READING BOROUGH COUNCIL

REPORT BY DIRECTOR OF ADULT CARE AND HEALTH SERVICES

TO:	**ADULT SOCIAL CARE, CHILDREN'S SERVICES AND EDUCATION COMMITTEE**		
DATE:	**5 NOVEMBER 2015**	**AGENDA ITEM:**	**20**
TITLE:	**AUDIT OF ADULT SAFEGUARDING PRACTICE AND PERFORMANCE**		
LEAD COUNCILLOR:	**COUNCILLOR EDEN**	**PORTFOLIO:**	**ADULT SOCIAL CARE**
SERVICE:	**ADULT CARE**	**WARDS:**	**ALL**
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1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1 This report provides a summary of the findings of an audit of the Adult Safeguarding function commissioned in order to measure compliance with both Safeguarding Adults policies and procedures as defined in the Care Act 2014, and with local policies and procedures of the West of Berkshire Safeguarding Adults Board. The independent and objective audit was commissioned from an experienced Consultant following a case involving the death of a service user. This case was agreed as a SAR (Safeguarding Adults Review – formally known as a Serious Case Review). While there is evidence of some good practice, this is not yet consistent.

2. RECOMMENDED ACTION

2.1 That the Committee accept the report and Proposal (see 4).

3. POLICY CONTEXT

3.1 The Safeguarding Adults function is delivered by the care management teams in Single point of access (SPOA), long term care, Learning Disability and Mental Health. A central Safeguarding Team provides advice and guidance.

3.2 The SAR concerned a man with mental health problems with a care plan commissioned to provide daily visits from a home care service in large part because he had threatened self-harm and it was known that he neglected his

health. The individual had frequently refused to open his door to the carers, and on these occasions if the carer had tried to communicate through the door and not been successful in getting any engagement, would look for 'signs of life' before leaving to notify the manager. For three days running this occurred before he was found dead in his apartment.

3.3 On immediately reviewing the files there was concern about the standard of professional recording, risk management and compliance with legislation and policy. The case was referred to the Safeguarding Adults Board, but actions were not as efficient as we would intend as the Independent Chair resigned suddenly with immediate effect around this time. We have now found an interim for the next 12 months with high professional reputation and expertise in managing recovery and improvement.

3.4 As a new Director, and with a new Head of Service, it was very important to clarify the extent of the practice issues; and to clarify if this was an unfortunate isolated case or a symptom of more systemic problems. I immediately started my own small scale and random selection case file audit process.

3.5 Lorna Pearce of Pinnacle Social Care Services was commissioned to audit in excess of 70 randomly selected safeguarding cases against Care Act requirements and local policy and procedure. She considered policy and procedure, referral process, timeliness, protection, proportionality, empowerment, partnership, and accountability

4. THE PROPOSAL

4.1 Summary of Findings:

1. It is clear that RBC custom and practice uses different terms and timescales from the West of Berkshire SAB; and operates across 10 access points leading to inconsistency both across West of Berkshire and within RBC.

2. Local policy and procedure are insufficiently written, and exists largely as guidance. This leads to inconsistency.

3. In 50% of cases audited the consultant felt there was insufficient evidence of risk being appropriately managed, and inadequate evidence of satisfactory discharge of Duty of Care.

4. In 52% of cases audited the evidence available identified cases where information.

5. In 64% of audited cases there was insufficient evidence of consultation with the adult concerned or an appropriate advocate.

6. Very good evidence of partnership working, and mostly good working in SPOA.

4.2 Planned response:

The planned response will have three domains:

1. The local guidance will be re drafted to local policy and procedure aligning to the West of Berkshire SAB and Care Act duties. This will also include agreeing:

a. the ongoing management oversight,
b. standards for reflective supervision and
c. evidenced based decision making;
d. co-production and consultation with vulnerable people
e. senior management oversight of consistency across RB at access points

2. A programme of training and briefing, split into cohorts of managers and practitioners respective duties and roles and tasks will be arranged for compulsory completion at an acceptable standard (with end of course assessment).

3. A regime of audit across care management, line management and Safeguarding team audit, overseen by DMT case file audit.

4.3 **Expected outcome:**

1. Once the training on new procedures has been completed and the audit regime established, a monthly report will be available indicating Compliance with Care Act duties.

2. Customer satisfaction and the extent to which interventions have delivered a greater feeling of safety and well being

5. **CONTRIBUTION TO STRATEGIC AIMS**

5.1 The purpose of this section is to ensure that proposals contained in reports are in line with the overall direction of the Council by meeting at least one of the Corporate Plan priorities:

1. Safeguarding and protecting those that are most vulnerable;
2. Providing the best start in life through education, early help and healthy living;
3. Providing homes for those in most need;
4. Keeping the town clean, safe, green and active;
5. Providing infrastructure to support the economy; and
6. Remaining financially sustainable to deliver these service priorities.

5.2 This decision contributes to the Council's strategic aim to promote equality, social inclusion and a safe and healthy environment for all.