



# Derby Safeguarding Adults Board

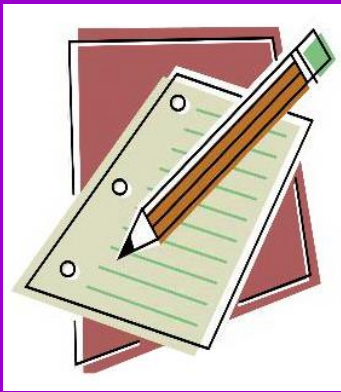


## Annual Report 2017-18

# Contents

<b>1. Statement from the Chair</b>	
1.1 Foreword	<b>4</b>
<b>2. Derby Safeguarding Adults Board 2017-18</b>	
2.1 Derby Safeguarding Adults Board (DSAB)	<b>6</b>
2.2 DSAB Aims	<b>7</b>
2.3 Resources and Funding	<b>7</b>
2.4 DSAB Subgroups	<b>7</b>
2.4.1 Learning and Development Subgroup	<b>8</b>
2.4.2 Performance Improvement Subgroup	<b>8</b>
2.4.3 Customer Inclusion Subgroup	<b>9</b>
2.4.4 Mental Capacity Act / Deprivation of Liberty Safeguards Subgroup	<b>10</b>
2.5 Safeguarding Adults in Practice	<b>13</b>
<b>3. Safeguarding and Deprivation of Liberty Safeguards (DOLS) Activity Report</b>	
3.1 Activity Reports	<b>15</b>
3.1.1 Safeguarding Adults Data 2017-18	<b>15</b>
3.1.2 Deprivation of Liberty Safeguards Data 2017-18	<b>18</b>
3.1.3 Deprivation of Liberty Safeguards in Practice	<b>20</b>
3.1.4 Deprivation of Liberty Safeguards in Practice	<b>21</b>
<b>4. Moving Forward</b>	
4.1 Board Priorities 2018/19	<b>22</b>
<b>5. Statement From Partners</b>	<b>26</b>

# 1. Statement from the Chair



## 1.1 Foreword

Welcome to this Derby Safeguarding Adults Board (DSAB) Annual Report for 2017-2018.

This year has seen us in Year 3 of our Strategic Plan developed in accordance with the Care Act 2014.

During the year we have continued to work in conjunction with a number of agencies across the City and, as ever, our strength has been in true partnership working. We have also continued to work in collaboration with colleagues in the County wherever possible to reduce potential duplication particularly for those agencies that span both City and County.

Our sub – groups have continued to drive the work of the Board with contributions such as the development of a comprehensive multi – agency training plan, the ongoing and extremely helpful multi – agency audits and awareness raising of the Board.

The Multi Agency Safeguarding Hub (MASH) continues to move from strength to strength ensuring that referrals receive the earliest possible attention to lead to the most appropriate action.

Once again I would like to place on record my sincere thanks to everyone involved with Safeguarding Adults in Derby in what continues to be an extremely challenging environment.

*Allan Breeton*

Independent Chair, Derby Safeguarding Adults Board



# **2. Derby Safeguarding Adults Board (DSAB) 2017-18**



## **2.1 Derby Safeguarding Adults Board (DSAB)**

### **Who are we and what we do:**

The Derby Safeguarding Adults Board (DSAB) is a multi-agency partnership which became statutory from 1<sup>st</sup> April 2015 following the Care Act 2014.

The DSAB consists of senior representatives from the following:

- Derby City Council (DCC)
- Southern Derbyshire Clinical Commissioning Group (CCG)
- Derbyshire Constabulary
- Derbyshire Healthcare NHS Foundation Trust (DHCFT)
- Derby Homes
- DHU Health Care
- East Midlands Ambulance Service (EMAS)
- Derbyshire Community Health Service NHS Foundation Trust (DCHS)
- Derby Teaching Hospitals NHS Foundation Trust
- Derby City and Neighbourhood Partnership
- Care Quality Commission (CQC)
- Derbyshire Police and Crime Commissioner (PCC)
- Derbyshire, Leicestershire, Nottinghamshire & Rutland Community Rehabilitation Company (CRC)
- National Probation Service Midlands
- Derbyshire Fire and Rescue Service
- University of Derby
- Public Health
- HealthWatch
- NHS England

The Board has been independently chaired for six years by Allan Breeton and he continues to provide an independent perspective, challenge and support to the Board in order that it can meet its strategic objectives.

The Board meets quarterly, and has robust governance arrangements across and within agencies. The Chair of the Board ensures that links are made with other Boards that impact on Safeguarding Adults in Derby, these being the Derbyshire Safeguarding Adults Board, Derby City and Derbyshire Safeguarding Children Boards, the Health and Well Being Board, the Derby City Prevent Strategy Board and Derby City and Derbyshire Serious Sexual Violence & Domestic Violence Governance Board.

The DSAB plays an important role in the strategic development of adult safeguarding locally. The objective of the DSAB is to assure that local safeguarding arrangements and partners act to help and protect adults in Derby City who meet the criteria set out in the Care Act 2014.

The criteria applies to anyone aged 18 or over who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs), and
- Is experiencing, or at risk of, abuse or neglect, and
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

## 2.2 Derby Safeguarding Adults Board Aims:

Derby Safeguarding Adults Board recognises that in being greater than the sum of its parts it will ensure that partners work together to:

- stop abuse or neglect
- prevent harm
- reduce the risk of abuse or neglect to adults with care and support needs
- safeguard adults in Derby in a way that supports them in making choices and having control about how they want to live

## 2.3 Resources and Funding:

All partners who sit on DSAB contribute resources for the Board to meet its statutory requirements. This is achieved through:

- Funding from statutory and non-statutory partner agencies (Derby City Council, Southern Derbyshire Clinical Commissioning Group, Derbyshire Constabulary, Derbyshire Fire and Rescue Service and Derby Homes). The total contribution that the Board received for 2017-18 was £132,285
- Staff support/resources – for example attending Board and Subgroup meetings, providing administrative support
- Projects/work run by partner agencies that contribute towards the work of the Board

## 2.4 Board Subgroups:

The Board work programme is supported by its four sub-groups, each comprising multi-agency representation across statutory and non-statutory services as well as health and social care organisations. Each subgroup is accountable to the Board in relation to achievements against the business plan and provides a highlight report for each Board meeting which focuses on the





subgroups progress in respect of actions needed to implement the current Board Strategic Plan. The four subgroups are:

#### **2.4.1 Learning and Development Subgroup – 1852 trained**



The Learning and Development (L&D) Subgroup was chaired by Emily Freeman, Derby City Council and Deputy Chaired by Lorraine Testro, Derby Homes.

The L&D Subgroup was relaunched in December 2015, is organised jointly with colleagues from Derbyshire and exists to build on both boards very active and collaborative multi-agency approach to adult safeguarding

The purpose of this sub group is to respond to the needs of Derbyshire and Derby City Safeguarding Adults Boards (SABs) and provide assurance that staff are equipped to respond to safeguarding with competent and confident practice.



The Subgroup aimed to achieve the following in 2017-18:

- To ensure that all safeguarding training which is developed through the Safeguarding Board will be available and used by staff from all members of the Board and will also draw on the expertise of agencies linked to the Board to ensure that it reflects best practice and is based on the principles of Making Safeguarding Personal
- To develop shared multi-agency training for all which enhances safeguarding awareness at all levels covering both strategic and operational staff

#### **2.4.2 Performance Improvement Subgroup**



The Derby City Safeguarding Adult Board's Performance Improvement Sub-Group (PISG) is Chaired by Bill Nicol, Head of Adult Safeguarding Erewash, Hardwick, North Derbyshire & Southern Derbyshire Clinical Commissioning Groups and is primarily concerned with assessing the quality and standard of inter-agency and partnership collaboration in ensuring that adults at risk are protected from abusive behaviour and practice.

The Derby Safeguarding Adult Board Performance Improvement Sub-Group has had another productive and successful year.



The group has now carried out an audit of over 150 safeguarding cases and their findings were reported to the Board and have been used to form the basis of future multi-agency training activity. Themes for audit included Domestic Abuse, Honour Based Violence, and Sexual Abuse.

This important work will continue and will be used to evaluate and demonstrate the efficacy of the Boards Multi-Agency Policy and Procedures.

The group also reviewed the Boards Sharing of Information Protocol to ensure our compliance with national directives

A further development has been the collation of safeguarding activity statistics. These have been used to identify referral types, themes, and outcomes for adults at risk.

The group has been well supported by partner agencies and has focussed upon the Boards Strategic work programme.



### **2.4.3 Customer Inclusion Subgroup**



The focus of the Customer Inclusion subgroup is to promote awareness of Safeguarding Adults across Derby City and to ensure that the views of Adults who have experience of safeguarding processes are used to inform practice development and stronger multi-agency working.

During 2017-18 the Subgroup continued to raise awareness of Safeguarding across all groups in Derby.

The members of the subgroup have attended a number of events to promote adult safeguarding. The very important message members try to get across is the importance of making referrals as soon as anyone becomes aware of abuse and neglect.

There are printed materials available to support the communication of this important key message. In addition during 2017-18 the local NHS developed a safeguarding app for smartphones which is available to download for free. This provides easily accessible safeguarding information at your finger- tips.

The subgroup continues to support the Dignity Award and this year have given the award to 7 teams across agencies which include care homes, local authority, NHS and independent providers.

The subgroup, in 2018-19, will be working towards systematically collecting the views of people who have experience of safeguarding processes linked to Domestic

Abuse. We shall be incorporating some of the lived experience into training materials for staff and the wider public. We shall also ensure that we have embedded the making safeguarding personal principles into safeguarding practice.

The Customer Inclusion subgroup meets quarterly and reports back to the Safeguarding Board at every Board meeting.

### Key achievements in 2017-18:

- Visits were made to customer/patient/citizen forums to talk about the work of Derby Safeguarding Adults Board, listening to the views of those present
- Successfully promoted the Dignity Action Day on the 1st February 2018, inviting members of the public and recognising their achievements
- Listened to the views of adults who have been supported through safeguarding, asking for feedback on whether they were able to make choices and have increased control over their lives after they have been supported through the safeguarding process. Where Adults were not in a position to express their views, their representatives were asked to express their views on behalf of the adult
- Ensured that Safeguarding training showed evidence of co-production with adults who have been supported through safeguarding
- When talking with Adults, feedback has been received about their experiences of being treated with dignity and respect
- Ensured that all safeguarding training which is developed through the Safeguarding Board is available and used by staff from all Board member organisations promoting consistency and the principles of Making Safeguarding Personal.



### 2.4.4 Mental Capacity Act / Deprivation of Liberty Safeguards Subgroup



The Mental Capacity Act was introduced in 2005 to cover situations where someone is unable to make a decision because of the way their mind or brain works or is affected, for instance by illness or disability or the effects of drugs or alcohol. The Mental Capacity Act establishes the definition of mental capacity, sets out the framework for assessing mental capacity, determines how decisions should be made if a person lacks mental capacity

and establishes statutory guiding principles for practice.

The Mental Capacity Act relates to everyday decisions as well as major decisions about someone's property, financial affairs, health and welfare. It is an important safeguard, protecting the rights of people who lack mental capacity.



Through Lasting Powers of Attorney, Advance Decisions and Advance Statements, the Act also provides the means by which people can plan for a time when they no longer have mental capacity to make decisions.

The Mental Capacity Act introduced Independent Mental Capacity Advocates (IMCAs) to represent and safeguard people's best interests when certain important decisions are made. The Act also introduced a specialist court, the Court of Protection, for all issues relating to people who lack mental capacity in relation to specific decisions.

The Deprivation of Liberty Safeguards, often referred to as DOLS, was also introduced by the Mental Capacity Act and came into effect in 2009. DOLS are a legal safeguard for people who cannot make decisions about their care and treatment when they need to be cared for in a particularly restrictive way. They set out a process that hospitals and care homes must follow if they believe it will be necessary to deprive a person of their liberty, in order to deliver a particular care plan in the person's best interests. The DOLS Activity Report is provided at Section 4.1 below.

The Mental Capacity Act (MCA) and Deprivation of Liberty safeguards (DOLS) subgroup has returned to being a joint sub-group with Derbyshire safeguarding Adults Board. It is positively supported with representation from key statutory and non-statutory partners, and is well attended.

While the neither the Derby nor Derbyshire Safeguarding Adults Boards strategic plans have a specific set of objectives for the MCA/DOLS Subgroup to contribute towards, the principles and framework of the Mental Capacity Act are fundamental to Safeguarding Adults. As such it is imperative that there is oversight and scrutiny of the continued implementation of the Mental Capacity Act and Deprivation of Liberty Safeguards by all partners, and collaborative working to improve awareness and standards

### **Key achievements in 2017-18:**

- Established positive working relationships with returning members following the reintegration of Derbyshire Safeguarding Adults Board to the sub-group
- Encouraged and facilitated positive working relationships within existing members, and provided a forum for constructive reflection and challenge
- Developed a MCA/DOLS subgroup action plan in line with the strategic plan objectives for both Derby and Derbyshire safeguarding Adults Boards
- Provided regular updates to partners on regional and national developments, and case law updates about Mental Capacity and the Deprivation of Liberty Safeguards
- Sought assurance from members about organisational compliance with the Mental Capacity Act
- Started work on identifying blockages and barriers to compliance with the Mental Capacity Act for practitioners and organisations

- Monitored Deprivation of Liberty Safeguards activity, and reported associated risks to the Derby and Derbyshire Safeguarding Adults Boards
- Review of the Terms of Reference of the subgroup to include the change in membership

## **2.5 Safeguarding Adults in Practice**

Charlie lived alone in a Housing Association flat. He was found to be in a state of self-neglect and requiring medical attention. As a result the Housing Association made a referral to Safeguarding Adults. There were concerns that his partner was exploiting him and presenting with coercive behaviour. Upon enquiries it was determined that Charlie had also experienced financial, psychological and physical abuse. This included causing a burn injury to Charlie. Charlie's partner was also denying Charlie access to health and social care services. Information was exchanged with relevant partner agencies, including the Police and Health organisations, and a plan was agreed.

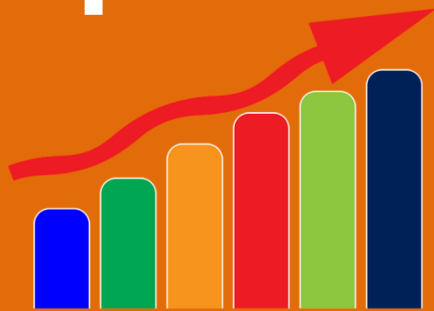
Social Workers tried to visit Charlie both during working hours and out of hours. During these visits Charlie's partner was present and it was clear that Charlie was unable to discuss any concerns or fears he had. The Social Workers felt that this was evidence that Charlie was afraid of his partner and any repercussions should he talk to professionals. The Social Workers were being actively obstructed.

A further unannounced visit was undertaken by Social Workers and at the time of the visit Charlie's partner was not present. This allowed for open, honest and transparent discussions to take place about Charlie's fears, wishes, and feelings and gave the local authority the opportunity to formulate a safety plan with him. This included immediately sourcing an emergency placement in a supported living accommodation with a full-time support team. During this unannounced visit, emergency services were required in order to support Charlie and the Social Workers when the partner returned and became highly abusive.

### **Outcome**

While Charlie was in supported living, Social Workers proactively supported him to find safe accommodation in the form of a flat in order to promote independence. Charlie has settled, made safe relationships, is able to accept health and social care services as and when required, and has expressed his appreciation and happiness at this outcome.

# 3. Safeguarding and Deprivation of Liberty Safeguards (DoLS) Activity Report



## 3.1 Activity Reports:

### 3.1.1 Safeguarding Adults 2017-8 Data

The 2016-17 Safeguarding Adults Collection (SAC) records details about safeguarding activity for adults aged 18 and over, and was amended in line with the changes brought about by the Care Act 2014.

Here is an explanation of some of the terminology used in the following data reports:

**Safeguarding Concerns:** This means cases where a sign of suspected abuse or neglect is reported to the council or identified by the council. Derby City Council have captured information about concerns that were raised during 2017-18, that is the date the concern was raised with the council falls within the reporting year, regardless of the date the incident took place.

**Safeguarding Enquiries:** This means the action taken or instigated by the local authority in response to a concern that abuse or neglect may be taking place. An enquiry could range from a conversation with the adult to a more formal multi-agency plan or course of action.

**Section 42 Safeguarding Enquiries:** The enquiries where an adult meets ALL of the section 42 criteria.

**Other Safeguarding Enquiries:** The enquiries where an adult does not meet all of the section 42 criteria but the council considers it necessary and proportionate to have a safeguarding enquiry.

The next two pages will highlight the total number of safeguarding referrals received 2016-17 with the following breakdown:

- **Number of safeguarding referrals received during 2017-18**
- **Safeguarding enquiries started and concluded during 2017-18**



## Total Number of Safeguarding Referrals received during 2017-18 and breakdown of individuals

Total Number of Safeguarding Referrals Received

2712

1048

Total Numbers of Section 42 Safeguarding Enquiries

Total Number of Individuals processed through Section 42 Safeguarding Enquiries

988

## Ethnicity

2016-17	2017-18	Ethnicity
79%	73%	White / White British
1%	2%	Mixed / Multiple
5%	7%	Asian / Asian British
2%	3%	Black / African / Caribbean / Black British
1%	>1%	Other Ethnic Group
11%	15%	Undeclared / Not Known

The average population of Derby City who are White/White British is **76%**.

White/White British is the largest ethnicity group for safeguarding referrals with **73%**. This is a decrease by **6%** from 2016-17.

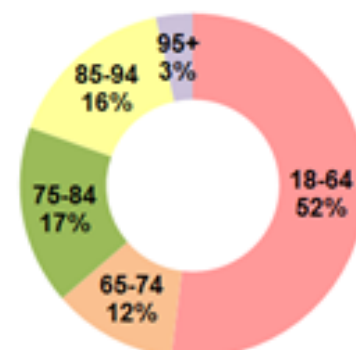
## Age and Gender



**40%** of those referred were males whilst **60%** were females. This represents an increase in referrals for females from 2016-17 by **1%**.

The average population of females in Derby is **50.5%**

The highest figure for age group is 18-64 amounting to **52%**, a **6%** increase from 2016-17



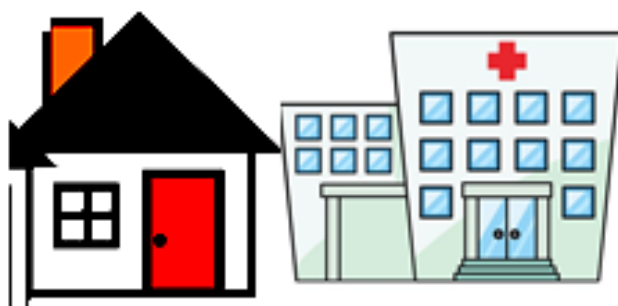
## Primary Support Reason



# Safeguarding Enquiries started and concluded during 2017-18

## Location of Abuse

**55%** of Safeguarding Enquiries concluded were where abuse took place in the individuals own home. This is an increase by **5%** from 2016-17.



**21%** of concluded referrals were where abuse took place in a care home whilst **8%** were in a hospital setting

## Type of Abuse

2016-17	2017-18	Type of Abuse
26%	22%	Physical Abuse
4%	5%	Sexual Abuse
14%	16%	Psychological Abuse
14%	12%	Financial or Material Abuse
1%	1%	Discriminatory Abuse
3%	3%	Organisational Abuse
24%	20%	Neglect and Acts of Omission
6%	9%	Domestic Abuse
1%	2%	Sexual Exploitation
>1%	1%	Modern Slavery
8%	9%	Self-Neglect

## Alleged Source of Risk

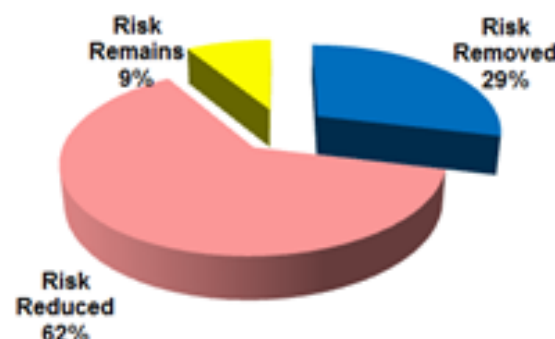


**12%** were experiencing abuse from a stranger or unknown

**70%** of abuse allegedly was by someone they knew. This is a **17%** increase as 2016-17 reported **59%** of abuse was carried out by someone who they knew

**18%** of abuse was allegedly by a professional, which is a decrease by **15%** from 2016-17

## Risk Outcomes



**91%** felt that following the completion of the Safeguarding Enquiries, the risk was removed or reduced. This is the same as 2016-17

### **3.1.2 Deprivation of Liberty Safeguards (DoLS) Data – 2017-18**

The Deprivation of Liberty Safeguards, often referred to as DOLS came into effect in 2009. They are part of the legal framework set out in the Mental Capacity Act 2005 to safeguard the rights of people who lack the mental capacity to make decisions for themselves.

The European Court of Human Rights established in principle that ‘no one should be deprived of their liberty unless it is prescribed by law’. The Deprivation of Liberty Safeguards were subsequently introduced to ensure, that in circumstances where a hospital or care home believe it will be necessary to deprive a person of their liberty in order to deliver a particular care plan, that any deprivation of liberty:

- is in the person’s best interests
- is necessary and proportionate to prevent harm
- is with representation and rights of appeal
- is reviewed, monitored and continues no longer than necessary

What amounts to a deprivation of liberty depends on the specific circumstances of each individual case. As a result, there is no single definition or a standard checklist that can be used. However, in March 2014, a landmark Supreme Court judgement set out an ‘acid test’ for determining whether a person is being deprived of their liberty. The judgment states that if a person:

- lacks capacity to consent to their care and treatment and
- is under continuous supervision and control and
- is not free to leave

the person is being deprived of their liberty.

## Total Number of Deprivation of Liberty Safeguards (DOLS) applications received – 2017-18

Total Number of DOLS Applications received in 2017-18

1079

686

Total Numbers of Applications Granted in 2017-18

Total percentage of applications received from the hospital

6%

## Ethnicity



2016-17	2017-18	Ethnicity
92%	87%	White / White British
1%	>1%	Mixed / Multiple
2%	2%	Asian / Asian British
2%	2%	Black / African / Caribbean / Black British
1%	>1%	Other Ethnic Group
2%	8%	Undeclared / Not Known

White/White British is the largest ethnicity group for applications received in 2017-18 with **87%**. This is an decrease by **5%** from 2016-17

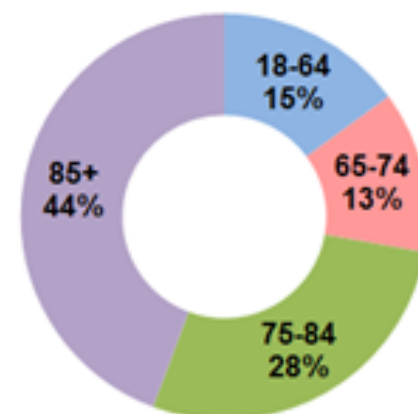


## Age and Gender



There were **37%** of applications received for males and **63%** of applications received for females. This is an increase by **2%** from 2016-17.

The highest figure for age group is over 85 amounting to **44%**. This is a decrease from 2016-17 by **2%**



## Location and Primary Support Reason



**6%** of referrals were received from the hospital whilst **94%** of applications were received from a care home. **1%** decrease in hospital referrals from 2016-17

**69%** of applications were for individuals with dementia. This is a **2%** decrease from 2016-17

### **3.1.3 Deprivation of Liberty Safeguards (DoLS) in Practice**

Brenda was an eighty-nine years old white British woman, who for many years had been living with other family members following the death of her husband. Brenda's physical and mental health had deteriorated steadily over a number of years during which time she had been provided with care services at home.

Following a period of crisis at home and a rapid decline in Brenda's health she was admitted to a care home for what she understood to be a temporary measure while arrangements were made for her return home. After several weeks and with no apparent progress made for her return home, the care home completed an application to Derby City Council for a Deprivation of Liberty Safeguards authorisation. The relevant assessments were undertaken and it was concluded that Brenda lacked the mental capacity to decide her accommodation and care and treatment, however Brenda was consistently stating that she wanted to return home. By this time Brenda's health condition had not improved and she was assessed by the GP as being 'end of life'.

In consultation with Brenda's family it was clear that they also wanted her to return home and although there were complicating factors the best interests assessment recognised the strength of Brenda's wishes and concluded that Brenda should be supported to return home.

#### **Outcome:**

A short authorisation period was recommended and granted with recommendations made to the funding authority to facilitate Brenda's return home. Within two weeks Brenda did return home with a package of care and she was supported to remain at home as her health further deteriorated. Brenda subsequently passed away at home.

### **3.1.4 Deprivation of Liberty Safeguards (DoLS) in Practice**

Patrick was a man in his mid-seventies who had been married for 50 years with a large extended family. Three years ago he had a stroke which resulted in some cognitive and communication difficulties. Following a period of inpatient stroke rehabilitation, Patrick returned home.

Patrick had a long history of depressive illness and his mood was affected by the loss of independence and physical complications arising from his stroke. Patrick had multiple hospital admissions and was recently also diagnosed with dementia.

He was transferred between rehabilitation and acute wards which impacted on the continuity of his care and added to his feelings of frustration and isolation. No communication care plan was being used within the acute wards.

Patrick was discharged home following a best interest decision but had a rapid deterioration in his physical and mental health and was then admitted into psychiatric hospital under s2 of the Mental Health Act. Then, as his condition stabilised the section was rescinded, and an application for DoLS was made.

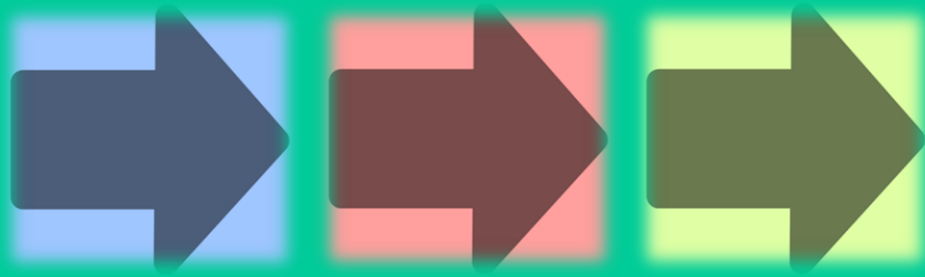
The initial thrust of discharge planning was to suggest a nursing home for his future care. The DoLS process, focusing on a careful review of all of his circumstances and the events leading up to the admissions, minimised some of the restrictions by advocating for Speech and Language Therapy interventions and the creation of a communication support plan. This ensured he was able to participate in the process and better convey his views, beliefs and values. This helped promote greater autonomy and more person-centred care and informed discharge planning.

#### **Outcome**

A short DoLS authorisation was made with recommendations regarding his care plan to ensure that his language and communication needs were supported and appropriate aids made available to him. Within four weeks he was discharged home with a package of care and the continuing support of his family



## 4. Moving Forward...





## **4.1 Board Priorities for 2018/2019**

**1. Derby Safeguarding Adults Board will evidence that the views of adults who have been supported through safeguarding this year, will be heard and shape its future work and strategic direction.**

The following actions will be taken under the leadership of Perveez Sadiq, Service Director Derby City Council with the support of the Customer Inclusion Group:

- We will continue to promote safeguarding and dignity in care across all communities in Derby in order to increase referrals from Adults and their families and carers. In so doing we will look to further the links we have with Healthwatch Derby, the Multi-Faith Centre and Safeguarding Leads from across all Faith organisations
- We will ensure that there are transparent mechanisms in order that Adults will be able to express their views in a variety of ways which make use of both traditional and electronic recording. Where Adults are not in a position to express their views their representatives will be asked to express their views on behalf of the adult
- We will ensure that Adults are asked in a clear way whether they feel safer, whether they were able to make choices and whether they have an increased control over their lives after they have been supported through safeguarding
- We will ensure that Adults views will be presented in a clear manner which shows to all what is working well and where improvements need to be made
- We will ensure that Adults and their families and carers will be invited to contribute to the work of the Safeguarding Board. We will seek to explore a variety of mechanisms for this, including the use of one off workshops
- We will continue to promote Dignity in Care. All Derby Safeguarding Board members will be registered dignity champions and the teams in which they directly work in will achieve the Dignity Award
- When we are talking with Adults we will seek feedback about their experiences of being treated with dignity and respect, identifying any issues arising from when this has not happened
- We will ensure that Safeguarding training will show evidence of co-production with adults who have been supported through safeguarding
- We will ensure that the Board's Strategic Plan for 2018/19 will show a clear link to where the views of Adults have helped to shape future objectives and actions

**2. Derby Safeguarding Adults Board will improve the way all agencies in Derby proactively work together to safeguard adults in need of care and support. The voice of the Adult will be at the heart of all that we do.**

The following actions will be taken under the leadership of Bill Nicol, Head of Adult Safeguarding Erewash, Hardwick, North Derbyshire & Southern Derbyshire Clinical Commissioning Groups, with the support of Performance Improvement group:

- We will ensure that the multi-agency safeguarding audits will identify to what extent adults have been able to make choices and gain greater control over their lives as a result of safeguarding enquiries and actions
- In carrying out the multi-agency safeguarding audits the Board will focus on key new areas of abuse identified by the Care Act 2014 to include, self-neglect, domestic abuse and Modern Day Slavery
- We will ensure that learning is identified from the multi-agency safeguarding audits will then lead to changes in safeguarding practice and in turn these changes will be evaluated to ensure that they have resulted in positive outcomes for Adults
- We will review the Board's Information Sharing Agreements to ensure that agencies are sharing information in a timely manner

The below actions will be taken under the leadership of Claire Hammonds, Derbyshire Constabulary, with the support of Learning and Development Subgroup:

- We will ensure that all safeguarding training which is developed through the Safeguarding Board will be available and used by staff from all members of the Board and will also draw on the expertise of agencies linked to the Board to ensure that it reflects best practice and is based on the principles of Making Safeguarding Personal
- We will develop shared multi-agency training for all which enhances safeguarding awareness at all levels covering both strategic and operational staff

**3. Derby Safeguarding Adults Board will evidence that it has improved its intelligence on understanding the prevalence of abuse and neglect in Derby. The Board will be able to demonstrate that it has taken action and put in place plans to reduce the prevalence of abuse and neglect in Derby.**

The following actions will be taken under the leadership of Bill Nicol, Head of Adult Safeguarding Erewash, Hardwick, North Derbyshire & Southern Derbyshire Clinical Commissioning Groups with the support of Performance Improvement group:

- We will look to celebrate and share good practice where agencies work together to promote the Safety of Adults in Derby. When safeguarding practice does not meet the standards as laid out in the Board's Policy, Procedures and Practice Guidance, we will hold agencies and groups to account through their Board Member
- We will receive intelligence from all agencies who are members of the Board in respect of information that they hold in relation to abuse and neglect in Derby
- We will ensure that any intelligence received takes into account and references the diversity of the population of Derby
- We will receive reports to further the Board's understanding of what is happening in Derby to keep Adults Safe who are at risk due to Domestic Abuse, Radicalisation, Modern Day Slavery, Hate Crime, Forced Marriage,

FGM and other Harmful Cultural Practices, County Lines (Cuckooing), Herbert Protocol.

- We will continue to strengthen our relationships with other Safeguarding Adult Boards both regionally and nationally to enable it to identify wider trends which enhances its understanding on the prevalence of abuse and neglect in Derby

## 5. Statements from Partners



## **Derby City Council (DCC)**

### **Safeguarding work undertaken and key achievements in 2017-18**

During 2017-18 DCC completed and achieved the following:

- Updated the Derby City and Derbyshire Safeguarding Adults Board Policy and Procedures
- Hosted the Dignity Day Event in February 2018, inviting partner agencies to take part and to recognise work completed by members of the community
- Continued to prioritise Making Safeguarding Personal (MSP), keeping the individual at the heart of safeguarding
- Outcome measures of MSP continue to be embedded within the safeguarding process
- Delivered a range of Safeguarding Adults training courses to 1852 delegates from across private sector and partners agencies in 2016-17
- Supported the Multi-Agency case file audits that were led by the Performance Improvement Subgroup
- Provided local coordination in respect of the Safeguarding Adults Collections (SAC) Returns and Deprivation of Liberty Safeguards (DoLS) Collection for NHS Digital 2017-18
- Successfully carried out multi-agency safeguarding case audits
- Represented on the Derby Safeguarding Adults Board and it's four subgroups (Learning and Development Subgroup, Mental Capacity Act / Deprivation of Liberty Safeguards Subgroup, Performance Improvement Subgroup and Customer Inclusion Subgroup), ensuring that the Agenda of the DSAB was being followed
- Attended the Regional East Midlands Safeguarding Adults Network (EMSAN) and hosted a regional database of Safeguarding Adults Reviews (SARS) and Domestic Homicide Reviews (DHR)

## **Clinical Commissioning Groups (CCG)**

### **Safeguarding work undertaken and key achievements in 2017-18**

The four CCGs are committed to safeguarding and promoting the safety and welfare of patients and family carers across all areas of the health economy.

The term Adult Safeguarding encompasses an ever- expanding range of public safety initiatives and disciplines. At its core is the assumption that any intervention assists the adult at risk to live a life that is free from abusive behaviour and practice. It is essential that organisations work collaboratively to ensure that all patient contact promotes safety, independence, self-empowerment, dignity, and choice.

Whilst the lead responsibility for coordinating adult safeguarding arrangements lies primarily with the Local Authority Adult Social Care Department, the CCGs have once again played an active role in the work of the Safeguarding Adult Board. Truly effective safeguarding is based upon the existence of strong multi-agency partnership working arrangements with the existence of consistent operational processes and robust information sharing pathways. The CCGs have worked in partnership to deliver the Boards strategic programme and identify and prevent abusive behaviours and practices.

The principal role of the four Derbyshire Clinical Commissioning Groups is to ensure that both their own internal adult safeguarding structures and processes, and those within NHS commissioned services, meet the required standard as Safeguarding Adults is a statutory responsibility. The service also provides a key role in promoting awareness of safeguarding issues across Primary Care.

This is achieved through the CCGs Safeguarding Adult Assurance Framework and supplemented by a full and varied staff training programme. The CCGs Adult Safeguarding Team also regularly provide operational advice to staff

The CCGs have also produced 13 podcasts and reviewed the content of their Adult Safeguarding Mobile Phone App. They also coordinated an excellent staff workshop focussing upon self-neglect and hoarding

## **Derbyshire Police**

### **Safeguarding work undertaken and key achievements in 2017-18**

Protecting the vulnerable and those at most risk within our communities remains a priority for Derbyshire Constabulary.

Whilst the strategic management and oversight of safeguarding adults is under taken by the Constabulary's Public Protection Department, it remains everyone's responsibility to recognise an individual's wider needs and refer those in need of help to the relevant agency best placed to assist.

Derbyshire Constabulary is an active member in all the multi-agency safeguarding functions and takes its role as a statutory member seriously.

During this reporting period the Constabulary has embedded the Herbert Protocol into our day to day business, and following a recent review we have identified an opportunity to further develop the process, so as to reach a wider audience, and at the same time being able to identify and improve opportunities to identify crime prevention options. A design process is currently ongoing.

Derbyshire's IDVA services are due to renew in April 2019 and this will see a 365 day cover from the service and a closer working partnership with Derbyshire Constabulary around high risk cases. Derbyshire's MARAC has been fully reviewed and we are recruiting an Independent MARAC chair that will improve and reinvigorate MARAC conference.

Operation Signature is an approach to Fraud investigation which includes a process to identify potentially vulnerabilities in fraud victims and provide protective measures. The newly created Fraud Assess and Protect Officer (FAPO) role involves scrutinising the monthly victim data provided by Action Fraud and subjecting it to a risk assessment to identify potential vulnerability. The FAPO then contacts those identified as potentially vulnerable and ensures the appropriate level of intervention is implemented.

We have improved our response to Modern Day Slavery, we have an engagement team that try to build confidence to improve reporting, and there have been increased numbers of prosecutions and also increased numbers of victims being referred in to the National Referral Mechanism.

Derbyshire Constabulary will also be creating a new Adults at Risk investigation team that will focus on crime and abuse within the care home setting and other vulnerability settings. This along with an increase in staffing with the Public Protection arena should improve the overall response and service that the Constabulary can provide to our communities most vulnerable. Protecting the Vulnerable is a priority for the Constabulary and it places vulnerability at the centre of all of its decisions around responding to calls for service and future improvement plans.



## **Community Safety Partnership - Prevent**

### **Safeguarding work undertaken and key achievements in 2017-18**

Prevent is one strand of the UK's wider counter-terrorism strategy known as CONTEST (2018). The strands of the strategy are:

- Pursue – Concerned with the apprehension and arrest of people suspected of being engaged in the planning, preparation or commissioning of terrorism
- Prevent – Aims to stop people becoming terrorist or supporting terrorism by safeguarding people and communities
- Protect – Seeks to strengthen our protection against a terrorist attack and reduce our vulnerability to an attack
- Prepare – Mitigate the impact of a terrorist attack where an attack cannot be stopped

The purpose of Prevent is to safeguard and support vulnerable people to stop them becoming terrorist or supporting terrorism of any form. It aims to:

- Tackle the causes of radicalisation and respond to the ideological challenge of terrorism
- Safeguard and support those most at risk of radicalisation through early intervention, identifying them and offering support
- Enable those who have already engaged in terrorism to disengage and rehabilitate

#### **What prevent is and what it does:**

- Prevent is a service which provides non-compulsory safeguarding support to vulnerable individuals who have the final say of accepting support or not.
- It is about safeguarding. In the same way support is provided to those at risk of becoming involved in gangs, drugs, exploitation, or other forms of harm, individuals vulnerable to being groomed into radicalisation can also be offered support.
- Prevent operates within a non-criminal space, intending to pre-empt criminal activity. This ensures the protection of communities and not its criminalisation. Importantly, those who receive support do not receive a criminal record for their participation.

#### **What we do:**

- Community engagement is pivotal. We work closely with local community and voluntary groups to co-deliver support.
- Training and supporting frontline staff and specified authorities on issues including: radicalisation, extremism, terrorism and support mechanisms so they can recognise when someone may be at risk and can respond appropriately. Whether this occurs through training, discussion or debate, it is essential to how we work.
- We regularly seek to promote discussion and debate. As such, we organise events such as free training, workshops/assemblies and community Q&A.

- We are committed to providing support to those who need and want it. Subsequently, we provide free tailored support to each individual such as mentoring, employment support, substance misuse support, or discussion with credible ideological experts and faith leaders.

## **Channel**

Channel is the safeguarding panel which supports Prevent. Led by the Local Authority, it is a programme which focusses on supporting people at an early stage who are identified as vulnerable to being drawn into terrorism. It ensures people of any age, faith, ethnicity or background receive support before their vulnerabilities are exploited by those wanting them to embrace any criminal terrorist related activity. It is a confidential and voluntary process where multi-agency safeguarding professionals meet to discuss support options. These support options encompass an array of different interventions, addressing educational, vocational, mental health, and other vulnerabilities. Ideological support is also common, which may include discussion with credible ideological experts and faith leaders.

## **Derby Homes**

### **Safeguarding work undertaken and key achievements in 2017-18**

Derby Homes is a member of the Adult Safeguarding Board and also has representation on each of the four sub-groups. Even though we aren't a statutory partner we show our commitment by making a 4% contribution to the board running costs.

Parkland View Extra Care Scheme housing management staff submitted and was successful in obtaining a Dignity Award this year. Further work is being carried out by the representative of the Customer Inclusion Group with other staff and community groups to encourage them to apply.

Derby Homes continue to work closely with the Multi-agency safeguarding team both on referrals and supporting S42 enquiries. We have contributed to safeguarding themed audits carried out by the Performance sub-group, some of which relate to Derby Homes tenants.

Derby Homes support the Learning and Development sub-group, the representative is vice-chair of the group. We have continued to support delivery of S42 Enquiries training and completed surveys with participants in order to provide feedback as to the quality of the training. Making Safeguarding personal has been embedded in all Derby Homes safeguarding training.

The representative of the MCA DOLS group has distributed surveys to Derby Homes staff and provided feedback to the group on their understanding of capacity. This is to determine whether multi-agency training is needed.

## **Derbyshire Healthcare Foundation Trust (DHCFT)**

The Trust ensures that the imperative of safe and effective practice threads through training, supervision, preceptorship, coaching and mentoring within DHCFT.

The named Director for safeguarding is Carolyn Green, Director of Nursing & Patient Experience, the named Assistant Director for Adult Safeguarding is Karen Billyeald and the Named Doctor for Adult Safeguarding is currently Dr Wendy Brown.

The Trust follows Derby's Safeguarding procedures in full and these governance groups have direct oversight of all incidents, compliance, audit and training.

We are a multi-speciality community and in-patient Trust providing health services to children, young people and adults of all ages across a range of care pathways and recognise the role we play in identifying possible abuse and acting to support both individuals and families. The Trust co-hosted the first Derbyshire Trauma Conference in October 2017 with Derbyshire Police.

Involving survivors as guest speakers were very powerful, the day was a huge success and has led to the establishment of a community of practice network that continues to share knowledge and learning across agencies.

The Trust has representation at Safeguarding Adults Board and on each of the Board sub groups. The Trust contributes significantly to the multi-agency training framework and provision across the County. The trust offers its buildings for training and expert advice to the Board and sub groups to supports its endeavours.

Commissioners have, since 2016, supported the development of two whole time equivalent MASH Health Advisor posts, employed and line managed by DHCFT, and the year 2017/18 saw a further commitment through to March 2020. The contribution of the Health Advisor role within the MASH is well established as are the benefits of multi-agency responses. Monthly activity data is included in both the Trust's and the MASH performance frameworks.

### **Prevention of harm and abuse through the provision of high quality care:**

This year has seen the development a "Link Worker Network" in the Trust whereby staff members of all grades and disciplines have been invited to become part of a group of staff who receive additional training and support to act as local safeguarding resources for their teams. The aim is to have at least one Link Worker in each time. At the time of writing we are approximately 50% towards achieving our goal. As a learning organisation, DHCFT has focused a significant level of activity on learning the lessons from very serious cases, homicide reviews, domestic homicide reviews and quality assurance reviews.

Some examples of how we do this are as follows:

- 'Think Family'
- The Safeguarding Adults assessment Framework (SAAF)

- We continue to await the outcome of the consultation and subsequent publication of the Inter-Collegiate Document for Safeguarding Adults but are confident that we are proactive in our approaches to education and practice.
- To provide assurance by our compliance with the Safeguarding Adults assessment Framework
- 2017/18 has seen the development of a Safeguarding Adults Performance Dashboard. This was developed to provide assurance that we are meeting our legal, national and local statutory duties and is shared with the wider safeguarding community through the City and County Performance Improvement Sub Groups.
- We are fully compliant with safeguarding adults training standard at above 85% for Level 1 and Level 2. We ended the year with compliance for Basic Prevent Awareness Training [BPAT] and WRAP Prevent Awareness exceeding the required 85%.
- To develop competence in early detection and prevention of abuse and our CQC action plan has delivered a significant amount of work improving knowledge and skills in assessing mental capacity and best interest decision-making.
- Accessible Safeguarding Initial Screening Tool [ASIST]. This is a symbol based resource for those people whose communication needs are significant. Our philosophy of “learning the lessons” has, in some instances, led to sustained practice improvements in preventative strategies.
- Service receivers and their families and carers. We have incorporated learning from serious cases into improved work in this vital area of prevention and support.
- Counter-Terrorism safeguarding community. We are active partners in the Derby and Derbyshire Channel Panel and work very closely with the Prevent Team as a significant number of people referred have a mental health profile.
- Last year we expressed an intention to be able to provide data regarding more low level activity and concerns. We are pleased that, for the year 2017/18, we have collated and analysed all the calls for advice and guidance that have been made to the Assistant Director for Safeguarding Adults and the Safeguarding Unit and have produced a report of findings. It shows activity across all areas of abuse and also evidences the significant and consistent levels of safeguarding activity in the organisation.

### **Future intentions / direction for safeguarding**

- To review and further develop the Trust’s Safeguarding Adults Strategy
- To review and deliver a new pathway for Safeguarding Adults which includes MAPPA and Section 41.
- To continue the review and redesign of the Care and Care Programme Approach in response to learning from serious incidents
- To consolidate the safeguarding process in the Trust
- To focus attention on safety in the Trust’s in-patient services in response to a national review by the CQC

## **DHU Health Care CIC**

### **Safeguarding work undertaken in 2017-18**

DHU Health Care CIC is a 'not for profit' social enterprise organisation and is the provider of the NHS health services for Derbyshire and Leicestershire. In Derbyshire DHU Health Care CIC provides the Urgent Care service and the Evening and Overnight Community Nursing Service. DHU 111 (East Midlands) CIC, a subsidiary of DHU Health Care CIC, are the provider for the NHS 111 service for approximately 4.8 million people within the East Midlands.

DHU Health Care CIC continues to prioritise safeguarding as an integral part of providing high quality care and a key component of our safe clinical practice and standards. To support the delivery of the safeguarding agenda within DHU Health Care CIC there is a clear governance and accountability framework in place. The framework provides assurance to our commissioners, whilst the ultimate responsibility and accountability for adult safeguarding lies firmly with the Board of Directors.

DHU Health Care CIC continues to participate and contribute throughout the year to the work of the Board through membership and collaborative multi-agency working.

### **Key Achievements for 2017-18**

Following the previous year's introduction of making referrals to social care more streamlined within our record system, DHU Health Care has continued to ensure that concerns are passed with speed and accuracy via electronic links. The e-referral process is 'paperless' reducing the information governance risks and easing the referral process.

DHU Health Care CIC has prioritised the Prevent agenda over the past 12 months. Ensuring that staff are appropriately trained and processes are in place for raising alerts if necessary.

### **Priorities for the future**

Priorities for the coming year are in relation to quality assurance. DHU Health Care CIC will undertake audits to establish quality of referrals made to social care. Training can then be tailored to address any identified issues or area of need. DHU Health Care CIC will introduce a Domestic violence policy for patients and staff. DHU Health care CIC will review the managing allegations procedure and update the safeguarding procedure accordingly.

Going forward DHU Health Care CIC will continue to be vigilant about the expanding range of initiatives and disciplines that come under the 'safeguarding' umbrella. DHU Health Care CIC will continue to focus upon safeguarding practice and as a partner agency within the Safeguarding Board, we will continue to work collaboratively, supporting the development and implementation of agreed safeguarding strategies and policies.

## Care Quality Commission (CQC)

### Statement on CQC's role and responsibilities for safeguarding children and adults

Our role in safeguarding is:

- Checking that care providers have effective systems and processes to help keep children and adults safe from abuse and neglect
- Our Insight model monitors information we receive about safeguarding to assess risks to adults and children using services, to make sure the right people act at the right time to help keep them safe and to inform our inspections
- Acting promptly on safeguarding issues we discover during inspections, raising them with the provider and, if necessary, referring safeguarding issues to the local authority – who have the local legal responsibility for safeguarding – and the police, where appropriate, to make sure action is taken to keep children and adults safe
- Speaking with people using services, their carers and families as a key part of our inspections so we can understand what their experience of care is like and to identify any safeguarding issues. We also speak with staff and managers in care services to understand what they do to keep people safe.
- Holding providers to account by taking regulatory action to ensure that they rectify any shortfalls in their arrangements to safeguard children and adults, and that they maintain improvements. This includes requiring providers to produce action plans, taking enforcement action to remedy breaches of fundamental standards, and taking action against unregistered providers
- Publishing our findings about safeguarding in our inspection reports, and awarding services a rating within our key question 'Is the service safe?' which reflects our findings about safeguarding, safety and quality of the care provided
- Support the local authority's lead role in conducting enquiries or investigations regarding safeguarding children and adults. We do this by co-operating with them and sharing information where appropriate from our regulatory and monitoring activity. We assist the police in a similar way
- Explaining our role in safeguarding to the public, providers and other partners so that there is clarity about what we are responsible for and how our role fits with those of partner organisations

Although we do not have a formal role on Safeguarding Adults Board we work closely with local teams, sharing as appropriate and where asked provide information and intelligence to help them identify risks to children and adults.



## **Derbyshire Police and Crime Commissioner (PCC)**

### **Safeguarding work undertaken and key achievements in 2017-18**

The Police and Crime Commissioner for Derbyshire has a clearly stated objective to protect those who are vulnerable in our communities safe from crime and harm (Police & Crime Plan 2016-21 Priority One). As part of his commitment to this agenda he takes a keen interest in the issue of Safeguarding Adults (and Children) and ensures active participation of a senior OPCC officer at each of the Board meetings. He also has a statutory duty to ensure that the Chief Constable is running an efficient and effective police force and this includes the discharge of the Police's statutory duties around safeguarding.

The PCC has continued to include the issue of safeguarding as part of his forward plan for his Strategic Priorities Assurance Board – the meeting at which he holds the Chief Constable to account in a public forum. In addition to an input from the Constabulary, this new approach to oversight and assurance will see a greater role for feedback from partners on their contribution towards the PCC's priorities – this will include conversations with the four safeguarding boards for Derbyshire. It is hoped that this approach will give a greater level of assurance to the PCC as he will be able to get a broader understanding of how safeguarding is embedded within Derbyshire. This should allow the PCC to support the wider safeguarding agenda as required. He has regular meetings planned to meet with the Independent Chairs of the boards to discuss safeguarding issues and understand how he might be able to add value to the work of the boards.

As a body that is concerned with commissioning and governance the PCC's exposure to those for whom safeguarding may be a concern is very limited. That said he recognises the potential for those services he funds – either through grant making activity or longer term commissioning arrangements, to be working directly with those who may require safeguarding interventions. A pre-requisite for any financial support from the PCC is evidence of strong safeguarding policies and procedures in place with those seeking financial support.

## **East Midlands Ambulance Service (EMAS)**

### **Safeguarding work undertaken and key achievements in 2017-18**

During 2017-2018 there have been a number of key achievements in relation to safeguarding:

- Development of a new electronic referral process for Frontline staff supporting frontline staff to raise their referral as part of the job and decrease stand down time
- Development of a bespoke Managing allegations package
- Continued delivery of Level two Mandatory Adult and Children Safeguarding Training within the Essential Education programme for safeguarding adults and children including an Elearning assessment tool
- Active involvement in the local safeguarding boards, regional and local multiagency groups has helped our organisation's capacity to protect vulnerable people from abuse
- Full review of the Domestic Violence and Abuse policy
- Full review of the Adult safeguarding policy
- Addition of the National Hoarding framework tool as part of the safeguarding referral
- Electronic referral pathways now available for all partnership agencies
- Full compliance in SAAF
- Creation and publication of Modern slavery statement

The team have worked hard on creation of a bespoke referral form that can meet the needs of both adults and children as well as be utilised by five counties across 66 pathways. This required significant development and partnership working with Medusa to ensure that the form could meet the needs of the service. The new referral process is an important achievement for the safeguard team as it is the accumulation of many months of hard work and supports the ongoing growth of the safeguarding agenda prioritising that the referral process meets the needs of patients and staff.

## **National Probation Service (NPS)**

### **Safeguarding work undertaken and key achievements in 2017-18**

The actions of the National Probation Service Derbyshire in support of the delivery of the Safeguarding Adults Strategic Plan in 2017-18 include:

- Mandatory training for all new staff, comprising both E-learning and face to face training on Adult Safeguarding. This is delivered nationally and is an objective within all staff appraisals. We also support attendance at local training where possible
- Attendance at board meetings by Charlotte Dunkley, Head of LDU or Marion Page-Smith, Deputy Head of LDU. Other meetings are attended by Senior Probation Officers as required
- Training in Adverse Childhood Events and Trauma Informed work is in development and we are working jointly with mental health partners to establish a new community forensic service to better meet the needs of complex offenders with multiple vulnerabilities
- Participation in all statutory enquiries such as SARs and DHRs, where the agency has information or a perspective to contribute
- Joint work within the MAPPA framework at management levels 2 and 3 where adult safeguarding is an issue in a case. A particular focus this year has been on effective work with voluntary sector health partners where we have provided MAPPA and risk training to volunteers and staff
- Referrals for Care Act assessments for offenders in custody, Approved premises and in the community.
- Participation in referrals to adult safeguarding where anyone we are in contact with appears to meet criteria- this can include family of offenders and victims where we work with them
- Further development of a bespoke project to deliver a joint approach to meeting the needs of offenders with a Learning Disability in the community. We have commissioned additional nurse time to the value of £20,000 for implementation this year. This is delivered in conjunction with colleagues from health and social care and has safeguarding and the voice of the adult at the heart of it
- Significant work has been undertaken with Safeguarding, Police and Housing colleagues this year in response to concerns about vulnerability of residents in some housing projects run by Community Interest Companies. The lack of formal monitoring framework required a speedy, flexible response by all partners to ensure the safety and wellbeing of vulnerable adults

## **Derby Teaching Hospital NHS Foundation Trust (DTHFT)**

### **Safeguarding work undertaken and key achievements in 2016-17**

Derby Teaching Hospitals NHS Foundation Trust serves a population of over 600,000 people in and around Southern Derbyshire. The trust has two hospitals, the Royal Derby Hospital, an acute teaching hospital and London Road Community Hospital. Derby Teaching Hospitals NHS Foundation Trust is one of the largest employers in the region with a workforce in excess of 8,000 staff. There are a wide range of inpatient and outpatient surgical and medical specialities; the trust has around 1,100 beds at the Royal Derby Hospital and treats around one million patients each year. In its last inspection the CQC rated Trust services as good overall.

Safeguarding is a high priority for the Trust and the Trust has continued its investment in a safeguarding specialist team to provide support, advice, guidance and training for our staff and act as a central point of contact for external agencies and professionals.

A comprehensive training programme is delivered and Trust compliance at level 1 and 2 safeguarding adults has been maintained consistently in 2017 in excess of 95%. Domestic violence is a mandatory training requirement, delivered as a specific package available by e-learning and compliance is 85%.

Lastly, MCA training Trust wide compliance is 95%.

Evaluations of training are high with 100% of staff trained strongly agree or agree that they feel confident and equipped to recognise and respond to safeguarding and secondly that they understand what “thinking family” is about and agree with its value.

DTHFT continues to operate a safe system of recruitment in-line with NHS Employment Standards and Trust processes are regularly audited to assure compliance. All new starters working in clinical patient facing areas undergo a DBS check and where pre-employment checks are unsatisfactory any conditional offer of employment is withdrawn. The Trust has a Managing Allegations policy providing guidance for staff when an incident or allegation is made, whether in personal or professional activities, against a member of staff and which suggests that they may have behaved in a way which indicates unsuitability for working with children or adults at risk of abuse or neglect. A senior HR manager is the Trust Designated Officer who takes such allegations forward liaising with the police or social care as appropriate.

The Southern Derbyshire CCG Designated Safeguarding Adult Officer and team also undertook a Safeguarding Adult Assurance Framework visit. Evidence of strong governance arrangements for adult safeguarding across the Trust was found and progress with implementation of MCA identified. There were no specific actions identified.

The Trust has identified that in 2018 we will be focusing upon the following key areas:

- Making Safeguarding Personal
- The quality of referrals to social care
- MCA

## **Derbyshire Community Health Services (DCHS) NHS Foundation Trust**

### **Safeguarding work undertaken and key achievements in 2017-18**

All staff working within DCHS who have a responsibility for the care, support and protection of children and adults should ensure that those at risk are safe. If staff witness or have suspicions of abuse or neglect, they are under an obligation to report it without delay even if they have not witnessed the abuse or neglect themselves.

Safeguarding children, young people and adults from abuse and harm is everybody's business, is an important part of everyday healthcare practice and should be an integral part of patient care. DCHS has a dedicated Safeguarding Team of nurses/health professionals and administration staff to provide advice, support and training to DCHS staff and other care providers within Derbyshire.

The Safeguarding Service seeks to protect children, young people and adults through training, supervision and advice.

The Safeguarding Service promotes a 'Think Family' focus throughout all child and adult safeguarding work to promote the importance of listening to the voice of the child and to ensure that safeguarding adults is made personal.

### **Quality assurance**

Quality assurance is provided by the Safeguarding Governance Group (SGG). The group is a formal sub-group of the Quality Services Committee (QSC). The Group meets bi monthly and provides assurance to QSC on the following:-

- That the experience/care our patients receive is fully compliant with the MCA 2005
- Safeguarding Children, Adults and 'Think Family' are comprehensively addressed across DCHS
- Lessons learned from Serious Case Reviews, Serious Incident Learning Reviews, Domestic Homicide Reviews and Safeguarding Adults Reviews, are actioned and embedded in practice
- DCHS is compliant with The Care Act 2014

The group monitors the implementation of policies and strategies which will support clinical staff and managers in the implementation of the Safeguarding Children, Adults and the 'Think Family' agenda.

The Designated Nurse Safeguarding Children and a representative from the Safeguarding Adult Team for the CCG attend the SGG to both demonstrate transparent working and to draw on their expertise.

### **Advice Calls for Safeguarding Adults**

There has been a dramatic increase in the number of advice calls and follow up contacts given by the Safeguarding Adults Team compared to the same period in 2016/17.

### **Named Nurse Safeguarding Adult advice/support and follow up contacts**

Year	1st Advice Call	Follow Up	Total
2015-2016	411	455	866
2016-2017	752	1109	1861
2017-2018	1470	2143	3613

The number of follow up contacts has largely been generated by DCHS staff requiring follow up support. The complexity of the cases being referred to the Adult Safeguarding Team has certainly been a factor in the number of follow up contacts with DCHS staff.

Over the last 12 months the Adult Safeguarding Team has recruited two new team members replacing team members who have left the service. This has provided the opportunity to work closer/develop stronger links with DCHS colleagues within Derby City and partner agencies, in particular the MASH unit. The number of advice calls from staff within Derby City has increased due to us raising awareness of the Adult Safeguarding Team and the assistance/support we can provide.

### **Information Sharing Requests**

Derby City Council has recently developed a Section 42 enquiry form. The requests come directly to the safeguarding services NHS email, which ensures it is allocated to a member of the team. This guarantees that we are meeting our statutory requirements to share information as part of the safeguarding process, in a timely manner.

### **Number of Section 42 requests received**

Section 42 Enquiry – Information Requests	2017-18
Derby City	130

The Safeguarding Administration Team respond to daily requests for information from various partner agencies and hubs such as MASH, Derbyshire Constabulary Central Referral Unit, Public Safety Officers and other NHS Safeguarding Services in relation to safeguarding, crime and public protection concerns.

### **Safeguarding Supervision**

Safeguarding supervision is recognised by the Trust as an important element within clinical supervision and the safety culture. In addition to an individual's knowledge, skills, experience and training, effective safeguarding practice relies on a professional's curiosity and vigilance.

## **Safeguarding Training**

As a Trust we are responsible for designing, developing, implementing and evaluating single agency safeguarding training to all employees and volunteers according to recommendations set out by governing bodies.

The Trust also works in conjunction with DSAB and DSCB training departments to ensure that relevant staff groups have access to multi-agency training. A member of the Adult and Children's Safeguarding Team attends the joint Learning and Development sub-group of the Boards.

## **New Initiatives - Internal and External**

- Development of a Domestic Abuse portal on the DCHS intranet for use by staff and managers
- The Care Quality Commission (CQC) report Learning, candour and accountability: A review of the way NHS trusts review and investigate the deaths of patients in England. Found that learning from deaths was not being given sufficient priority in some organisations and consequently valuable opportunities for improvements were being missed. Learning from a review of the care provided to patients who die should be integral to a provider's clinical governance and quality improvement work. Whilst most of the mortality reviews we conduct do not raise safeguarding concerns, we are available to support the organisation in this process should it be required
- A similar process has been introduced by NHS England for adults with a recognised Learning Disability. The Learning Disabilities Mortality Review (LeDeR) programme

## **The Next Year - Action Plan**

- To work with other services within DCHS to improve the sharing of information in relation to individuals discussed at MARAC
- In a bid to reduce staff travelling to meetings and its impact on the environment we are trialling the use of WebEx (an internet based conference call) for the Safeguarding Governance Group
- Support DCHS staff with changing care environments in line with 'Better Care Closer to Home'
- To work with the Trust to standardise the recording on electronic patient records of safeguarding information, alerts and safeguarding referrals made



## **Derbyshire, Leicestershire, Nottinghamshire & Rutland Community Rehabilitation Company (DLNR CRC)**

### **Safeguarding work undertaken and key achievements in 2017-18**

DLNR CRC is responsible for the supervision of low and medium risk of harm adult offenders, the provision of a range of rehabilitative interventions for CRC and National Probation Service (NPS) cases and the delivery of 'Through the Gate' (TTG) services in Resettlement Prisons. This work involves working with adult offenders who are both perpetrators of abusive behaviour and individuals who present with multiple vulnerabilities.

DLNR CRC are experienced in risk assessment and managing safeguarding risks on all levels. We also deliver a range of interventions to respond to specific needs both directly and in partnership. These include specific interventions to address alcohol misuse, substance misuse, homelessness and employment and training opportunities as well as interventions that address themes such as domestic abuse, anger management and general offending behaviour. We also have distinct approaches in working with female service users and young adults.

### **Prevention**

Risk assessment and risk management is one of its key activities, driving all its activities with service users. Safeguarding considerations are considered within assessment and risk management plans at all stages. DLNR CRC use specialist risk assessment tools such as OASyS and SARA (Domestic abuse) to support defensive decision making across all areas of risk. All operational staff are trained in safeguarding as part of their core training and DLNR CRC has a competency framework to ensure that all cases are allocated to appropriately trained staff on the basis of identified risk and need.

DLNR CRC have recently rolled out training for its frontline staff to support trauma informed practice across the caseload.

### **Work with perpetrators**

DLNR CRC work with perpetrators of domestic abuse and all our case managers are specifically trained for this work.

### **Work with those at risk of domestic abuse**

DLNR CRC are a key participating partner in local MARAC arrangements and also commission women's specific services with local women's specialise agencies.

DLNR CRC recognise that men can also be at risk of domestic abuse and that abuse can also occur in other contexts and across other vulnerabilities.

### **Assurance**

DLNR has quality assurance mechanisms to support the maintenance of effective practice standards. All team managers within DLNR CRC attend 'Quality Days' on a monthly basis during which case records are sampled and quality assured.

### **Quality Improvement Group (QUIG)**

The QUIG collate the findings from these Quality Assurance days, and combines them with any relevant findings from internal and external audits, HMIP Reports, Serious Further Offence Reviews, Serious Case Reviews, Safeguarding Adults Reviews and Domestic Homicide Reviews. A centrally managed Organisational Improvement Plan then assigns actions to specific working groups for senior managers to implement.

DLNR CRC also have an Internal Audit team who undertakes themed audits across DLNR. This includes audits with a specific focus on Safeguarding practice. DLNR CRC are also subject to audits through HMPPS contract management team and HMIP.

### **Making Safeguarding Personal**

DLNR CRC has tried to implement consideration for the service user perspective across our service delivery which would include its safeguarding work. This includes:

- Full involvement in assessing and planning
- SU bi-annual survey
- SU council
- Peer mentoring scheme
- Co-design and co-delivery of interventions
- Progression route into employment with us where appropriate

Our approach to SU involvement extends to encouraging and enabling our service users to engage in other service's involvement/participation systems, including adult safeguarding.

### **Board Performance and Capacity**

DLNR CRC now has a Safeguarding Adults lead and will meet its obligations with safeguarding adults through regular attendance the Safeguarding Adult Board.

## **Public Health**

### **Safeguarding work undertaken and key achievements in 2017-8**

- We continue to work proactively with other agencies to safeguard adults in need of care and support. During 2017-18 substance misuse services have worked proactively with partner organisations to support vulnerable people to overcome the harmful effects of drugs and alcohol. Partnership working has been augmented through the ongoing support for the Partnership Engagement and Enforcement Programme (PEEP) to provide coordinated support to individuals who have a range of complexities and are visibly intoxicated within the city centre. Substance misuse services also continue to work with other agencies to undertake case reviews and the formulation of systematic improvement through Drug and Alcohol Related Death and Domestic Homicide review processes.
- Substance misuse services continue to share information with the MASH including access to shared IT systems. Supported by patient safety assessments intelligence is shared about abuse and neglect and an identified single point of contact has been implemented to act as a conduit for intelligence when MASH require information from substance misuse services.
- Derby Public Health has contributed to the Suicide Prevention Partnership Forum, and to the strategy and action plan that underpins this.
- Our commissioned 0-19s Public Health Nursing Service follows adult safeguarding procedures if they have any safeguarding concerns about the parents/carers within a family. If a safeguarding concern arises in the course of a serious incident review then we have appropriate links into the safeguarding adult's processes.

\*\*\*\*\* BLANK PAGE \*\*\*\*\*



East Midlands Ambulance Service **NHS**  
NHS Trust



2016-17 Annual Report  
Derby Safeguarding Adults Board  
01332 642961  
October 2018  
<http://www.derbysab.org.uk/>