



Bromley Safeguarding Adults Annual Report 2012/13



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Foreword by the Chair

Welcome to the fifth Bromley Adult Safeguarding Annual Report.

The last 12 months have been very significant for adult safeguarding; with two major reports highlighting that safeguarding adults at risk really must be “everybody’s business”.

In December 2012 ‘Transforming Care: A national response to Winterbourne View Hospital’ was published. The extent of the abuse of adults with learning disabilities at Winterbourne View, shown on the BBC’s Panorama programme, was shocking and disturbing. ‘Transforming Care’ is clear that fundamental change is now required, and further on in this Annual Report you will find a response from the Bromley Learning Disability Service, setting out Bromley’s vision for meeting the challenges presented by the events at Winterbourne View.

On Wednesday the 6th February 2013 the ‘Final Report of the Independent Inquiry into Care Provided by Mid Staffordshire NHS Foundation Trust’, otherwise known as the ‘Francis Report’, was published. This report highlighted the fact that all of us can be adults at risk at times in our life. When we are dependent on others for care and support we are often at our most vulnerable. What we hope for at such times, for ourselves, our friends and relatives, is dignity, compassion and effective care. Tragically, the experiences of many hundreds of patients fell far below even the most basic standards.

When things go wrong as badly as they did at both Winterbourne and Mid Staffordshire, we realise how easily this can happen. We need to be much more alert, but also much more proactive, to minimise the risk of such events happening again. In a civilised society it is a duty of us all to protect our most vulnerable members.

There is no doubt that these are challenging times. The need to ensure the quality of all services working with adults at risk across the borough has to be balanced against the very real funding issues affecting this, and every council.

As I step down from my role as the Chair of the Bromley Safeguarding Adults Board, I am confident that local adult safeguarding partners will continue to work together to prevent, identify and end the abuse of adults at risk. The last year has seen a great deal of positive progress in the work of the Safeguarding Adults Partnership Board. We have hosted a very successful Conference, continued to use effective multi agency working to ensure good outcomes for service users and developed a successful and popular training programme. I would like to take this opportunity to thank all of those who played a part in these endeavours.

Successful adult safeguarding sometimes involves asking questions, and setting challenges. In that spirit I would like our work over the next 12 months to focus on the views of adults at risk and carers, in order that we can use their experiences and resources to continue to improve our work. We need to know whether people who have used the adult safeguarding process in Bromley feel safer as a result, and if they feel empowered by the process?

To help us to ask the right questions, this year’s Annual Report uses a different format, which reflects the 4 main themes or ‘probes’ in the Association of Directors of Adult Social Services and Local Government Association Adult Safeguarding & Standards Framework:

- 1. Outcomes for and the experiences of people who use services**
- 2. Leadership, Strategy and Commissioning**
- 3. Service Delivery, Effective Practice and Performance and Resource Management**
- 4. Working Together.**

I believe that this will help to assure those that we work with that adult safeguarding in the borough is being measured against clear, open and common sense standards.

Adult safeguarding is about prevention and about responding when things go wrong, but I also know that the vast majority of people who support adults at risk in Bromley are decent and caring. There is a phrase from The Minister for Care's introduction to 'Transforming Care' states that that captures this.

'Stories of poor care are a betrayal of the thousands of care workers doing extraordinary things to support and improve people's lives'.

There are a great many individuals and organisations here in Bromley that do just such extraordinary things every day. This is why I have no doubt that, together, we can continue to make Bromley a safe place, where adults at risk are supported and empowered to end abuse.

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Introduction

This Annual report from the Bromley Safeguarding Adults Board (BSAB) reflects the partnership working that enables and empowers adults at risk to end abuse. The Bromley Adults Safeguarding Board firmly believes that adult safeguarding is everybody's business, and this year's report has a focus on multi agency working. We are therefore pleased to include contributions from some of the local authority's key partners including the Police, Bromley Clinical Commissioning Group, Oxleas NHS Foundation Trust, the London Fire Brigade, South London Healthcare and Bromley Healthcare. The whole community, the voluntary sector, care providers, bank staff, neighbours and active citizens all have a crucial role to play in recognising, reporting and responding to concerns about the abuse of adults at risk.

The Chair has noted that this has been a significant year in adult safeguarding. This has certainly been the case locally, where there has been a great deal of activity over the past year across the partnership. Further information about this can be seen under the 'Publicity & Promotion' and 'Working Together' sections of this report.

The past year also saw a significant increase in the number of adult safeguarding alerts. These concerns were raised from all areas of the community, and it has been heartening to see the care and concern that those who live and work in Bromley have for those who may be experiencing times of increased vulnerability.

1. Outcomes for and the experiences of people who use adult safeguarding services in Bromley

One of the principal aims of Bromley Council's 'Building a Better Bromley' Strategy is 'supporting independence'. This means that the Council, as lead agency for safeguarding adults at risk of abuse, will enable and encourage citizens to take more responsibility for their own lives, with the most vulnerable being provided with the help they need.

Adult safeguarding work here in Bromley aspires to this aim and has resulted in positive and very real changes for adults at risk and those who support and care for them.

Joint work between the Police, a care provider and the borough resulted in the successful prosecution of an abusive care worker. The worker received an 18 month sentence, having been found guilty on 6 counts under the Mental Capacity Act.

Adult safeguarding interventions in provider services have also helped to drive improvements in standards not only for individuals directly affected, but for all users of those services.

Mental Capacity Act - Deprivation of Liberty Safeguards (DOLS)

Bromley Safeguarding Adults Board oversees the implementation of multi-agency work to ensure that people who may lack mental capacity benefit from the safeguards provided by the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DOLS).

The Mental Capacity Act 2005 sets out a framework to enable professional care staff, health service staff and families to lawfully make decisions on behalf of vulnerable adults who are unable to do so. All such decisions have to be taken in the individual's best interests.

The Deprivation of Liberty Safeguards (DOLS) came into force during 2009 and provide for the lawful deprivation of liberty of those people who lack mental capacity. The safeguards cover situations when someone is unable to consent to the arrangements made for their care or treatment in either a hospital or a care homes, and he or she needs to be deprived of liberty in their own best interests, to protect them from harm. DOLS should be used when the care and treatment regime of an individual imposes such excessive restrictions on them, that they amount to a 'deprivation of liberty', in accordance with human rights legislation.

The process in Bromley for DOLS is well established, with an officer responsible for Mental Capacity Act implementation, who has been in post since 2008, providing continuity of service and a valuable point of contact as well as an important monitoring role. Hospitals and care homes are required to identify any potential deprivations of liberty and make an application for the deprivation to be authorised. Assessment for authorisation requires professional assessment and consultation with family and carers. DOLS applications that are deemed to meet the legal requirements are granted and then subject to periodic review in accordance with the legislation.

Data on DOLS is submitted to the Department of Health and the overall impact and effectiveness of DOLS is monitored and reported on by the Care Quality Commission.

Area	Total DOLS applications	DOLS applications granted	DOLS applications not granted	% DOLS applications granted
Bromley	7	6	1 withdrawn	100%

BSAB has maintained an overview of DOLS to ensure that the Council and BCCG continue to fulfil their legal duties.

The numbers of requests for DOLS assessments is slightly reduced this year, more so than in our neighbouring authorities. This might be related to managing authorities (care homes and hospitals) making greater attempts in care plans to avoid excessive restrictions on individuals. An above average percentage of cases referred which then receive authorisations may indicate that homes and hospitals are reaching a better understanding of situations in which a deprivation of liberty is happening and requiring approval.

Plans are in place to provide quarterly workshops, particularly for care home staff, though not exclusively for them, so that staff working with MCA/DOLS legislation can consider their work with clients, residents and patients. It is also the intention to provide more training for hospital staff where the legislation and procedures are taking longer to embed into daily care activities.

Training on the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards

The Board oversees a training strategy for health and social care staff, to ensure:

- all staff can demonstrate compliance with the principles of the Mental Capacity Act (MCA), when working with people who may lack capacity;
- staff who make decisions about long term care or serious health treatment understand their duties under the Act;

- staff in care homes and hospitals can recognise and report potential cases for a DOLS assessment;
- specified staff are able to assess for deprivations of liberty and make recommendations about granting DOLS applications;
- in 2011/12 a total of 113 people attended MCA training:
 - (i) Introduction to Mental Capacity Act - 62 staff
 - (ii) Mental Capacity Act and Decision-Making – 35 staff
 - (iii) Deprivation of Liberty Safeguards – 16 staff
- the officer for Mental Capacity Act implementation has also conducted 24 specific training events in 2011/12 across partner organisations including care homes, voluntary organisations, and professional teams in the community and hospitals. In 2012/13 these sessions have been extended to GP surgeries.

During 2012/13 Bromley's use of Independent Mental Capacity Advocates (IMCAs) has continued to increase. Bromley is now significantly out-performing neighbouring comparator boroughs in ensuring that adults who lack mental capacity to make decisions about their care and accommodation and who are "un-befriended" are referred for support by Independent Mental Capacity Advocates.

This positive development has largely been achieved by the additional training delivered by the commissioned provider to increase the understanding of professional staff in LBB Education Care and Health and Oxleas NHS Trust of the role of the IMCA in achieving positive outcomes for service users and patients. The outreach training will be extended to the Princess Royal University Hospital in 2013/14.

Publicity and Promotion

We rely on the community to help us to identify instances of abuse. A key part of this is ensuring that people have information to help them to recognise and report any concerns.

Over 2,000 copies of the easy read 'How to Stop Abuse' leaflet have been distributed throughout the borough and are available at all council offices, GP surgeries and through a large number of community groups.

The adult safeguarding section of the Bromley Council website continues to receive numerous views and is an easy way for those people who have access to the internet to get information.

The popular Bromley Annual Safeguarding Adults Conference was held on 09/10/2012, with 150 people attending. It was considered to have been a positive day by all who took part.

Representatives of the BSAB try to make sure that they are present at as many public events as possible, to help to promote the key messages for adult safeguarding. In 2012/13 this included the following activities:

- Information stand at the Penge Festival
- Information stand in The Glades for Dementia Day
- Joint Information stand with trading standards at PRUH for World Elder Abuse day
- Presentation and distribution of adult safeguarding leaflets and Little Book of Big Scams at Bromley Community Engagement Forum.
- Home Fire Safety Initiative Workshop and Presentation on Working with Hoarders for adult social care teams, District Nurses, Domiciliary care providers and supported living providers.

Bromley's adult safeguarding work has also featured in the local media in 2012/13.

“Carer who stole from vulnerable Orpington man sentenced” (News Shopper April 2013)

“Bromley Council advises how to protect elderly people from abuse” (New Shopper June 2012)

2. Leadership, Strategy and Commissioning

Key tasks from previous year

Last year's Annual Report (2011-12) set out 3 key tasks for 2012/13. These tasks reflect the importance of partnership working, workforce competence and continuous learning and improvement.

Significant progress has been achieved for each of these aims.

Oversight of the progress of the action plans regarding the recommendations of Serious Case Reviews commissioned 2011/12

The action plans are regularly reviewed and updated at BSAB meetings to ensure that all recommendations are properly responded to. During 2013 a series of 'Lessons Learned' events will take place across the borough to help embed the learning from Serious Case Reviews. Preventative work remains a key priority across the adult safeguarding partnership.

E-learning implementation across partners and review of future training requirements in the light of lessons learned

A programme of e-learning for adult safeguarding is now well established in the borough and can be easily accessed by partner agencies. This approach has proven to be an effective way of ensuring that as many people as possible can access awareness training to help them to recognise, respond to and refer concerns about adults at risk who may be experiencing abuse. Detailed information can be found in the 'BSAB Training Arrangements Section –see page 8.

Ensuring adult safeguarding is prioritised in new healthcare commissioning arrangements

Bromley Clinical Commissioning Group (BCCG) is an important adult safeguarding partner and is represented at both the full Bromley Safeguarding Adults Board and the BSAB Executive committee. Information sharing agreements are in place between the London Borough of Bromley and the BCCG and this helps to ensure that relevant intelligence about commissioned services is shared. The BCCG participates in multi-agency decision making in regard to the suspension or termination of commissioning in provider services. The BCCG is fully compliant with the framework set out in "Safeguarding Vulnerable People in the Reformed NHS Accountability and Assurance Framework" (NHS Commissioning Board 2013) and has a nominated adult safeguarding lead.

As well as monitoring and reviewing the aims and actions set out by the BSAB and sub-groups, there are a number of other methods used to monitor the effectiveness of the partnership and ensure that adult safeguarding practice is leading to positive outcomes for adults at risk and those who support them.

- The appointment of Terry Parkin as a new Statutory Director of Adult Social Services has strengthened the strategic leadership of adult safeguarding within the local authority's role as lead agency
- Safeguarding case cases are regularly audited to ensure that they have been managed appropriately. These audits may indicate general areas where practice needs to improve. Where this is identified the specific issues are fed back to the Training and Awareness sub- group so that it can be incorporated into future training. The Training Strategy is discussed in greater detail below. Any concerns that an adult at risk may not have been appropriately safeguarded will lead to that case being reopened and reviewed.
- Feedback is sought from the adult at risk and carers about their experience of the adult safeguarding process after Case Conferences. Ensuring that we get a higher level of feedback is a central aim for 2013/14. Bromley Social Services will continue work with both Kings College London and Kingston University on 2 projects which aim to improve our understanding of the outcomes for adults at risk.
- Complaints, appeals and comments about the adult safeguarding process are responded to by the local authority as lead agency and where appropriate referred to the Chair of the Board in accordance with the policy set out in the Bromley multi-agency adult safeguarding toolkit.
- Group discussions are held with Safeguarding Adult Managers, so that themes, issues, successes and challenges can be shared.
- Statistical information regarding the timeliness and outcomes of Strategy Meetings and Case Conferences is shared with the Executive sub group and, where required, remedial action is taken.

BSAB has agreed a prevention strategy for adult safeguarding which remains in place until the end of March 2014. See hyperlink below.

http://www.bromley.gov.uk/downloads/file/367/prevention_strategy_2011-2014

Responding to the Challenge: Winterbourne View, the Francis Report & Allegations against Jimmy Savile

As the Chair noted in her introduction, 2012 saw the publication of two significant reports which focused on the abuse and neglect of adults at risk. Everyone who read these reports, or who saw the graphic violent footage captured on the BBC's Panorama programme will have realised the vital importance of preventing such abuse from happening again.

Winterbourne View

A full report was submitted to the BSAB Executive Meeting of 23rd January 2013 detailing the actions taken in response to the South Gloucestershire Serious Case Review (SCR) undertaken in relation to Winterbourne View Hospital.

The SCR provided Bromley Learning Disability Service with the opportunity to review practices and consider whether there are any lessons which can be learnt to improve care management and to increase assurance that Bromley service users are safeguarded against abuse in hospital settings.

There are currently 8 Bromley residents accommodated within Hospital settings, the majority of whom are accommodated locally. Of these, 7 have been admitted under Section 3 of the Mental Health Act and one following a Community Treatment Order. This is in stark contrast to the situation at Winterbourne House in which a significant minority of patients were not detained under the provisions of the Mental Health Act 1983. Admission under section ensures a statutory framework for review with a minimum frequency of 12 monthly reviews. All of the patients concerned have named allocated care managers and named local clinicians, and have received annual Care Management reviews in addition to their Care Programme Approach Reviews (CPA). In addition, regular visits and informal reviews take place as part of discussions with other professionals in the planning of future placements. The average length of stay for Bromley patients within these settings is between 6 and 9 months.

Roles and responsibilities

Care Managers/Social Workers had two principal roles in relation to service users admitted to Winterbourne View.

- (1) Care coordination - Whilst the majority of care coordinators were nurses, a significant minority were social workers and in this role it was their responsibility to monitor the care and welfare of patients on behalf of the funding local authorities and primary care trusts.
- (2) Adult Safeguarding – to act as the lead professionals in the coordination of investigations into safeguarding alerts.

The SCR concludes that social workers failed to challenge Winterbourne View about the quality of care and the effectiveness of the organisational response to serious incidents including allegations of staff assaults against patients.

All Bromley residents accommodated in Hospital facilities receive a CPA review in accordance with statutory guidelines and those patients who have been admitted on a long term basis additionally receive an annual care management review. Care Managers are required to undertake outcome focussed assessments and reviews to define the objectives and expected progress for service users in hospital facilities.

Where possible, timescales for discharge must be defined, together with pathway plans for future provision following discharge.

The SCR concludes that safeguarding officers did not challenge the local police force when they failed to investigate and similarly did not pursue their own investigations in the absence of any involvement from the police. Similarly where safeguarding teams relied on the hospital to conduct investigations there was a failure to follow-up on cases where Winterbourne did not provide the required reports from their investigations.

It is recognised and understood by Learning Disability care management that thresholds for criminal investigation may not always be the same as those for safeguarding investigations and as such care management may be required to undertake an investigation of allegations of abuse in the absence of a police investigation. In Bromley there is a clear framework for safeguarding supported by the Carefirst IT system. This process is scrutinised by local managers within the Learning Disability Team, together with the Safeguarding Lead and Quality Assurance Managers. This process ensures that care management are proactive in following up cases where the police or providers have failed to respond to requests for investigations. The framework also ensures that local care managers are able to track the progress of investigations being undertaken by other local authorities in cases where hospitals are located out of borough.

Analysis of alerts and identification of trends at Winterbourne View

South Gloucestershire's adult safeguarding team received 40 alerts concerning Winterbourne View from October 2007 to April 2011 and care co-ordinators picked up on other serious incidents but failed to piece these together to identify any trends of concern. The SCR concluded that this was partly because of an ineffective multi-agency safeguarding response.

Bromley's inter-agency guidelines place a clear responsibility on stakeholder agencies to share information concerning safeguarding concerns. In practice this means that there are clear opportunities again not only for managers within the LD team but also the Safeguarding Lead and Quality Assurance Managers to identify trends or patterns of concern and to undertake further multi-agency investigation as required. This process is supported by Carefirst which produces reports detailing the number of Safeguarding Alerts in each service.

Conclusion

Strong assurance can be given that Bromley residents can be safeguarded against the type of sustained abuse identified within Winterbourne View and that robust policies and procedures are in place to respond to safeguarding alerts as they are raised.

The London Borough of Bromley does not fund any hospital placements for people with learning disabilities or autism. A range of local provision for people with learning disabilities and autism, including specialist services, is available within the region.

The Francis Report

The Francis Report made 290 recommendations to improve NHS services and prevent a repeat of this appalling lack of care. All NHS Hospitals will be required to set out how they intend to respond to the Inquiry's conclusions by the end of 2013.

The BCCG has asked all providers to describe how they are implementing the Francis Inquiry report locally, and specifically how they are engaging with front line staff. This is being monitored through the Clinical Quality Review Groups.

Individual BCCG commissioners have undertaken a review of elements highlighted in this inquiry. By measuring these against existing quality assurance systems they have ensured that they are fit for purpose.

Due to the publication date of the report and associated recommendations, the bulk of the work carried out in response to this report will be covered in the 2013/14 Annual Report.

Jimmy Savile Allegations

In addition to the 2 reports above, most of us will be aware of the distressing and deeply concerning allegations regarding Jimmy Savile.

South London Healthcare Trust took action in response to these allegations. A review of procedures for celebrities' involvement with the hospital was carried out in response to a Department of Health letter to NHS Trusts. The Trust considered access to patients by volunteers and celebrities and how best to ensure that patient concerns were heard and acted upon.

Such measures will reduce the likelihood of these abuses occurring again, but again highlight the need for concerned curiosity and vigilance when it comes to ensuring the safety of those experiencing times of increased vulnerability.

3. Service Delivery, Effective Practice and Performance and Resource Management

The aims of adult safeguarding can be expressed in very simple terms; to identify and end the abuse of adults at risk. However, successfully achieving this requires skilled personnel working in partnership across all sectors of the community.

BSAB Training Programme

Having an effective, well trained, workforce is a key element in ensuring the quality of adult safeguarding work in Bromley.

The Board has a detailed training strategy which is underpinned by the Bournemouth University national competence framework for safeguarding adults. All staff and volunteers in the local workforce who are likely to have contact with adults at risks should have the knowledge and skills to undertake their adult safeguarding roles and responsibilities effectively. For staff in provider organisations this includes an understanding of their potential role as whistle-blowers.

Staff who are responsible for responding to allegations of abuse are trained to undertake this complex and demanding role. Investigations are monitored by the Board to ensure that they are carried out by competent staff. In 2012/13, 96.15% were undertaken by 7 staff who met the required BSAB standard. 9 investigations (3.85%) were undertaken by 7 locum or newly appointed staff who had not received adult safeguarding training within Bromley but in all cases their practice was supervised and monitored by experienced senior practitioners to ensure that it met the Bromley Safeguarding Adults Board competence framework.

This year, adult safeguarding courses have focused on consolidating the competence of the workforce in order to attain the key skills required by the London multi-agency policy and procedures for safeguarding adults.

Courses are evaluated and their impact on practice is monitored. Changes have been made where necessary to improve the development of appropriate skills and knowledge. Following an increase in the number of safeguarding investigations within care homes during the last year, more courses have been commissioned for Provider Managers to equip them for their role in responding to safeguarding concerns within their own services.

Courses delivered during 2012/13 included:

- *Level 1: skills and knowledge of abuse prevention, recognising abuse and reporting abuse.* 295 staff received this training. This course included the duty to report abuse, including whistle-blowing. The majority of participants (174) were from private and voluntary care sector.
- *Level 1: Introduction to Adult Safeguarding for Professionals.* This course is designed to give social work staff an overview of their role in adult safeguarding prior to undertaking Level 2/3 training which covers the competencies required to undertake safeguarding risk assessments and investigations. 14 staff completed this training in 2012/13.
- *Financial Abuse Stage 1.* This course is designed to give multi-agency staff members who have a role in identifying, investigating and responding to abuse an overview of the legal framework and resources available to protect adults at risk from financial abuse. 9 safeguarding practitioners received this specialist training.
- *Financial Abuse Stage 2.* This course was provided for the first time to develop the knowledge of 11 practitioners in responding to more complex forms of financial abuse and was delivered with specialist input from financial investigators working with the Metropolitan Police Operation Sterling team from New Scotland Yard.
- *Level 2/3: skills and knowledge of the safeguarding process including multi agency strategy, investigation, risk assessment, protection planning and review.* This course enabled 31 staff to achieve BSAB competence in adult safeguarding case work and case management.
- *Level 2 The Provider Manager's Role in Safeguarding:* This course has been developed to give managers of care services regulated by the Care Quality Commission an understanding of their role in the investigation of adult safeguarding concerns arising within their service and reducing risks to service users, in accordance with the pan-London procedures. This course has proved to be popular: 18 provider managers attended this course in 2012/13 and additional provision is planned for 2013/14.
- *Level 4: skills and knowledge in interviewing vulnerable service users and achieving best evidence processes.* This specialist course is designed to give staff the opportunity to develop skills in interviewing service users who have a communication problem in accordance with the Achieving Best Evidence model. Due to reduced staff turnover in 2012/13, there were insufficient applications to run this intensive 3 day course, so the course was cancelled at no cost to the Board.
- *Level 5: skills and knowledge for managers of staff undertaking safeguarding investigations.* This course ensured that managers are competent in

supervising and supporting staff undertaking adult safeguarding work; 29 members of LBB and Oxleas staff received this training as part of a planned expansion to develop the decision-making skills of members of staff who are required to undertake the Safeguarding Adults Manager role in co-ordinating and supervising safeguarding investigations.

- *Level 6: Safeguarding Adults Managers Practice Development Workshop.* This workshop gave 10 staff the opportunity to focus on supervision of staff and the co-ordination of the adult safeguarding intervention and to reflect on the impact on both professional staff and the adult at risk.
- *Introduction to Mental Capacity Act:* 137 staff across the multi-agency partnership received this half-day training
- *Mental Capacity Act and Decision Making:* 29 staff attended this one day course
- *Deprivation of Liberty Safeguards:* 36 staff from the London Borough of Bromley and the independent care provider sector attended this training.

A total of 619 staff across the BSAB multi-agency partnership received 'classroom' based adult safeguarding, Mental Capacity Act and Deprivation of Liberty Safeguards training.

E- Learning

In September 2012 a computer based e-learning system was commissioned in collaboration with neighbouring local authorities and in conjunction with the Bromley Safeguarding Children Board.

It offers unlimited access to free e-learning modules on safeguarding adults and children, as well as a number of other linked topics including the Mental Capacity Act and domestic violence. Participants from across the partnership, including Bromley Police, and health and social care providers services from statutory and independent sectors have been able to choose those courses that apply to their job role. To the end of March 2013, over 700 courses have been completed since the launch in mid-September, 143 adult safeguarding, 59 the Mental Capacity Act and 39 on the Deprivation of Liberty Safeguards. The Board was encouraged to see the broader spectrum of staff employed in the delivery of health and social care across the partnership who have accessed the e-learning programme, from care homes, domiciliary care agencies, supported living and Shared Lives providers, youth support workers, registered social landlords, GP and dental practices.

In 2013/14 safeguarding adult risk assessment training will be incorporated into both the Level 5 and level 6 training. The aim of this is to ensure that all referrals are properly risk assessed, in accordance with 'Protecting adults at risk' (1.9.2).

4. Working Together

Preventing abuse and empowering adults at risk to end abuse can only be achieved through effective and sustained partnership working. In Bromley this partnership extends to the whole community, and this is reflected in the range of alerts that the local authority receives. We have had contact from concerned neighbours, relatives, bank staff as well as health and social care professionals. Not all of these concerns require action under adult safeguarding policy and procedures, but in some cases a simple call has been enough to enable us to identify, respond to and end the abuse of an adult at risk.

In addition to the wider community the following agencies play an important role in adult safeguarding in Bromley:

- The London Borough of Bromley Education and Care and Health Services (Lead Agency)
- Bromley Clinical Commissioning Group (formerly Bromley Primary Care NHS Trust)
- Bromley Healthcare
- South London Healthcare NHS Trust
- London Ambulance Service
- London Fire Brigade
- Oxleas NHS Foundation Trust
- Metropolitan Police Service
- Advocacy for All
- Bromley Healthwatch
- Provider services across the private, voluntary and independent sector

Some of our key partners have provided their own reports on their adult safeguarding work over the past year and these can be found below.

This partnership is supported by the Bromley Adult Safeguarding Board. The Board provides leadership and strategic direction for all adult safeguarding activity within the Borough.

The Board has successfully implemented the use of 'Protecting adults at risk' (aka Pan-London procedures) alongside all other London boroughs' Safeguarding Adults Boards. The policy and procedures form an integral part of adult safeguarding training.

Bromley Healthcare

Bromley Healthcare is a social enterprise providing a wide range of community health care to people of all ages. Promoting the well-being of the individuals that we work with is an integral part of our work. This includes ensuring that adults at risk are empowered to end abuse.

We play an active part in adult safeguarding work across the borough. Our staff are trained to recognise, respond to and report concerns and issues in the community and to provide expertise and support in cases where health issues form part of the safeguarding concerns.

Our workforce is trained to standards which are compatible with Care Quality Commission (CQC) regulations, professional standards, and agreed best practice. This includes ensuring staff are trained to the appropriate level of BSAB adult safeguarding competence for their professional role. Competence is assessed and training targets for staff are set annually. We have begun training Bromley Healthcare service leads and managers in carrying out safeguarding adults investigations to equip them for undertaking, where appropriate, investigations for incidents occurring within their own service.

A working group has been set up and an action plan is in place to identify ways of increasing competence and confidence in the use of the Mental Capacity Act.

Bromley Healthcare adult safeguarding procedures are easily available for staff to access on the intranet, and the local 'Alerters Guide' has been widely distributed to ensure staff members know how to report concerns. These internal procedures are consistent with 'Protecting adults at risk: London multi-agency policy and procedures to safeguard adults from abuse' and local safeguarding procedures. Guidance on information sharing is included within the procedures.

The high incidence of older people living alone in Bromley and the risk of various scams has led to work with Trading Standards to ensure patients receive information on this. Additionally where patients may be at increased risk of fire due to disability or lifestyle issues a fast track system for fire safety advice is used.

We have incorporated a standard Statement of Safeguarding Adults in contracts and safeguarding is integrated into performance and contracting meetings.

A Pressure Ulcer Prevention Programme is currently operating with 5 care homes to assist in the effective management of skin integrity issues. This forms part of our 'CQUINS' and 'Promise' programme. We have also been working with South London Healthcare Trust on extending distribution of the Bromley Healthcare pressure ulcer information leaflet to patients in Princess Royal University Hospital who are registered with Bromley GPs.

The Director of Quality is Bromley Healthcare's nominated lead for adult safeguarding and represents Bromley Healthcare at the Bromley Safeguarding Adults Board. Bromley Healthcare's Head of Community Nursing has also chaired the Performance Audit and Quality Sub-group throughout the year. This sub group regularly reviews case work, identifying lessons learnt in order to develop practice

This gives us a valuable role in the overall leadership and direction of adult safeguarding across the borough.

Bromley Clinical Commissioning Group

Clinical Commissioning Groups (CCGs) began full operation in April 2013. CCGs are the major Commissioners of local health services and need to ensure that they, and the organisations from which they commission services, have effective Safeguarding arrangements in place for both adults and children.

Adult Safeguarding Self-Assessment Assurance Framework (SAAF) 2012/13

In July 2012 NHS London requested all shadowing CCGs within the cluster to utilise the Adult Safeguarding Self-Assessment Assurance Framework to demonstrate their focus on robust Safeguarding Adults at Risk arrangements across Commissioning and Provider Organisations.

There were 5 Targets set within the framework. Organisations that were responsible for Commissioning of Services were asked to self-score and provide evidence on their current practice to justify their scores against the benchmark statement that was set.

Organisations submitted their returns to their local Safeguarding Adults Board for oversight and challenge. Submissions were then sent for validation by the Cluster Director of Nursing.

There were 6 standards set for the commissioning target. Bromley shadowing CCG self-scored for each of the standards, the final validated scores were assessed as being effective, demonstrating that Bromley CCG has safeguarding strongly embedded within their commissioning arrangements. This includes:

- plans to train its staff in recognising and reporting safeguarding issues (see 'Internal Arrangements for Training in Adult Safeguarding' below);
- a clear line of accountability for Safeguarding properly reflected in the CCG governance arrangement;
- appropriate arrangements to co-operate with the local authorities in the operation of local Safeguarding Children Commissioning Boards, and Safeguarding Adults Boards and Health and Wellbeing Boards;
- effective arrangements for information sharing;
- securing the expertise of designated doctors and nurse for Safeguarding Children and Looked After Children, and a designated paediatrician for unexpected deaths in childhood.
- appointing a Safeguarding Adults lead and a Lead for the Mental Capacity Act (MCA), supported by the relevant policies and training. The CCG also has a Designated Lead Nurse for Adult Safeguarding and a Designated Lead for Serious Incidents.

Internal Arrangements for Training in Adult Safeguarding

Staff should be trained and competent to identify potential indicators of abuse and neglect in adults at risk. They should know how to act on their concerns and fulfil their responsibilities in line with the CCG Adult Safeguarding Policy. This Policy is aligned with BASB's (Bromley Adults Safeguarding Board's) Interagency for Safeguarding Adults at Risk Procedure ('Protecting adults at risk: London multi-agency policy and procedures to safeguard adults from abuse' SCIE 2010).

Staff with an identified role for Safeguarding, and/or who have direct contact with patients /users (that could be deemed at risk and/or vulnerable) are required to undertake Safeguarding training at varying levels of competence depending on their specific role.

BCCG Commissioned Service Providers Monitoring Process for the Adult Safeguarding Self-Assessment Assurance Framework 2012 (SAAF)

In April of this year Bromley CCG met with each service provider as part of our SAAF monitoring process. This provided the opportunity for each of the providers to give a progress report to the CCG on their SAAF Action Plans, identifying their achievements and highlighting any constraints which prevented the service from achieving certain targets on-going monitoring of the Providers Action Plans will be taken through the CCG Adult Safeguarding Commissioning Group.

Lessons Learned During 2012/13

Concerns were raised by the shadowing CCG regarding the number of serious incidents escalated by Bromley Health Care Services surrounding grade 3 and 4 pressure ulcers. Following this a robust action plan was put in place. This included:

- additional training for community nursing staff on tissue viability and adult safeguarding
- closer multi-agency working with GPs across community services

- information to be provided for patients and carers on skin care
- the development of a pressure ulcer group across the three boroughs of Bromley, Greenwich and Bexley to share best practice and agree protocols across local providers and commissioners.

All of the recommended actions have been successfully achieved

Looking Ahead

The CCG has the following objectives for ensuring that adult safeguarding is an integral part of future commissioning.

- (1) Use recommended Safeguarding principles to shape strategic commissioning arrangements.
- (2) Set Safeguarding as a strategic objective in the commissioning of health care services.
- (3) Use integrated governance systems and processes to gain assurance and to act on Safeguarding concerns raised from commissioned services.
- (4) To work with the local Safeguarding Adults Board, patients and community partners to create safeguards for vulnerable people.
- (5) To provide leadership to Safeguarding across the Local Health Economy.
- (6) To ensure accountability and transparency within the organisation and with commissioned partners.

Governance Arrangements for Safeguarding Adults At Risk

Bromley CCG has a clear line of accountability and governance arrangements in place for Safeguarding. This is clearly identified within Bromley CCG's:

- Mission Statement for Adult Safeguarding
- Adult Safeguarding Policy
- Commissioning Strategy
- Organisational Structure for Quality, Governance and Patient Safety Directorate

The Director of Quality Governance and Patient Safety is the Executive Lead for Safeguarding. She is accountable to the CCG Board for providing assurance that the CCGs statutory duties and responsibilities for Safeguarding are being met.

Drugs Related Death Review Panel

The BSAB approved the terms of reference for the Drugs* Related Death Review Panel on 14.03.12. The purpose of the panel is to:

- review all identified and notified substance misuse related deaths within the London Borough of Bromley
- identify the learning from each case
- propose and make recommendations on actions to be taken to the Substance Misuse and Safeguarding Boards for endorsement to:
- remedy system failures, improve services
- develop learning opportunities

- challenge and change practice where appropriate in order to reduce the risk of drug-related deaths.
- disseminate the communication strategy which will include learning points and action plans as appropriate

The first annual Drugs Panel report will be considered by the BSAB by September 2013.

*Drugs in this context includes alcohol

Public Protection Report

In 2012/13 the Public Protection and Safety Portfolio identified a number of priority areas in Bromley. These included:

- providing advice, guidance and support to older members of the community
- encouraging young people to achieve their potential by rejecting crime and anti-social behaviour
- provide clear advice, guidance and communication that supports crime prevention and reinforces the confidence in the borough as a safe place to live, work and enjoy recreation.

In 2012/13 Public Protection offered internal training focussing on legislation relating to individuals who hoard, and premises where hoarding is present. This training opportunity will continue in 2013/14.

During the past year sixteen cases required action in relation to hoarding concerns.

A Summary report was completed, and a presentation given, by the London Fire Brigade and Bromley Council Public Protection Division to highlight the issues arising from these cases.

Following referral a large number of cases have now been resolved, with properties having been cleaned and, where applicable, additional support implemented.

Lessons Learned during 2012/13

Continued improvements to the standard of referrals, assessment and overall communication between the agencies involved in managing concerns relating to hoarding are required. The training programme outlined below aims to address these issues.

Work planned for 2013/14

Public Protection aims to provide a standardised training programme for all front line staff concerning "Environmental Health Public Protection Division: Powers used to assist and deal with Public Health".

This will include training for internal and external organisations such as health providers, the Police, Fire Brigade, Ambulance staff and other relevant organisations.

Community Safety / Safer Bromley Partnership

The Safer Bromley Partnership (SBP) was set up in 1998 to ensure that the public sector agencies, voluntary groups and businesses work together with local communities to reduce crime and improve safety.

During 2012/13 the Partnership led on a wide range of activity to support adult safeguarding work in Bromley.

- The partnership continues to utilise the Safer Bromley Van providing additional home security measures to adults at risk (this will continue in 2013/14).
- Safer Neighbourhood Officers continue to work with adults identified as being at risk by Safer Neighbourhood Police Teams. Work is undertaken to reduce the chance of them being targeted by criminals.
- Adults at risk of abuse are referred to the Keys to Freedom Programme for emotional support and encouraged to access suitable services
- The 'Domestic Violence One Stop Shop' which provides advice from a police officer, a local solicitor, Bromley Homeless Families Unit, Bromley Women's Aid and Victim Support.
- The SBP has continued the partnership work with LFB and Environmental Health Officers to work with known hoarders in the borough and reduce the risk to their homes from fires.

The Partnership supports staff to attend relevant adult safeguarding training and runs Domestic Abuse Awareness Days, which are delivered both in-house and externally.

Trading Standards

Trading Standards governance in safeguarding adults at risk

Protecting vulnerable consumers is a key priority for trading standards and is reported to the Divisional Management Team via the Public Protection reporting priorities report.

The Head of Trading Standards has overall responsibility for adult safeguarding issues within the trading standards remit.

Operational lead officers in doorstep crime and scams against the elderly report monthly to the Head of Trading Standards, who provides strategic vision and leadership, support and recommendations.

The average age of a doorstep crime or scam victim in Bromley in 2012 was 81 years.

Internal arrangements for training in adult safeguarding

Trading Standards officers received training in 2012/13 on the basic concepts of the Mental Capacity Act 2005, including best interest guidance and issues relating to adult safeguarding.

Work undertaken and achievements in 2012/13

- Raising Awareness – Trading Standards has provided advice and guidance to over 1500 older consumers through 44 educational talks to groups in the Bromley area, and 30 training sessions to 570 carers or other professionals in the adult safeguarding field.

- Over 2000 education “Safe as Houses” packs providing advice and information, door-stickers and details of the trading standards rapid response number were supplied to residents.
- Disruption and Enforcement – 188 calls were received on the rapid response number from consumers, 96 of these related to rogue traders and scams; interventions and advice saved potential victims £250,000.
- A number of successful convictions under the Proceeds of Crime Act involved cases of fraud against elderly consumers who were victims of a building scam.
- A repeat bogus builder offender who continuously targeted older consumers in Bromley was jailed for 2 months and banned from calling on residents in the borough for two years.
- An older consumer was awarded £20,000 compensation following the conviction of a trader under the Fraud Act 2006 which had been brought to the attention of Trading Standards by the consumer’s bank.
- 16 referrals were received from partner agencies in relation to concerns of the well-being of vulnerable adults.

Lessons Learned during 2012/13

We saw an increase in referrals from carers and adult safeguarding professionals as a result of increased awareness through training.

Although many banks welcomed the banks protocol we continue to receive reports of victims of fraud who have been able to withdraw large cash amounts unchallenged.

We have seen an increase in the number of complaints and enquiries about mass marketing and similar advance fee scams, possibly as a result of increased awareness.

There has been an excellent response to the Safe as Houses packs and the Little Book of Big Scams

Work planned for 2013/14

Further work with banks and building societies is planned for this year, in particular those branches who have been involved in high value losses as a result of a scam against an elderly customer.

We will:

- Strengthen existing links with local police to ensure good partnership working and exchange of intelligence,
- Continue the training programme for partners in Adult Safeguarding,
- Participate in the Scams Awareness month
- Work more closely with neighbouring boroughs with regard to itinerant trader activity

We have signed up to a Tri-Regional Enforcement Capacity Scams Hub which aims to identify potential mass marketing scams who live in Bromley and have featured on a scammers victims list.

Metropolitan Police Service - Bromley Borough

Bromley's Safeguarding Adults at Risk (SAR) Team was implemented on the 1st April 2011 to deal specifically with Adult Abuse allegations. Since the implementation of the unit, the team have investigated a number of Adult Abuse investigations and the conviction of the offenders is now coming to fruition (as detailed below).

The SAR team uses a number of approaches to gather and share intelligence regarding adults at risk who are, or may have been, affected by criminal activity.

A Single Point of Contact (SPOC) has been established for the SAR to manage referrals for advice and Information Sharing requests. Police Intelligence received concerning adults at risk is disseminated to the SPOC for further investigation.

The SPOC Officer has also conducted joint visits with Adult Social Care regarding Safeguarding Alerts.

Daily checks of reported crimes are carried out to identify vulnerable adults and actions are set by the Daily Management Meeting to ensure that adult safeguarding actions are carried out where required.

Information from Police regarding adults who may be vulnerable is shared via secure email with Social Services, in the form of Adult Merlin PACS.

Using the Achieving Best Evidence (ABE) interview framework the SAR team, with the assistance of intermediaries, have interviewed several vulnerable adults. This includes adults with physical disabilities, learning disabilities and those whose communication is severely impaired.

Disability Hate Crime Reporting Packs have been widely distributed throughout the borough.

Training

Police officers are able to access adult safeguarding E-learning Training via Me Learning.

Police in Bromley have been involved in training for adult safeguarding partners, including social services and care provider staff.

Work undertaken and achievements in 2012/13

Results of Proactive operations by SAR team:-

- (1) Care Home - A number of thefts were reported by the manager of a care home, including the theft of money from a blind resident. A proactive operation was conducted by the SAR team which resulted in the arrest of a member of staff for theft. The member of staff was charged with two counts of theft of prescription drugs from the home and one count of theft from the resident. At court they were found guilty of two counts of theft of the prescription drugs and on the 5th November 2012 sentenced to a Community Order for 6 months with a specific activity requirement of 16 days.
- (2) Supported Housing accommodation - An allegation was made that a private carer was regularly stealing money from an elderly resident (with a learning disability) when she conveyed him to his bank each week. In liaison with the bank, the SAR team conducted a proactive operation and arrested the carer for theft. It was found that £130 pounds was missing from the victim's money

withdrawn from the bank. The victim was Achieving Best Evidence (ABE) interviewed and visual evidence was gathered which demonstrated how he may have been exploited. The carer was charged with two counts of theft and pleaded guilty to one count of theft of £130 pounds. A second count of theft of £11,923 remains on file. The perpetrator was sentenced to 6 weeks imprisonment, wholly suspended for 12 months. They were ordered to carry out 150 hours unpaid work, with a 30 day activity requirement and a prohibited activity requirement to refrain from paid or voluntary work in care/private home for 12 months.

- (3) The SAR team supervisor linked several crimes of theft against vulnerable adults, whereby a single care assistant was identified. A proactive operation was conducted at victim's private homes in liaison with the care agency, which resulted in the arrest of the care assistant. Police placed marked money in victim's home, which was found in the carer's possession. The carer was also linked via forensic evidence on stolen cheques. The carer was charged with four counts of theft of jewellery and cash from three elderly victims with either dementia or learning disabilities and found guilty of six counts of theft. They received fifteen months imprisonment.

Other charges/convictions:

On the 26th March 2012 a person employed as a private helper for an elderly individual living in supported housing was arrested for theft of money and fraud. The victim was able to give evidence via an ABE interview. The individual was charged with one count of Fraud, but at Crown Court the CPS offered no evidence as they decided that it was not in the public interest to pursue.

A live-in care assistant was charged with one count of fraud. It was alleged that they had used the identity of their victim (who had Multiple Sclerosis, mobility needs and required a high level of care) to obtain goods. At Croydon Crown Court they pleaded guilty at the last moment to one count of Fraud. The perpetrator was sentenced to 120 hours of unpaid work and required to pay compensation of £361.95.

A care assistant was charged with Fraud. They stole a bank card from an elderly female resident with dementia at who lived at a care home and used the card to pay off a bank loan and phone bill. They were convicted of Fraud and Benefit Fraud and sentence to 12 weeks imprisonment, wholly suspended for 12 months. They were required to complete unpaid work to and pay compensation of £106.05.

A patient receiving treatment under the Mental Health Act at a specialist hospital was given an adult caution for a sexual assault on another patient.

At Croydon Crown Court a care assistant was found guilty of four counts of ill treatment/wilfully neglecting and two counts of common assault/battery against three vulnerable residents at the Care Home. They were sentenced to 15 months imprisonment.

There are an additional two cases which are due to go to court in Spring 2013.

Safeguarding investigations

Officers made significant contributions in a number of other safeguarding investigations including:

- Neglect of a person lacking mental capacity (Section 44 of Mental Capacity Act) 2005.

- Care Home - Unexplained death of resident leading to a Nursing Midwifery Council referral.
- Psychiatric Hospital - A number of allegations of serious sexual assaults/violent assaults by both staff and patients against service users. SAR team have assisted with Sapphire and CAG lead.
- Care home - Joint working by SAR team with Adult Care services & Care Quality Commission in relation to allegations of assaults by staff on clients who lack the mental capacity to disclose offences themselves.

Officers are currently involved in four other cases.

Lessons Learned during 2012/13

A number of investigations have revealed that suspects who have previous convictions have been employed in positions of trust. Although some of the convictions are over 10 years old, the number of previous convictions is concerning. In one case a suspect had seven previous convictions.

We are concerned that in some cases agencies/care homes do not always take into consideration Disclosure and Barring Service (previously Criminal Records Bureau) findings when recruiting. They have taken 'the word' of the proposed employee regarding their conviction. It is suggested that the current guidance regarding of employment of staff with previous convictions should be reviewed by providers of care and support services.

Work planned for 2013/14

Bromley is going live with the introduction of Multi-Agency Safeguarding Hub (MASH) for Children. This will be co-located at the civic centre and will involve the partnership of Children Social Care, Health and Police. It is envisaged that Adults will be linked as the project progresses.

London Fire Brigade Bromley Team

Internal Governance arrangements for safeguarding adults at risk

- Programmed Home Fire Safety Visits (HFSV) targeting vulnerable residents as identified by our internal risk matrix.
- Agreed electronic HFSV request process with Bromley partners to identify and address fire risk in residential premises.
- Agreed process of notification to Bromley Safeguarding team for identified vulnerable people following LFB day to day activity.
- Hoarding process and information sharing protocol agreed with the LFB and the Public Protection team.
- Agreed process and information sharing protocol agreed with the LFB and the Met Police for vulnerable residents to burglary.
- Accidental fire review of residents following each fire when an ambulance is mobilised.

Internal arrangements for training in adult safeguarding

- Annual internal training for all station staff on vulnerability of residents.
- Annual internal training for all station staff on burglary awareness with Met Police.

Work undertaken and achievements in 2012/13

- Formulated the Hoarding protocol adopted by Bromley Council.
- Completed over 2200 HFSV for vulnerable householders.
- Trained Bromley partners in the recognition of Fire risk factors and reporting protocol (22.03.2013). 37 people attended out of 51 applications.
- Referred over 30 vulnerable residents to Social Services for review.

Lessons Learned during 2012/13

- Training needs to be current.
- Data Protection protocols need to be considered at all times.

Work planned for 2013/14

- Continue with identified projects outlined for previous financial year.

Oxleas NHS Foundation Trust

Oxleas NHS Foundation Trust works with adults at times when they may be experiencing increased vulnerability and risk. Adult safeguarding is therefore a priority for our services, and this is reflected in our internal governance arrangements for safeguarding adults at risk.

The Oxleas Trust Executive Lead Chairs the Safeguarding Adults Committee (a sub group of the Patient's Safety Group) and adult safeguarding is embedded in supervision for all professionals within the trust. Each directorate has its local Patient Safety Group to help ensure that the views and needs of patients are listened to, and acted upon

We have put in place robust arrangements for staff training in adult safeguarding.

Oxleas staff access training provided by the Local Authority and, in addition, we have our own e-learning for adult safeguarding awareness – this is mandatory with 95.4% compliance.

In 2012/13 an audit of safeguarding cases undertaken by LBB and Oxleas was undertaken. The subsequent action plan identified the need for additional Safeguarding Adult Managers (SAMs), and this has now been completed.

An audit was also undertaken within the trust to link 'incidents' with 'safeguarding' more effectively. This has recently been completed and an action plan is being drawn up.

Oxleas successfully completed the NHS London Safeguarding Adults Self-Assessment & Assurance Framework (SAAF) report, which has been validated by the Bromley Safeguarding Adults Board. This document highlighted the increased prominence of adult safeguarding within the NHS Operating Framework for 2012/13.

During the past year we have learnt that there is a greater need for all practitioners to consider aspects of the Mental Capacity Act as part of their everyday practice and we aim to increase staff awareness over the next year.

We have continued to develop effective working relationships with key safeguarding partners, such as the police. One example of this is a formal information sharing agreement which is used where practitioners consider risk either from or to others to

be a concern. In addition three recent one day joint training sessions were held, for police, London Ambulance Staff and Oxleas/LBB staff to examine the interface between agencies (e.g. Section 136 detentions by the police) to ensure safety for highly vulnerable patients. This has resulted in a greater understanding of the vulnerability of our service users and a greater awareness of safeguarding issues by the police, which has in turn fostered more trusting working relationships.

Representatives from Oxleas regularly attend MAPPA and MARAC meetings where safeguarding issues may also be raised. Adult safeguarding issues are also presented via the High Risk Panel, which considers individuals who are not eligible for a MAPPA referral but remain either highly vulnerable or present high levels of risk

The Government's Prevent strategy will be a cornerstone of the trust's safeguarding programme which will have major training implications.

We also plan to hold an 'embedded learning' event with a theme of 'bringing theory to practice'. This will be trust wide and will involve discussion of case scenarios, and workshops on subjects including the Mental Capacity Act and hoarding. We plan to invite speakers and representatives from the safeguarding departments of the three boroughs that we work across. The aim is to embed into practice the training that staff members have undertaken.

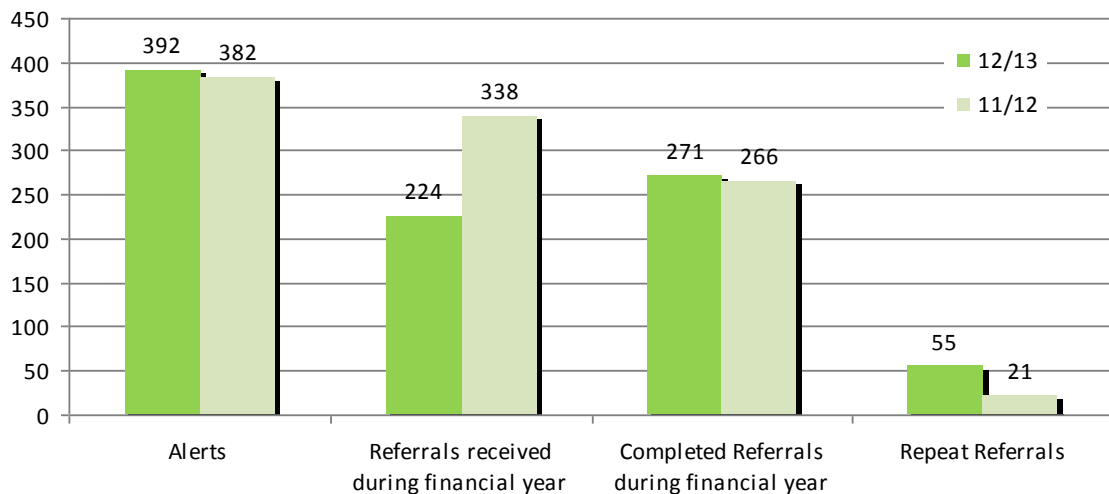
5. Information & Data Tables

The tables below give information about some of the key activities in relation to adult safeguarding in Bromley in 2012/13. The Bromley adult safeguarding multi-agency toolkit and 'Protecting adults at risk' are now established as the principal guides for adult safeguarding practice within the borough, having been launched at the end of June 2011. The available data shows some significant changes since 2011-12, which may reflect professional's increased familiarity with these documents. This includes a change in the types of abuse that are being investigated and a reduction in the number of alerts that are deemed to meet the threshold for adult safeguarding investigation.

Alerts / Completed Referrals

	2012/13	2011/12
Alerts	392	382
Referrals received during financial year	224	338
Completed Referrals during financial year	271	266
Repeat Referrals	55	21

Alerts & Completed Referrals



This year has seen a slight increase in the number of adult safeguarding alerts or concerns raised within the borough. These alerts come from many different sources including the police, members of the public and health and social care professionals. It is heartening to note the wide range of people who take the time to recognise and report their concerns. In some cases the concerns raised may indicate a need for support other than adult safeguarding. In these cases appropriate signposting to other support options is provided.

The table also shows the number of alerts or concerns which subsequently progressed to become a 'referral'. This is where an alert or concern is assessed by the council to meet the local adult safeguarding threshold and a full safeguarding investigation by council social work staff is deemed necessary. Governance of adult safeguarding case work is provided by the Board's Performance Audit and Quality Sub-Group.

In 2012/13 fewer alerts have turned into referrals. This reflects the efforts that have been made to ensure that alerts are properly assessed against local criteria (as set out in 'Protecting Adults at Risk: London multi-agency policy and procedures to safeguard adults from abuse'). This assessment of each alert or concern helps to make sure that issues are treated in a consistent, effective and proportionate way.

The number of 'repeat referrals' has increased in the last year. This occurs when information about the same concern is raised from different sources. For example, the same concern may be reported up by both a police officer and a social worker. This increase may indicate that the message about safeguarding being everybody's business is spreading. However the Board also recognises that there is a need to continue to monitor our reporting systems to ensure that work is not duplicated.

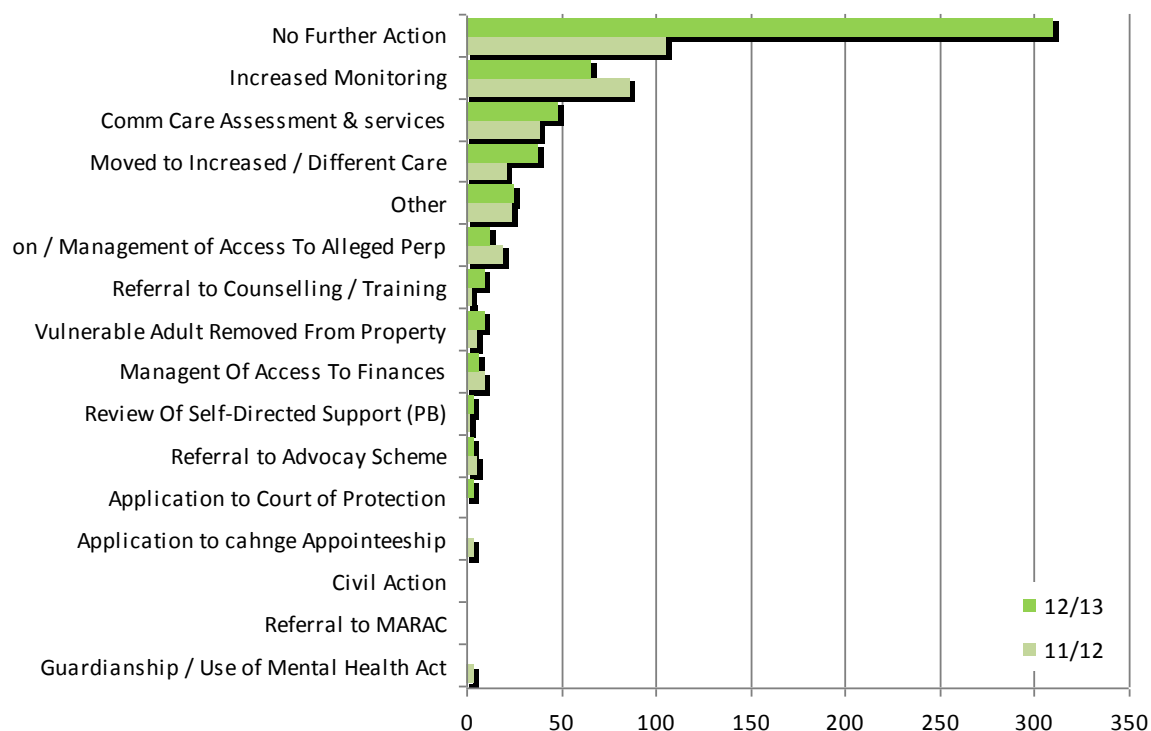
Outcomes* Of Completed Referrals For Vulnerable Adult

	12/13	11/12
Guardianship / Use of Mental Health Act	0	4
Referral to MARAC	0	1
Civil Action	1	0
Application to Change Appointeeship	1	4

Application to Court of Protection	4	1
Referral to Advocacy Scheme	4	6
Review of Self-Directed Support (PB)	4	2
Management of Access to Finances	7	10
Vulnerable Adult Removed From Property	10	6
Referral to Counselling / Training	10	3
Restriction / Management of Access to Person Alleged to have caused harm	13	19
Other	25	24
Moved to Increased / Different Care	38	21
Community Care Assessment & Services	48	39
Increased Monitoring	66	86
No Further Action	310	106

*multiple entries allowed

Outcomes* Of Completed Referrals For Vulnerable Adult



*multiple entries allowed

The above 'Outcomes' table shows the principal actions agreed, following an adult safeguarding investigation. The primary aims of any outcomes are to ensure that any

abuse is not repeated and to support both the adult at risk and, in some cases, the person alleged to have caused the harm, to remain safe and in control.

In 2011/12 the Health and Social Care Information Centre published experimental data about overall outcomes from adult safeguarding across England. This indicated that thirty per cent of all cases ended with a 'no further action' outcome.

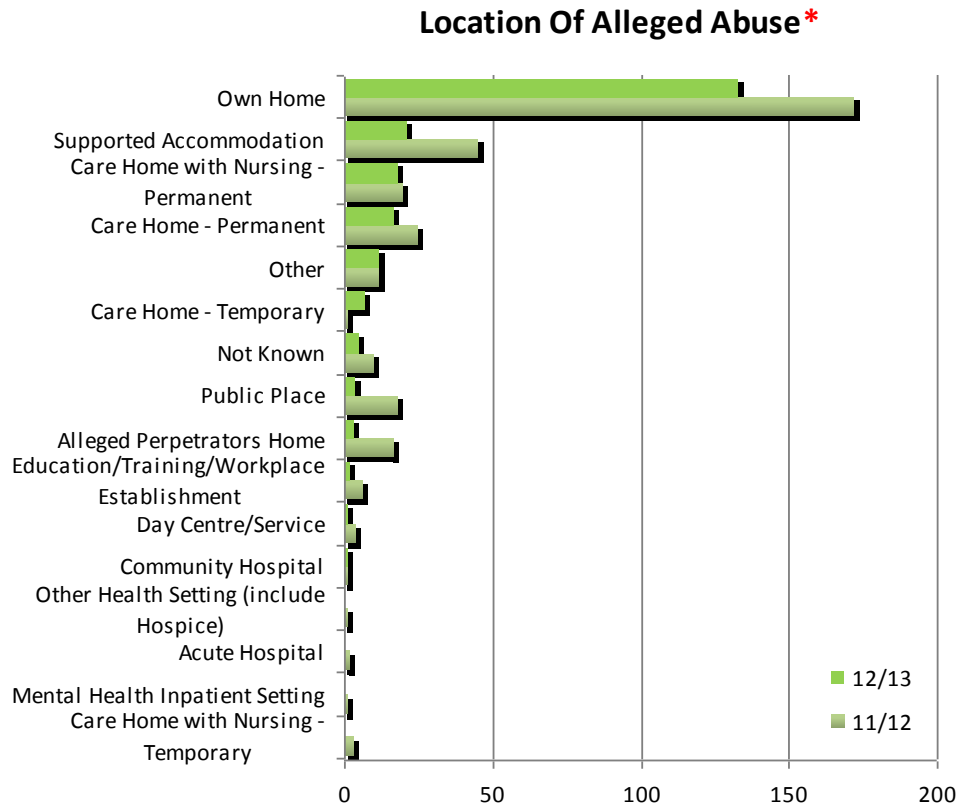
In Bromley a higher number of cases in 2012/13 resulted in 'no further action'. This may indicate that issues had resolved themselves before the process was finished or it could show that a number of concerns are proceeding to investigation where this was not required. As noted above, the Board has supported efforts to ensure that alerts are measured against agreed thresholds. This work will continue during 2013/14, to ensure that while the wider community is encouraged to report concerns about adults at risk of abuse as "everybody's business", risk assessment and robust screening of referrals determines that only appropriate cases are considered for adult safeguarding action.

Improved data analysis of the source of adult safeguarding referrals which result in no further action will be undertaken during 2013/14 to identify any referring agencies whose referral patterns might indicate a need for advice and information about the threshold for adult safeguarding cases.

Location alleged abuse took place*

	12/13	11/12
Care Home with Nursing - Temporary	0	3
Mental Health Inpatient Setting	0	1
Acute Hospital	0	2
Other Health Setting (include Hospice)	0	1
Community Hospital	1	1
Day Centre/Service	1	4
Education/Training/Workplace Establishment	2	6
Alleged Perpetrators Home	3	17
Public Place	4	18
Not Known	5	10
Care Home - Temporary	7	1
Other	12	12
Care Home - Permanent	17	25
Care Home with Nursing - Permanent	18	20
Supported Accommodation	21	45
Own Home	133	172
	<u>224</u>	<u>338</u>

*of Referrals received **during** financial year



*of referrals received during financial

Sadly, the abuse of adults at risk can happen anywhere. It is important for the location of alleged abuse to be recorded, in order to identify and respond to local trends.

A large number of alerts and concerns in 2012/13 are recorded as having originated in people's own homes. In general, wherever possible, health and social care services will seek to support people to remain in their own homes for as long as possible. It is therefore paramount that we support adults at risk to remain safe at home.

Work with Trading Standards has helped to increase knowledge of doorstep crime and scams. The Police, London Ambulance Service, Social and Health Services, as well as neighbours, friends and relatives have all played a part in sharing information about concerns that are affecting people in their own homes.

In the light of the incidents of abuse and neglect at Winterbourne View, the Board has continued to support a robust, but proportionate approach to the investigation of concerns arising from residential care settings.

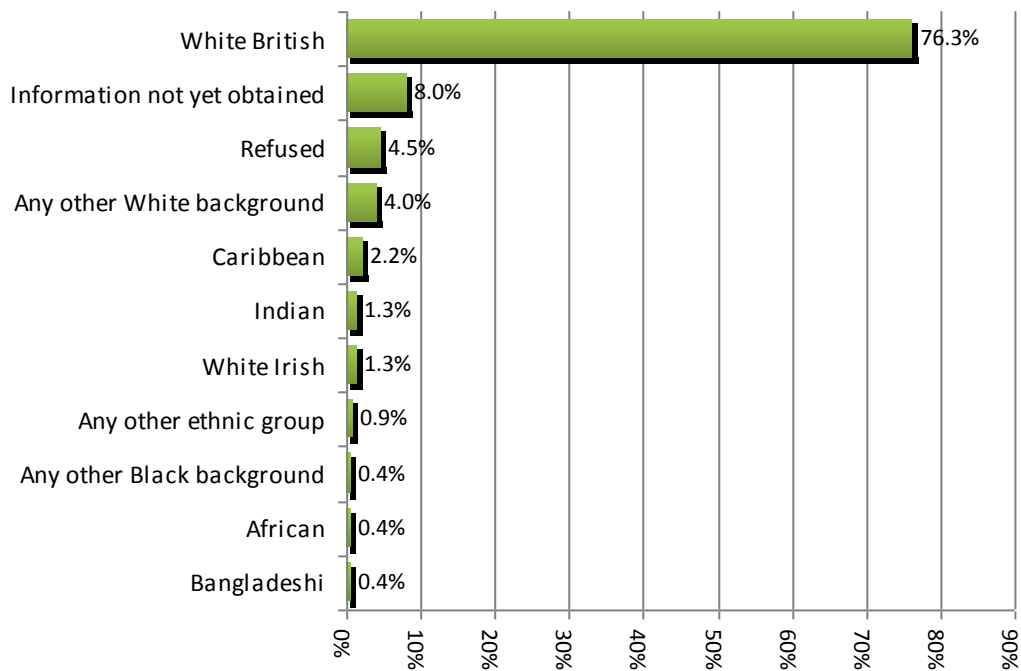
The Francis Report has clearly demonstrated the need for adult safeguarding issues to be managed and responded to in partnership with the NHS. The table above shows that very few adult safeguarding concerns originated in hospital setting in Bromley. However any allegations of abuse of adults at risk which originate within hospital settings must be taken with the utmost seriousness and work will continue in 2013/14 to ensure that all concerns are responded to appropriately.

Ethnicity*

	2012/13	%
Bangladeshi	1	0.4%
African	1	0.4%
Any other Black background	1	0.4%
Any other ethnic group	2	0.9%
White Irish	3	1.3%
Indian	3	1.3%
Caribbean	5	2.2%
Any other White background	9	4.0%
Refused	10	4.5%
Information not yet obtained	18	8.0%
White British	171	76.3%
Traveller of Irish Heritage	0	0.0%
Gypsy/Roma	0	0.0%
White and Black Caribbean	0	0.0%
White and Black African	0	0.0%
White and Asian	0	0.0%
Any other Mixed background	0	0.0%
Pakistani	0	0.0%
Any other Asian background	0	0.0%
Chinese	0	0.0%
	224	100%

*of Referrals received **during** financial year

Ethnicity Of Referrals Received During 12/13



2011 Census data shows that the population of Bromley who identified as being White/British is 77.4 %.

2011 Census Data for Bromley		Number	Percentage
Total Persons		309,392	100
White	English/Welsh/Scottish/ Northern Irish/British	239,478	77.4
	Irish	4,463	1.4
	Gypsy or Irish Traveller	580	0.2
	Other White	16,349	5.3
Mixed/multiple ethnic group	White and Black Caribbean	3,897	1.3
	White and Black African	1,335	0.4
	White and Asian	3,016	1.0
	Other Mixed	2,649	0.9
Asian/Asian British:	Indian	6,215	2.0
	Pakistani	1,014	0.3
	Bangladeshi	1,265	0.4
	Chinese	2,768	0.9
	Other Asian	4,805	1.6
Black/African/Caribbean/ Black British	African	9,819	3.2
	Caribbean	6,609	2.1
	Other Black	2,258	0.7
Other ethnic group	Arab	870	0.3
	Any other ethnic group	2,002	0.6

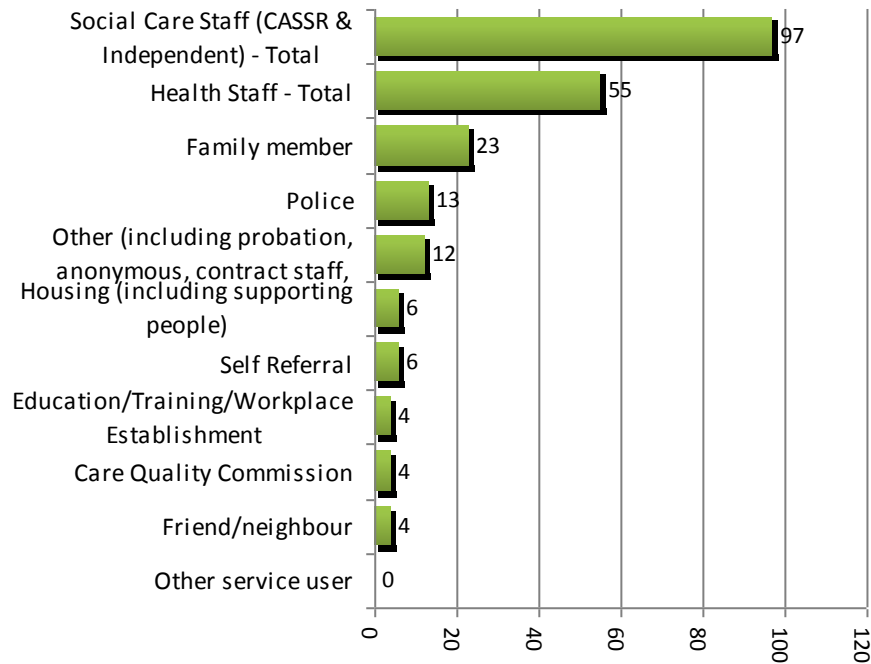
Source: Office for National Statistics

The available data on the ethnicity of adults at risk broadly reflects the demographic make-up of the borough. Visits have been made to the Bromley Asian Cultural Association, the Pineapple Club and Chinese community groups and faith groups amongst others, to raise the issues of adult safeguarding. The Board is aware of the need to ensure that the key messages of adult safeguarding are shared with the whole community, and activity in 2013/14 will continue to support this aim.

Source of Referrals received Within Financial Year

	2012/13
Other service user	0
Friend/neighbour	4
Care Quality Commission	4
Education/Training/Workplace Establishment	4
Self- Referral	6
Housing (including supporting people)	6
Other (including probation, anonymous, contract staff, MAPPA, MARAC)	12
Police	13
Family member	23
Health Staff - Total	55
Social Care Staff (CASSR & Independent) - Total	97
	<u>224</u>

Source Of Referrals Received During 12/13



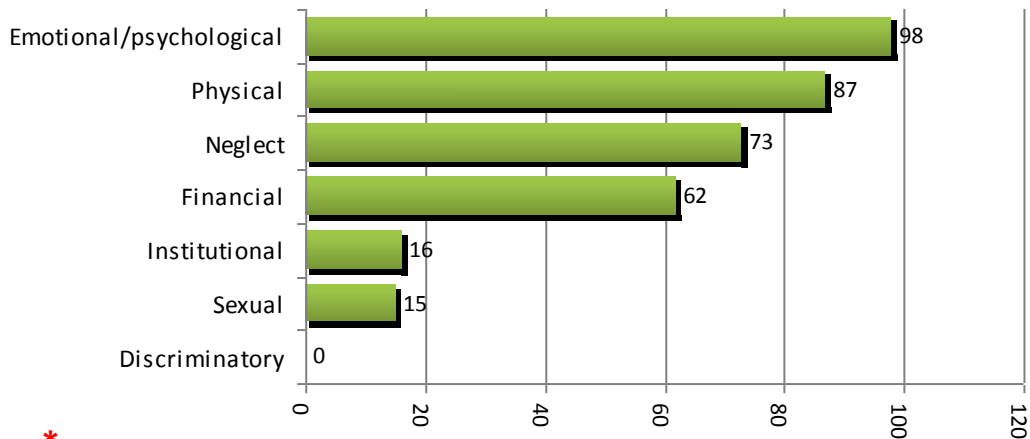
The table above shows the diverse source of concerns and alerts that are reported to the local authority. Every concern, whether raised by a citizen or professional, could help an adult at risk to end abuse. In some cases it may not be possible to give those reporting concerns feedback on the actions taken as a result of their alert. This is because we need to respect the confidentiality of those concerned. Nonetheless the Board continues to encourage anyone who has a concern about an adult at risk who may be experiencing abuse to get in touch with the council.

Nature of Alleged Abuse for referrals received During Financial Year*

	2012/13
Discriminatory	0
Sexual	15
Institutional	16
Financial	62
Neglect	73
Physical	87
Emotional/psychological	98

*multiple entries allowed

Alleged Abuse For Referrals Received During 12/13*



'Protecting adults at risk: London multi-agency policy and procedures to safeguard adults from abuse' sets out seven categories of abuse. The table above shows the number of referrals associated with each category in Bromley in 2012/13. In some cases more than one type of abuse may be alleged to have taken place. For example an individual may have experienced both neglect and financial abuse.

The increase in investigations where there are allegations of emotional/psychological abuse' demonstrates a key aspect of 'Protecting adults at risk'. The policy notes that "intent is not an issue at the point of deciding whether an act or failure to act is abuse; it is the impact of the act on the person and the harm or risk of harm to that individual". Emotional and psychological abuse can take many forms, some of which may be hard to identify. The increase in investigations into these allegations may indicate a growing awareness of the sometimes hidden impact of this type of abuse on individuals.

APPENDIX 1

BROMLEY SAFEGUARDING ADULTS BOARD - ANNUAL REPORT 2012/2013

**BROMLEY SAFEGUARDING ADULTS BOARD BUDGET MONITORING REPORT AS AT
31st MARCH 2013**

Description	Approved Budget	Total Outturn	Variance
EXPENDITURE	£	£	£
Employees			
Training Expenses	44,062	13,726	-30,336
Supplies and Services			
Training Equipment and Materials	150	22	-126
Printing and Stationery	2,500	160	-2,340
Other Office Expenses	5,133	0	-5,133
Agency Consultancy Fees	8,000	7,550	-450
Professional Subscriptions	350	52	-298
BSAB Conference Expenditure	3,500	3,436	-64
Publicity	3,500	601	-2,899
Miscellaneous Expenses	5,250	3,212	-2,038
	28,383	15,033	-13,350
TOTAL	72,445	28,759	43,686
INCOME			
Balance Brought forward	-35,475	14,431	49,906
Fees/Charges for Conference	-1,100	-1,190	-90
Contributions from Met Police	-5,000	-5,000	0
Contributions from Health	-18,000	-18,000	0
Contributions from LBB	-12,870	-19,000	-6,130
TOTAL	-72,445	-28,759	43,686
Balance Carried forward	-49,906		

BSAB STRATEGIC WORKPLAN 2012/13

Mission Statement	Communications BSAB partners ensure the wider community is well-informed of safeguarding issues, that signs of abuse and neglect are noticed and are handled correctly in good time	Performance Quality commissioned, regulated and accredited services, provided by staff with the appropriate level of training, ensure adults at risk are safeguarded at all times	Assurance A robust, outcome-focused safeguarding process and performance framework ensures that everyone undergoing safeguarding procedures receives a consistent, high quality service which is underpinned by multi-agency co-operation and learning.
What we want to achieve	<ul style="list-style-type: none"> ▪ Adults at risk are protected because the wider community is aware of their role in safeguarding adults who are at risk of abuse including those at risk of severe self-neglect ▪ Adults at risk who choose to buy care services privately are provided with guidance to protect them from the risk of abuse ▪ Adults at risk are safeguarded because BSAB partner agencies cascade key safeguarding messages to their staff. 	<ul style="list-style-type: none"> ▪ Adults at risk experience better outcomes because the Board ensures the learning from casework is applied to safeguarding policy and practice ▪ Adults at risk are supported to express their views and feelings about their experience of the safeguarding process to inform improvements in practice ▪ Adults at risk are protected because the Board is effective and holds partner agencies to account for the standard of their safeguarding performance including analysis of referral trends and performance data ▪ Adults at risk are protected through an agreed competence framework and training programme. 	<ul style="list-style-type: none"> ▪ Adults at risk are safeguarded and protected from harm through compliance with agreed performance frameworks ▪ Adults at risk are protected from harm because clear policies and procedures are in place for adult safeguarding ▪ Adults who have experienced abuse whether they are living in their own homes or receiving commissioned services benefit from consistent safeguarding practice ▪ Adults are safeguarded by robust quality assurance frameworks to audit safeguarding performance.
What we are going to do	<ul style="list-style-type: none"> ▪ Develop new ways of delivering key messages about adult safeguarding ▪ Continue to use MyLife web-portal, partner agency communication networks and public information events to improve community awareness of adult safeguarding issues ▪ Use the BSAB Newsletter to promote the principles, objectives and priorities of the BSAB Prevention Strategy 2011-2014 and inform the wider health and social care sector about adult safeguarding issues. 	<ul style="list-style-type: none"> ▪ Review BSAB representation, reporting arrangements and the governance of the Executive Committee ▪ Apply lessons learned and promote engagement with all relevant partner agencies ▪ Continue to develop the skills of the health and social care workforce to recognise and respond to abuse and to protect service users from the risk of abuse and neglect through promotion and review of the BSAB multi-agency safeguarding adults training programme. 	<ul style="list-style-type: none"> ▪ Use the NHS SAAF framework and agreed quality assurance processes to benchmark safeguarding performance by local NHS Trusts and commissioned provider services ▪ Oversee the implementation of recommendations from Serious Case Reviews to improve multi-agency cooperation, reduce risk and improve the safety and well-being of adults at risk ▪ Undertake a programme of multi-agency adult safeguarding audits and implement recommendations to raise safeguarding standards.