SAB - bsab@bexley.gov.uk

| Theme | Actions Set | Actions Completed | Rag Rating |
|---|-------------|-------------------|------------|
| 1. Mental Capacity and Coercion | 4 | 3 | |
| 2. Court of Protection and Escalation | 7 | 7 | |
| 3. Information Sharing & Recording | 4 | 4 | |
| 4. Domestic Abuse and Coercion | 62 | 62 | |
| 5. Think Family | 7 | 7 | |
| 6. Suicide Awareness and Prevention | 3 | 3 | |
| 7. Safeguarding Adults Process and Reporting | 7 | 7 | |
| 8. Making Safeguarding Personal and Self-Neglect | 1 | 1 | |
| 9. Safeguarding Literacy, Knowledge and other key legislation | 7 | 7 | |
| 10. Risk Assessment and Understanding Escalation Panels | 4 | 4 | |

SAR KPI Evidences

This year we produced 6 new Key Performance Indicators (KPIs) for Bexley SAB partners.

This section will show you what the KPIs are and what has been submitted.

The KPIs will evidence the embedding learning (for more information on the details of the KPIs, please email bsab@bexley.gov.uk):

KPI 1: Evidence for Awareness –

- Number of staff informed of the new learning principle – this should be recorded by managers; for example, managers recording which team members have been informed.
- Number of staff booked onto events – this should increase when achieved
- Where did managers share the new learning principle – this should be recorded by managers; for example, team meeting minutes or emails.

KPI 2 – Evidence for Engagement –

- Number of staff attending learning events should increase – not all booked attendees show up for the events this will capture booked vs attended data.

KPI 3 – Evidence for risks identified and actions taken learning cannot be embedded:

- Partners should report back to Bexley SAB any identified risks they have found if the learning principle is not able to be embedded; for example, not providing safeguarding adults training as a mandatory requirement due to lacking time to allow staff to attend training, risk result - staff may not understand basic statutory duties and not fulfil the Care Act 2014 responsibilities.
- The Bexley SAB can assist with embedding of learning across the partnership and such escalations should be seen as a helpful discussion to assist in embedding learning;
 - The Risks Identified may contribute towards the Bexley SAB's Risk Register (for more Information on this process ask BSAB Business Team at bsab@bexley.gov.uk).

KPI 4 – Evidence to capture the support offered within your organisation to embed the learning principle(s):

- Describe what support, learning and/or training events will you provide the staff?
- Describe whether or not supervisions cover learning from Reviews and what that process looks like to embed the learning principle(s).

KPI 5 – Evidence of Impact and Reality:

- Number of service users in commissioned services
- Number of service users in commissioned services with s.42
- Number of Provider Concerns
- Number of cases where risks remain
- Case Examples on where risks to individuals have been reduced or eliminated

KPI 6 – Evidence for capturing ‘Lived Experience’:

- Have partners needed to amend policy and procedures? If so, which ones? How did you implement these changes?
- Have partners needed to amend commissioning contracts or statements? If so, which ones? How did you implement these changes?
- Did partners communicate the learning principle(s) with residents, service users, patients, or others about the learning principle(s)?



KPI 1: Evidence for Awareness

Southeast London Integrated Care Board, Bexley: The safeguarding team within SEL ICB (Bexley) have delivered training using the Think Family approach at this year **PLT**. This was delivered to over 150 staff from Primary Care. Topics covered included:

- Think Family
- Professional Curiosity
- Reasonable adjustments
- Annual Health Checks for LD
- Routine Enquiry
- Carer stress

We have also commissioned 4 training sessions from Solace for primary care for Domestic Abuse and carer stress and are continuing to offer and deliver Routine Enquiry to all GP practices. We share learning to all provider services who attend our Bexley Borough Health Safeguarding Forum and Domestic Abuse Health Sub Group from Domestic Homicide Reviews (DHRs), SARs, Local Child Safeguarding Practice Reviews (LCSPRs).

All Learning from LeDeR (Learning Disability Mortality Reviews) is shared with GPs and providers that attend the Bexley LeDeR steering group as well as linking back to SAR Subgroup for Bexley SAB network learning.



South East London



MET Police: As for all the submissions below the nature of the policing input is in most cases centrally driven and locked into the Commissionaires turn around plan. In the last 12 months all officers and recruits have received training and input around the Violence Against Women and Girls with Domestic Abuse being a prime component of that training



**Department
for Work &
Pensions**

Department for Work and Pensions: has internal learning for colleagues to support them when dealing with customers who may be subjected to Domestic Abuse - each site has a lead on this subject matter. New Recruits undertake training on complex needs as part of their induction.



London Borough of Bexley: Training to whole PH team



HM Prison and Probation Service: Internal agency training on domestic abuse is Mandatory for Probation staff and has to be refreshed every 3 years. 87% of staff have up to date training with the remainder either due for renewal or new staff due to complete. Multi-agency training events are advertised and cascaded to staff. Safeguarding literacy and knowledge - specific piece of work cascaded around understanding vulnerable adults referral pathways and safeguarding thresholds.

Internal death under supervision case reviews completed and learning cascaded. Suicide and self harm prevention and awareness learning is cascaded centrally to all staff. Regular updates are given to staff on any changes to information sharing pathways, GDPR, and staff are aware of escalation routes where there is a blockage to sharing information. SAB training events cascaded and advertised to front line staff. Staff attending the events circulate key learning points to colleagues at team meetings and via email. Probation have provided multi-agency training to promote awareness of our roles and responsibilities.

Learning from making safeguarding personal learning event cascaded to staff via email. Trauma informed practice rolled out to all Probation Court staff via internal training. ACE's and trauma informed practice now available as e-learning for all staff. Person centred planning, crisis planning and strengths based approach is already a focus of the 4 pillars of risk management used to manage risk in Probation and the Web used to complete Sentence Planning. A full assessment completed at the start of every order/licence and reviewed over life of the order/licence analyses strength and risk areas in order to manage risks, complete sentencing planning and undertake contingency planning. We have also assisted Bexley SAB partners by delivering training this last year across the Bexley partnership and will offer this again this next year.

AGE UK: Information sharing is on agenda for care services and staff team meetings. Training is discussed at each 1 to 1

BSAB Training emails are passed to all staff. A couple of classes that were booked were cancelled. This will be part of care staff supervisions All staff attend 1 to 1 sessions with the Operations Manager. this is mandatory training.

Available training will be given to all staff members all supervisions contain training reviews. Basic Awareness given by the operations manager and LBB training sessions given to staff.

we do keep a record of people having a commissioned service. All service users records are kept on a CRM with details of concerns, alerts and details of staff involved.

we are dedicated to adherence to safeguarding protocols, these and policy changes or changes to service user guides are discussed both at managerial level and staff level.



- New Domestic Abuse Lead now well established in post. Oxleas offer DA training as Mandatory at Level 3. There is E Learning in addition to a workshop and DA content forms a significant Part of the L3 SGA Mandatory Training. 93% of Oxleas staff had received that training up to Q3 2022/23. Staff include community health, mental health, HMP (not in Bexley, but released prisoners, victims, relatives etc may form part of that demographic). The recent DA Audit results were included in the SGA Committee bundle for Q3 sent recently to all partners.
- The Corporate Safeguarding Team advise all staff working in integrated teams to raise DA as a safeguarding concern, to employ DASH Risk checklist and to complete a s42 Enquiry if referred to MARAC. DA Governance Structure/ Steering group held quarterly. 7 minute DHR briefing disseminated.
- DA Training for HR, well- being champions completed
- Outreach sessions – 15 minute introduction to DA strategy at wide staff forums. Sessions completed - 11
- 1 hour DA overview within teams Face to face with focus on routine enquiry, trauma informed practice and intersectionality.
- Number of sessions completed to teams 11. 7 further sessions booked for Feb/March. Aim for all teams to access this training throughout 2023.
- Level 3 DA training now accessible via learning and development, meets adult safeguarding mandatory update requirements.
- Follow up DASH risk assessment training provided by DA partners IDVAs. First session delivered by BCWA which was well evaluated
- Level 2 safeguarding training online packages updated to include basic DA overview. Level 1 safeguarding training online packages being updated.
- Plans made to include DA within safeguarding induction resource pack.
- All bases now have DA “easy to follow” DA pathway on staff boards and Intranet resources now easily accessible (just search DA on intranet). Includes examples of routine enquiry and all local referral forms. Updated regularly with support of Oxleas Comms team.
- Service user information – easy read posters developed. For dissemination.
- Development of short film, “routine enquiry”, to be agreed by comms.
- Planned partnership webinar with COMHAD “Substance Coercion” in March. Future webinars planned to continue to raise DA awareness.
- Links with Local authority leads and DA support organisations across tri-borough area.

KPI 2: Evidence for Engagement

Oxleas NHS Foundation Trust : MSP is reportable using the Part 1 SGA concern form, however this is not a mandatory field and does not appear on the ifox reporting mechanism. We use the quarterly qualitative SGA audit as a means of quality checking this, primarily as a means of ensuring that MSP was considered throughout the raising of the concern through to the completion of the enquiry. These results are also available in the Q3 SGA Committee bundle and may be summarised as 14/20 concerns where the victim agreed to be safeguarded under MSP and 2/20 concerns where the victim lacked mental capacity, leaving 4/20 concerns raised where it did not appear to be considered. However, given the breadth of our services, we expect MH integrated services to record person centred interventions at all times, so an additional quality check for MSP includes the person attending safeguarding planning meetings and other areas of Rio reflecting their involvement.

During Q3 there were 8 cases out of the 18 from integrated teams where the outcome was documented in Rio and care plans and risks assessments were updated to a good standard, we continue to encourage staff to complete the process fully by updating other relevant areas of RIO and documenting in progress notes as well as on the RIO SGA forms for completeness.

Mental health work naturally includes regular contacts with and conversations with service users and their support networks and these are measured elsewhere beyond the scope of this audit.

Self neglect and hoarding is a category of abuse which is reportable of a type of abuse in ifox, so for example and as a use of "live data" I can report that during Q4, 1.01.2023 to date there have been 18/190 concerns regarding this, a percentage of 8.62%.



Southeast London Integrated Care Board, Bexley: The safeguarding team within SEL ICB (Bexley) currently does not capture this data



MET Police: Professional Curiosity, Voice of the Child and Adult have been key themes in the last financial year, involving the larger partnership . See the individual was delivered by the GSCP (but also covered adults but under the auspices of the tri-borough group, and the Tri-borough MASH group have delivered referral training to all new officers over the year to drive improvements in referrals. A lot of this area crosses over with process and assurance for KPI 3.

KPI 3: Evidence for risks identified and actions taken learning cannot be embedded

Oxleas NHS Foundation Trust : Crisis and contingency planning, person centred care plan and risk assessments are part of the existing CPA/standard care approach employed by mental health services. These processes are being reviewed and potentially replaced by the use of the Rio based assessment tool DIALOG+.

DIALOG+ is a patient-related outcome measure (PROM) and consists of 11 questions, where service users are asked to rate their satisfaction and needs for care in eight life domains (physical health, mental health, job situation, accommodation, leisure activities, friendships, partner/family and personal safety) and three treatment aspects (medication, practical help, consultations with professionals).

It helps to guide a structured conversation between a health professional and service user that is patient-centred with a focus on change.

DIALOG+ is an enhancement of the existing DIALOG form in that it incorporates the care plan on the same form which is then given to the client.

At Oxleas our EIP, ICMP and CMHRES teams are using DIALOG for those clients who are on CPA. These are all teams which service the Bexley area as well as having counterpart teams in neighbouring boroughs.



MET Police: Information sharing and policy remains a heavily centralized area with all guidelines and agreements set outside the BCU process has been relayed to all officers on a regular basis over the last financial year due to concerns over non-standardised practise across London.



South East London

Southeast London Integrated Care Board, Bexley: SEL ICS (Bexley) safeguarding team do not hold this data from GPs. All of our acute health providers are currently compliant with safeguarding children and adults Level 1 and Level2 training. The safeguarding team in SEL ICS (Bexley) are all complaint with Mandatory Safeguarding Training



Department for Work & Pensions

Department for Work and Pensions : DWP visits will raise any concerns if there is a risk to a customer via the Advanced Customer Support Senior Leader who will consider a multi-agency approach.

KPI 4: Evidence to capture the support offered within your organisation to embed the learning principle(s):



Oxleas NHS Foundation Trust : There is a brief basic awareness e-learning package developed by the Zero Suicide Alliance and is suitable for all staff.

It combines facts about suicide with stories of real people who have experienced the impact of it on their lives. It provides advice on how to speak to someone with suicidal thoughts and real life scenarios to give the skills to deal with difficult conversations with loved ones, friends or colleagues.

The resource was created by clinicians from Mersey Care working with those who have either contemplated suicide or been bereaved by it. This e-learning does NOT replace STORM suicide and self-harm prevention learning for clinical staff.

Serious incidents categorised as level 4-5 : Severe harm:

Level 4 and Level 5 incidents, including death of a service user where death relates to the incident rather than natural causes and homicide.

The Care Quality Commission monitors the trust's compliance with the Duty of Candour. Failure to comply could have a negative reputational effect on the trust as well as a financial one. When the incident has been identified and agreed as requiring a level 4 or 5 investigation, this SOP is designed to ensure that Oxleas NHS Foundation Trust fulfils its duties and obligations under the NHS Serious Incident Framework (2015).

1. Concise - suited to less complex incidents which can be managed by individuals or small groups at a local level (complete in 60 days). (Oxleas - Level 4)
 2. Comprehensive – suited to complex issues which should be managed by a multidisciplinary team involving experts / and or specialist investigators (complete in 60 days). (Oxleas - Level 5)
 3. Independent Investigations – suited to incidents where the integrity of the internal investigation is likely to be challenged or where it would be difficult for an organisation to conduct an objective investigation mainly due to the size of the organisation, or the capacity / capability of the available individuals and / or number of organisations involved (complete in 6 months).
- The learning opportunities for staff, processes, policy adjustments are cascaded down through patients safety managements groups.



MET Police: This has been a key component of the work completed around improving referrals and will be a rolling program to delivered to all new officers and to refresh experienced ones throughout the new year.



London Borough of Bexley: Suicide audit and PH leading on multiagency suicide prevention group



Department
for Work &
Pensions

Department for Work and Pensions :DWP has a policy to deal with customers who cite self harm or suicide - regular sessions are conducted to upskill colleagues on the process.



Southeast London Integrated Care Board, Bexley: All learning is shared with the Senior Management Team within SEL ICS (Bexley) and with specific staff groups.

KPI 5: Evidence of Impact and Reality

Oxleas NHS Foundation Trust :Mental capacity training takes the form on a non mandatory e learning module: The course takes a modular approach to exploring a wide range of consent and capacity issues, including connections to other legislation and guidance (eg MHA). There are core modules for everyone and others relevant to only some contexts / roles.

Rio has fields for MCA testing. s75 % AMHPs are usually trained in DOLS, although this aspect of the training will be replaced with the new LPS arrangements and the introduction of the AMCP role. The trust has an MCA Lead Sazi Banda who is known to BSAB and can be contacted to provide any relevant updates with regard to this process.

The part 1 Concern form has drop downs regarding mental capacity, the first of which is mandatory completion. It poses the question "Does the adult at risk appear to have the mental capacity to understand that a referral is being made?-Yes, No, or Not Known"

For live data purposes for the SAB, during Q4 2023 in Bexley there were 58 Concerns raised with 6 lacking mental capacity and 2 where this was Not known. The not knows related to one neglect and acts of omission and one domestic abuse.



London Borough of Bexley: Health intelligence role in public health as the Director of Public Health is trained and experienced



MET Police: The mental health partnerships have been working closely in this area, but this is very much a work in progress, the work with SLAM and OXLEAS has led to significant reduction in staff hours between use of police powers and handover to health staff and this will be a key area in 23/24 training.



Department for Work and Pensions : DWP will share appropriate information as per the policy and guidance.



Southeast London Integrated Care Board, Bexley: SEL, ICS - Unable to comment as not case holders

KPI 6: Evidence of for capturing 'Lived Experience'

Oxleas NHS Foundation Trust: LA oversight is provided through the SAC data which is produced quarterly, participation in the SAB and attendance of the Oxleas Safeguarding Committee which is held quarterly via MS teams and seeks to assure partners across the SELICS, LA's and internally across Oxleas services that Oxleas is producing accurate and measurable data, conducting audits, keeping abreast of domestic abuse issues, safeguarding children, safeguarding adults, employing the Think Family approach. Quarterly data is also reported to ICS and the focus is now emerging across the tri-borough area that live data , themes and trends concerning categories of abuse, commonality between those service users where abuse is experienced and assurances regarding the effectiveness of integrated working are required.



South East London

Southeast London Integrated Care Board, Bexley: Unable to comment as not case holders



MET Police: Nothing submitted



London Borough of Bexley: Director of Public Health trained and experienced



Department for Work & Pensions

Department for Work and Pensions : DWP doesn't have a legal responsibility to safeguard but the Advanced Customer Support Senior Leader will attend SABs and contribute towards SARs.

KPIs against Bexley's Top 10 SAR Themes:

LBB, Adult Social Care has embedded in the following ways -

- Training
- Sharing of information
- Practice Reflective Forums
- Team meetings
- Escalation
- Emails
- Face to face training
- Webinars
- Principal social work Networks
- SOLACE
- MARAC
- Updated Risk Assessment
- Self Neglect Toolkit
- Audits
- Quality Management Meetings.
- Recording of Audits.
- Making safeguarding Personal - bespoke training programs
- LPS - Training
- Domestic Abuse champions
- Housing seminars
- Teaching partnership - events
- Suicide and Prevention strategic meetings-
- Community safety Strategic meetings,
- Learning Disability - Autism forum

| Theme | Partners that have provided evidence |
|--|--|
| Domestic Abuse | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Learning and Enterprise College Bexley LBB, Public Health Department of Work and Pensions Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |
| Crisis Planning and Strengths Based | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team |
| Making Safeguarding Personal - Person Centred Planning | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Greenwich and Bexley PDU, National Probation Service |
| LA Oversight, Governance | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Learning and Enterprise College Bexley Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |
| Safeguarding Literacy and Knowledge | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Learning and Enterprise College Bexley Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |

| Themes (continued) | Partners that provided evidence |
|--|---|
| Risk Assessment | LBB, Adult Social Care Southeast London Integrated Care Services, Bexley |
| Safeguarding; Processes and Assurances | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Southeast London Integrated Care Services, Bexley |
| Homelessness, Housing Services | LBB, Adult Social Care Southeast London Integrated Care Services, Bexley |
| Impact on Individual and Family | LBB, Adult Social Care Southeast London Integrated Care Services, Bexley |
| Suicide and Suicide Prevention / Awareness | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Learning and Enterprise College Bexley LBB, Public Health Department of Work and Pensions Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service Age UK Bexley |
| Information Sharing, Inter/Intra Agency sharing, Information Recording Systems , Record Sharing, Information Flow, Record-Keeping | LBB, Adult Social Care Metropolitan Police - South East BCU Public Protection Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service Age UK Bexley |
| SAB Governance, BSAB Role in Improving Practice | LBB, Adult Social Care LBB, Public Health Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |

| Themes (continued) | Partners that have provided evidence |
|---|---|
| Professional Curiosity | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Learning and Enterprise College Bexley Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |
| Professional Roles & Responsibilities | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Learning and Enterprise College Bexley Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |
| Making Safeguarding Personal (MSP) and Self-Neglect | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Learning and Enterprise College Bexley Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |
| Mental Capacity in relation to Executive Capacity/Crisis/Duress/Inherent Jurisdiction | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Southeast London Integrated Care Services, Bexley |
| MSP - Trauma Informed Practice | LBB, Adult Social Care Oxleas NHS Foundation Trust, Safeguarding team Metropolitan Police - South East BCU Public Protection Southeast London Integrated Care Services, Bexley Greenwich and Bexley PDU, National Probation Service |

What support have we offered?

This section will highlight the Bexley SAB offer to the partnership and wider SAB Networks. The BSAB Business Team manages all work of the Bexley board; including all meetings, events and other opportunities to learn and bring back that learning to support partners more effectively.

We produce an annual Learning & Development Programme for all partners to embed the SAR Learning across Bexley. Whilst very proactive, we still struggle to have attendees from the statutory and wider partners at these events. We often have very frontline staff and many commissioned providers, but rarely have members from our statutory services attend these sessions. This is something the BSAB Independent Chair will be addressing in the next year.

In addition, we will share how our influence is not just known in Bexley, but London-wide and Nationally.

The following Learning & Development events hosted by Bexley SAB:

- National and Local SAB Managers Awards Scheme - 'We See You - We Hear You'
- Participating in weekly briefings to the Local Authority Health & Social Care meetings
- Lived Experience Session on Predatory Marriage
- Delivered Modern Slavery Briefing/Training for Bexley Councillors
- Delivered 10 bespoke workshops for the month of Safeguarding Adult (November 2022)
- Hosted a Joint Myth-busting Event on Local Authority duties under the Housing Act



Bexley SAB Learning & Events feedback:

100% found the Learning Event useful?

● Yes
● No



'Thank you for all the efforts you have put into this. It was a great opportunity to recognise the excellent safeguarding support our front line staff / teams and providers provide to ensure our vulnerable adults are safeguarded.'

"All training events have been valuable learning and supported me within my role to promote best practice encouraged others to attend and shared my learning with providers/colleagues"

"These are very useful learning events. The knowledge and expertise of the trainer helped me as a provider to be proactive and also how to overcome barriers and challenges to support everyone."

"The tutor was very engaging and shared numerous work examples, the attendees were invited to share information and thoughts."

"I'm pretty new with Bexley but so far I found Bexley SAB Learning & Development Events useful and teams are supportive"

'I just wanted to put on record the superb job around the Safeguarding award ceremony yesterday and the National Safeguarding award ceremony devised and delivered by you. Recognising excellent Safeguarding practice across all agencies is so important and this was reflected in the diversity of the awards given out. It was also great to meet some of the Bexley recipients yesterday and hear their stories and pleasure at receiving their awards. Collaborative practice is key for successful Safeguarding practice and yesterday demonstrated that in Bexley collaboration and a shared vision is enhanced when we celebrate success together. Well done and Thank you.'

13/15 have embedded the learning in their organisation/team or service area

● Yes
● No

13
2



Regional & National Influence

Anita Eader, BSAB Practice Review & Learning Manager and Alexandra Gregory, Partnership Officer are leading members of the SEL Business Network, London Business Managers Network and National SAB Business Network.

Anita Chairs the National Suicide & Prevention Group, has developed and led on the National SAB Managers Award Campaign (3rd year), and has presented on numerous occasions to the National group on the innovative work happening in Bexley, including providing training and learning events for other SABs nationwide.

Anita also works with other SAB Managers to develop innovative ways for SAR learning, practice improvements and any other salient pieces of work required which has 'national' impact.

Alexandra, BSAB Partnership Officer, represents Bexley at various London-wide groups, ensuring we learn from others best practice and sharing Bexley's work for continuity and growth.

Alexandra specifically attends all Bexley forums and groups that may have a direct link back to the BSAB work and ensures to engage with the wider-partnership for information sharing.

Andy Rabey, BSAB Independent Chair, leads Bexley's influence by being a key member of the National Chairs Network, London Chairs Network, SE England Chairs Network, so that Bexley SAB stays abreast on key matters arising regionally and nationally, providing direction and insight for us here in Bexley.

The next few pages will show examples of Bexley's positive influence both in Bexley and further afield.

National SAB Managers Network Awards

As mentioned, Anita Eader, Bexley SAB Practice Review & Learning Manager developed this award scheme in 2020-21. Year on year there has been more national submissions, more recognition and greater acknowledgement of the scheme. This is a great way to showcase not only what is happening in Bexley but nationally for all those agencies that work to safeguarding adults.

In 2022, Anita continued lead on the National SAB Managers Award - 'We See You - We Hear You' campaign. This event starts each 1st April - 15th October annually and is presented Nationally in November during National Safeguarding Adults Week. The judge panel is made up of SAB Managers and Independent Chairs for scrutiny.



We are really pleased that this campaign has continued to bring together over 70 SABs Nationally to share with their local partners to nominate individuals and teams across 8 different categories looking at the following key areas: -

Award Categories - You can see below that Bexley had several nominations and 2 winners in 2021-22: -

1. Empowerment Champion - 9 Bexley Nominations and 1 Bexley Winner of this category (see page 45 for nomination)
2. Prevention Champion - 6 Bexley Nominations
3. Partnership Champion - 3 Bexley Nominations
4. Lifetime Champion - No Bexley Nominations
5. Innovation Champion - 3 Bexley Nominations
6. Proportionality Champion - 1 Bexley Nomination and 1 Bexley Winner of this category (see page 46 for nomination)
7. Accountability Champion - 1 Bexley Nomination
8. Protection Champion - 4 Bexley Nominations

[For more information regarding the awards, please visit our website at www.safeguardingadultsinbexley.com](http://www.safeguardingadultsinbexley.com) To nominate for 2023 Awards please see Bexley SAB website link here

The Empowerment Champion winner - PC

Chesca Rogers



PC Chesca Rogers is the SE-BCU Domestic Violence Disclosure Scheme (DVDS aka Clare's Law) SPOC, processing both Right to Ask and Right to Know disclosures to victims of domestic abuse. Over the last year alone, PC Rogers completed an astounding 265 Right to Know disclosures, the highest in the MPS (by 83, more than some BCUs did the whole year). The fact she singlehandedly outperformed some BCUs who have entire teams dedicated to the DVDS process illustrates the passion and drive that PC Rogers holds for empowering victims, mainly women, to make the decisions they need around protecting themselves from future violence.

For some months during lockdown, PC Rogers completed 20% of the total MPS DVDS disclosures, undeterred by the increasing challenge of engaging with victims face to face. Recognising these barriers, that lockdown could further isolate and endanger victims of domestic abuse, and prevent them from accessing the knowledge they need via Clare's Law, PC Rogers devised a solution of completing disclosures via WhatsApp video calls. She articulated her proposed process and it was then ratified by the Home Office and DA charities as a lifesaving innovation. Not only was it rolled out across the MPS, but the National Police Chiefs Council disseminated the idea as best practice nationally, with other forces adopting the process. Not only does PC Rogers commit to safeguarding a huge quantity of victims, but the quality of her work is outstanding; victims regularly write in with positive, glowing reports on the work completed by PC Rogers, and the difference it has made to their lives:

"I am getting in touch because I recently made a Claire's Law application that was processed by Francesca Rogers. Not only was Francesca professional and efficient she demonstrated a level of interpersonal communication that made a huge difference to me. Making the application was a bit daunting and I had anticipated that it would be a case of having my ID checked and then being given a simple report of any record. It was very reassuring to find out that there was more to it than that and the assessment carried out by Francesca was just as useful to me as was the final report about the person I was applying about. It was very significant as well that Francesca approached the whole thing with sensitivity and empathy. Interestingly although the person I was enquiring about did not have anything to be reported, my conversation around my application with Francesca highlighted some important red flags for me and so I wanted you to know the important work that is being done here. It's not only around the application itself but some of the associated work which is making a real difference so thank you"

I am honoured to work alongside an officer such as PC Rogers, whose dedication and drive not only shines through in all that she does, but is highly infectious in stirring up commitment to tackling domestic abuse. If asked to find one person whose efforts have had the greatest impact empowering the community they serve, I would look no further than PC Rogers; the figures and the feedback speak for themselves. In the last year, PC Rogers has directly empowered 429 victims of domestic abuse, and touched the lives of countless others with her national policy change and educational inputs. I respectfully and proudly submit PC Rogers for this award as recognition for her unwavering commitment to empowering women to safeguard themselves against DA.

The Proportionality Champion winner - Natasha Jones

NJ has recently set a great example of how she can balance.....

Her client MC suffers from dementia so will not complain of any discomfort or pain she may be feeling. NJ sometimes has a difficult time keeping on top of her personal care due to MC condition as she is not always cooperative. MC has had a large cyst on her back for a number of years but doesn't usually cause any problems. Recently NJ noticed the cyst was very red and possibly infected. NJ spoke to MC's husband who is aware of the condition and shared her concerns with him.

Unfortunately, MC's husband didn't acknowledge the potential risk of leaving it untreated and didn't seem overly concerned to begin with. NJ had to communicate with MC and her husband on a few different occasions until he sought medical attention.

Over the past week MC has had numerous appointments at the doctors and is now on the mend and receiving ongoing treatment. MC's husband has stated how grateful he has been for NJ's input and guidance.



Regional & National Influence – Learning Events

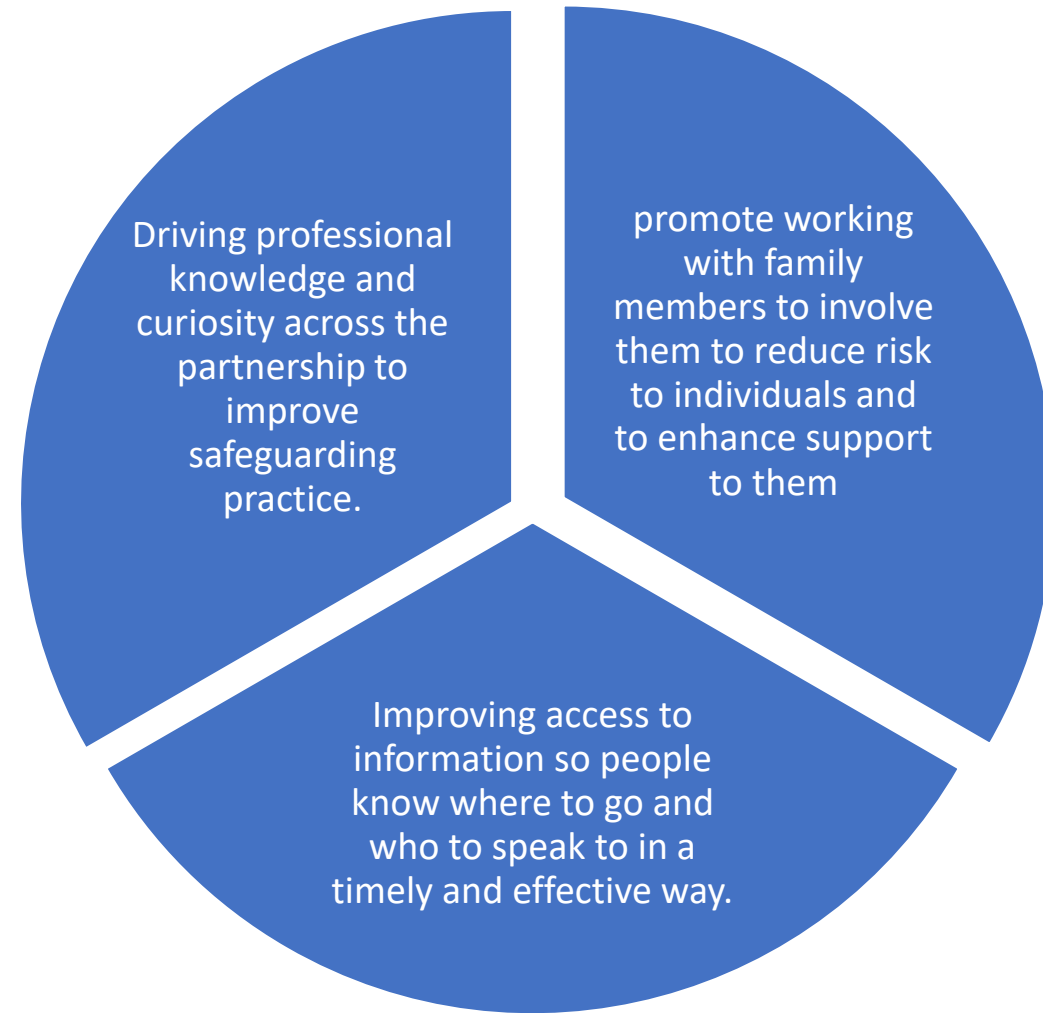
Below is the list of where both Anita Eader, Practice Review & Learning Manager and Alexandra Gregory, Partnership Officer were invited to deliver learning events outside Bexley this last year:

- SW England DWP Regional Managers Training on Professional Curiosity
- Lead as part of the National Safeguarding Adult Audit Tool standards
- Yorkshire SAB training on Professional Curiosity
- Social Care Institute of Excellence (SCIE) briefing on Bexley's new SAR Protocol
- Bristol University presentation on Bexley new SAR Protocol
- National SAB Managers Network briefing on Bexley's new SAR Protocol
- National Lived-Experience Session on Predatory Marriage
- National briefing on Bexley SAB Quality Checkers
 - Separate briefing with Southwark Adult Social Care
 - Initiated Joint SAR approach with -
 - Merton SAB
 - Kent SAB
- Led with other National SAB Managers on consultations around Rapid Reviews
- Induction for newly appointed SAB Managers across the following SABs-
 - Isle of Wight
 - Yorkshire
 - West Sussex
 - Hampshire



Our Strategic Priorities / Successes

This next section provides
evidence against the 2020-2023
Strategic Priorities



Updates from our statutory partners:

1

Driving professional knowledge and curiosity across the partnership to improve safeguarding practice.

The ICB have commissioned Solace to provide 4 webinar workshops to primary care for carer stress and domestic abuse. These sessions were attended by GPs and other primary care staff.

We have delivered training to GP services for Routine Enquiry into domestic abuse.

We have provided Routine Enquiry training into domestic abuse to the members of the Domestic Abuse Health Sub-group.

Named GP for safeguarding adults holds 2 monthly meetings with GP safeguarding leads and have invited multi-agency colleagues to present on the following:

1. BVSC
2. Best interests assessment, LPS
3. Community MARAC
4. Channel/Prevent
5. MARAC and DA
6. MASH/CSC
7. Child death review panel
8. Children looked after and care leavers
9. Fictitious and induced illness
10. Bexley Gangs
11. Adult safeguarding, adult social care and the Care Act



South East London

Additionally these meetings are an opportunity for informal discussion of cases, issues arising around communication between agencies, peer support and an important method of disseminating learning from SARs and DHRs.

- a. We held an online training session for primary care – over 150 staff attended where we have delivered training derived from DHRs, SARs and Children reviews – this was delivered by using a Think Family approach
- b. We continue to hold quarterly meetings for health provider services to share best practice and to disseminate learning from all reviews held within Bexley. The Forums are:
 - i. Bexley Borough Health Safeguarding Forum
 - ii. Domestic Abuse health Sub-Group
 - iii. Bexley Borough LeDeR Steering Group
- c. The adult safeguarding lead holds 2 weekly complex case discussions with the staff from the SEL ICB (Bexley) Continuing Health Care team.



HM Prison &
Probation Service



As a delivery unit (Greenwich and Bexley Combined) 87% of staff have up to date safeguarding adults training with the remainder due to refresh or new staff due to complete. As a Delivery unit we have a professional curiosity staff forum for case discussion. External partner training is regularly advertised and promoted.

The BCU have worked with Local Authority Partners through the tri-borough structure to deliver training to identify vulnerable individuals. 38 officers were trained via LA workshops with instructions to disseminate learning within their teams SE MASH now attend Marlowe House to give input to all new officers in completing referrals, the improvements in these areas have been identified in a number of internal and external audits.

The Child Exploitation team have received specialist training from Operation Orochi re the exploitation of vulnerable adults and children through county lines, this training is being shared with partners and Missing Person Units to improve service provision in this area.

Public Health - All staff within the service complete and are up to date their mandatory Safeguarding training in line with LA requirements. They are offered opportunity to complete additional training as necessary and some staff have recently undertaken Domestic Abuse training. The commissioned services for 0-19yrs services and drug and alcohol services have a domestic abuse champion and attend relevant training.

LECB promote all BSAB and Shield knowledge and training to all staff. We link with partners to support deliver of training at CPD sessions, this year we have provided hate crime and Sexual awareness & Domestic Abuse training to 116 staff. All staff have been directed to the new Home Office training for Prevent at the recent CPD session, to continue our ongoing awareness.

2 staff have renewed DSL training and and a further 3 staff have been trained to support the team.

A member of staff has been trained as a Senior Mental Health Lead and links with partners to support our 17 Mental Health First Aiders. We have given welfare support to 30 learners and counselling to 14.

We have had 43 safeguarding concerns, of which 18 learners have an EHCP, ranging from mental health, self-harm and abuse. We have supported learners with housing and work with various local and wider authorities to resolve.

“General training data:

SGA Training for Bexley within Oxleas:



SGA Level 1 - 88 (563 Trust wide)

SGA Level 2 - 183 (776 Trust wide)

SGA Level 3 - 204 (933 Trust wide)

The SGA Level 3 training also raises awareness of domestic abuse and how to safeguard adults who are experiencing this. Our SGA Lead has been liaising with the Quality Lead for Bexley based in MH services. We are jointly promoting MDT MH staff attending BSAB training, EO and SAM training and renewing the focus on our MH SGA process. There is an ongoing liaison between Oxleas MH and Bexley QA lead and SGA lead to address SG work and data issues. We are expecting news on an Oxleas situated LXP for DA shortly.”



Bexley Children's Services - we have an active practice development plan, service plans and continual practice improvement plan which is reviewed every quarter. Monthly performance meetings ensure a focus on areas for development and where we achieve good outcomes. Practice weeks focusing on particular learning from reviews and audits are at least twice yearly and thematic conferences three to four times per year.

Close links with SHIELD partnership to ensure multi-agency auditing, joint learning events and planning around priorities which are monitored via partnership board and panels.

Professional Standards and Quality Assurance team recently spent a week in each children’s social care team and delivered tailored training sessions; this included case discussions, encouraging a reflective space to be professionally curious and consider social graces/bias etc. Audit forms and grading are based on specific judgement around professional curiosity and a 7 minute briefing on exercising professional curiosity also supports embedding the learning. Each quarter there is analysis of how effectively we are strengthening practice and where we continue to need to focus. All training and QA processes include reference to evidence of professional curiosity and gradings take into account how knowledge is applied within assessments, analysis of audits. Professional Standards attend a significant amount of panels including SAR’S, Learning from Practice panel, multi-agency learning forum and partnership board and executive meetings to ensure representation alongside partner agencies. Professional standards link in with the children safeguarding partnership for events, training and multi-agency audits to ensure there is partnership working and understanding of respective roles and responsibilities.

Practice forum provides space for all heads of service and for partner agencies to discuss recurring themes and or worries in relation to practice and to celebrate good practice so we can learn from this. We have trained up staff within childrens services and including health professionals to be able to facilitate learning events and reviews to ensure learning is embedded from case reviews, rapid reviews and Local Safeguarding practice reviews.

Dartford & Gravesham NHS Trust (DGT) provide various platforms of learning in order promote safeguarding knowledge and professional curiosity to its staff.

All staff complete safeguarding training for both adults and children to the level required for the patient facing role.

The Trust also delivers 'Think Family' training which include Virtual Reality headsets which takes those using the headsets into the world of a small child in a neglected environment where there is evidence that mum misuses drugs and alcohol and evidence of domestic abuse. This allows staff a richer experience and understanding of safeguarding concerns and how they may affect the whole family and the impact that the environment and behaviours may have on the family. This has increased staff's awareness on becoming professionally curious so as to think beyond the person they have with them.

Following the Think Family Training staff have been better able to demonstrate how the training relates to their practice and how to make links with concerns raised for one family member and how this may affect the rest of the family. Information gathering at triage in the Emergency Department Referral content has improved and concerns raised regarding other family members has also improved.

Example- a safeguarding concerns raised by the emergency department has not only included the presenting patient but other close members of the family- child and adult with a learning disability. Staff feel more confident in making referrals where they have concerns with the presenting patients.

The Trust supports student nurses in their final year as part of their management placement as well as final year, hundred-day placement, Social Work Students. This enables the students to have a better understanding of safeguarding and everyone's responsibilities.

The safeguarding team also hold a monthly safeguarding Hub, this allows staff to expand their knowledge and skill in the safeguarding agenda. Updates in practice and learning from reviews are shared so that the information can be disseminated and put into practice.

The trust has also supported staff accessing the 'Dementia bus' and Autism bus' to enhance their learning and supporting people who have a neurodiversity.

2

Promote working with family members to involve them to reduce risk to individuals and to enhance support to them

Updates from our statutory partners:



HM Prison &
Probation Service

Within the appropriate permissions and within the appropriate legal framework we work with families of the people on Probation to manage risk



South East London

The SEL ICB (bexley) safeguarding team do not work directly with service users, however we have:

- a. Used each training opportunity listed above to promote the Think Family approach
- b. Included a statement in all new procurement requests to ensure the service commissioned are able to demonstrate a Think Family approach.



METROPOLITAN
POLICE

The training mentioned above includes looking to ensure families have better access to services through improved referrals and amplifying individual's voices. A trial showed repeat vulnerable Mispers reduced from 84 missing 212 times in launch month to 54 135 times in month 6. Ensuring improved access to partner services to reduce risk to vulnerable people is a core part of our strategy.



LONDON BOROUGH OF
BEXLEY

Trusted by Bexley residents

Bexley Public Health - The stop smoking service regularly works with service users to improve the service for the future including post service evaluation forms.

We continue to be part of the South East London Suicide Bereavement Service which is commissioned on a sub-regional footprint. The service is providing support for those affected by suicide including individuals, families and wider networks. To date 43 individuals in Bexley have been supported.



LECB works with Shared Lives, Positive Journeys, Adult Social care to help develop our knowledge so we can improve the outcomes of these learners using these services.

Through our counselling service with our young adults we work with family units, where possible to improve engagement.



We have requested an additional LXP update and may be able to report further on this in future. For this submission, please see remark above with regard to LXP-Oxleas are interviewing for this post today in my understanding.”



Bexley Children's Service - Social care work closely with Bexley FLARE, our Parent Champion Network. This is made up of a group of parents and members of the community who started to come together in 2020. The group exists to provide training, peer support and mentoring opportunities and signposting to parents in the borough. FLARE welcomes new parents and parents/carers who have children up to the age of 24. Funded by MOPAC there is a specific focus on education and support for families experiencing difficulties with challenging behaviour and who are caring for children at risk of exploitation and youth violence.

We also seek feedback from families when completing audits and ensure we learn from lived experience and those accessing services.

Our care leavers/young adults and children in our care are involved with Bexley social care via Positive Journeys. PJ meet twice a week with the young people who choose to be involved in shaping Bexley social care; their views are sought and this is embedded in all we do. Recently the young adults chose the name for the child in care council.

Through our signs of safety lead and team, we ensure that family network meetings and the inclusion of families in safety planning and key decision making meetings remains a key constant focus and we aim to ensure all practitioners complete a minimum two day training course which helps embed the ethos of collaborative working and which holds at the centre safety for children and family wellbeing.

Professional standards are also reviewing some of the current processes such as child protection conferences to see how we can ensure families are supported and helped to co chair and develop safety plans.

Dartford & Gravesham NHS Trust work with patients and their families both inpatients and outpatients. The trust promotes the use of the Hospital Passport, for people with a learning disability and or autism, this is being developed further so that it is suitable for all patients with vulnerabilities. It also supports the use of 'This is Me' document for people who have dementia.

The trust holds a regular patients experience committee whereby patients can attend and share their experiences both positive and negative.

The trust also encourages patients to 'tell their story' and shared learning has been uploaded to the trust learning platform in order to enhance staff's knowledge of what it means to be in hospital when you have autism and adjustments that can be made to enhance a hospital visit/ inpatient stay.

The trust uses patient feedback 'you said we did' to support positive change in the hospital environment.

The trust employs a number of specialist nurses who are able to work with patients and their families within the hospital. These include the Learning Disability Liaison Nurse, Dementia Specialist Nurse, Mental Health Lead Nurse and a Transition nurse supporting adolescence into adult services, this offers patients an individual approach to their care and treatment.

The Mental Health Lead Nurse is able to offer individual support to patients whilst they are an inpatient by means of the Enhanced Care Team. This is a small team of specialist health care assistants that will support patients whilst they are a patient on the ward which includes ward based activities.

Updates from our statutory partners:

3

Improving access to information so people know where to go and who to speak to in a timely and effective way.



HM Prison &
Probation Service

Within the appropriate permissions and within the appropriate legal framework we work with families of the people on Probation to manage risk

The SEL ICB (Bexley) safeguarding team have:

- a. We have shared all relevant Domestic Abuse posters to all our GP surgeries in Bexley
- b. We have linked with Oxleas Community Learning Disability Team to deliver reasonable adjustment training at our training sessions with GPs
- c. We have disseminated relevant information and pathways to all health providers attending the Domestic Abuse health Sub-Group, Bexley Borough Health Safeguarding Forum and the Bexley LeDeR steering group.



South East London



**METROPOLITAN
POLICE**

We have worked to improve the quality of information submitted to MASH desks as mentioned above, improving the quality of information supplied to partners.
The organisation has stream lined internet sites to make accessing information more user friendly and readily accessible.

The organisation has increased the capacity for online and telephone reporting to increase and improve access to services

Bexley Public Health - Service users in need of additional safeguarding are referred appropriately. One safeguarding referral was made in the last 12 months.

Details of the South East London Suicide Bereavement Service are shared with those affected by suicide as identified via the Thrive London Suicide Real Time Surveillance System. Police and other statutory agencies also share this information. Frontline staff in adult social care and children's social care have also received information to assist with referrals.

We continue to provide Suicide Prevention Training in partnership with Mind in Bexley. Training is offered to those staff and local partners working on the frontline. Two separate training sessions are provided, one specifically for those working with adults and one for those working with children and families. To date we have trained 147 people.

LECB have improved how we share information to staff, using SharePoint, email, training, new staff photos with contact numbers on posters and newsletters to support our learners so that they are supported in a timely way

"Domestic Abuse Lead feedback: Domestic Abuse is a key focus for Oxleas with a lead post embedded within the safeguarding team to steer the DA agenda in partnership with service providers and service users. Key to this DA strategy is DA awareness.:

The intranet pages have been developed to ensure DA resources are easily accessible with embedded links to Bexley Solace women's aid and the LA pages for further local resources including MARAC referral forms. Teams also have a DA pathway on office walls which includes details of Solace womens aid. These pathways are emphasised within outreach training to teams.

Teams are also provided with posters for service users to be aware of Bexley services, including the one stop shop. In addition an Oxleas "easy read" DA poster (developed by our easy read service user panel) includes the details for Bexley services.

We are currently working with our partners to develop DA resources for Oxleas visual display boards for improved awareness of DA for our service users.

Staff are trained to ask about DA routinely and how to respond to disclosures which will support service users be aware of where to get help as required. The newly developed Bexley MH hub, which includes Bexley MIND are involved in a quality assurance project to support routine DA enquiry being embedded within practice. This includes consideration of intersectionality.

The aim will be for all Oxleas staff to know how to respond to DA throughout all of our services, thus improving access and improved outcomes. "



Bexley Children's Services - within Bexley children's social care, we share clear comms about the Professional Standards & Quality Assurance Team who offer support in regard to resources, training offer etc on a weekly basis via a 'resource round up'. TV screens around the children's social care floor are turned on daily and updated weekly with relevant information and comms.

Regarding PWLE, our website is clear about who to contact if needed; social workers are contactable via 8x8 landline and mobile phones.

SHIELD partnership also have website with information. Market places, community events and briefings are held to ensure new information is shared.

Wards and departments display information on who to talk to if there are concerns and how to raise a concern.

The trust's website has a link on 'how to get in touch' with wards and patient advice and liaison. The public website also offers accessibility tools via Reachdeck, pictorial dictionary, visual support and spoken information programme that supports access to the trust website.

The communication team share information on the trusts social media platform (twitter, Facebook, YouTube and LinkedIn) Patients and visitors have their own page with practical information about the trust and who is available to give further advice and support.

Patients and families are encouraged to completed patient feedback (Friends & Family test)

Staff are made aware via training and during trust induction how to raise concerns. There are trust policies such as the safeguarding adults and safeguarding children's policy as well as the whistleblowing policy which supports staff with concerns they may have.

During the 'Family Focussed' training staff are reminded how to access all the safeguarding information via the safeguarding page on the intranet.



The following are examples of how LBB adult social care have met the strategic priorities:

Case example 1:

LM is 30-year-old women who had mild learning disabilities, she lived in a 1-bedroom flat with her boyfriend TO who was 15 years her senior. Within their relationship there was domestic abuse and coercive control, TO had got LM addicted to heroin and he would inject her as she was not able to do this, the property was in unkempt conditions, cat defecating, bed bugs and local drug users would use her flat as a drug den. There are concerns that LM is being exploited for drug trafficking. LM was also self-neglecting. LM also suffered with depression and was isolated from her family.

Several months was spent building a relationship with LM and TO, they did not attend many scheduled meetings and would make excuses because they could not attend. Multi-professional's meetings were held, and actions were considered and with the support of commissioning team, a suitable alternative accommodation was found for LM, LM was taken to the supported living accommodation and had a look and then considered what she wanted to do.

The professionals at the meeting were able to support and use their powers to act as a collective. If LM refused to go to supported living, then there were other pieces of legislation that could be used to support LM. These meetings were weekly and very productive.

Fortunately, LM had accepted the placement and has reduced contact with TO and had withdrawn from heroin and looking well and healthy, she was supported to understand her choices around relationships and drugs.





Case example 2:

JR is an 80-year-old lady who lives alone in her owner-occupied property. JR had been self-neglecting as well as hoarding for many years and despite multiple attempts at trying to engage her to assist with repairing and maintaining the property, she declined. She was always very suspicious and anti-establishment.

JR life was characterised by trauma caused by death of her finances, serious sexual assault, job loss and years of domestic abuse.

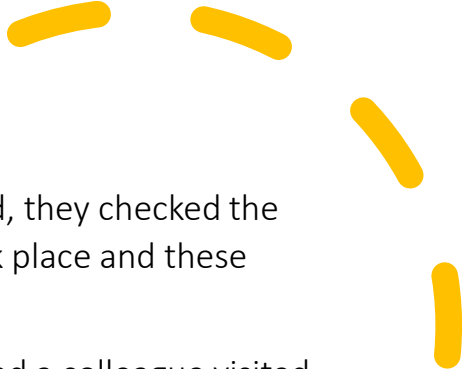
JR neighbours had reported to Bexley Council their concerns about how she was living, and environmental health had completed work on her property which only reinforced the trauma she felt.

JR was living in a house where there were no essential services – no gas, electric, water, no running toilet. As well as all sorts of vermin and wildlife. She had no working toilet and was using buckets. The house was very unkempt and neglected and the conservatory roof had collapse which meant the house was open to the elements.

The social worker had been visiting JR for months to try and build a rapport and gain trust. JR came to the local café for breakfast and conversations took place with JT with no mention of the property unless JR wanted to discuss this.

JR's behaviour at the time was confrontational, aggressive, and accusatory.

During this time, a multi-agency – professionals meeting, and discussions were held with the most appropriate course of actions taken.



On one visit JR was not answering the door, it was particularly cold and dark. The Police were alerted. Once the police arrived, they checked the property for JR and she was not home, however, due to the state of the home an emergency multi-professional meeting took place and these details were shared, and all agreed that urgent actions that same day, with the police contacted.

It was very cold at that time and temperatures were due to drop below -5 so urgent action was needed. The social worker and a colleague visited and persuaded JR to go for a coffee. JR and the social worker were talking quite at length and the social worker had shared her concerns about the wintry weather and the risks. In the meantime, colleagues in commissioning were urgently searching for a suitable placement. Respite in a care home was considered but due to JR strong views about this it was agreed that supported living placement would be more suitable – this was unconventional but the most appropriate care provision.

The social worker had said to JR that she has gone through too much and was too old to be living in such wintry conditions and that a room was available in a 3-bedroom house for the weekend. JR had agreed and asked if she could have a shower and hair wash.

JR was assessed for supported living accommodation where she has been ever since. JR had a bath, hair wash and a hot cooked meal which she prepared. JR also advised that as she was in a warm environment her arthritis was not causing her any pain. It took months to get JR in a suitable accommodation with the support of multi-professionals to bring it to a satisfied outcome for everyone including JR.

Success Measure Priority 1: learning with adults, carers and families

- Engage and involve adults, carers and families in BSAB activity – i.e. Engagement and SAR Subgroup.
- Encourage individuals to feedback to the BSAB on what has made Safeguarding Personal to them.
- Working closely and attending the Multi-Agency Learning Forum (MALF).
- Linking with SHIELD and CSPB through joint conferences and events when shared learning can be identified – i.e. Modern Slavery, Domestic Abuse

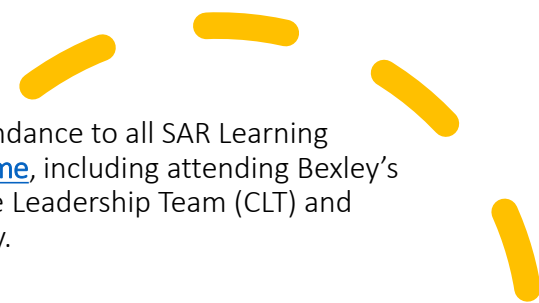
And we: -

- Actively invited by letter, phone or email, families and carers to engage in BSAB activity. For example, we've worked with individuals and their families involved in reviews and invited family or individuals involved to contribute towards the learning. We had to do majority of these via Microsoft Teams. This type of remote meeting can offer those not living local to Bexley to still engage in the review process and share their opinions and views for the SAR; however, we recognise that this is not an ideal way to meet with family, carers and individuals affected by a safeguarding death or incident.
- Hosted a 'Lived-Experience' Session online to talk about Predatory Marriage.
- Continued to use our Social Media platforms on Facebook and Twitter where we will be sharing safeguarding awareness campaigns and invites where appropriate:-
 - <https://www.facebook.com/bsab.bexley>
 - https://twitter.com/Bexley_SAB
- Continued to Co-Chair the Multi-Agency Learning Forum (MALF), which offers joint learning across the 3 Bexley Boards (Community Safety Partnership, S.H.I.E.L.D. and BSAB) where we've identified cross-learning opportunities. The MALF is to ensure we share information to a much broader professional network. Since 2020, we've worked closely, lessening duplication, sharing more widely the learning found earlier on and offering learning sessions on: Professional Curiosity, IMR Best Practice/Expectations and Setting the Scene as to what the statutory reviews are for partners. We continued to seek assurances against our Joint Think Family Protocol for Bexley. [Please see the Joint Think Family Protocol here](#)

Success Measure Priority 2: Learning with professionals

- 
- Ensuring that all relevant professionals are able to contribute towards work of the Board.
 - Ensuring that frontline practitioners have access to Board events.
 - Invite and encourage professionals to attend, share and embed learning from BSAB Learning Events.
 - Identify Safeguarding Champions across the partnership.

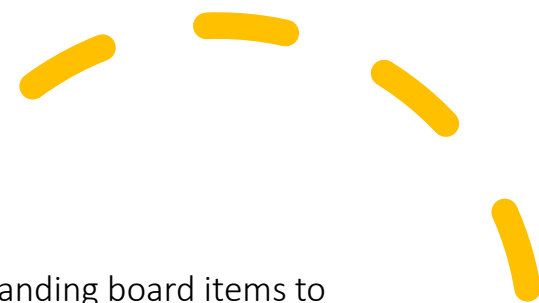
And we:-

- 
- Continue to actively invite and encourage professional attendance to all SAR Learning Events as outlined in our [Learning & Development Programme](#), including attending Bexley's Adult Social Care Director Leadership Team (DLT), Corporate Leadership Team (CLT) and sharing at various Team Meetings across the Local Authority.
 - Started attending Safeguarding Practice Forums to share learning and best practice.
 - Continue to signpost professionals when matters arise or escalate to us, for example, The Coroner's Office had a long waiting list due to the pandemic, and we facilitated an update on Cause of Deaths and other salient links within the partnership.
 - Updated and tightened up the Modern Slavery Pathway for Bexley and partners working with our MS Leads within the Local Authority.
 - Regularly email and post online key events and offered spaces to learning for professional development.
 - Signed a joint agreement (along SHIELD and CSPB) with Continuing Professional Development (CPD) to give partners professional credit.
 - Created 7-minute briefings on SARs and other key themes, which can be [found here](#)
 - Continue to encourage key professionals to contribute towards the work of the board through consultation and feedback.

Success Measure Priority 3: A good quality and healthy system

- 
- Joint audits across the partnership every quarter 1 case from Adult Social Care, NHS, Police and Domestic Abuse
 - Annual agency/organisational audits and Challenge Events
 - Quarterly review the BSAB Risk Register - i.e. Learning from SARs
 - Ensure quarterly performance data submitted is scrutinized and challenged.

And we:-

- 
- Continue to keep BSAB Risk Register topics as standing board items to seek action updates at all full board meetings (for more information on our risk register, email bsab@bexley.gov.uk).
 - Reviewed the outcomes from the Domestic Abuse Services joint audit with Children's Services in 2020-21 to gain assurances and keep accountability across the partnership.
 - Reviewed the outcomes from Adult Safeguarding Audits in Adult Social Care with standing items at the Full Board meetings for assurances.
 - Worked with Local Authority to prepare for Care Quality Commission changes to Adult Social Care inspections starting in 2023.
 - Held a Myth-busting Event with Local Authority Housing Services to share what duties and responsibilities the LA have with Housing and the links to safeguarding adults.

Bexley SAB Quality Checkers 1-Year on:



This year we've continued our Quality Checkers partnership work.

These amazing Quality Checkers have assisted us as a Bexley SAB to gather information from service users regarding their 'lived experience' feedback.

The Quality Checkers is overseen by BSAB with key partners across our learning disability partnership. We established a working group to design a way for adults with learning disabilities to be recruited, trained and complete visits to speak with other service users with learning disabilities within our commissioned services in Bexley. We've asked Ambient and Mencap to assist us with the employment of Quality Checkers for the day-to-day running of the project.

They've successfully recruited 6+ Quality Checkers and they've completed over 20 assessments since January 2022. We look forward to carrying this project forward with the inclusion of Shared Lives and Individual Service Fund (ISF) service users from 1st April 2023.

For more information, please see our website page [here](#).

Quality Checkers Report - 8th November 2022

What did we find? What's going well? These are some of the things people said about the support they receive:

Staff who give us **'privacy'** is important to us. For example: **'Knock on the doors'** before entering and making sure we have **'frosted glass'** windows.

Cleanliness is important to us. For example, most providers have clean toilets, kitchens, and rooms. **'There's no bad smells.'**

Keyworkers who listen is important to us. For example, most providers have keyworkers who help us and have meetings with us **'to keep us safe.'**

Choices are important to us. For example, having choices about foods, activities and **'who lives with us.'** And **'timetables can change if we are unhappy.'**

Activities at home and going on outings is important to us. For example, daily outings to **'shopping centres, supermarkets and cinema.'**

'Freedom' is important to us. For example, freedom to move about the home and have access to the house makes people happy.

Staff who help us stay healthy is important to us. For example, **'helping us to attend hospital appointments.'**

Staff who help us in the community is important to us. For example, **'making sure we can still go to the shops when the public don't want us to.'**



Quality Checkers Report Continued: *what needs improvement ?*

'Not enough staff' which then doesn't allow us to go out or have activities we would like or give us choice.

'Not enough activities' activities outside the home are the same over and over again.

'Recruitment' not enough staff to work with us.

One person said, they were, ***'depressed and bored'*** and not sure what help there is.

One person suggested making ***'free days for those people who don't have money.'*** Staff don't ask us about our ***'future.'***

Having contact with our ***'family and friends'*** and helping us to see them more often.

One person said, ***'can't go to the bank or shopping because not enough staff.'***

Not having access to the whole house, including the kitchen. For example, ***'locks on the kitchen.'***

Not involved in the activities in the home. For example, ***'staff do all the cooking and baking.'***

'The buildings are old, decorations not good and carpets dirty (stained)' – cleanliness is important to us.

For example, ***'clinical bin by front door, no lid and it smells.'***

'Not having a keyworker because there are not enough staff.' And in one home 1-1 not getting support because ***'no staff.'***



Quality Checker Actions for Bexley SAB:

What will be done make the service better? We asked providers to fill out an action plan to tell us what they will do based on our feedback.



The Bexley ASC, Quality Assurance Team will help us make sure the actions are completed and updated. Some providers have not wanted to hear from us, and this has been difficult.



We are letting you know as Quality Checkers for the Bexley Safeguarding Adults Board what we found. We would like to know what you think to help us make the services better in Bexley.

LeDeR – Learning from lives and deaths of people with a learning disability and autistic people – Annual Report findings:

What we learned this year:



We found that some people had gone back to the Accident and Emergency department (A&E) several times.



We found that some Mental Capacity Assessments were not done. These are tests to check if someone can understand and make their own decisions about their healthcare.



We found that some people missed appointments that might have stopped them from having to go to hospital.



We found that some people had to stay in hospital longer than they needed to.

What went well this year in Bexley:



- There were good links with GPs so that yearly health checks for people with learning disabilities were completed on time.



- Information about patients and their care was written down clearly.



- Better plans were made for people's end-of-life care.

[For the full report click here: LeDeR - Annual reports](#)

Closing statement

In closing, I am satisfied with the contents of this report and pleased with the continued work of the Bexley SAB. This past year demonstrated pressures within the sector that were not bespoke to Bexley alone and despite these pressures, we've continued to engage with those we support across Bexley to gather their experiences to shape our work. For example, we've heard from our Quality Checkers on what adults with learning disabilities have to say about the services they are accessing; and we've fulfilled our statutory duties to review practice and share the learning through our vigorous review process.

We've continued to be in the National spotlight again this year, sharing our innovative new Safeguarding Adult Review Protocol. They've continued to share their work, experiences, learn from others to develop new initiatives both locally and nationally. BSAB has continued to lead on the National SAB Managers Awards campaign – celebrating two-Bexley winners on for this National Award.

I look forward to supporting the Bexley SAB over the next year and have signed off this report.

For more information about Bexley SAB, please visit our website www.safeguardingadultsinbexley.com or email us at bsab@bexley.gov.uk

Thank you.

Councillor Melvin Seymour, Cabinet Member for Adults' Services and Health





For more information about the Bexley
Safeguarding Adults Board please visit –
www.safeguardingadultsinbexley.com or
email us at bsab@bexley.gov.uk



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