Keeping Adults Safe in Halton:

Strategy for Prevention in Adult Safeguarding

2017 - 2022

HALTON
BOROUGH COUNCIL

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AUTHORS & ACKNOWLEDGEMENT

FOREWORD

As independent chair of Halton Safeguarding Adult sBoard I am pleased to introduce our Prevention and Early Intervention in Adult Safeguarding Strategy. This strategy recognises the need for strong partnership to successfully prevent the abuse of adults in Halton. Agencies such as Cheshire police, the local authority and health organisations cannot prevent or address abuse in isolation It is only through all agencies working together with the support of our communities that we will create a strong and safe environment for all adults no matter where they live in Halton.

The strategy describes how we can work to safeguard adults at all levels. Through providing help to individuals at the earliest opportunity, for example by encouraging befriending schemes we can ensure that individuals are less isolated and therefore less vulnerable. At the highest level of risk we can ensure that there is no repetition of abuse, for example working with care providers to ensure all staff know what to do if abuse is suspected. Standards and quality assurance provide safeguards and promote a culture which has zero tolerance towards abuse.

The most important principle contained within this strategy is that agencies must work with individuals who may experience abuse. We need to listen to those we work with and not "do to" those individuals .It is critical that professionals listen to the people they work with and provide support for the solutions identified to prevent abuse.

Halton Safeguarding Adults Board will monitor the implementation of this strategy, identify what works and strengthen areas that need further work. To ensure success we need the support of all who have responsibility for ensuring safeguarding in Halton.

Audrey Williamson

Independent Chair

Halton Safeguarding Adult Board

BACKGROUND

Introduction

It is accepted in most societies that the most vulnerable people should be kept safe from any harm that they are unable to protect themselves against, including protection against abuse and neglect on the part of others.

Safeguarding is about much more than just protecting adults at risk, it is about enabling and empowering adults to live their lives as they wish, make their own decisions and choices, take their own appropriate risks, be in control, promote independence and provide equal opportunities for everyone to maximise their chances of living the healthiest, happiest and safest life they possibly can.

The prevention of safeguarding issues for adults is a multi-agency and society responsibility. This strategy sets the strategic direction for all agencies in the Borough for the next 5 years. It is informed by:
- What adults at risk have told us are the local issues
- What practitioners and professionals have told us would help and
- What works and what is identified as best practice and effective prevention.

Prevention is better than cure

The 2014, Report 41 - Prevention in Adult Safeguarding, from the Social Care Institute for Excellence (SCIE) states:

> *"While most people would agree that 'prevention is better than cure', where the prevention of abuse and neglect of vulnerable adults is concerned, identifying what works – and for whom and in what situations – is very difficult. Much abuse and neglect takes place in secret. This makes it hard to prove that an abusive event has occurred, and almost impossible to demonstrate that an abusive event has been prevented. Put another way, it is very difficult to judge what constitutes a successful prevention intervention.*

The report identifies that effective prevention is not about creating an over protective environment but is around creating a person centred approach that empowers individuals, and should involve and their families to manage their own risk and make informed choices. This approach is reflected in the *No Secrets* consultation report:

> *One of the strongest messages from the engagement with non-professionals was that safeguarding must be built on empowerment – on listening very carefully to the voices of individuals who are at risk, and those who have been harmed. Without empowerment, without people's voices, safeguarding did not work. (2009, p 13)*

This suggests that prevention in safeguarding needs must be an approach which is informed by personalisation and includes all social care user groups and service configurations. Prevention must be multi-agency (including information sharing), community safety, community participation and public awareness, as well as awareness raising and skills development with vulnerable adults.

Legislation and Policy Context

The profile of safeguarding adults has been steadily rising in recent years. There are a number of legislative, regulatory and policy-based drivers for agencies to undertake preventative work. This prevention strategy is set within the following legislative, guidance and policy drivers:

1990	The NHS and Community Care Act 1990
2000	Department of Health policy framework "No Secrets"
2005	Association of Directors of Social Services "Safeguarding Adults: A national framework of standards for good practice and outcomes in adult protection work.
2006	The Safeguarding Vulnerable Groups Act 2006
2007	Mental Capacity Act (MCA) 2007
2008	Department of Health public consultation of the "No Secrets" guidance
2008	Dignity in Care campaign aimed to create a care system with zero tolerance of abuse and disrespect
2008	Health and Social Care Act 2008
2009	Deprivation of Liberty Safeguards
2010	Care Quality Commission Safeguarding Protocol
2013	Safeguarding Adults: Advice and Guidance to Directors of Adult Social Services
2014	Care Act 2014

The Care Act 2014 states (Paragraph 14.156) that Safeguarding Adults Boards:

'Should support and promote the development of initiatives to improve prevention, identification and response to abuse and neglect.'

Halton's Safeguarding Adults Board, in response to this, has developed this Prevention Strategy, in order to support and encourage prevention initiatives and in both ensuring and measuring the success of such programmes.

It is recognised that preventative work around adult safeguarding is broader than the investigative work carried out by local authority safeguarding and police colleagues, and instead involves the broad spectrum of partners that work as part of the board, in partnership, as members not defined by statute.

This strategy looks to outline the work of all partners in terms of safeguarding and to support all partners to work in a preventative way to maximise every opportunity to prevent harm, and the risk of harm to vulnerable adults across Halton.

Safeguarding Systems

Halton Safeguarding Adults Board

Halton's Safeguarding Adults Board (HSAB) has an independent Chair, members that represent key services within Halton (as specified by Care Act 2014, see below) and meets 4 times per year. There are subgroups that conduct specific work on behalf of the board. These sub groups provide updated reports on the work they have undertaken to each SAB meeting. The SAB decide the direction of work locally based on information gathered from sub groups and wider consultations with the community and information gained from data intelligence (statutory Safeguarding Adults Collection) on reports of safeguarding issues. HSAB shares its information with Halton's Health and Wellbeing Board and the Health Policy and Performance Board.

Structure of the Halton Safeguarding Adults Board
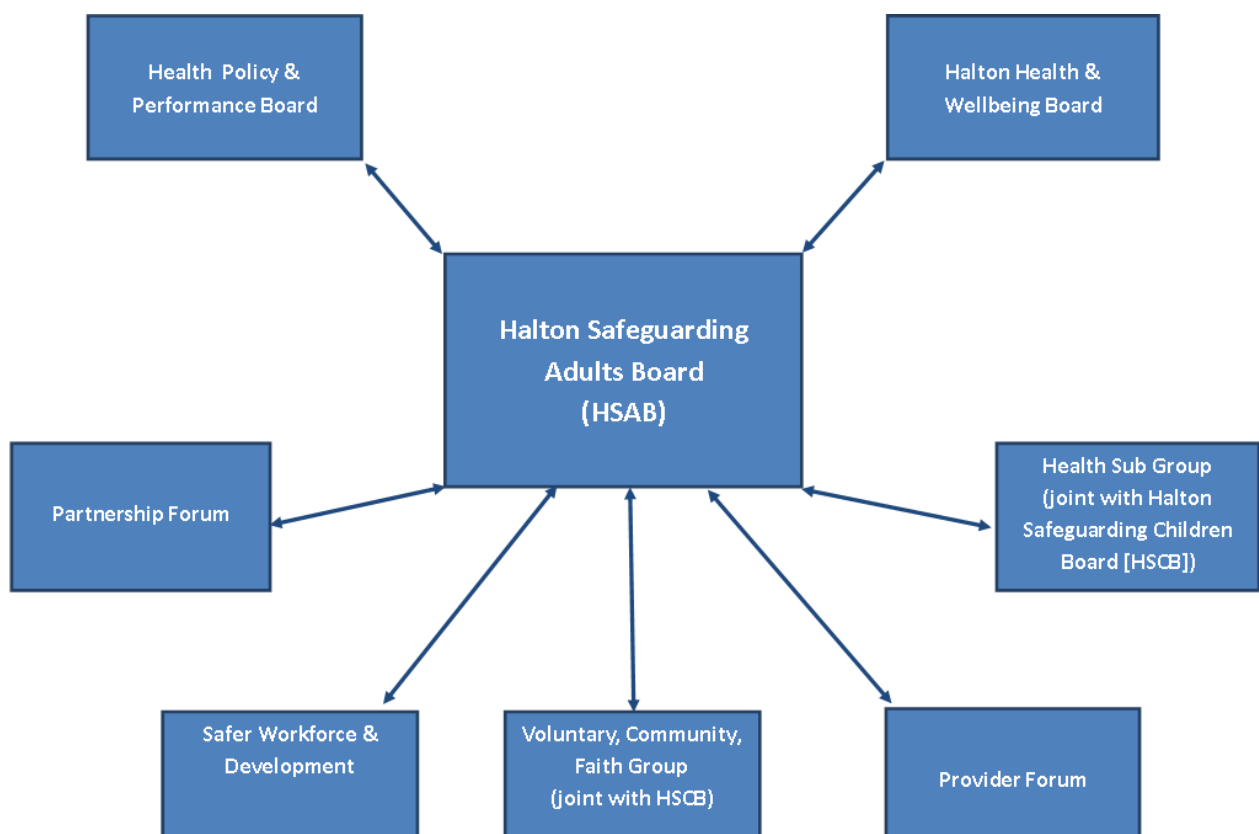
Membership of the Halton Safeguarding Adults Board

Strategies and plans that contribute to Halton Safeguarding Adults Board

Halton's Safeguarding Adults Board produces an annual Strategic Plan in accordance with Care Act 2014 guidance. This plan details the board and subgroup structures, memberships, current priorities and a business plan for achieving the objectives set for each priority.

HSAB has a multi-agency performance framework to monitor and record safeguarding issues locally across each service including safeguarding referrals, investigations and incidents. This information is shared with central government and is also used locally so that gaps,trends, good practice and learning opportunies can be picked up and actioned through HSAB with the support of the sub groups.

The Care Act states that SABs need to have a coproduction model of operating. Coproduction is a strengths-based approach using the existing skills, capabilities and resources of service users and service providers to find solutions in partnership. This means service users can positively contribute to HSAB, they are experts by experience and have assets to share. Halton has begun some discussions with service providers, service users and members of the public in order to design and implement this locally.

Halton Safeguarding Adults Board guidance

HSAB is governed and informed by national legislation (Care Act 2014) and the guidance from a broad range of health and care polices, both locally and nationally . Some examples include Self-Neglect, Adult Human Trafficking, Mental Capacity Act and Financial Abuse. In addition HSAB has a joint local safeguarding policy with Police and safeguarding agreements with NHS and emergency services. Here is a brief description of the two main guidance documents that HSAB adheres to:

- **Care Act 2014 Statutory Guidance for Safeguarding**- National Legislation in social care law on people's care and support needs and how these should be met. It states local authority's duty to ensure people's wellbeing and gives specific guidance (schedule 2) for Safeguarding Adults Boards (SABs). The guidance for SABs refers to membership of the SAB- who should attend and their roles and duties as members, how SABs are funded and resourced, compliance to produce an annual strategic plan and who must be consulted in this process. The Care Act also specifies annual reports must be produced containing the following: activities to achieve objectives and implement strategy, what each member has done to implement the strategy, the findings from any reviews that were undertaken (eg Safeguarding Adults Review) and actions taken from these findings.

- **Halton Inter-Agency Safeguarding Adults Policy, Procedure and Practice 2015-2018.** Local guidance representing the commitment of organisations in Halton working to safeguard adults. It offers a framework for best practice and multi-agency cooperation for all work related to safeguarding adults in Halton. This is currently being updated to reflect the changes within the Care Act. This plan will be updated soon to greater reflect the guidance within the Care Act 2014 and the 2015 updated guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse: No Secrets.

Feeling safe and secure

The ultimate aim of safeguarding is to ensure that people, wherever they are, feel safe and secure and are free from harm. Knowing that the services provided by local agencies are able to do this is a start to a society change in which every aspect of life can provide a safe and guarded environment. The Adults Social Care Outcome Framework (ASCOF) 2015/16 data shows that the proportion of people who report that the services they use made them feel safe and secure. In Halton, a significantly lower proportion of people who use services reported that those services made them feel safe and secure, 75.7% compared to a North West average of 85.6% and an England average of 85.4%.

Adult Safeguarding Activity

Following the introduction of the Care Act in 2014, the first annual report of Safeguarding activities for local authorities was released in 2015/16. Data captures the number of referrals and breakdown of the types and demographics of referrals as well as outcomes.

A safeguarding concern is where a council is notified about a risk of abuse, which instigates an investigation under the local safeguarding procedures. The initial investigation may then develop into a formal investigation, known as an enquiry. A higher number of enquires may indicate that there are more individuals experiencing a safeguarding issue risk; it may also however, indicate that

there is a better awareness of potential risk amongst the community and therefore a lower tolerance or threshold of risk within that community. Without further breakdown, the number of enquiries on its own does not indicate level of real safeguarding activities.

The series of charts below show the number of Section 42 enquiries per 100,000 adult population for Halton and its regional comparator Local Authorities for 2015/16. Halton received twice the rate of enquires (678) compared to the average of its comparator group (323), having the third highest rate amongst the group as shown in **Chart 1**.

Chart 1: New Section 42 Enquiries for Halton and comparator group per 100,000 adult population
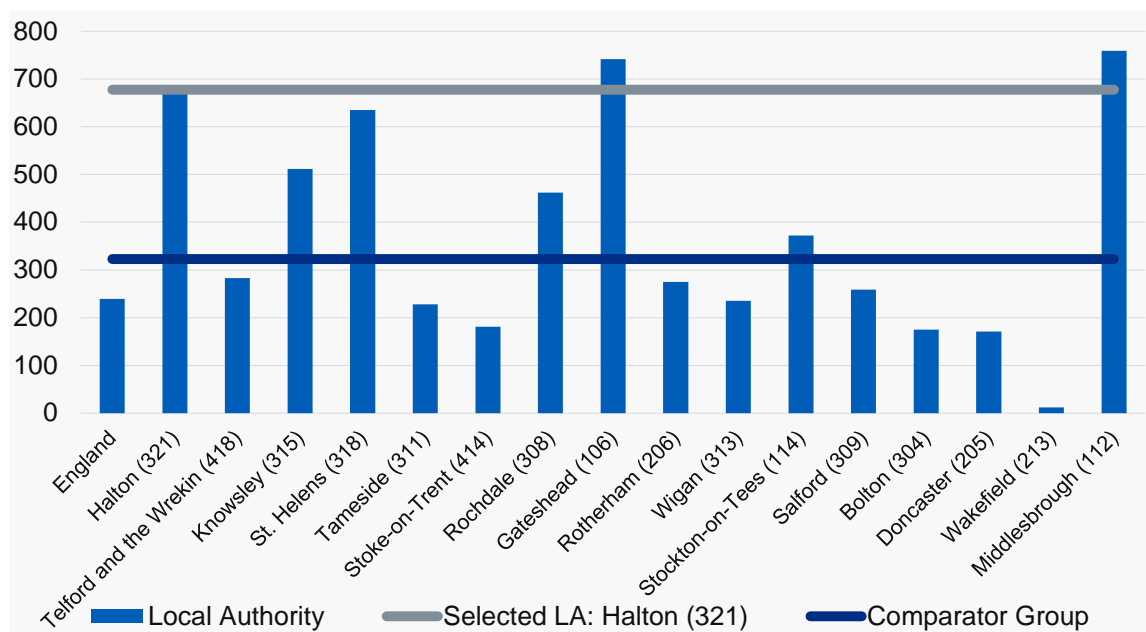
Data Source: SAC Table SG1b, 2015 Mid-Year Population Estimates from the Office for National Statistics

Chart 2: New Section 42 enquiries per 100,000 adults for Halton and Comparator group by gender
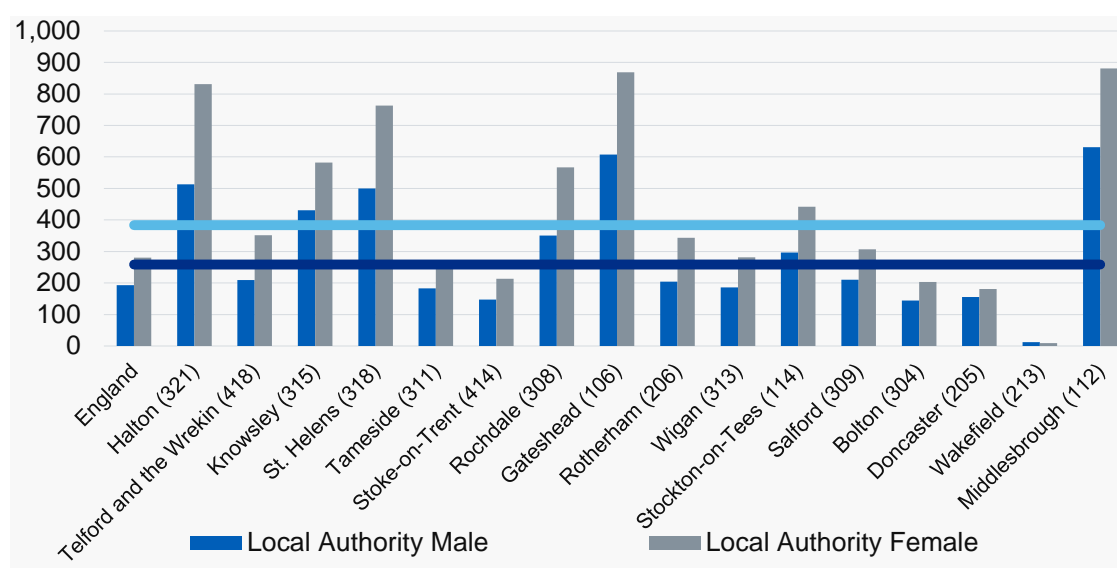
Data Source: SAC Table SG1b, 2015 Mid-Year Population Estimates from the Office for National Statistics

Chart 2 and **Chart 3** show that of the enquiries received the highest proportion were for individuals who are female and aged 85 years or over. This reflects the national and comparator picture though the difference between gender and between age group appears significantly greater in Halton.

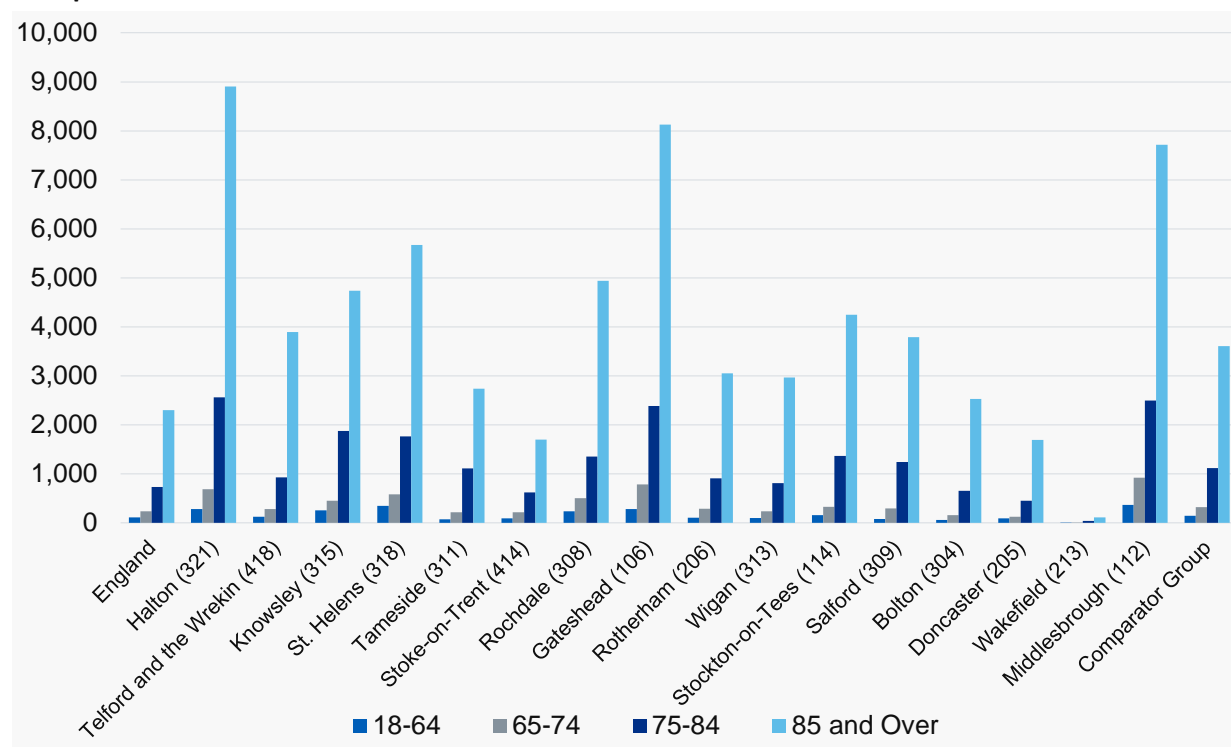The difference in enquiries for individuals by ethnicity was entirely reflective of the local authority ethnic demography giving no indication that any particular ethnic group was being unexpectedly represented.

Chart 3: New Section 42 Enquiries per 100,000 Adults for Halton and Comparator Group by Age Group

Data Source: SAC Table SG1a, 2015 Mid-Year Population Estimates from the Office for National Statistics

The types of risk reported within the enquires received in Halton generally reflects the national trend, with the majority of risk identified being for physical abuse and neglect or acts of omission, though while in Halton, these two categories are almost equal, the proportion of physical abuse enquires is slightly higher compared to the neglect category than the national and regional comparator trend (**Chart 4**).

The location of the enquiry in Halton also reflects the national and comparator trend with the primary source of concern being within an individual's own home, with care homes forming the next highest proportion of enquiries (**Chart 5**). The majority of the concerns of the source of risk in Halton result from Local Authority care provisions, which is the same as the national trend.

Chart 4: Type of Risk as a proportion of enquiries received for Halton and Comparator Groups

Legend: Physical Abuse, Psychological Abuse, Financial or Material Abuse, Neglect and Acts of Omission, Other Risk Types
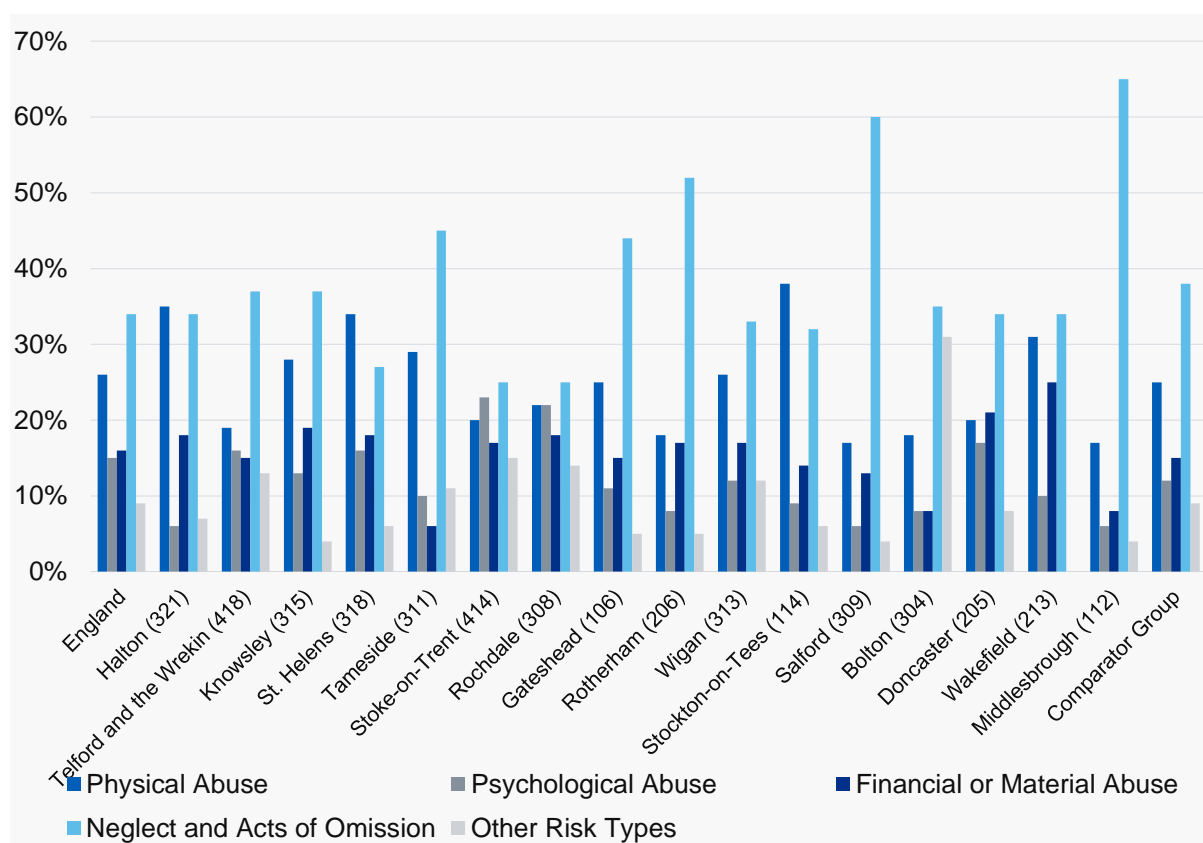
Chart 5: Location of Risk for Halton and comparator Group as a proportion of enquires received

Legend: Own Home, Community Service, Care Home, Hospital, Other
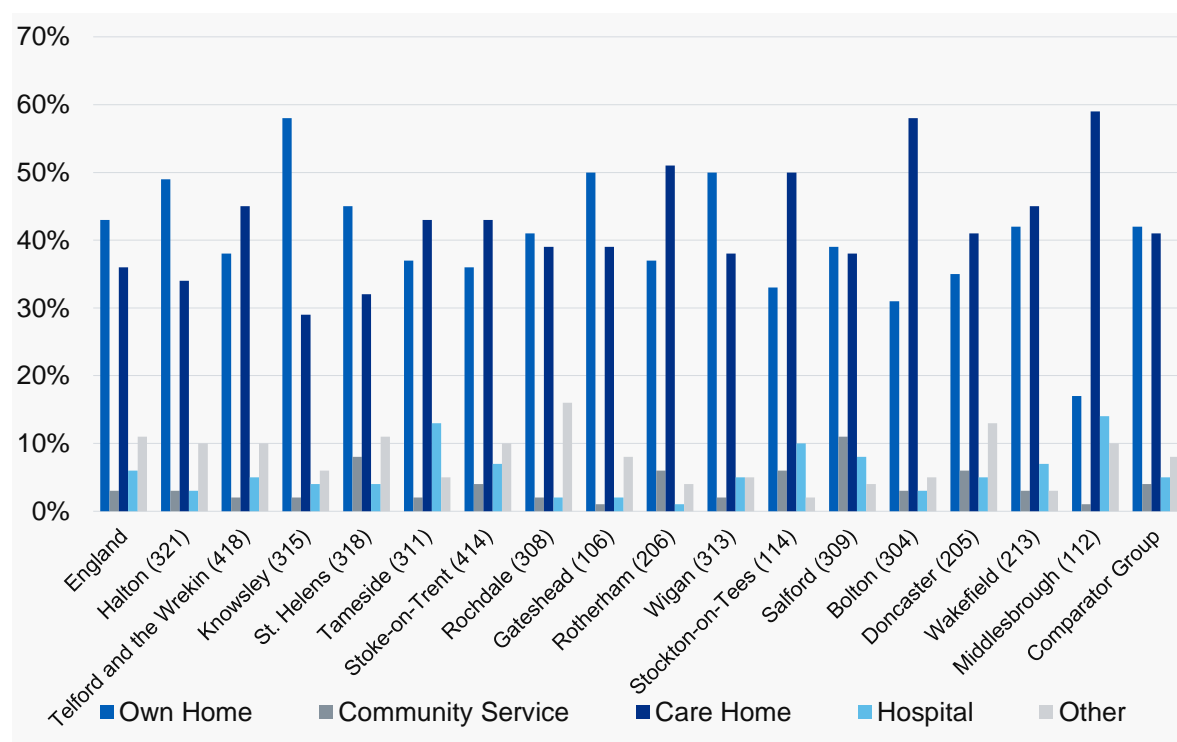
Data Source: SAC Table SG2c

The proportion of enquires for which the investigation identified action to be taken and subsequently resulted in a reduction or removal of the risk was proportionally higher in Halton than in the England or comparator group proportion. In Halton only 14% of enquiries received resulted in no action being taken, compared to 25% nationally (and 31% comparatively). This could suggest that while Halton receives a significantly higher rate of enquiries, these are justified as most result in action being taken. 80% of enquiries had action taken which either reduced or removed the risk, compared to 67% nationally and 63% in the comparator group (**Chart 6**).

Chart 6: Action and results as a proportion of enquiries received for Halton and Comparator Groups
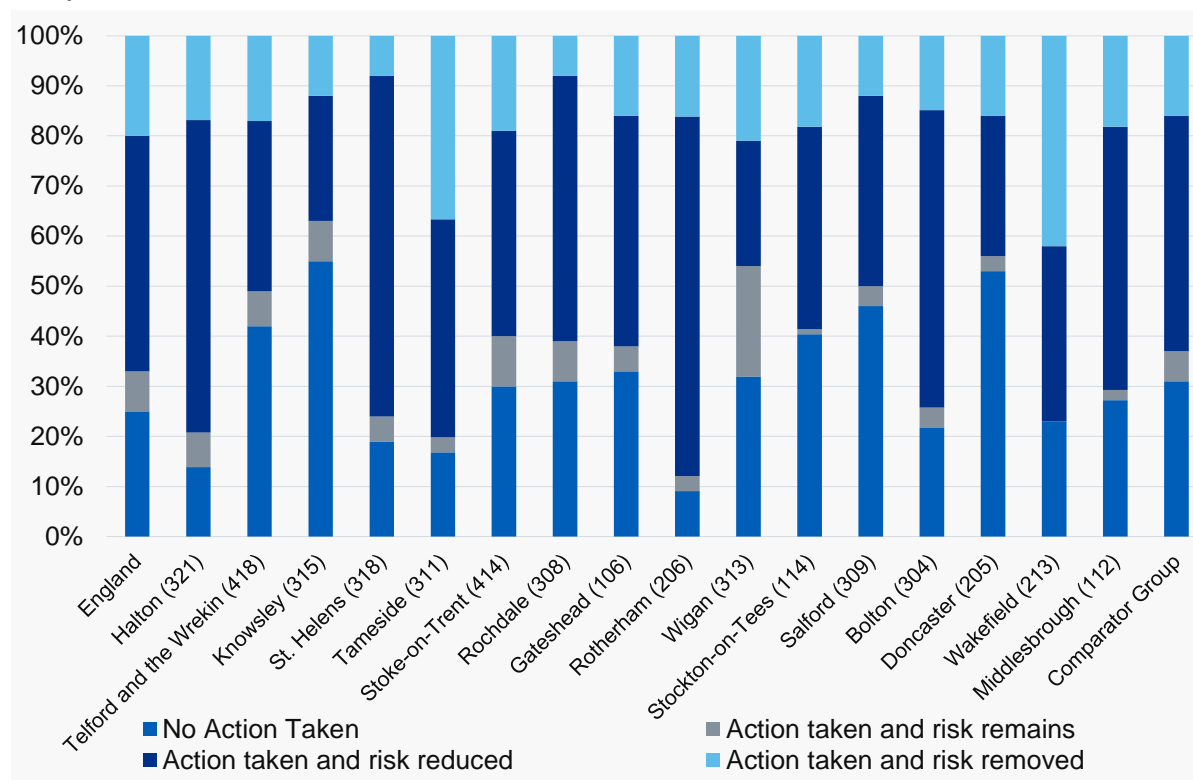
Data Source: SAC Table SG2c

Stages of prevention

A review of the literature on 'effective interventions that prevent and respond to harm against adults' by Kalaga and Kingston (2007) categorises 3 levels of preventive interventions at primary, secondary and tertiary levels:

- primary interventions: aim to prevent abuse occurring in the first instance
- secondary interventions: aim to identify and respond directly to allegations of abuse
- tertiary interventions: aim to remedy any negative and harmful consequences of abuse and to put in place measures to prevent future occurrences.

This strategy adopts this approach, to enable activities at each level of prevention to form a holistic approach to prevention in safeguarding in adults and proposes the prevention model:

Carers

Safeguarding

Safeguarding

Wellbeing
(primary prevention)

Targeted intervention
(Tertiary Prevention)

Early Intervention
(Secondary Prevention)

Carers

Carers

Safeguarding
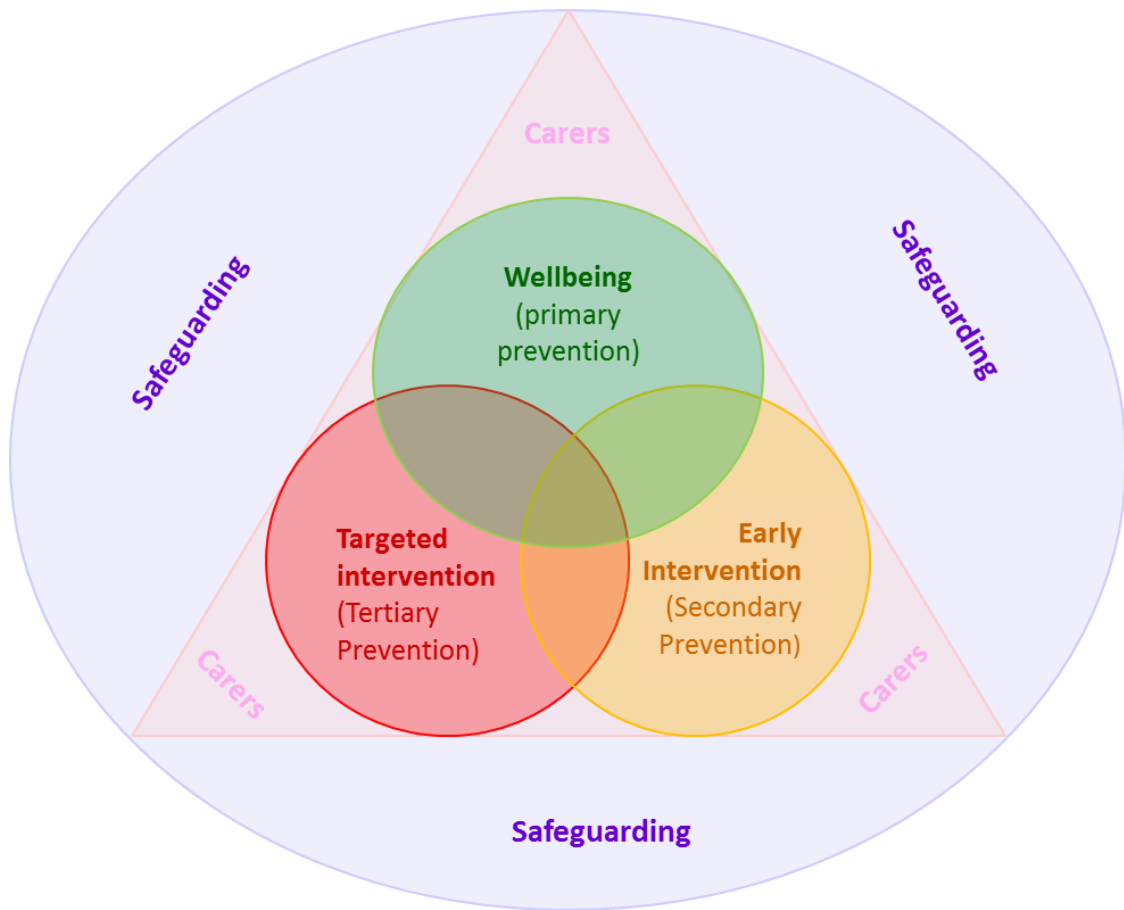
VISION AND OBJECTIVES

Scope of the Strategy

This strategy will consider the broad context of wellbeing, early intervention and prevention including services that promote wellbeing and independence for adults in Halton.

The strategic objectives will focus on how services are commissioned and reviewed in the future to ensure that they are maximising available resources while achieving the best possible outcomes for people.

Vision

The Vision of the Prevention in Safeguarding Strategy has been developed to reflect the vision of the Halton Safeguarding Adults Board. The vision of the Halton Safeguarding Adult Board is:

Ensuring ALL adults at risk: live, work and are supported to live in an environment free from abuse, exploitation, harassment, violence or aggression.

The vision for Prevention in Safeguarding is:

> **To keep adults in Halton Safe**
>
> For adults in Halton to live in an environment where they can live a life free from harm and free from the fear of harm, where communities and agencies:
>
> - Create a caring culture with zero tolerance to all forms of abuse
> - Work together to prevent abuse and protect all adults
> - Are enabled to identify potential harm and respond appropriately

Aim and objectives

Our aim within adult safeguarding is to empower people to live their own lives and make their own decisions by providing services which enable them to live as full members of the community, free from harm, the fear of harm, abuse and intimidation and where their dignity is respected.

- We will ensure that all adults within Halton have easy access to appropriate preventative information and advice.
- We will ensure that all services and agencies are working together towards the same outcomes and with prevention as a driving ethos in all activities so that Halton's residents, in all settings, can live a life free from harm.

- We will ensure that all services are delivered by high quality service providers and professional practices.
- We will all work together to make Halton a safer place to live in.

Prevention in Action

This strategy recognises the basic building blocks of prevention, and aims to ensure that as a minimum, these as a minimum are maintained, but will be built upon to ensure prevention becomes the norm. These include:

- People are informed and aware of their rights to be free from abuse and supported to exercise these rights.
- The workforce is well trained and operating within in a culture of zero tolerance of abuse.
- A robust multi-agency framework of confidentiality and information sharing.
- Access to wide range of good quality universal services.
- Needs and risk assessments performed regularly to underpin people's choices.
- Maintaining the balance between protecting people and preserving individuals' rights to independence.
- Availability of a range of options for personalisation of support and care.

The table below highlights the key stages of prevention and the concepts and considerations that will be made in each element of prevention. This framework will be used as the basis of this strategy to help inform the priorities, actions and activities evolving as part of this strategy.

Safeguarding		
Primary Prevention	**Secondary Prevention**	**Tertiary Prevention**
Prevent	**Identify at Risk & Respond**	**Remedy & Prevent**
Wellbeing	**Early Intervention**	**Targeted Intervention**
Citizenship Neighbourhood & Community Information/Advice/Access Health & Wellbeing Services Wider Determinants Infrastructure and Travel Education/Learning Employment Money Safety Housing	Information/Advice/Access Advocacy Groups Respite Befriending Day Centres Aids/Equipment Telecare Referral Pathways	Integrated MDT Support Case Management Pathways Social Care Carer Support eg. personal budgets, respite, mental health support Health Interventions eg. Virtual Ward/ Community Matron/ Telehealth

PRIMARY PREVENTION

Overall Approach

Raise awareness and promote prevention in safeguarding and enable community capacity to stay safe and well.

Local services and organisations are encouraged to undertake a range of activities aimed at promoting general wellbeing, maintaining independence and slowing down deterioration in physical and mental health, to minimise or eliminate a service user's vulnerability or potential for exploitation, neglect or abuse. This would include wider capacity and resilience building within the community and focus on a wider sense of citizenship.

Stakeholders

Voluntary and community organisations	Substance misuse services	Police, Fire and Rescue, Ambulance services
Banks and building societies	Housing providers and support	Primary Care
Community and resident groups	Homeless services	Social Care providers
Faith Sector	Local Council services	Transport services
Health care providers	Media	Women's refuge / Domestic violence services
	Mental Health services	

General Activities to promote wellbeing may include

- Providing universal services which enable access to good quality information
- Supporting safer neighbourhoods
- Actively addressing hate crime or anti-social behaviour
- Promoting healthy and active lifestyles
- Reducing loneliness or isolation (e.g. via befriending schemes or community activities)
- Encouraging early discussions in families/groups about potential future changes
- Having conversations about care arrangements if a family member becomes ill or disabled
- Enabling a range of joined up services, able to share information, intelligence and services to maximise reach and limit duplication.

Identified Gaps

- Potential for neighbourhood level working to identified individual community needs and asset mapping to support capacity building
- Data and information sharing across agencies and sectors may limit true partnership approaches, ad-hoc approaches and reduced opportunities for co-design and funding.
- Community support and wellbeing offers to enable coproduction of strategies and approaches

- Novel mechanisms for community information and support including social media and technology in addition to traditional media and word of mouth

Recommendations

Based on current knowledge, services and the identification of need and gaps, the following recommendations are made to maximise our primary prevention approaches:

1. Raise awareness of safeguarding and embed an ethos of prevention across communities and stakeholders using a variety of evidence based approaches
2. Change the culture of information sharing between organisations with better sharing of trends, themes and developments to help services learn and plan together
3. Undertake an audit of data sharing to identify specific gaps in data flow and to support service and system improvements based upon a set of agreed information sharing protocols
4. Work across partner agencies to better predict, gather intelligence and better plan to limit the impact of developing issues which may become a local challenge, for example changing demographics and a risk of hate crime, changes to welfare systems which may result in additional hardships

SECONDARY PREVENTION

Overall Approach

Identification of vulnerability to best target promotional and prevention activities aimed at maximising health, wellbeing and safety for those in potential need.

Target the promotion of prevention activities to those in the community, and to services dealing with individuals with current or deteriorating health, wellbeing or social care needs, ensuring everyone knows the importance of safeguarding and what to do if they have any concerns.

Stakeholders

Voluntary and community organisations	Faith Sector	Police, Fire and Rescue, Ambulance services
Aids and adaptations	Health care providers	Primary Care
Banks and building societies	Substance Misuse Services	Respite services
Carers	Housing providers and support	Social Care providers
Community and resident groups	Homeless services	Telecare services
Day care services	Local Council services	Transport services
	Mental Health services	

Specific activities to prevent exploitation, abuse or neglect may include

- Identifying vulnerability factors and potential risks as part of the needs assessment and addressing these as part of the support planning process.
- Adopting the use of an appropriate tool for use across multi agency settings to ensure our joint workforces are able to identify any Adverse Childhood Experiences (ACE), as a means to identify vulnerability as a person in need of care and/or as a role as a carer.
- Using support plans to reduce loneliness or isolation and helping the person to strengthen or build their social and support networks.
- Using novel and accessible approaches and support to help people understand the different types of abuse and its prevention including what to look out for and the steps to take if abuse is suspected.
- Providing people with information about sources of independent information, advice and advocacy.
- Providing people with information about services and mechanisms available (e.g. power of attorney, deputyship, Department of Work and Pensions appointee-ship) to ensure their best interests are protected and to safeguard against financial exploitation if they lose their capacity to make welfare and/or property and financial decisions in the future.

- Providing training and education of service users on exploitation and abuse in order to help them to recognise this and to have the interpersonal skills necessary to deal with the situation should this occur.
- Developing and promoting a range of initiatives to help people keep themselves safe e.g. Mail and Telephone Preference Services, Safer Places, Safe and Sound, Buy with Confidence, Making Money Matter, No Cold Calling Zones, Mate Crime Awareness, Neighbourhood Watch, Dementia Friendly Communities, etc.
- Ensuring there are effective links between local adult safeguarding arrangements and government strategies on PREVENT and Human Trafficking.
- Monitoring adults for the risk of radicalisation given that current research has highlighted that radicalisers are increasingly targeting people with a learning disability, mental health condition or other vulnerability.
- Ensuring people are safe in whatever setting they live and that they are protected by the crime prevention measures aimed at the whole community and can access mainstream criminal justice and victim support services.
- Supporting carers by offering a needs or carer's assessment and use this as an opportunity to explore the individuals' circumstances and consider whether it would be possible to provide information, or support that prevents abuse or neglect from occurring, for example, by providing training to the carer about the condition that the adult they care for has or to support them to care more safely.
- Recognition that abuse or neglect may be unintentional and may arise because a carer is struggling to care for another person. An appropriate initial response may therefore be a carer assessment and support package for the carer and monitoring.
- Ensuring the person is able to access support and services to help them recover from the abuse or neglect they have experienced. This approach will also help build future resilience.
- Implementation of the Herbert Protocol: a national scheme being introduced by Cheshire Constabulary and supported by Halton Safeguarding Adults Board and partner agencies to encourage carers and family members to compile useful key information which could be used to support emergency services and agencies in the event of a vulnerable person going missing.

Identified Gaps
- Promote the use of joint referral pathways across services, especially for help and support from GP and health services.
- Resource, availability and coordination of best practice and lesson learning between sectors and agencies to improve quality and services
- Ensuring a better understanding of the transition thresholds for vulnerable individuals moving from children's to adult service provision, especially the transition thresholds for people in need of mental health support.
- Crisis support and response services for those experiencing difficulty in managing a caring responsibility or recognising an escalation in care need.
- Horizon scanning of potential social and locality changes that may lead to trigger points or increased risk factors, e.g. benefit changes, housing provision, service waiting times etc.

Recommendations
Based on current knowledge, services and the identification of need and gaps, the following recommendations are made to maximise our secondary prevention approaches:

1. Ensure referral pathways are appropriate for all stakeholders and widely marketed.

2. Engage better with carers of adults with mental health conditions and ensure the needs of both the individual being cared for and the carer are jointly met.
3. Embed Transition Protocol into practice and develop pathways for people in need of mental health support.
4. Collate and respond to information available from stakeholders and service users to explore additional need and availability of mental health and crisis support services.

TERTIARY PREVENTION

Overall Approach

Develop mechanisms that offer a targeted approach to remedy a developing safeguarding situation and prevent escalation or future repetition.

Stakeholders

Voluntary and community organisations	Faith Sector	Police, Fire and Rescue, Ambulance services
Aids and adaptations	Health care providers	Primary Care
Banks and building societies	Substance Misuse Services	Respite services
Carers	Housing providers and support	Social Care providers
Community and resident groups	Homeless services	Telecare services
Day care services	Local Council services	Transport services
	Mental Health services	

Activities to promote prevention and early intervention in care settings may include

- Organisations should ensure that the principles of wellbeing and adult safeguarding are directly linked into commissioning, contract and procurement activity.
- An explicit expectation in all contracting processes regarding how organisations intend to prevent the abuse and neglect of vulnerable adults
- Commissioners should assure themselves, through contracting arrangements that a provider is capable and competent in responding to allegations of abuse or neglect, including having robust processes in place to investigate the actions of members of staff.
- Care providers should be able to demonstrate a person centred approach to care; a zero tolerance of abuse and neglect which encourages whistleblowing; staff, service user and family awareness of the nature of abuse and what to do if this is suspected; safe recruitment practices; regular quality monitoring and audit of care; regular staff training and updating of skills and clear policies and practice guidance available to all staff and volunteers.
- Care providers should make their staff aware through internal guidelines of what to do when they suspect or encounter abuse of adults in vulnerable situations. This should be incorporated in staff manuals or handbooks detailing terms and conditions of appointment and other employment procedures so that individual staff members will be aware of their responsibilities in relation to safeguarding adults. This information should emphasise that all those who express concern will be treated seriously and will receive a positive response from managers.
- Agencies, services and communities must adopt an open and honest culture of reporting concerns with appropriate whistle blowing or response arrangements clearly accessible.

Identified Gaps

- Carer peer support facilities and one to one help and assistance for carers to help build confidence, help recognise potential harm and feel supported in their caring role
- Access to tailored training opportunities that help them to feel more confident and supported in their caring role.
- Help and assistance for Young Carers to protect against inappropriate caring with the support they need to learn, develop and thrive, to enjoy positive childhoods.
- Horizon scanning for potential threats to services and systems that may result in difficulty maintaining provision and standards, e.g. financial contracts, increased quality and performance requirements, contract challenges
- Communities that may not be resilient to rapidly changing demographics and may be unknowingly subject to community tensions such as race or hate crimes.
- Unknown impact of issues such as modern day slavery, human trafficking on the local environment

Recommendations

Based on current knowledge, services and the identification of need and gaps, the following recommendations are made to maximise our tertiary prevention approaches:

1. Work with commissioners to ensure that provision exists to support carers in times of crisis and in the identification of potential escalations in safeguarding risk and prevent further harm.
2. Ensure safeguarding reviews take into account carers' needs and review any additional needs. Support carers to minimise recurring risks or any escalation of them.
3. Participation of Management, at all levels, in shaping the direction and priorities for Adult Safeguarding, via the appropriate SAB sub committees. Develop a culture within all partnership agencies where Safeguarding is a consideration at all points of service delivery.

RECOMMENDATIONS & NEXT STEPS

Overall Recommendations

In addition to the key recommendations at each level of prevention, a single overarching recommendation is made to ensure continuous collaboration, learning and improvements.

	Primary Preventions	Secondary Prevention	Tertiary Prevention
1	Raise awareness of safeguarding and embed an ethos of prevention across communities and stakeholders using a variety of evidence based approaches	Ensure referral pathways are appropriate for all stakeholders and widely marketed.	Work with commissioners to ensure that provision exists to support carers in times of crisis and in the identification of potential escalations in safeguarding risk and prevent further harm.
2	Change the culture of information sharing between organisations with better sharing of trends, themes and developments to help service learn and plan together	Engage better with carers of adults with mental health conditions and ensure the needs of both the individual being cared for and the carer are jointly met.	Ensure safeguarding reviews take into account carers' needs and review any additional needs. Support carers to minimise recurring risks or any escalation of them.
3	Undertake an audit of data sharing to identify specific gaps in data flow and to support service and system improvements based upon a set of agreed information sharing protocols	Embed Transition Protocol into practice and develop pathways for people in need of mental health support.	Participation of Management, at all levels, in shaping the direction and priorities for Adult Safeguarding, via the appropriate SAB sub committees. Develop a culture within all partnership agencies where Safeguarding is a consideration at all points of service delivery.
4	Work across partner agencies to better predict, gather intelligence and better plan to limit the impact of developing issues which may become a local challenge, for example changing demographics and a risk of hate crime, changes to welfare systems which may result in additional hardships	Collate and respond to information available from stakeholders and service users to explore additional need and availability of mental health and crisis support services.	
	To ensure that all agencies, practitioners and organisations involved in work with adults at risk provide and maintain the highest possible standards if care, support and protection at all times, within a culture of continuous improvement and collaborative learning to enable continuous review, development and evidence based approaches to protect vulnerable adults in Halton.		

Next Steps

The Halton Safeguarding Partnership Forum will develop a joint agency action plan to identify deliverable activities and outcomes to achieve the strategies key recommendations. The Partnership Forum will be accountable for delivery of the action plan to the Halton Safeguarding Adults Board.

REFERENCES

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