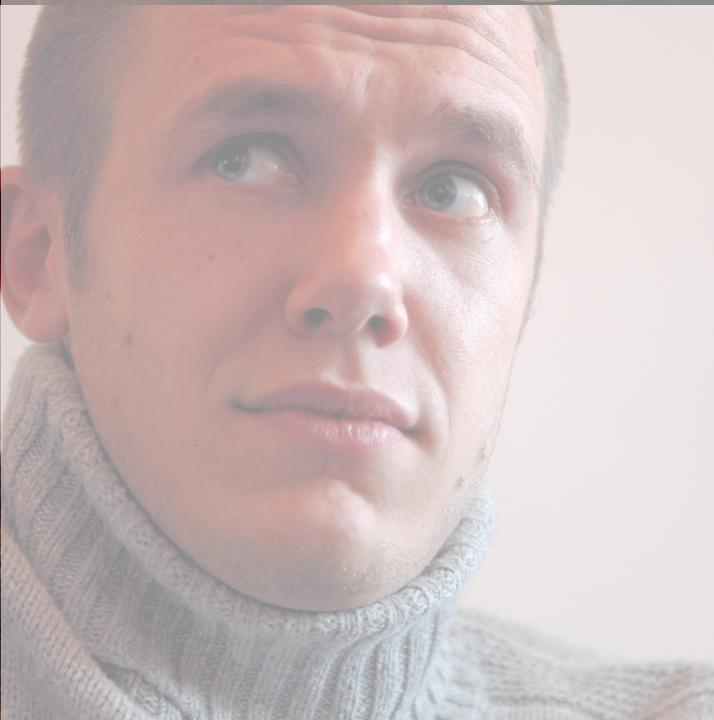
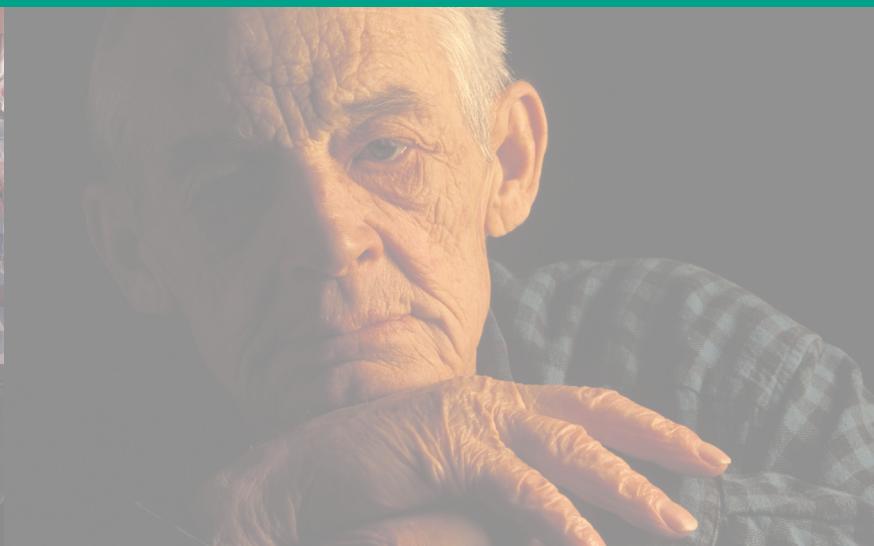
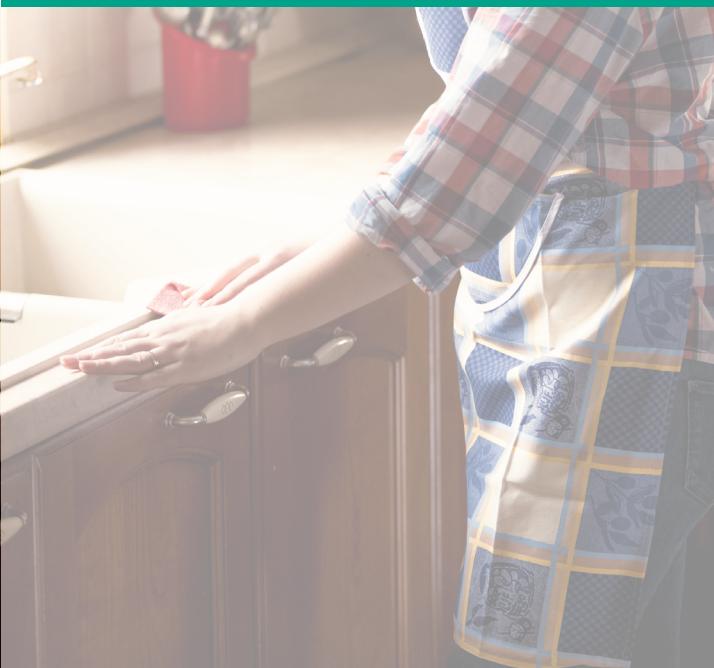


# Safeguarding Adults Annual Report 2017/18



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## **Executive Summary**

Safeguarding Adults is a strategic priority for West Berkshire Council and a core activity of Adult Social Care.

2017/18 has been a busy year for the Safeguarding Adult service in West Berkshire. Delivery of the safeguarding function is shared between the operational social care teams who complete the majority of investigations into allegations of abuse and a small safeguarding team that provide a triage and scrutiny function, signing off all investigations and leading on investigations into organisational abuse. They also coordinate the response in relation to Deprivation of Liberty Safeguards (DoLS).

There have been a number of changes in key personnel during the year, with both interim and locum staff in place whilst a new service manager was recruited. Despite this safeguarding performance has been managed and data shows evidence of improvements.

The number of safeguarding ‘concerns’ received in 2017/18 that met the threshold for a response within the safeguarding framework has decreased over the last few years which we believe is as a result of improved threshold decision making and reducing inappropriate referrals. Locally we are monitoring notifications that do not meet the safeguarding threshold, appropriate action is still taken for these notifications and will help us to understand the true volume of enquiries that the Safeguarding team are working with.

Section 42 of the Care Act determines that where a Local Authority receives a concern and has reason to believe a person within its area who has care and support needs and is experiencing or is at risk of abuse or neglect and by virtue of their care and support needs cannot protect themselves against that abuse or neglect, the Local Authority is required to make, or cause to be made, enquiries into that concern. These are known as, and reported as, S42 Enquiries.

We monitor the % of concerns that subsequently require a S42 enquiry. This is known as a conversion. During 2017/18 318 S42 enquiries were opened, with an increased conversion rate from concern to enquiry of 65%.

Whilst the number of concerns is lower by 20% than those recorded during 2016/17, the conversion rate at 65%, is 14% higher than the previous reporting year, providing greater evidence that concerns coming through were more appropriate and relevant to be processed through the safeguarding framework. We would expect the conversion rate to increase as the number of concerns has reduced but will continue to monitor this trend and ensure that all concerns progress to a S42 investigation where required.

The number of Deprivations of Liberty Safeguard applications remains high. We now report on both new and existing applications. The number of applications where the outcome was ‘pending’ was significantly higher in 2017/18.

Despite pressures in the service, and high activity from both Safeguarding and DoLS, West Berkshire has continued to drive forward the Safeguarding agenda supporting the West of Berkshire in the delivery of its action plan.

The West Berkshire Safeguarding Adults Forum is the local operational arm of the SAB and consists of local partners signed up to address safeguarding matters specifically in West Berkshire. This year the forum and local operational management teams have progressively worked through the established action plan and achievements include:

- Enhanced engagement by West Berkshire partners in the Safeguarding agenda, attending West of Berkshire events.
- Making Safeguarding initiative continues to be promoted and embedded in practice through further training and monitoring, with local data indicating improvements for achieving stated outcomes.
- Further Mental Capacity training to support good practice and requirements under the Safeguarding Framework.
- Ensuring effective learning from good and bad practice is shared.
- Ensuring a robust oversight of safeguarding activity. Performance data analysis is carried out on a regular basis; rigorous interrogation ensures there continues to be a grasp of both current and emerging issues with regular quality assurance reports to Senior Management and Members.
- Development of an audit approach to practice which will be further implemented in 2018/19.
- Introduction of a Risk and Management Panel (RaMP) – this panel is designed for practitioners to take key cases that are high risk for multi-agency discussion and ensure that S42 cases are managed in a timely way.

West Berkshire have introduced a new case management recording system – Care Director. The introduction of this system allows greater opportunity to improve recording and monitoring of key safeguarding activity. i.e better identify ongoing S42s and monitor time frames.

The service continues to strike a balance between daily operations dealing with incoming safeguarding concerns and applications for Deprivation of Liberty Safeguards authorisations with raising awareness of safeguarding.

## **Introduction**

Safeguarding is a statutory responsibility for all Local Authorities and as such is a strategic priority for West Berkshire Council and core activity for Adult Social Care.

This annual report evidences the key measures and trends used to monitor activity for Safeguarding Adults in West Berkshire to ensure risks are being identified and managed appropriately. Utilising the set of indicators and statutory reporting requirements for 2017/18, analysis of performance has developed comprehensively across the year to produce this report.

This report also focuses on the activities of the safeguarding network in West Berkshire during the reporting year.

## **Networks, Boards and Forums**

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

West Berkshire Council is a member of the West of Berkshire Safeguarding Adults Board; a tri borough Board in partnership with Reading Borough Council and Wokingham Borough Council alongside other key stakeholders including, but not exclusively, Thames Valley Police, Berkshire Healthcare Foundation Trust, Royal Berkshire Hospital Foundation Trust and the local Clinical Commissioning Group. The SAB has produced its own annual report which can be viewed on its website [www.sabberkshirewest.co.uk](http://www.sabberkshirewest.co.uk)

The Board developed the 2017-18 business plan – **Appendix 1** to progress identified priorities. For 2017/18 these included:

- **We have oversight of the quality of safeguarding performance**
- **We listen to service users, raise awareness of safeguarding adults and help people engage**
- **We learn from experience and have a skilled and knowledgeable workforce**
- **We work together effectively to support people at risk**

The West Berkshire Safeguarding Adults Forum is the local operational arm of the SAB and consists of local partners signed up to address safeguarding matters specifically in West Berkshire. This year the forum and local operational management teams have progressively worked through the established action plan; achievements include:

- Enhanced engagement by West Berkshire partners in the Safeguarding agenda, attending West of Berkshire events.
- Making Safeguarding Personal (MSP) initiative continues to be promoted and embedded in practice through further training and monitoring, with local data indicating improvements for achieving stated outcomes.
- Further Mental Capacity training to support good practice and requirements under the Safeguarding Framework
- Ensuring effective learning from good and bad practice is shared.
- Ensuring a robust oversight of safeguarding activity, with regular quality assurance reports to Senior Management and Members
- Development of an audit approach to practice which will be further implemented in 2018/19
- Introduction of a Risk and Management Panel (RaMP) – this panel is designed for practitioners to take key cases that are high risk for multi-agency discussion and ensure that S42 cases are managed in a timely way.

West Berkshire have introduced a case management recording system – Care Director. The introduction of this system allows greater opportunity to improve recording and monitoring of key safeguarding activity. i.e better identify ongoing s42s and monitor time frames.

The Safeguarding Adults Board are developing the [business plan for 2018-21](#), to detail the way in which partner agencies will contribute to delivering agreed priorities, this will published on SAB website when available.

# Volumes and Performance

## Safeguarding activity

### Concerns and S42 Enquiries

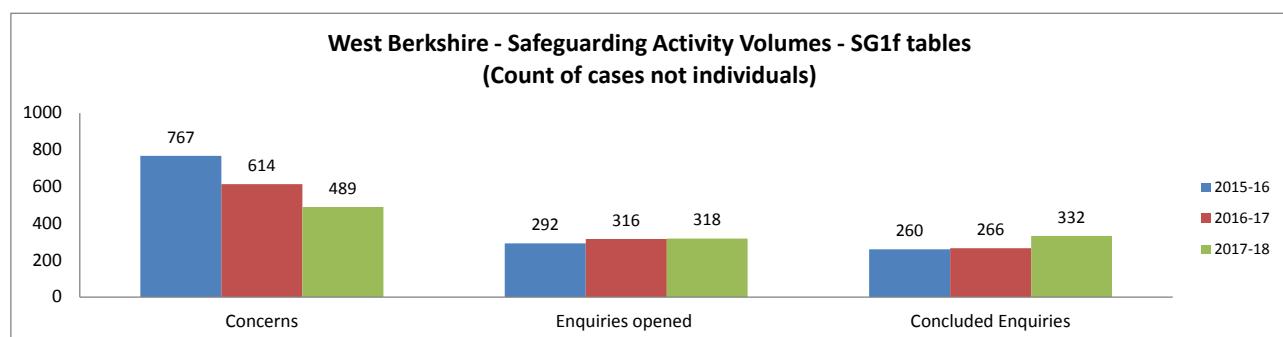
There were 489 safeguarding concerns received in 2017/18 that met the threshold for a response within the safeguarding framework. The number of concerns has decreased over the last few years and we believe this is as a result of working closely with providers, in particular Thames Valley Police (TVP) and Southern Central Ambulance Service (SCAS), to ensure referrals made are appropriate for safeguarding and reducing in appropriate referrals.

It should be noted that regardless of this streamlined process, all notifications received by the safeguarding adults team deemed not to meet the threshold for Safeguarding (often social welfare concerns from providers) are referred onto the relevant Adult Social Care or Mental Health teams to ensure they are reviewed by the relevant service and appropriate action taken.

Locally this is now being monitored to understand the true volume of activity that the Safeguarding team are working with. The data indicates a significant volume of activity and during 2018/19 we will monitor this to understand further the impact.

**Table 1 – Safeguarding activity for the reporting period 2015/16 – 2017/18**

	Concerns	Enquiries opened	Concluded Enquiries	Concern to Enquiry Rate
2015-16	767	292	260	38%
2016-17	614	316	266	51%
2017-18	<b>489</b>	<b>318</b>	<b>332</b>	<b>65%</b>



Source – Safeguarding Adults Collection (SAC) statutory return SG1f tables and SG2 tables detail concluded enquiries

In some cases it is sufficient for the Local Authority to note the concern with no further action required. Noting those concerns that require no further action enable the Local Authority to spot trends and monitor patterns across the District. Section 42

of the Care Act determines that where a Local Authority receives a concern and has reason to believe a person within its area who has care and support needs and is experiencing or is at risk of abuse or neglect and by virtue of their care and support needs cannot protect themselves against that abuse or neglect, the Local Authority is required to make, or cause to be made, enquiries into that concern. These are known as, and reported as, S42 Enquiries

We monitor the % of concerns that subsequently require a S42 enquiry. This is known as a conversion. During 2017/18 318 s42 enquiries were opened, with an increased conversion rate from concern to s42 enquiry of 65%.

Whilst the number of concerns is lower by 20% than those recorded during 2016/17, the conversion rate at 65%, is 14% higher than the previous reporting year, providing greater evidence that concerns coming through were more appropriate and relevant to be processed through the safeguarding framework. We would expect the conversion rate to increase as the number of concerns has reduced but will continue to monitor this trend and ensure that all concerns progress to a S42 investigation where required.

The number of concluded enquiries has increased by 25%. There were a number of enquiries concluded that had 'drifted' from previous reporting year, a retrospective check of all previously open enquiries from the preceding financial year was undertaken to ensure that all appropriate action was taken and individuals were safe. The transition to Care Director now provides the mechanisms to highlight these cases and ensure conclusion in a timely way.

## ***Individuals with safeguarding enquiries***

### **Age group and gender**

Tables 2 and 3 display the breakdown by age group and gender for individuals who had a s42 safeguarding enquiry in the last three years.

- The majority of enquiries continue to relate to older people - the 65 and over age group accounted for 64 % of enquiries in 2017/18.
- In line with national average greater proportion of safeguarding concerns received for females. However, 2017/18 indicates a slight increase in Male safeguarding enquiries.

**Table 2 – Age group of individuals with safeguarding enquiries opened , 2015-16 – 2017-18**

Table SG1a	Number of individuals by age			
	18-64	65-74	75-84	85+
2015/16	34%	15%	23%	28%
2016/17	37%	11%	19%	33%
2017/18	36%	14%	22%	28%

**Table 3 – Gender of individuals with safeguarding enquiries opened, 2015-16 – 2017-18**

Table SG1b	Number of Individuals by gender		
	Male	Female	Total
2015/16	43%	57%	100%
2016/17	38%	62%	100%
2017 /18	44%	56%	100%

### **Primary support reason**

Table 4 shows a breakdown of individuals who had a safeguarding enquiry by Primary Support Reason (PSR).

**Table 4 – Primary support reason for individuals with a safeguarding enquiry opened (SG1c)**

Classification	Physical Support	Sensory Support	Support with Memory & Cognition	Learning Disability Support	Mental Health Support	Social Support	No Support Reason	Not Known
2015/16	37%	1%	29%	17%	11%	3%	0%	
2016 /17	36%	3%	27%	17%	12%	4%	0%	2%
2017/18	32%	1%	25%	20%	8%	3%	12%	0%

Just under a third of individuals had a PSR of Physical Support, and a further 25% Memory and Cognition.

S42 enquiries opened for 'No support reason' has increased significantly in 2017/18. This is due to the revised reports from Care Director and review of statutory guidance that confirmed that where an individual was not receiving, nor did they need, any social services support at the time of the safeguarding incident, the PSR will remain unknown.

## **Case details for concluded enquiries**

### **Type of alleged abuse**

Table 5 shows concluded enquiries by type of alleged abuse in the last three years. Additional categories were added with the implementation of the Care Act 2014. Those additional categories were domestic abuse, modern slavery, self-neglect and sexual exploitation. It should be noted that more than one category of abuse can be attributed to any single concern as often incidents are complex and comprise of various elements.

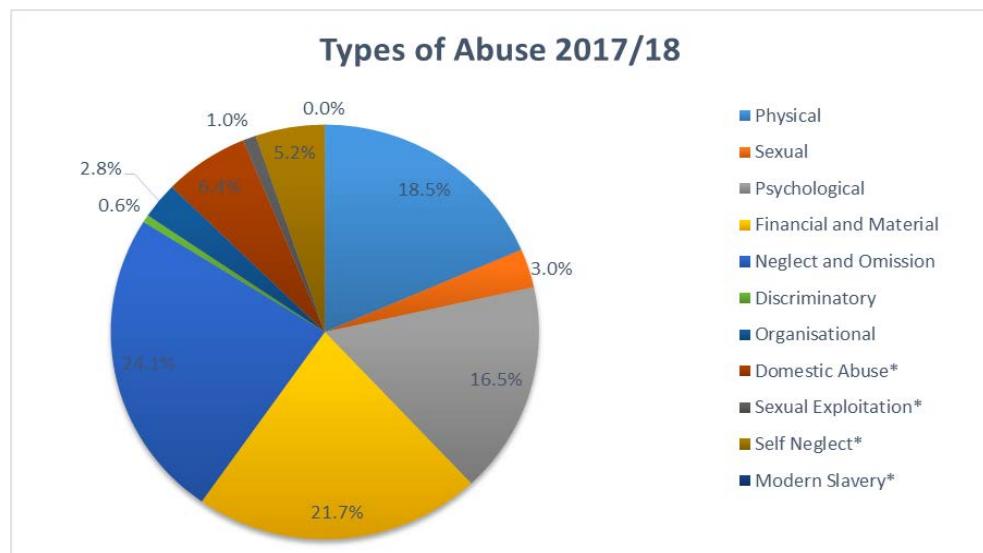
The most common types of abuse for 2017/18 were neglect and acts of omission 24%, finance and material 22%, physical 18.5% and psychological abuse 16%.

Financial and Material abuse has seen a significant increase this year compared to previous year; we consider this may be due to greater awareness of financial abuse across operational teams, being more robust in our financial assessment process, providing more in-depth financial reviews and therefore better detection and recording of financial abuse.

**Table 5 – Concluded enquiries by type of abuse**

Type of Abuse	2015/16	2016/17	2017/18
Physical	74	78	92
Sexual	20	18	15
Psychological	66	84	82
Financial and Material	62	67	108
Neglect and Omission	86	100	120
Discriminatory	0	4	3
Organisational	7	9	14
Domestic Abuse*	28	22	32
Sexual Exploitation*	1	0	5
Self Neglect*	45	21	26
Modern Slavery*	0	0	0

**Graph 1 - Type of abuse 2017-18 by concluded enquiries**



## Location of alleged abuse

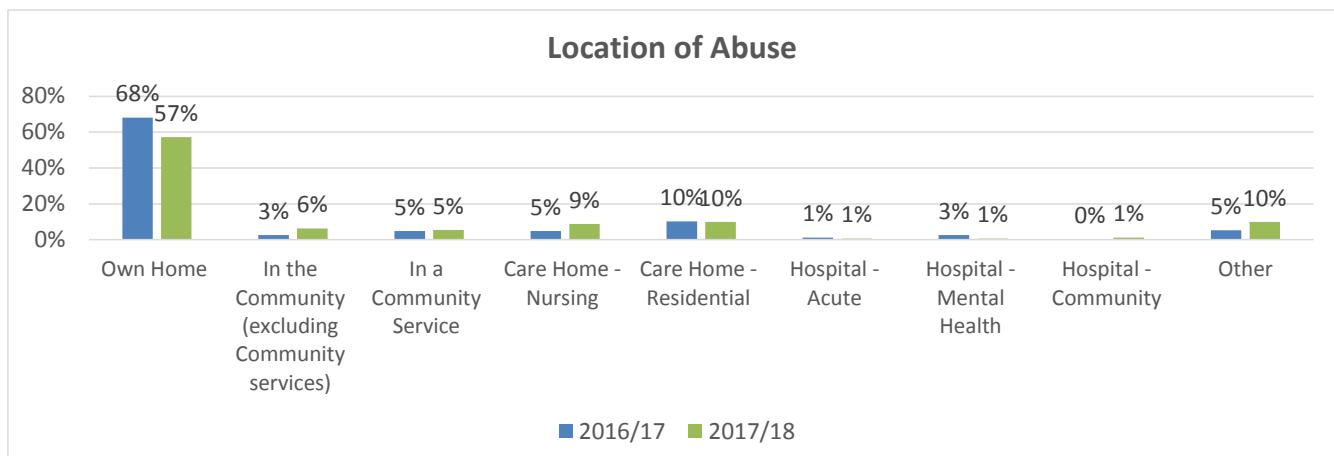
As with previous years the most common locations where the alleged abuse took place were a person's own home, 57%, and a care home (Residential or Nursing), 19%.

A person's own home consistently remains the place in which an abusive incident is more likely to occur. This demonstrates the continual need to raise awareness of safeguarding amongst all sectors of society and improving mechanisms to report those incidents. One of the West of Berkshire Safeguarding Adult Boards' priorities is to work with communities to raise awareness of adult safeguarding; we will continue to work with the Board to raise awareness and ensure that members of the public know what action to take.

**Table 6 – Location of abuse by concluded enquiries**

Location of Abuse	2016/17	2016/17 England	2017/18
Own Home	68%	44%	<b>57%</b>
In the Community (excluding Community services)	3%	3%	<b>6%</b>
In a Community Service	5%	3%	<b>5%</b>
Care Home - Nursing	5%	12%	<b>9%</b>
Care Home - Residential	10%	24%	<b>10%</b>
Hospital - Acute	1%	3%	<b>1%</b>
Hospital - Mental Health	3%	2%	<b>1%</b>
Hospital - Community	0%	1%	<b>1%</b>
Other	5%	8%	<b>10%</b>

**Graph 2 - Location of abuse 2017-18 by concluded enquiries**



## **Source of risk**

Graph 3 demonstrates those sources of risk for concluded enquiries.

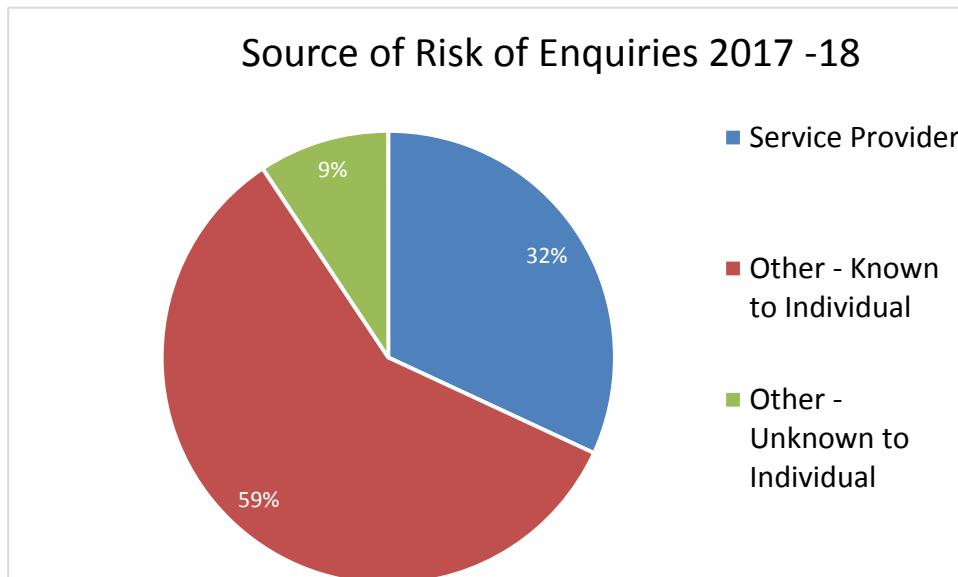
The majority of concluded Safeguarding enquiries involved a source of risk known to the individual (59%), only 9% were 'unknown'.

In 32 % of cases the source of risk was a 'service provider. The service provider support category refers to any individual or organisation paid, contracted or commissioned to provide social care.

Whilst 32% attributed to the provision of a service provider of social care support remains of concern, the pro active provision of support from West Berkshire's Care Quality team gives some assurance that issues which could result in a safeguarding enquiry in such settings are being addressed.

This further highlights the need to work proactively with provider agencies across West Berkshire to ensure that staff receive adequate and appropriate training and that any safeguarding concerns are reported appropriately.

**Graph 3 – Concluded enquiries by source of risk**



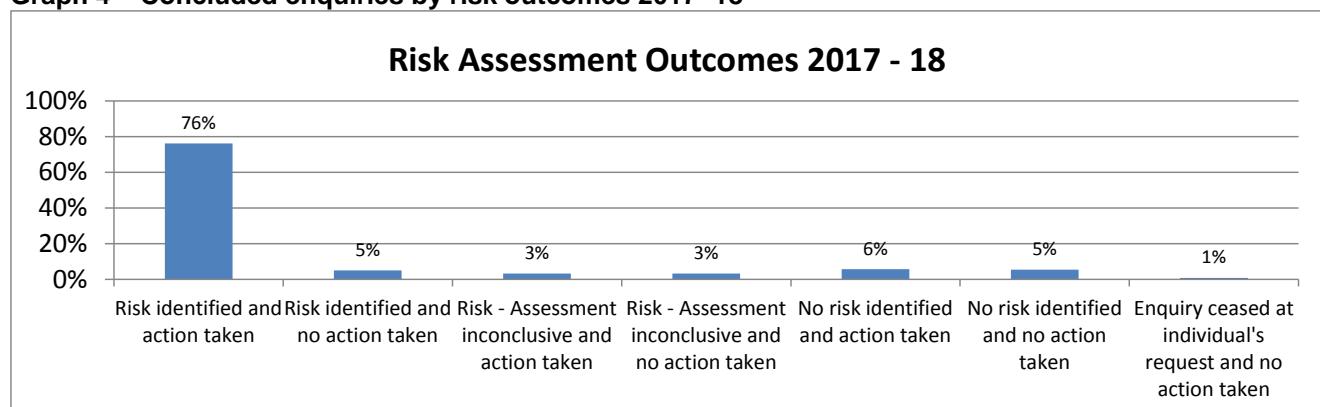
## Risk Assessment Outcomes, Action taken and result

Management of risk data is drawn from concluded cases.  
Data has been initially drawn from the 332 concluded enquiries.

Risk identified and action was taken in the majority, 76%, of cases.  
Risk identified but no action was taken in just 5% of cases; there are times where an individual can refuse support / intervention and have the capacity to make such decisions.

For the remaining cases, the risk assessment was inconclusive, there was no risk identified or the enquiry ceased.

**Graph 4 – Concluded enquiries by risk outcomes 2017 -18**

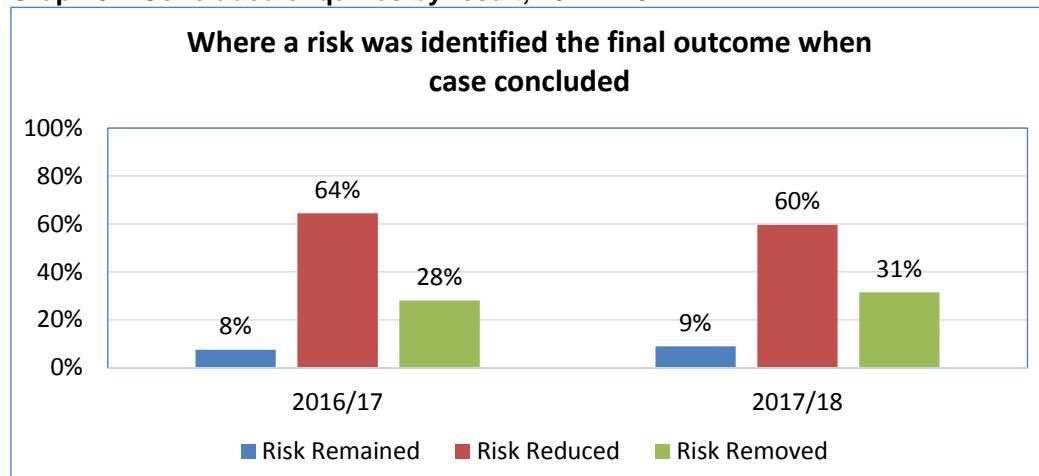


### Outcome of concluded case where a risk was identified

Graph 5 shows where a risk was identified the final outcome. (relates to 270 concluded enquiries)

Positively, risk was removed for 31% of cases and reduced for a further 60% of cases. Risk remains for only 9% of cases. It is acknowledged that there are some situations where an adult makes decisions that we don't necessarily agree with, but where they have capacity to make such decisions this needs to be respected.  
This is comparable with previous years.

**Graph 5 – Concluded enquiries by result, 2017 - 18**



## **Mental Capacity and Advocacy**

In order to achieve good outcomes for individuals subject to a concern or enquiry, it is important to hear their voice. There is a statutory requirement to offer the services of an advocate to a person subject to a safeguarding intervention or review, where that person meets certain requirements if there is no other suitable person able to advocate (for example a close family member or friend if appropriate).

In 2017 -18, where the individual lacked mental capacity **all** (100%) were supported by an advocate, family or friend. It should be noted the national average for providing advocates in England, recorded for 2016/17, was 73%.

## **Making Safeguarding Personal**

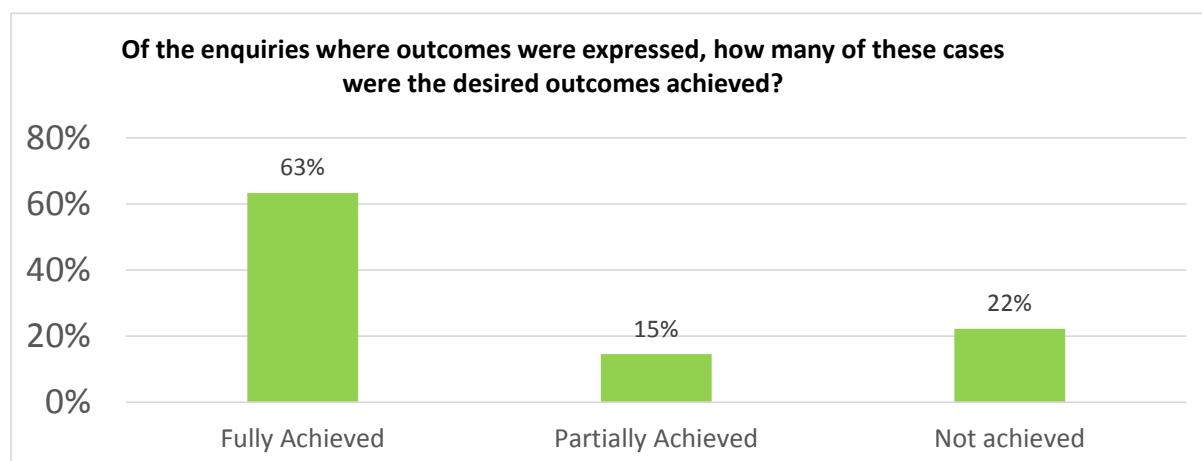
Making Safeguarding Personal (MSP) is a national initiative to improve the experiences and outcomes for adults involved in a safeguarding enquiry.

This initiative was adopted by the Government and enshrined in the Care Act 2014. By definition, a personal response to a safeguarding incident will mean different things to different people. Therefore obtaining data for outcomes has presented challenges. In 2017/18, 75% of all clients for whom there was a concluded case were asked about the outcomes they desired (either directly or through an advocate).

In order to benchmark usefully, options for outcomes were included as a guide, with an additional box for free text to capture those desired outcomes and wishes that were not reflected in the options provided. Clients can choose as many outcomes as they wish and so multiple choices are normal. The option 'to be and to feel safe' was most frequently selected.

Of those who were asked and expressed a desired outcome, 63% were able to achieve those outcomes fully, with a further 22% partially achieved. This is an improvement from 2016-17 where only 55 % fully achieved stated outcomes.

**Graph 7 – Concluded enquiries by expressed outcomes achieved.**



## Deprivation of Liberty Safeguards

The Deprivation of Liberty Safeguards (DoLS) is an amendment to the Mental Capacity Act 2005 and applies in England and Wales only. The Mental Capacity Act allows restraint and restrictions to be used – but only if they are in a person's best interests.

Extra safeguards are needed if the restrictions and restraint used will deprive a person of their liberty. These are called the Deprivation of Liberty Safeguards. DoLS authorisations must be applied for by care homes, nursing homes or hospitals (The Managing Authority) where they believe a person is living in circumstances that amount to a deprivation of liberty and that person lacks the capacity to consent to their care, treatment and accommodation, in order to prevent them from coming to harm. They apply to the Local Authority (The Supervisory Body) whose role is to arrange for the persons circumstances to be assessed in order to determine whether to grant or refuse an authorisation for those circumstances. Those living in other settings must have their deprivation considered by the Court of Protection.

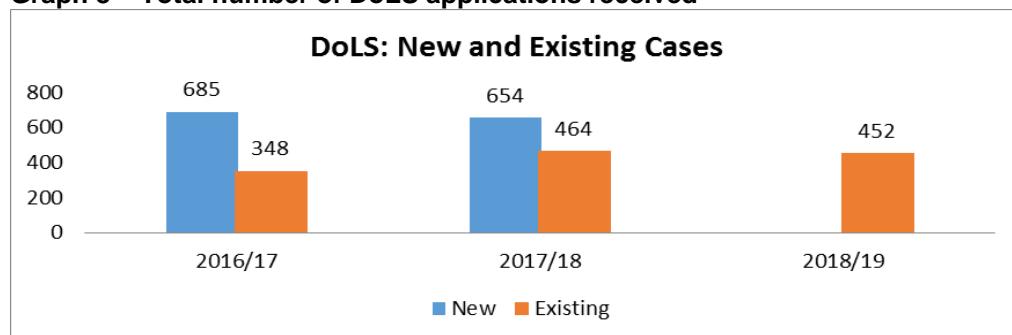
In 2017/18 further clarification from the Department of Health was issued regarding the reporting of DoLS, there are a few areas to note:

- We are now required to report '**Existing**' (active in the reporting year) and '**New**' applications; previously we only reported new applications or those carried over 'pending' a decision.
- The status of withdrawn is only to be used on rare occasions based on guidance from NHS Digital this year; non-urgent applications that were withdrawn were revised to Not Granted for 2017/18 reporting.

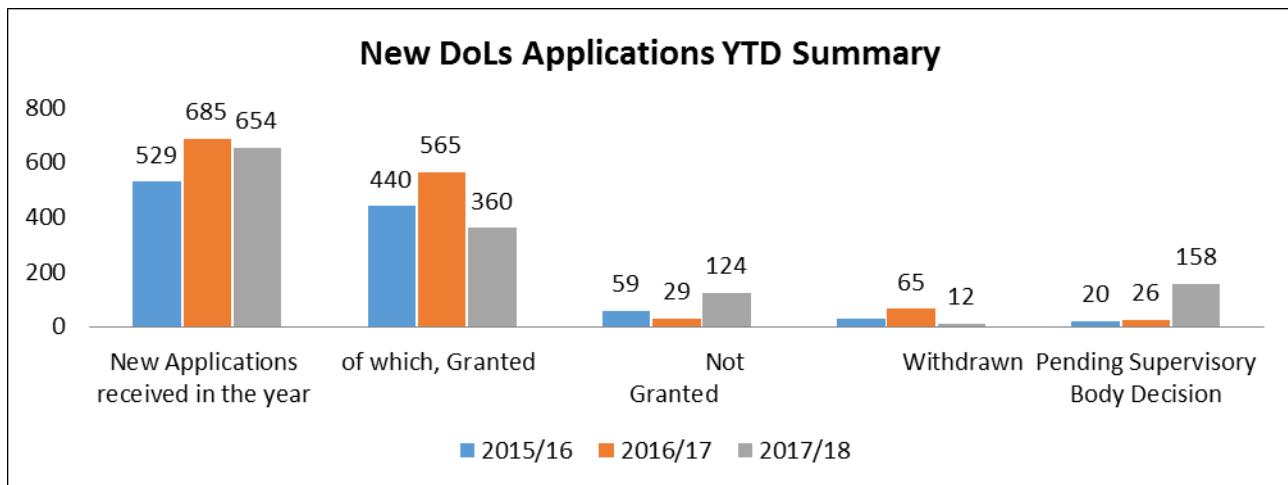
The table and graph below shows that the number of new applications has dropped slightly from 2015/16, but remains high at over 650 for 2017/18.

DoLS cases (new applications and existing cases)	2016/17	2017/18	2018/19
<u>New and Existing</u>	1033	1118	
<i>of which, New</i>	685	654	
<i>Existing</i>	348	464	452

Graph 8 – Total number of DoLS applications received



## New Applications by outcome



The number of 'pending' applications that we are reporting for 2017/18 is significantly higher than in previous years.

DoLS applications continues to rise nationally and remains an increasing pressure locally; as a service we are reviewing how applications are being managed.

## The Future

Activity levels for Safeguarding will continue to be closely monitored in West Berkshire. The development of our audit approach and effectiveness of RaMP will be monitored and reviewed.

A new action plan for West of Berkshire Safeguarding Adults Board will be developed and we will continue to work in partnership to deliver the identified outcomes locally.

Adult Social Care continues to strike a balance between daily operations dealing with incoming safeguarding concerns and applications for Deprivation of Liberty Safeguards authorizations with raising awareness of safeguarding.

## We have oversight of the quality of safeguarding performance

Feedback indicates that customers' desired outcomes are met, in line with Making Safeguarding Personal and the well-being principle.

We monitor how learning is shared and used to improve practice

We understand what the data tells us about where the risks are and who are the most vulnerable

We measure impact

## We listen to the service user, raise awareness of adult safeguarding and help people engage

We work with communities to raise awareness of adult safeguarding

We raise awareness of the Board and the Berkshire Policy and Procedures

Board membership reflects a wide and varied group of stakeholders



## West of Berkshire Safeguarding Adults Board Business Plan 2017-18



### We learn from experience and have a skilled and competent workforce

Learning is shared and used to improve practice

Development areas for 2017-18:

Safe recruitment

Allegations management

Record keeping

Self-neglect

Mental Capacity Act

Domestic Abuse

Mental Health

## High risk areas for 2017-18

Mental Capacity Act and DoLS

Self-neglect

Mental health

Domestic Abuse

## We work together effectively to support people at risk

People are supported by an advocate when they need it

We work within a framework of policies and procedures that keep people safe

Providers are supported to deliver safe, high quality services

We provide feedback to people who raise a safeguarding concern

We have a modern slavery strategic pathway

**West of Berkshire Safeguarding Adults Board Business Plan 2017-18**

<b>PRIORITY 1 We have oversight of the quality of safeguarding performance</b>						
<b>Outcome</b>	<b>Action</b>	<b>Lead</b>	<b>Timescale</b>	<b>Work in progress</b>	<b>RAG</b>	<b>Success criteria</b>
1.1 Feedback indicates that customers' desired outcomes are met, in line with Making Safeguarding Personal and the well-being principle.	a) Develop a core set of questions to collect feedback to ascertain the extent to which service users felt that they had been involved, supported, consulted and empowered during the safeguarding process.	Safeguarding Leads in Wokingham, west Berkshire and Reading Councils	April 2017	West Berkshire has developed a set of questions which have been shared with Wokingham and Reading to adapt and adopt.	G	Core set of questions to collect feedback from people in place in each Council.
	b) Mandatory feedback form to be added to the Councils' electronic systems for every statutory S42 enquiry to capture feedback at the end of the S42 enquiry	Safeguarding Leads in Wokingham, west Berkshire and Reading Councils	June 2017	Assurance required from each LA when complete.  West Berkshire has confirmed they have.  Reading have a form to be launched  Wokingham are working on implementation.  BM to track progress in 18/19.	A	Mandatory feedback form added to the Councils' electronic systems for every statutory S42 enquiry.

	c) Develop systems for capturing, recording and monitoring MSP outcomes.	Effectiveness and Oversight and Quality Subgroups	Jan 2018	The principles of MSP are well embedded in the peer review case file audit.	<b>G</b>	Systems are in place and feedback indicates that customers' desired outcomes are met
1.2 We understand what the data tells us about where the risks are and who are the most vulnerable	a) Audit outcomes are analysed by Oversight and Quality Subgroup and the Board takes required actions to address areas of identified concerns across partner agencies.	Oversight and Quality Subgroup	September 2017 and March 2018	An audit on S42 enquiries was undertaken in September 2017 which included to what extent Making Safeguarding Personal principles have been upheld, highlight report was taken to the board. There was no audit completed in March 2018.  A number of audits have been set within the 18/21 Business Plan.	<b>A</b>	Improvements in practice are evidenced in subsequent S42 case file audits.
	b) Develop a dashboard to present KPI data to the Board	Oversight and	December	Has gone live and is a	<b>G</b>	A clear overview of KPI

	on a quarterly basis	Quality Subgroup	2017	standing Board agenda item.		data is presented to the Board on a quarterly basis
	c) Develop understanding of local level of risk for victims of FGM by reviewing local and national FGM data	Oversight and Quality Subgroup	Annually – March 2018	Numbers of identified FGM victims in West Berkshire, is reported on the Boards Dashboard.  Carried over to 18/21 Business Plan – Ref 1.75		FGM data provided supports the Board's understanding of local level of risk for victims of FGM
	d) Develop understanding of local level of risk for victims of Modern Slavery by reviewing local and national Modern Slavery data	Oversight and Quality Subgroup	Annually – March 2018	Dashboard reports on numbers of concluded S42 enquiries by type of abuse which includes Modern Slavery.  Carried over to 18/21 Business Plan – Ref 1.76		Modern slavery data supports the Board's understanding of local level of risk for victims of modern slavery
<b>PRIORITY 2 -We listen to service users, raise awareness of safeguarding adults and help people engage</b>						
Outcome	Action	Lead	Timescale	Work in progress	RAG	Success criteria

2.1 Board membership reflects a wide and varied group of stakeholders	a) Representatives from Housing and Provider organisations to be invited to attend Board meetings	Independent Chair	Sept 2017	Housing representative invited from each LA.	<b>G</b>	Representatives from Housing and Provider organisations attend Board meetings.
2.2 Local communities know about safeguarding adults and the work of the Board	a) Easy read version of the Board's Annual Report 2015-16 to be published	Communication & Publicity Subgroup	May 2017	CLASP commissioned to produce easy read version of 2015-16 annual report; published on website	<b>G</b>	Wider range of people are able to understand the Board's work and priorities
	b) Community Awareness Event to raise awareness of safeguarding adults	Communication & Publicity Subgroup	March 2018	Events held in each area.	<b>G</b>	Community Awareness Event held in each area.
	c) The Board is assured that accessible safeguarding leaflets for customers and staff are available	Communication & Publicity Subgroup	June 2017		<b>G</b>	Safeguarding information is available in public places and partner agencies' websites
	d) Map partner agencies' external communication channels	Communication & Publicity	Nov 2017		<b>G</b>	Subgroup aware of partners' external

		Subgroup				communication channels
	e) Develop calendar of local and national events relevant to safeguarding	Communication & Publicity Subgroup	Nov 2017		G	Local and national events relevant to safeguarding are promoted
2.3 Raise awareness across partner organisations and amongst practitioners about the role of the Board, the website and Berkshire Policy and Procedures	a) a) New Berkshire Policy and Procedures website launched and promoted	Berkshire Policy and Procedures Subgroup	Dec 2017	Website for the Berkshire Policy and Procedures complete and launched	G	New Berkshire Policy and Procedures website launched and promoted
	b) b) Produce flyer for practitioners to raise awareness of the Board	Business Manager	April 2017	Developed and distributed across partner organisations	G	Flyer circulated across all partner organisations.
	c) Present Board's Annual Report 2016-17 to Health and Wellbeing Boards and other committees	Independent Chair	January 2018	Annual Report complete and due to be presented to HWB in January.	G	Independent Chair presents Annual Report 2016-17 to HWB in each area by January 2018

**PRIORITY 3 We learn from experience and have a skilled and knowledgeable workforce**

Outcome	Action	Lead	Timescale	Work in progress	RAG	Success criteria
3.1 The workforce has the capacity, capability, knowledge and skills to keep people safe and	a) Opportunities for practitioners to explore issues when working with people in Domestic Abuse	Learning and Development Subgroup	May 2017	Quarterly DA Forum established in Reading. Good attendance from a	G	Practitioners understand the dynamics of DA in terms of coercion and

improve safeguarding outcomes	situations			wide range of practitioners. Has been opened up to West Berkshire and Wokingham and has been promoted.	G	control
	b) Ensure Domestic Abuse awareness training and safeguarding training cross reference.	Learning and Development Subgroup	May 2017	Consistent training standards for Level 1 have been agreed and produced.	G	Consistent training standards for Level 1 produced.
	c) Promote good record keeping	Learning and Development Subgroup	Sept 2017	Record keeping is embedded across all safeguarding training standards. Issue to be raised at trainer meeting 25 May. Promote tools and training resources via Board's website and Briefing. Review results of case file audit peer review in August to confirm whether there is still	G	Case file audit peer review in August and February reveals improvement in recording skills.

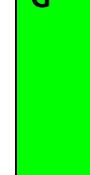
				an issue. To be addressed through supervision.		
d) Deliver Safeguarding Adults Train the Trainer programme (Wokingham BC deliver, open across the area)	Learning and Development Subgroup	April 2017	Course delivered; 8 attendees.	G	Course offered across West of Berkshire with positive evaluation response	
e) Joint Children's and Adults Safeguarding Conference on theme of Mental Health	Learning and Development Subgroup	23 Sep 2017	Conference took place as planned. Feedback is currently being evaluated.	G	140 attendees with at least 80% of delegates rating the event as good or excellent	
f) Establish programme of Safeguarding Bite Size Workshops for multi-agency professionals	Learning and Development Subgroup	March 2017	SAR Findings workshop took place in Sept; further workshops planned: Jan- Advocacy March - Allegations management.	G	Workshops attended by wide range of professionals	
g) Deliver core training programmes at all levels to support the sector.  Seek assurance that all SAB members deliver Level 1 to the	Learning and Development Subgroup	Ongoing		G	Training programmes delivered and evaluated.	

	agreed standards.  Measure the impact of training on a biannual basis				<b>G</b>	
	h) Report on training activity for 2016-17 for SAB annual report	Learning and Development Subgroup	May 2017	Complete.	<b>G</b>	Training data collated and reviewed
	i) Review and update the Workforce Development Strategy	Learning and Development Subgroup	Dec 2017	Complete.	<b>G</b>	Updated Strategy published on SAB website
3.2 Learning from SARs and other reviews has been shared and used to improve practice	a) The SAR Learning Monitoring Tool is used to monitor response to findings by partner agencies upon publication of SARs.	Effectiveness Subgroup	June 2017 and ongoing	Populated with information from Mrs H and Mr I.	<b>G</b>	The SAR Learning Monitoring Tool is completed and presented to the Board quarterly showing that learning from SARs is embedded within partner agencies.
	b) Multi-agency thematic audits to evaluate to what extent learning from SARs has been embedded. Priority areas for 2017 thematic audits agreed as: tissue viability, abuse in own home, dementia.	Oversight and Quality / Effectiveness Subgroup	Dec 2017	Dementia audit complete and report due presented to Board in June.  Tissue Viability Audit	<b>R</b>	Results of thematic audits are published and areas for development are identified for the Board to take appropriate action.

				presented to SAB.  Carried over to 18/21 Business Plan – Ref 1.80		
	c) Evaluation template for training to include question to evaluate how practitioners have taken on and embedded learning	Learning & Development Subgroup	May 2017	Training impact evaluation form agreed for use includes question on applying learning to practice	G	Amended evaluation template used to assess how practitioners have embedded learning

<b>PRIORITY 4 We work together effectively to support people at risk</b>						
<b>Outcome</b>	<b>Action</b>	<b>Lead</b>	<b>Timescale</b>	<b>Work in progress</b>	<b>RAG</b>	<b>Success criteria</b>
4.1 Involvement of advocates and IMCAs ensure person centred responses are promoted	a) Identify where there is a shortfall in the use of advocates and raise staff awareness as to how and when to involve advocates.	Oversight and Quality Subgroup	Dec 2017	Awareness raising article included in April's Board briefing. Bite size learning session planned for January. New	G	New approaches to person centred responses are promoted. Quarterly PI data indicates improvement in use of advocates.

				indicator included in KPI set.		
4.2 Providers are supported to deliver safe, high quality services and the Board is assured that robust safeguarding processes are adhered to in line with Care Act requirements	a) DASS and other commissioners provide assurance to the Board (through the annual Self-Assessment audit) that robust safeguarding processes are adhered to by commissioned services in line with Care Act requirements.	DASS and other commissioners provide assurance	Jan 2018	Question included in Self-Assessment audit: B2  2/3 LA's assessed as Green  1/3 LA assessed as Amber with an action plan in place to address shortfalls.	G	Board is assured that robust arrangements are in place to support and challenge providers
4.3 We work within a framework of policies and procedures that keep people safe	a) Organisations have in place policies and processes to manage allegations against persons in position of trust	Task and Finish Group	Sept 2017	Draft Framework for the <i>Management of Allegations against Persons in Position of Trust</i> endorsed by Board in September. Under consideration by the Berkshire Policy and Procedures group for inclusion in the P&P.  Carried over to 18/21	A	Board is assured that partner agencies have robust policy in place to manage allegations

				Business Plan – Ref 1.37		
	b) Promote e-learning Safe Recruitment module	Learning and Development Subgroup	July 2017	Promoted in January 2018 Boards Briefing		e-learning Safe Recruitment module is promoted and used by practitioners
4.4. We provide feedback to people who raised a safeguarding concern	a) Each Local Authority to provide quarterly performance data on the proportion of concerns where feedback was provided to the referrer.	Oversight and Quality Subgroup / Effectiveness Subgroup	Sept 2017	Indicator included in KPI set for Q3 and 4 data		Board is assured that feedback is provided to the referrer and takes actions to ensure practice is improved
4.5 We are assured that local arrangements to support and minimise risks for people who self-neglect are effective	a) Raise awareness of the issues and improve practice for working with those who self-neglect	Learning and Development Subgroup  Business Manager	Sept 2017  June 2017	Workshop included in Conference programme and embedded in training standards  Link to the Hoarding film produced by Birmingham SAB via Youtube to be included on Board's website and promoted in Board's Briefing		Raise awareness of self-neglect through website and workshop

	b) Review undertaken to inform the Board of prevalence of self-neglect cases reported under safeguarding framework, and outcomes for the individual	Effectiveness Subgroup	Sept 2017	External resources commissioned to undertake review, due to be presented at the Board in September 2018  Carried over to 18/21 Business Plan – Ref 1.38-1.40	A	The Board understands how cases of self-neglect are responded to and identifies areas for further development
	c) Partner agencies have clear policies and procedures in place to manage complex cases and support those who self-neglect or choose not to engage, in line with MSP and Duty of Care	Partner agencies	Jan 2018	Wording amended in section B1 of self-assessment audit template.  To be incorporated in external review 4.5b.  Carried over to 18/21 Business Plan – Ref 1.38-1.40	A	Board is assured that each agency has clear policies and procedures to manage complex cases
4.6 Practitioners understand and can apply the MCA consistently in practice (including consent, best	a) MCA focused week of workshops for practitioners	Effectiveness / Learning and Development / Communication	October 2017	Funding confirmed. Workshops scheduled for week of 16 Oct.	G	MCA focused week of workshops attended by practitioners

interest, DoLS and restraint)		Subgroups				
4.7 We are assured that local arrangements to support people who have Mental Health issues are effective	a) Raise awareness of current governance structures and accountability for mental health in the locality	Independent Chair	June 2017	Presentation at September Board meeting; mental health subgroups asked to consider safeguarding issues and escalation processes; results feedback at December Board meeting.	G	Partner agencies have clarity about current governance structures for mental health
4.8 We are assured that local arrangements to support and minimise risks for people who experience Domestic Abuse	a) Event on Domestic Abuse for partners to explore issues, understand priorities of each Domestic Abuse Strategy and identify gaps.	Independent Chair / Business Manager	Feb 2017	Carried over to 18/21 Business Plan – Ref 1.24	R	The Board is assured that commissioned DA services in each area are effective.
	b) A&E data shared to help each LA identify hotspots in their area and triangulate information	Oversight and Quality Subgroup	Oct 2017	Carried over to 18/21 Business Plan – Ref 1.23	R	Data shared to inform Board's understanding of DA
4.9 We have a Modern Slavery strategic	a) Modern Slavery strategic pathway agreed and	Policy and Procedures	Dec 2017	Carried over to 18/21 Business Plan – Ref	R	Modern Slavery strategic pathway agreed and

pathway in place	published	Subgroup		3.33		published
	b) Review and promote modern slavery e-learning	Learning and Development Subgroup	Dec 2017	E-learning module available to all LA's, who are able to share e learning tools with partners.	A	Modern slavery e-learning reviewed and promoted

**RAG Status**

There are a number of actions in this Business Plan that are Red and Amber. Progress has not been made as expected due to a significant number of staff changes in partner organisations in Quarter 4, and the absence of a Safeguarding Adults Board Business Manager from January 2018 until June 2018. Membership of the Board and Subgroups is under review and outstanding actions will be brought over to the 2018/21 Business Plan.