

# Annual Report April 2020 – March 2021



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## Introduction by Havering Safeguarding Adults Board Independent Chair, Brian Boxall



I am pleased to introduce you to the Havering Safeguarding Adults Board (SAB) annual report for 2020/21.

The past year has been dominated by the Covid-19 pandemic, which has presented both our community and local safeguarding partner agencies with unique challenges, and I would like to send my condolences on behalf of the SAB to those who have lost loved ones or been affected by the pandemic.

The long-term impact of Covid-19 has yet to be fully established, but it is becoming clear that the impact of isolation on members of the community has led to increased demand on a range of services. The SAB

has continued to monitor the situation and was provided with regular updates as to how partners were working together to provide support to the community and ensuring safeguarding arrangements remained effective.

Clearly evident was the dedication of staff across all agencies, who continued to work hard to ensure the most vulnerable remained as safe as possible despite having to operate in difficult, restrictive circumstances. Also evident was the desire of agencies to work more closely together to support each other. This was strongly evidenced in the close relationship established between the Care Home sector and leaders in Social Care and Health, to reduce as far as possible the risks to their vulnerable community.

Like everyone else, the SAB had to find new ways to operate using online processes, enabling partners to continue to meet and progress their multi-agency work. This included ongoing participation in Alcohol Change UK's Safeguarding Vulnerable Dependent Drinkers Project. The SAB was able to hold a full programme during Safeguarding Week in November 2020, which consisted of an online joint Adult and Child Safeguarding Conference and themed seminars. This was well received, with good attendances. Feedback is evidenced in this annual report.

While the SAB did not commission any new Safeguarding Adults Reviews (SARs) during the year, it did conclude the SAR about SW. Learning events took place and a seven-minute briefing was produced for general circulation and use by partners. Production of seven-minute briefings will be expanded in the coming year.

2021/22 will continue to be dominated by Covid-19 and the SAB will continue to work closely with partners, including the voluntary sector, to develop collaborative responses. The SAB will also be creating a new website, which will be a central point of safeguarding information for staff and the community.

I would to thank members of the SAB and the subgroups for all their work and continued commitment to joint working. I would also like to acknowledge the work of the SAB business unit, who have ensured that the Board continued to operate and be effective in its role of safeguarding and promoting the wellbeing of adults in Havering.

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### Multi-agency safeguarding in Havering

The Havering Safeguarding Aduts Board (SAB) is made up of representatives from a wide range of organisations and servies across the local multi-agency safeguarding partnership, including:



The Havering SAB is responsible for ensuring that agencies work together to safeguard and promote the wellbeing of vulnerable adults in the borough, and the group meets every two months to drive and oversee safeguarding partnership activity.

The Havering SAB is supported by a multi-agency Quality and Effectiveness Working Group, which also meets regularly throughout the year to scrutinise performance data and other sources of information to monitor the effectiveness of the local multi-agency system for safeguarding vulnerable adults.

The SAB also has a multi-agency Learning and Improvement Executive meets twice a year to monitor and progress the implementation of learning from Safeguarding Adults Reviews.

### Role and core duties of the Havering Safeguarding Adults Board

The <u>Care Act statutory guidance</u> defines the role and core duties of a Safeguarding Adults Board:

- Each local authority must set up a Safeguarding Adults Board (SAB). The main objective of the SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area who meet <u>the criteria for care</u> <u>and support</u>.
- The SAB has a strategic role that is greater than the sum of the operational duties of the core partners. It oversees and leads adult safeguarding across the locality and will be interested in a range of matters that contribute to the prevention of abuse and neglect. These will include the safety of patients in its local health services, guality of local care and support services, effectiveness of prisons and premises in safeguarding offenders and awareness and approved responsiveness of further education services. The SAB will need intelligence on safeguarding in all providers of health and social care in its locality (not just those with whom its members commission or contract). It is important that SAB partners feel able to challenge each other and other organisations where it believes that their actions or inactions are increasing the risk of abuse or neglect. This will include commissioners, as well as providers of services.
- The SAB can be an important source of advice and assistance, for example in helping others improve their safeguarding mechanisms. It is important that the SAB has effective links with other key partnerships in the locality and share relevant information and work plans. They should consciously cooperate to reduce any duplication and maximise any efficiency, particularly as objectives and membership is likely to overlap.
- A SAB has 3 core duties:
  - it must publish a strategic plan for each financial year that sets out how it will meet its main objective and what the members will do to achieve this. The plan must be developed with local community involvement, and the SAB must consult the local Healthwatch organisation. The plan should be evidence based and make use of all available evidence and intelligence from partners to for and develop its plan;

- it must publish an annual report detailing what the SAB has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any Safeguarding Adults Reviews and subsequent action;
- it must conduct any Safeguarding Adults Reviews in accordance with Section 44 of the Care Act.
- Safeguarding requires collaboration between partners in order to create a framework of inter-agency arrangements. Local authorities and their relevant partners must collaborate and work together as set out in the co-operation duties in the Care Act and, in doing so, must, where appropriate, also consider the wishes and feelings of the adult on whose behalf they are working.
- Local authorities may cooperate with any other body they consider appropriate where it is relevant to their care and support functions. The lead agency with responsibility for coordinating adult safeguarding arrangements is the local authority, but all the members of the SAB should designate a lead officer. Other agencies should also consider the benefits of having a lead officer for adult safeguarding.
- Each SAB should:
  - identify the role, responsibility, authority and accountability with regard to the action each agency and professional group should take to ensure the protection of adults;
  - establish ways of analysing and interrogating data on safeguarding notifications that increase the SAB's understanding of prevalence of abuse and neglect locally that builds up a picture over time;
  - establish how it will hold partners to account and gain assurance of the effectiveness of its arrangements;
  - o determine its arrangements for peer review and self-audit;
  - establish mechanisms for developing policies and strategies for protecting adults which should be formulated, not only in collaboration and consultation with relevant agencies but also take account of the views of adults who have needs for care and support, their families, advocates and carer representatives.
  - develop preventative strategies that aim to reduce instances of abuse and neglect in its area;
  - identify types of circumstances giving grounds for concern and when they should be considered as a referral to the local authority as an enquiry;

- formulate guidance about the arrangements for managing adult safeguarding, and dealing with complaints, grievances and processional and administrative malpractice in relation to safeguarding adults;
- develop strategies to deal with the impact of issues of race, ethnicity, religion, gender and gender orientation, sexual orientation, age, disadvantage and disability on abuse and neglect;
- balance the requirements of confidentiality with the consideration that, to protect adults, it may be necessary to share information on a 'need-toknow' basis;
- identify mechanisms for monitoring and reviewing the implementation and impact of policy and training;
- carry out safeguarding adult reviews and determine any publication arrangements;
- o produce a strategic plan and an annual report;
- evidence how SAB members have challenged one another and held other boards to account;
- promote multi-agency training and consider any specialist training that may be required. Consider any scope to jointly commission some training with other partnerships, such as the Community Safety Partnership.
- Strategies for the prevention of abuse and neglect is a core responsibility of a SAB and it should have an overview of how this is taking place in the area and how this work ties in with the Health and Wellbeing Board's, Quality Surveillance Group's (QSG), Community Safety Partnership's and CQC's stated approach and practice. This could be about commissioners and the regulator, together with providers, acting to address poor quality care and the intelligence that indicates there is risk and care may be deteriorating and becoming abusive or neglectful. It could also be about addressing hate crime or anti-social behaviour in a particular neighbourhood. SAB will need to have effective links and communication across a number of networks in order to make this work effectively.
- Within the context of the duties set out at paragraph 14.2, safeguarding partnerships can be a positive means of addressing issues of self-neglect. The SAB is a multi-agency group that is the appropriate forum where strategic discussions can take place on dealing with what are often complex and challenging situations for practitioners and managers as well as communities more broadly.

### Purpose of the annual report

As directed in <u>The Care Act 2014</u>, Safeguarding Adults Boards must publish an annual report on:

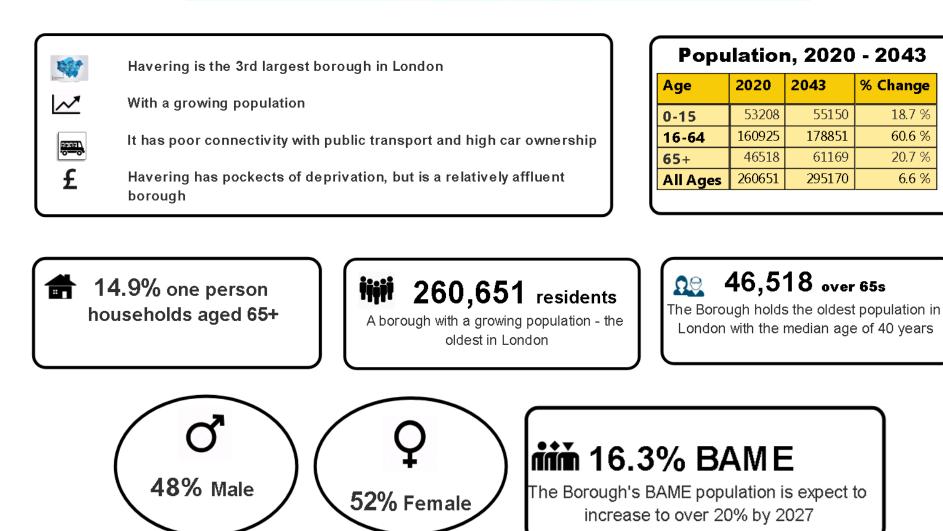
- what it has done during that year to achieve its objective;
- what it has done during that year to implement its strategy;
- what each member has done during that year to implement its strategy;
- the findings of Safeguarding Adults Reviews which have concluded in that year (whether or not they began in that year);
- the Safeguarding Adults Reviews which are ongoing at the end of the year (whether or not they began in that year);
- what it has done during the year to implement the findings of Safeguarding Adults Reviews; and
- where it decides during the year not to implement a finding of a Safeguarding Adults Review, and the reasons for that decision.

Further direction on Safeguarding Adults Board annual reports is provided in the <u>statutory guidance</u>, which lists the following points for consideration:

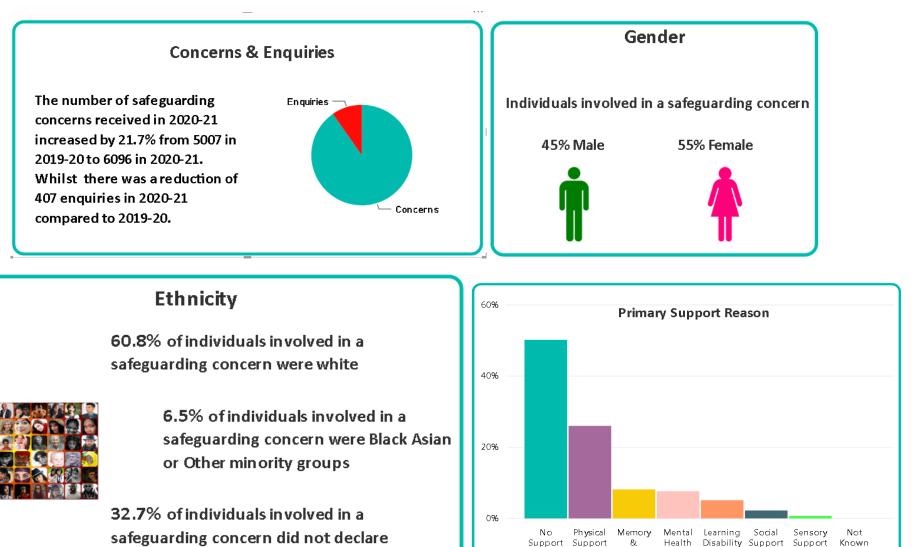
- evidence of community awareness of adult abuse and neglect and how to respond;
- analysis of safeguarding data to better understand the reasons that lie behind local data returns and use the information to improve the strategic plan and operation arrangements;
- what adults who have experienced the process say and the extent to which the outcomes they wanted (their wishes) have been realised;
- what front line practitioners say about outcomes for adults and about their ability to work in a personalised way with those adults;
- better reporting of abuse and neglect;
- evidence of success of strategies to prevent abuse or neglect;
- feedback from local Healthwatch, adults who use care and support services and carers, community groups, advocates, service providers and other partners;
- how successful adult safeguarding is at linking with other parts of the system, for example children's safeguarding, domestic violence, and community safety;
- the impact of training carried out in this area and analysis of future need; and
- how well agencies are co-operating and collaborating.

#### Local Demographics and Safeguarding Performance Data









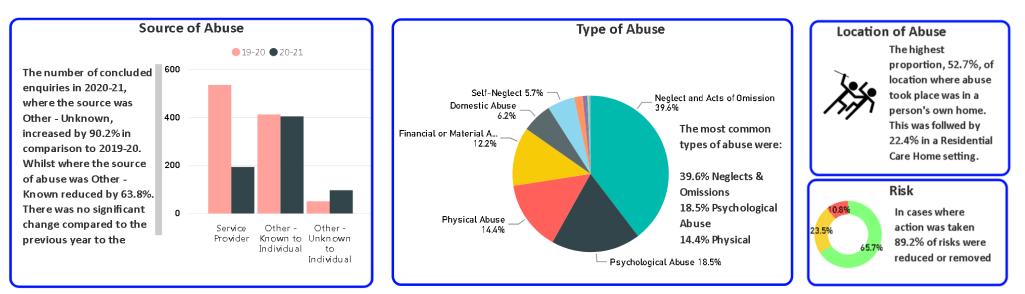
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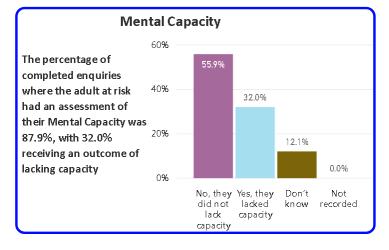
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their ethnicity





N.B. The staturory definion of Neglect and Acts of Ommisson includes 'ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of necessities of life such as medication, adequate nutrition and heating'.





#### Commentary on safeguarding performance during 2020-21

During the year April 2020 to March 2021 the number of safeguarding concerns reported to Havering Adult Social Care (ASC) increased but, conversely, the conversion of concerns to Section 42 enquiries decreased.

The Police continued to be the largest referrer, and the prevalence of reported concerns not meeting threshold for Section 42 was attributed to the high volumes of new recruits arriving in the Metropolitan Police's East Area Basic Command Unit as part of the national uplift of 20,000 additional police officers in England and Wales by March 2023.

Local Police representatives explained that the scale and speed of the uplift was resulting in the arrival of new recruits whose training still needed to be completed, including on safeguarding thresholds. Therefore, a commitment was made for ASC and Police representatives on the SAB to work together to produce local guidance for officers on reporting safeguarding concerns, planning for which is now underway.

In addition, ASC completed some work with Barking & Dagenham, Havering and Redbridge University Hospitals NHS Trust (BHRUT) on reporting safeguard concerns, which reduced the proportion received from them which did not meet threshold. It was agreed that ASC would undertake similar work with Havering Housing Services.

However, the Covid-19 pandemic was also identified as a factor contributing to the increase in safeguarding concerns received by ASC. For example, there were indications of more adults presenting with acute mental health challenges due to the social isolation resulting from the national lockdown.

The pandemic was also noted to have resulted in more reports of domestic abuse, hoarding and self-neglect, after local residents had reached out to neighbours and found them living in difficult circumstances. Despite this, there was a decrease in the number of section 42 enquiries in relation to self-neglect and hoarding compared to the previous year, which was attributed to professionals doing fewer face-to-face visits due to the pandemic.

There were also instances of carers having difficulty with, or even being assaulted by adults with cognitive impairments who did not understand the lockdown restrictions. Another arising issue was adults residing with their parents and displaying aggressive or coercive and controlling behaviour towards them. There were a number of referrals concerning older adults wanting to flee domestic abuse risks presented by partners they had been with for 20, 30 or 40 years.

Safeguarding concerns specifically relating to Covid-19 included possible deprivations of liberty, with adults being discharged from hospital to care homes and then wanting to return to their own homes but this not being acted on. Concerns were also raised about alleged poor staffing levels in care homes, failure to use personal protective equipment (PPE) and inappropriate actions from providers in response to residents testing positive for Covid-19.

There was a decrease of 5% in safeguarding referrals from care homes compared to the previous year, although there was referrals began to increase after the lockdown. The main presenting issues continued to be around neglect and acts of omission.

### Overview of safeguarding partnership activity during 2020-21

In April 2020, the SAB responded to the Covid-19 pandemic and resulting national lockdown by migrating its meetings onto an online platform. Early on, partnership discussion focused on how agencies were responding to a safeguarding landscape suddenly altered by the pandemic and partners provided each other with updates covering the following issues:

- how public behaviour had changed;
- how service provision had changed;
- what risks or potential risks were emerging;
- what mitigating action was been taken and what further changes may have been required; and
- whether there were any constraints on agencies' ability to respond.

Meeting virtually six times through the year, the SAB closely monitored these issues and, eventually, agencies' recovery plans. In addition, from May 2020 onwards, the Independent Chair of the SAB joined the local Silver Partner virtual meetings chaired by the Director of Public Health, alongside representatives from the Local Authority, the Police, Probation, NELFT and BHR CCGs, to participate in the discussion and planning in response to the pandemic and seek assurances in relation to safeguarding issues.

During 2020/21, two member agencies, the Havering Care Association (HCA) and Compact, were welcomed onto the SAB. As a Board member, the chair of the HCA represents care homes in the borough and ensures that their interests are considered within multi-agency partnership discussion and planning. The close partnership working this enabled between the Havering Care Association and Adult Social Care was particularly useful in the context of the Covid-19 pandemic. A long-standing forum promoting effective co-operation between statutory and voluntary sector agencies in Havering, Compact is also represented on the SAB by its chair, ensuring that its work

is strongly informed by the safeguarding agenda, and that the voices of the voluntary sector are clearly articulated within multi-agency safeguarding discussion and planning. Since the direct recruitment of Compact as a SAB member agency, plans to develop a Prevention and Community Engagement subgroup have been discontinued as its aims and objectives were in many ways duplicating those of Compact.

In October, the Independent Chair of the SAB wrote an open letter to practitioners across the local multi-agency safeguarding partnership acknowledging the unique set of challenges presented by the pandemic, thanking them for their tireless work to safeguarding and promote the wellbeing of adults in Havering, and asking them to 'please stay safe, look after yourselves, continue to support each other and continue to work in partnership'.

In December, Housing Services submitted a bid to the Department of Health (DoH) to fund an initiative to support rough sleepers discharged from hospital to divert them from a return to the streets, a pathway model that had proved very successful elsewhere in enabling joined-up partnership working and co-ordination. Housing worked with the Department for Work and Pensions (DWP) to ensure service alignment, and the DWP in turn were working with CentrePoint to commission support services.

The plans included accommodating rough sleepers with complex drug and alcohol needs in properties staffed on a 24-hour basis, with medical support and casework provided during the day, and caretaking and security services at night. Although Housing's bid to the DoH for funding proved unsuccessful, preparations were made for a fresh bid in 2021/22. And, in the meantime, Housing worked closely with Peabody and a range of other services to identify rough sleepers and ensure their needs were met, including those relating to difficulties with mental health, drugs and alcohol.

In February, work was done to revise the terms of reference for Havering's Community MARAC, which is chaired by the Director of Adult Services, and clarify the types of complex cases that could be referred to this forum for multi-agency planning and discussion. The revised terms of reference was circulated to staff across the local partnership, alongside advice on how the Community MARAC can be used to unblock barriers in complex cases if initial problem-solving processes, such as management discussions or professionals meeting, prove unsuccessful. This work also had the positive effect of prompting the London Fire Brigade to re-establish their involvement with the Community MARAC.

In January, the Board Manager of the SAB accepted an invitation to co-author, with Professor Christine Cocker at the University of East Anglia, an academic paper reviewing the work done in Havering on developing transitional safeguarding services in response to the SAR about Ms A published in 2017. Drawing on local multi-agency input into new initiatives including The Cocoon and the Transitions Panel, the article

was being prepared for inclusion in a special Transitions edition of the peer-reviewed *Practce* social work journal, to be published during 2021/22.

In the early part of 2021, the Havering SAB began working with colleagues on the neighbouring Barking & Dagenham and Redbridge SABs on developing plans to collaborate on an audit of multi-agency arrangements for safeguarding adults across the North East London tri-borough using the Safeguarding Adults Partnership Assessment Tool (SAPAT), thereby reducing the administrative burden on agencies shared by all three partners, such as the Police, BHRUT and NELFT. The audit is expected to take place in Autumn 2021.

#### Key safeguarding partnership achievements during 2020-21

#### Multi-agency safeguarding training

The SAB strengthens multi-agency arrangements to safeguard and promote the wellbeing of adults in Havering by providing a comprehensive training and workforce development programme, free at the point of access, for all professionals and volunteers across the local partnership.

As well as providing comprehensive learning on specific safeguarding issues, training delivered in a multi-agency setting brings professionals and volunteers together with colleagues from different services and organisations, enabling greater understanding of different roles and responsibilities within the partnership.

Training needs are identified through learning from local, regional and national case reviews, as well a wider research and policy update, and consultation with safeguarding leads across the partnership on emerging areas of priority.

The SAB's multi-agency training and workforce development offer is ranged across several entry points to ensure that relevant learning is available to staff at all levels of specialism and expertise:

- Level 1: At this level, courses are designed to raise awareness and understanding, and are generally offered as introductory courses. The target audience is staff who require basic awareness training, those who work indirectly with children, young people and families, or those who require basic refresher training.
- Level 2: This level focuses on knowledge and application of learning, and skills and behaviours required for effective inter-agency working. The target audience is staff and volunteers who are in regular contact, or who have periods of irregular but intense contact, with children, young people and families.
- Level 3: Training at this level focuses on critical thinking, analysis and management. The target audience is supervisors, managers and specialist

service leads who already have knowledge of safeguarding and wish to maintain and develop their level of skill.

- **Suitable for all:** These training courses are open to all professionals working with children, young people and families.
- **Topic-specific briefings:** This learning concentrates on highly focused safeguarding topic areas and is intended for all professionals who wish to broaden their knowledge in a particular area.

The published brochure for <u>2020/21</u> training programmes, covering the multi-agency partnerships for both adults and children, demonstrates the wide variety of safeguarding themes and topics included.

#### Havering Safeguarding Week 2020

Havering Safeguarding Week 2020 ran from Monday 2<sup>nd</sup> to Friday 6<sup>th</sup> November, beginning with the annual Safeguarding Conference and continuing throughout the week with learning events and briefings delivered to staff from across the local multi-agency partnership on a wide range of current and emerging issues around adult safeguarding.

Due to the new ways of working brought about by the Covid-19 pandemic, the entire week of events was delivered online for the first time.

2020's Safeguarding Conference included an opening address by SAB Independent Chair Brian Boxall and a discussion with Director of Adult Services about different ways of working, as well as an update from Mike Ward from Alcohol Change UK on the Safeguarding Vulnerable Alcohol Dependent Drinkers project and an item from Ciaran White of Havering Mind on the impact of Covid-19 on mental health.

Learning events throughout the rest of Safeguarding Week, attended by practitioners from a range of agencies across the partnership, included the following topics:

- Dementia and the impact of Covid-19
- Domestic violence awareness
- Substance abuse awareness
- Universal Credit
- Adult mental health first aid
- Better Living and strengths-based approaches
- Hate crime and Prevent
- Gambling and gaming
- Suicide and self-harm
- Homeless population and rough sleepers
- Mental Capacity Act

Evaluations of events during Safeguarding Week 2020 completed afterwards by participants included the following feedback.

From a Family Support Worker who attended the Safeguarding Conference:

What did you like / find most useful about the conference?

What I liked about the briefing was the welcome message by Brian Boxall where he talked about the need to keep ourselves as well as the people we work with safe and also follow government guidelines. All the speakers did an amazing job and what I found useful was the explanation given to Designated Nurses Adult Safeguarding and the type of support they provide to the community. This was my first-time coming across that and I think I need to do more reading on that. I also liked the briefings on the purpose of local multi-agency arrangements.

From a Housing Officer who attended the briefing on dementia and the impact of Covid-19:

What did you like / find most useful about the briefing

The briefing was very interesting and gave me an insight to how covid has affected people with dementia and their carers. I was pleased to hear that Telecare can install a bogus caller ring door bell that can go directly to the police if there are any concerns. I was not aware of this and believe that it a really good tool to have for vulnerable and elderly tenants.

From an Occupational Therapist who attended the briefing on dementia and the impact of Covid-19:

What did you like / find most useful about the briefing

Found the statistics shocking about how many of the people who have dies of covid in the UK had dementia. It was useful to hear real people's stories and those of carers and family and friends of people with dementia.

From a Housing Officer who attended the briefing on suicide and self-harm:

What did you like / find most useful about the briefing

The information provided throughout the training was very good. It gave me a better understanding of suicide and self harm and how to overcome barriers in talking about it. We were given good advice to not be afraid to ask some one if they are have suicidal thoughts as this will not encourage them to do it, but shows that we understand the complexity of their pain. This was very useful information. From a Social Worker who attended the Mental Capacity Act workshop:

What did you like / find most useful about the workshop

I found the case studies very useful because it helped me to reflect on a real case scenario what intervention methods other professional have used and this learning will be transferred to future similar cases and this will help improve my practice.

From a Housing Officer who attended the Mental Capacity Act workshop:

What did you like / find most useful about the workshop

I liked that you had a psychiatrist leading. It was good hearing what the methods are and how they come to the conclusion of capacity or not. When dealing with people this helps me to pick up any red flags or concerns.

From a Vicar who attended the briefing on Universal Credit:

Any other comments

No, just thank you for these Safeguarding Courses, they are really helpful to my ministry in helping me understand issues of concern in my community.

### Continued participation in Alcohol Change UK's Safeguarding Vulnerable Dependent Drinkers Project

During 2020/21, the Havering SAB continued to participate in <u>Alcohol Change UK</u>'s national, multi-partner project to develop guidance and training on responding to vulnerable adults who are chronic and change-resistant dependent drinkers.



Alongside the Havering SAB and many other SABs across the country, Alcohol Change UK are aiming to improve local practice as well as challenging and informing central government about challenges required at a national level.

Alcohol Change UK is working in partnership on the project with Professor Michael Preston-Shoot and it is being led by Mike Ward, who heads up their Blue Light project on complex drinkers, winner of both a Guardian Public Service Award and a Royal Society of Public Health Award.

Adapting to the sudden shift to remote working brought about by the Covid-19 pandemic, during 2020/21 the project proceeded through its seven stages:

- Scoping the problem
- Identifying good practice
- Building a consensus on best practice
- Developing and publishing national guidance
- Making recommendations for change
- Developing a training course
- Providing local training and presentations

In October 2020, Alcohol Change UK hosted a 90-minute online workshop for practitioners across Havering's multi-agency safeguarding partnership to consider the primary aim of the project – to improve the wellbeing and safety of adults who are chronic and change-resistant or change-ambivalent dependent drinkers – and how this aim can be pursued through four specified objectives:

- Clarifying how and when to use the Care Act 2014, the Mental Capacity Act 2005 and the Mental Health Act 1983 (revised in 2007) to protect and support this group of clients
- Identifying other legal powers which could be used, e.g. the Anti-social Behaviour, Police and Crime Act 2014
- Describing the practice that will make these powers work most effectively
- Describing the governance, agency management and inter-agency arrangements that will support this work.

During November and December 2020, practitioners in Havering were invited to attend a series of four webinars delivered by Alcohol Change UK as part of the project, focusing on specific themes:

- Foetal Alcohol Spectrum Disorders and Mental Capacity (Dr Raja Mukherjee)
- Alcohol Dependency Lessons from Safeguarding Adult Reviews (Professor Michael Preston-Shoot)
- Alcohol, Neurobiology and Mental Capacity (Dr Stefania Bonaccorso)
- Alcohol Related Brain Damage and Mental Capacity (Professor Ken Wilson).

In February and March 2021, Alcohol Change UK delivered the first two of six planned virtual training sessions to practitioners in Havering, with the remaining four scheduled to take place between April and July.



#### **Safeguarding Adults Reviews**

The SAB did not commence any new Safeguarding Adults Reviews (SARs) during 2020/21. However, work continued on two SARs commenced previously.

#### The death of CW

In late 2019, the SAB commissioned the Social Care Institute for Excellence (SCIE) to undertake a SAR about the death of CW using their Learning Together methodology.

CW died in July 2019, at the age of 61, while admitted to Queen's Hospital after suffering a stroke, one of several hospital admissions in the weeks preceding his death. These hospital admissions had followed a period of instability for CW in relation to his housing.

The review began in September 2020 and is expected to conclude in summer 2021.

#### The death of SW

Following its conclusion in early 2020, the independent author of the SAR about SW delivered an online event during Havering Safeguarding Week in November to disseminate learning from the case to practitioners and managers from across the local multi-agency partnership.

Evaluations of the dissemination of learning event completed afterwards by participants included the following feedback.

From a Housing Officer:

What did you like / find most useful about the briefing?

It was very informative and helpful as I have been involved in a SAR and have still to find out the outcome so it was good to know that things are put in place to ensure improvements are made.

From a Social Work Senior Practitioner:

What did you like / find most useful about the briefing?

The chance to see everyone's point of view

From a Voluntary Sector Head of Service:

What did you like / find most useful about the briefing?

As someone who participated in the review, I appreciated the chance to discuss the recommendations and lessons learned, and to reflect on them.

From a Social Worker:

What did you like / find most useful about the briefing?

The whole aspect the training was relevant to my practice.

In addition to the online event, a 7-minute briefing on the SAR about SW (presented on the following page) was produced to ensure that the learning could continue to be disseminated as widely as possible.

Work to implement the recommendations from the SAR continued through 2020/21 and, by the end of March 2021, several had been completed:

**Recommendation:** All GP surgeries should review their plan for supporting patients who are unable to attend the surgery, to ensure they are visited when appropriate. BHR CCG and West Essex CCG should give due regard to this recommendation in their quality and commissioning role.

**Response:** Following operational shifts brought about the Covid-19 pandemic, GPs are now able to support patients via video platform, phone call or face-to-face conversation. Also, assurances have been provided that a patient who is unable to visit a surgery can stll be registered.

**Recommendation:** NELFT, LBH Housing Services, GPs, Peabody and other agencies such as Adult Social Care should review how effectively the Havering SAB Escalation Policy is being implemented in their organisation, formulate an action plan for their organisation if required, and report back to the SAB with any

recommendations. BHR CCG and West Essex CCG should give due regard to this recommendation in their quality and commissioning role.

**Response**: The SAB Escalation Policy was circulated to all member agencies and cascaded to staff. In addition, the SAB received assurances of escalation arrangements within individual partner agencies:

- in Adult Social Care, an escalation can be made on the electronic case file system without going via a manager;
- in NELFT escalations can be made at Clinical Interface meetings which are shared with clinical leads and Adult Safeguarding;
- in Housing, cases are escalated to the Adult Safeguarding Team, although other support such as Mental Health will sometimes need to be considered;
- at Peabody, safeguarding is an agenda item at all team meetings and is recorded, and there is always a Q&A section to remind staff of safeguarding responsibilities All staff are aware of the Escalation Policy.

**Recommendation**: NELFT and other agencies such as Adult Social Care should consider, when someone becomes a carer, how that impacts on their own situation, and how they can best be supported, for example with a carer's assessment under the Care Act 2014.

**Response:** The Carers' Lead now links in across all services and holds group sessions with carers to ensure that their voice is heard, as well as reminding staff that changing dynamics can impact on carers, who may be in need of support.

**Recommendation**: West Essex CCG should review procedures on how to register with a GP locally when patients are unable to attend surgeries in person, to ensure they are not left without a GP and other services dependent on GP registration.

**Response**: The Essex SAB have been alerted to this recommendation for the West Essex CCG and have agreed to monitor progress.

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### Safeguarding Updates from Havering SAB Member Agencies

Safeguarding update from Havering Adult Social Care



#### How the service relates to safeguarding adults

The Safeguarding Adults Team (SAT) within Adult Social Care (ASC) is the central referral point for safeguarding concerns relating to adults. The SAT operates within the Havering Multi-Agency Safeguarding Hub (MASH), allowing ASC to work closely with interagency partners and share essential information to prevent and reduce the risks and experience of abuse and neglect.

All safeguarding concerns and referrals to the SAT are triaged to determine whether a concern should progress to an enquiry under the London Multi-Agency Policy and Procedures. Following this, Section 42 (S42) referrals are made to the appropriate community team to progress welfare checks or S42 safeguarding enquires. The SAT also delegate lead responsibility for safeguarding enquiries to other appropriate partners that have more regular links with the adult at risk, such as NELFT.

In addition, the SAT provides a development and expertise role by providing strategic and operational advice across the partnership; keeping up to date and developing new policy, procedures and guidance required to support the multi-agency safeguarding protocol and processes; and support and promote the development of practice across the partnership.

The SAT acts as the Supervisory Body in respect of the current Deprivation of Liberty Safeguards (DoLS) and is responsible for considering the applications, commissioning and assessments and authorising the deprivation. The SAT is also the leading considerations around the strategic and operational impacts of the upcoming Liberty Protection Safeguards (LPS), due to come in April 2022.

ASC also has a Quality Team, based in the Joint Commissioning Unit (JCU). This team is responsible for monitoring issues with care providers, including undertaking site visits, supporting with the development of action plans where issues have been identified, and supporting ASC and commissioners in their direct work with care providers.

### How well partner agencies represented on the SAB have collaborated to progress the safeguarding adults agenda

There has been positive partnership across the SAB partners and SAT and ASC to ensure delivery of safeguarding priorities despite the pressures on the system caused by the pandemic.

ASC and SAT have worked with partners over the year to ensure that safeguarding

practice is continuously improving. The referrals received over the course of the year were regularly reviewed and the reasons for the increases have been explored with partners such as BHRUT and the Police.

There has been a focus in year with collaboration and learning opportunities with internal partners such as Housing, but also with SAB partners NELFT.

There has been extensive work with BHRUT and CCG partners around avoiding delayed discharges and minimising inappropriate delays under the new NHS Discharge Pathways during the pandemic. It is of note however that the Discharge Pathway, whilst reducing length of stay in hospital, is not getting the right outcomes for residents. Once discharged to a care home, the likelihood of them getting back into their own home diminishes considerably.

SAT has continued to work with Housing colleagues to progress work around reducing and preventing homelessness.

ASC and SAT is a key partner in both the Community and Domestic Violence MARAC. At the MARAC, ASC provides support for partners involved in complex cases requiring a disciplined/service approach.

### Activity undertaken by Adult Social Care to advance their own agency-specific safeguarding priorities

Discussions were held with BHRUT to understand the significant increase in referrals. There has been specific work undertaken with Trust colleagues to ensure that emergency department staff understand the referral route for safeguarding concerns and what constitutes an appropriate referral to minimise the impact on the safeguarding system of unnecessary referrals.

There have been similar discussions with Housing on what needs to be referred into the MASH for SAT consideration and what should be referred to Mental Health support etc. to improve the timeliness of support for adults at risk. Further to this, it is planned that in 2021/22 a written process will be developed for Housing to share with staff to outline what constitutes a safeguarding referral and/or what should be referred to other partners.

In the year the SAT set up a Safeguarding Oversight Group that meets monthly to focus on complex and high-risk S42 cases. NELFT partners attend this group to ensure a better oversight of S42 responsibilities and cases that SAT delegate to NELFT. Expert advice is able to be shared at this forum to support agencies to give timely and proportionate responses when abuse or neglect have occurred.

There also continues to be positive partnership working around Domestic Violence, understanding and issues including support and referrals for victims. ASC continue to work closely with the Community Safety Team, particularly around the Community and Domestic Violence MARACs. Throughout the pandemic, SAT has seen a marked increase in DV referrals, and therefore increasing referrals from practitioners to these forums. These forums have operated virtually during the restrictions of the pandemic so that partnership working could continue to ensure a person-centred and outcome-focused response for individuals at risk.

ASC also contributed to the revised terms of reference for Havering's Community MARAC, to provide further clarity around the referral pathways shared with staff and partners. The London Fire Brigade were also consulted to ensure they maintained involvement with the MARAC.

There is a Quality and Effectiveness group that SAT contributes to that consists of partners and enables focused work together to ensure that there is a consistent application of threshold for safeguarding.

There has also been consultation with the Police in year and there is joint worked planned for 2021/22 to consider the Merlin referral route to ensure that this is used appropriately going forward.

Dialogue has been furthered with care providers in the borough to offer additional support during the particularly challenging year. The providers have been encouraged to call the SAT for advice and discussion about particular concerns to get advice and support on whether a referral needs to be raised.

### Activity undertaken by Adult Social Care to advance their own agency-specific safeguarding priorities

ASC continues to focus on strength-based approach to practice (Better Living), which places vulnerability over 'eligibility for services'. This approach drives practitioners to work intensively with people in crisis to help them regain stability and control in their life.

There has been considerable joint work with Community Safety in developing a Modern Day Slavery (MDS) policy and procedure. The SAT have commenced training by undertaking the *train the trainer* programme for MDS and have clarified the route for MDS cases in children's and adults. There has also been e-learning designed and rolled out for MDS.

The MASH is the central point of contact for all MDS reports, and the Safeguarding Service Manager is the Single Point of Contact (SPOC) for this area to consider referrals about potential victims of modern slavery and human trafficking to the National Referral Mechanism. The SPOC has been involved in writing policy and procedure documents. Train the trainer training is planned for 2021/22 to support frontline staff further in this area.

ASC continue to be part of the transitional safeguarding forum, ensuring that we are aware of the contextual safeguarding issues that arise in adolescents transitioning to adults services.

Learning from previous years' SARs has been ongoing to ensure safeguarding practice is continuously improving and there has been a focus in terms of mental capacity assessment (MCA). A bespoke training programme has been developed to ensure learning from the top down in ASC – Service Managers, Team Managers and Seniors have attended. The training focused on examples of *what good looks like*. This training will be further rolled out to frontline practitioners in 2021/22.

Learning events have also taken place around Domestic Homicide Reviews to examine and learn from events leading up to the homicide; to explain the formal responses of the SAR, DHR and Coroner and how these three statutory mechanisms interplayed in this situation and to consider the learning for us as a system, keeping focus on learning not blaming. This engaged frontline practitioners and managers.

The SAT and ASC have been involved in the Safe and Together training perpetrator programme across children and adults to improve awareness and understanding of domestic abuse. This included the development of a referral pathway to specialist support services for people perpetrating domestic violence or abuse.

There has also been a focus around the Domestic Drinkers Programme – to support frontline practitioners that work with clients that are vulnerable drinkers, including those who are homeless or have mental health needs. The programme focuses on how to support individuals who are vulnerable and face significant safeguarding risks, to themselves and others, to minimise neglect, abuse, and ultimately deaths. This provides a focus to better use legal powers under frameworks such as The Care Act 2014, Mental Capacity Act 2005 and the Mental Health Act 2007.

The SAT and ASC have led on the LPS preparation, including the impact and risk assessment process. The SAT Service Manager has also led the tri-borough LPS meeting with partners.

### Action undertaken by Adult Social Care to mitigate the impact of the Covid-19 pandemic on the wellbeing of adults on Havering

ASC and care providers faced immense disruption during the pandemic and had to take drastic steps to manage the crisis. There has been exceptionally strong working with partners and ASC to ensure the wellbeing of adults during the Covid-19 pandemic.

There was also a great deal of partnership focus internally within the Council to ensure residents and client safety, particularly with the JCU, Housing and Public Health.

ASC quickly responded to the pandemic and moved to virtual (non-face to face) assessment

assessment and investigations where appropriate and safe to do so to protect staff and adults at risk. Given the nature and sensitivity of the work, the service also ensured a detailed risk assessment process for staff so that they could safely access clients in the community with appropriate training and access to personal protective equipment (PPE).

ASC worked closely with BHRUT colleagues under the NHS Discharge Guidance to ensure discharges were not delayed and remained appropriate.

Throughout the pandemic, the JCU increased contact with providers to ensure that care agencies and homes were coping with the pressures of the pandemic and lockdown restrictions and to monitor staffing capacity. This was also to ensure that concerns raised about alleged poor staffing levels in care homes and inappropriate actions re. Covid-19 could be mitigated and prevented as far as possible. Additional payments were made to support care homes and providers during the crisis. Specialist hot-bed care homes and care agencies were engaged to ensure support for clients with Covid-19 and to reduce coronavirus transmission in social care settings.

As above, at the beginning of the pandemic in March 2020, the Quality Team (QT) in the JCU moved to a model of a named worker for approximately 150 care providers, including home care, care home, extra care and supported living. Over the year, QT has supported providers on a range of matters, including accessing PPE, supporting care homes with visiting policy arrangements, accessing vaccinations from December for staff, and providing general advice and support to care providers.

Day care services had to close because of the restrictions imposed for a significant length of time; however, the ASC day centre staff carried out risk-assessed community-based outreach work with these clients to support them and carers during unprecidented times. The JCU also worked with external day centres on closures and supporting their clients differently.

More broadly, the Council stepped up a Covid-19 contact centre, and a logistics hub, to meet the needs of shielded patients and also other vulnerable residents, ensuring access to food, medication and support services. Shielded patients were able to access priority supermarket slots set up by the government, however the Council played a role in supporting residents accessing these. Arrangements were also made with local supermarkets (outside of the national chains) for access to delivery slots for non-shielded patients. The Council also significantly increased working with local voluntary groups to support individuals in the community with similar issues and also with social isolation during lockdown. The <u>virtual community hub</u> was also established.

During the pandemic lockdown and shielding periods, ASC, CSC, Libraries and staff from across the Council were actively involved in making telephone calls to residents who were shielding to ensure that they had access to food and medicine. Some 9,000 residents were on the shielded patient list.

ASC also carried out door-to-door work during lockdown to engage with hard-to-reach and at-risk individuals to ensure they were able to cope with the complexities of lockdown.

### How Adult Social Care has obtained the views of adults who have experienced the safeguarding process

The ASC safeguarding process is built upon the principles of Making Safeguarding Personal (MSP), which has a strong focus on individuals' desired outcomes. The individual is asked what they want as the outcomes from the safeguarding process and the practitioner is then directly informed by these outcomes through the enquiry. The adult at risk is supported to achieve their individual outcomes whilst remaining safe. As a result, the voice of the adult at risk is central to the enquiry and the agreed action plan. The safeguarding enquiry form is designed to evidence the specific desired outcomes of the adult at risk throughout and ASC are able to measure as to whether the individual desired outcomes have been achieved.

As at March 2021, ASC had achieved a 100% recording rate for indvidual outcomes. Of the individuals whose outcomes were recorded, 64.5% were fully achieved, and 30.2% were partially achieved. Only 5.3% were recorded not achieved – some level of non-achievement is to be expected as some individual outcomes are unsafe or not possible.

As part of the SAT quality assurance process, feedback forms are used to receive the views of individuals directly involved in the process such as the adult at risk or their representative at the conclusion of enquiries. The comments and recommendations received allows the service to reopen safeguarding if feedback indicates that individuals are not happy with the outcomes achieved. These are reviewed by the Safeguarding Service Manager and the SAT go back to individuals to review concerns and to go through the outcome of the enquiry with them again. If this does not resolve the issues then these can be referred and progressed through the ASC complaints process. This feedback mechanism is beneficial not only for the individual involved in the process, but also for the staff working through the safeguarding enquiry and allows continued professional development in relation to the management of S42 enquiries.

In 2021/22, ASC will be developing a further mechanism for gathering feedback across ASC clients; this will include a mixed approach survey and focus group sessions, which will support a wide range of feedback from people we work with, through online-based surveys, paper-based surveys, phone-call-based surveys and group consultation sessions.

### Activity undertaken by Adult Social Care to promote better reporting of abuse and neglect

As mentioned previously, the number of safeguarding concerns reported to ASC increased significantly in year. Research and analysis of where increased safeguarding referrals were coming from was carried out and investigation into the trends around the

increase in safeguarding referral but lower conversion rate to S42 was reviewed. This led to discussions with BHRUT, the Police and Housing to understand the increase in referrals and subsequent training has been undertaken to improve the understanding of appropriate referral routes for safeguarding concerns.

In addition, the mechanisms for referrals to safeguarding and to the MARACs are shared amongst staff regularly to ensure these are understood and made clear.

The SAT can also refer cases to the Safeguarding Adults Board for consideration under the Safeguarding Adults Review procedure. Learning is also shared via the Board to partners and then disseminated to staff across the service.

#### How successful the SAB has been at promoting community awareness of adult abuse and neglect and how to respond

This has been limited due to the work undertaken for Covid-19 response. During the height of the pandemic, the voluntary sector were supporting a significantly increased number of residents in the community (face to face and via telephone) and the SAT were available to discuss concerns as they arose to ensure that risks were referred where appropriate. The ADASS 'suggested multi-agency framework' to support practice, recording and reporting concerns has been shared and used across the SAT and via the SAM forum to deliver consistency.

ASC were also a key partner that contributed to the virtual Havering Safeguarding Week in November 2020, which was an opportunity as a multi-agency safeguarding partnership to actively promote the welfare of adults in Havering and across the Council and partners, and raise awareness of how to recognise and respond to indicators of abuse and neglect. ASC led on a number of topics including MCA, Better Living, Adults Mental Health First Aid and the impact of Covid-19 on Dementia.

#### How successful the SAB has been at developing partnership strategies to prevent abuse or neglect of adults in Havering

2021/21 was a unique year due to Covid-19, which threw up considerable challenges for residents and local SAB partners. The partnership has seen increases in referrals, for example of domestic violence, and – for a period of time, particularly during the first lockdown – safeguarding alerts were lower from care settings than we may have normally expected, although this improved for the remainder. The impact of Covid-19 on many residents, including in care homes, has been negative on well-being, on mental health, particularly for those in caring roles. The impacts will continue to be felt into next year and 2022/23.

The SAB partnership has operated in unprecedented circumstances, to the best of its collective ability. Refreshing our stratgies preventing abuse or neglect, in the context of the impact of the pandemic on residents, will be important over the next couple of years.

Barking and Dagenham, Havering and Redbridge Clinical Commissioning Groups

#### How the service relates to safeguarding adults

The Barking & Dagenham, Havering and Redbridge (BHR) Clinical Commissioning Group commissions services from providers, including Care Homes, Hospitals and General Practices. CCGs are responsible for seeking assurances that providers are fulfilling their legislative duties in relation to safeguarding adults in accordance with the Health and Social Care Act 2012 and the Care Act 2014. CCGs also work in partnership with relevant statutory organisations to ensure compliance with national requirements.

### How well partner agencies represented on the SAB have collaborated to progress the safeguarding adults agenda

All partners have contributed and continued to support the safeguarding adults agenda during the past year.

### Collaborative activity the CCG has participated in with other SAB partner agencies to progress the safeguarding adults agenda

Havering's Designated Nurse for Safeguarding attends the SAB and a number of its subgroups, alongside representing the CCG at SAR meetings and provides information on behalf of GP surgeries. The Designated Nurse also participates in learning reviews and contributes towards action plans arising from recommendations from SARs. Regular updates are provided to the SAB on progress, learning and recommendations from Learning Disability Mortality Reviews (LeDeR).

### Activity undertaken by the CCG to advance their own agency-specific safeguarding priorities

The Local Quality Surveillance Committee, chaired by Havering's Designated Nurse, continues to monitor quality and assurance and safeguarding issues in Care Homes with Nursing across the Barking & Dagenham, Havering and Redbridge (BHR) tri-borough partnership.

The Designated Nurse also attends monthly Havering Quality and Safety meetings, where care home quality and safeguarding concerns are discussed. The CCGs also provide input into Care Homes quality inspections, as required.

The Designated Nurse is a member of the BHR tri-borough Liberty Protection Safeguards (LPS) Task and Finish Group, which has undertaken an assessment of the potential impact that LPS will have across the boroughs of Barking & Dagenham, Havering and

Redbridge. A significant amount of work has been progressed to prepare staff and agencies for the implications of LPS and when they are expected to come into force in April 2021.

### Action undertaken by the CCG to mitigate the impact of the Covid-19 pandemic on the wellbeing of adults on Havering

The CCGs have continued to contribute to both London Safeguarding Adult forums and local SAB risk assessments and recovery plans.

There has been a particular focus on Care Home compliance with infection control mangement and use of personal protective equipment.

Three of the CCGs' Quality and Safeguarding Team were redeployed to assist with the Covid-19 vaccination programme between January and March 2021.

### How the CCG has obtained the views of adults who have experienced the safeguarding process

The Designated Nurse attends quality assurance visits at Care Homes with Nursing alongside the Local Authority safeguarding teams, which includes speaking to adults and service users and seeking their views. Activity this year has been limited due to Care Home visiting restrictions during the pandemic.

#### Activity undertaken by the CCG to promote better reporting of abuse and neglect

The Designated Nurse has continued to review training compliance for safeguarding adults training for commissioned service and within the CCG.

#### How successful the SAB has been at promoting community awareness of adult abuse and neglect and how to respond

The Havering SAB has continued to successfully promote community awareness of adult abuse and neglect and how to respond and report during the last year.

#### How successful the SAB has been at developing partnership strategies to prevent abuse or neglect of adults in Havering

The Havering SAB has continued to successfully develop partnership strategies to prevent abuse or neglect of adults in Havering during the last year.



#### Safeguarding update from Metropolitan Police East Area Basic Command Unit



#### How the service relates to safeguarding adults

Preventing crime, recognising and responding to vulnerability.

### How well partner agencies represented on the SAB have collaborated to progress the safeguarding adults agenda

The partnership has evolved in spite of the pandemic. New and more flexible ways of working have been established to ensure risk is managed in more timely ways. This has been particularly evident in terms of domestic abuse, where more regular MARAC meetings have enabled partners to respond to risk in spite of significant increases in reported crime as a result of the pandemic.

### Collaboraitive activity the Police have participated in with other SAB partner agencies to progress the safeguarding adults agenda

Technology has played a significant part in our ability to do this an innovate (and more timely) approaches have been introduced to ensre that, for example, victims of domestic abuse receive support and protection more quickly than before the pandemic. Virtual court processes to allow domestic violence protection order applications to be heard have been developed here and are now being used across London to support more victims of domestic abuse. Similarly, more timely multi-agency meetings have been made possible for issues like domestic abuse following earlier and more effective interventions to be considered.

### Activity undertaken by the Police to advance their own agency-specific safeguarding priorities

The Metropolitan Police Service (MPS) has introduced a public protection improvement plan to support an increased focus on more effectively recognising and responding to the needs of vulnerable people. The new framework places greater emphasis on improving the quality and effectiveness of the policing response and is leading to changes in the approach taken to public protection work and leading to improvements across a wide range of adult safeguarding issues. Arrest rates for domestic abuse offences have increased, meaning there is an increased likelihood of a positive outcome at court. We have increased the use of body-worn video in domestic abuse investigations as we know this leads to a higher number of perpetrators pleding guilty at the first opportunity, meaning survivors of abuse need not attend court.

In 2019, Her Majesty's Inspectorate of Constabulary Fire and Rescue Services published a report on the police response to older victims. The report highlighted that much more should be done to protect older people from abuse. The MPS has developed an action plan and has made improvements to training and recording practices. For the first time, the MPS is able to record the proportion of adults who report crime who have an additional vulnerability. While it is too early to undertake detailed analysis, early data suggests that 39% of adult victims of crime have an additional vulnerability. Over time, this will inform work to improve the recognition and response to adult vulnerability and ensure more adults who need help and protection receive the support they need.

### Action undertaken by the Police to mitigate the impact of the Covid-19 pandemic on the wellbeing of adults on Havering

Despite the Covid-19 pandemic, the responsibility of the Police to prevent crime and protect the public has remained. However, the way in which the Police have delivered services to the public has had to adapt in response to the challenges of Covid-secure working. Safeguarding and public protection services have become more agile and the police have developed new approaches to ensure that people in need of help and protection receive the support they need. Wile the overall volume of crime dropped during the pandemic, levels of domestic abuse increased significantly and this placed additional demands on staff. While Covid-secure working practices meant that sickness did not increase significantly, the welfare and fatigue of staff working under pressured circumstances required additional oversight by leaders and managers. Additional support mechanisms were put in place to support staff, who were signposted to these and encouraged to make full use of them.

### How the Police have obtained the views of adults who have experienced the safeguarding process

There are a number of mechanisms for the Police to seek and consider the views of the public. The information obtained from these are used both locally and across the organisation to support improvements and learning.

#### Activity undertaken by the Police to promote better reporting of abuse and neglect

As above, there are a variety of communications strategies in place to improve confidence and reporting of crime.



#### Safeguarding update from North East London NHS Foundation Trust (NELFT)



#### How the service relates to safeguarding adults

NELFT provides community and mental health services, with operational and strategic responsibility for the safeguarding of all vulnerable service users.

Progressing the agreed priorities in relation to safeguarding adults is essential for NELFT to execute its duties in relation to CQC essential standard outcome 7 (regulation 11): safeguarding people who use services from abuse. Services will receive interventions from staff that are knowledgeable and skills to identify safeguarding risks and respond accordingly.

### How well partner agencies represented on the SAB have collaborated to progress the safeguarding adults agenda

NELFT has continued to prioritise safeguarding partnership working, attendance and participation at partnership meetings at both strategic and operational level.

NELFT regularly participates in Havering SAB meetings, which are attended by the Integrated Care Director for Havering services, Associate Director and the Havering Named Professional for Safeguarding Adults from the NELFT safeguarding team.

NELFT also attends a number of the SAB subgroups, such as the Quality and Effectiveness working group and the Case Review Working Group, and multi-agency panels such as the Community MARAC. NELFT contributes to these meeting and participates in learning reviews and subsequent action planning to ensure progress is made to the Havering safeguarding agenda.

### Collaborative activity NELFT has participated in with other SAB partner agencies to progress the safeguarding adults agenda

NELFT staff have continued to work alongside our multi-agency partners and the local authority, and participated in adult safeguarding meetings and supported section 42 enquiries.

When cases may not have met the section 42 threshold but are complex – for example, in some self-neglect and hoarding cases – NELFT promote partnership working through interface meetings and professional meetings to ensure a joint collaborative approach is adopted.

Activity undertaken by NELFT to advance their own agency-specific safeguarding priorities

**Training:** The Safeguarding Team has worked closely with the Training and Development team to enable virtual classroom training to allow for discussions and group work within safeguarding training.

Safeguarding adult training has been reviewed to ensure compliance with the Adult Safeguarding: Roles and Competencies for Health Care Staff intercollegiate guidance has been agreed and the mapping of eligibility for each level of training completed.

**Domestic abuse:** Whilst concerns raised by NELFT staff about domestic abuse (DA) have always been one of the most frequent enquiries to the NELFT Safeguarding Advice Service, there has been increasing evidence nationally that the effects of lockdown restrictions have led to a further increase in incidences of DA. In response to this, the Safeguarding Team have participated at 'The All Staff Webinar' on 3 occasions where they have presented information about the increase in DA risks, provide guidance in relation to responding to disclosure via telephone to the specialist services available to support those affected by DA. In addition, the NELFT DA guidance and staff domestic abuse HR policy have been reviewed. Specific DA training has also restarted and has been made available to all staff via the virtual face-to-face platform.

NELFT continue to work with Havering multi-agency partners to ensure a system-wide approach to this concern. This includes referral, attendance at and participation at Multi Agency Risk Assessment Conferences (MARAC) and VAWG.

**Digital safeguarding:** With the rapid changes to people's lifestyles and changes in clinical practice, there has been an exponential increase in the use of digital technology during the last year. This is not confined to one age group and there are emerging concerns regarding digital safeguarding across life span.

There is safeguarding membership at the Trust Digital First work-stream to ensure safeguarding is considered when discussing virtual consultations and the IT applications used for this.

**Mental Capacity:** Mental Capacity Training has remained available for all staff during the pandemic. The Named Professional and Trust MCA lead has delivered a number of MCA bitesize training sessions for all services, in particular to inpatient ward services and the Covid-19 ward.

NELFT continue to prepare for the Liberty Protection Safeguarding. The implementation of LPS has been delayed until at least April 2022. However this date refers to full and final implementation and a number of key deliverables will be required to have been completed within 2021.

Action undertaken by NELFT to mitigate the impact of the Covid-19 pandemic on the wellbeing of adults on Havering

The NELFT model of safeguarding highlights that "safeguarding is everyone's business". This has continued during NELFT's response to the pandemic. The Named Safeguarding Professionals and Assistant Director for Safeguarding have continued to work closely with operational and management colleagues within NELFT and continued to respond to safeguarding concerns and risks.

Safeguarding has been considered by the Trust in all Covid-19 responses and implementation of new ways of working. Community Health and Mental Health services have continued to offer face-to-face contact to service users with the highest care needs. The NELFT Safeguarding Advice Service has remained fully operational, offering support and guidance to NELFT staff.

NELfT have embraced the use of modern technology to ensure timely delivery was maintained during the pandemic, for example Microsoft Teams and WebEx. Staff have also used these applcations to deliver safeguarding training, webinars and weekly Covid-19 briefings, and engage in multi-agency meetings with the safeguarding partnerships.

Members of the corporate Safeguarding Team were redeployed during the first lockdown in spring 2020, however this was planned in such away that the Safeguarding Advice Service remained operational. No Safeguarding Team members were redeployed during the second or third lockdowns.

### How NELFT has obtained the views of adults who have experienced the safeguarding process

When possible, safeguarding meetings are attended by the service user and/or their representative to ensure their past and present wishes, feelings, beliefs and values have been ascertained throughout the safeguarding process and continue to be through to their care and treatment, in accordance with the principles of Making Safeguarding Personal (MSP).

MSP and empowerment is promoted through the NELFT Safeguarding Advice Service. This includes guidance on obtaining an adult's consent from the beginning of the safeguarding process. MSP is also included in NELFT's safeguarding policies, procedures and training.

#### Activity undertaken by NELFT to promote better reporting of abuse and neglect

The NELFT Safeguarding Advice Service continues to operate during office hours, supporting operational staff to both recognise and report abuse and to ensure the safeguarding process is appropriately managed following any referral raised to the local authority.

To support staff within adult services, there is a well-established Safeguarding Link Practitioners model. All teams have nominated safeguarding champions or leads whose role is to promote the safeguarding agenda, raise awareness and support local audits if required.

NELFT's Safeguarding Team facilitate a Link Practitioners Event twice a year, which is primarily for safeguarding champions but open to all NELFT staff. The events offer opportunities to present specific themes and feed back learning from case reviews, and chances for staff to network and ask questions.

#### How successful the SAB has been at developing partnership strategies to prevent abuse or neglect of adults in Havering

The SAB continues to progress the development of partnership strategies. Despite the pandemic, partners have embraced technology that has enabled them to continue the SAB's function of overseeing and leading adult safeguarding in Havering.

### Safeguarding update from Barking & Dagenham, Havering and Redbridge University Hospitals NHS Trust (BHRUT)

Barking, Havering and Redbridge University Hospitals

#### How the service relates to safeguarding adults

BHRUT is a large provider of acute services, serving a population of over 750,000 in outer North East London. The Trust operates from two sites: Queen's Hospital and King George's Hospital. There are approximately 900 beds across both sides and the Emergency Department (ED) treats over 150,000 walk-in and ambulance emergencies each year.

### How well partner agencies represented on the SAB have collaborated to progress the safeguarding adults agenda

Throughout 2020/21, BHRUT along with partner agencies have continued to attend and contribute to the SAB's Case Review Working Group, which considers safeguarding cases that may require a Safeguarding Adult Review.

Multi-agency learning in relation to the safeguarding adults agenda is progressed following these reviews, and learning events support any action required following a case that does not meet the criteria for a SAR.

BHRUT shares learning from SARs with staff across the Trust via monthly safeguarding bulletins.

### Collaborative activity BHRUT has participated in with other SAB partner agencies to progress the safeguarding adults agenda

Throughout 2020/21, the BHRUT Named Professionals for Safeguarding Adults have maintained a regular presence on the Havering SAB and members of the Safeguarding Team have attended the following partnership meetings:

- SAR panel meetings
- SAB Case Review Working Group
- SAB Quality & Effectiveness Working Group and
- SAB Learning & Improvement Executive

The Adult Safeguarding Team are regularly requested to attend Multi-Disciplinary Team meetings to provide advice and support for complex cases, often involving complicated family dynamics.

### Activity undertaken by BHRUT to advance their own agency-specific safeguarding priorities

In 2020, the Trust began work on developing a new Safeguarding Strategy for 2021-2025 to replace the previous Safeguarding Strategy for 2018-2020. The strategy is underpinned by a document which accompanies the poster format previously used. Together they complete the Safeguarding Strategy and are aligned to key safeguarding priorities identified at national and local level. To be progressed throughout 2021-2025, they focus on:

- Think family: promoting co-ordinated thinking around families.
- Service User Engagement: sharing concerns with service users where appropriate.
- Responsive Workforce: our staff's wellbeing will be at the forefront of all we do.
- Harmful Practices: promoting the protection of service users and staff who may be at risk of harmful practices.
- Bridging the Gap: we are committed to supporting the care needs of vulnerable young people as they move into adulthood.
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- Empowerment and Advocacy: empowering patients and their families and carers to engage in decision making about their care and treatment.
- Learning from Practice: empowering staff to identify learning needs and source opportunities available to them to learn.
- Learning Disability and Autism: we will work with external partners to ensure our

service users with learning disabilities and autism receive excellent care and support.

The strategy will be launched in April 2021.

### Action undertaken by BHRUT to mitigate the impact of the Covid-19 pandemic on the wellbeing of adults on Havering

During 2020/21 the world was devastated by the Covid-19 pandemic. Throughout this period, the BHRUT Safeguarding Adults Team continued to support staff members in safeguarding vulnerable patient groups who may have been at increased risk due to the impact the pandemic had on the nation and health services.

Training staff at all safeguarding levels remained a key driver throughout this period, with a focus on adapting training methods to ensure that key areas received the support required during a time of significant clinical pressure.

To promote learning during the pandemic, safeguarding bulletins are produced by the Safeguarding Team and cascaded Trust-wide, featuring cases that the Safeguarding Team have been involved in, or SARs that have been published, providing details of the case along with any identified issues and lessons learnt.

The team also produce Special Edition bulletins that cover a specific topic which during 2020/21 have included:

- Published SARs
- Domestic abuse, including a male victim
- Patients living with dementia
- Mental capacity for an adult patient with a learning disability
- Self-neglect
- Forced marriage

Case are also discussed at the Trust Patient Safety Summits and Safeguarding Case Discussion meetings, which are advertised Trust-wide and attended by al disciplines.

### How BHRUT has obtained the views of adults who have experienced the safeguarding process

At BHRUT, the views of adults who have experienced the safeguarding process are recorded via the Making Safeguarding Personal Audit. The results were presented at the BHRUT Safeguarding Audit Group meeting in November 2020.

The audit report included an action plan for ensuring that areas for improvement are progressed. The audit will be repeated in 2021/22.

#### Activity undertaken by BHRUT to promote better reporting of abuse and neglect

In early 2021, the Trust placed a bid with the Mayor's Office for Policing and Crime (MOPAC) for funding for a hospital-based Independent Domestic Violence Advisor (IDVA). The post will be a year-long contract and the successful candidate will support the Safeguarding Team in cases relating to domestic violence and abuse, and advocate for women, men and young people.

#### How successful the SAB has been at developing partnership strategies to prevent abuse or neglect of adults in Havering

The SAB has been successful in maintaining Safeguarding Adult Reviews throughout the Covid-19 pandemic, ensuring that multi-agency partnership strategies are developed to prevent abuse and neglect of adults in Havering.

#### Safeguarding update from the Department for Work and Pensions (DWP)

Department for Work & Pensions

#### How the service relates to safeguarding adults

Payment of DWP benefits, supporting residents at risk or suffering from financial abuse, identifying potential safeguarding risks for DWP customers and signposting to relevant agencies to support. Linking into partner agencies so that DWP can be part of a multi-agency response to a safeguarding concern.

### How well partner agencies represented on the SAB have collaborated to progress the safeguarding adults agenda

Good representation, evident that partner agencies are working together but collaboration is an area that can be improved, from our perspective.

Not being part of a sub-group may be the reason for that and more detailed knowledge of what sub-groups are available for DWP to join could enable closer working. Recognising how DWP can be involved in safeguarding cases will enable bringing DWP into the agenda to work together with partners to help prevent and support safeguarding issues.

### Collaborative activity the DWP has participated in with other SAB partner agencies to progress the safeguarding adults agenda

Some work with Care Leavers and Leaving Care Team to provide support on any vulnerable cases, but Covid-19 has reduced the opportunities to work together beyond individual support for high-risk adults.

### Activity undertaken by the DWP to advance their own agency-specific safeguarding priorities

Introduced the Advanced Customer Support Senior Leader, as part of the senior leadership team in each District area of the country to raise profile and awareness of safeguarding to identify and develop training to build capacity for staff. Post is DWP-wide so works across DWP product lines to support action. Brings safeguarding learning at a local level to a national perspective, informing national policy and strategy for DWP. Training products for key risk areas developed both locally and nationally to support priority areas. Increased focus on partnership to support DWP customers across all product lines.

### Action undertaken by the DWP to mitigate the impact of the Covid-19 pandemic on the wellbeing of adults on Havering

Established escalation routes for partnership agencies as a Covid-19 response for professionals to contact DWP for any queries and escalations. Delivery focus on trust and protect brought in easements to process to enable swifter payments to customers.

#### Activity undertaken by the DWP to promote better reporting of abuse and neglect

In-house session on safeguarding and promotion of the importance of reporting has been delivered.

### How successful the SAB has been at promoting community awareness of adult abuse and neglect and how to respond

Training suite is great and has been a great way to raise awareness with partners.

### How successful the SAB has been at developing partnership strategies to prevent abuse or neglect of adults in Havering

Learning from serious cases has been really good and has enabled learning to be shared with partners to understand how services can be improved.





#### How the service relates to safeguarding adults

Healthwatch is a governmental statutory mechanism intended to strengthen the collective voce of users of health and social care services and members of the public, both nationally and locally.

### How well partner agencies represented on the SAB have collaborated to progress the safeguarding adults agenda

There has been good co-operation.

### Activity undertaken by Healthwatch to advance their own agency-specific safeguarding priorities

Reviewed the Healthwatch internal procedure and policies. Discussed and agreed the appointment for 2021/22 of a Speak Up Guardian. Board reports on the wider issues such as managing allegations against people in positions of trust (PIPOT).

### Action undertaken by Healthwatch to mitigate the impact of the Covid-19 pandemic on the wellbeing of adults on Havering

Healthwatch Havering provide a regular update, sometimes three or four times a week, via the Healthwatch Havering Friends Network (HHFN) to residents in Havering. This has included information from Havering Council, BHRUT, NELFT and information and support for residents seeing advice on how to find a dentist, access a GP and phlebotomy services, etc.

### How Healthwatch has obtained the views of adults who have experienced the safeguarding process

Healthwatch Havering is responsible for the annual survey of local residents seeking their views on a wide range of issues associated with safeguarding. The survey was launched in March 2021 and will be reported to the SAB in April.

### Activity undertaken by Healthwatch to promote better reporting of abuse and neglect

Healthwatch Havering have a close working relationship with St John Ambulance and undertake all safeguarding training with them. As part of this working relationship, Healthwatch is provided with regular bulletins on the broad spectrum of safeguarding issues and publishes these in the Heathwatch Havering Friends Network normally on a monthly basis.

How successful the SAB has been at promoting community awareness of adult abuse and neglect and how to respond

Evidence for access to services is available on the Havering Council website.

How successful the SAB has been at developing partnership strategies to prevent abuse or neglect of adults in Havering

There is a clear agenda that this is an important strategic position that has to be achieved.



#### Appendix

#### Background

This SAR is about SW, a woman with a history of enduring mental health problems including depression, panic attacks and agoraphobia. She also reported suicide attempts and was diagnosed with borderline personality disorder. At times professionals found it difficult to engage with her. After moving to Havering in 2010, she received services and support from North East London NHS Foundation Trust (NELFT). After being made homeless in March 2017, following a 3-month eviction notice from her landlord, SW briefly lived with family. She was then re-housed in Harlow, Essex, by Havering Housing Services. Following this move, she had difficulty registering with a new

#### **Further** Reading

If you would like more information on the SAR about SW, please refer to the published executive summary.

To receive information about the Havering SAB's multi-agency training programme, please email:

safeguardingpartnerships @havering.gov.uk

GP, which prevented her from accessing other local services, She took her own life in May 2017, 3 weeks after moving to Harlow. She was 56 years old.

#### Review

in Havering.

In November 2017, following the inquest into SW's death, a multi-agency Case Review Working Group meeting recommended that a SAR be undertaken as key statutory criteria had been met, including concerns about how relevant agencies had worked together to safeguard SW. There was also a desire to learn from any lessons for future practice found in the review. The SAR, led by an independent reviewer and involving many agencies represented on the Havering Safeguarding Adults Board (SAB), was completed in 2020 and developed a number of professional and practicerelated recommendations for improvement to the multi-agency system for safeguarding Commitment by all vulnerable adults

Key finding

agencies but lack of multi-agency response. A complex case meeting would have addressed all issues. including a multi-agency safeguarding risk assessment and a transfer plan for an out-ofborough move. Risk assessments should reflect risk across multiple areas and respond to changes in circumstances. Risk mitigation measures should include the involvement of service users in the completion of care plans. Any reduction of protective factors should be considered.

### Key finding

#### Person-centred approaches.

Recognising complex needs of someone with multiple mental health needs, and how these might interact and overlap, can help in understanding the person as a whole and how best to assist them, particularly at times of acute stress, such as re-locating to an unknown and unfamiliar area. Holistic assessment and regular review of individual needs and risks can help to identify further needs for support, likely trigger points and possible mitigating factors.



### **Key finding**

Support for family members as carers. If the family members SW stayed with after being evicted had received more support from services, it may not have been necessary for SW to move from there so quickly, and she may also have received more family support after moving to Harlow. All organisations providing support to adults with mental health issues should consider how the learning from the Open Dialogue model could help to promote better outcomes by involving wider family and support networks.

# 7-minute briefing

#### Key findings

**Recognition of the impact** of cumulative losses. including the loss of protective factors. SW experienced a significant number of losses and there was a lack of recognition of the impact of these in worsening her mental health over time; and of the effect of losing protective factors, such as family support or pets, through a move away from the area she had lived in for seven years. Multi-agency training for professionals about such issues would assist in identifying how to provide effective support at crisis points.

> There were occasions when regular processes were ineffective at problem solving. Escalating the case to management could have helped unlock access to services.

Safeguarding **Adult Review** (SAR) about SW

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