HALTON
SAFEGUARDING
ADULTS
BOARD

Halton Safeguarding Adults Board

Annual Report 2016-2017

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ANNUAL REPORT CONTENTS PAGE

FOREWORD

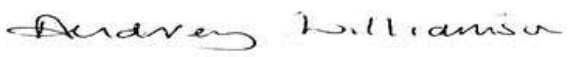
I am pleased to present Halton Safeguarding Adult Board's Annual Report April 2016 to March 2017. This report provides a picture of how agencies and organisations safeguard adults who may be at risk of harm in Halton. It describes the work of the partnership responsible for safeguarding, identifies those areas of work we need to strengthen and how we plan to do this. I hope you find it informative.

During the period this report covers we have worked hard to ensure that safeguarding remains a priority for all key agencies in Halton. The Safeguarding Adults Board is responsible for ensuring all partners and agencies fulfil their responsibilities in working together both to prevent adults being potentially placed at risk of abuse and to work closely and effectively when adults are seen to be vulnerable and abuse may have taken place. The Board is now stronger with good representation at senior level from the three key agencies responsible for safeguarding services; Cheshire Police, Halton Clinical Commissioning Group and Halton Borough Local Authority. The Board is supported by a range of working groups but particularly the Partnership Forum made up of the voluntary and faith sector. The Partnership Forum has been critical in developing our Preventive Strategy and we know that the Forum will work hard this year to ensure its success; not least in raising awareness in our communities of the need to be aware of what to do if abuse in whatever form is suspected.

There have been some positive developments this year; for example, the establishment of a panel led by the local police on supporting those who self-neglect in the community. This is a complex area of work but one that we are beginning to understand better. It will remain an area of focus for the coming year. Work on identifying financial scams has been strong and we know we all have a responsibility to prevent these taking place.

There is still much to do in Halton but I am confident that with the support of all partners, we can continue to improve and meet the needs of those adults who may be at risk or vulnerable in our locality. Through our work we have identified priorities for the coming year including mental health.

Finally, I would like to thank all Board members for their support this year. I would also like to thank both our administrator and our new Board Manager who joined us early this year and who has made a real difference to our work. Finally on behalf of the Board I would like to thank all those who work on a daily basis in what can be a complex and challenging arena.



Audrey Williamson – Independent Chair

EXECUTIVE SUMMARY

Halton Safeguarding Adults Board (HSAB) has undergone some changes during 2016-2017, strengthening HSAB and sub-groups, and establishing Halton Safeguarding Adults Partnership Forum. The work of these sub groups are fundamental to helping HSAB achieve it's strategic aims:

- Strengthening the Board
- Early Intervention and Prevention
- Awareness Raising and Engagement with the Community
- Performance and Quality Assurance of Providers and Services
- Making Safeguarding Personal – listen to and do when adults tell us about their experiences of abuse and neglect, and the services and support they receive

A business plan was produced which set out objectives for achieving these aims and this report will give a snapshot of some of this work. The Safeguarding Adults Board through the restructure and defined terms of reference for the sub groups has helped to strengthen the HSAB. There has been a strong focus on developing safeguarding prevention, with an update of the Safeguarding Adult Review Policy in line with the Care Act 2014. The Care Act 2014 also makes explicit a model of Coproduction for local Safeguarding Adults Board, and the establishment of the Safeguarding Adults Partnership Forum now provides more opportunity for this coproduction approach with more effective links with the wider community for the ongoing development of HSAB. The membership of this forum consists of safeguarding leads from a vast range of local services working with adults aiding greater awareness and improved engagement with the community of Halton. Assurance was received via a number of mechanisms, for example:

- Quarterly reporting from HSAB sub-groups to the board
- Monthly case file audits reported to HSAB to help with identifying themes trends and opportunities for improvement.
- Making Safeguarding Personal is a requirement locally for all adult safeguarding initial assessments. This information is recorded and then collected by Halton Borough Local Authority Performance Team.

In addition HSAB arranged a Safeguarding Adult Review to be conducted, which resulted in a number of key agencies coming together with an idependant chair/author. An action plan from the SAR follows and HSAB will ensure these actions are completed and reported in next year's annual report.

SECTION 3: INTRODUCTION

As stated in the Care Act 2014 (chapter 14), the main objective of a Safeguarding Adult Board is to assure itself that local safeguarding arrangements and partners act to help and protect adults in it's area who meet the criteria set out; ie. the safeguarding duties apply to an adult who:

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

The Care Act states that Safeguarding Adults Boards have three core duties:

- Develop and publish a Strategic Plan setting out how they will meet their objectives and how member and partner agencies will contribute
- Publish an Annual Report detailing how effective their work has been
- Commission Safeguarding Adults Reviews for any cases which meet the criteria

The current membership of the Board includes representatives from each of the following:

Halton Borough Local Authority

NHS Halton Clinical Commissioning Group

Cheshire Constabulary

Cheshire Fire and Rescue

North West Ambulance Service

National Probation Services

Healthwatch

Elected member responsible for adult health and social care

SECTION 4: FINANCIAL SUMMARY

Halton Safeguarding Adults Board is resourced by three key agencies, Halton Borough Local Authority, Halton Clinical Commissioning Group and Cheshire Police. During this financial year HSAB recruited a Safeguarding Adults Board Officer, who came in to post January 2017.

SECTION 5: PERFORMANCE

Summary

The population of Halton is just under 127,000 with approx 54,000 households and an adult population of approx 97,400. Halton has an increasingly ageing population with a projected 27% increase of adults aged 65+ by 2024. In comparison to national and North-West regional figures Halton has a higher reported rate of safeguarding concerns and concerns leading to a Section 42 Enquiry. Halton reflects the national trend of distribution rates for safeguarding alerts per adult age group.

The most prevalent type of alleged abuse in Halton for 2016/2017 is neglect and acts of omission, then physical abuse followed by financial/material abuse. In 2015/2016 physical abuse was the most prevelant form of abuse in adults followed by neglect and acts of omission and financial abuse.

The alleged abuse is most likely to occur in the person's own home and perpetrated by someone who is known to the individual, for example, a care worker or family member. There has a been a decrease in the percentage of female to male reports of abuse. This year has also seen an increase in the number of completed enquiries in response to a concern of abuse or neglect. Additionally there has been a marked increase in the number of Deprivation of Liberty Safeguards (DoLS), there follows an overview of this years data and the key findings within the body of the annual report.

Safeguarding Adults Collection

The Safeguarding Adults Collection (SAC) is a mandatory performance return to be completed for the Health and Social Care Information Centre, to provide statistics from local authorities across the country regarding their safeguarding adult activity during the period 1st April 2016 to 31st March 2017.

The statutory Safeguarding Adults Collection (SAC) records details of safeguarding activity for adults aged 18 and over in England. It is reported to and identified by Local Authorities with adult social services responsibilities. The collection includes demographic information about the adults at risk and details of the incidents that have been alleged. It is helpful to note that the following data relates only to those adults who have been identified as at risk of harm. Whilst this is extremely important, these alerts account for a small number of the adult population in Halton. The current percentage of adults involved in a safeguarding concern locally (approx numbers, based on current available information 2016 Halton population profile) are:

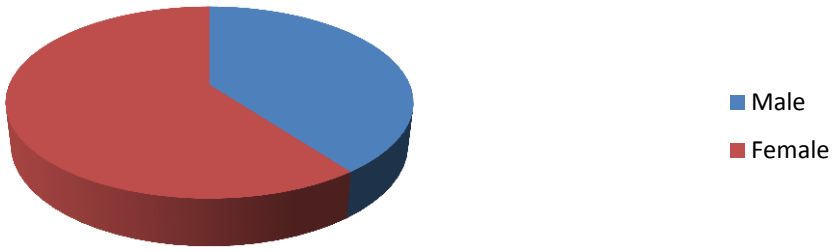
- 0.3% at 18-64 years,
- 0.6% between age 65-74 years,
- 2.4% from 75-84 years and
- 8% from the age of 85 years plus.

  This information, in combination with a range of intelligence gathering locally, helps to inform the work of HSAB and of the local service provision. It enables targetted work, increases appropriate commissioning, training and awareness campaigns, and specific pieces of work that addresses those most at risk of harm within our community.

Key Findings:

In 2016/17 the data shows reports of concerns leading to a section 42 have reduced. There has been an increase in concerns received for males from 35% 2015/16 to 40% 2016/17 and a reduction for females from 2015/16 of 65% to 60% this reporting year. The performance data indicates that neglect and acts of omission was the highest reported type of abuse and the most common location where abuse/neglect takes place is in the person's own home. It is further highlighted when reviewing rates per age group it is evident that as we grow older there is increasing risk of safeguarding issues arising. Adults at most risk of harm are older adults (75 years plus), who live in their own home and are most at risk of neglect or acts of omission.

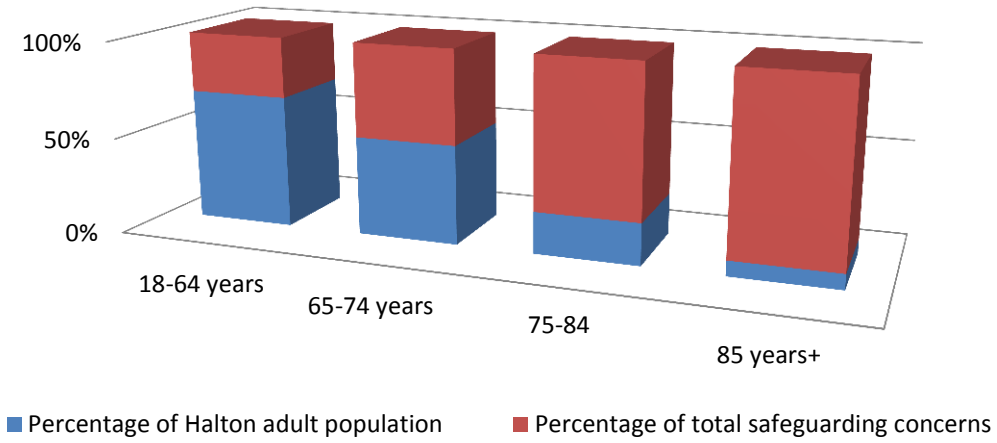
Distribution of male/females in safeguarding concerns



There has been an increase in completed enquiries in response to a concern of abuse or neglect that may have taken place. An enquiry could entail a conversation with the adult to a more formal

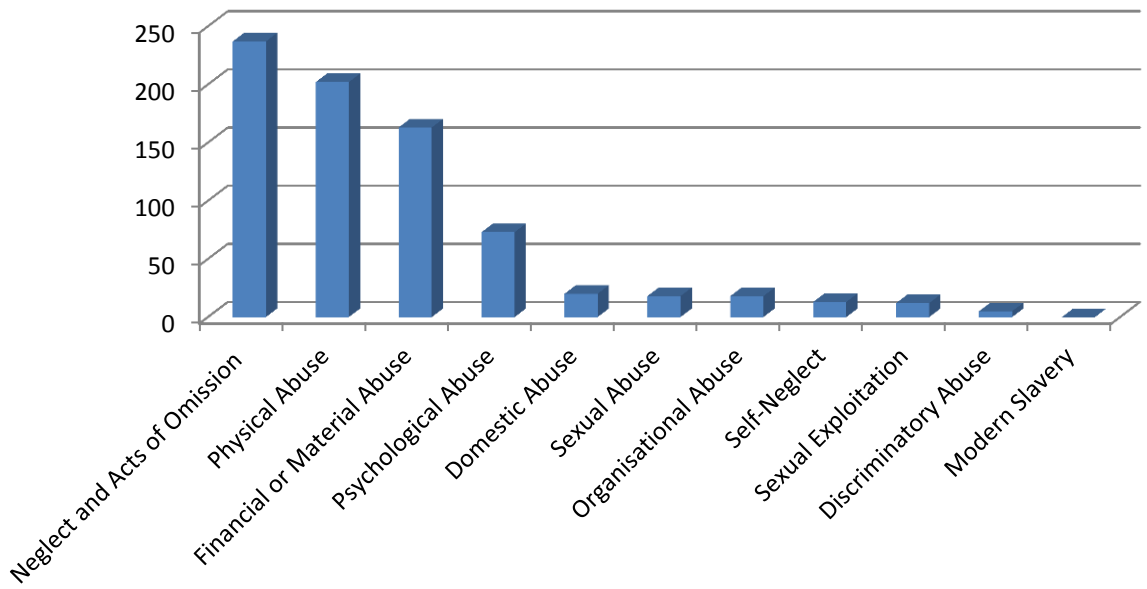
multi-agency plan or action. 2015/16 recorded 611 completed cases rising to 694 completed cases during 2016/17.

Prevalance of safeguarding concerns per adult population group



The prevalance of safeguarding concerns per age group can be identified as increasing risk for the older population. That as people get older the risk continues to rise with over half the alerts relating to adults aged 75 years and older.

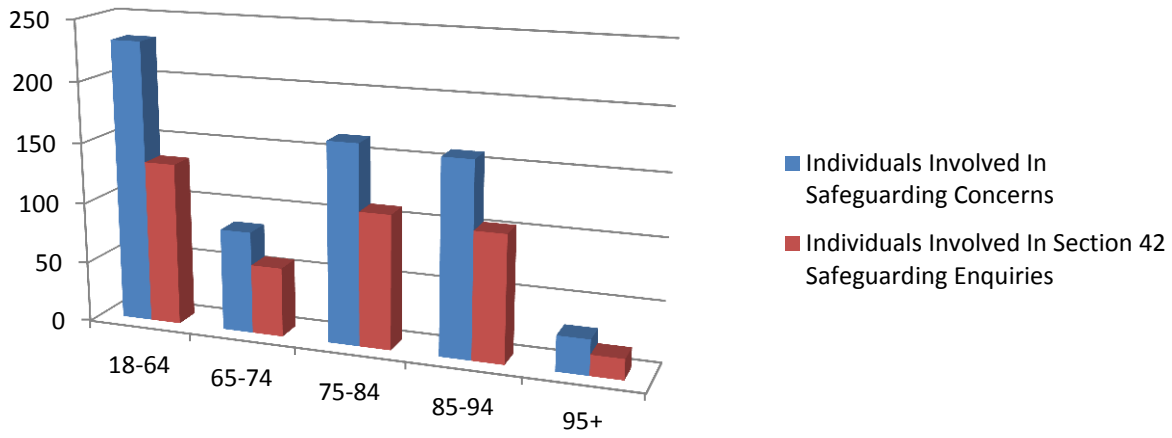
Total Section 42



Counts of enquiries by type and source of risk indicate the top three most prevalent types of abuse remain the same as 2015/2016 i.e. neglect and acts of omission, physical and financial/ material.

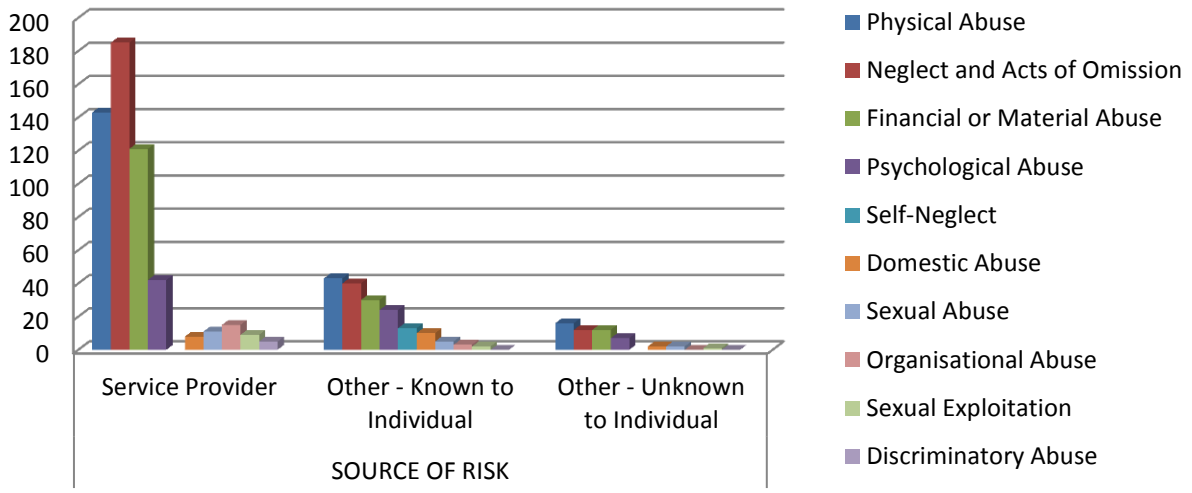
There are differences in the rate of types of abuse being reported during 2016/17 compared to 2015/16; for example, rates of physical and sexual abuse have declined and neglect and acts of omission, financial/material and discrimination increased.

Safeguarding concerns leading to Section 42 enquiry

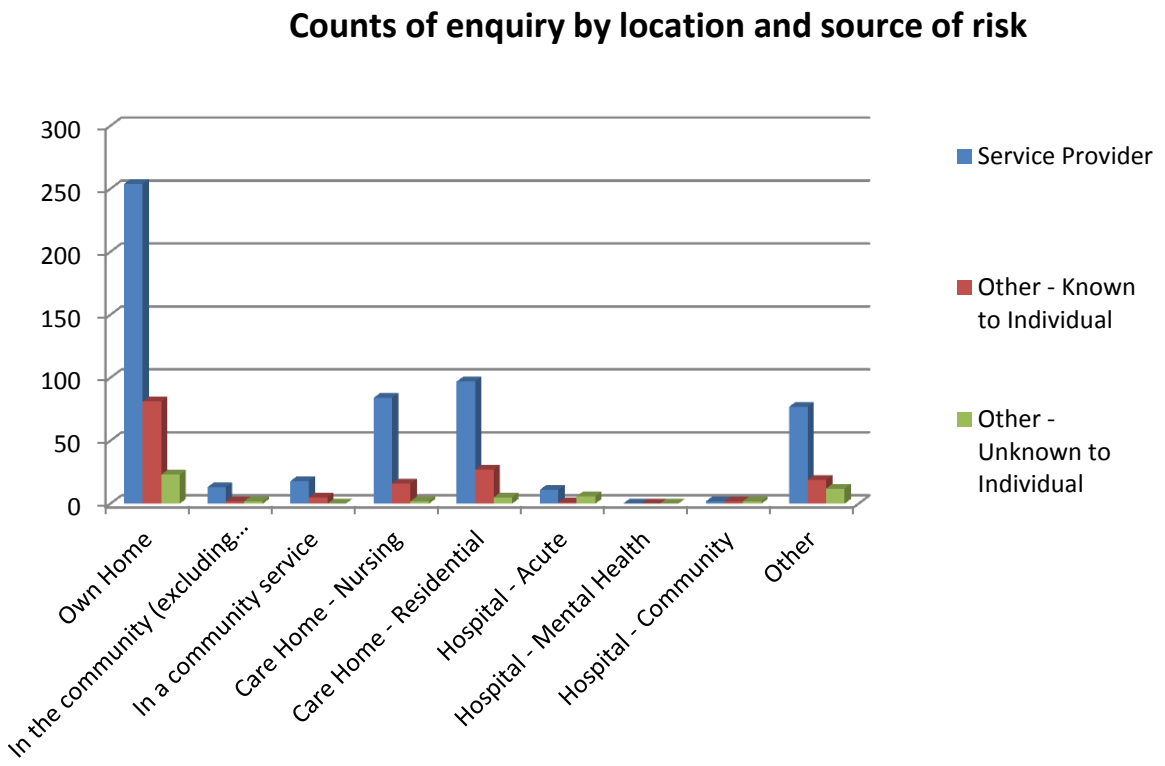


Rates at which safeguarding concerns are raised and then lead to a Section 42 enquiry reveal differences from a safeguarding alert to a Section 42 enquiry. As adults get older the alerts appear to become more aligned with Section 42 safeguarding enquiries. There is a need for more awareness-raising of what a care concern is and what a safeguarding issue is for service providers, staff and the general public.

Counts of enquiries by type and source of risk



In reviewing the types and source of risk it is evident that the predominant source for neglect and acts of omission, physical and financial/material abuse are from service providers. There are also a number of safeguarding enquiries from individuals known to the adult at risk, again, physical abuse then neglect and acts of omission are the highest types reported followed by financial/material and psychological abuse. In order to understand further what is known about the service provider data is captured for the location of risk.



Most safeguarding risks occur in the person's own home, accounting for almost half of all reported concerns (47.66%) in 2016/2017; this has reduced from 49% in 2015/2016. Combined with information on source of risk it appears that home care services are most likely to be those with care concerns. With regard to safeguarding concerns, medicines management is highlighted within the area of neglect and acts of omission as an area for future targeted work.

Hate crime

Halton's hate crime figures are provided by Cheshire Police covering the period 1st April 2016 to 31st March 2017. The highest prevalence types were racist (82) and homophobic (32) crimes, with racist crimes being significantly higher than all other types of hate crime recorded.

Key Findings:

Hate Crime Type	2016									2017			Total by Hate Crime Type
	April	May	June	July	August	September	October	November	December	January	February	March	
Disability		1		1	1	2	1			1	2		**9**
Hist - Religious		1	1				1						**3**
Homophobic	1	5	1	2	1	5	3	4	2	1	5	2	**32**
Racist	4	6	7	8	13	10	5	4	4	4	9	8	**82**
Religion or belief - Anti Jewish											1		**1**
Not yet Categorised								1					**1**
Total by Month	**5**	**13**	**9**	**11**	**15**	**17**	**10**	**9**	**6**	**6**	**17**	**10**	**128**

It is not currently known whether these individuals are adults who have been identified as at risk of harm under the Care Act guidance, (see Introduction section page 5). There is therefore potential to elicit this information in future data reporting to help inform HSAB and to enable targeted work to protect further those adults who are already identified as at risk of harm and who may become a victim of hate crime.

Deprivation of Liberty Safeguards (DoLS)

The DoLS are one aspect of the Mental Capacity Act (2005).The Safeguards are to ensure that people in care homes and hospitals are cared for in a way that does not inappropriately restrict their freedom. If necessary, restrictions are only applied in a safe and correct way that is only done when it is in the best interests of the person, and there is no other way to provide appropriate care. This is achieved by a series of assessments, which are undertaken by a minimum of two professionals not previously involved in making decisions about the persons care.

The legislation only covers individuals who are in hospitals or care homes and can only be authorised when it is assessed to be in the best interests of the individual concerned, to protect them from harm. Where a deprivation of liberty is required in a person's own home or in supported living, an application is made to the Court of Protection. Under the legislation, Local Authorities (Supervisory Bodies) have statutory responsibility for operating and overseeing the MCA DoLS, whilst hospitals and care homes (Managing Authorities) have responsibility for applying to the relevant Supervisory Body for a DoLS authorisation.

In response to the pressure on services, the government tasked the Law Commission with devising a replacement for the DoLS, and a series of Consultation events took place between July and November 2015. An interim statement regarding proposals was issued in May 2016, with the complete report expected for August 2016. This was then deferred to December 2016, and again deferred until March 2017 due to the complexity of the issues encountered.

On the 13th of March 2017 the final report and recommendations were released and can be found using the following link; http://www.lawcom.gov.uk/project/mental-capacity-and-deprivation-of-liberty/

Number of DoLS in Halton 2015/16 and 2016/17

Period	2015/16	2016/17
Q1	84	109
Q2	131	164
Q3	80	159
Q4	115	189
Total	**410**	**621**

Key Findings:

In response to the pressure on services, the government has tasked the Law Commission with devising a replacement for the DoLS and recommendations will be made. However, until recommendations are made the responsibilities and risks of managing DoLS remain with the Local Authority. The timeframe for the Government to consider the recommendations set by the law commission is not clear at present, but an estimate of 4-5 years have been given by some academics.

Halton Local Authority currently has 18 registered Best Interest Assessors (BIA), including 2 dedicated practitioners based within Integrated Adult Safeguarding Unit (IASU). The role of BIA is incorporated into the role of existing Social Work staff. There are issues with capacity in meeting the demands of the increase in requests for DoLS from 401 (2015/16) to 621 (2016/17). This has resulted in a backlog in requests for assessments, which the Local Authority are working on prioritising; however there are a number of breeches as they have not been assessed within the required timescales of 21 days from the request for assessment. The IASU triage the requests the Local Authority receives on a daily basis, using the ADASS Screening Tool for DoLS, which aims to prioritise high risk cases for urgent allocation.

The data evidences a significant increase in the number of DoLS applications received in light of the 2014 Supreme Court Judgement, which redefined the eligibility criteria for assessment, known as "The Acid Test". We expect the figures to rise, due to an increase in awareness of DoLS by provider services, as this is an area of focus for the regulation of their service. As requests continue to be authorised, the requests for renewal of authorisations will continue to increase. In addition to this, the demand placed on the Local Authority arrangements for Paid Relevant Person's Representative's will continue to grow. Whilst the 'acid test' on assessing if someone is being deprived of their liberty remains in place, then the demand placed upon Local Authorities will also remain.

Challenges ahead for the Local Authority:

- Meeting the demand of requests made for Standard Authorisation including the Local Authorities arrangements for Best Interests Assessors and Mental Health Assessors. Addressing the back log of assessments and reviewing arrangements to address this.
- Ensuring Paid Relevant Person's Representative arrangements are robust and Quality Assured.
- Ensuring stakeholders are fully aware of their responsibilities and ensuring systems are in place evidencing defensible application of the DoLS Code of Practice.

SECTION 6: JULIE'S STORY

Making Safeguarding Personal is an important focus for HSAB in that it enables the individual's story to be recognised and listened to. Julie's story highlights the most prevalent aspects of adult abuse that occur in Halton i.e., an older person living at home and experiencing financial abuse.

The true identity of the adult at risk has been anonymised and will be called Julie for the purpose of this case scenario. Julie has consented to her story being told.

Julie

Julie is an 84 year old woman who lived in her own home and had recently been assessed as requiring care; meeting the eligibility criteria for services under the Care Act 2014, Section 9. Julie had chosen to have her care and support needs met by having a personal budget and hiring a Personal Assistant to meet her needs. Julie was the employer and had support from social care to facilitate this arrangement.

Referral

The Integrated Adults Safeguarding Unit (IASU) at Halton Borough Local Authority received a referral from Julie's Personal Assistant (PA), following some concerns raised. After gaining consent from Julie (i.e. the adult at risk), a Safeguarding Social Worker was assigned to conduct further enquiries in line with Section 42 of the Care Act 2014.

The Social Worker met with Julie and with the support of Julie's PA, they identified that thousands of pounds had gone from Julie's bank account. The account was in Julie's name and had an informal agreement with a family member to manage their finances. The family member was meant to provide Julie with an allowance each week; however Julie had not received any cash for several weeks. This meant that Julie may have been financially abused. Julie had also not received any bank statements to her home address. With the support of Julie's PA a visit to the bank revealed details which established that money had in fact been transferred from Julie's account to the family member's personal bank account.

Requested outcomes

Julie requested that the police were contacted for support, as she wanted to either have control over her own finances or an appointee from the Local Authority.
Julie also expressed that she would like the family member's name to be taken off their bank account.

Actions

With the support of the Safeguarding Social Worker and the PA, Julie requested that the Police were contacted as she did not want the family member to carry on having access to her money as she was concerned that she could be left penniless and unable to pay her direct debits.
The Police were contacted and a strategy discussion held. The police advised that despite the concerns raised, there was nothing that they would be able to do as the Julie had agreed for the family member to have access to their bank accounts and funds. It was regarded as a civil rather than criminal matter. Julie's desired outcome needed to be reviewed in light of the Police decision.
The Safeguarding Social Worker and Julie agreed to visit Julie's bank to meet the bank manager, who could give advice on what could be done. They arrived early for the appointment and went for a cup of tea first. This helped Julie as she was able to chat about her life and the relationship she had with her family member. Julie also felt quite anxious about meeting with bank manager, but felt reassured by the support given. It also became evident to the Safeguarding Social Worker that Julie was unable read or write, and Julie felt the family member was taking advantage of this. Julie said that she was not ashamed to tell the Safeguarding Social Worker that she could not read and write she just didn't like the fact that the daughter took advantage of it.
During the meeting with the Bank Manager, various options were given to Julie to enable her to make an informed decision. This included self-management of her account, setting up a new account, support from her PA to manage her account, or requesting if Halton Borough Council Appointee's service can support her in managing her finances. Julie agreed for a withdrawal to be made from her account in the form of a cheque and the cheque given to HBC Appointee service. This would avoid any further funds being taken out of their account. A letter was also produced taking the family member's name off the account at Julie's request. Once this had been done with Julie's permission, the family member was contacted to advise them of the findings and that Julie had decided to manage their own finances. The family member stated they had taken the funds out of the account and put them into a savings account which Julie apparently consented to, Julie denies this. The family member then transferred the funds back into the bank account.
Julie was unsure of how the whole process would work and was quite anxious about it all; however Julie said she felt involved, at the centre of the enquiry and was happy with the outcome. Julie felt in control of her finances, as she did not have to rely on someone else giving her *'her hard earned money'*. During the contact the Safeguarding Social Worker was also able to signpost Julie to other support that they required.

Review of outcomes: Safeguarding Social Worker statement

Each time I have visited Julie she has always told me how happy she was that it had all finally been sorted. Julie advised her PA that she was concerned about repercussions from her family member and lost sleep worrying about it all. Her PA has advised me that they have observed her as being less anxious and Julie has told them she is sleeping better. Julie and her PA have my contact number if they require any further advice and I am happy to signpost them to any support they may require. Julie has declined any support with reading and writing skills as she has *'coped until now, quite well'*.

SECTION 7: RESPONSE

Summary

Halton Safeguarding Adults Board is designed to be responsive to local need and the local data gathered helps to inform what will be the most effective and appropriate activity. This is an ongoing process that builds year on year. Some activity is ongoing, for example safeguarding prevention, but each year this may look different depending on what the local need is. Section 9 Future Priorities, pages 21-24, will summarise the work for 2017-2018 in response to the findings from this report. Whilst here we look at this year's data, combined with previous year's evidence to highlight a number of specific activities that took place during 2016-2017.

Financial or material abuse

- There has been a Financial Toolkit developed in response to previous year's data, which has been made widely available. It can be accessed via an online eLearning course which any service can access –enabling all HSAB and Sub-Groups partners full access and also any member of the public can access it via the HSAB website: www.adult.haltonsafeguarding.co.uk
- Halton Borough Local Authority Trading Standards Team continues its great work helping to safeguard adults with the national SCAMS programme and Doorstep Crime initiatives. These are detailed in Section 8 of this report: Key Initiatives, pages 18-20.

Neglect and acts of omission

Neglect and acts of omission continue to raise concerns and were the most prevalent type of safeguarding alert reported for this year. When examining this type of safeguarding issue it can relate to a number of actions, a primary example being difficulties around administering prescribed medication. Time, dose, storage, renewal of medication are areas that both professionals and informal carers would benefit from understanding more. There follows some examples of work that addresses the care concerns of adults at risk of harm.

- Halton CCG Medicines Management Team (MMT) reviewed the existing Medication Management Policy during 2016/17 and work commenced on a new Medicines Policy for Social Care, which is scheduled to be agreed by September 2017.
- There have been a number of targeted pieces of work in relation to trends/emerging themes including:
    - Controlled Drugs in Care Homes – this was prompted by a number of incidents relating to safe management in care homes. Guidance was developed which was sent out to practices and a joint session was done with Cheshire Police to raise awareness of safe management, the law and reporting mechanisms.

- Covert Medication – this was an emerging trend from social care settings that was found when dealing with queries and when reviewing patients. The required paperwork wasn't always in place and the process hadn't always been followed. Guidance has since been developed and piloted and a joint session with Halton's Safeguarding Adults Unit was done for both Care Homes and Domiciliary care Providers.
- Waste – There has been a general theme emerging regarding medicines waste and the safety issues associated with excess medicines. As such an audit was done in 2016/17 with patients, GP practices, Community Pharmacies and Care Homes to assess what has been driving this and what factors needed to be considered. As a result a project to support patient led ordering of prescriptions has been launched in 2017/18 across Halton and further work will be done with Halton Care Homes later in 2017/18.

- HBC hosts 2 Provider Forums, with regular meetings for both Care Home and Domiciliary Care & Supported Living. HSAB has regular reports from these Provider Forums to enable ongoing monitoring of trends/themes/needs for additional resources.
- Through the Provider Forums, services accessed updated information, resources and awareness sessions on Care Concerns Guidance and DoLS update guidance.
- Raising awareness of what neglect is via the launch of HSAB's website, updating information leaflets and planning a long-term marketing campaign to be launched in 2017. This campaign will include information and resources suitable to both the general public, informal and formal carers and professionals.

Age and gender of adults at risk of harm

As evidenced through the report safeguarding issues are experienced mostly by older people. It is vital that we understand the needs of older people who may be at risk of harm and put in place initiatives to protect them. During 2016-2017 the following took place:

- Herbert Protocol was established within Halton. It is a National Police Initiative which assists with people experiencing Dementia and/or likely to go missing. Cheshire Police brought the scheme to Halton's Safeguarding Adults Board to implement locally. HSAB full endorsed the initiative and helped facilitate the scheme being adopted across Health, Social Care and community settings. Details of the scheme can be found in section 8 of this report, Key Initiatives, pages 18-20. The website for more information can be found at: https://www.cheshire.police.uk/advice-and-support/missing-persons/herbert-protocol/
- Halton CCG Medication Management Team also looked at End of Life care as there had been a number of emerging themes during 2016/17. Specifically the area both prescribing and administration and as such a local End of Life medicines management group was formed in

2017 to try and address some of these themes, namely paperwork, formulary, access to medicines and education.

- From 2015-2016 females aged 65 years and over living in their own home were the most highly reported safeguarding concerns. Julie's Story (Section 6, pages 13-14) provides a case study to demonstrate just one example of how this issue is addressed through social care, specifically the Integrated Adults Safeguarding Unit.

Location of risk

- Halton CCG Medication Management Team supported safeguarding investigations and shared learning for any medicines related issues that were flagged. This is often across a wide range of settings and Healthcare Professionals including care homes, care agencies, GP practices, Community Pharmacies and other providers. Subject matter expertise into investigations regarding medicines is vital in order to understand the key issues and risks. The MMT is keen to further develop this joint approach with the Safeguarding and Quality Assurance Teams to ensure the best outcomes for Halton residents.
- Halton Safeguarding Adults Board requested a revised training strategy, looking at what exists already and where information gaps are. This was to address both public and professional knowledge and skills.
- During 2017/2018 there will be a marketing and awareness raising campaign launched that will target specific areas across Halton. Free resources will be developed to aid public awareness.

Data and quality assurance

- Halton Borough Local Authority Policy and Performance Team gather data that is required nationally and also informs the work of safeguarding adults locally. Although not mandatory currently, Halton has set up a reporting system for tracking Making Safeguarding Personal (MSP) outcomes for all adults who have contact with Social Care. See Section 8 on Key Initiatives for more details.
- 2017/2018 will also see a revised Business Plan to reflect targeted performance data on adults who are identified as at risk of harm under the Care Act 2014 to evidence the impact of safeguarding interventions for those adults.

Safeguarding alerts

There is a great opportunity for HSAB to raise the profile of Safeguarding for adults, to help create a culture of care and support, not just in services for the residents but across the whole workforce and population within Halton. Safeguarding messages need to be consistent, relevant, accessible and easy to understand. It is hoped this will increase greater understanding, appropriate and timely discussions and reporting of safeguarding concerns. There will be a large scale consultation process

to aid a year-long marketing and awareness campaign that will incorporate free training and resources which HSAB has committed to providing. See Section 9: Future Priorities (pages 18-20) for further details.

Additional

- HSAB commissioned a Safeguarding Prevention Strategy, led by Halton Borough Local Authority Public Health and developed with the support of Halton's Safeguarding Adults Partnership Forum and local community groups. Consulting with members of the public the Strategy was accepted by HSAB with ongoing work throughout 2017-2018 to create an Action Plan to ensure the recommendations within the strategy are put in place. HSAB will monitor and oversee the work from this Action Plan.

SECTION 8: KEY INITIATIVES

Summary

During 2016/2017 there were a number of key initiatives that took place in Halton. These were based on many factors, firstly national guidance and statutory provision (e.g. the Care Act 2014 specifies the functions of a Safeguarding Adults Board). Also specific service provision and local strategies are already responsive to findings/trends from a range of intelligence sources as mentioned in the previous section of this report (Performance, pages 6-13). Additionally other sources of information gathering is used along with multi-agency work addressing safeguarding issues from sectors outside of statutory provision, including the community and voluntary sector. All of this information and guidance is used to shape what services and support is made available, to ensure the most appropriate use of resources for those adults identified as at risk of harm. The following is a snapshot of the implementations that took place during 2016 to 2017.

Making Safeguarding Personal (MSP)

Making Safeguarding Personal is joint Local Government Association (LGA) and Association of Directors and Adult Social Services (ADASS) programme that support Local Authorities and their partners to develop outcome-focused, person-centred safeguarding practice. The approach aims to facilitate a shift in emphasis in safeguarding from undertaking a process to a commitment to improving outcomes alongside people experiencing abuse or neglect.

Local Implementation:

In response to national guidance, Halton Borough Local Authority Integrated Adult Safeguarding Unit (IASU) and Performance Team have designed a questionnaire that is to be used for all adults with a safeguarding concern, to ensure they are consulted with and enabled to inform the care and support they wish to receive from the initial contact through to end of service. Halton Borough Local Authority hosts a Making Safeguarding Personal working group that is attended by Complex Care teams, Integrated Adult Safeguarding Unit, Mental Health Team and the Performance Team. This group looks at what and how information is being gathered as well as sharing best practice.

Self-Neglect Panel

When the Care Act 2014 was implemented in 2015, it brought a number of changes including new categories of abuse added, 'self-neglect' was specifically mentioned. Halton established a Self-Neglect Panel as a result, holding regular panel meetings to look at referrals. What became evident through these panel meetings was a number of learning and development opportunities for Halton and Halton service providers, including:

- Learning around the types of referrals - what is appropriate and meets the threshold to be classified as a safeguarding issue.
- Agencies and services need support to help identify people who are at risk of harm due to self-neglect.
- Sharing of information and resources to service providers and the public, through awareness raising and training.

Peer Review

Context and summary

St Helens is a neighbouring authority with a comparable population profile to Halton and had a positive Peer Review in June 2015 which was undertaken by ADASS North West Region.

In September 2016, the Director for Adult Social Services at Halton Borough Local Authority and the Strategic Director of Peoples Services St Helens Local Authority discussed the potential for St Helens to conduct a scaled down version of their Adult Safeguarding Peer Review to give Halton the opportunity for constructive external feedback. This took place on 5 and 6 January 2017.

It was agreed an evidence based approach would be used and information gathered from a wide range of documentary, verbal and IT system sources.

Halton arranged for access and support for the Peer Team to navigate around the case management systems. Peer Team Members then selected 15 cases where adult safeguarding procedures had been applied. A bespoke case file audit tool was produced by the Review Team to do this task in a meaningful way.

Recommendations for HSAB

There were 6 recommendations made from the review, with recommendation 3 directly relating to the HSAB as follows:

- Review the scope of the SAB and strengthen clarity and delivery of the Strategic Plan annual actions.

Herbert Protocol

A new initiative was introduced to Halton via Cheshire Police and supported by Halton Safeguarding Adults Board (HSAB). The Herbert Protocol puts systems in place to allow for early intervention when adults who may be at risk of harm go missing. This addresses safeguarding prevention on a multi-agency level and fits with the strategic aims of HSAB.

- The Herbert Protocol is a national scheme being introduced by Cheshire Constabulary and other agencies to encourage carers and family members to compile useful key information which could be used in the event of a vulnerable person going missing.
- The idea is to complete a form recording all vital details such as medication required, mobile numbers, places frequented, their routines, description and photograph. In the event of an adult at risk going missing the form can be sent or given to the police to reduce the time taken in gathering this information.

Resources include:

i) A Service Level Agreement available for Care Homes with recommended actions should a resident go missing.
ii) A Vulnerable Adult Missing Persons Profile Form
iii) Poster and information leaflet
iv) Further information available online:
https://www.cheshire.police.uk/advice-and-support/missing-persons/herbert-protocol/

HSAB agreed to support The Herbert Protocol scheme and liaised with Cheshire Constabulary and the local Provider Forums and Halton's Safeguarding Adults Partnership Forum to assist with promotion and uptake of the scheme within Halton.

SECTION 9: FUTURE PRIORITIES

The Care Act 2014 advocates a coproduction approach to local authority Safeguarding Adults Boards. There has been some work done already using coproduction; last year HSAB hosted a development day and Halton Disability Partnership continues to build on their coproduction work. This year recruitment of a Safeguarding Adults Board Officer enabled HSAB to consult with partner agencies and the general public to seek opinion and perspective on their views of safeguarding adults locally. The consultations used an 'Appreciative Inquiry' approach to draw out existing knowledge, skills and good practice and to identify opportunities to share these and other resources to help achieve the strategic aim of strengthening the board. HSAB members, sub-groups and partners have evidenced their commitment to safeguarding and working collaboratively towards a truly integrated Safeguarding Adults Board.

2017 to 2018 will continue this work and build on the existing strategic aims, producing a revised business plan with key objectives for the activity of each sub-group and HSAB as a whole.

HSAB hopes to achieve genuine coproduction by finding mechanisms where 'experts by experience' can help shape the ongoing work of safeguarding adults within Halton; in a meaningful way for service providers and more importantly the people that HSAB serve i.e. adults who have needs for care and support, are identified as at risk of harm and are unable to protect themselves as a result of those care and support needs.

The strategic aims of Halton Safeguarding Adults Board 2016-2018:

- **Strengthening the Board**
- **Early Intervention and Prevention**
- **Awareness Raising and Engagement with the Community**
- **Performance and Quality Assurance of Providers and Services**
- **Making Safeguarding Personal – listen to and do when adults tell us about their experiences of abuse and neglect, and the services and support they receive**

There will be a strong focus on the following three priority areas of work for the year ahead:

Priority 1: Creating a safer place to live for all adults living in Halton (Safeguarding Prevention)

Everyone deserves to live a safe and happy life and we have a duty to care for those people who may need more support to enable them to live a safe and happy life too.

As mentioned throughout this report HSAB has already delivered focussed work on achieving the first strategic aim of 'Strengthening the Board'. This is evidenced throughout sections 2, 6 and 7.

There has been additional work that commenced towards the end of the year on early intervention and prevention with the development of a Safeguarding Adults Prevention Strategy with Public Health. In the coming financial year there will be an Action Plan developed to implement the key recommendations, in partnership with Halton's Safeguarding Adults Partnership Forum and the wider community.

There was also a well received National Police initiative called the Herbert Protocol. HSAB supported Cheshire Police in implementing locally and it was disseminated across local services and venues.

The work of Early Intervention and Prevention will continue through 2017/2018 to help embed the work already identified and help to reduce the number of safeguarding concerns currently reported.

Priority 2: Providing the skills and knowledge to enable genuine care and understanding for adults at risk of harm (Awareness-raising and Training)

Continued awareness raising and additional training needs became evident through consultations with the Safeguarding Adults Partnership Forum members, HSAB sub-groups, partner organisations, a training needs analysis (TNA), safeguarding concerns reported and data examination.

The TNA has helped inform a Training and Marketing Strategy that will be used to develop a year long marketing campaign and traning package. This will include updating of free resources, leaflets and an refreshed training offer; with information that will be accessible in various ways to enable the greatest access to the public as well as service providers.

What was apparent from this year's data was the high ratio of safeguarding alerts reported for adults aged 75 years and over, in addition to an increase in males experiencing a safeguarding

issue. HSAB has committed to implementing the Training and Marketing Strategy to ensure targeted resources are focussed on where they are most needed to support those adults at risk.

The development of Halton safeguarding adults webpage will enable a central point of access for information, resources, latest guidance and updated policies. The website address is: www.haltonsafeguarding.co.uk

- Following on from the development of a Training Strategy HSAB will refresh all resources including leaflets and design of a pocket guide for easy reference.
- Free training programme for all staff, volunteers and informal carers living and working in Halton
- Free learning events including a Development Day
- A 12 month Public Awareness campaign to raise the profile and understanding of Safeguarding Adults.

Priority 3: Gaining a greater understanding of how mental health can impact adults at risk being protected and cared for in the best way possible (Mental Health)

Another theme that arose through consultations and through initial trends emerging from reviews was mental health. Mental health and it's impact on daily living can cause additional complications when a safeguarding concern occurs.

Anecdotal information was gathered through consultations with local service providers, service user groups, during the Safeguarding Prevention Strategy Consultation process and from questions emerging from a Thematic Review. There were a number of questions asked about safeguarding when working with or supporting adults at risk of harm who may have mental health problems, for example:

- Is there an understanding that adults with a mental health issue and/or diagnosis aren't automatically considered as 'at risk of harm' as defined by Care Act?
- Do some adults who have health and care needs where mental health problems were also present have additional barriers to accessing support?
- Could service providers benefit from understanding how to support an adult with mental health when there is also a potential safeguarding concern?

Healthwatch have made a commitment to Halton Safeguarding Adults Board to work in partnership across services and with the local population to establish local needs and knowledge around safeguarding and mental health towards developing targetted resources.

2017-2018 workplan

These priorities will help shape the activity of HSAB and it's sub-groups and key partners for 2017-2018 to enable HSAB to continue to meet it's strategic aims.

The key objectives for each of this coming year's priorities will be included in a revised workplan. The workplan will make explicit the objective activities, which priority they relate to and how this objective will address the overarching strategic aims of HSAB. It will detail which sub-group will hold responsibility for each objective, with additional information if it relates to a specific service/provision and where the information will be reported to contribute to the stratgeic aim of performance and quality assurance of providers and services.

Section 10: Appendix

HSAB members and partners contribution to safeguarding adults in Halton

Health Providers and Health Sub Group

5 Boroughs Partnership NHS
NHS Foundation Trust

St Helens and Knowsley Teaching Hospitals NHS
NHS Trust

Warrington and Halton Hospitals NHS
NHS Foundation Trust

NHS Halton Clinical Commissioning Group (CCG)

NHS Halton Clinical Commissioning group (CCG) demonstrates a strong commitment to safeguarding adults within the local communities. There are strong governance and accountability frameworks within the Organisation which clearly ensure that safeguarding children and adults is core to the business priorities. The commitment to the safeguarding agenda is demonstrated at executive level and throughout all CCG employees.

Accountability for the safe discharge of safeguarding responsibilities remains with the Chief Officer; executive leadership is through the Chief Nurse who represents the CCG on Halton Safeguarding Adult Board and who is also a member of the CCG Governing Body.

To meet with national safeguarding requirements, the CCG commission a Hosted Safeguarding Service with Designated Nurses for Safeguarding Children and Adults and a Safeguarding/ Mental Capacity Coordinator and administrative support. The CCG reviews this arrangement annually to ensure that it meets its statutory duties for safeguarding adults at risk of abuse and harm. The CCG continues to work in partnership with statutory agencies and third sector to support safe and effective delivery of services against the safeguarding agenda.

During the reporting year of 2016 -17 the CCG has supported Halton Safeguarding Adult Board (SAB) priorities in the following:

NHS Halton CCG commissioned a Multi -Agency Review (MAR) following the death of an adult who was in receipt of health commissioned services. A Multi Agency Review is a process of critical and reflective learning, designed to lead to improved outcomes for people who use services.

The main purpose of a MAR is to:

- Establish whether there are lessons to be learned from a particular case about the ways in which agencies and professionals work together to safeguard vulnerable adults

- To consider all the issues raised in the case and make specific recommendations for future actions

This MAR brought together the agencies involved in the care and treatment of the young adult to identify where lessons can be learned and to identify actions to address that learning. The action plan is overseen by the health sub group of the Halton Safeguarding Adults Board. The health sub group is chaired by the Chief Nurse for NHS Halton CCG.

Additionally, to support the Safeguarding Adults Board priority of early intervention and prevention, Halton CCG led a thematic review of a number of reported suicides / attempted suicides which occurred over the summer of 2016. In all, nine incidents were reported in a seven week period.

The aim of a Thematic Review is to prepare an overview of the themes and issues highlighted in the care and support provided by all services to the patients/service users involved in the suicides or attempted suicides and incidents. The process for the review is to pull together the findings from all information provided and involve all the providers of services with the individuals. The initial findings are that there are some important lessons to be learnt in relation to these incidents and that there are some gaps and issues in relation to the effectiveness of learning from this type of incident.

A plan for next steps has been presented to the Safeguarding Adults Board and has formed part of the work plan for the coming year.

NHS Halton CCG also supported the first Serious Adult Review (SAR) commissioned by Halton Safeguarding Adults Board under the new Care Act. The recommendations and action plan following the SAR will be overseen by the health sub group of the Safeguarding Adults Board.

NHS Halton CCG commissions services from Bridgewater Community Health Foundation Trust, Warrington & Halton Hospitals NHS Foundation Trust, St Helens & Knowsley Hospitals Trust and North West Boroughs Mental Health Foundation Trust. Amongst other quality and safety governance arrangements the CCG also work closely with the Care Quality Commission to ensure commissioned services are delivering high quality services to the population of Halton.

The Care Quality Commission carries out regular checks on health and social care services. These are called comprehensive inspections and they are undertaken to make sure services are providing care that’s safe, caring, effective, responsive to people’s needs and well-led.

Current CQC Health Provider ratings 2016/17

	Safe	Effective	Caring	Responsive	Well led
Bridgewater Community Health Foundation Trust (2017)	Requires Improvement	Requires Improvement	Good	Good	Requires Improvement
Warrington & Halton Hospitals NHS Foundation Trust (2015)	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement
St Helens & Knowsley Hospitals Trust (2016)	Good	Good	Outstanding	Good	Good
North West Boroughs Mental Health Foundation Trust (2016)	Good	Good	Good	Good	Good

Bridgewater NHS

Work with partner agencies and organisations to focus on emerging forms of abuse e.g. modern slavery, self-neglect, honour based violence.

During 2016/2017 we have been engaged with work which supports the health sub group objectives. This includes work to ensure that the trust has comprehensive safeguarding intranet pages which incorporates current and emerging themes in adult and children safeguarding for staff to access for support and advice. The trust intranet site includes pages on self-neglect, CSE, domestic abuse (covering forced marriage, honour based violence and forced marriage) and modern day slavery and human trafficking. Pages have been developed on hate and LD mate crime and are waiting to be uploaded.

Adult level 3 safeguarding training also includes self-neglect, hate crime, LD mate crime, domestic abuse (covering forced marriage, honour based violence and forced marriage) and modern day slavery and human trafficking.

Develop a better understanding of cross-cutting themes

The Named Nurses for safeguarding adults and children have implemented the NICE Guidance on domestic abuse incorporating this into the trusts policies and procedures for supporting patients when staff identify, suspect or have a disclosure of domestic abuse.

The Named Nurse safeguarding children and adults is actively engaged in Safeguarding Adult Reviews (SAR) within other Bridgewater boroughs with any lessons learnt or actions disseminated within the trust via meetings, bulletins and the HUB (Trust's internet site). However the Named Nurse for Safeguarding Adults has not been involved in any Safeguarding Adult Reviews within Halton.

All agencies recruit staff, including volunteers, safely

- Bridgewater has a Recruitment and Selection policy in place which supports the principles and safer recruitment and highlights the importance of ensuring that all staff involved in recruitment are appropriately trained.
- The organisation delivers a programme of HR skills training including a module on Recruitment.

Warrington and Halton Hospitals NHS

Safer workforce

The WHHFT Recruitment and retention policy remains in date. For all new appointees coming into the organisation for the first time, the Trust must seek to validate a minimum of three years continuous employment and/or training including details of any gaps in service. At least one reference should be from a current or most recent manager to enable confirmation to be made of their most recent employment history. Where an individual has been with one employer for three years or more, one reference confirmation of employment/training is sufficient, provided that all requested details have been confirmed by the previous employer. Where a prospective employee has changed employment frequently within the last three years, a sufficient number of confirmations must be obtained to cover the continuous three years history. Where an individual applies for a new position within the Trust all effort should be made to ensure any risk is minimised. Therefore, the Employment Services Team will take up a reference from the current line manager. All references are retained on the Employee's personnel file. The receipt of references is also recorded on individuals ESR record.

North West Ambulance Service
NHS

North West Ambulance Service

The Trust has recruited additional safeguarding practitioners who are covering the 3 geographical areas. A communication was sent out in April 2017 to all adult and child boards in the area updating contact details. The Trust is delighted to announce that the Safeguarding Team has expanded to enable engagement support in each of the three areas, (Cheshire and Mersey, Greater Manchester and Cumbria and Lancashire). The increase in safeguarding resource and agreed models of engagement will improve multi-agency safeguarding working and learning.

The Trust appreciates the diversity within each Board in the area and that many models of engagement exist. The Trust will endeavor to attend a minimum of one Board meeting each year and engage with the sub-groups as requested including child and adult safeguarding review processes (SCR and SAR).

The Safeguarding Practitioners are currently looking at key training priority areas for the next roll out of safeguarding training to staff in the organisation. In addition, the Trust's Safeguarding Vulnerable Persons Policy and Procedures has been reviewed and updated.

The Trust's continues to monitor safeguarding notification rejections each month. Adult rejections remain consistent at between 4-5%of concerns rejected each month and relate in the main to patients with mental ill health or referrals made for patients who remain as a hospital inpatient. Child rejections remain relatively uncommon. The Trust continues to use the ERISS system and the thresholds for accepting child concerns are being monitored and challenged where appropriate.

Halton Safeguarding Faith Forum

Here is a brief summary of the Faith Forum's activity for 2016 to 2017:

Standing items on the agenda of the Faith Forum include updates from both Halton Adult and Children's Safeguarding Boards and the CSE/Missing/Trafficking Sub Group. We use the group to help share information, training and resources and to raise the profile of safeguarding amongst people in the faith sector.

Other items discussed at the Faith Forum meetings included HSAB's work on Self-Neglect, E-safety training and awareness. Additionally people's issues within the faith sector e.g. poverty, relationship breakdown, loneliness, and addictive behaviours.

We also use the Faith Group to help with dealing with safeguarding concerns within the faith sector; Covenants of Care and issues surrounding them and safeguarding liabilities of others using church buildings for the provision of activities/services.

The Group also contributes to a local Parish newsletter which is shared across the sector. Topics included:

- What is Safeguarding and the Role of the Safeguarding Representative/Lead
- Types of Abuse – detailed information
- Responding to Allegations or Concerns
- Guidance for photographing and recording children, young people and vulnerable adults during events, activities and at other times
- Suicide Prevention

Faith Safeguarding Event

The Faith Group hosted a Faith Safeguarding Event held on 4th March in Farnworth Methodist Church. There were over 60 attendees, including four local Authorities, with 11 stallholders who all

reported good interaction with attendees. The audience was Christian– not multi-faith. The feedback was positive with a desire for future sessions and specific training topics raised included referral processes for Street Pastors and more detailed information on:

- internet safety re adults at risk as well as children and young people
- safer recruitment and management of volunteers

Trading Standards

Scams work

The National Trading Standards Scams Team and partners such as Adult Social Care refer individuals to the service who may have been the victim of a scam. The individual will receive one-to-one visits from a specialist officer who works with the individual to help them to recognise the hallmarks of a scam so that they are better protected in the future.

Everybody that we work with on the scams project is given a telephone and mail prompt card to help them to deal with cold callers and unsolicited post.

We have held training sessions with Royal Mail who have helped us to identify a further 110 people in Halton who are being targeted with scam mail.

Trading Standards have installed 11 call-blocker devices for scam victims who have been receiving high volumes of nuisance and scam calls. The call-blockers let calls from the consumer's 'trusted numbers' straight through, it blocks unwelcome callers (nuisance and scams), and asks unrecognised callers to identify themselves before it puts them through. The call-blockers continue to block a significant number of calls to those numbers.

Within the first 10 months of the project the key financial findings were:

- The total lost by Halton residents was £281,398
- The amount lost to Halton's economy per year was £96,468
- The annual savings for participants was £46,445
- The annual saving to the public purse was £5,307
- The non-financial benefits were:
    - The project had registered 27 participants with the Telephone Preference Service to reduce the volume of unwanted calls
    - The project had registered 23 participants with the Mailing Preference Service to reduce the volume of mass marketing letters received

- 137 people had joined the Trading Standards iCAN system (a Consumer Alert Network whereby information about scams and rogue traders is shared with members via email)

Mr E is 97 and he's has lost around £20,000 to scam mail but was reluctant to stop replying. He had no money for food and he'd stopped paying his care bills. He was being sued by a betting company for an unpaid debt of £59. An officer contacted the company concerned who as a gesture of good will cancelled the debt. He had bought a call blocker device for £85 which was very poor quality and would not afford the protection he needed. Trading Standards obtained a full refund for him.

Examples of added value resulting from the unique positioning of Trading Standards to deal with breaches of consumer rights and contraventions of criminal legislation included:

A survey of participants was undertaken in November 2015. The survey was sent to 44 participants, 21 responded. The main findings are summarised as:

11 respondents

Said that before contact with Trading Standards they could spot some types of scam but thought others were genuine

13 respondents

Said that after contact with Trading Standards they spend less money on scams

14 respondents

Said after contact with Trading Standards they think they are a lot better at spotting scams

Doorstep Crime

A specialist officer will make contact with every individual that the service becomes aware of who has been targeted by doorstep criminals. Every person is supported to understand how such criminals work and how to protect themselves against similar incidents in the future. They are all given No Cold Calling Cards and letterbox stickers to deter doorstep callers from knocking.

iCAN

The service operates a free email alert system to warn members of the public about scams, doorstep crime incidents and other useful consumer information.

During last year 73 iCAN messages were issued covering things such as scam phone calls, letters, emails, texts and doorstep crime incidents.

Halton Disability Partnership

The work of Halton Disability Partnership (HDP) addressed a number of the HSAB key strategic aims and objectives; here is just a brief description of their contribution:

- HDP chair Tom Baker was a member of the board, he spectated our co-production project and the need for real pre-action consultation with stakeholders.
- The HSAB Chairperson met with HDP lead and the “old town enabled” group of stakeholders.
- HDP works with more than 300 people who have a personal budget. Once choice and care is assessed we do ongoing follow ups and support so we can intervene as soon as concerns arise.
- In Halton there are low incidents of abuse of people with disabilities under the care of HDP when concerns of hate, anger. Our PA's are trained "Alerters".

- Through our co-production work, HDP supports Old Town Enabled (OTE) and New Town Enabled (NTE) group. Updates and discussions of safeguarding are also taken place here.
- OTE and NTE members have shaped their knowledge with other groups they have been involved with. On occasion they have alerted HDP about a concern.
- Safeguarding is a key component of HDP's work that balances choice for service users with robust safeguarding. This is highlighted in our leaflet and on our website. All HDP tasks are measured and reported on by our external evaluation.
- All the people HDP work with have a care worker who is their "personal assistant". Consequently, care is personal but also risk and vulnerability are individualised and ongoing. One example is client "RB" who was placed in a violent situation via a registered "PA". HDP's PA assessed the situation and risk; and the matter was directed to police before serious harm could be done.

Halton Carers Centre

What's worked well: what has been done by HSAB and/or your respective services that should be shared?

- Halton Carers Centre has provided a private interview room at our Carers Centre to enable carers and members of the public to discuss safeguarding issues with social workers and other professionals if they prefer not to attend a Local Authority building.
- The profile of safeguarding remains high within our organisation due to staff attending ongoing training and awareness courses.

What would be good to have or do to support the work of Halton's Safeguarding Adults Board?

- Staff would appreciate updates following safeguarding referrals where possible, as our carers may attend with similar issues and we don't know if the safeguarding referral has been addressed.
- Carers Centre can publicise safeguarding issues in our quarterly newsletters.

What, in your view could be HSAB main area of focus for 2017-2018

- Increased communications to organisations in Halton and the public. Many carers are unaware that they can raise a safeguarding issue or what constitutes a safeguarding issue.
- Perhaps our carers could attend a safeguarding awareness at a Carers Forum in the future?

Age UK Mid Mersey

Age UK Mid Mersey supports the Halton Safeguarding Adults Partnership Forum. We aim to work hard and remain committed for the success of the Safeguarding Adults Board for the residences of Halton.

We recognise the importance of educating and training staff, volunteers and the public is the best way forward. If we are contacted by members of the public who are very concerned about a person we take the matter very seriously. We have a safeguarding lead person in Age UK Mid Mersey who is Dawn Kenwright. We are supported by Age UK nationally who also has a safeguarding lead person. Age UK also provide a safeguarding training pack for the organisation to use for training. We have an Age UK 'Factsheet no. 78 safeguarding older people from abuse and neglect', also, two Age UK booklets, 'Protecting yourself' and 'Avoiding scams'. All Age UK information is kept up to date if there are any changes to legislation.

Age UK Mid Mersey tries to identify frail older people and advise them of Age UK Mid Mersey support. We aim to maximise their income by supporting them completing an attendance allowance claim. The additional income helps them buy in the care and support they need. A lot of people in their late 80's are on low incomes and without additional income for care could end up self-neglecting themselves.

Age UK Mid Mersey carries out work in its offices and in the local community, we have a market stall in Widnes that is very successful at raising awareness to local people and every week on a Wednesday morning we go into Halton Hospital onto ward B1 this is the long stay ward for older people. We raise aware of the work we do in supporting Halton residents not only to older people but also to family, carers and friends. We work very closely with other professionals, the nursing staff and Occupational Therapists preparing people for safe discharges from hospital. We provide free factsheets and information booklets on issues of concern for older people.

Everybody is unique it's important that we respect the individual's personal traits. We are none judgemental and will always listen and treat the person with respect and dignity.

Halton Housing Trust

Halton Housing Trust provides a variety of support for its 7,000 households in terms of support, financial assistance and referrals to other agencies. We have supported individuals to improve the

condition of their homes, assisted them to move to more suitable accommodation due to health or other financial constraints to allow them to remain independent.

When necessary made referrals due to abuse, neglect or other concerns to ensure the correct support is put in place to support their individual needs. We deal with a large number of victims of domestic abuse and provide sanctuary measures to improve their safety while working with partners to ensure their health and wellbeing is maintained. Our customers have benefitted through either maximising their income, improved quality of life, or simply getting the support needed to reduce the risk.

We have delivered training to our frontline staff to identify any concerns and to refer into our internal resources to raise any safeguarding concerns to the appropriate service areas. This has resulted in an increase in the number of referrals to our designated Tenancy Support Team, who have carried out a home visit to ensure that our customers are safe in their home.

Our designated staff have received training to support our most vulnerable staff and work closely with partnerships across Halton to direct the correct support. Greater joined up approach, more communication between the services and a general interaction to improve the position that these individuals have found themselves in.

Here is a link to some of the stories where we have supported vulnerable adults: http://www.haltonhousing.org/blog/

healthwatch Halton

Healthwatch Halton

Healthwatch Halton's powers and remit are defined by the Health and Social Care Act 2012, the Local Healthwatch Regulation 2012 and the Local Healthwatch Organisations Directions 2013 section 5 but in summary we are the official consumer champion for users of Health and Social Care services. In Halton, Healthwatch is a relatively new service and we are a relatively small team (4 paid members of staff and 15 volunteers) and so we have developed strategic partnerships with other key voluntary sector groups (e.g. Citizens Advice, Age UK, SHAP, Halton Disability Partnership) to increase our reach into the community and also ability to gather intelligence.

Because of the nature of the work we do we are always alert to potential safeguarding concerns and also ways to minimising the risk of a potential safeguarding issues escalating. Key pieces of safeguarding-related work we have undertaken in the year and our impact include:

Conducting "Enter and View" visits to local care homes; in the last year we have conducted 12 Enter and View (E&V) visits and 5 "focus group" meetings (with residents and their families) to look at the

living conditions of residents and help be their voice to drive up standards of care. Our E&V reports are public documents, published on our website, and this transparency acts as a real motivator for local managers to improve their standards of care. During these visits we identified 5 potential safeguarding issues and these were duly reported and acted upon by Halton Borough Local Authority.

We carried out a service user engagement mapping exercise to see how we could all work in better partnership to improve our collective reach into local communities. We surveyed 7 organisations with a combined marketing reach of over 12,000 and we discovered a real appetite and willingness to participate in joint campaigns. As a result of this exercise we also submitted two formal recommendations to the SAB;

We create a "safeguarding adults risk register" which is a standing agenda item for the SAB "Partnership meetings". Partners around the table can then discuss what steps we can do to raise awareness of any issues. E.g. post Brexit there was a spike in hate crimes, could we all have done more collectively to mitigate this?

In the SAB "partners directory", we include contact details of each organisation's "Communications Officer" and/or their Service User Engagement Lead… this will help us all easily identify who we need to talk to if we have ideas for a joint campaign.

Citizens Advice Halton

Citizens Advice Halton (CAH) is a free, confidential and independent information and advice charity operating from sites across Widnes and Runcorn. Each year CAH deals with over 7,000 local service users' needs, support and advice on a range of different issues e.g. debt, housing and homelessness, disability rights, etc. A significant proportion of CAH's service users are vulnerable; either because of a physical disability or because they have poor mental health and as such can present as potential safeguarding issues.

Key areas in the last twelve months where CAH has contributed to the local Safeguarding Adults agenda include:

We have played an active role on the Safeguarding Adults Partnership Forum and we actively support the local Healthwatch Halton service by providing senior management support and sharing intelligence.

CAH staff are now trained to talk to people seeking debt or benefits advice to identify and support potential victims of domestic and gender violence. This is because there is a proven correlation between this form of abuse and "lack of money".

We have developed our financial literacy programme to include digital safety and raising awareness of the risk of online abuse, especially scams. In partnership with the Institute of Trading Standards, we play an active role in national scam awareness campaigns and anti-loan shark campaigns.

We renewed our registration as a Hate Crime reporting centre and we are the only organisation in Halton that provides free discrimination advice.

CAH staff have been trained to deliver "suicide awareness" training to community groups and volunteers so that more members of the community know what support is available if they have any concern about their friends or family. There is a real need to de-stigmatise asking for help because from the CAH alone on average one service user per week tells their adviser they have had thoughts about suicide.

Care Quality Commission

Safeguarding is a key priority for CQC and people who use services are at the heart of what we do. Our work to help safeguard adults reflects both our focus on human rights and the requirement within the Health and Social Care Act 2008 to have regard to the need to protect and promote the rights of people who use health and social care services.

CQC's primary responsibilities for safeguarding are:

1. Ensuring providers have the right systems and processes in place to make sure adults are protected from abuse and neglect. We do this through our inspection regime. We publish ratings and inspection reports, so people who use services can understand if providers have effective systems to safeguard people.

2. Working with other inspectorates (Ofsted, HMI Probation, HMI Constabulary, and HMI Prisons) to review how health, education, police, and probation services work in partnership to help and protect young people and adults from significant harm.

3. Holding providers to account and securing improvements by taking enforcement action.

4. Using intelligent monitoring, where we collect and analyse information about services, and responding to identified risks to help keep adults safe.

5. Working with local partners to share information about safeguarding.

We do not routinely attend SABs although we may share information and intelligence to help them conduct enquiries. Engagement with these Boards is at a local level, with local partners liaising with one another to agree involvement and attendance so that there is a joined-up approach.

HALTON
SAFEGUARDING
ADULTS
BOARD