



Annual Report 2015-16

The Southwark Safeguarding Adults Board

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1. Foreword from the Independent Chair of the Southwark Safeguarding Adults Board



Everybody has the right to live a life free from abuse. The role of Southwark's Safeguarding Adults Board is to ensure Southwark's vulnerable adults live safely and free from harm. As the new Independent Chair of the Board, I am delighted to present our first Annual Board Report since the introduction of the Care Act 2014.

Southwark is a diverse and vibrant community. But safeguarding issues related to physical disability, mental health, vulnerability caused by age, illness and poverty are all here. It's important we understand and directly tackle these issues, to prevent our most vulnerable citizens coming to harm. Where they are at risk, we must act swiftly to protect and to improve wellbeing. We provide an overview of the issues facing vulnerable adults locally and we set out the performance of Southwark's safeguarding arrangements. In deciding on our 2015/16 priorities, we reflected upon lessons learnt and the measures needed to bring about improvement. Our partners recognised we face new challenges, including those that came with the introduction of the Care Act, the steep rise in Deprivation of Liberty Safeguarding (DoLS) authorisation requests, and the need in these austere times to do more with less. Taking all of this into account, we set out our Vision and Priorities for 2015/16, shown in section 2 of this report.

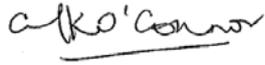
We accomplished some notable achievements during 2015/16, including closely monitoring the performance of two local nursing homes until the CQC removed them from special measures. We assisted in the safe transfer of residents to suitable accommodation following the closure of the Camberwell Green residential care home. We became the first London borough to introduce the Herbert Protocol, and delivered a well-received safeguarding conference on Female Genital Mutilation. You can find more information in sections 3 and 7.

In 2016/17 we will embark on a new stage of our journey, which includes subsuming the community safety agenda into the Board's work. These arrangements are ambitious and provide an opportunity to create a unified and joined up safeguarding approach. This will position us to more effectively deal with a range of issues, including exploitation, Prevent, and violence against vulnerable people, including knife crime, domestic violence and Hate Crime through a single governance arrangement.

We have made a good start with the creation of a new Board, but the Adults safeguarding agenda is complex and wide ranging. Our task is to focus on where we can make good partnership arrangements stronger and even more effective to make a real difference to the lives of vulnerable adults who need to be safeguarded.

The work of the Board would not be possible without the continued joint efforts of our partners. We would not be able to deliver our Vision and Priorities without the continuous commitment of Southwark's social workers, medical staff, police and emergency services, our vibrant voluntary sector and volunteers, who protect vulnerable adults from harm every day. Thank you everyone. In recognition of the vital work that the Board oversees, we share this report with the Chief Executive and Leader of Southwark Council, the Southwark Metropolitan Police Service Borough Commander, the Director of Healthwatch Southwark, and the Chair of the Southwark Health and Wellbeing Board. We also share this report with you.

If you have any further ideas on how we can build better safeguarding in Southwark, perhaps based on personal or professional experience, do please get in touch. We welcome your input.

A handwritten signature in black ink that reads "Michael O'Connor". The signature is written in a cursive style and is underlined with a single horizontal line.

Michael O'Connor
Independent Chair of Southwark Safeguarding Adults Board

2. Overview of the Southwark Safeguarding Adults Board's Vision and Priorities for 2015/16

The SSAB, led by its new independent chair developed the following Vision Statement and Strategic Priorities for 2015/16:

Our Vision

We believe all vulnerable adults living in or visiting Southwark have the right to be safe and protected from harm. We will all work together to support vulnerable adults and their informal carers to make informed choices and to provide the highest quality services so they can live full, independent and self determined lives.

Responsibilities

The Board will hold agencies to account for their key safeguarding responsibilities, so that:

- All those who work with vulnerable adults know what to do if there are concerns about possible harm.
- When concerns about a vulnerable adult's welfare or concerns about harm are reported action is taken quickly and the right support is provided at the right time.
- Agencies who provide services for vulnerable adults ensure they are safe and monitor service quality and impact.

Key Strategic Questions for the Board

- **Is the help provided effective?** How will we know our interventions are making a positive difference? How will we know all agencies are doing everything they can to make sure vulnerable adults are safe?
- **Are all partner agencies meeting their statutory responsibilities** as set out in The Care Act (including Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability), Mental Capacity Act and Deprivation of Liberty Safeguards?
- **Do all partner agencies quality assure practice** and is there evidence of learning and improving practice?
- **Is safeguarding training monitored and evaluated** and is there evidence of training impacting on practice? This includes multi-agency training.

Our Priorities for 2015/16

- Assurance that practice improves outcomes and service user experiences
- Empowerment: Making Safeguarding Personal
- Learn from Practice
- Embed the Mental Capacity Act
- Safeguarding Vulnerable People

Overview of Vision and Priorities

The Board's Vision Statement and Strategic Priorities are underpinned by the six Care Act safeguarding principles of empowerment, prevention, proportionality, protection, partnership and accountability. Our vision and priorities have also been developed inline with the broader framework of Southwark policies and strategies, especially Southwark Council's *Fairer Futures Promises* and the *Southwark Health & Wellbeing Strategy 2015-2020*.

The 2015/16 priorities were identified to set the direction of the strategic partnership, in its efforts to ensure that Southwark safeguarding arrangements and organisations work to protect local adults at risk of abuse or neglect, and to ensure that:

- Adults at risk are **empowered** to develop their own solutions, and those taking steps to safeguard adults at risk respect their right to take positive risks;
- Safeguarding practice in Southwark is **effective** and makes a positive difference to people's lives;
- Safeguarding adults activities are **integral** other relevant work-streams, and contribute to the Council's Fairer Future promise of making Southwark a safer place for everyone.

In order to measure outcomes, the Board also identified a number of **key objectives** under each of the five priority headings:

Priority 1: Assurance that practice improves outcomes and service user experiences

Key Objectives:

- 1.1. Adult Principal Social Worker develops a quality framework, including practice audits;
- 1.2. Develop and monitor a safeguarding adult's dashboard;
- 1.3. Carry out analysis of Self Assessment Framework audit returns;
- 1.4. Conduct a Board Challenge Event.

Priority 2: Empowerment: Making Safeguarding Personal

Key Objectives:

- 2.1. Work towards personalised solutions to safeguarding allegations focused on service user outcomes (including developing options for more personalised outcomes in reference to Restorative Justice, Family Group Conferences, Brief Interventions, and Supported Decision Making);
- 2.2. Redesign IT systems to support and collect outcome information;
- 2.3. Deliver training across the Partnership on Making Safeguarding Personal.

Priority 3: Learn from Practice

Key Objectives:

- 3.1. Deliver learning events to cascade themes from substantiated safeguarding concerns and Safeguarding Adult Reviews;
- 3.2. Ensure training includes contemporary local safeguarding case studies;
- 3.3. Provide regular case presentations to the Partnership Board.

Priority 4: Embed Mental Capacity Act (MCA)

Key Objectives:

- 4.1. Undertake an audit of MCA decisions, advocacy (IMCA) case involvement and DoLS authorisations
- 4.2. Monitor and ensure the uptake of MCA training;
- 4.3. Ensure there are adequate Best Interests Assessors (BIAs) to meet demand;
- 4.4. Embed BIA training as a professional career pathway element.

Priority 5: Safeguarding Vulnerable People

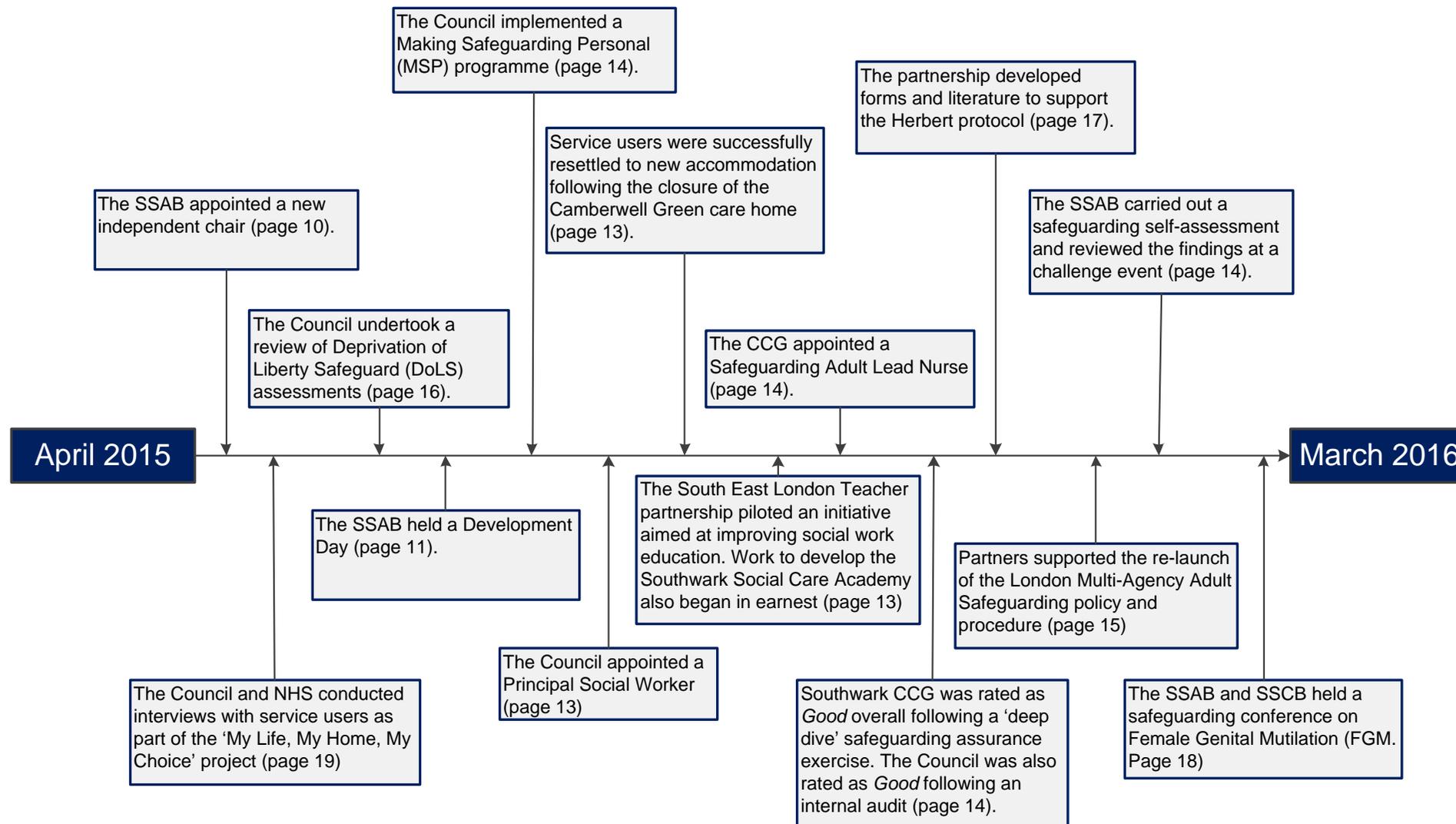
Key Objectives:

- 5.1. Develop joint adult and children's Female Genital Mutilation (FGM) guidance;
- 5.2. Implement the PREVENT agenda across adults and children's services;
- 5.3. Ensure sufficient partnership and agency representation at the following forums –
 - Southwark Safeguarding Children's Board;
 - Multi-Agency Risk Assessment Conferences;
 - Multi-Agency Public Protection Arrangements;
 - Hoarding Panel.
- 5.4. Conduct Joint Safeguarding Adults Enquiries.
- 5.5. Secure operational funding across the partnership for the Board.

The Board built on these five strategic priority areas and related objectives to develop a Strategic Priorities Outcome Framework in support of the Southwark Safeguarding Adults Board Strategic Plan.

*You can find evidence on our milestones and achievements against our strategic priorities and objectives in **sections 3 and 7** of this report.*

3. Overview of 2015/16 Milestones



4. The Southwark Context to Safeguarding

Southwark is the heart of London.

Southwark's population is 306,745¹, and is amongst the most ethnically diverse places in the country, with black and minority ethnic groups making up 48% of our population.

Of 326 local authorities in the United Kingdom Southwark is the 23rd most deprived, and the 9th most deprived borough in London. A recent Council Housing Needs report found that 95,482 Southwark residents live in council housing; of these tenants 998 have been identified as vulnerable (as of June 2016).²

Southwark is the 9th most densely populated local authority in England and Wales (more than twice as dense as London on average). From 2015 to 2025 the population is set to increase by an estimated 47,018 (mostly made up of adults aged 65 and over). The population of Southwark is highly mobile, with around 13% of people moving in, and 13% moving out each year³.

At the end of 2015/16 Southwark's Adult Social Care (ASC) department was actively working with 2,982 adults assessed as having eligible care and support needs. The majority of these adults received personal care due to a physical disability. Significant numbers of adults also required care due to a learning disability or a mental health need. During the course of 2015/16 the council undertook 556 Section 42 Safeguarding Enquiries as set out under the Care Act 2014. This represents a slight drop in enquiries compared to 2014/15 (584 enquiries).

Life expectancy in Southwark⁴

Men

Life expectancy for Southwark men on average (78.6 years) is lower than in London (by 17 months) and England (10 months). Male healthy life expectancy at birth is 59 years (compared to 63.4 years on average for London, and 63.3 years for England). There are significant differences in life expectancy across the borough: according to GLA data, between 2009 and 2013 men in the Village ward on average lived 9 years and 5 months longer than their counterparts in Camberwell Green.

Women

Life expectancy for Southwark women on average (83.8 years) is lower than in London (by 4 months), but higher than in England (8 months). Female healthy life expectancy at birth is 60.6 years (compared to 63.8 years in London, and 63.9 years in England). There are significant

The enactment of the Care Act in April 2015 introduced a legislative framework for all safeguarding adults work in the UK for the first time. Safeguarding duties apply to *any person aged 18 or over who has care and support needs and is experiencing, or at risk of, abuse or neglect, and is unable to protect themselves* as a result of these needs. Local Authorities **must** make enquiries or cause others to do so if they suspect abuse of such an individual, regardless of whether the person is currently in receipt of support from the Local Authority or not.

Abuse can take many forms, including physical, psychological, sexual, financial, and organisational abuse, and also domestic violence, modern slavery, neglect and self neglect. Abuse can be perpetrated by anyone in any setting, and can occur as a one-off or be ongoing.

¹ Southwark Demographic Factsheet. May 2015. Lambeth & Southwark Public Health Intelligence Team.

² Southwark Council Housing Health needs Assessment. June 2016. Veronika Theil, Public Health.

³ Southwark Population change and socioeconomic change 2015/16. Lambeth & Southwark Public Health Intelligence Team.

⁴ Life Expectancy in Southwark. June 2015. Lambeth & Southwark Public Health Intelligence Team.

differences in life expectancy across the borough: between 2009 and 2013, women in South Camberwell on average lived 8 years and 11 months longer than their counterparts in Nunhead.

Avoidable deaths⁵

While rates have fallen for both men and women in Southwark, 30% (1,181) of all deaths registered in Southwark between 2012 and 2014 were from causes considered avoidable. This compares to 23% in England and Wales. In the same period 36% of male deaths were deemed avoidable compared to 24% for women. The majority of these avoidable deaths were attributed to cancers and cardiovascular disease. Residents of East Walworth, Camberwell Green and The Lane experience significantly higher rates of avoidable deaths than in other parts of the borough.

5. The Purpose of the Southwark Safeguarding Adults Board

5.1 Primary Objective and Duty

The Board's primary objective is to assure itself that local safeguarding arrangements and partners act to help and protect adults who are at risk of or experiencing abuse or neglect.

In addition, The Care Act 2014 stipulates the following three core duties for Safeguarding Adult Boards:

1. To publish a Strategic Plan;
2. To publish an Annual Report that details what the Board has done during the year to achieve its main objectives and implement its strategic plan, as well as present the findings and subsequent actions of any Safeguarding Adults Reviews (SARs);
3. To conduct Safeguarding Adults Reviews.

5.2 Membership

It is a requirement of the Care Act that the Local Authority, NHS Clinical Commissioning Group (CCG), and the Chief Officer of police **must** be represented on Safeguarding Adult Boards. The Board is a multi-agency group, in addition to officers from Southwark Council, the CCG and the Police, the Board is also made up of officers from the National Health Service (NHS), Care Quality Commission (CQC), and Community Southwark.

Although it is not a requirement, Care Act Guidance advises that thought be given to the appointment of an Independent Chair to Safeguarding Adult Boards. In April 2015 the Board appointed Michael O'Connor as Independent Chair. Michael also serves as the Independent chair of Southwark's Safeguarding Children's Board. The Chair is accountable to the Chief Executive of the Southwark Council.

To ensure the Board fulfils its duties effectively, our membership is made up of senior officers who are able to promote the respective priorities of the organisations around the table, and also commit their organisations to agreed actions. Board membership during the course of 2015-16 is detailed in **Appendix 1**.

⁵ Avoidable deaths. December 2015. Lambeth & Southwark Public Health Intelligence Team.

5.3 Meetings and Events

Throughout the course of 2015/16, the Board convened four times (usually in the Council's Tooley Street headquarters). Meetings were used to address a range of areas, including (but not limited to) –

- the role of the Board and how its membership supports it to meet its statutory duties;
- partnership readiness to meet the requirements of the Care Act 2014;
- progress against priorities;
- themes including 'Voice of the User', 'Learning from Practice', 'Making Safeguarding Personal', and 'Female Genital Mutilation';
- case presentations;
- performance, safeguarding compliance and quality audits;
- current safeguarding concerns, national and local policy and practice issues.

The Board arranged a number of events in addition to its regular meetings, including the following -

Board Development Day (6th October 2015)

Board members used this event to consider important topics in detail, including –

- The challenge of representing service users' views at Board level;
- Prevention and awareness raising strategies;
- Key performance indicators;
- The development of sub-groups to support and strengthen the SSAB's ability to progress work in specific areas.

Board Challenge Event (22nd February 2016)

Members used this event to consider the findings of the Self-Assessment Framework exercise (see Object 1.4, page 14).

Conference to address Female Genital Mutilation (23rd March 2016)

For more information on this conference see *Objective 5.1*, page 18.

5.4 Budget

The work of the Board is supported by contributions from the Council, CCG, Police and the London Fire Brigade. The expenditure for the partnership for 2015/2016 was £66,000.

6 The Performance of Adult Safeguarding in Southwark

556 adults were the subject of Section 42 Safeguarding Enquiries during 2015/16. Of the Section 42 Safeguarding Enquiries concluded during the year:

- the majority were opened in response to concerns around *neglect and acts of omission* (28%), followed by *physical abuse* (25%), and *financial abuse* (22%);

- abuse was suspected to have occurred in the service users *own home* in 42% of cases, followed by 20% in *Care Homes*;
- service users were recorded as lacking mental capacity in 27% of cases.

Post investigation *further action* was required in nearly half of the Section 42 Safeguarding Enquiries cases concluded in 2015/16. Action was taken in 51% cases which resulted in the risk either being *removed* or *reduced*.

There were no Safeguarding Adult Reviews conducted during 2015/16.

The case studies below illustrate examples of effective safeguarding arrangements.

Case Study 1

SM has a diagnosis of Multiple Sclerosis, and is on a modified diet of thickened fluids. Safeguarding concerns were raised while she was in hospital due to suspicions that her family had been feeding her solid food, leading to significant concerns that her family did not understand her condition sufficiently, and may not be able to support her appropriately when she returned home.

Eventually it was decided that SM should return home with the appropriate support from health and social care in the community. The family were provided with a significant amount of support and information from various professionals to educate them around SM's condition.

SM has now settled well back at home. Her care package is working well and is alleviating some of the pressure that was on her family. Staff report that her mother is now doing a fantastic job with her eating, drinking and communication.

Case Study 2

FD has severe dementia. His large family had differing views on how he should be cared for. Eventually their entrenched positions led to family members refusing to talk to each other. These issues resulted in a series of complaints and a safeguarding referral to social care.

A social worker was allocated to assess FD and ensure his safety and wellbeing. The social worker managed to get the family to agree to engage in mediation. Although the mediation achieved some positive results it was eventually necessary to ask the Court of Protection to intervene. Throughout this period Adult Social Care continued to work with FD, his family, and other involved parties (including his care agency and other professionals) to ensure that he received appropriate care and support.

The situation is now stable, and FD has been able to continue living in the family home. His family have managed to put their differences aside to act in his best interests.

Case Study 3

AC has a history of mental health issues and alcohol dependency. Despite efforts from support services AC refused to engage, as a result her ability to manage her daily affairs increasingly impacted upon her wellbeing.

AC lived in council accommodation with her partner JC. JC (who also had a history of alcohol dependency) played an important role in trying to get AC to engage with services. Attempts had been made on a number of occasions to get AC to consider alternative housing and care options, but these attempts had been unsuccessful, in part due to AC's concerns that JC would be left homeless.

Adult Social Care intervened, and a Social worker began visiting AC and JC twice weekly to build a relationship. Eventually AC and JC agreed to view – and eventually move into - St. Andrews Supportive Accommodation for people with mental health, drug and alcohol dependency. AC remains at St. Andrews, while JC completed a full alcohol detox, and resides in the community with support from the long term drug and alcohol team.

7 Meeting our 2015/2016 Priorities

The SSAB supported and monitored the work of its partners towards meeting the priorities set for 2015/16. In addition to the evidence provided in support of our priorities throughout this section, the following is also of note for 2015/16 –

- NHS England carried out a 'deep dive' safeguarding assurance exercise with NHS Southwark CCG. The CCG was rated as *Good* overall.
- An internal audit of Southwark Council safeguarding cases concluded that safeguarding adults at risk practices were *Good* across operational teams. However the final report also concluded that there were opportunities to improve the recording of cases. These findings (alongside the introduction of MSP) have been considered in the delivery of the Council's training, and introduction of new IT systems.
- Following concerns about Tower Bridge nursing home (operated by HC-1) and Burgess Park nursing home (operated by Four Seasons), the Council placed both homes under an embargo in 2014/15. As a result neither scheme was able to take new referrals, and both schemes were placed under special measures by the CQC shortly afterwards. Throughout 2015/16 the Council and CCG (reporting back regularly to the SSAB) undertook visits to the homes to monitor progress against their respective improvement plans. The embargo was lifted once partners had satisfied themselves that the schemes had improved sufficiently. Throughout the process the Council and CCG regularly liaised with the CQC, who subsequently removed both schemes from special measures.
- Camberwell Green Nursing Home (operated by HC-1) closed at the turn of the year. During this period difficult decisions needed to be made about the transfer of residents to two services previously under embargo (both services had been under special measures – see the above point - but had since made significant improvements). Partners across care and health worked in conjunction with care home staff, and also service users and their families in order to manage the closure and the subsequent allocation of service users to suitable accommodation. During the transfer period no safeguarding concerns were raised. The lessons learnt during this period have been used to review the Council's *Care Home Closure Protocol*, and to develop a *Provider Failure Policy*.

- The SSAB reviewed its structure and membership in order to ensure its continued ability to deliver its remit as defined by the Care Act.
- The CCG recruited to the post of Safeguarding Adult Lead Nurse.
- The Safeguarding Adults Partnership oversaw the development of accessible safeguarding information for the public (including literature targeted at adults with learning disabilities). This literature has since been made available via the Southwark website, and has been distributed to important sites across the borough.
- The *Multi-London Safeguarding Policy and Procedure* was launched. In support of the launch the Council uploaded the document to the Southwark Adults Policy and Procedure Manual. All Adult Social Care Staff are required to subscribe to the manual so that they receive notifications whenever an amendment is made to one of the policies/procedures contained.
- The CCG developed and circulated a *GP Adult Safeguarding Policy* template for GP practices to adapt and adopt.
- The Council continued to deliver on the commitments made in the Southwark Ethical Care Charter. We believe that the measures taken to ensure that staff who deliver care services receive good pay and fair contracts will safeguard service users who access services, and deliver positive outcomes for their wellbeing for years to come.

Priority 1: Assurance that practice improves outcomes and service user experiences

In order to gauge whether interventions are effective it is vital systems are in place to ensure a positive direction of travel, that the right outcomes are being achieved, and to identify issues/ concerns as they arise. It is also critical that the service user is at the heart of their solution. This is at the forefront of our thinking in developing and monitoring services for vulnerable adults.

Objective 1.1: Principal Social Worker to develop a quality framework including audits of practice.

The Council's *Vision for Adult Social Care* identifies the development of a quality assurance framework for professional practice as a priority area. While the work delivering this objective is ongoing, the following was achieved during 2015/16 –

- A Principal Social Worker for Adults was appointed, with dedicated responsibility for driving the continuous improvement of practice standards.
- The Principal Social Worker for Adults in association with the Principal Child and Family Social Worker launched a joint annual Social Work Health Check (due to report on its outcomes in autumn 2016).
- The South East London Teaching Partnership piloted a range of initiatives aimed at improving standards of pre and post qualifying social work education. A bid was submitted to the DfE/DH for continued funding to consolidate the Partnership and support programme expansion (which has since received ministerial approval).
- The Principal Social Worker for Adults supported the development of the Southwark Social Care Academy. The Academy aims to introduce a range of measures to improve processes for the recruitment, induction, training and development of the adult social care workforce.
- The Principal Social Worker supported the launch of Southwark's first Assessed and Supported Year in Employment (ASYE) programme dedicated to newly qualified social workers working within adult services.

Objective 1.2: Develop and monitor a safeguarding adult's dashboard.

The development of the safeguarding adult's dashboard has been carried over to 2016/17. The partnership are in the process of finalising a dashboard of key performance indicators across the priority areas to enable the board to understand safeguarding activities across the partnership, and to take appropriate action where necessary.

Objective 1.3: Carry out analysis of Self Assessment Framework audit returns

At the beginning of 2016, Board members completed a self-assessment in order to identify areas of strength, and areas of ongoing challenge. The framework addressed the following areas –

- Leadership, Strategy, Governance and Organisational Culture.
- Organisational responsibilities towards adults at risk is clear for all staff and commissioned services.
- Organisations approach to workforce issues reflects a commitment to safeguarding and promoting the wellbeing of adults at risk.
- Effective inter-agency working to safeguard and promote the wellbeing of adults at risk.
- Addressing issues of diversity.
- The service can demonstrate that people who use services are informed about safeguarding adults and empowered within the organisations responses to it.

The Board also considered the findings of the self-assessments at the Board Challenge Event.

Objective 1.4: Conduct a Board Challenge Event

The Board conducted a challenge event in February 2016. During the event members were asked to consider safeguarding arrangements in Southwark, and identify three areas of strength, and three areas that continue to prove challenging. Among other areas, members identified significant strength in governance structures, leadership, policy and procedure, training programmes delivered across the partnership and overall partnership working.

The Board identified the implementation of (and compliance with) the Mental Capacity Act 2005 as an ongoing challenge. As a result, the ongoing implementation of the Mental Capacity Act has been identified as a Board priority again for 2016/17.

Priority 2: Empowerment - Making Safeguarding Personal

Making Safeguarding Personal (MSP) began in 2009 as an initiative by the Local Government Association (LGA) and The Association of Directors of Adult Social Services (ADASS). The focus of MSP is to improve the safeguarding experience for individuals by making the process more person-centred and outcome focused.

Integral to this approach is the need that individual's views inform and shape the safeguarding process. The Care Act requires that local authorities and their partners ensure that individuals are as involved as possible in making decisions about their care and support during the assessment, support planning and review stages, and during all safeguarding. If an individual has *substantial difficulty* being involved or making their views/wishes known, partners must:

- ensure that there is an appropriate person such as a friend or relative who can facilitate their involvement; or
- arrange for an *independent advocate* to support them if there is no appropriate individual to help them.

Objective 2.1: Work towards personalised solutions to safeguarding allegations focused on service user outcomes.

During the course of 2015/16 the Council:

- delivered MSP training (see *Objective 2.3*);
- took steps to ensure key MSP requirements were included in all new local authority homecare contracts;
- designed and implemented a safeguarding pathway supported by IT systems which are able to record the service user's wishes in relation to the safeguarding process and outcomes;
- prioritised the need to involve service users in the development of delivering personalised outcomes (including the co-production of the Board's Strategic Plan).

In February the Council conducted a random audit of 40 safeguarding cases in order to identify whether MSP was being implemented. In all cases there was clear evidence of the service user or their representative being involved in the conduct of the enquiry. Individuals were asked what they wanted from the enquiry, and they were asked whether their objectives had been met at the end of the enquiry process. There was evidence that the enquiry process was made as accessible as possible, with meetings being held in individual's homes/care homes. There was also evidence of advocates and interpreters being made available to support people throughout where necessary.

Objective 2.2: Redesign IT systems to support and collect outcome information.

Southwark CCG currently uses a tracker to monitor all safeguarding alerts that concern CCG fully funded continuing care clients. This tracker monitors the progress of safeguarding investigations, and captures learning from incidents to support improvements in practice. The tracker is reviewed monthly at CCG Continuing Healthcare Team meetings.

Adult Social Care has taken steps to embed MSP in its new IT system (MOSAIC). The system ensures that the Council is able to capture information about the individual's desired outcomes, and whether these are being/have been achieved. Measures have also been taken to embed MSP considerations in all safeguarding documentation, policies and processes.

Objective 2.3: Deliver training across the Partnership to reflect the MSP approach

The SSAB agreed a programme plan to achieve Bronze MSP status by April 2016. The programme includes specialist MSP training delivered across the partnership in between December 2015 and January 2016, an MSP e-learning module, and the delivery of an MSP staff practice forum. An action plan has also been developed to support the partnership to achieve silver MSP status by September 2016. In addition to these measures, we have also –

- Provided Care Act training to partnership staff to clarify the impact of the Care Act on safeguarding work.
- Amended policies, procedures and forms to reflect the legal definitions and requirements of safeguarding in-line with the Care Act and the recently revised *London Multi-Agency Safeguarding Adults Policy and Procedures*.

Priority 3: Learn from Practice

Up-to-date training, partnership work and the sharing of best practice are vital tools in ensuring that the partnership's workforce is able to:

- prevent harm, and prevent care and support needs arising or worsening;
- deliver service user focused outcomes and improve wellbeing;
- ensure compliance with legislative and regulatory requirements;

- address evolving needs and landscapes.

Objective 3.1: Deliver learning events to cascade themes from substantiated safeguarding concerns and Safeguarding Adult Reviews

The Board reviews case studies periodically to learn from practice (see *Objective 3.3*), while training delivered across the partnership utilises contemporary examples of safeguarding concerns, methods and desired outcomes (for example the MSP training, *Objective 2.3*). The partnership also uses events such as the annual SSAB conference to address current topical safeguarding concerns such as FGM (see *Objective 5.1*).

There were no Safeguarding Adults Reviews during the course of 2015/16.

Objective 3.2: Ensure training includes contemporary local safeguarding case studies

2014/15 safeguarding training across the partnership included the use of safeguarding case studies in order to ground participants' learning in real life experiences they may encounter, and to get them thinking about adult safeguarding in relation to Care Act and MSP requirements.

Objective 3.3: Provide regular case presentations to the Board

The SSAB used alternating board meetings to consider case studies. Case studies covered sexual exploitation (July 2015), and difficulties experienced when protecting adults at risk from financial abuse (January 2016).

Priority 4: Embed the Mental Capacity Act

During the Board Challenge Event in February 2016, Board members identified Mental Capacity implementation and compliance as an area of continuous challenge. The Mental Capacity Act 2005 protects people who lack capacity by providing a framework that places them at the heart of the decision-making process, ensuring that they participate as much as possible in any decisions made on their behalf, and that decisions made for them are made in their best interests.

Deprivation of Liberty Safeguards (DoLS) were introduced in 2005 to ensure that individuals who are in hospitals or care homes are not unnecessarily deprived of their liberty. The precedent set following the Cheshire West legal challenge in March 2014 led to an unprecedented increase in the number of DoLS applications local authorities are asked to review. In Southwark alone we have seen levels rise from an average of 45 per year to 756 in 2015/16. The Council established a specialist DoLS team in order to deal with this sharp increase in demand for authorisations.

Utilising the quality framework and audit programmes described in this report, and with regular training programmes, the Board will continue to take measures to ensure the principles of the Mental Capacity Act are embedded in practice.

Objective 4.1: Undertake audit of MCA decisions, advocacy/IMCA involvement in cases, and DoLS authorisations

The majority of service users who were the subject of DoLS authorisations during 2015-2016 were represented by relatives or friends, however it was assessed that an IMCA was required in 97 DoLS cases.

We have seen significant reductions in the number of DoLS applications awaiting assessments, and the time from receiving the final assessment to securing appropriate authorisations being secured. However, the high number of DoLS applications received continues to pose a

challenge. During the course of 2015/16 a review of DoLS applications commenced with the aim of tackling these issues.

The Quality Assurance and Safeguarding Team meets with BIA assessors quarterly to support them, and to offer feedback on the findings of informal audits and quality checks on completed BIA assessments and processes.

Objective 4.2: Monitor and ensure the uptake of MCA training.

We continued the programme of MCA training and practice awareness across the partnership. Steps have also been taken to embed MCA/advocacy considerations in all council and partner safeguarding documentation in order to support compliant delivery.

Objective 4.3: Ensure there are adequate BIA assessors to meet demand.

During the period 2014/15 - 2015/16, the Council recruited and trained 51 BIA assessors. In order to meet the increased demand for BIA's we also oversaw the establishment of a BIA training programme in partnership with 3 other London boroughs and the University of Bournemouth.

Objective 4.4: Embed BIA training as a professional career pathway element.

This remains a work in progress. The Board's intention is that BIA training is embedded as a professional career pathway by April 2017.

Priority 5: Safeguarding Vulnerable People

Partnership work continues to be vital to the successful delivery of safeguarding services and interventions in Southwark. We remain confident that safeguarding is at the heart of the services delivered by statutory and voluntary services in Southwark, and we also remain committed to maintaining an open dialogue with all our partners, and working jointly with partners to ensure the best person centred outcomes for vulnerable adults.

We are proud of the work and successes we have achieved with our partners to safeguard vulnerable adults. We strive to continually improve outcomes for vulnerable adults, and believe effective safeguarding can be achieved through developing joint objectives and more focused joint working. In addition to the work we have done to meet the objectives detailed in this section below, in 2015/16 we also –

- Developed and launched the *Herbert Protocol, Safe and Found* in partnership with the Alzheimer's Society, Age UK, the Metropolitan Police, the Older persons' Partnership Board and the Consortium of Older People's Service in Southwark. The *Herbert Protocol, Safe and Found* literature promotes good practice in protecting individuals with dementia. The Protocol consists of a form signed by an older person (or their carer) that provides personal information to help the police search for them in the event they go missing. The Protocol has previously been adopted in two other areas of the UK and has proven to reduce the average time taken to locate people who have gone missing. Southwark is the first borough in London to adopt the Protocol.
- Agreed to subsume our local crime and disorder partnership (the Safer Southwark Partnership) into the Safeguarding Adults Board. The boards have a similar membership structure, with the Council, Police, National Probation Service and Southwark CCG represented on both the Safeguarding Southwark Partnership and the Board. There are also a number of key themes that cut across both 'safeguarding' and the 'community safety' agenda (such as domestic abuse, substance misuse, financial abuse, the abuse of vulnerable adults living in their own homes in the community, FGM and PREVENT).

We anticipate that working as one collaborative board will provide opportunities for more joined up work and a focus on shared outcomes.

Objective 5.1: Develop joint adult and children's Female Genital Mutilation (FGM) guidance

FGM is a key priority for the Southwark Safeguarding Children's Board (SSCB). On 23rd March 2016 the Children's and Adults Safeguarding Board held a joint annual conference on FGM. The formal launch of Southwark's FGM guidance document was presented collectively by senior representatives across the partnership.

A total of 144 people across social care, health, education and other areas attended the conference. The conference opened with comments from Michael O'Connor, the independent chair of both Boards. Dr Comfort Momoh MBE, a prominent campaigner for the eradication of FGM, served as one of several keynote speakers. Workshops were delivered by a range of professionals from across the partnership and voluntary sector, including the council, the police, health, schools, the Health and Social Care Information Centre, Solace, Africa Foundation and a faith leader, demonstrating the commitment from all agencies to work together to eradicate FGM.

Without exception, the feedback was very positive, with participants finding the conference informative, inspiring, empowering and engaging. Following the conference participants across the partnership committed to raising awareness, disseminating lessons learnt and sharing good practice.

Objective 5.2: Implement the Prevent agenda across adults and children's services

A number of prevention aims were achieved across the partnership during 2015/16,) detailed below–

- NHS Southwark CCG made PREVENT awareness training mandatory for staff. The CCG also –
 - participated in the NHS England *Prevent Forum*, and completed quarterly returns to demonstrate CCG and provider compliance;
 - have 3 members of staff who are WRAP (Workshop to Raise Awareness of Prevent) 3 trained. WRAP 3 training has also been delivered to NHS Southwark Governing Body members, Directors and Heads of Service;
 - hosted a *Differentiation of Islam, Culture and Extremism* DICE event for provider services which was well attended with representation from GSTT, KCH and SLAM;
 - is represented on Southwark's Channel Panel. Channel Panels provide guidance to prevent vulnerable people being drawn into terrorism (aligned to the Counter-Terrorism and Security Act 2015).
- Southwark Council's Adult Social Care Mental Health Services, Housing department and the CCG conducted a joint initiative called *My Life My Home My Choice*. The project achieved positive outcomes for adults with mental health issues by supporting them to exercise personal choice, and move from supported accommodation to live more independently while also making the most of their care and health personal budgets. Initial findings suggest multiple positive outcomes for the wellbeing of these adults, including a reduction in acute admissions, and falls in social isolation. This work is ongoing.

Objective 5.3: Ensure sufficient partnership and agency representation at forums

Through regular reporting and the wider governance delivery structure the SSAB ensures that partnership members play a full role in operational arrangements for tackling issues such as domestic abuse (MARAC), public protection (MAPPA), and hoarding (Hoarding Panel) as these matters impact upon vulnerable adults at risk.

During 2015/16 the Council, CCG and police officers regularly attended a broad range of local fora aimed at protecting Southwark residents.

Objective 5.4: Conduct Joint Safeguarding Adults Enquiries

The Care Act requires that Safeguarding Adults Boards arrange a Safeguarding Adults Review when an adult in its area dies as a result of abuse or neglect (whether known or suspected) and there are concerns that partner agencies could have worked more effectively to protect the adult.

A SAR was initiated in 2014. We are due to report on the findings during 2016/17. No new SARs were initiated in Southwark during 2015-16.

Objective 5.5: Secure operational funding across the partnership for the Board

During 2015/16 the Board received contributions from a range of partners (see section 5.4, *SSAB Budget*). Work will continue to diversify and secure SSAB funding for 2016/17 with the aim to develop a specific allocated budget funded by partners to support its activities.

8 Summary and next steps

Good progress was made throughout 2015/16 to protect Southwark's vulnerable adults from harm. Lessons learnt during the course of the year inform our local practice.

We developed best practice around areas such as the Herbert protocol, and took important steps to ensure that staff across the partnership had the knowledge and resources to deliver effective and personalised safeguarding interventions, drawing on our involvement with the South East London Teaching Partnership, the development of the Southwark Social Care Academy, and the ongoing programme of Making Safeguarding Personal. We will continue to learn through experience and adopt a proactive approach to identifying safeguarding issues. We will also continue to share good practice across the partnership using a variety of methods - including case study presentations, audits, challenge events and meetings - with the voice of the client and carer front and centre.

We have also continued to spread the safeguarding word by participation in a range of fora (for example MARAC, MAPPA, PREVENT and the Channel Panel), and delivering well received events such as the joint Children and Adults Boards safeguarding conference.

The work started in 2015/16 provides a bench-mark for the work that will continue during 2016/17. We recognise work is still required to deal with the significant rise in DoLS applications following *P v Cheshire West* ruling. We must do more to better embed the Mental Capacity Act 2005 in practice. Steps must also continue to develop the work undertaken with the Southwark Social Care Academy and other local initiatives.

Looking ahead, in 2016/17 the partnership will oversee work to further improve service user engagement, and ensure that there is a strong ethos of examining the evidence of impact (using

methods such as audits). In order to progress the Board's decision to subsume the community safety agenda, we will implement a refreshed governance structure, to include delivery groups which will lead on specific areas such as Training, Safer Communities and Quality of Care. We will devise a new high level Dashboard that will enable the Board to effectively monitor progress. 2016/17 will also see the launch of a new *DoLS Authorisation Policy* following the Council's review of its DoLS processes. Work will continue to develop Best Interest Assessments. A named GP for Safeguarding Adults will also be recruited.

These initiatives will form the starting point for the Adult Safeguarding Board's Strategic Plan for 2016/17.

Contact information

If you have any questions about the content of this report (or you have thoughts about what we should include in future reports), please contact ssab@southwark.gov.uk.

If you are concerned about an adult at risk in the borough of Southwark you should notify us immediately (telephone: 020 7525 3324, or email: casc@southwark.gov.uk).

If the adult has been injured you should seek advice from their GP, or in an emergency call 999.

If you believe a crime has been committed you should notify the police.



Appendix 1: Southwark Safeguarding Adults Board Membership

