

1. Aim

- 1.1 To provide DG/CMT/Audit Committee with assurance in relation to the Strategic Risk Register in respect of adult safeguarding (4b).

2. Summary

Safeguarding is a key priority and statutory duty within the Care Act for the local authority. Whilst there are no statutory timeframes for carrying out safeguarding enquiries under s42 (1) (2) of the Care Act 2014, the council has set local time standards which are working well and monitored closely by operational and senior management.

The nature and complexity of adult safeguarding in the Borough remains a key challenge within Adult social care and across the safeguarding partnership. Over the more recent years we have seen the picture of safeguarding changing in terms of prevalence and complexity.

We have seen the increase of domestic abuse, adult exploitation, adult self-neglect and modern slavery in the Borough, in addition to more often referenced physical, sexual and psychological abuse.

It is positive that citizens and professionals are identifying and reporting suspected or known harm and abuse, however this places additional demand upon the Local Authority who have a statutory duty within the Care Act 2014 to undertake safeguarding enquiries.

The safeguarding referrals for 22/23 saw an increase of 16% on the previous year (but nearly a 50% increase since 2020).

Furthermore, our most recent adult social care survey reported over 90% of people who responded stated that they feel safe. This puts the council in the top quartile nationally.

3. Report detail

- 3.1 The Safeguarding Adults Return 2022/23 offers comparison on the previous year. This data reports a 'story' however does not demonstrate all of the other work in the broader context of adult safeguarding that ASC undertake outside of the safeguarding concerns or s42 enquiry process.
- The number of safeguarding concerns received in 2022/23 was **16%** higher than the previous year.
 - The number of safeguarding enquiries commenced and/or completed during the year has also increased (by **6%**); however the overall S42 conversion rate has decreased by **2%** to **25.6%**
 - Neglect, psychological abuse and physical abuse remain the top 3 abuse types
 - Own home, nursing care, residential care remain the top 3 locations of abuse. There's been a **50%** increase in safeguarding concerns raised re nursing homes (offset by a **37%** reduction in concerns taking place in residential homes)
 - Of the people deemed to lack capacity, **90%** were supported by an advocate or family member – down from 93% in 2021/22.
 - The % of Making Safeguarding Personal (MSP) outcomes which were fully achieved has remained stable at **59%**.

- **92%** of people following a safeguarding enquiry had their outcomes met either partially or fully.

3.2 Strategic Risk Register February 2023

| Risk | Risk Description | Lead Directorate | Updated "current" score | Previous "current" score | Trend |
|------|--|------------------|-------------------------|--------------------------|-------|
| 4b | <p>The risk of being unable to maintain service standards to support the most vulnerable in the Borough continues to provide some challenge at this time due to increased demand on adult social care.</p> <p>Safeguarding demand continues to be prioritised and referrals screened and progressed to a safeguarding enquiry where appropriate. There is currently a 2 week backlog</p> <p>Immediate risk management plans are put into place where possible, with the aim to reduce risk and immediate visits scheduled where the risk is to be considered high or further information is needed to be obtained to ensure the welfare of the citizen.</p> <p>Whilst the numbers of safeguarding referrals remain in line with 2021, the complexity of situations is apparent. There is an increase of referrals relating to self-neglect and domestic abuse and these are areas of focus and key priority for the safeguarding partnership.</p> <p>ASC continue to work within the statutory duties outlined in the Care Act 2014, and other legislative frameworks including the Mental Capacity Act, Mental Health Act and Human Rights Act.</p> | ASC | 9 | 16 | ↓ |

3.3 Directorate Risk Register

Over the last few months, a considerable amount of work has been undertaken in the area of safeguarding.

The directorate risk register (August 23) demonstrates positive action has been taken to reduce the risk from red to amber.

We believe with action that has taken place and pending actions (detailed below) this position is sustainable.

Therefore, the Directorate Management Team in ASC have reviewed the directorate risk register which now requires the strategic risk register to be updated.

| Risk | Risk Description | | Updated "current" score June 23 | Previous "current" score March 23 | Trend |
|----------|--|--|--|--|-------|
| Adult SG | <p>Safeguarding adults with care and support needs from abuse and neglect is the local authorities' statutory duty as defined in the Care Act 2014.</p> <p>The risk associated with this duty it that as a directorate the demands and capacity fluctuates therefore can pose a challenge to the service and the timeliness of and manage safeguarding concerns effectively.</p> <p>This could result in abuse and neglect not being addressed in a timely way and the council being held accountable for lack of action.</p> <p>There has been an increase in referrals and the complexity of situations remains evident.</p> | | 8 | 9 | ↓ |

3.4 Existing Controls and action taken to reduce risk

Safeguarding referrals are prioritised and screened and progressed to a safeguarding enquiry where appropriate. The IROs that moved to CXC has freed up staff within the adult social care Access Team to focus solely on safeguarding referrals.

The new dedicated safeguarding team along with the additional three IROs ensures that all referrals are screened and immediately risk assessed and managed on the same day of referral. EDT have access to the safeguarding concerns inbox for monitoring and responding during out of hours.

A new safeguarding adults lead post has been recruited to and the new member of staff will start in December 2023. This will provide additional capacity at an operational and strategic level and will further strengthen the department's quality audit function and workforce development and training.

A staff tracker is in place to monitor staffing capacity within teams, and staff and managers work across the directorate to cover unplanned absence to avoid impacting on service delivery, in particular, the safeguarding service.

Business Continuity and emergency response plans in place whereby the department will deploy staff from other service areas / teams to support the safeguarding function at any time there is a shortage of staff that risks impact on service delivery, in particular , timely assessment of risk in the context of safeguarding referrals into the Access Safeguarding Team.

Operational and senior management meetings take place weekly to review safeguarding activity across the directorate in line with the department's developing QAF, and general risk management. Perform Plus management methodology is used to ensure safeguarding concerns and enquiries are recorded and reported at all levels, and the impact evidences a significant reduction in delays and enquiries beyond 70 days. The data is reported from Mosaic (client record management system) within a dashboard operated by PowerBi. This is live information and enables managers to continuously monitor activity and manage resources according to demand and urgency.

Safeguarding concerns in relation to self-neglect and domestic abuse have increased in the past two years in line with national trends. ASC as part of the wider Safeguarding Adults Partnership in Walsall have developed a new framework for preventing and responding to incidents of self-neglect and is in the process of reviewing the local MARAC to improve outcomes for adults with care and support needs at risk of domestic abuse.

A multi-agency self -neglect and hoarding panel has been established and chaired by the operational safeguarding team manager. Social workers and allied professionals can refer people to the panel for professional advice and as part of a risk enablement, to agree actions that support people to remain as independent as possible.

The department's safeguarding adults' function is supported by the West Midlands Safeguarding Policy and Procedures. Walsall Council has its own Corporate Safeguarding Policy, and the department has locally developed guidance for staff.

A Safeguarding Quality Audit system is in place which includes auditing of both referrals/ concerns and safeguarding enquiries conducted under s42 of the Care Act 2014. Audit reports are produced quarterly and evidence that staff have good legal literacy and that more than 90% of people subject to safeguarding enquiries achieved their desired outcomes in 2021/22 and 2022/23 – this is reported in the national Safeguarding Adult Collection data (SAC)

An independent case file audit on 100 people who used adult services in 2022/23 achieved an assurance rating of GOOD (green) including evidence of good safeguarding practice and strength based, person centred approaches in the majority of cases.

The Walsall Safeguarding Partnership has restructured and this has been beneficial for adult safeguarding, with stronger links to the wider network and a dedicated board overseen by an Independent Chair.

Multi-agency audits are undertaken quarterly and include areas such as domestic abuse, self-neglect, transitions and fire risk and safety.

A safeguarding sub-group of the Adult Safeguarding Board provides governance for the audit process and the learning from audit findings.

Audit findings and action plans are reported into the Walsall Safeguarding Executive Board made up of the Executive Director for ASC, Senior Police Officer/Commissioner and CEO of the Black Country ICB

Within ASC, audit findings and plans are reported to the Senior Management Operational Meetings and the Quality and Safety Committee.

The Walsall Safeguarding Partnership provide safeguarding training for the health and care sector, a recent audit evidences good compliance against a number of key performance standards, with plans in place to address identified gaps

ASC Staff receive mandatory safeguarding training at an appropriate level for their role and function. A tracker has been developed to monitor training activity and compliance within ASC.

The Principal Social Worker holds a bi-monthly Practice Leads Forum with managers and senior practitioners where safeguarding adults is a standard agenda item.

Staff supervision has been strengthened and compliance is reported on a tracking system , with good level of management oversight as reported at weekly perform plus meetings. The department will be carrying out a quality audit in the future.

3.5 Further mitigation and action planned

A CQC Peer Review took place on the 12 and 13 September and included a review of the Council's safeguarding arrangements and practice. A pre-review Self- Assessment has been completed and along with the review findings, an action plan will be developed and overseen by the ASC Continuous Improvement Programme (CIP)

On-going support is being provided to CAM by ASC, demand activity is regularly audited and plans in place to manage safeguarding activity.

ASC are conducting an options appraisal for further strengthen its front door safeguarding function with the possibility of developing a Multi-Agency Safeguarding Hub (MASH) for adults , similar to the safeguarding arrangements within Children's Services.

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A new referral form is in development which will be integrated with the ASC record management system (Mosaic) , which when launched, aims to free up the IRO capacity to focus on initial screening of the referrals, and potential to improve the timeframe between concern and carrying out a s42 enquiry (or other actions , depending on the risk and threshold).

The service is developing a QAF with plans in place to launch in the 3rd quarter of 2023/24

4. Financial Information

4.1 There is a permanent investment request to increase the staff workforce within the access team who undertake safeguarding as the team structure has not changed to respond to the significant change in demand. The team, solely dedicated to the safeguarding adult function is made up of three initial referral officers, eight social workers, three advanced practitioners and a team manager.

5. Reducing Inequalities

5.1 Effective governance arrangements of adult safeguarding ensure a focus on delivering Council Plan objectives, a key driver of which is reducing inequalities.

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