

**CWOP/39/10**

**Policy & Scrutiny Committee** Community Wellbeing and Older People

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**Adult Safeguards Annual Report 2009-10**



**EssexWorks.**

For a better quality of life

**Adults, Health & Community Wellbeing**

**Adult Safeguards Annual Report**

**2009 – 2010**

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Operational Service Manager, Adult Safeguards Unit**

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## **Forward**

The safety and wellbeing of the vulnerable members of our community has always been an intrinsic element in all that we do in adult social care, but in recent years we have ensured that this core principle is shared across the organisation. The last year has seen the development of the Corporate Leads Group whereby all directorates of the council now have a safeguarding lead helping to instil the message that safeguarding is everyone's responsibility. The closer working relationship developed between the Children's and Adult's safeguarding teams has also ensured a more joined up approach with both teams sharing information and expertise. Our relationship with the Police continues to be extremely robust to the extent that Essex now has access to the Police's PROtect database which enhances the information sharing that is so essential in dealing with safeguarding issues for both children and adults. We have also worked proactively with colleagues in Health to develop training and practice working together on difficult and complex cases. Essential to safeguarding is hearing the voice of the victim at all stages of the process and to make this possible we are actively engaging the Third Sector in working with us.

The commitment of everyone within the county on addressing safeguarding issues was strongly commented on in the Care Quality Commission's inspection of adult social care in March. Consequently the rise in safeguard concerns raised reflects the high level of awareness across the county by all professionals and the commitment to address safeguarding issues.

***Liz Chidgey***

***Deputy Executive Director, Adults, Health and Community Wellbeing***

## **Introduction**

The outcome of the Care Quality Commission's inspection of adult social care in March, focused, as one of its key themes, on the safeguarding of adults. The outcome was an excellent achievement and is a testimony to the dedication and hard work of all Access, Assessment and Care services and for all the partner agencies who have collectively worked to make Essex a safer place for vulnerable adults. The recommendations from the inspection report have been built into the 2010-2011 action plan.

The outcomes of any inspection can only as good as at the time of the inspection and no-one is under the illusion that we can now sit back and believe we are where we want to be. The collective aim is to constantly strive to develop and improve the service that we deliver and build upon our success.

This Annual Report seeks to highlight the work and contribution of all parties in the delivery of adult safeguarding across Essex.

***Sue Hawkins***

***Senior Operational Manager, Social care Access and Adult Safeguards***

## **Overview**

The Care Quality Commission's Inspection Report (June 2010) highlighted the excellent approach in Essex safeguarding vulnerable people. The report highlighted that Essex:

- Effectively engaged partner agencies to develop safeguarding practice.
- Developed preventative community safety initiatives that promoted the safety of vulnerable adults in their homes.
- Ensured that robust recording systems were in place, management oversight was evident and staff appropriately supported.
- Effectively used advocacy services and independent mental capacity advisors to empower vulnerable adults to make informed choices.
- Provided good quality training to staff in the council and partner agencies.

The report highlighted the need for the council to:

- Continue with information and publicity campaigns to ensure that all citizens are provided with accessible information to empower them to keep safe and raise a safeguarding concern.
- Continue to develop advocacy services.
- Continue to develop ways to receive feedback from people who have been subject to safeguarding enquiries.
- Ensure that partner agencies are communicated with regarding the outcomes of safeguarding investigations.

There continues to be an increase in the number of safeguarding concerns raised<sup>1</sup> but this does not indicate that Essex is an unsafe place for vulnerable people. In fact the opposite can be said to be the case as these concerns are raised because of a better awareness by professionals and the community at large. Not all these concerns require a safeguards investigation but they do demonstrate a desire by the people of Essex to address concerns for their own and others safety that may have been overlooked in the past.

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<sup>1</sup> Using available data it is anticipated that by the end of the current financial year there will have been a 50% increase in the number of safeguard concerns raised compared to the previous year.

The Law Commission have been commissioned to look at social care legislation and the definition of “vulnerable adult”. It is anticipated that legislation to support vulnerable people will be introduced in 2011 but at this time there is no specific statutory guidance to reinforce the safeguarding process for adults. However, it could be argued that perhaps the lack of such legislation has made partner agencies work more closely together. In Essex a new definition of vulnerable adult has been drafted with agreement from partner agencies that offers a more meaningful and helpful understanding for all concerned.

The PROtect Database is a system managed by Essex Police to track details of allegations and incidents of child protection and domestic violence and safeguarding issues. The access given by the Police to Essex County Council is unique and highlights the trust between the two agencies.

In the early part of 2010 a number of awareness seminars for Members on safeguarding were held and there continues to be a commitment by Members to the regular Safeguarding and Vulnerable People Panel where safeguarding issues relating to both children and adults are discussed.

Over the past year the role of the Progress Chaser has been fully developed within the Adult Safeguards Unit to monitor and log the progress of all safeguard concerns raised. This has allowed a more robust and efficient recording of data as well as improve timescales for completion of investigations. The role also enables better communication with the referrer of the concern so that they are reassured action is being taken.

The SAFE Project has now become a mainstream service under the umbrella of the Adult Safeguards Unit and the principles of the team are now being focused not only on homes of multi occupancy but also on large scale institutional concerns across the county. SAFE works closely with colleagues including Quality Monitoring and Health to deliver clear objectives and outcomes.

The Adult Safeguards Unit is conscious of the current economic climate and the cost to the council of investigating safeguard concerns. The Adult Safeguards Unit has begun to explore opportunities to income generate and has been successful in securing two contracts with Primary Care Trusts to undertake Deprivation of Liberty assessments on their behalf. This has ensured a consistent system and understanding by very experienced practitioners across the Health and Social Care economy in these areas. We are working closely with colleagues in other areas to develop this initiative further. The Unit’s DoLs team has positioned itself as the county’s leading resource in terms of training and assessments. The Unit has also been able to raise income through training it has provided to various organisations.

## **PART 1: Operational Issues**

### **1 Annual Report**

- 1.1 The last Annual Report was dated October 2009 to tie in with the new data collection arrangements with the agreement that the 2009-2010 Annual Report would follow after October 2010 giving a full year of statistics. It is now proposed to follow this report with a mini-report in April 2011 and then to have the next Annual Report in April 2012 which will then give more comparative data and analysis.

### **2 Safeguarding Vulnerable Adults Policy and Procedures**

- 2.1 Work has been completed on revising the Essex Safeguarding Policy. The new policy sets out to take a more multi-agency approach to safeguarding in order to reflect the outcomes of the *No Secrets* Consultation and the objectives of the Essex Safeguarding Adults Board.
- 2.2 Other parts of the organisation, such as Libraries and Trading Standards, has also assisted by the Adult Safeguards Unit in developing their own safeguarding procedures, ensuring that they do not conflict with the SET Guidelines.
- 2.3 The Safeguarding Practice Guidance has been revised and re-issued and which reflects changes in Policy.

### **3 Vulnerable Adults Criteria**

- 3.1 As we work more closely with partner agencies it has become apparent that the definition of vulnerable adults as set out in *No Secrets* 2000 is not entirely appropriate for all agencies. Through a work stream of the Safeguarding Adults Management Committee (SAMC) work has been done to review the term of vulnerability which captures all people across all agencies. This seeks to move away from a specific definition to a wider criterion, which is:
  - Anyone over the age of 18 **and**
  - Who has identified risks and behaviours **and**
  - Who is perceived by self or to others to be at risk from the actions or inactions of others **and**
  - Who is at risk of serious or significant harm or exploitation because of the nature of their individual situation which disadvantages them in society.

This work has been presented to the Essex Safeguarding Adults Board for their consideration.

## **4 Investigation and Suspension of Care Services Protocol 2010**

- 4.1 This policy replaces the Embargo Policy which was used by Essex County Council to suspend placements in care homes where concerns had been highlighted about the quality of the service being provided or where an inspection by the Care Quality Commission had identified it to be a poor quality of service. In the spirit of partnership working the Embargo Policy was reviewed and revised in collaboration with colleagues from Health, the Third Sector and the Independent Care Providers. The name of the policy was changed following recommendations from across these groups.
- 4.2 There are many ways in which the quality of care provided or commissioned by Local Authorities and Primary Care Trusts can be influenced. Examples of these include: specific contractual conditions, routine monitoring of care providers, supporting the provision of training for care staff; encouraging advocacy services and ensuring that service users and their families are aware of their rights and how to complain.
- 4.3 Additionally, the Care Quality Commission has a regulatory responsibility to register, inspect and report on adult social care services and councils who commission such services.
- 4.4 There are however occasions when some care providers continually fail to meet the Care Quality Commission minimum care standards and Essex County Council's contractual obligations. It is anticipated that these failings can be successfully addressed with increased monitoring and support by Essex County Council's quality monitoring processes in partnership with the regulatory bodies.
- 4.5 Where any care provider continues to fall short of their duty of care, despite the increased intervention by the various inspection/monitoring bodies, enforcement conditions will be escalated.
- 4.6 This protocol contains a clear procedure to be followed in the event of any care provider who has been consistently unable or unwilling to make the required improvements in the quality of care to which their service users have a right to expect. The protocol formalises roles and responsibilities in the event that a suspension on new placements/care packages needs to be considered. The guidance is necessary to ensure the imposition of this measure is effectively managed.

4.7 There has been a move away from a policy that has at times created confrontation to one which seeks to work with the provider. It ties in with the decision of the authority to not place people in poor homes (as determined by the Care Quality Commission) and to work with those homes to help raise and improve standards.

4.8 Therefore the purpose of the protocol is to:

- Establish an approach to collective decision making.
- Ensure a standardised response to all circumstances in which enforcement measures are being escalated.
- Identify responsibility for co-ordinating the response.
- Agree a process which is meaningful and one which everyone can follow.

## **5 Risk Enablement Board and Risk Strategy**

5.1 Safeguarding is about risk – the identification and management of risk. The Social Model of Disability and the Personalisation agenda require that we support service users in being able to take their own risks, unless they are unable to understand the risks involved. Essex County Council has developed a positive risk management tool as part of the support plan process. The principles of risk management as laid out in the *Risk Enablement Guide* have been used in the development of safeguarding services. By identifying and managing risks vulnerable people can be safeguarded, and by addressing such risks the number of inappropriate safeguard concerns can be reduced.

5.2 The Risk Enablement Board is a forum led by Essex to discuss serious and complex cases where the identified risks are such that they cannot be resolved at a local level. The Board has met several times during the year to discuss cases where there has been a combination of serious and complex risk associated with potential safeguards issues.

5.3 Each month a Risks and Issues Report is compiled by the Adult Safeguards Unit highlighting the most serious safeguarding cases and complaints for senior managers and councillors and updating them on previous cases. This report also gives current statistical information which highlights any emerging trends.

## **6 Essex Guardians and Counter-Fraud Team**

6.1 Essex Guardians is a pioneering service which seeks to improve the quality of life for vulnerable people and their carers through helping them manage their money. The Counter-Fraud Team works to ensure that vulnerable

service users are not financially exploited or abused and where this happens they seek to work with the relevant agencies (e.g. the Police and the Department of Works and Pensions). Both services work closely together and have become essential partners for the Adult Safeguards Unit when dealing with cases of financial abuse.

## 7 Engagement with other agencies

- 7.1 Essex recognises that it cannot work in isolation but requires the close working with other agencies.
- 7.2 We recognise the importance of the involvement of advocacy services in the work undertaken in order to ensure that the voice of the service user is heard in the safeguarding process.

Moira Rowland, Director of ILA Essex Ltd, recently stated:

*The most noticeable thing during the last twelve months is the increase in joint working between Advocacy Organisations across Essex and the Safeguards Unit.*

*From a third sector perspective, it is gratifying to be treated professionally and on equal terms with statutory organisations. It is now quite common to have meetings involving Health, Social Care and the third sector working together to achieve a solution, with the service user always as the primary focus.*

*There has been an increase in shared working with individual safeguarding alerts and institutional situations, and this leads to a greater understanding of the roles, remits and boundaries of all involved.*

## 8 Corporate Safeguarding Leads Group

- 8.1 This working group has been in place for the past year to ensure that the principles of safeguarding children and vulnerable adults underpin all activity undertaken by Essex County Council in service delivery. The group is chaired by Jenny Owen, Deputy Chief Executive, meets quarterly, is made up of representatives from each Directorate within Essex County Council, including Environment, Sustainability and Highways, Finance, Customer Services and Information Technology, the Children's Safeguards Board, the Adult's Safeguards Board, the Adult Safeguards Unit, the Children's

Safeguards Team and other invited representatives as deemed appropriate by the group.

8.2 The purpose of the group is to:

- To ensure safe practices across the organisation when working with children and vulnerable adults. To maintain choice, rights, fulfilment, independence, privacy, dignity and ensure that children and vulnerable adults are kept safe from harm or maltreatment.
- To ensure all Directorates are aware of the safeguarding processes for children and vulnerable adults by following the direction provided by the ESCB and ESAB.
- To feedback to staff any issues highlighted by the Corporate Member Safeguarding Panel and to keep them informed of any specific issues raised. To ensure that relevant information shared at the Panel is also cascaded back to staff.
- To oversee and co-ordinate the safe recruitment and safer workforce processes by reviewing current issues, managing associated risks and to consider implications for policies and procedures.
- To advise on safeguarding in all aspects of the transitional work of Essex County Council.
- To ensure high and consistent standards of safeguarding practice across Essex through the development of appropriate training in accordance with expectations of the Essex Safeguarding Adults Board and Essex Safeguarding Children Board.

8.3 Within each Directorate there are safeguarding leads who:

- Are points of contact within their Directorate for all relevant Safeguarding issues.
- Ensure that should any safeguarding concerns be raised by staff and further advice be required that this is obtained from the Adult Safeguarding Unit and/or the Children Safeguarding Service accordingly.
- Promote safeguarding across their Directorate
- Share information from the Children's and Adults Safeguarding Boards within their Directorate.
- Ensure that the requirements of the organisation in regards to the safeguarding of children and vulnerable adults are delivered within their Directorate to fulfil statutory requirements.

- Undertake appropriate safeguarding training and promote that training within their Directorate.

## 9 Working with Children's Safeguarding Service

- 9.1 Both the Care Quality Commission's inspection of Adult Services and Ofsted's inspection of Children's Services highlighted the development of closer links between both services as examples of good practice.
- 9.2 There are now regular meetings between the two safeguards teams and more frequent sharing of information and concerns. There are plans for joint publications, training and research.
- 9.3 Both services are signed up to access the PROtect Database and also have representatives on each other's Boards.

## 10 PROtect Database

- 10.1 Essex County Council are not, for various legal reasons, able to keep information on alleged perpetrators of abuse. However, the Police are able to record this "soft" data. The database known as PROtect collates information gathered about particular people and incidents even where there has been no prosecution. This is the first example anywhere in the country of a local authority having such access to a database of this nature. Named officers within ECC will have access to information and be able to undertake searches on names that emerge in safeguarding investigations for both children and adults.

Inspector Nick Burston of Essex Police recently said:

*In the last twelve months the partnership between Essex Police has grown and developed significantly at strategic and operational levels. At the strategic level the Essex Police policy lead has worked closely with the Adult Safeguards Unit on a range of issues aimed at improving interagency working and the provision of services to people coming into contact with both agencies.*

*Following discussions with the Adult Safeguards team, Essex Police offered Essex Social care the ability to access this database for the purposes of safeguarding vulnerable adults and children. The offer was accepted by both adult and children's services and the Adult Safeguarding Unit has been taking this forward on behalf of their colleagues. An information sharing agreement is in the process of being drawn up and*

*once the nominated individuals have been vetted and trained, then the adult safeguarding team will have access to a range of critical information in order to assist them in the first stages of considering the risk to a vulnerable adult.*

*Both the Police and ECC have been actively working together around issues such as understanding vulnerability and the review of the SET guidelines. The work around vulnerability is important to both agencies to counter misunderstandings around our respective remits and understanding of terminology.*

*Essex Police staff have attended joint events with members of the Adult Safeguarding Unit and further events are planned for the next year, including mental capacity act and larger scale investigations.*

*At an operational level, the increasing maturity of both the ASU and the police Domestic Abuse and Hate Crime Units has led to improved communications and partnership working, the development of specialists within the police has assisted the Social Work Teams with improved case management and safeguarding. For the larger scale cases, the provision of single points of contact within the police has enabled a consistent approach to be taken for the duration of the case and has led to improved police investigations and an increased number of cases being dealt with effectively.*

*Over the next twelve months I anticipate this relationship will continue to improve and develop leading to further improvement in service delivery by both agencies*

## **11 Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS)**

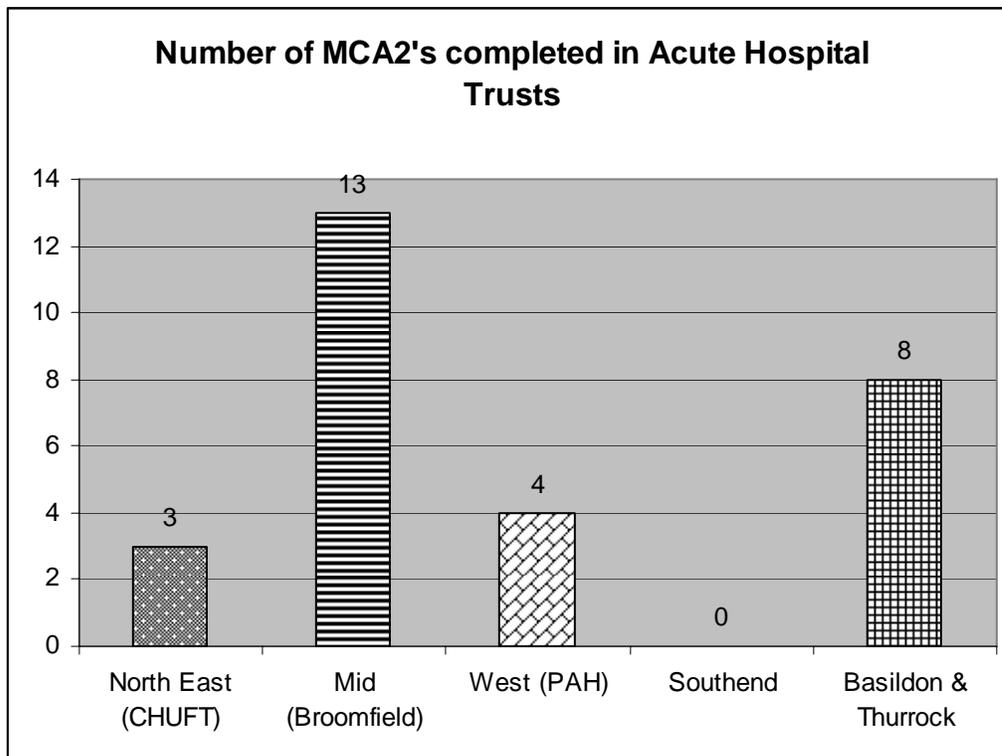
11.1 A detailed Annual Report (2009 – 2010) on MCA & DoLS was approved by Essex Safeguarding Adults Board in July 2010. This report summarised the activity in this domain across all agencies in Essex. In brief the report noted:

- differing patterns of engagement with the MCA across agencies – in particular the apparent poor activity in this domain by PCT's and Acute Trusts
- the low number of adults receiving an Independent Mental Capacity Advocate (IMCA) service
- the strong performance of Essex in implementing the Deprivation of Liberty Safeguards and the significant differences in use of the DoLS across Primary Care Trusts.

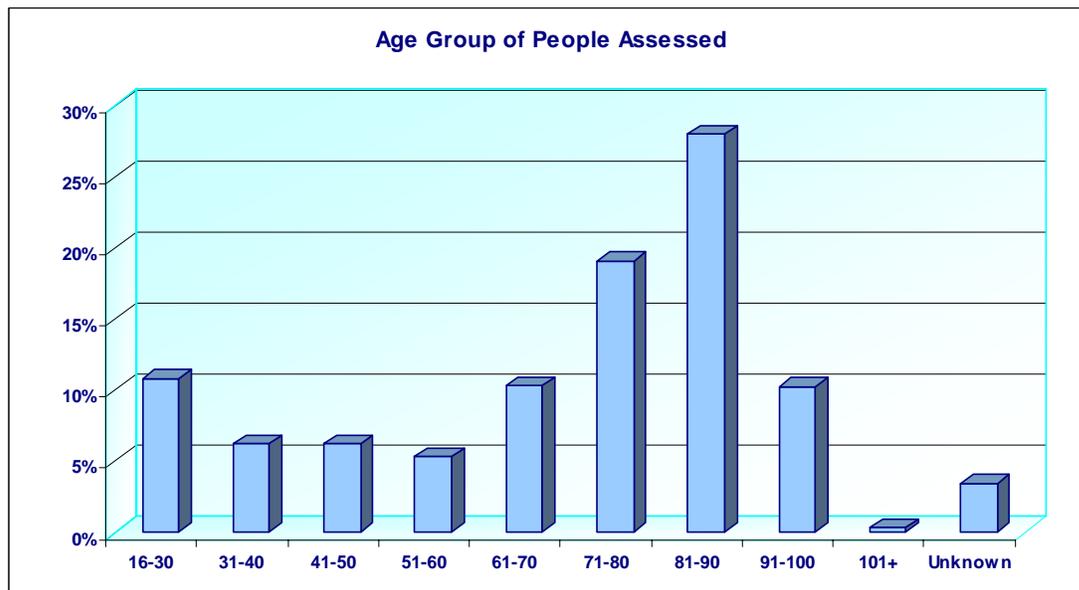
- the necessity for the Essex Safeguarding Adults Board to monitor activity and performance of all agencies with regard to the MCA and to support agencies in building action plans to ensure effective safeguarding of adults

11.2 Whilst the overall volume of MCA2 assessments completed has increased, the number of requests for an IMCA has not, with just 6% of all assessments, requesting for an IMCA compared with a figure of 20% of all MCA2 assessments resulting in the identified need for an IMCA during 2008-2009. Work is being done to try and understand why this may have happened and teams are being reminded about the role and purpose of the IMCA service.

11.3 Low numbers of MCA2 assessments are completed in respect of service users in Acute Hospitals, (just 28 assessments from all acute hospital trusts during 2009 – 2010). This is concerning and work is currently being undertaken with hospital social work teams and colleagues in PCTs and Acute hospital Trusts to improve performance in this domain.



11.4 The basis of most assessments is predominantly a change of accommodation (43%) and the majority of service users who receive an assessment of capacity are older adults.

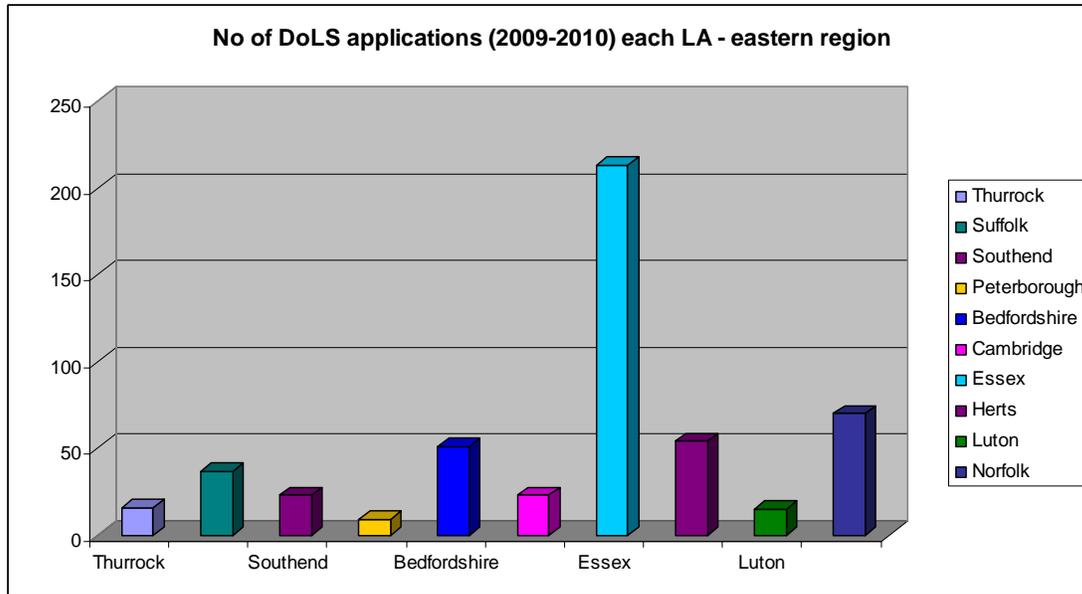


11.5 Whilst there are continuing challenges in implementing the MCA there have been some notable successes during the past financial year, these include:

- the successful revision of the MCA Policy and procedures,
- a successful bid to Department of Health for monies for research – Essex received £10,000.
- the increasing national profile of Essex in this domain – with Essex presenting its work in this domain at a variety of national conferences

11.6 In regards to DoLS Essex County Council has a dedicated team of four Best Interest Assessors managed through the Adult Safeguards Unit and supported by an administrator. This team additionally manages the list of approved doctors for DoLS. The Best Interest Assessors were successfully re-approved for 2010-2011 and provided training for more than forty DoLS approved doctors.

11.7 Essex has received significantly more applications than any other local authority. Meaningful comparisons are however difficult as each local authority is a different size and has differing population of care homes.



11.8 During 2009-2010, Essex County Council received 213 requests for authorisations of which 27% (57) authorisations have been granted. The majority of authorisations granted have been for 3 months or less. Where an authorisation is not granted other actions have often been taken, including referral to Quality and Monitoring, urgent reviews of service users and safeguarding referrals.

11.9 This high level of performance reflects positively on the volume of training conducted with care homes in Essex and on the variety of literature and tools developed for staff both within Essex County Council and in services commissioned by the County Council including information booklets and checklists.

11.10 The full annual report on implementation of the MCA and Deprivation of Liberty Safeguards can be obtained from the Adult Safeguards Unit or found on the intranet.

## 12 Adult Safeguards Unit Standards

12.1 The success of a service depends not only on the commitment and passion of its members but also on the standards that underpins practice. The Adult Safeguards Unit has developed a set of standards that are now incorporated into the revised *Safeguarding Vulnerable Adults Policy and Procedures*. We believe that these standards should underpin all aspects of the work of adult social care.

**Standard 1 - The safety and wellbeing** of the service user(s) is paramount.

**Standard 2** - Everyone has the right to be treated with **dignity and respect**. Anyone who raises a concern will be taken seriously, listened to and the concern will be acted on, or responded to, appropriately

**Standard 3** - All vulnerable adults involved in a safeguarding process have the right to be given timely **information** about choices in a non-threatening, clear and supportive way.

**Standard 4** - Everyone has a right to **privacy and confidentiality** except where there is a risk of serious harm to themselves or others. Information shared with others will only be shared with others on a need to know basis.

**Standard 5** - All vulnerable adults have the right to **support** in a safeguarding investigation through an advocate or representative of their choice.

**Standard 6 - Involvement and choice** - we will make every effort to include and involve the service user and/or their representative in all parts of the process and ensure that the choices they make are as informed as possible.

**Standard 7** - All vulnerable adults have a **right to safety and protection from harm**. We will actively involve the service user and/or their representative in planning to protect them from future harm and minimise potential risks in a manner which is their best interests.

## **13 Adult Safeguards Unit Procedures**

13.1 There are now two progress chasers based within the ASU whose job it is to log, distribute, track and monitor all safeguard concerns that are referred to ECC. A monthly analysis of the concerns and the locality team's actions and timescales for responding is sent to the relevant senior operational manager. The data can also be accessed by colleagues in partner agencies, such as Health. The work of the Progress Chasers means that the data recorded is collated in a more robust manner than in previous years and so offers a clearer overview of the process made in resolving safeguard investigations across the county.

13.2 People raising safeguarding concerns are now sent a letter acknowledging that their concern has been received and which team are dealing with it.

13.3 When a safeguard concern is completed the original referrer then receives a letter informing them of the action that has been taken.

13.4 *The Practitioners Guide to Safeguarding* has been comprehensively revised and reviewed and a new edition circulated to all teams.

## **14 Adult Safeguards Unit - Publicity, Research & Income Generation**

14.1 The Adult Safeguards Unit has produced a DVD entitled *Safeguarding Vulnerable Adults: Everyone's Responsibility* which has been widely distributed throughout the organisation and with partner agencies. The DVD involves representatives from the Police, Action on Elder Abuse, the Third Sector and the Essex Safeguarding Adults Board.

14.2 The Adult Safeguards Unit has begun the monthly production of a practice bulletin that goes out across Adult Social Care identifying practice issues that have been highlighted through recent safeguard cases. It also includes case studies and examples of risk management and the work of SAFE.

14.3 The Adult Safeguards Unit also has a quarterly edition in the *Putting Essex People First* newsletter which has a wider audience than the practice bulletin. This newsletter goes into more detail about safeguarding issues and seeks to promote a wider understanding across the organisation.

14.4 The Adult Safeguards Unit has piloted a series of three leaflets for service users. The first is aimed at helping vulnerable people understand how they might identify abusive situations. The second leaflet gives service users and their relatives information about what a safeguarding investigation will entail. The third leaflet aims at obtaining the views of the service user and/or their relatives on their experience of the safeguarding process. It has to be said that our success in obtaining service user views on their experience of the process has been minimal, which reflects the national trend. Work is being undertaken to see how we can gain more insight into the service user's experience can be obtained through other options.

14.5 The joint Adult Safeguards Unit and Essex Safeguarding Adults Board bookmark has been widely distributed in an attempt to promote both services within Essex County Council.

14.6 The Adult safeguards Unit has assisted with some research commissioned by the European Union on domestic violence and older women.

14.7 The Adult Safeguards Unit assisted in some research being undertaken by Sheffield University on behalf of a Canadian University on developing an assessment tool for social workers in relation to safeguarding.

14.8 The Adult safeguards Unit has now obtained a secure email address which enables partner agencies (e.g. Health, the Police and the Care Quality Commission) to send confidential and sensitive information in accordance with data protection rules.

14.9 There have been a number of request for the Adult safeguards Unit to undertake training for various organisations. Where ECC does not have people placed or is contracting a service a small charge has been made for the training (e.g. specialist providers, collages, universities etc.).

14.10 New contracts between the Adult Safeguards Unit (on behalf of ECC) and North Essex Primary Care Trust and West Essex Primary Care Trust has resulted in an income in excess of £50,000 in order for the Adult Safeguards Unit to undertake Deprivation of Liberty assessments on their behalf.

## **15 SAFE (Safeguarding Adults From Exploitation)**

15.1 The SAFE Project was established in early 2009 with the primary objective to locate and identify vulnerable adults in North East Essex who may not be currently known to statutory services, who were living in homes of multiple occupancy (HMOs) and in receipt of unregistered care. During the initial phase of the project it also became clear that there was an urgent need for a rapid response to a number of large scale institutional safeguard alerts involving the highest levels of complexity. The SAFE Team became directly involved in a number of institutional safeguards in the North East and responded to a request from West Essex when ECC contracts were withdrawn from a nursing home in that locality.

15.2 The following statistics outline some of the work of the Team to date:

15.2a Identifying and supporting vulnerable adults:

- 58 HMOs in Tendring and 105 in Colchester have been identified
- 61 potential service users have been identified in Tendring, 29 of whom are living in a hotel in Clacton
- 24 service users have been supported by SAFE
- Others were offered support but chose to decline the support.

15.2b Institutional and Individual Safeguards:

- Direct involvement with locality teams on 15 institutional safeguarding concerns
- 51 cases of individual safeguarding incidents investigated

- 75 SETSAF1 raised for further investigation
- 17 service users referred for internal audit investigations where financial abuse was suspected
- 53 service users relocated to new placements

#### 15.2c Improving Practice

- 105 assessments undertaken on vulnerable service users
- 102 reviews completed on service users in residential care and “forgotten” people
- 37 referrals to Essex Guardians
- 34 referrals to Advocates
- 18 referrals to Community Mental Health Teams
- 65 referrals to the Community Matron for nursing needs assessments
- 5 referrals to Telecare supporting choice and independence

15.3 Following the publication of the Project’s evaluation report in March 2010 it became clear that the issues SAFE had been dealing with were not confined to the North of the County. A recommendation was put forward to Senior Management to expand the remit of the SAFE Team across Essex and make it a “business as usual” team. This recommendation was agreed. The SAFE Team has now been established as a dedicated county-wide resource, under the umbrella of the Adults Safeguards Unit, to respond to and manage (in conjunction with Locality Teams) large scale institutional safeguarding concerns; and to continue the work with homes of multiple occupancy on a countywide basis.

15.4 In the mini report proposed for April 2011 we will be able to give an update on the county-wide progress of the SAFE service.

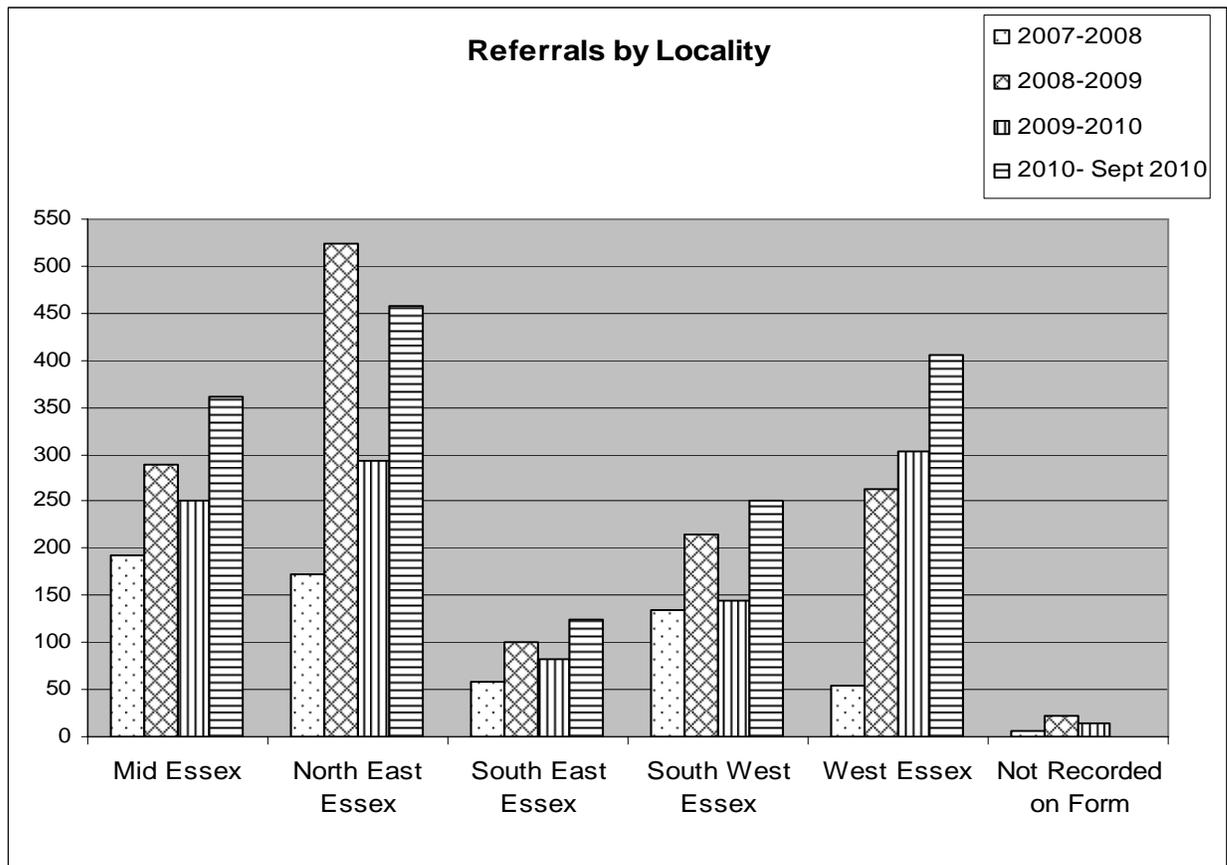
## PART 2: STATISTICS

In last year's annual report the statistics that were provided highlighted some discrepancies and inconsistencies that were purely as a consequence of poor data collection. The Progress Chasers in the Adult safeguards Unit have worked hard at ensuring the data collected is accurate and reported appropriately and in a meaningful manner. Through a process of data cleansing a lot of information previously recorded for instance as "not recorded" or "other" has been addressed and altered accordingly. The tables below aim to make the data more accessible and easily understood at a glance and we have set out to give as much comparative data as possible to put previous years both into context and to enable people to make comparisons.

The Progress Chasers role has been developed within the Adult Safeguards Unit to ensure that recording errors are picked up and corrected and that the information is in the right place, thus giving us more meaningful analysis.

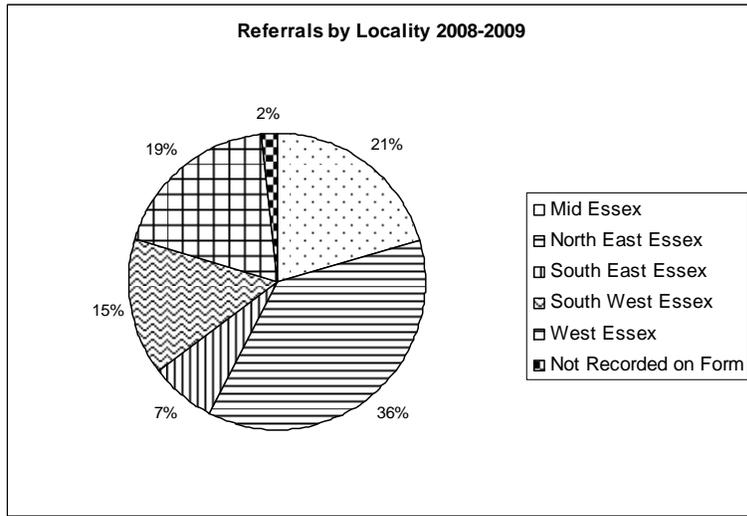
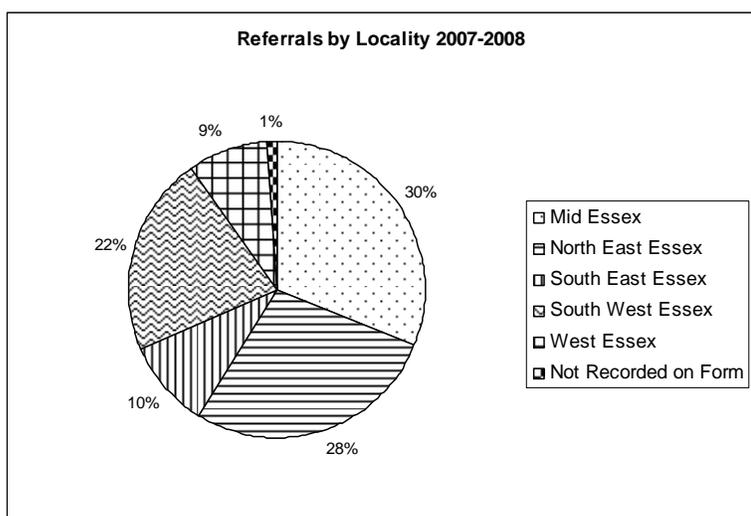
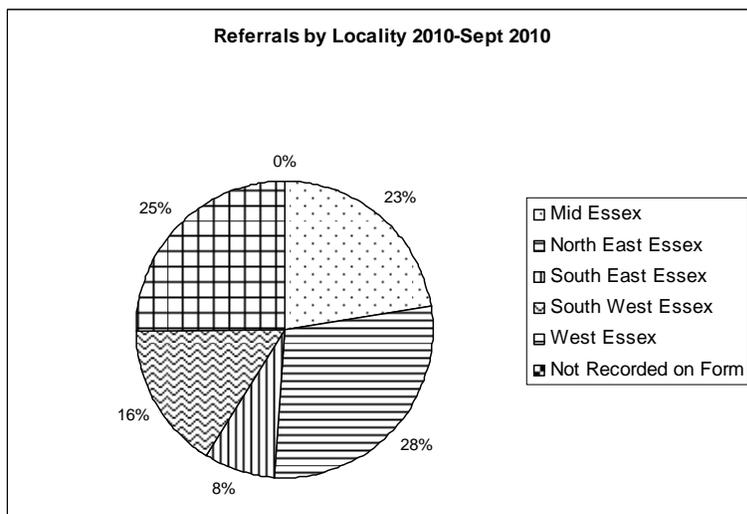
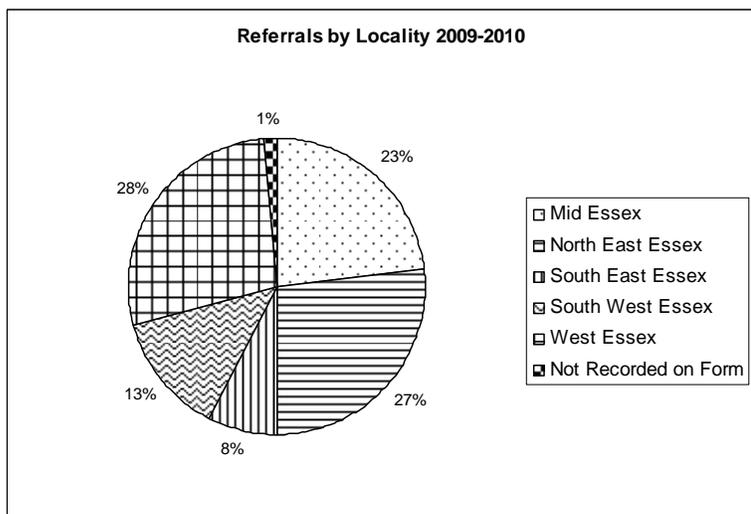
The figures for the current financial year (April-September 2010) represent the huge increase in safeguarding concerns that have been raised which does not necessarily mean Essex is dangerous place to live but that people are more aware of the need to secure the safety and wellbeing of vulnerable adults.

### A. Referrals by locality

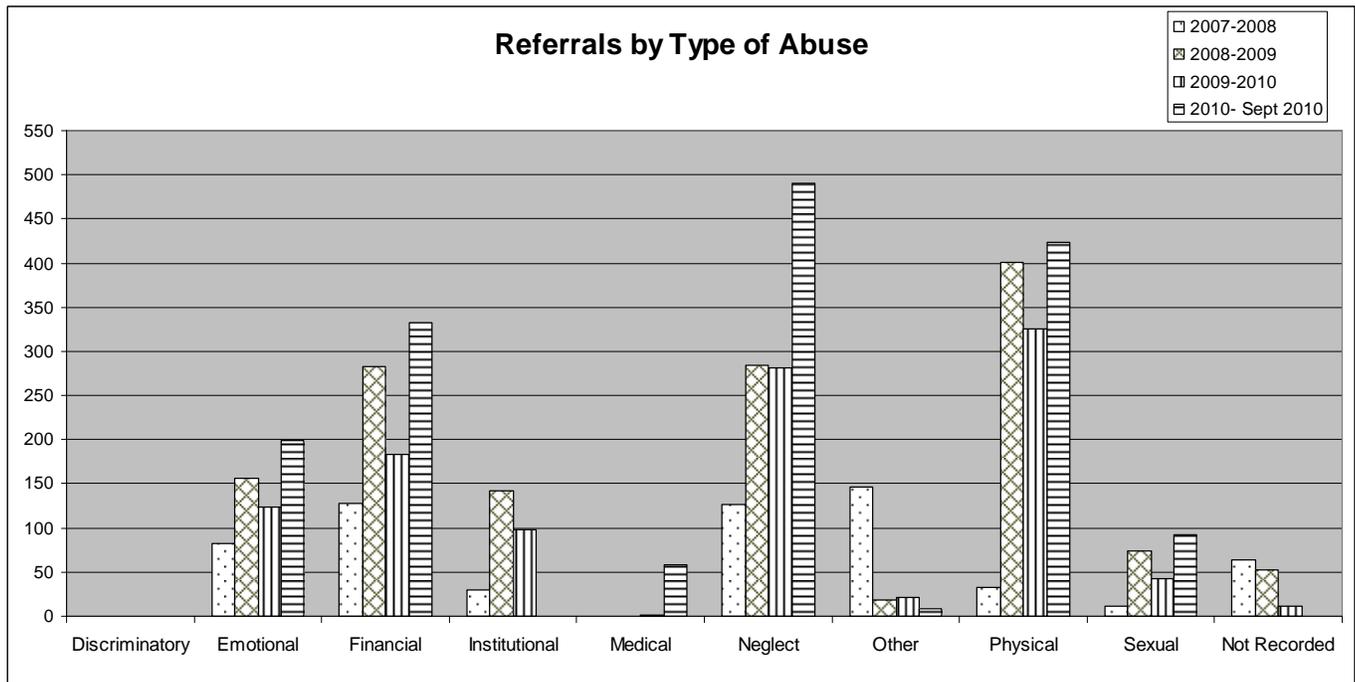


Locality	2007-2008	2008-2009	2009-2010	April- Sept 2010
Mid Essex	193	290	251	362
North East Essex	173	523	294	458
South East Essex	59	100	83	125
South West Essex	135	214	145	251
West Essex	54	263	303	406
Not Recorded on Form	7	22	14	0
<b>Total</b>	<b>621</b>	<b>1412</b>	<b>1090</b>	<b>1602</b>

The North East of the county has traditionally always been the locality with the highest number of safeguarding alerts because of the number of residential homes in that area. With the data cleansing exercise we have been able to make the figures a more accurate reflection of what is going on in that area.



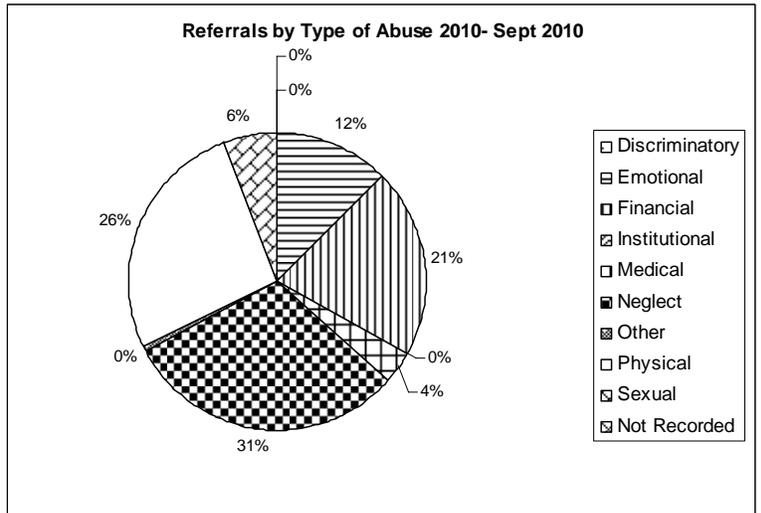
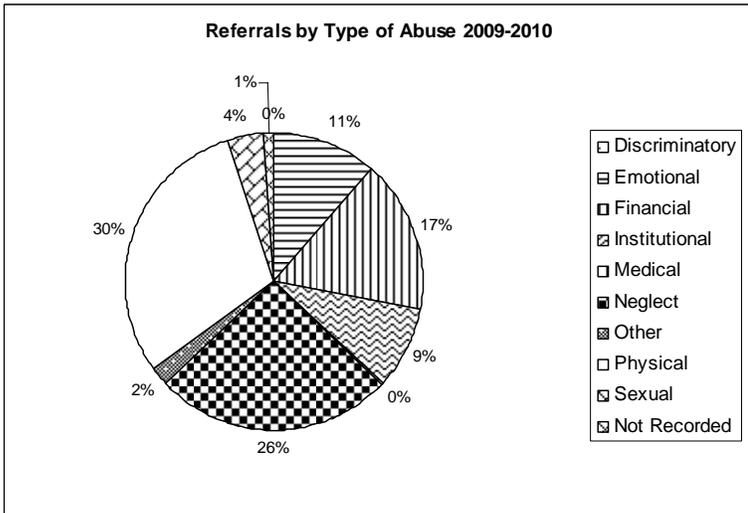
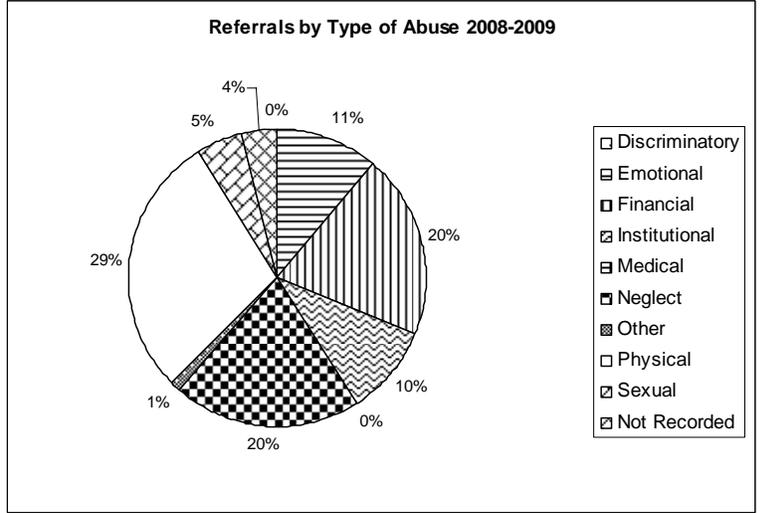
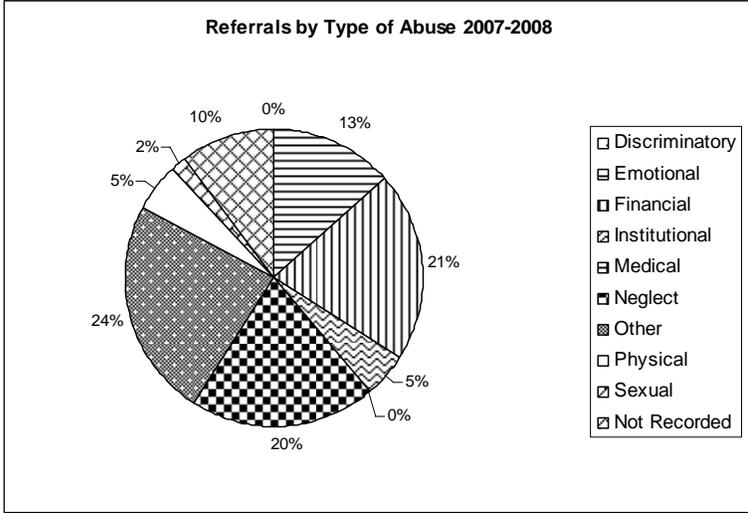
## B. Referrals by type of abuse



Due to work done with locality teams there is now a better understanding of what each abuse type covers. People have a better understanding of what institutional abuse is rather than raise a safeguards concern when the matter is actually a complaint or issue around poor care practice. It would seem that the trend in Essex for neglect, physical abuse and financial abuse to be the most frequent reported issues is representative of the trends found across the Eastern Region. All safeguards concerns that are currently raised all have a type of abuse, unlike previous years where there has been a high number of “not recorded” types.

Type of Abuse	2007-2008	2008-2009	2009-2010	April-Sept 2010
<b>Discriminatory</b>	0	0	0	0
<b>Emotional</b>	83	157	123	199
<b>Financial</b>	128	283	183	332
<b>Institutional</b>	30	142	98	0
<b>Medical</b>	0	0	1	58
<b>Neglect</b>	127	284	282	490
<b>Other<sup>2</sup></b>	146	18	22	8
<b>Physical</b>	32	401	326	423
<b>Sexual</b>	11	74	43	92
<b>Not Recorded</b>	64	53	12	0
<b>Total</b>	<b>621</b>	<b>1412</b>	<b>1090</b>	<b>1602</b>

<sup>2</sup> These are usually cases of self neglect which are not recognised abuse types nor do they fall within the SET Guidelines.

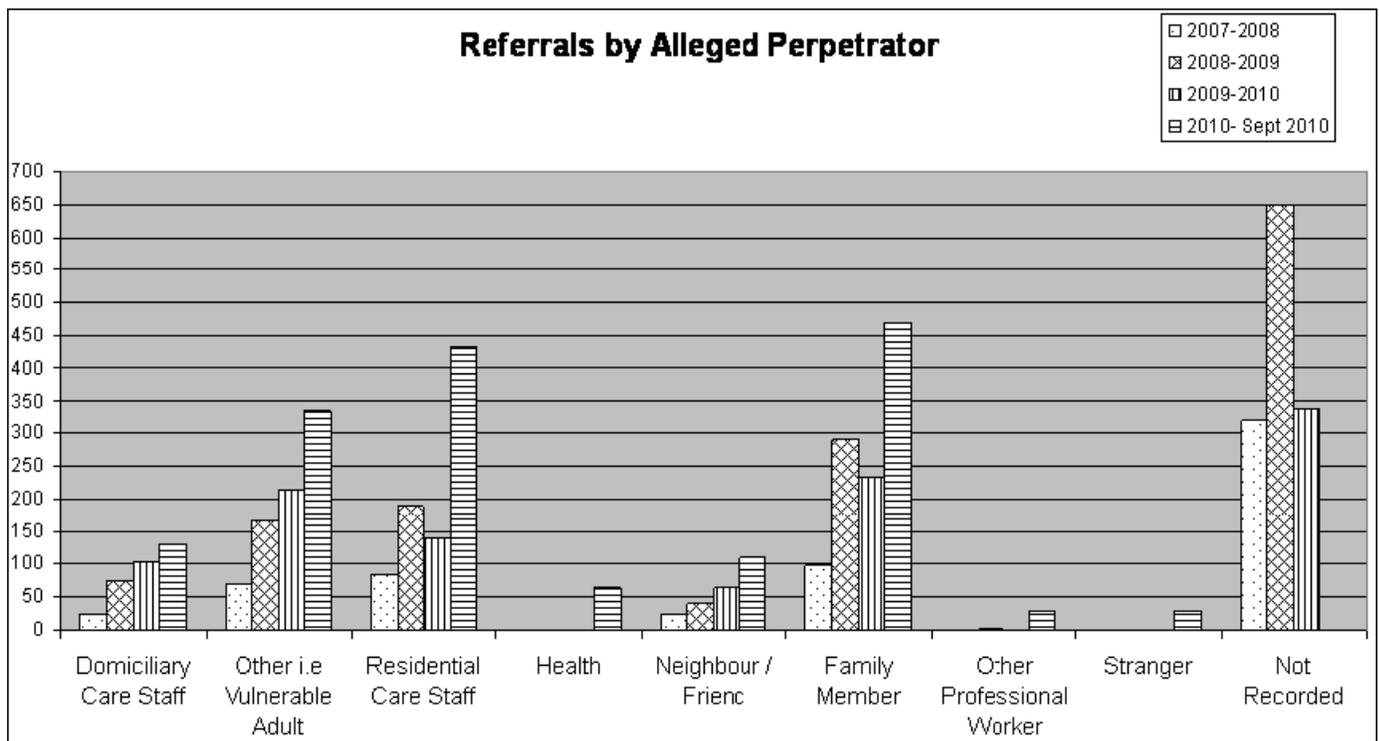


### C. Referrals by Relationship of Perpetrator

The increase in the numbers of alleged perpetrators being family members appears to reflect the trend across the Eastern Region. There has been an increase in the alleged perpetrator not being known or named when the safeguarding concern is raised which reflects the fact that people report incidents of abuse rather than set out to name the alleged perpetrator, this is then clarified during the investigation stage. There is an

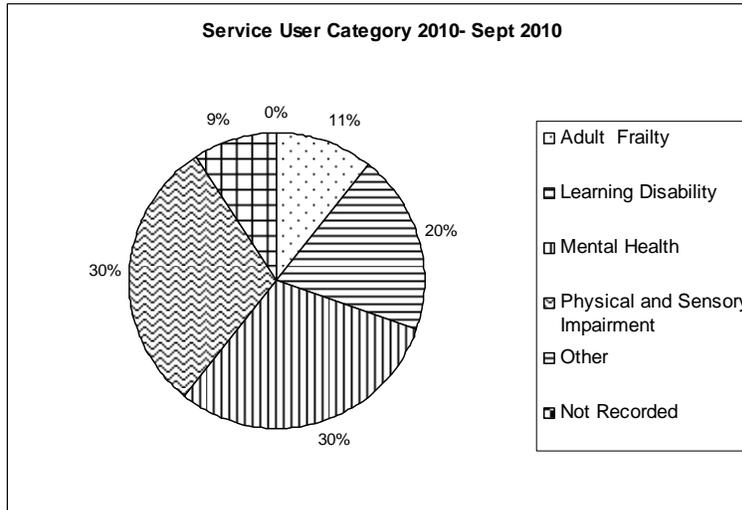
increase in strangers being recorded as perpetrators and this increase is a subject for more enquiries by the ASU.

<b>Relationship of Alleged Perpetrator</b>	<b>2007-2008</b>	<b>2008-2009</b>	<b>2009-2010</b>	<b>2010- Sept 2010</b>
<b>Domiciliary Care Staff</b>	24	74	103	129
<b>Other i.e vulnerable adult</b>	70	165	213	335
<b>Residential Care Staff</b>	85	190	139	433
<b>Health</b>	0	0	0	66
<b>Neighbour / Friend</b>	23	40	64	111
<b>Family Member</b>	99	291	234	468
<b>Other Professional Worker</b>	0	2	0	30
<b>Stranger</b>	0	0	0	30
<b>Not Recorded</b>	320	650	337	0
<b>Total</b>	<b>621</b>	<b>1412</b>	<b>1090</b>	<b>1602</b>



#### D. Referrals by Category of Service User

The data cleansing exercise has resulted in us being able to allocate a service user category to all the safeguarding concerns that were raised in 2009-10. The Progress Chasers are also now in a position to ensure that all safeguarding concerns that are raised give a service user category.



Service User Group	2007-2008	2009-2010	April - Sept 2010
Adult Frailty	374	239	169
Learning Disability	184	166	317
Mental Health	16	49	488
Physical and Sensory Impairment	31	30	482
Other	4	10	146
Not Recorded	12	918	0
<b>Total</b>	<b>621</b>	<b>1412</b>	<b>1602</b>

#### E. Referrals by Ethnicity of Service User

Engaging the ethnicity minority population of Essex in safeguarding has been difficult and work is ongoing at developing a relationship between the Adult Safeguarding Unit and the ethnic minority population. The figures for the first six months of this financial year are beginning to indicate an increase in the number of safeguarding concerns being raised by, and about, the ethnic minority population of Essex.

<b>Ethnicity</b>	<b>2007-2008</b>	<b>2008-2009</b>	<b>2009-2010</b>	<b>April - Sept 2010</b>
<b>Any other Black background</b>	4	7	1	7
<b>Any other Ethnic Group</b>	31	16	0	7
<b>Any other Mixed Background</b>	1	4	0	4
<b>Any other White Background</b>	10	20	14	15
<b>Chinese</b>	3	1	0	1
<b>Information not yet obtained<sup>3</sup></b>	64	179	87	31
<b>White and Asian</b>	4	17	6	5
<b>White British</b>	502	1155	975	1527
<b>White Irish</b>	2	13	7	5
<b>Total</b>	<b>621</b>	<b>1412</b>	<b>1090</b>	<b>1602</b>

#### **F. Referrals by Outcomes (from April 2010 only)**

There are a large number of inappropriate safeguarding concerns being raised (an issue which is being addressed by the Adult safeguards Unit by the development of the screening social worker post) and which are being closed by the teams but the outcomes of these cases is not being reported in a timely manner and would appear to be ongoing – this is an issue that the Adult Safeguards Unit is aware and work is being done to see if there is any assistance that can be offered to the locality teams by the Adult safeguards Unit.

<b>Outcome</b>	<b>Apr- Sept 2010</b>
<b>Case Management Resolution</b>	160
<b>Substantiated</b>	84
<b>Un Substantiated</b>	117
<b>Partly Substantiated</b>	45
<b>Redirect to other Agency</b>	27
<b>Unresolved</b>	111
<b>Cases still Ongoing</b>	1058
<b>Total</b>	<b>1602</b>

<sup>3</sup> At times it has not been able to identify someone's ethnicity due to capacity issues and we encourage staff not to guess at people's ethnic origins.

## Appendix 1 - Adult Safeguards Action Plan 2010-2012

Issues	Actions	Outcome
1. To review and evaluate the Adult safeguards Unit.	To undertake a full service review.	To ensure that the service being delivered is in line with the needs of the organisation and is providing best value.
2. To develop closer links with Children's Safeguarding Service.	To look at more joint working on cases, joint training, joint publications. To look at how young people in transition are supported by both services.	For the ASU and Children's Safeguarding Service to work more co-terminously in supporting children, young people and adults in safeguarding matters..
3. To develop the use of advocacy in the safeguarding process.	To encourage the active involvement and participation of advocacy within the safeguarding process. To work with advocacy organisations to ensure they understand the SET Guidelines and process. To promote advocacy with the locality teams and others.	To ensure that advocacy is used at all stages of the safeguarding process and is a service which meets the needs of all individuals and communities. To make sure that the safeguarding process is as open and transparent at all stages as possible.
4. To continue to develop information that ensures all citizens are provided with accessible information to empower them to keep safe and raise a safeguarding concern.	The ASU should be proactive in preventing abuse and this should be done through information and presentations to those most at risk.	To ensure people know about abuse and how to protect themselves.
5. To develop ways of receiving feedback from people who have been subject to the safeguarding process.	In order to develop and improve the ASU there is a need to find out how people have experienced the safeguarding process and what may	To receive comments that help develop and improve both the ASU and the safeguarding process.

	have prevented them from accessing the service.	
6. To review the way partner agencies are communicated with regarding the outcomes of safeguarding investigations.	To look at the existing processes and develop ways of ensuring all relevant parties involved in the safeguarding process are informed of the outcomes of safeguarding investigations.	To ensure all parties are aware of relevant actions that result from a safeguarding investigation and understand both the outcomes and any actions specific to them.
7. To engage minority communities in accessing the safeguarding process.	To identify appropriate groups/organisations to discuss why they may not be accessing the safeguarding process and identify ways of making them feel more confident in raising safeguarding concerns.	To give minority communities, such as the older lesbian, gay, bisexual and transgendered or Black and Minority Ethnic groups, the confidence to access services which recognise their particular needs.
8. To continue to work with residential and nursing home providers on the Deprivation of Liberty Safeguards (DoLs).	To promote the training and support available for providers on DoLs from within the ASU. To help Health colleagues develop their approach to DoLs	To ensure that DoLs is known and understood by all parties and used appropriately to protect vulnerable service users.
9. To continue to engage Mental Health services in understanding the safeguarding process.	To look at the support offered to the mental health services (e.g. training) and undertake research with them about how safeguards are dealt with by their service.	To ensure that Mental Health services are appropriately accessing the safeguarding process..
10. To help engage GPs in understanding the safeguarding process and their role within it.	To expand the safeguarding awareness training sessions to GPs and their surgeries.	With changes in Health it is important for the GPs to be more engaged in the safeguarding process.
11. To ensure that safeguarding is an inherent consideration in the development of the personalisation agenda.	To make sure that safeguarding is included in all relevant personalisation policies and training. For the ASU to continue working with various local	To make sure that vulnerable people on self directed support are as protected from abuse as possible.

	and national groups on safeguarding vulnerable people who access Self Directed Support.	
12. To continue to develop the income generation aspect of the ASU	To meet this by working with PCT colleagues in developing a BIA service which PCT's can commission.	To maximise income generation prospects in order to contribute to the overall savings required of the organisation.

## Appendix 2 - Adult Safeguards Action Plan 2009-2010

Issues	Actions	Update	Outcome
a. To ensure accuracy of relevant data in regards to safeguarding in order to help plan services.	To develop a process for the tracking of all safeguard alerts received by ECC, to address recording inconsistencies, reduce SWIFT errors and be able to produce meaningful data.	2 Progress Chasers in post enabling a reliable monitoring and tracking system that provides meaningful data for both ECC and our partner agencies.	achieved
b. To ensure that safeguarding is an inherent consideration in the development of the personalisation agenda.	To make sure that safeguarding is included in all relevant personalisation policies and training.	ECC has joined a group of London boroughs looking at wider safeguards issues for those on self directed support. ECC's self directed support policy raises issue about safeguarding and the ASU has provided guidance for the support group for people on self directed support.	progress made and work ongoing
c. To look at the apparent increase in institutional alerts and make sure they are appropriate and relevant.	To clarify the process for institutional alerts to ensure that they are appropriate safeguard concerns or if they are contract issues or complaints they are dealt with through appropriate channels. To review the embargo policy in consultation with partner agencies.	Safe Project turned into a mainstream service under the umbrella of the ASU. SAFE's brief is to be involved in large institutional investigations and support the locality teams. The Embargo Policy has been reviewed and revised and is now a multi-agency (including the independent providers) Inspection and Suspension Protocol.	achieved
d. To further develop the Adult Safeguards Unit in order that it meets the needs of its customers and ensures a quality	To look at the structure of, and clarify the remit of, the Unit and to begin consulting with those service users/relatives who have been part of the safeguarding process to	The ASU launched a series of leaflets giving people more information about safeguarding and what to expect during an investigation. This included a service user's feedback form in order for us to	progress made and work ongoing

service for those who have been subject to abuse.	evaluate their experience.	gauge the service user's experience but unfortunately there was no meaningful information returned so alternative ways of obtaining that information is being sought.	
e. To continue to work with the Police and promote their involvement in the safeguarding process.	To encourage and expand the involvement of the Police at an early stage in investigations by locality teams who seem reluctant to involve the Police even when the matter is obviously a crime. To work with the Police is gaining access to their new safeguarding information database.	The ASU in partnership with Children's Services have signed up to the Police's Protect database.	achieved
f. To try and engage GPs in the safeguarding process.	To expand the safeguarding awareness training sessions to GPs and their surgeries and help them understand their role within the safeguarding process.	GPs are starting to become more involved in safeguarding cases and where they have been unable to help or attend then they have arranged for their Practice Managers or Community Nurses to attend. The successful and popular close down day in the west of the county for GPs is to be run again and the ASU has been asked to assist.	progress made and work ongoing
g. To further develop the relationship with colleagues in the PCTs.	To work closer with the Primary Care Trusts and their leads on safeguarding to ensure that parallel systems are not being developed which are at odds with each other.	Most of the PCTs now have safeguards leads and attend a variety of meetings in regards to issues such as the Suspension Protocol, the SET guidelines etc. The ASU has been involved in the recruitment of some of these leads.	achieved
h. To develop information sharing	To work to the Essex Charter's aims and principles and ensure	The Essex Charter has now been signed up to by all agencies. The ASU now has	achieved

between all agencies.	that the safety of service users is not compromised by the lack of information sharing.	a secure email address for the sharing of sensitive and confidential information.	
i. To engage Mental Health services more in seeking to understand why there seems to be a disproportionate number of referrals from this service in regards to safeguarding.	To look at the support offered to the mental health services (e.g. training) and undertake research with them about how safeguards are dealt with by their service.	There has been a closer working relationship with the Mental Health teams with the ASU providing guidance, help and information.	progress made and work ongoing
j. To continue to promote good practice through the Mental Capacity Act assessments.	To continue the quality checking of MCA forms and giving feedback to workers. To undertake a second round of refresher training on the Act this uses people's experiences as the basis for discussion and learning.	New round of training began for new staff (in both ECC, the private sector and voluntary agencies) in December 2009, unfortunately take up was poor and the ASU is evaluating how to run these sessions again later in the 2010. However, the e:learning has been very successful and requiring the ASU to purchase more licenses.	achieved
k. To continue to work with residential and nursing home providers on the Deprivation of Liberty.	To promote the training available for providers on DoL and to incorporate DoL into the Mental Capacity refresher training thus using experience to inform practice and develop guidelines.	The level of DoL applications in Essex is high but the granting of DoLs is low. This is, we believe, due to the level of training and communication between the ASU and the providers. New promotional information about DoLs was distributed to homes in June 2009.	progress made and work ongoing
l. To widen the understanding of the need for risk assessments and risk	To review the current guidelines (in the SET guidelines) and develop an approach that will be used by practitioners and which will be	The SET guidelines have been reviewed and are currently out for consultation. A Risk Enablement Board has been set up for cases where there is a high risk to	achieved

management plans as part of the safeguarding process.	used as part of the reduction of risk for the service user.	either the organisation or the individual. Local Risk Enablement Boards are now in place. Risk guidance documentation has been revised.	
m. To contribute to the review of the SET Guidelines and SET forms.	To look at using the experience of the Adult Safeguards Unit to respond to the SET review and be represented on the SET review group.	All senior consultant practitioners have assisted in the SET guidelines review, which are currently out for consultation.	achieved
n. To prepare for the 2010 Care Quality Commission review of safeguarding in Essex.	To make sure that all systems etc that are in place contribute to an efficient service and where necessary make appropriate alterations.	The CQC inspection has occurred and the outcome received. The findings of the inspection will be incorporated into the 2010-11 action plan.	achieved
o. To continue to develop the culture of learning on safeguarding throughout the whole system and whole organisation.	To share good practice through communication (e.g. newsletters, practice learning sets, reflective practice sessions and locality safeguarding boards).	The ASU produces a quarterly newsletter as a supplement to the Putting People First newsletter which covers topics in detail. The ASU produces a monthly practice bulletin for social work teams that highlights emerging practice issues and update people on the SAFE project and risk issues.	achieved
p. To promote the Essex Safeguarding Adults model at a regional and national level.	To have Essex represented at conferences, workshops and through publications.	The ASU have been involved in workshops run by Ripfa (Research in practice for adults) at the ADASS National Conference 2009 and at the Community Care national safeguarding conference in November 2009 and been a contributor to Ripfa's handbook <i>Safety Matters</i> . Essex has also joined a group of local	achieved

		<p>authorities organised by Ripfa looking at developing standards within safeguarding. The ASU is also represented at the regular Eastern Region Safeguards Leads meetings.</p> <p>Essex has been invited to join a working group of several local authorities by Ripfa to look at the development of quality standards in safeguarding.</p> <p>The ASU has also assisted in some international research (i.e. on a Canadian tool for assessment in safeguarding and a European Union commissioned survey on domestic abuse of older women)</p>	
<p>q. To continue to engage with the 3<sup>rd</sup> Sector in regards to safeguarding and encourage wider use of advocacy in the process by practitioners.</p>	<p>To work with the appropriate groups/organisations at developing the training available to them, using them more widely in the safeguarding process and working with them at promoting their services within the organisation generally.</p>	<p>The ASU has been active in providing training and awareness raising for various Third Sector groups (such as ILA Essex) as well as the WRVS Meals Service drivers.</p> <p>Representatives from the Third Sector were involved in the recent recruitment of ASU staff.</p>	<p>achieved</p>