



ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

FINAL REPORT ADULT SAFEGUARDING

MAY 2011

CABINET

23 May 2011



Report of: Adult and Community Services Scrutiny Forum

Subject: FINAL REPORT – ADULT SAFEGUARDING

1. PURPOSE OF REPORT

1.1 To present the findings of the Adult and Community Services Scrutiny Forum following its investigation into Adult Safeguarding.

2. SETTING THE SCENE

2.1 At the meeting of this Forum on 5 July 2010, Members determined their work programme for the 2010/11 Municipal Year. The issue of 'Safeguarding of Adults' was selected as the Scrutiny topic for consideration during the current Municipal Year. Members suggested that this investigation should form the major in-depth Scrutiny Inquiry for the Forum's 2010/11 work programme.

2.2 In 2000, 'No Secrets: Guidance on developing and implementing multi agency protection of vulnerable adults' was introduced by the Department of Health.

2.3 No Secrets guidance described abuse as 'the violation of an individual's human and civil rights by any person or persons'. This right is underpinned by the duty, under the Human Rights Act (1998), on public agencies to intervene proportionately to protect the rights of citizen's, the guidance confirm that any intervention must not be excessive in comparison to the risk posed.

2.4 No Secrets guidance confirms that a multi-agency approach is required when investigating and intervening in order to safeguard and protect adults at risk of significant harm; with Social Services being the lead co-ordinating agency charged with the responsibility for ensuring, wherever possible, coherent and collaborative working.

2.5 The introduction of the No Secrets guidance also led to the creation of Adult Protection Committees and it emphasised the need for local procedures, co-

ordination, collection and monitoring of data; including the identification of categories of abuse.

3. OVERALL AIM OF THE SCRUTINY INVESTIGATION

3.1 The overall aim of the Scrutiny investigation was to explore and evaluate the provision of adult safeguarding services in Hartlepool.

4. TERMS OF REFERENCE FOR THE SCRUTINY INVESTIGATION

4.1 The Terms of Reference for the Scrutiny investigation were as outlined below:-

(a) To gain an understanding of:-

- (i) Legislation and policy relating to the provision of adult safeguarding services in Hartlepool;
- (ii) The overall aim of the provision of adult safeguarding services in Hartlepool and what a positive outcome looks like.

(b) To examine how adult safeguarding services are currently provided in Hartlepool (including areas of partnership working) and explore their effectiveness;

(c) To gain an understanding of the challenges facing the provision of adult safeguarding services in Hartlepool, including demographic pressures and the increasing prevalence of dementia;

(d) To gain an understanding of the impact of current and future budget pressures on the way in which adult safeguarding services are provided in Hartlepool;

(e) To explore how the adult safeguarding services could be provided in the future, giving due regard to:-

- (i) Improving the effectiveness and efficiency of the way in which the service is currently provided; and
- (ii) If / how the service could be provided at a reduced financial cost (within the resources available in the current economic climate).

5. MEMBERSHIP OF THE ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

5.1 The membership of the Scrutiny Forum was as detailed overleaf:-

Councillors Atkinson, Fleet, Griffin, Ingham, Lawton, A Marshall, McKenna, Preece and Shaw

Resident Representatives:
Christine Blakey and Evelyn Leck

6. METHODS OF INVESTIGATION

- 6.1 Members of the Adult and Community Services Scrutiny Forum met formally from 16 August 2010 to 28 March 2011 to discuss and receive evidence relating to this investigation. A detailed record of the issues raised during these meetings is available from the Council's Democratic Services.
- 6.2 A brief summary of the methods of investigation are outlined below:-
- (a) Detailed Officer reports and presentations supplemented by verbal evidence;
 - (b) Evidence from the Cabinet Member Portfolio Holder for Adult and Public Health Services;
 - (c) Presentations and verbal evidence from representatives of Salford and Middlesbrough Councils, NHS Salford and the Teeswide Safeguarding Vulnerable Adults Board;
 - (d) Member attendance at the Hartlepool Vulnerable Adult Protection Committee;
 - (e) Written evidence received from Cleveland Police North Tees Vulnerability Unit and the General Practitioner Commissioning Consortium Steering Group; and
 - (f) The views of local organisations and groups that use services.

FINDINGS

7 OVERALL AIM OF THE PROVISION OF SAFEGUARDING SERVICES, LEGISLATIVE AND POLICY REQUIREMENTS AND WHAT POSITIVE OUTCOMES LOOK LIKE

- 7.1 At the meeting of the Adult and Community Services Scrutiny Forum on 13 September 2010 Members received detailed evidence from the Head of Service in relation to Adult Safeguarding legislation and policy, the overall aim of the provision of safeguarding services and what positive outcomes look like.

Legislative and Policy Requirements

- 7.2 The Forum noted that safeguarding is subject to numerous and often contradictory pieces of legislation, the key pieces of which are detailed below:-
- NHS Community Care Act 1990
 - Human Rights Act 1998
 - The National Assistance Act 1948 s.29
 - Data Protection Act 1998
 - 'No Secrets' (Department of Health and Home Office 2000)
 - Fair Access To Care Services (Department of Health 2002)
 - Care Standards Act 2000
 - Protection of Vulnerable Adult Scheme (Department of Health 2004) known as the POVA list
 - Safeguarding Vulnerable Groups Act 2006 (replaced POVA)
 - Safeguarding Adults National Framework for Standards of Good Practice (Association of Directors of Social Services 2005)
 - Mental Capacity Act 2005 & Deprivation of Liberties Safeguards
- 7.3 Members learned that 'No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse' was an important and significantly influential document in the evolution of safeguarding vulnerable adults practice, as it provided the first governmental guidance on developing and implementing policies and procedures to protect adults from abuse . No Secrets was unequivocal that: 'Abuse is a violation of an individual's human and civil rights by any other person/or persons.'
- 7.4 No Secrets was based on the premise that some groups of adults experience a higher prevalence of abuse and neglect than the general population and they are not easily able to access services to enable them to live safer lives. The groups of people targeted were those 'who may be eligible for community care services' and within that group 'who were unable to protect themselves from significant harm' and referred to them as 'vulnerable adults' (NHS Community Care Act 1990).
- 7.5 The Forum were advised that since the publication of 'No Secrets' there has been significant legal and policy changes relating to health and social care. Fair Access to Care Services (Department of Health 2002) stresses risks to independence and wellbeing as the key criteria for determining eligibility for care services and replaces the concept of a 'vulnerable adult' with an assessment of the risk posed by the abuse and neglect to the quality of life of the individual concerned.
- 7.6 Members were informed that 'No Secrets' guidance set in place the foundation for the Association of Director's of Adult Social Services practice recommendations for Safeguarding Adults. This document provided a national framework of standards of good practice and outcomes in adult protection work, aiming to provide guidance and support to the aspirations of

'No Secrets'. The practice recommendations heightened the need for proportionate and measured responses to abuse and neglect of those who may need community services.

- 7.7 In addition to 'No Secrets' guidance the Forum was advised that the introduction of The Mental Capacity Act 2005 (implemented in 2007), aimed to ensure that the rights of disabled people are safeguarded, that those who are incapacitated are protected and to provide better protection to those people who provide care. The Mental Capacity Act now makes it a crime to ill-treat or wilfully neglect someone who lacks capacity. The duty to provide protection to those who do not have the mental capacity to access this for themselves has been made clear with the passing of the Mental Capacity Act 2005, and the associated 'Deprivation of Liberty Safeguards' (DOLS).

Positive Outcomes

- 7.8 At the meeting of the Adult and Community Services Scrutiny Forum on 13 September 2010 Members were keen to explore what a positive outcome looks like with regard to adult safeguarding.
- 7.9 Members formed working groups to examine a series of anonymised case studies and determined what a positive outcome would be in each case. Following the exercise the expected outcomes for the case studies were compared to the actual outcomes. Members commented on the differences between expected and actual outcomes and agreed that adult safeguarding was very complex in nature and had numerous pieces of contradictory legislation surrounding it.

Overall Aim of Safeguarding Services

- 7.10 At the meeting of the Adult and Community Services Scrutiny Forum on 28 February 2011 Members were advised by the Head of Service that the overall aim of safeguarding services is to protect the lives of the most vulnerable in our communities. Members agreed that, whilst the provision of safeguarding services is a challenge under current economic conditions, the local authority must balance its requirement to provide safeguarding services with efficiency savings, as the failure to do so may have very serious consequences.

8 PROVISION AND EFFECTIVENESS OF ADULT SAFEGUARDING SERVICES IN HARTLEPOOL (INCLUDING PARTNERSHIP WORKING)

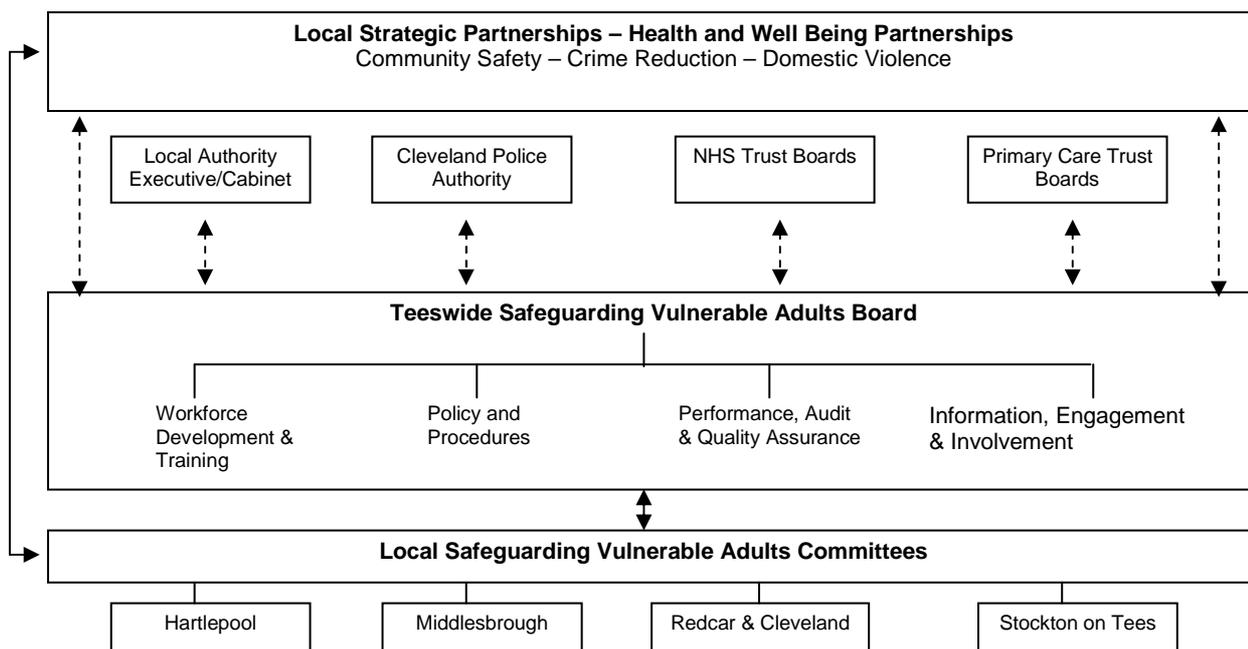
- 8.1 The Adult and Community Services Scrutiny Forum gathered evidence from a number of different sources in relation to the delivery and effectiveness of safeguarding services in Hartlepool. Information considered by Members is detailed as followed:-

Evidence from the Safeguarding Team

8.2 At the meeting of the Adult and Community Services Scrutiny Forum on 13 September 2010 the Head of Service provided Members with details of the framework of agencies responsible for the Safeguarding of Adults in Hartlepool, as detailed below in diagram 1:-

Diagram 1

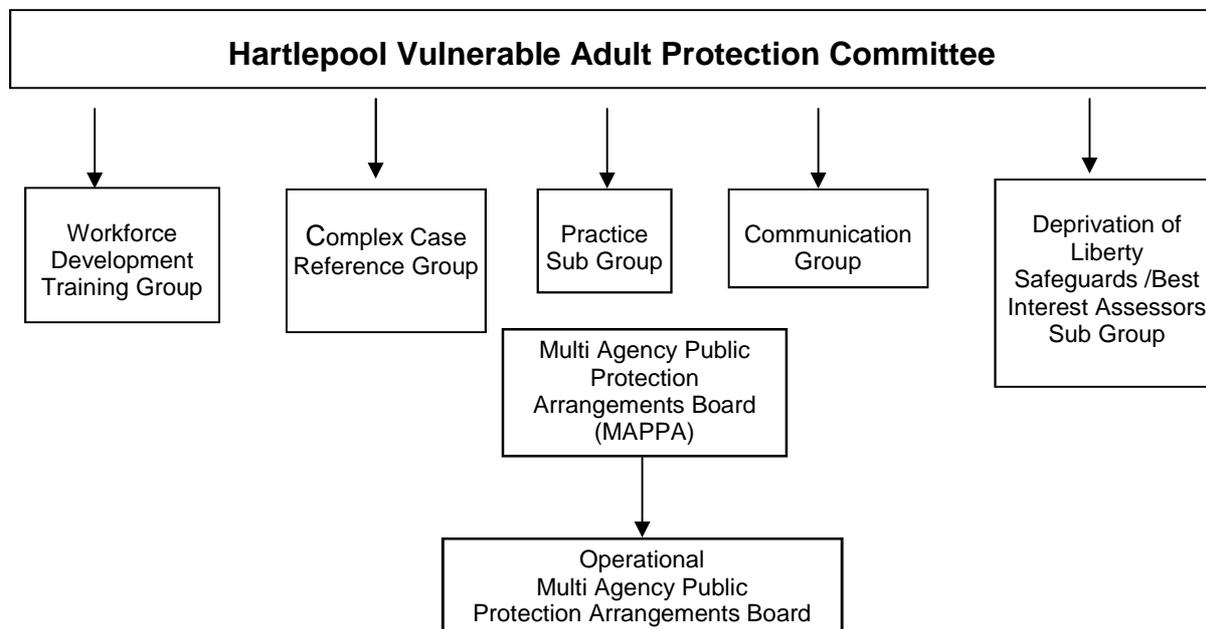
STRATEGIC VULNERABLE ADULT FRAMEWORK MANAGING RISK AND SAFEGUARDING ADULTS AT RISK OF HARM



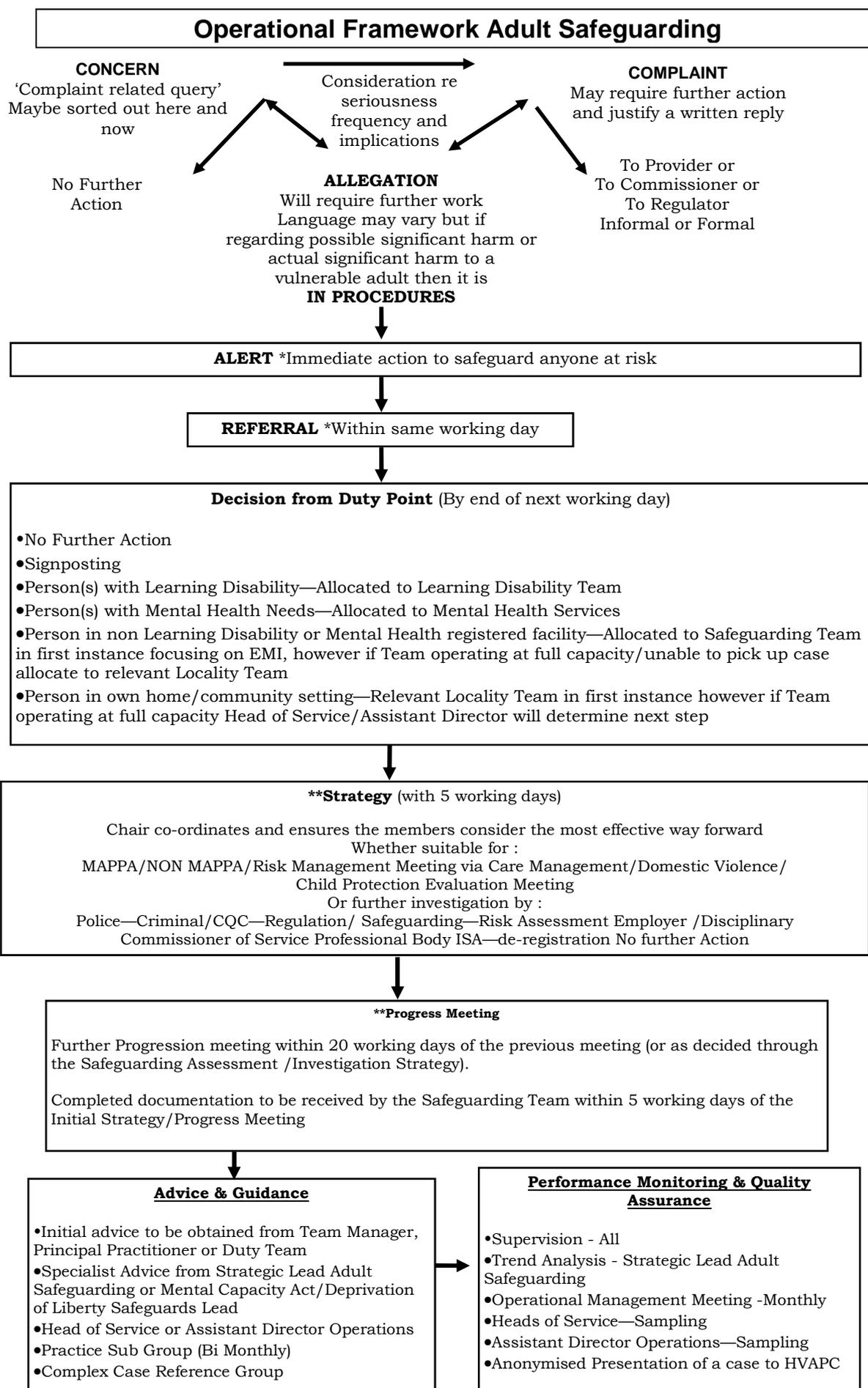
8.3 Members learned that in addition to being part of the Teeswide Adult Safeguarding Board each local authority in the Tees Valley also has its own Vulnerable Adult Protection Committee. Hartlepool’s committee is chaired by officers from the Child and Adult Services Department and is made up of a range of professionals and stakeholders, who formally represent organisations in the statutory, independent and third sector. The structure of the Hartlepool Vulnerable Adult Protection Committee and its sub groups are highlighted overleaf in diagram 2.

Diagram 2

HARTLEPOOL STRATEGIC FRAMEWORK
Managing Risk and Safeguarding People at Risk from Significant Harm



- 8.4 The Forum was informed that Hartlepool was the only local authority in the area with a complex case reference group. This group has been meeting on a monthly basis for approximately 10 months and provides a forum for all interested parties to discuss and share their views on a particular case. The group provides advice and direction, especially with regard to the legal aspects of cases.
- 8.5 Members of the Forum were particularly interested in the membership of this group and were concerned that all appropriate agencies should be represented. The Head of Service advised the Forum that were it felt representation from a particular agency was required the case would be adjourned until a time when a representative from that agency was able to attend.
- 8.6 The most serious cases, where there is a risk of violence or a risk to the public, are taken to a Multi Agency Public Protection Arrangements Board (MAPPA) which works alongside the Police to ensure the victim and the public are protected.
- 8.7 Members were also informed that in addition to the sub groups outlined in diagram 2, that the Committee has a safeguarding action plan which identifies actions that should be taken to make improvements in safeguarding and protection of adults, this is also used to monitor performance and measure progress made. The operational framework in place with regard to adult safeguarding as shown overleaf.



- 8.8 Members of the Forum were also provided with the Teeswide Safeguarding Vulnerable Adults Board multi-agency procedures, which detail the specific steps involved in a safeguarding referral and the key roles and responsibilities of those involved in safeguarding.
- 8.9 Members were advised that the safeguarding process, as detailed in the Teeswide Safeguarding Adults Multi Agency Procedures, consist of the following stages:

Stage 1: Alert

Where a member of staff is informed or has concerns that abuse or neglect has occurred or is suspected. The member of staff is the 'alerter' and has a duty to share the information with the person in their organisation responsible for referring.

Stage 2: Referral

Referring is the responsibility of the person who receives the information from the 'alerter'. The 'referrer' will refer all reports of potential abuse or neglect of a vulnerable adult. A referral is made to the Adult Social Care Duty Team or, out of hours, to the Emergency Duty Team.

Stage 3: Safeguarding Procedures Referral

A decision is made as to whether the safeguarding procedures are appropriate to address the concerns of alternative responses are identified.

Stage 4: Strategy

A multi-agency plan is agreed to assess the risk, identify the safeguarding assessment and / or investigation (s) required and instigate a safeguarding plan.

Stage 5: Safeguarding Assessment/Investigation

The safeguarding assessment / investigation(s) are carried out by identified people.

Stage 6: Safeguarding Plan

The safeguarding plan stage includes analysis of concern through evaluation of safeguarding assessment / investigation(s), implementation of the safeguarding plan with the involvement of the vulnerable adult, their advocate and relatives / carers if appropriate and a review of the plan at agreed timescales.

Evidence from the Teeswide Safeguarding Vulnerable Adults Committee

- 8.10 At the meeting of the Adult and Community Services Scrutiny Forum on 28 February 2011 Members considered evidence from the Business Manager from the Teeswide Safeguarding Vulnerable Adults Board.

- 8.11 Members were informed that in 2008 Middlesbrough Council commissioned a report into its safeguarding services. This report made recommendations on actions required to make services fit for purpose, but it also examined strategic capacity and the partnership arrangements required to underpin those arrangements for the foreseeable future.
- 8.12 The report concluded in a key recommendation; that a sensible way to proceed was to combine forces with other councils and partners (notably Cleveland Police and Health Service Partners) on a Teeswide basis to deliver a common strategic agenda. The Teeswide Safeguarding Vulnerable Adults Board was formed on the back of those recommendations.
- 8.13 The first meeting of the Teeswide Safeguarding Vulnerable Adults Board was in May 2009, with the Business Manager coming into post in July 2010.
- 8.14 Members were informed that the Boards strategic agenda is as follows:-
- To develop shared ownership of the safeguarding vulnerable adults agenda across all relevant agencies Teeswide;
 - To implement national guidance for the safeguarding of vulnerable adults;
 - To develop shared responses to national policy initiatives and drivers in relation to the safeguarding of vulnerable adults;
 - To develop, promote, implement and monitor policy, procedures and practice guidance in relation to safeguarding vulnerable adults;
 - To develop a joint training strategy and ensure the joint commissioning of training and a joint approach to workforce development;
 - To ensure the dissemination and analysis of national information, to inform and commission research, to examine the implications of information and research and to make recommendations to improve practice;
 - To ensure learning from serious case reviews, serious untoward incidents (SUIs) and incidents that require reporting is shared and implemented across all relevant agencies;
 - To ensure clear, consistent and robust interface with relevant interagency procedures including Multi-Agency Public Protection Arrangements (MAPPA), Multi-Agency Risk Assessment Conference (MARAC) and Crime and Disorder Reduction Partnerships (CDRP);
 - To ensure monitoring and analysis of statistical data locally, regionally and nationally in order to improve safeguarding outcomes for vulnerable adults Teeswide.

- 8.15 The Forum was advised that the role of the Board is discharged through 4 working groups each chaired by partners of the Board as follows:-

Policy and Procedures Group

Chaired by a representative from the Primary Care Trust. The policies of the Teeswide Safeguarding Vulnerable Adults Board have recently been rewritten and are currently being circulated for signature. The group are currently working on rewriting the procedures of the Board.

Workforce Development Group

Chaired by the Strategic Safeguarding Lead from Middlesbrough Council. The group identifies and co-ordinates the training needs of the members of the Board and which creates efficiencies when compared to commissioning training individually.

Information Engagement and Involvement Group

Chaired by the Head of Service from Hartlepool Borough Council. This group is looking at engaging vulnerable adults for their input to improve services and to link with the current government thinking about the 'softer' outcomes e.g. about people noticing when things go wrong and putting them right, vulnerable adults feeling safe etc, linking to a wider preventative agenda.

Performance Audit and Quality Group

Chaired by the Boards Business Manager. This group examines previous cases for lessons learned. The group is also developing a suite of indicators to allow members of the Board to benchmark their own organisations, which will in turn allow agencies to develop action plans to ensure they are meeting the required levels. This will be carried out across the members of the Teeswide Safeguarding Vulnerable Adults Board.

- 8.16 Members noted that each head of the group provides a progress report to the Board on a quarterly basis detailing the work that has been completed.

- 8.17 The Forum was keen to explore the level of attendance at the Teeswide Safeguarding Vulnerable Adults Board and also whether representatives of organisations who did attend were of an appropriately senior level. Members were advised by the Business Manager that attendance is secured by all agencies signing up to the memo of understanding, which requires the following:-

- Attendance by a named representative who has such seniority that they can commit their organisation and resources to initiatives, the work of the Board etc without reference to others in their respective organisation;
- A named deputy who has the same seniority within their organisation.

- 8.18 The Forum also learned that attendance is monitoring against a target of 100% and where attendance falls to 80% within a rolling 12 month period a letter is sent to the head of the organisation concerned seeking assurance of future commitment to the Board, Members also learned that attendance

figures are published by member, deputy and organisation in the Teeswide Annual Report.

- 8.19 Members were advised that any presentations received at Board meetings are usually from health agencies, the heads of the sub groups and the Business Manager.
- 8.20 The Business Manager has identified that the contribution to board meetings by members is an area that requires further development. One idea being considered is asking each member to present a paper on a rolling basis at the meeting to demonstrate what they are doing to safeguard vulnerable adults. An example of this would be the mapping exercise the fire service is undertaking in Hartlepool. When the Fire Service enters the property of a vulnerable adult a note is made of where that person sleeps, should an incident occur at that address in the future the time taken to locate the person could be shortened. This process was shared at the Board and is now being considered by other Fire Authorities in the Tees Valley.
- 8.21 The priorities for the Teeswide Safeguarding Vulnerable Adults Board are discharged through the 4 subgroups identified at 8.15. The priorities for the forthcoming year are yet to be decided, the Board have however determined a number of initiatives they wish to undertake including the following:-
- Working with the Crown Prosecution Service and the Police to increase the chance of a successful conviction for crimes against vulnerable adults;
 - Development of strategic performance indicators for each service to benchmark themselves against a set of standards;
 - Develop an information sharing protocol with the Care quality Commission in relation to national care home providers, to share areas of concern across the region; and
 - A campaign on Real Radio publicising the abuse of vulnerable adults and providing information about what to do if you suspect a vulnerable adult is being abused.

Evidence from the Portfolio Holder for Adult and Public Health Services

- 8.22 Members of the Forum were delighted to receive evidence from the Portfolio Holder for Adult and Public Health Services at the meeting of the Adult and Community Services Scrutiny Forum on 13 September 2010, regarding his views on the Safeguarding of Adults.
- 8.23 The Portfolio Holder commented on the statutory duties of the local authority to provide adult social care services and the importance of how those services were provided. The Portfolio Holder was of the view that current services were delivered very well and highlighted that the extent and importance of the service was not recognised as a priority of the Council by the general community, as the service was not as visible as other services provided.

- 8.24 The Portfolio Holder was keen to stress that not every eventuality can be planned for, however the speed of the response is important and this cannot be faulted, in his opinion, in Hartlepool.
- 8.25 Reference was made to the positive outcomes resulting from changes in legislation, including the appointment of dignity in care champions, as this has encouraged individuals to report any instances of bad practice or abuse.

Independent Review of Safeguarding Services in Hartlepool

- 8.26 When the Adult and Community Services Scrutiny Forum met on 18 October 2010 Members considered the results of an independent inspection of safeguarding arrangements in Hartlepool that had taken place in March 2009.
- 8.27 The Forum was informed by the Strategic Lead in Safeguarding and Vulnerability, that the inspection had been commissioned to assess the operational arrangements for safeguarding adults in line with standards operated by the Care Standards Commission (now the Care Quality Commission); and to identify and recommend any service changes needed to meet future requirements. The findings of the report were summarised as follows:-
- Arrangements for adult safeguarding were well established;
 - Practitioners and managers were clear and confident about their role;
 - Supervision and support was evident from files and discussions with practitioners;
 - Files show evidence of audit and supervision;
 - Interagency working was good and relationships were sound; and
 - There was a culture of support from line managers and being able to seek advice and support from other managers and colleagues.

- 8.28 The key recommendations identified are as follows:-
- Stronger links should be established with doctors and other professionals working in general practice;
 - Consideration should be given to the relationship between the Care Programme Approach and adult safeguarding;
 - That integrated teams consider the role of all of their members to ensure they are fully participating in adult safeguarding;
 - That guidance is developed on information sharing with service users and their carers and their involvement in adult safeguarding meetings;
 - That consideration is given to the role of the co-ordinator to ensure a balance between operational input and strategic duties for the local authority;
 - That the co-ordinator is asked to undertake or commission regular audits of compliance with timescales, procedures and outcomes and provide regular reports for senior managers; and

- That consideration is given to referrals which result in no further action, to explore thresholds and consistency.

Evidence from Cleveland Police North Tees Vulnerability Unit

- 8.29 At the meeting of the Adult and Community Services Scrutiny Forum on 28 February 2011 Members considered written evidence from Cleveland Police North Tees Vulnerability Unit.
- 8.30 The Forum learned that there are two Vulnerability Unit teams – one north of the Tees (Hartlepool and Stockton) and one south of the Tees (Middlesbrough and Redcar and Cleveland).
- 8.31 The North and South Tees Vulnerability Units were established in July 2009 to bring together the working practices of child abuse investigations, vulnerable adult abuse investigations and to investigate serious and complex cases of domestic violence. Each team is headed by a Detective Inspector and has four Detective sergeants (two specialise in child abuse work, two in vulnerable adult investigations and serious and complex domestic violence).
- 8.32 There are 20 detective constables with the North Tees team. Ten of these are child abuse investigators, nine are domestic violence investigators and one is the dedicated vulnerable adult investigator. There are also seven police staff involved in risk assessment, safety planning, preparation and dissemination of police information and research.
- 8.33 The Vulnerability Units investigate all allegations perpetrated against a vulnerable adult where the suspect has ‘custody, care or control of the vulnerable adult.’ This includes paid carers or family who have care of their relative. However, Hartlepool District Police are responsible for investigating incidents within the community e.g. where an elderly resident or a person with a disability is being harassed by groups of youths.
- 8.34 Members were informed that in relation to vulnerable adults the Safeguarding Team is the first point of contact for Cleveland Police to link with partner agencies. Referrals are made to the Police from the Adult Protection Coordinator at Hartlepool Borough Council. Referrals across Tees have grown in recent years and this has included Hartlepool.
- 8.35 Once a referral is accepted by the Vulnerability Unit the case is researched and the dedicated investigator will attend the multi agency strategy meeting. The police are committed to working in partnership under ‘No Secrets’ guidance.
- 8.36 On occasion, when immediate evidence needs to be secured the police will act independently and the police investigation will take precedence. However, partners are updated on the progress of the case (provided potential disclosure to suspects is not compromised). If necessary a brief telephone strategy meeting can be held.

- 8.37 The Forum noted that the primary role of the police is to investigate criminal allegations. The police will utilise their powers where necessary to arrest, detain, search or interview suspects. The police will take statements from victims and witnesses and ensure support for victims is given in accordance with the legal requirements of the 'Victim's Code of Practice' (VCOP). When required the services of Scenes of Crime Officers (SOCO) are deployed. The police will build case files to put to the Crown Prosecution Service (CPS). It is the CPS who make the charging decision.
- 8.38 In addition to criminal investigations police will also assist in the safeguarding process. This can include joint home visits with care / medical staff. This is particularly relevant if entering private properties and there is a potential for violence / hostility. Police can enable another professional to carry out their task without interference or intimidation from family members etc.
- 8.39 Abuse against vulnerable adults can take many forms including physical abuse, sexual abuse, financial abuse or wilful neglect. The Mental Capacity Act 2005 introduced the new offence of '*Wilful neglect of a person lacking capacity*' (section 44 MCA).
- 8.40 Members were advised that as this is relatively new legislation very little case law is available. The essence of section 44 is that if a person is *wilfully* neglected (that is with malice or recklessness rather than accidental) then a criminal offence is committed. This is a complex area of law as the police must prove not only that the act is wilful but also that the person lacked capacity. If the victim had some form of capacity then the offence is not made out.
- 8.41 Prosecutions are therefore rare. However a successful section 44 prosecution was conducted in Stockton last year resulting in a suspended prison sentence for the care worker.
- 8.42 The concept of capacity also becomes an issue when gathering medical evidence i.e. *who* is it that 'consents' for an examination of a vulnerable adult if they lack capacity. Police need to discuss fully with all partners (Mental Capacity Advocates / Deprivation of Liberty Safeguards leads or medical professionals) on the proportionality of carrying out what may be a very invasive procedure e.g. an allegation of rape where an extremely serious crime has occurred. An examination will be crucial to the investigation and conviction of an offender, yet the procedure may cause a great deal of distress to the victim.

Evidence from Salford Council and NHS Salford

- 8.43 The Forum was delighted to welcome representatives from Salford Council and NHS Salford to the meeting of the Adult and Community Services Scrutiny Forum on 13 December 2010, to provide evidence in relation to their recent Care Quality Commission inspection, in which they received an

excellent rating with regard to Adult Safeguarding and were assessed as having an excellent capacity to improve.

- 8.44 The Adult Safeguarding Co-ordinator for Salford Council highlighted a number of areas which had been identified by the Care Quality Commission as contributing to the excellent rating received, these included:-
- Good basic safeguarding systems and record keeping;
 - Staff who were keen and confident in their work;
 - A happy workforce;
 - That partnership work with NHS Salford was cutting edge;
 - Work with Greater Manchester Police was exemplary;
 - Work with Sustainable Regeneration was cutting edge; and
 - Quality of partnership working was excellent overall.
- 8.45 The Adult Safeguarding Co-ordinator advised Members that Salford Council were complimented on the fact that the safeguarding policies and procedures were easily readable and that systems were in place to guide staff through difficult and complex situations. The accurate recording of cases was also highlighted as being extremely important and Salford had recently been commended by a high court judge regarding the quality of case information.
- 8.46 As in Hartlepool, Salford operates an Adult Protection Committee which has been in existence for 5 years. The committee has an independent chair from Salford University and has a number of sub groups, the most significant of which are the Mental Capacity Act and Deprivation of Liberty Safeguards group and the Crime and Disorder Reduction Partnership. There is a clear structure of who is accountable to whom.
- 8.47 Members also found the details of partnership working extremely informative. The Adult Safeguarding Co-ordinator detailed the work carried out with the NHS, Greater Manchester Police and Sustainable Regeneration, all of which was described as cutting edge by the Care Quality Commission.
- 8.48 Members were informed that there was a long history of joint working in Salford where nurses, social workers and general practitioners all work together. There are integrated learning disability and mental health services and the older peoples and adults teams sit with district nurses in general practitioners surgeries.
- 8.49 The Forum was interested to learn that Salford Royal NHS Foundation Trust and Greater Manchester West Mental Health NHS Foundation Trust (Salford) had recognised that they, as NHS Trusts, faced elements of risk with regard to the safeguarding agenda and were now firmly on board with partnership working in this area.
- 8.50 Another key partner is Greater Manchester Police (Salford Division). Safeguarding training is given to the Police and there are a number of specific safeguarding officers who are allocated to cases and therefore

understand the agenda clearly. The presence of the police adds seriousness to the incident and makes people re-think their actions.

- 8.51 Members were very interested to learn about police welfare notices, these are issued to Salford Council when an incident has been attended by the Police but no crime committed. If officers are concerned safeguarding intervention may be needed a 'police welfare notice' is issued to the council safeguarding team to investigate. This also works in reverse, where it is common practice to share safeguarding alerts with the police for their views. Members also noted that coroners referred information through to the safeguarding unit, as do the Ambulance Service.
- 8.52 Another example of excellent partnership working was the work with Sustainable Regeneration which provided a platform for social registered landlords and other agency contacts to work together to deliver the citywide vulnerable adult strategy. Housing welfare notices can be issued to the safeguarding team in a similar to police welfare notices, where a landlord feels there may be a need for safeguarding intervention. These notices are a way of sharing information with agencies.

Evidence from Middlesbrough Council

- 8.53 The Adult and Community Services Scrutiny Forum were delighted to welcome the Strategic Lead in Safeguarding Adults from Middlesbrough Council to give evidence to the Forum regarding Middlesbrough's Care Quality Commission Inspection.
- 8.54 Members of the Forum were informed by the Strategic Lead in Safeguarding Adults areas identified as doing well to support outcomes were as follows:-
- Social care activity contributed to community safety and issues around harassment and hate crimes were addressed;
 - People were made safe once alerts received and complex cases were recognised;
 - Issues around mental capacity taken very seriously and good attempts made to deal with legal complexities;
 - Safeguarding issues addressed in contracting arrangements; and
 - Sound foundation and intermediate training given to council staff and providers.
- 8.55 The majority of the areas for improving outcomes relate to partnership working and the need to ensure that:-
- Case practice is of consistent good quality;
 - Integrated mental capacity act services are used appropriately in safeguarding cases;
 - All relevant staff are given advanced safeguarding training;
 - Staff across all sectors are appropriately aware of safeguarding issues and their management; and

- Middlesbrough Safeguarding Committee is supported by robust performance and management information.
- 8.56 Middlesbrough plan to address the concerns of the Care Quality Commission by introducing a number of measures including:-
- Using a care quality commission tool to review consistency of case practice;
 - Enhance minute taking and recording of decisions and discussions and guidelines are available at every meeting;
 - Ensure advanced training is delivered where required;
 - Conduct an audit of safeguarding awareness;
 - Consolidate data collection systems and issue activity reports to the Safeguarding Committee which include analysis of this data; and
 - Development of partner agency agreement and roles and responsibilities clarified.
- 8.57 Members noted that Middlesbrough's priorities were to embed safeguarding across adult social care and the wider council, improve the outcomes of adults at risk and to develop the personalisation of safeguarding.
- 8.58 The Forum was advised that the implications of the budget cuts were not yet known in Middlesbrough, though the safeguarding unit was very small and so was likely to be protected.

Evidence from the General Practitioner Commissioning Consortium Steering Group

- 8.59 At the meeting of the Forum on 28 February 2011 Members considered written evidence from the General Practitioner Commissioning Steering Group.
- 8.60 The Forum noted that GPs through their professional appraisal will ensure that they have received training or updates in relation to specific areas of their development which includes children's safeguarding. As a matter of routine General Practitioners do not undertake training in relation to adult safeguarding, but are aware of issues associated with vulnerable adults and are receptive to ensuring that their knowledge and understanding of adult safeguarding is current.

Member Attendance at the Adult Protection Committee

- 8.61 Representatives of the Adult and Community Services Scrutiny Forum were delighted to be invited to the meeting of the Hartlepool Vulnerable Adults Protection Committee on 15 February 2011.
- 8.62 Members were advised that the role of members of the Hartlepool Vulnerable Adults Protection Committee was to work together as inter-agency partnerships to safeguard and promote the welfare of vulnerable

adults, the principles of safeguarding and adult protection work, respect for a person's individuality, dignity, human rights and the right to live their life free from violence and abuse and that this role is discharge through consultation and communication about safeguarding and adult protection issues with local provider organisations, user led groups, carers groups and voluntary organisations.

- 8.63 Members of the Hartlepool Vulnerable Adults Protection Committee also raise awareness within the wider community of the need to safeguard vulnerable adults and promote their welfare and to explain how the wider community can contribute to these objectives and support organisations in their informing and training of employees to carry out their responsibilities in accordance with the Teeswide multi-agency Policy, Procedures and Practice Guidance.
- 8.64 The Hartlepool Vulnerable Adults Protection Committee also collates information which can be used to inform and change multi-agency practice.
- 8.65 The representatives of the Adult and Community Services Scrutiny Forum learned that the Safeguarding Adults / Adult Protection Co-ordinators and all statutory partner agencies are represented on the Hartlepool Vulnerable Adults Protection Committee, these include:-
- Local Authority Department of Adult Social Care;
 - Primary Care Trusts;
 - Cleveland Fire Service;
 - NHS Foundation Trusts; and
 - Cleveland Police.
- 8.66 Additional members include representation from local provider organisations, user led groups, carers groups and voluntary organisations, to ensure a multi agency approach to Safeguarding.
- 8.67 Attendance is recorded at Hartlepool Vulnerable Adult Protection Committee meetings, and highlighted annually in the annual report.
- 8.68 Members also acknowledged that the Committee had recently attempted to strengthen the membership and attendance of the Hartlepool Vulnerable Adults Protection Committee by introducing a Memorandum of Understanding, the purpose of which is to provide a framework to define roles, responsibilities, accountability and authority for all partner agencies.
- 8.69 Members of the Forum were interested to hear the view of the Committee on the challenges facing the provision of safeguarding services going forward.
- 8.70 The Committee agreed that it was a worrying time for everyone as front line services will be affected by budget cuts and there is the potential that more vulnerable citizens would not be identified as requiring services. They felt that there would be an increased need for front line services, not a reduction, due to the ageing population. The Committee also recognised that a greater

number of older carers would be inevitable, with more specialist services required for an increase in the prevalence of dementia.

- 8.71 The Committee also informed Members that at present all the safeguarding foundation awareness training that is commissioned and coordinated on behalf of the committee is funded from area based grant, which will reduce on a yearly basis. Going forward a recharge to users may need to apply for this training. Committee members felt that there was a need to improve the Committee's understanding of what the member organisations are delivering to staff with regards to foundation awareness training.
- 8.72 Members were advised that advanced safeguarding training has a social work focus and is also funded by the Child and Adult Services Department. There are also other courses that have close links to safeguarding including dementia, managing behaviours etc. The Committee needs to consider areas and ensure they are covered in the training programmes in the future.
- 8.73 Members of the Adult and Community Services Scrutiny Forum requested information on how much subsidy the local authority was providing to other agencies for safeguarding training.
- 8.74 The representatives of the Adult and Community Services Scrutiny Forum who attended the meeting of the Hartlepool Vulnerable Adult Protection Committee discussed the membership of the Committee at the meeting of the Forum on 28 February 2011 and noted that whilst the Portfolio Holder for Adult and Public Health Services attended the meeting, there was no representation from backbench members.
- 8.75 Members also felt that it was appropriate for the Adult and Community Services Scrutiny Forum to receive regular updates from the Child and Adult Services Department in relation to the provision of adult services.

9 THE CHALLENGES FACING THE PROVISION OF ADULTS SAFEGUARDING SERVICES IN HARTLEPOOL

- 9.1 The Adult and Community Services Scrutiny Forum gathered evidence from a number of sources to determine the challenges facing the provision of adult safeguarding services, these are detailed overleaf:-

Evidence from the Safeguarding Team

- 9.3 At the meeting of the Adult and Community Services Scrutiny Forum on 18 October 2010 the Forum discussed the challenges facing the provision of Adult Safeguarding Services. Members determined that the greatest challenges came from demographic pressures and the increased numbers of people accessing services, Members also raised concerns regarding people only accessing services once their needs were complex.

- 9.4 Members heard evidence from the Head of Service detailing the challenges identified by the Child and Adult Services Department. It was stressed that the challenges facing the provision of safeguarding services cannot be considered in isolation, as the working environment within which it operates is demanding due to the combined pressures of demography, changes in legislation and the fiscal deficit. Challenges identified included the following:-
- An ageing population, more people with dementia, more people with complex needs;
 - An increase in the number of people exhibiting challenging behaviours as well as people with profound disabilities living longer and requiring more care and intensive support;
 - Increased awareness of adult abuse due to the strengthening of safeguarding procedures for vulnerable adults. The Mental Capacity Act 2005 and the Deprivation of Liberty Standards, whilst welcomed, all impact on the overall workload of social workers and social care officers;
 - The personalisation agenda, self directed support, balancing people's right to chose with the right to protection and the department's statutory duty of care and responsibility for the effective and efficient use of public funds, has greatly increased the complexity of social care;
 - An 18% reduction in the number of social care staff over the last 3 years in addition to some social worker posts reverting to social care officer post and the use of team managers to carry case loads;
 - A 24% increase in the number of people reviewed in the last 3 years;
 - A 10% decline in carers' assessments and reviews over the last 3 years.
- 9.5 The Forum were advised that the Safeguarding Team has a key role in managing and supporting effective safeguarding practices across both the local authority and private/independent sector adult social care services in Hartlepool. In the time span 2007–2010 safeguarding referrals increased by 34%. This increase reflects the considerable resources put into raising awareness across agencies, services and the public in respect of Safeguarding Adults. There has been a 7.4% decline in referrals between April – July 2010 and Members were advised that this may be a result of the safeguarding processes now being 'bedded in' and better understood across the health and social care economy.
- 9.6 Members were informed that Deprivation of Liberty Safeguards (DOLS) referrals increased from 2 in April 2009 (when the new process went live) to 41 in December 2009. The Deprivation of Liberty Safeguards process is a requirement that anyone who may not have the capacity to make a decision, in terms of either accommodation or medical treatment, must be assessed to determine whether they have capacity or not. Where incapacity is shown, then decisions may be taken for them in regards to medication or where they should live. The process is onerous and laid out within the parameters of the Mental Capacity Act 2005.
- 9.7 The Forum learned that the increase in Deprivation of Liberty Safeguards referrals between April - December 2009 reflects the focused resources put into raising awareness of Deprivation of Liberty Safeguards among hospital

and care/nursing home staff. Between January 2010 and July 2010, the number of Deprivation of Liberty Safeguards referrals coming into the Safeguarding Team had reduced by 12%. These numbers may continue to decrease as care homes become more experienced in preventing the need for a Deprivation of Liberty Safeguards referral. However, the predicted rise in the number of people who have dementia may result in Deprivation of Liberty Safeguards referrals remaining at a high level or even increasing.

- 9.8 The Deprivation of Liberty Safeguards framework was implemented by training existing Social Workers to take on the role of Best Interest Assessor (BIA), rather than recruiting any additional staff to meet the additional workload. Initially this negatively impacted on the capacity of Social Workers, as it took time to train the professional staff and therefore the number of appropriately trained staff was limited. However, Members were advised that the Safeguarding Team were now mid-way through a programme of training and were encouraged to note that the available number of Local Authority staff qualified to undertake this time-consuming and complex role has increased.
- 9.9 At the meeting of the Adult and Community Services Forum on 28 February 2011 the Head of Service presented Members with the table overleaf, which highlights the increase in activity in the department between April 2007 and March 2010. Members were advised that the challenges shown overleaf also affect service provision from all partner agencies.

Activity April 2007 – March 2010

Hospital Discharges	Referrals → 20% increase
Locality Based Social Work Teams	Caseloads → 34 % (average) increase
Occupational Therapy	Referrals → 15% increase
Mental Health Service	Referrals → 56% increase
Learning Disability Services	Referrals → 11% increase
Direct Care and Support Service	Referrals → 24% increase
Statutory Reviews	Reviews → 24% increase
Deprivation of Liberty Safeguards	Introduced April 2009 – 163 Assessments

Evidence from the Cleveland Police North Tees Vulnerability Unit

- 9.10 At their meeting on 28 February 2011 members of the Adult and Community Services Scrutiny Forum considered written evidence from Cleveland Police North Tees Vulnerability Unit.
- 9.11 Members noted that with an increasingly elderly population all services are stretched and Policing is no different. The investigation of abuse against vulnerable adults is one of many policing requirements. Allocation of resources must compete with other demands (e.g. Neighbourhood Policing priorities, Safer Hartlepool Partnership priorities, terrorism, drugs etc).
- 9.12 The Forum noted (with concern) that there is only one dedicated vulnerable adult investigator for the whole of the North Tees area (Hartlepool and Stockton) and that it is essential the detective's time must be concentrated on the most appropriate referrals.
- 9.13 Members were advised that in Hartlepool police received 4 referrals in December 2010 and 6 in January 2011. From these there are currently two 'live' investigations. (One for physical abuse, the other financial abuse). However during these same two months police received a total of 33 referrals from Stockton.
- 9.14 The Head of Service informed Members that to have one dedicated vulnerable adult detective for the North Tees was challenging, but on an operation basis the relationship between the police and the safeguarding team was excellent.
- 9.15 Members also noted that if a serious allegation is referred to police (e.g. death by wilful neglect in Stockton in January 2011 or a multiple victim rape allegation in Hartlepool in 2010) then additional officers are allocated and the Detective Inspector is appointed as senior investigating officer.

Evidence from the Portfolio Holder for Adult and Public Health Services

- 9.16 At the meeting of the Adult and Community Services Scrutiny Forum on 13 September 2010 Members welcomed the views of the portfolio holder for Adult and Public Health Services.
- 9.17 The Portfolio Holder outlined what he felt to be the challenges facing the future provision of services, these included current and future budgetary pressures and the content of the recent Health White Paper. The Portfolio Holder raised concerns that the White Paper proposals may be to the detriment of services, he felt that there were benefits of the Council continuing to deliver the service and stressed the importance of retaining the current Health Overview and Scrutiny powers within the Council.

9.18 When commenting on the increasing number of safeguarding referrals being made, the Portfolio Holder believed that this could either be due to an increase in instances occurring or an increased awareness of how and when to report concerns. The Portfolio Holder believed it was the latter and that due to the work of the Child and Adult Services Department that people were less afraid to come forward.

10 THE IMPACT OF CURRENT AND FUTURE BUDGET PRESSURES ON THE WAY IN WHICH ADULT SAFEGUARDING SERVICES ARE PROVIDED IN HARTLEPOOL

10.1 Members of the Adult and Community Services Scrutiny Forum gathered evidence in relation to the impact of current and future budget pressures on the provision of safeguarding services in Hartlepool. Evidence gathered is detailed as follows:-

Evidence from the Safeguarding Team

10.2 At the meeting of the Adult and Community Services Scrutiny Forum on 13 December 2010 Members were informed by the Head of Service of the areas which may impact on the provision of services in the future, these included:-

- The increase in activity (+30% over the last 3 years) leading to an increased risk;
- Budget cuts potentially leading to a reduction in staffing;
- Review of roles and responsibilities of the Police Service potentially leading to a reduced capacity in community policing and potential delays in commencing investigations.

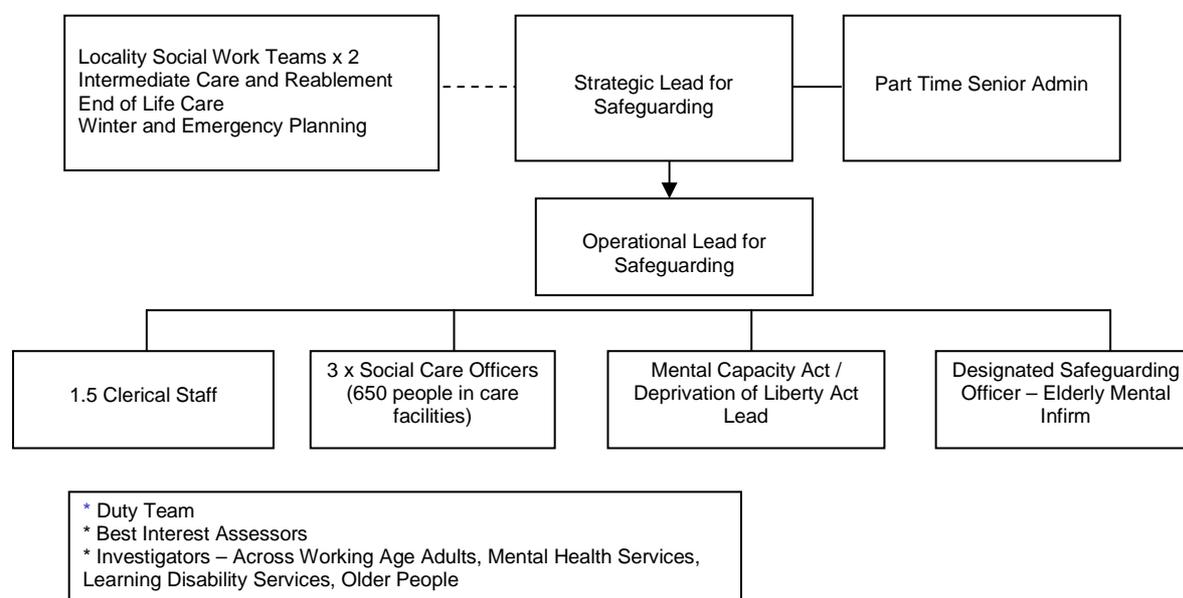
10.3 At the meeting of the Forum on 28 February 2011 the Head of Service presented Members with a comparison of Salford, Middlesbrough and Hartlepool safeguarding structures as follows:-

Safeguarding Structures

<p>Salford Council</p> <ul style="list-style-type: none"> • Safeguarding Coordinator • Senior Practitioner Social Worker • Admin Officer • 3 Minute Takers 	<p>Middlesbrough Council</p> <ul style="list-style-type: none"> • Strategic Lead Safeguarding Adults (30 hours) • Adult Protection Coordinator (34 hours) • Adult Protection Support Officer (1.5 posts) 	<p>Hartlepool Council</p> <p>SEE DIAGRAM OVERLEAF</p>
<p>NHS Salford PCT</p> <ul style="list-style-type: none"> • Lead Nurse Adult Safeguarding 	<p>NHS Tees</p> <p>Safeguarding Lead</p>	

Salford Royal Foundation NHS Trust <ul style="list-style-type: none"> Assistant Director of Nursing (Board Member) Modern Matron (Safeguarding Children and Adults) 	James Cook NHS Foundation Trust <ul style="list-style-type: none"> Safeguarding Lead 	North Tees and Hartlepool NHS Foundation Trust <ul style="list-style-type: none"> Safeguarding Lead
Greater Manchester Police <ul style="list-style-type: none"> Detective Inspector Detective Sgt Adult Safeguarding 3 Detective Constables and 6 PC's (who lead all investigations) 	Cleveland Police <ul style="list-style-type: none"> Headed by Detective Inspector 4 Detective Sergeants (2 child, 2 Adult, and Domestic Violence) 20 Detective Constables (10 child, 9 Domestic Violence and 1 dedicated vulnerable adult) 	Cleveland Police <ul style="list-style-type: none"> Headed by Detective Inspector 4 Detective Sergeants (2 child, 2 Adult and Domestic Violence) 20 Detective Constables (10 child, 9 Domestic Violence and 1 dedicated vulnerable adult)
Housing Strategy Principal Manager Safeguarding (Children and Adults)	Middlesbrough Adult Protection Committee has representatives from the Safer Middlesbrough Partnership and the local housing provider	Hartlepool Adult Protection Committee has representation from statutory, independent and voluntary sector.

Adult Social Care Services – Operational Safeguarding Structure



10.4 The Forum noted that there is a full time Operational Lead role dedicated to adult safeguarding, supported by a Designated Safeguarding Officer and a Mental Capacity Act / Deprivation of Liberty Safeguards Lead. There are also three Social Care Officers within the Safeguarding and Vulnerability

Team. In addition, some officers in Hartlepool undertake safeguarding work as a part of their role but are not dedicated solely to safeguarding. The Head of Service advised Members that this meant that these officers would not have the same in depth knowledge of case law and were reliant on the Deprivation of Liberty Safeguard Lead Officer and others within the Safeguarding and Vulnerability Team for advice in this area. Knowledge of previous case law is very important in safeguarding as lessons learned from previous cases often impact on action when considering current cases.

- 10.5 The Forum learned that the way the 3 Social Care Officers carried out assessments of peoples care needs had also been revised. Each officer is now allocated 10 care homes to enable them to gain a more detailed knowledge of the service users and also to increase their time and capacity at each home.
- 10.6 The Forum was advised that this model was one other authorities are adopting, such as Durham County Council. However, the Forum noted that this model could only operate properly when given enough resource.
- 10.7 Head of Service outlined the challenges of future service provision as detailed at 9.9 and also provided the Forum with the following details regarding budget cuts:-
- Local authority social care staff declined from 404 in 2007/2008 to 342 in 2009/2010;
 - Managerial spans of control have broadened;
 - Safeguarding and Assessment and Care Management needing to find savings of approximately £200,000 in 2011/12.
- 10.8 Members of the Forum raised concerns that with increasing demographic and budgetary pressures, strategic leads will be over stretched, placing the authority and the vulnerable adults it is required to protect, at risk.
- 10.9 The Head of Service advised Members that the budget situation was only manageable if resourced properly in conjunction with safeguarding partners and all members of the Adult Protection Committee assume the appropriate level of responsibility for safeguarding and organisations do not carry out cuts in isolation, without consideration of the effect on the other members of the committee.

Evidence from the Cleveland Police North Tees Vulnerability Unit

- 10.10 At the meeting of the Adult and Community Services Scrutiny Forum on 28 February 2011 Members considered written evidence from Cleveland Police North Tees Vulnerability Unit.
- 10.11 Members noted that the provision of a 'gate keeping' service and single point of contact is an absolute necessity for the police. It is imperative police can quickly access all services and so need the point of contact to advise and

refer. Without a quality gate keeping service (which exists at present) the concern for the police is that they would receive inappropriate referrals from agencies which, with so little resource in this area would divert them from their primary function.

- 10.12 The Head of Service advised the Forum that the Police were also facing cuts to their budgets and are under as much financial pressure as local authorities. Members noted that cuts to the budgets of partner agencies may have a negative effect on the ability of other partners to provide safeguarding services effectively if carried out in isolation, the Head of Service advised members that all agencies needed to have a conversation around proposed budget cuts and the impact these proposals would have on each others services and that this needed to take place before the cuts took place not after.
- 10.13 Members agreed that a balance needed to be reached between efficiency savings and maintaining a service which is effective at safeguarding vulnerable adults.

11 HOW ADULT SAFEGUARDING SERVICES COULD BE PROVIDED IN THE FUTURE

- 11.1 Members of the Adult and Community Services Scrutiny Forum were keen to explore options for the provision of safeguarding services in the future given demographic and budgetary challenges facing the service. The Forum considered evidence as follows:-

Evidence from Salford Council and NHS Salford

- 11.2 The Adult and Community Services Scrutiny Forum welcomed representatives from Salford Council and NHS Salford to the meeting of the Forum on 13 December 2010.
- 11.3 The Forum noted that safeguarding referrals had increased dramatically in the Salford area over the last 5 years, but as in Hartlepool, they were informed that this was due to the safeguarding awareness training undertaken with all agencies but in particular the Health Service. The Lead Nurse in Adult Safeguarding from NHS Salford identified this training as key to the partnership working within the area of safeguarding, it is now mandatory in PCT staff in NHS Salford to receive safeguarding training.
- 11.4 It is noted that general practitioners have access to safeguarding training but are not required to take it, to encourage take up a general practitioner representative elected from the medical directorate of the Primary Care Trust sits on the Salford Adult Safeguarding Board.
- 11.5 Another key point for Salford was the ability to move to an outcome at any stage of the safeguarding process, rather than having to enter and exit at specific defined points. This enables those involved in safeguarding to move

a case to an outcome at the best possible point and to not remain in the process unnecessarily.

- 11.6 To progress the safeguarding agenda the Salford Adult Safeguarding Board are keen to disseminate knowledge and understanding into the community so that safeguarding becomes everyone's business and embedded in the community. A priority is to keep the profile of adult safeguarding as high as possible and to maintain a consistent message from frontline services. The board also expects those who commission services to be fully informed on adult safeguarding principles and that these are used to commission safe services. The Board will seek evidence on how contracting services for vulnerable adults has improved adult safeguarding in Salford and will seek evidence to demonstrate this.
- 11.7 Members were informed that in Salford the safeguarding team had been protected from budget cuts, though there were concerns that cuts in social workers and staff in other partner agencies could impact on the safeguarding agenda and the excellent partner relationships that are now in place.

Evidence from the General Practitioner Commissioning Consortium Steering Group

- 11.8 At the meeting of the Forum on 28 February 2011 members considered written evidence from the General Practitioner Commissioning Consortium with regard to GPs sitting on the Adult Protection Committee in the future.
- 11.9 Members noted that the emerging GP consortia in Hartlepool are actively working with NHS Hartlepool to ensure that the transition to the proposed new General Practitioner Commissioning Consortium is seamless and all statutory duties and responsibilities are understood in order to ensure compliance.
- 11.10 Currently NHS Hartlepool provide representation on the Committee and it is envisaged that they will do so over the next 12 – 18 months until such time as the General Practitioner Commissioning Consortium is in a position to confirm the approach it will take in respect of its full role and responsibilities which are still being clarified.
- 11.11 The General Practitioner Commissioning Consortium are aware of the importance of the safeguarding agenda and want to ensure that they are able to respond proportionately at both a strategic and operational level; The General Practitioner Commissioning Consortium are confident that NHS Hartlepool are able to provide this assurance at this time.

Evidence from the Safeguarding Team

- 11.12 The Adult and Community Services Scrutiny Forum received evidence from the Child and Adult Services Department in relation to where safeguarding in

Hartlepool sits with regard to the Care Quality Commission reports of Salford and Middlesbrough Councils at the meeting of the Forum on 13 December 2010.

- 11.13 The Head of Service informed the Forum that the Safeguarding Team had a number of strengths that aligned to areas for which Salford and Middlesbrough Councils had been praised. These include:-
- Involvement in the Teeswide Adult Safeguarding Board;
 - An embedded operational framework providing cross function clarity;
 - Independent review highlighted thorough analysis of casework and accurate and consistent recording of information;
 - Proactive deprivation of liberty safeguards training; and
 - Paperwork praised by the Court of Protection.
- 11.14 Areas for improvement identified by the Adult Safeguarding Team include:-
- Links to community partnerships need to be improved to promote community prevention;
 - Service users need to be more actively involved and informed about safeguarding procedures; and
 - Maintain current attendance levels at the Hartlepool Vulnerable Adults Protection Committee, as these has previously been in decline.
- 11.15 The Forum was informed that there were a number of ways the Safeguarding Team plans to develop going forward, these are:-
- Engaging with other Local Authorities to learn from their experiences;
 - Reflecting on lessons learned by undertaking a serious case review with all partner agencies;
 - Introduction of a Memorandum of Understanding for the Hartlepool Vulnerable Adult Protection Committee members to clarify roles and responsibilities; confirm accountabilities and ensure safeguarding is 'everybody's business'.
- 11.16 In addition the Head of Service informed the Forum that a review of adult social care law may lead to a less fragmented legal system in this area.
- 11.17 Members of the Forum were keen to hear more about the level of attendance and engagement of partner agencies in the Adult Protection Committee. They were informed that all bodies were committed operationally but strategically all agencies were making cuts, due to this and original committee members moving on the seniority of the attendees from the partner agencies has reduced over time. The Forum was informed that 90% of safeguarding investigations were done by HBC staff. Salford confirmed that whilst the majority of their investigations were also conducted by Council staff, 6 new minute takers were being trained by the Mental Health Trust.

- 11.18 Members also questioned the take up of mental capacity awareness training and were advised that this was offered to all general practitioners but it is a challenge to gain an acceptance that general practitioners have a responsibility in this area, many do not see the relevance as it is felt that Social Services will deal with these issues, though the Forum were advised that general practitioners have a responsibility under Section 44 of the Mental Capacity Act.
- 11.19 The Forum was very interested to recommence visits to care homes by Elected Members, as these had taken place some time ago when the care homes were operated by the Council and Members felt that this was of great benefit to residents and the Council. Members were advised of the complexity and cost of arranging these visits by the Commissioned Services Manager as the homes were now private businesses and a number of agencies such as the Care Quality Commission, the Council Safeguarding Team, the Primary Care Trust, the Department of Health and Hartlepool LINK, all carry out visits to care homes.

Evidence from Local Groups and Service Users

- 11.20 The Forum was very keen to hear the views of local groups and service users. An invitation was extended to all local groups to attend the meeting of the Forum on 28 February 2011 to express their views or to submit written evidence. Representatives of local groups and service users expressed the following views:-
- 11.21 The majority of respondents were confident that they knew about safeguarding procedures and received regular updates. One respondent commented that whilst they themselves understood the procedures it may be the case that members of their group were not aware of or do not have any understanding of the process.
- 11.22 The majority of respondents understood who to call in the event that a referral to the Safeguarding Team needed to be made and were aware of the number, it was also mentioned that the duty team were contactable and accessible. One respondent was not aware of who to contact.
- 11.23 Where respondents had been involved with safeguarding, issues had been dealt with to the satisfaction of the respondent and guidance received was useful and of a high standard.
- 11.24 Suggestions for improvement in safeguarding services include:-
- More agencies that can be represented on the Hartlepool Vulnerable Adults Protection Committee;
 - Good clear up to date information and guidance needs to be made available to anyone who is in a position where they work or are caring for vulnerable people;

- Opportunities for the police to be in attendance in an advisory capacity where the level or issue of abuse does not amount to a criminal act;
- Awareness needs to be maintained of safeguarding issues – would like to explore whether there is any potential to share any lessons learned via approved forums.

11.25 Other views and comments received include:-

- Safeguarding teams in Hartlepool and Teesside work well together and that these vital services must be allowed to continue and evolve;
- Hartlepool Borough Council delivering a talk to the deaf community to ensure they are aware of safeguarding and the process they need to follow if they believe a vulnerable adult is in need of safeguarding intervention, this would also enable Hartlepool Borough Council to ensure the processes are user friendly for deaf people.

12 CONCLUSIONS

12.1 The Adult and Community Services Scrutiny Forum concluded:-

- (a) That adult safeguarding is very complex in nature and has numerous pieces of contradictory legislation surrounding it;
- (b) That safeguarding services in Hartlepool are delivered well but not every eventuality can be planned for;
- (c) That there is a need to balance efficiency savings with a need to protect the vulnerable adults in our community;
- (d) That safeguarding teams in Hartlepool and Teesside work well together;
- (e) That effective partnership working is key to tackling the challenges of the safeguarding agenda;
- (f) That cuts to the budgets of partner agencies may impact on the delivery of safeguarding services by Hartlepool Borough Council;
- (g) That adult safeguarding services are not seen as a priority by the general public as they are not as visible as other services provided by the Council;
- (h) That General Practitioners do not undertake training in relation to adult safeguarding as a matter of routine, but are aware of issues associated with vulnerable adults;
- (i) That the provision of a 'gate keeping' service and single point of contact was an absolute necessity for the police to enable them to manage their scarce resources and ensure only appropriate safeguarding referrals are received;

- (j) That the previous model of Councillor visits to care homes worked well and should be resumed;
- (k) That the Adult and Community Services Scrutiny Forum were supportive of the continuing efforts to publicise Adult Safeguarding and make safeguarding 'everybody's business'.

13 RECOMMENDATIONS

13.1 The Adult and Community Services Scrutiny Forum has taken evidence from a wide range of sources to assist in the formulation of a balanced range of recommendations. The Forum's key recommendations to Cabinet are as outlined below:-

- (a) That a dialogue regarding budget and service cuts is maintained between members of the Hartlepool Vulnerable Adults Protection Committee to ensure that:-
 - (i) cuts to services are not taken in isolation, without consideration for the impact on partner agencies;
 - (ii) scarce resources are managed as effectively and efficiently as possible between agencies.
- (b) That the Primary Care Trust (or its equivalent replacement body) is encouraged to put forward a GP representative to sit on the Hartlepool Vulnerable Adults Protection Committee;
- (c) That the potential to recommence visits to care homes by Elected Members of the Adult and Community Services Scrutiny Forum is included in the contract negotiations to be undertaken with providers;
- (d) That the feasibility of including an Elected Member from the Adult and Community Services Scrutiny Forum on to the membership of the Hartlepool Adult Protection Committee is explored;
- (e) That the Adult and Community Services Scrutiny Forum be kept up to date on the provision of Adult Services in the town through the receipt of relevant aspects of the regular updates received by the Portfolio Holder for Adult and Public Health Services;
- (f) The use of welfare notices is investigated with partner agencies;
- (g) That safeguarding workshops are delivered to groups within Hartlepool (with particular reference to the deaf community) and a review is undertaken of the accessibility of safeguarding services.

ACKNOWLEDGEMENTS

The Committee is grateful to all those who have presented evidence during the course of our investigation. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named:-

Hartlepool Borough Council:

Councillor Ged Hall – Portfolio Holder for Adult and Public Health Services
Jill Harrison – Assistant Director, Adult Social Care
Phil Hornsby – Head of Service, Adult Social Care
John Lovatt – Head of Service, Adult Social Care
Trevor Smith – Performance and Information Manager (Adults)
Ellen Spence – Team Manager, Learning Disabilities
Pam Simpson – Operational Lead, Adult Safeguarding and Vulnerability

External Representatives:

Keith Bonner – Lead Nurse Adult Safeguarding, NHS Salford
Philip Dand – Safeguarding Co-ordinating, Salford Council
Bridget Farrand – Strategic Lead Safeguarding Adults, Middlesbrough Council
Ruby Marshall – Hartlepool LINK
Zoe Sherry – Hartlepool LINK
Mick Walker – Business Manager, Teeswide Safeguarding Vulnerable Adults Board
Margaret Wren – Hartlepool LINK

COUNCILLOR JANE SHAW CHAIR OF THE ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

May 2011

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BACKGROUND PAPERS

The following background papers were consulted or referred to in the preparation of this report:-

- (i) Report of the Scrutiny Support Officer entitled 'Scrutiny Investigation into Adult Safeguarding – Scoping Report' presented to the Adult and Community Services Scrutiny Forum on 16 August 2010.
- (ii) Report of the Scrutiny Support Officer entitled 'Scrutiny Investigation into Adult Safeguarding – Setting the Scene Presentation Covering Report' presented to the Adult and Community Service Scrutiny Forum 13 September 2010.
- (iii) Report of the Head of Services (Adults) entitled 'Safeguarding Adults' presented to the Adult and Community Services Scrutiny Forum on 13 September 2010.
- (iv) Presentation by the Head of Service entitled 'Safeguarding Adults' delivered to the Adult and Community Services Scrutiny Forum of 13 September 2010.
- (v) Report of the Scrutiny Support Officer entitled 'Scrutiny Investigation into Safeguarding of Adults – Evidence from the Authority's Portfolio Holder for Adult and Public Health Services – Covering Report' presented to the Adult and Community Services Scrutiny Forum of 13 September 2010.
- (v) Report of the Scrutiny Support Officer entitled 'Scrutiny Investigation into Adult Safeguarding – Evidence from the Council's Child and Adult Service Department – Covering Report' presented to the Adult and Community Services Scrutiny Forum of 18 October 2010.
- (vi) Presentation by the Head of Service entitled 'Detailed Overview of Safeguarding Services' delivered to the Adult and Community Services Scrutiny Forum of 18 October 2010.
- (vii) Report of the Head of Service entitled 'Adult Social Care Performance Analysis' presented to the Adult and Community Services Scrutiny Forum of 18 October 2010.
- (viii) Presentation by the Performance and Information Manager entitled 'Service Provision Challenges' delivered to the Adult and Community Services Scrutiny Forum of 18 October 2010.
- (ix) Presentation by the Strategic Lead in Safeguarding and Vulnerability entitled 'Independent Evaluation of Safeguarding Services' presented to the Adult and Community Services Scrutiny Forum of 18 October 2010.
- (viii) Report of the Scrutiny Support Officer entitled 'Evidence from other Local Authorities and Hartlepool Child and Adult Services Department – Covering Report' presented to the Adult and Community Services Scrutiny Forum on 13 December 2010.
- (ix) Presentation by Salford Council Adult Safeguarding Co-ordinator and Lead Nurse Adult Safeguarding entitled 'Safeguarding Vulnerable Adults in Salford' delivered to the Adult and Community Services Scrutiny Forum of 13 December 2010.
- (x) Presentation by Middlesbrough Council Strategic Lead Safeguarding Adults entitled 'Safeguarding Adults' delivered to the Adult and Community Services Scrutiny Forum of 13 December 2010.

- (xi) Presentation by the Head of Service entitled 'Strengths, Weaknesses, Opportunities and Threats' delivered to the Adult and Community Services Scrutiny Forum of 13 December 2010.
- (xii) Report of the Scrutiny Support Officer entitled 'Safeguarding of Vulnerable Adults – Evidence from the Child and Adult Services Department – Covering Report' presented to the Adult and Community Services Scrutiny Forum of 28 February 2011.
- (xiii) Presentation by the Head of Service entitled 'Adult Safeguarding' delivered to the Adult and Community Services Scrutiny Forum of 28 February 2011.
- (xiv) Report of the Scrutiny Support Officer entitled 'Safeguarding of Vulnerable Adults – Evidence from the Teeswide Safeguarding Vulnerable Adults Board – Covering Report' presented to the Adult and Community Services Scrutiny Forum of 28 February 2011.
- (xv) Report of the Scrutiny Support Officer entitled 'Safeguarding of Vulnerable Adults – Feedback from Members Visit to the Adult Protection Committee – Covering Report' presented to the Adult and Community Services Scrutiny Forum of 28 February 2011.
- (xvi) Report of the Scrutiny Support Officer entitled 'Safeguarding of Vulnerable Adults – Written Evidence from the Hartlepool General Practitioner Commissioning Consortium Steering Group and the Cleveland Police Vulnerability Unit' presented to the Adult and Community Services Scrutiny Forum of 28 February 2011.
- (xvii) Report of the Scrutiny Support Officer entitled 'Safeguarding of Vulnerable Adults – Responses to the Adult Safeguarding Questionnaire' presented to the Adult and Community Services Scrutiny Forum of 28 February 2011.
- (xviii) Report of the Commissioned Services Manager entitled 'Elected Member Visits to Care Homes for Adults' presented to the Adult and Community Services Scrutiny Forum of 28 February 2011.
- (xix) Teeswide Safeguarding Adult Multi-Agency Procedure Version 3 5 November 2008.
- (xx) Minutes of the Adult and Community Services Scrutiny Forum of 16 August 2010, 13 September 2010, 18 October 2010, 8 November 2010, 13 December 2010, 17 January 2011, 28 February 2011 and 28 March 2011.