



Safeguarding Adults Annual Report

2019/20

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EXECUTIVE SUMMARY

Safeguarding Adults is a strategic priority for Wokingham Borough Council (WBC) and a core activity of Adult Social Care.

During the year 2019/20, some key changes have occurred in the way that Safeguarding work is undertaken in the Borough.

In December 2019, the new Adult Safeguarding Hub (ASH) was established as the single point of referral for all Adult Safeguarding concerns. This new service sits under the Head of Adult Safeguarding and consists of a Team Manager, Senior Social Workers and Safeguarding Practitioner posts. More recently, dedicated administrative support has also sat within the service.

With the creation of this new hub, the service took on responsibility for triaging all Adult Safeguarding concerns.

Where a decision is made that a safeguarding intervention is required, an Initial Enquiry is undertaken. This sits within the ASH. Initial Enquiries are 'light touch' enquiries, which aim to be completed within 5 working days of referral.

Should it be decided that a more substantial safeguarding intervention is required, the case will be progressed to a full Sec 42 Enquiry. There are three levels of full enquiry; Level 1 (delegated Provider enquiry – with oversight, quality assurance and decision-making from the ASH), a Level 2 Enquiry (led by a Social Care Practitioner from elsewhere in Adult Social Care (with final quality assurance by the ASH) or a Level 3 Enquiry (complex, multiagency enquiry coordinated from within the ASH).

This new process and pathway is aimed at ensuring more proportionate use of safeguarding frameworks, at improving practice around the principle of *Making Safeguarding Personal* and at making the customer journey a more seamless and coherent one.

Overall, the year has been a challenging one. Referral rates have increased significantly upon previous years – mainly as a result of having a single point of referral, which has improved access for those making referrals and has ensured greater compliance with entering all referrals into the framework upon receipt of the concern.

Towards the end of the year, these challenges have been compounded by the impact of the Coronavirus Pandemic, which has presented challenges around how to continue to deliver a personalised safeguarding service, alongside the issues of increased isolation impacting on the vulnerability of adults at risk. It is anticipated that these challenges will continue to develop over the coming months.

Introduction

Safeguarding is a statutory responsibility of all Local Authorities and as such, is a strategic priority for Wokingham Borough Council and a core activity for Adult Social Care.

This annual report outlines the key performance indicators used to monitor activity for safeguarding adults in Wokingham. Analysis of performance is undertaken across the year and is used to influence strategic development.

Networks

Care Act 2014 requires all Local Authorities to form a Safeguarding Adults Board (SAB) to provide the strategic overview and direction for safeguarding, provide governance and quality assurance. This includes the commissioning of Safeguarding Adults Reviews (SAR) when a person has died or been significantly harmed and the SAB knows, or suspects, that the death resulted from abuse or neglect.

Wokingham Borough Council is a member of the West of Berkshire Safeguarding Adults Board; a tri borough Board in partnership with Reading Borough Council and West Berkshire Council alongside other key stakeholders including but not limited to; Thames Valley Police, Berkshire Fire & Rescue Service, South Central Ambulance Service, Berkshire Healthcare Foundation Trust, Royal Berkshire Hospital Foundation Trust and the Berkshire West Clinical Commissioning Group. The SAB has produced its own annual report, which can be viewed on its website www.sabberkshirewest.co.uk.

Local activity in the context of the SAB priorities

In June 2019, the SAB agreed a Business Plan to cover the period 2018/21. The SAB priorities for year 2018/19 were agreed as shown below, with work undertaken in Wokingham area described alongside.

Priority 1: We will provide the partnership with the tools and framework to work effectively with people who Self-Neglect.

- WBC has worked with the SAB and other partners to agree new policies, procedures and guidance for working with self-neglect and hoarding. These have been rolled out.
- The ASH has developed a Practice Manual for practitioners, which includes extensive guidance on working with self-neglect and hoarding.
- A variety of toolkits are now in use within Adult Social Care.
- WBC has worked with a local specialist organisation to design bespoke training in hoarding, which will be rolled out across the coming months.
- WBC has contributed to the work of the Learning and Development subgroup of the SAB in terms of the wider workforce development in this respect.

Priority 2: The SAB will work collaboratively with Local Safeguarding Children Boards, Community Safety Partnerships and Health and Wellbeing Boards to provide the workforce with the frameworks and tools to work with Vulnerable Adults who are at risk of Domestic Abuse.

- The Safeguarding Service has established strong links with both Children's Services and the Community Safety Partnership.
- The service has actively contributed to the local Domestic Abuse needs analysis, which was undertaken in Quarter 4. This commented on the Adult Social Care training offer on Domestic Abuse and the DASH-RIC as an example of good practice.
- This training has continued to be delivered, ensuring that all statutory workers receive enhanced training in working with Domestic Abuse, including how to use specialist risk assessment tools.
- The Safeguarding Service is a member of the Domestic Abuse Working Group, which will now progress the recommendations of the needs analysis, ensuring a cohesive approach to working with Domestic Abuse across the Council.
- The ASH have maintained a consistent presence at MARAC and MATAC, ensuring a joined up approach to these cases where the relevant thresholds are met.
- Links between ASH practitioners and Thames Valley Police have been developed, to ensure more effective joint working, particularly in cases of Domestic Abuse.

Priority 3: We will understand the main risks to our local population in regards to Targeted Exploitation and agree how best to equip the partnership to Safeguard vulnerable people against these risks.

- A worker in the ASH was nominated to take a 'special interest' in this area of practice.
- Work has been started on developing a network of key contacts in relation to areas such as hate and mate crime, modern day slavery, cuckooing, scamming and financial abuse).
- The interface with Trading Standards as been strengthened.
- Bespoke training was commissioned around working with financial abuse and this was targeted at key personnel in the workforce.
- The Safer Places scheme operating in the Borough was consolidated; all providers were visited, issues discussed and education/advice/information provided. Discussions commenced with additional local organisations with a view to expanding the scheme to some of the more rural areas of the Borough; this stalled due to the Coronavirus pandemic and requires further work in the coming year.

Priority 4: The SAB will understand from key stakeholders, why there has been an increase in organisational safeguarding and seek assurance from commissioners, that there are adequate preventative measures in place that is consistent across the partnership where practical.

- WBC has continued to work proactively with partners and other stakeholders where quality and safeguarding issues have been identified to resolve these collaboratively.
- The council is in the process of reviewing its Care Governance protocols to ensure they are both effective and efficient.

Annual Performance data and analysis 2019-20

Safeguarding activity - Concerns and enquiries

This section looks at number of safeguarding concerns raised and the number of enquiries that started during the year. A safeguarding *concern* is reported to the local authority's Adult Social Care service by someone (i.e. a professional, family member or carer) who is worried about the adult at risk who may be being neglected or abused.

A total of 1279 safeguarding *concerns* were raised for the 2019-20 reporting year which is an increase of 21% from last year.

An *enquiry* is where a *concern* is progressed to a formal investigation stage. In 2019/20 471 enquiries were started during the year. The 'conversion rate' is the ratio of enquiries to concerns. The conversion rate for Wokingham during 2019-20 was 37% which means for every 100 concerns that were raised there were 37 s42 enquiries that were started. Table 1 shows Safeguarding activity for Wokingham in the past 4 years.

Table 1 – Safeguarding activity, 2017-20

	Concerns	S42 enquiries	Individuals who had a S42 enquiry	Conversion rate of concern to S42 enquiry
2016-17	1,523	620	510	41%
2017-18	1232	478	415	39%
2018-19	1057	412	344	39%
2019-20	1279	471	400	37%

Table 2 – Safeguarding activity benchmarking data, 2018-19

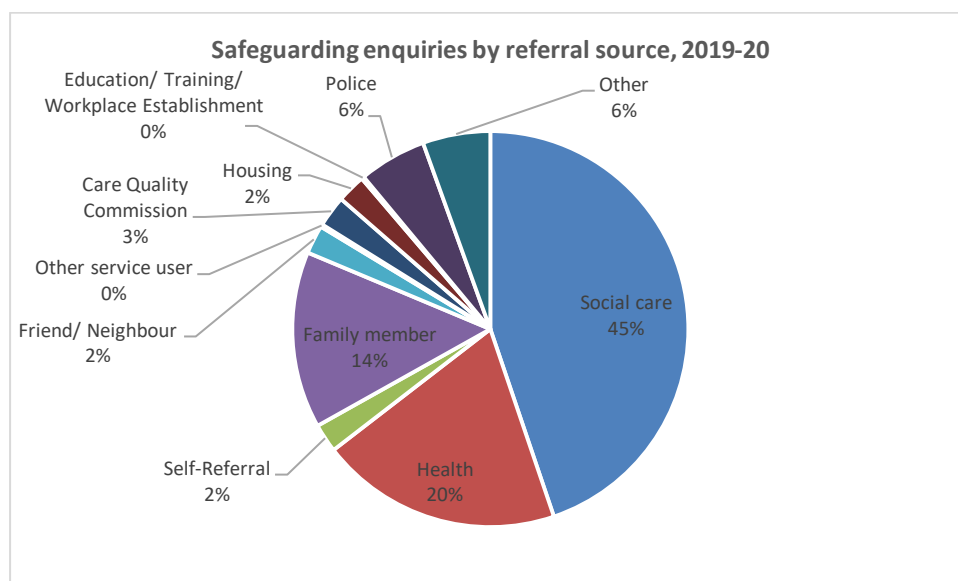
	Concerns	s42 enquiries	Other safeguarding enquiries	Conversion rate of concern to all safeguarding enquiries
2018-19				
Wokingham	1055	410	5	39%
West Berkshire	710	545	*	77%
Reading	1110	550	10	50%
Slough	1485	195	35	15%
Bracknell	430	135	5	33%
Windsor and Maidenhead	1190	435	*	37%
England	415050	143390	18540	39%
South East	57430	21715	1565	41%

The variances in conversion rate may be due to differing approaches to how concerns are recorded by 'front door' in different local authorities. In some LA's concerns are filtered out before they get to the safeguarding team. Also, enquiry 'threshold' vary across authorities and some apply higher threshold at which investigations are classed as an enquiry than others.

Source of safeguarding enquiries

Forty five percent of safeguarding enquiries came from social care staff followed by 20% of enquiries referred by health staff. Social care staff category includes LA and independent sector staff from domiciliary, day care and residential care staff. The percentage of self-referrals and referrals from family members, friends or neighbours was 18%.

Figure 1 – Safeguarding enquiries by referral source, 2019-20



The table below shows comparison of safeguarding enquiries over the past 4 years. As with previous years, most enquiries continue to come from social care staff and health care staff.

Table 3 – Safeguarding enquiries by referral source, 2017-20

	Referrals	2016-17	2017-18	2018-19	2019-20
Social Care Staff	Social Care Staff total (CASSR & Independent)	313	277	223	211
	Of which: Domiciliary Staff	46	34	42	36
	Residential/ Nursing Care Staff	164	159	109	105
	Day Care Staff	20	10	12	15
	Social Worker/ Care Manager	44	42	37	30
	Self-Directed Care Staff	5	2	0	8
	Other	34	30	23	17
Health Staff	Health Staff - Total	115	64	57	93
	Of which: Primary/ Community Health Staff	65	45	39	59
	Secondary Health Staff	30	13	8	25
	Mental Health Staff	20	6	10	9
Other sources of referral	Self-Referral	28	19	9	11
	Family member	79	46	61	68
	Friend/ Neighbour	10	11	7	11
	Other service user	0	1	1	1
	Care Quality Commission	1	4	4	12
	Housing	8	6	7	11
	Education/ Training/ Workplace Establishment	2	1	1	1
	Police	32	29	18	26
	Other	32	20	24	26
Total	620	478	412	471	

Individuals with safeguarding enquiries

Age group and gender

The table below shows age groups for individuals who had a safeguarding enquiry in the previous four years. Most enquiries (64%) were for individuals aged 65 and over.

Table 4 – Age group of individuals with safeguarding enquiries, 2017-20

Age band	2016-17	% of total	2017-18	% of total	2018-19	% of total	2019-20	% of total
18-64	138	27%	132	32%	103	30%	146	36%
65-74	58	11%	43	10%	38	11%	43	11%
75-84	150	30%	101	24%	92	27%	92	23%
85-94	133	26%	111	27%	88	26%	95	24%
95+	24	5%	26	6%	22	6%	22	5%
Age unknown	7	1%	2	1%	1	0%	2	1%
Grand total	510		415		344		400	

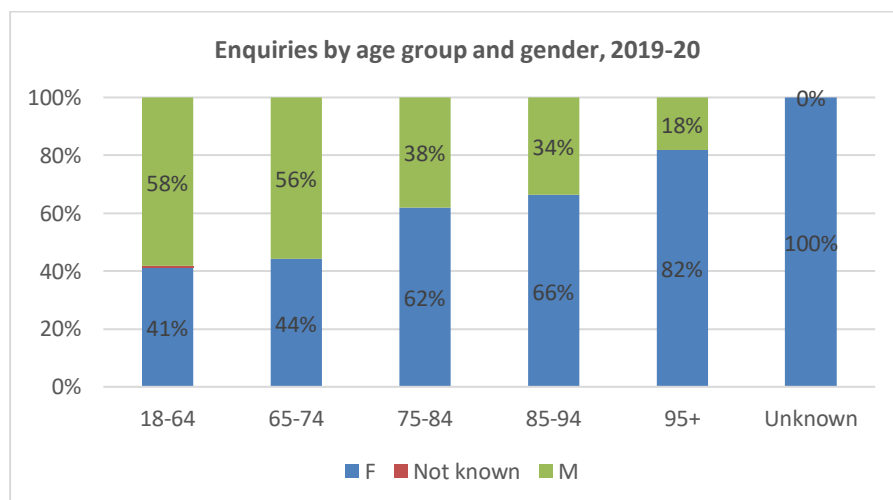
As with previous years, more women were the subject of a Section 42 safeguarding enquiry than males. 55% of safeguarding enquiries started in the year were for females.

Table 5 – Age group and gender of individuals with safeguarding enquiry, 2019-20

Age group	Female	Male	Not known
18-64	60	85	1
65-74	19	24	0
75-84	57	35	0
85-94	63	32	0
95+	18	4	0
Unknown	2	0	0

The chart below indicates that likelihood of abuse increases with age for women.

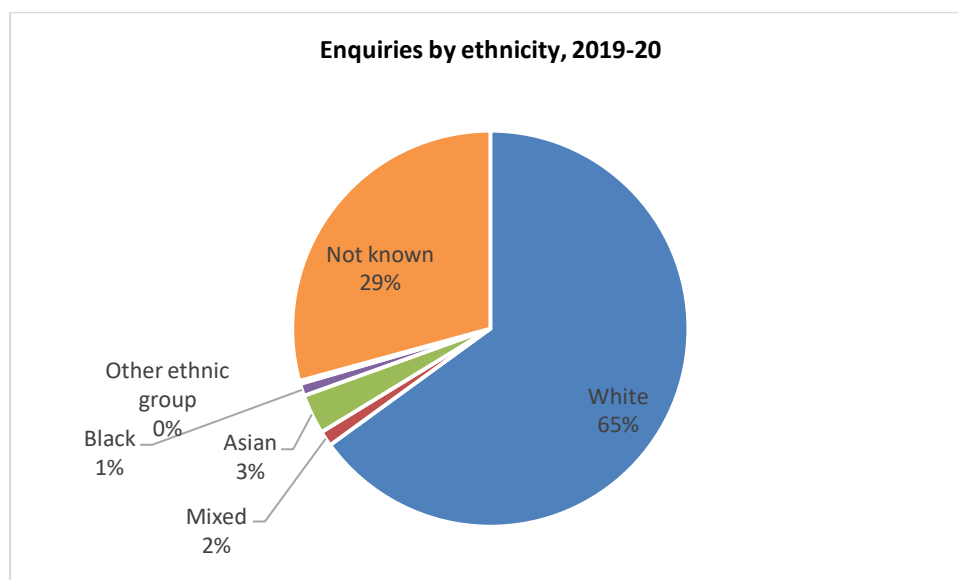
Figure 2 – Safeguarding enquiries by age group and gender, 2019-20



Ethnicity

Sixty five percent of all individuals who had a safeguarding enquiry were of white ethnicity. However, 29% did not have any ethnicity recorded which might not give a true representation of the categories.

Figure 3 – Ethnicity, 2019-20



Primary support reason

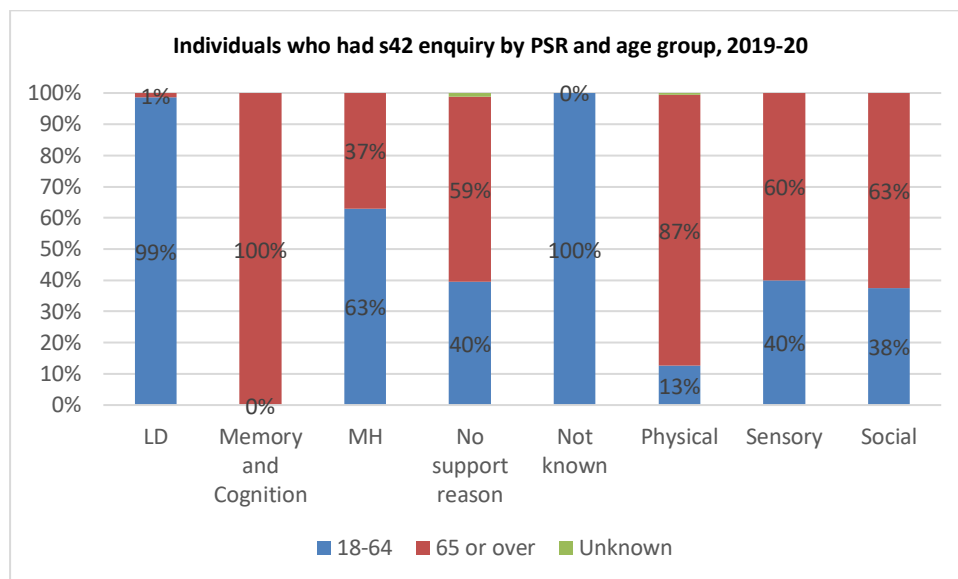
Table 6 below shows breakdown of individuals who had a safeguarding enquiry by primary support reason. For most cases the primary support reason was physical support (42%) followed by learning disability support (17%) and support for memory and cognition (10%). 20% of cases did not have a support reason as they were not receiving any social services support at the time of the safeguarding incident.

Table 6 – Primary support reason, 2017-20

Primary support reason	2016-17	% of total	2017-18	% of total	2018-19	% of total	2019-20	% of total
Physical support	237	47%	187	45%	149	43%	166	42%
Sensory support	14	3%	8	2%	7	2%	10	3%
Support with memory and cognition	111	22%	60	14%	44	13%	38	10%
Learning disability support	91	18%	92	22%	73	21%	69	17%
Mental health support	28	5%	19	5%	14	4%	27	7%
Social support	8	1%	4	1%	5	2%	8	2%
No support reason	21	4%	45	11%	52	15%	81	20%
Not known	0	0%	0	0%	0	0%	1	0%
	510		415		344		400	

The chart below (figure 4) shows enquiries broken down by age group and primary support reason. Individuals who had physical support were more likely to be aged 65 and over whereas those who had a primary support reason of learning disability were aged 18-64. This may be because even though older people may have a learning disability due to increasing frailty their primary need may be for physical support.

Figure 4 - Individuals who had safeguarding enquiry by PSR and age group, 2019-20



Case details for concluded enquiries

Type of alleged abuse

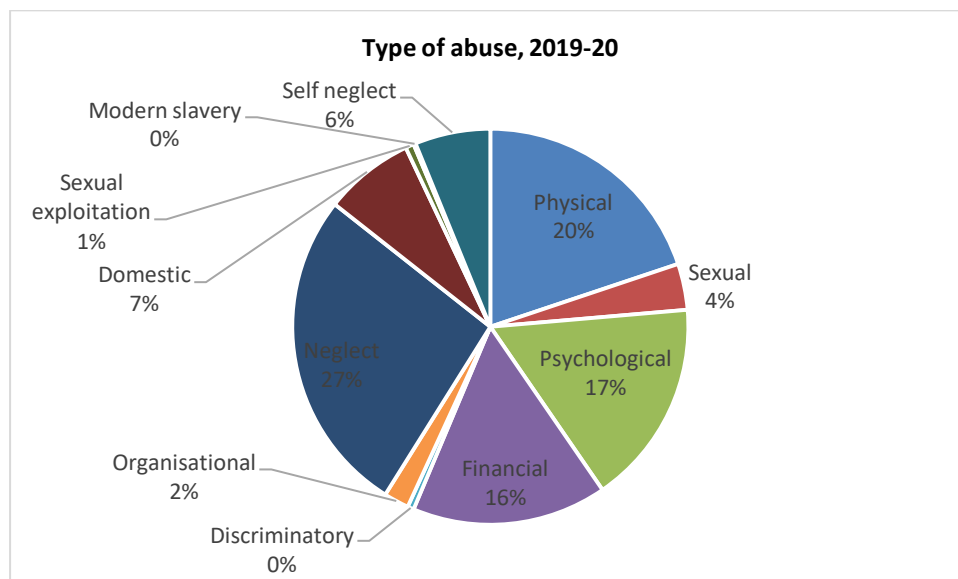
The table below shows enquiries by type of alleged abuse in the last four years.

Most of the allegations were for neglect accounting for 27% of all recorded risks followed by physical abuse at 20% and emotional abuse at 17%. Financial abuse has risen from 13% last year to 16% this year and is higher in Wokingham than nationally for 2018-19 (14%).

Table 7 – Type of abuse, 2017-20

Concluded enquiries	2016-17		2017-18		2018-19		2019-20		% England 2018-19
	Count	%	Count	%	Count	%	Count	%	
Physical	171	20%	180	20%	109	19%	116	20%	22%
Sexual	17	2%	42	5%	18	3%	22	4%	4%
Emotional/Psychological	123	15%	170	19%	91	16%	98	17%	14%
Financial	98	12%	117	13%	75	13%	93	16%	14%
Neglect	329	39%	268	30%	182	31%	156	27%	31%
Discriminatory	4	0%	13	1%	1	0%	3	1%	1%
Institutional	35	4%	15	2%	18	3%	12	2%	4%
Domestic abuse	28	3%	29	3%	30	5%	43	7%	5%
Sexual exploitation	2	0%	6	1%	8	1%	4	1%	1%
Modern slavery	0	0%	0	0%	2	0%	1	0%	0%
Self-neglect	39	5%	58	6%	44	8%	36	6%	5%

Figure 5 – Type of abuse, 2019-20



Location of alleged abuse

The home of the adult at risk accounted for 55% of the risk locations. This is higher than the national figure for 2018-19 when 45% of alleged abuse took place in the individual's home. Residential and nursing care homes accounted for 31% between them. Wokingham had a lower percentage (19%) concerning abuse in residential care than nationally (24%).

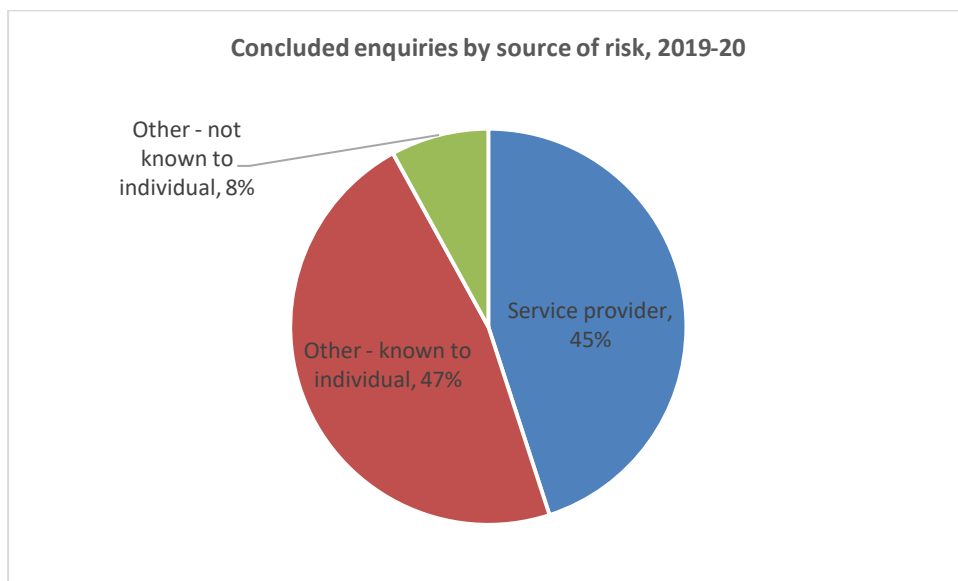
Table 8 – Location of alleged abuse, 2019-20

Location of abuse	2019-20	%	England 2018-19
Own Home	230	55%	45%
In the community (excluding community services)	39	9%	4%
In a community service	6	1%	3%
Care Home - Nursing	50	12%	10%
Care Home – Residential	81	19%	24%
Hospital - Acute	0	0%	3%
Hospital – Mental Health	0	0%	2%
Hospital - Community	1	0%	1%
Other	12	3%	7%

Source of risk

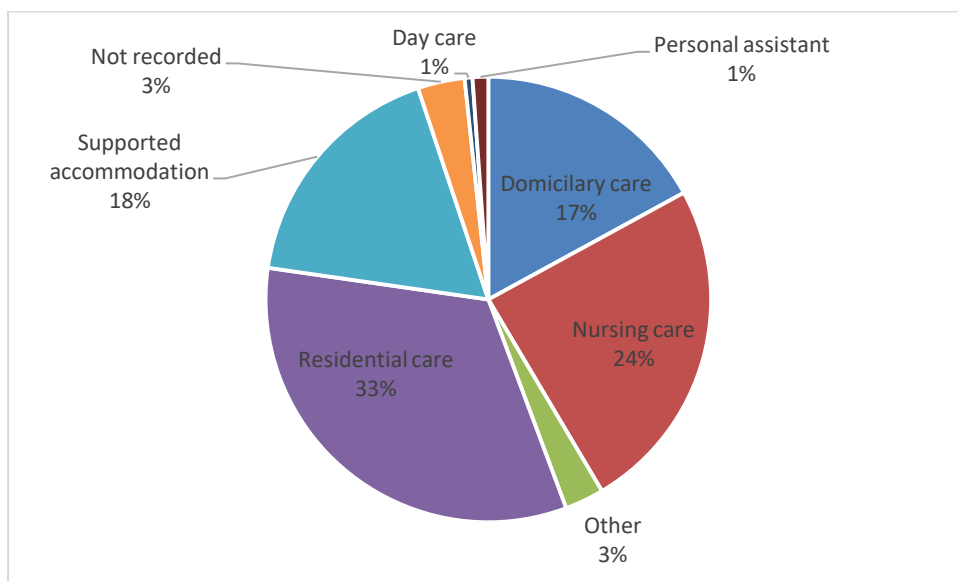
In 45% of cases, the source of risk was a service provider. Service provider refers to any individual or organisation paid, contracted, or commissioned to provide social care services regardless of funding source and includes services organised by the council and residential or nursing homes that offer social care services. This category includes self-arranged, self-funded and direct payment or personal budget funded services. Health or social care staff who are responsible for assessment and care management do not fall under this category.

Figure 6 – Concluded enquiries by source of risk, 2019-20



The chart below shows a breakdown of service provider category. Where the source of risk was a service provider, residential and nursing care staff were most reported as the alleged abuser (57%). Domiciliary care staff accounted for 17% of this category.

Figure 7 – Breakdown of source of risk service provider by service type, 2019-20



Action taken and result

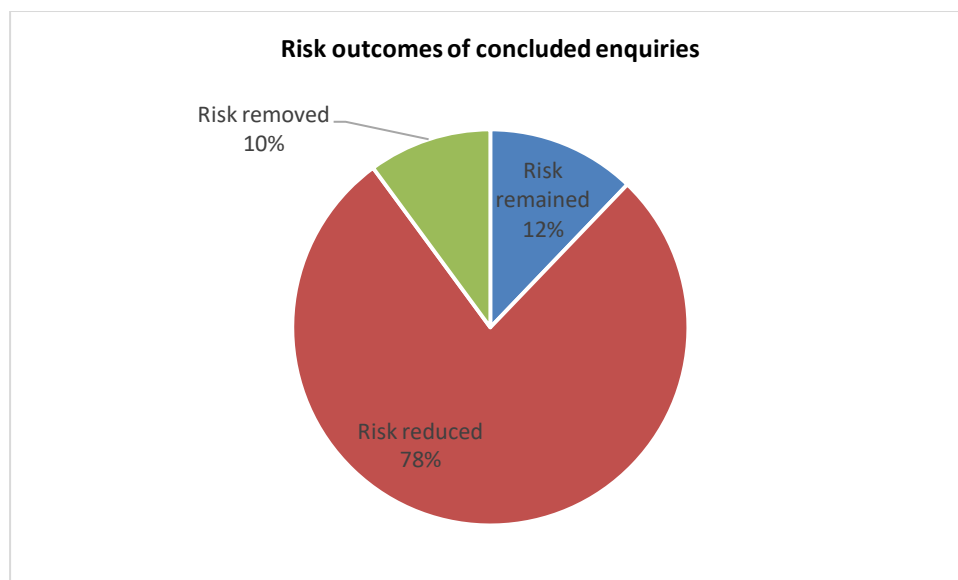
The table below shows risk assessment outcomes for concluded enquiries. In 85% of cases, a risk was identified, and action taken.

Table 9 – Concluded enquiries by risk assessment outcomes, 2019-20

Risk assessment outcome	Total
Risk identified and action taken	330
Risk identified and no action taken	7
Risk - Assessment inconclusive and action taken	6
Risk - Assessment inconclusive and no action taken	6
No risk identified and action taken	18
No risk identified and no action taken	10
Enquiry ceased at individual's request and no action taken	10

The chart below shows concluded enquiries by result in cases where a risk was identified. In most cases, the risk was reduced or removed. In 12% of cases the circumstances causing the risk was unchanged and the risk remained.

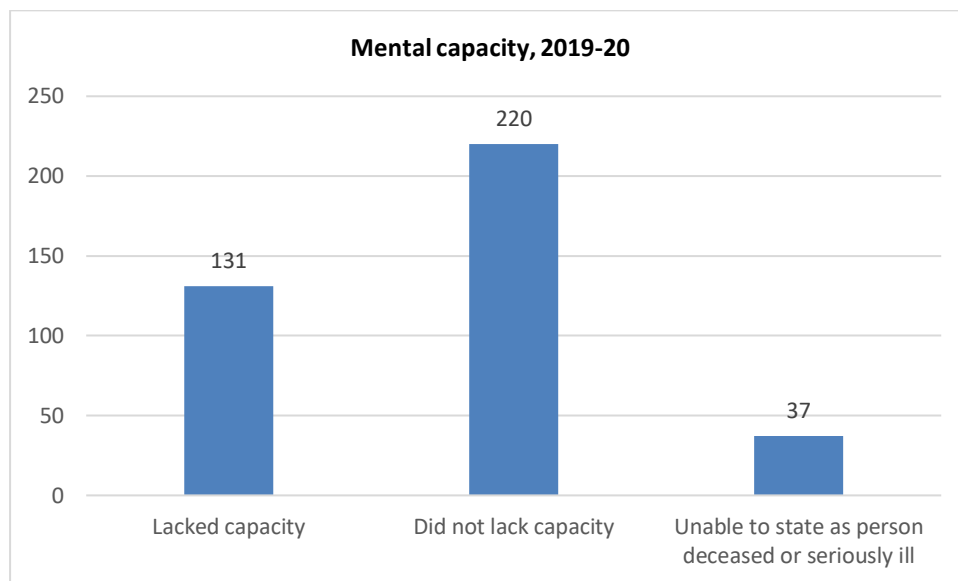
Figure 8 – Risk outcomes of concluded enquiries, 2019-20



Mental Capacity and Advocacy

The chart below shows mental capacity of individuals involved in concluded enquiries. 34% of individuals who had an enquiry concluded in the year lacked capacity.

Figure 9 – Mental capacity, 2019-20

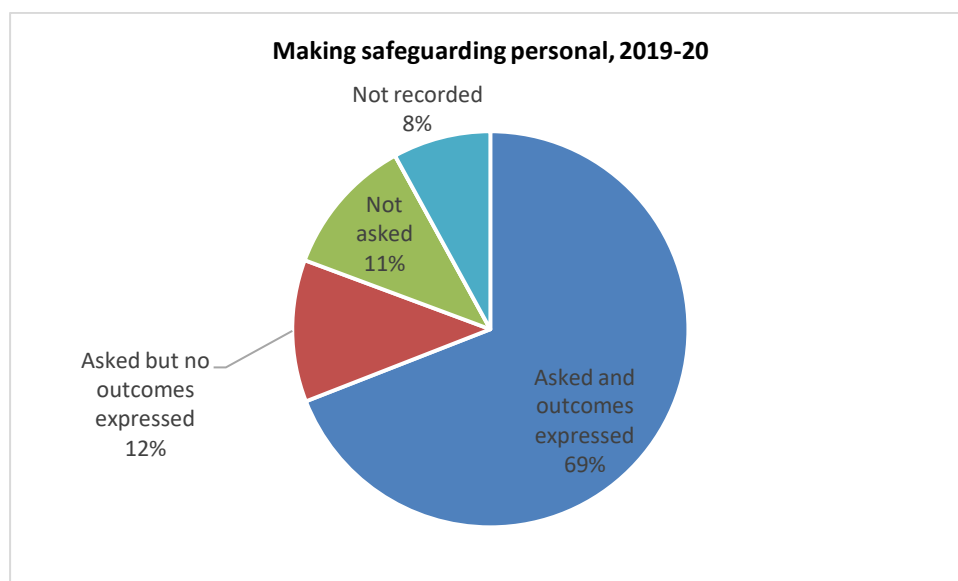


Where the adult at risk lacked capacity, in 96% of cases they were supported by an advocate, family or friend.

Making Safeguarding Personal

Making safeguarding personal is a person-centred approach and is about having conversations with people about how to respond in safeguarding situations to enhance involvement, choice and control as well as improving quality of life, wellbeing and safety. Of the enquiries concluded in 2019-20, 81% of people or their representatives were asked what their desired outcomes were and in 69% of these cases, outcomes were expressed.

Figure 10 – Making safeguarding personal, 2019-20



Where outcomes were expressed, in 76% of those cases the desired outcomes were fully achieved, in 20%, the desired outcomes were partially achieved and in 4% of the cases none of the expressed outcomes were achieved.

The Future

In 2020/21 Wokingham Borough Council will continue to refine the new pathways and processes that were implemented in the previous year.

The ASH will focus on developing its relationships with both internal and external partners to deliver more coherent interventions for customers and with the aim of achieving more effective and holistic outcomes.

As part of this work, the service intends to review how it measures delivery of *Making Safeguarding Personal* and how it meaningfully captures and utilises customer feedback in a safeguarding context. This will include considering how customer forums can be better used to embed the customer and carer voice in the strategic context.

Alongside the whole of Adult Social Care, the safeguarding service will work to develop strengths-based approaches to interventions and embed these in both culture and delivery.

The service will focus on working with partners to achieve proportionate thresholds for safeguarding interventions, ensuring that the framework is applied in accordance with the objectives of the Care Act and that adults at risk are empowered to be fully involved or represented in decisions about them.

Work will continue to develop confidence and competence for practitioners in working with the complex areas of self-neglect and hoarding. This will include development and delivery of a bespoke training model supporting the workforce to develop their abilities in specifically working with people with Hoarding Disorder in the Borough. Alongside this, options for developing self-help forums in the Borough will also be considered.

Another area of focus will be working in collaboration with the Community Safety Partnership and Children's Services around working with Domestic Abuse in the Borough to ensure the strategy is aligned and delivered collaboratively.

The Safeguarding Service will work with the Commissioning Service to review and refine the Care Governance protocols that are already in place to ensure quality assurance input to Providers and interventions around Provider Concerns and/or organisational abuse are effective and robust.

Lastly, in acknowledging the ongoing global pandemic, WBC will continue to work responsively in understanding the impact of the Coronavirus on the whole population, but particularly from a safeguarding perspective, those adults with care and support needs and at risk of abuse or neglect.