

LEICESTERSHIRE AND RUTLAND SAFEGUARDING ADULTS BOARD (LRSAB)

Annual Report 2014-15



Document Status

First draft completed:

This draft completed:

19th August 2015 **V0.8**

Approved by Executive:

Approved by Board:

Published:

Report Author:

Safeguarding Boards Business Office, Leicestershire & Rutland LSCB and SAB

Table of Contents

Foreword from Independent Chair

- 1. Chapter 1: Local Area Safeguarding Context
- 2. Chapter 2: Governance and Accountability
- Business Plan Performance 2014-15: 3. Chapter 3:
 - 3.1 Priority 1: To be assured that "Safeguarding is Everyone's Responsibility"
 - 3.2 Priority 2b: To be assured that adults are safe
 - 3.3 Priority 2c: To be assured that services for children, services for adults and services for families are effectively coordinated to ensure children and adults are safe
 - 3.4 Priority 3b: To be assured of the quality of care for any adult supported by registered providers
 - 3.5 Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for adults
 - Priority 5: To be assured that the workforce is fit for purpose 3.6
- 4. Chapter 4: Safeguarding Adult Reviews
- 5. Chapter 5: Challenges Ahead – Our Business Plan for 2014-15
- 6. Appendix 1: Business Plan 2015/16
 - Appendix 2: Acronyms List



Foreword from Independent Chair



I am pleased to present the Annual Report for the Leicestershire and Rutland Local Safeguarding Adults Board (LRSAB).

Over the past two years we have published a combined Annual Report for the children and adult safeguarding boards. Changes to the statutory frameworks for the two Boards, together with feedback from stakeholders, has resulted in our reverting to the publication of two annual reports, one for the LRLSCB and the other for the Leicestershire and Rutland Safeguarding Adult Board (LRSAB). Some parts of the Annual Reports are shared since a key part of our Business Plan was to secure effectiveness across the children and adult arenas reflecting our aim to "think family" in the delivery of our work.

Publication of an Annual Report for Safeguarding Adults Boards is now a statutory requirement subsequent to the Care Act 2014. These expectations are reflected in the content of this report though we report more widely than the statutory minimum.

The key purpose of the report is to assess the impact of the work we have undertaken in 2014/15 on service quality and effectiveness and on safeguarding outcomes for adults in Leicestershire and Rutland. Specifically it evaluates our performance against the priorities that we set in our Business Plans 2014/15 and other statutory functions that the LRSAB must undertake.

The last twelve months have witnessed some significant changes in the way we operate as a Board. At national level the implementation of the Care Act 2014 has moved the LRSAB onto a statutory footing and a key focus of our work in 2014/15 was to prepare the Board for the expectations of this new legislation that "went live" in April 2015. In addition, the LRSAB has closely monitored the impact of the Supreme Court judgment relating to MCA/DoLS application and the resulting significant increases in Deprivation of Liberty Safeguards referrals. The Board has continued the work it began in 2013/14 in monitoring local implementation of recommendations arising from the Winterbourne View and North Staffordshire Hospital review recommendations as they apply to safeguarding practice.

At local level we have continued our vigilance in assessing the impact of the financial constraints within which partner agencies have operated and the structural and organisational changes that have taken place in response to both national reforms and local strategies to secure efficiencies. We have witnessed significant change in the leadership of adult services in Rutland and both local authorities have driven forward improvements in response to the Care Act 2014 implications for

safeguarding provision. This has included closer working with prisons and their engagement in the work of the LRSAB. The Board has been closely monitoring and evaluating these initiatives.

I am pleased that this report presents a considerable range of success and achievement for the Board. The assessment of our performance has shown that we are sustaining those elements of our work that were judged to be good last year and that we have secured improvement in those areas that required improvement. There remain areas for further development and improvement which have been incorporated into our Business Plan 2015/16.

I would like to take this opportunity to thank all Board members and those who have participated in Subgroups for their continued commitment in 2014/15. In addition I would like to thank staff from across our partnerships for their motivation, enthusiasm and continued contribution to keeping the adults living in Leicestershire and Rutland safe.

Safeguarding is everyone's business. The achievements set out in this Annual Report have been achieved not just by the Safeguarding Board but by staff working in the agencies that form the partnership. The further improvements we seek to achieve in 2015/16 will require continued commitment from all and I look forward to continuing to work with you next year in ensuring adults in Leicestershire and Rutland are safe.

I commend this report to all our partner agencies.

Paul Burnett,

Independent Chair, Leicestershire and Rutland Local Safeguarding Adults **Board**



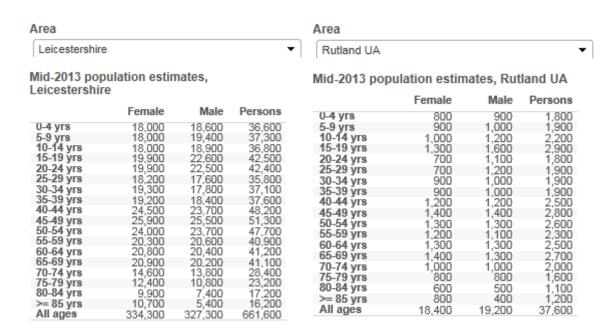
Chapter 1: Local Area Safeguarding **Context**

LOCAL DEMOGRAPHICS

The Leicestershire and Rutland Safeguarding Adults Board (LRSAB) serves the counties of Leicestershire and Rutland.

The current populations of the two counties, as shown in the 2011 census, are

	Total	Under 18	Over 18
Leicestershire	650, 489	134,084 (20.6%)	516,405 (79.4%)
Rutland	37,369	8,120 (21.8%)	29, 249 (78.2%)



The two counties have a predominantly white ethnic population with 90.6% of the Leicestershire population and 94.3% of the Rutland population describing their ethnicity as white British. These data compare to averages for the East Midlands region of 85.4% and for England of 79.8%. Of those that do not consider themselves to be white British, 4.75% of Leicestershire's population considered themselves to be Asian of Asian British with less than 1% Black/African/Caribbean or Black British. All ethnic minorities listed for Rutland total less than 1%.

Chapter 2: Governance and accountability arrangements

The Leicestershire and Rutland Safeguarding Adults Board (LRSAB) serves the counties of Leicestershire and Rutland. Its role was to safeguard and promote the welfare of vulnerable adults and to ensure that local agencies cooperate and work well to achieve this.

Safeguarding Adults Boards became statutory bodies on 1st April 2015 as a result of the Care Act 2014. During 2014/15, a key priority of the Board was to prepare for the expectations of the Care Act both in terms of its requirements for Safeguarding Adults Boards and for safeguarding generally.

The LRSAB meets four times a year, with each Board meeting incorporating a joint meeting with the Leicestershire and Rutland Local Safeguarding Children Board (LRLSCB). An integrated Executive Group meets eight times a year. In addition a range of Subgroups and Task and Finish Groups are in place to deliver the key functions and Business Plan priorities of the two Boards. The Board, Executive and Subgroup structure is set out on the next page:



Leicestershire & Rutland Local Safeguarding Children Board and Safeguarding Adults Board Governance Structure Chart

- The Chief Executive of the two Local Authorities are responsible for appointing the Independent Chair of the LSCB and SAB and holding them to account
- The Children and Young Peoples Service Lead Member for each **Local Authority** Service acts as a "participating observer" for the LSCB

The Independent Chair covers both Safeguarding Boards





Senior agency representatives sit on the Boards' meeting 4 x a year

The Adults and Communities Lead Member for each Local Authority Service acts as "a participating observer" for the SAB

The LSCB has strategic links to:

- The Leicester City Safeguarding Children Board
- The Leicestershire Children and Young Peoples Commissioning Board
- The Rutland Children Trust Board arrangements
- The Community Safety **Partnerships**
- Health and Wellbeing Boards
- Adult Commissioning Board
- And other groups

LSCB & SAB Executive Group

LSCB and SAB members who Chair operational Subgroups and/or hold core statutory responsibilities for safeguarding sit on this group

They have delegated powers from the Boards to drive the Business Plan

Meeting 8 x a year

Leicester, Leicestershire & Rutland LSCB Joint Executive Group

Leicester, Leicestershire & Rutland SAB Joint **Executive Group**

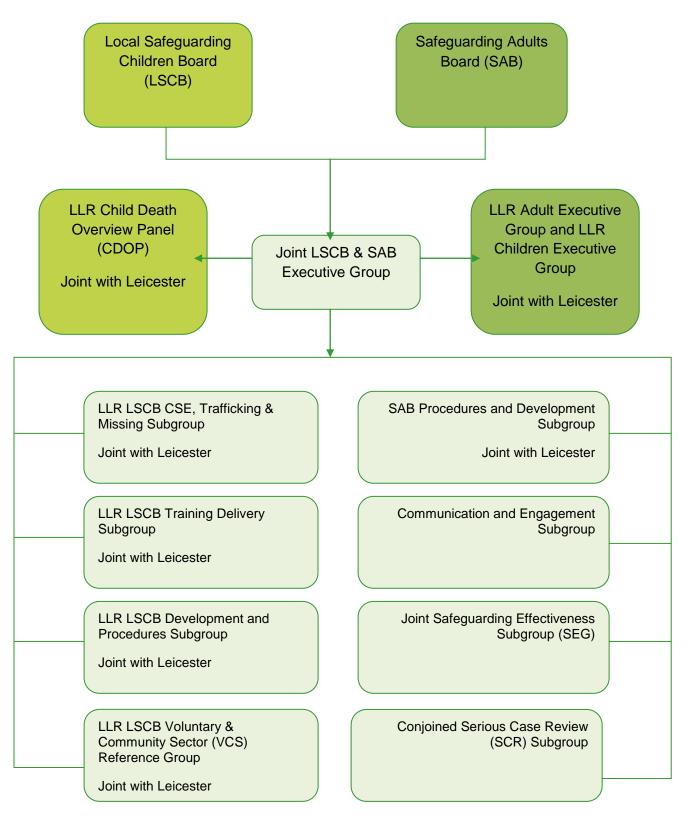
The SAB has strategic links to:

- The Leicester City Safeguarding **Adults Board**
- The Community Safety **Partnerships**
- Health and Wellbeing Boards
- Adult Commissioning Board
- And other groups

Leicester, Leicestershire & Rutland Joint Subgroups including the Child Death Overview Panel (CDOP)

Leicestershire and Rutland LSCB and SAB Subgroups

Leicestershire & Rutland Local Safeguarding Local Safeguarding Children Board and Safeguarding Adults Board 2014-15



Membership of the Leicestershire & Rutland Safeguarding Adults Board 2014/15

Independent Chair

East Leicestershire and Rutland Clinical Commissioning Group East Midlands Ambulance Service **EMCARE** Melton Borough Council (representing the borough and district councils) Leicestershire County Council Leicestershire Police Leicestershire Partnership Trust (LPT) Leicestershire Probation Trust NHS England (Area Team) **Rutland County Council** University Hospital Leicester Vista Blind West Leicestershire Clinical Commissioning Group

Observer status

Leicestershire County Council Lead Member Rutland County Council Lead Member

Professional Advisers to the Board:

Boards' Business Office Manager Legal Advisor for the Safeguarding Boards Heads of Children's safeguarding in the two Local Authorities



Independent Chair

The LRLSCB and the LRSAB continue to be led by a single Independent Chair. This is a requirement of the Care Act 2014. Leicestershire and Rutland have agreed to continue to have a joint Chair for both Safeguarding Boards to reflect the need for cross-cutting approaches to safeguarding. The Independent Chair provides independent scrutiny and challenge of agencies, and better enables each organisation to be held to account for its safeguarding performance.

The Independent Chair, Paul Burnett, is a former Director of Children's Services in two Local Authorities and, during 2014/15, chaired Safeguarding Boards in three other Local Authorities and in a crown dependency.

The Independent Chair is accountable to the Chief Executives of Leicestershire and Rutland County Councils. They, together with the Directors of Children and Adult Services and the Lead Members for Children and Adult services, formally performance manage the Independent Chair.

The Future

The Care Act 2014 requires that all Local Authorities must have established a SAB. Partners will find themselves more accountable for their actions and there will be higher public expectations. The statutory guidance encourages all three of the core partners (Local Authority, Police, and CCG) to make a resource contribution to recognise the corporate partnership accountability and to ensure the SAB can carry out its functions.

The Care Act (schedule 2) gives the local SAB three specific duties; it must:

- 1. Publish a strategic plan for each financial year that sets out how it will meet its main objective and what each member is to do to implement that strategy. In developing the plan it must consult the Local Healthwatch organisation and involve the community.
- 2. Publish an Annual Report detailing what the SAB has done during the year to achieve its objective and what it, and each member, has done to implement its strategy, as well as reporting the findings of any Safeguarding Adults Reviews (SARs), including any ongoing reviews.
- 3. Conduct a Safeguarding Adult Review (SAR) in accordance with Section 44 of the Act and, if it so decides, to implement the findings.

Whilst many of the SAB requirements of the Care Act are already in place, the following areas will continue to be a priority for further development:

- Clear policy and procedures, membership, governance structure;
- Communication plan, including how to obtain feedback from the local community and service users;

- Workforce learning and development strategy to be updated, building on the competency framework already in operation:
- Changes to guidance on the Mental Capacity Act, undertaking MCA assessments and Deprivation of Liberty Safeguards (DoLS);
- Information sharing agreements (ISAs), in line with Care Act duty, are used to share information that is relevant to the SAB's functions. Additionally. agencies should have drawn up a common agreement relating to confidentiality and the sharing of information between themselves based on the well-being of the adult at risk of abuse or neglect.

Safeguarding Adult Reviews

The Act introduces statutory Safeguarding Adults Reviews (SARs) (previously known as Serious Case Reviews) and gives Boards flexibility to choose a proportionate methodology. The purpose of a SAR must be to learn lessons and improve practice and inter-agency working. It defines the circumstances under which a SAB must conduct a SAR as: "there is reasonable cause for concern about how the SAB, members of it or others worked together to safeguard the adult and death or serious harm arose from actual or suspected abuse". It expects agencies to cooperate with the review but also gives Boards the power to require information from relevant agencies. The SAB may also commission a SAR in other circumstances where it feels it would be useful, including learning from "near misses" and situations where the arrangements worked especially well.

As will be seen from our Strategic Plan and supporting Business Plan, implementation of the requirements of the Care Act 2014 is a key priority and the detailed actions intended to support our delivery of expectations are included in the Plan which is set out at Appendix 1.



Chapter 3: Business Plan Performance 2014/15

The Business Plan published for 2014/15 was a combined plan across the LRLSCB and LRSAB.

Priorities set specifically for the LRSAB for 2014/15 were:

Priority 1: To be assured that "Safeguarding is Everyone's Responsibility"

Priority 2b: To be assured that adults in need of safeguarding are safe

Priority 2c: To be assured that services for children, services for adults and services for families are effectively coordinated to ensure children and adults are safe

Priority 3b: To be assured of the quality of care for any adult supported by registered providers

Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for children, young people and adults

Priority 5: To be assured that the workforce is fit for purpose

In addition a number of cross-cutting priorities were set, as follows:

- Safeguarding services are coordinated
- The voices of children and adults are heard
- The voices of staff are heard
- Sub-regional and regional coordination will be maximised
- Effective communication must underpin all Board activity.

This chapter of our Annual Report sets out our performance against these priorities, the specific actions set out in our Business Plan and the intended impact of these actions in terms of development and improvement.

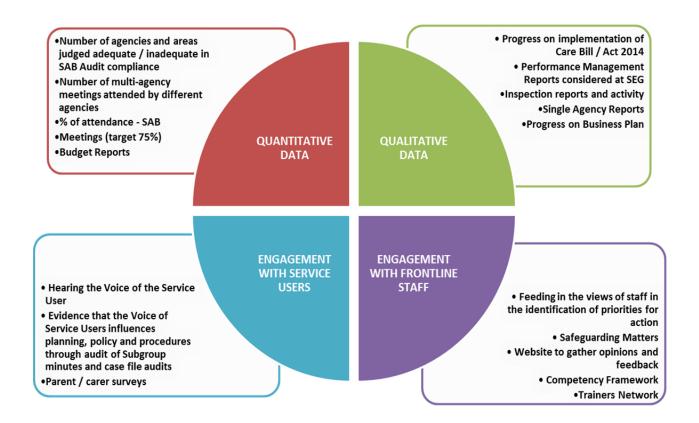
3.1. Priority 1: To be assured that "Safeguarding is **Everyone's Responsibility"**

The actions for the LRSAB under this priority, together with the indicators of performance used to assess impact, were to:

- Prepare for the expectations of the Care Act 2014
- Increase constituent agency performance across the SAB Compliance Audit known as the Safeguarding Adults Assessment Framework (SAAF)
- Ensure that the Board, Executive and Subgroups have appropriate agency representation and high levels of attendance/participation to fulfil the objectives of the Business Plan
- Ensure that the Board knows the safeguarding strengths and weaknesses of agencies, both individually and collectively, through challenge, scrutiny and performance management
- The Board drives partnerships and partner agencies to own, prioritise resource, improve and positively impact on safeguarding and receives management information to scrutinise and challenge performance
- Be assured that the "voice" of service users is heard and acted on
- Ensure partner agency contributions secure "value for money"

Key performance indicators against our 'four-quadrant' quality assurance and Performance Management Framework, that were identified to test impact, are set out in the diagram below:





What we did

Prepare for the expectations of the Care Act 2014

In the first half of 2014/15, the LRSAB tracked closely the progress of the Care Bill (now the Care Act 2014) and the anticipated expectations, both in terms of the statutory status of Safeguarding Adult Boards and the significant changes the legislation was likely to make to adult safeguarding arrangements and the wider adult social care arena. This work continued once the Bill was passed and regulations and guidance were issued. The key purpose of this work was to ensure that the LRSAB adapted to meet the new requirements.

A specific stream of work triggered through this process was the establishment of a working group with representatives of prisons in Leicester, Leicestershire and Rutland with a view to considering their engagement with the LRSAB, and crossagency working in response to changes brought about by the Care Act.

Increase in compliance across the SAB Compliance Audit (SAAF)

The key mechanism through which we monitor and evaluate agency compliance with their responsibilities and safeguarding standards is the SAB Compliance Audit or Safeguarding Adults Assessment Framework (SAAF) process. The outcomes of the

last SAAF audit were reported in the 2013/14 Annual Report. All agencies that did not assess themselves as fully compliant in that audit have worked to improvement plans agreed and monitored by the LRSAB throughout the year.

A further SAAF audit was undertaken in the autumn/spring 2014/15 and the outcomes of this process are set out below.

In addition to the SAAF, all statutory partners in the Board present to the LRSAB their Annual Safeguarding Reports, which set out their individual safeguarding activity together with their contribution to the overall Business Plans of both the Children and Adult Safeguarding Boards. Information from these Annual Reports has been included in this Annual Report at relevant points.

Ensure that the Board, Executive and Subgroups have appropriate agency representation and high levels of attendance/participation to fulfil the objectives of the Business Plan and the emerging requirements of the Care Bill (now the Care Act)

Prior to the Care Act 2014, there was no statutory membership requirement for Safeguarding Adults Boards. Nevertheless there has for some time been membership from all key statutory agencies working with adults, together with representation from both the voluntary and community sector and the private sector provider community.

In addition to the membership of key stakeholders, there has been an expectation that Board members would be able to:

- Speak for their organisation with authority
- Commit their organisation on policy and practice matters
- Hold their own organisation to account and hold others to account.

This has, in the main, been achieved.

Clearly the membership of both the Board and its Executive and Subgroups has been reviewed this year as a result of changes brought about by the Care Act. In fact, the required membership arising from the Act comprises only:

- The Local Authority
- Clinical Commissioning Groups (CCGs)
- The Police specifically the Chief Officer of the Police.

It does allow for further members to be specified in future.

In fact, the membership of the LRSAB continues to be much wider. The full membership was set out in Chapter 2 of this Annual Report. Attendance rates are set out in the next part of this report.

Ensure that the Board knows the safeguarding strengths and weaknesses of agencies, both individually and collectively, through challenge, scrutiny and performance management

The LRSAB has implemented a range of means of testing the safeguarding strengths and weaknesses of agencies that have included:

- The annual SAAF audit
- The incorporation of agency information in the Quality Assurance and Performance Management (QAPM) Framework covering: quantitative performance data; qualitative performance information, including audits; service user views: and frontline staff views
- Scrutinising individual agency safeguarding audit information together alongside a multi-agency audit programme.

The Board drives partnerships and partner agencies to own, prioritise, resource, improve and positively impact on safeguarding and receives management information to scrutinise and challenge performance

The LRLSCB and the LR Safeguarding Adults Board collectively host an annual Safeguarding Summit of leading politicians and chief officers from partner agencies. This year the summit was held on 28th November 2014. The purpose of these annual summits is to engage the most senior leaders and decision-makers in the findings of our Annual Reports and the setting of strategic priorities in our Business Plans. In addition, this ensures that these lead people feed in their key safeguarding issues into our planning and take from the summit key issues that are then built into their own organisation'.

The LRSAB has secured dynamic relationships with other partnerships, many based on agreed protocols, to ensure reciprocal scrutiny and challenge. There are formal protocols between the LRSAB and both the Health and Well-Being Boards in Leicestershire and Rutland. Both the annual LRSAB Business Plan and the LRSAB Annual Report were presented to:

- Leicestershire Health and Well-Being Board
- Rutland Health and Well-Being Board
- Leicestershire Children and Families Overview and Scrutiny Committee
- Leicestershire Adults and Communities Overview and Scrutiny Committee
- Rutland People (Children) Scrutiny Panel
- Rutland People (Adults and Health) Scrutiny Panel
- Leicestershire Cabinet

Rutland Cabinet.

In addition to these meetings, there have been interfaces with the Leicestershire Supporting Families Programme, the Rutland Changing Lives Programme and the Leicestershire and Rutland Better Care Together programmes.

To be assured that the "voice" of service users is heard and acted on

The LRSAB's Engagement Strategy, agreed in 2012/13, aimed to secure better links with a range of adult engagement forums in both Leicestershire and Rutland but limited progress was achieved.

It was our intention to extend this work both at strategic and community of interest levels, as well as at frontline service delivery levels, across the safeguarding partnership during 2014/15. The new Quality Assurance and Performance Management Framework for 2014/15 included a quadrant for service user views that was intended to secure wider engagement of adults in the safeguarding arena.

To support this work a Participation and Engagement Subgroup was established to further develop "voice of the service user" work. With participants from all key partner agencies, the group has audited engagement activity that is taking place across the partnership to identify ways in which we can work through existing, mainstream activities rather than creating additional activity and bureaucracy.

Work was undertaken with the new HealthWatch organisations for Leicestershire and for Rutland with a view to incorporating safeguarding in their patient engagement programmes of work.



To ensure partner agency contributions secure "value for money"

The SAB budget is a combined budget with the Safeguarding Children Board, to reflect the combined Business Office that supports the work of both Boards.

The income and expenditure for the year is shown here.

The total income for the SAB was £102,610

The areas to note within the budget statement are as follows:

- The funding for Domestic Homicide Reviews is kept separate as it comes from the Community Safety Partnership. The small underspend is due to a gap in staffing following someone leaving.
- Overspend on the core running costs, of £16,483, was used to fund an interim Service manager. Their role was to carry out some inspection preparation for the LSCB.
- Serious Case Review expenditure has again been relatively low.
- The decision taken in 2013/14 to significantly reduce the amount held in reserves has now had an impact on the budget as £69,484 was spent from the reserve account. The funding was paid out to the organisations that were successful in a bidding process to enable small projects to be delivered.

LSCB & SAB Budget 2014 -2015			
	Budget for 14-15	Actual at period 12*	
1571 - LSCB - Allocation for LSCB multi agency training provision.	£ 66,380.00	£ 82,600.00	
1572 - New DHR Posts & Costs	£ 40,500.00	£ 33,662.00	
1575 - SBBO Costs - staffing and all running costs	£321,860.00	£338,343.00	
1578 - Review costs	£ 24,400.00	£ 12,760.00	
1579 - CSE and missing costs	£ 8,000.00	£ 7,570.00	
1585 - Reserve account exependiture	£ -	£ 69,484.00	
1588 - Allocation for SAB multi agency training provision.	£ 8,000.00	£ 7,653.00	
TOTAL BUDGET ON EXPENDITURE	£469,140.00	£552,072.00	
SABINCOME	£102,610.00	£103,153.00	
Transfer Reserve	£ -	£ 88,923.00	
LSCB INCOME	£326,030.00	£319,496.00	
DHR Income	-£ 40,500.00	£ 40,500.00	
TOTAL BUDGET ON	£469,140.00	£552,072.00	
NET BUDGET FOR 2014-15 FOR SAB & LSCB	0	0	

Annual Report 2014-15 **19**

What has been the impact of what we did?

Prepare for the requirements of the Care Act 2014

The membership and constitution of the LRSAB has been reviewed, revised and judged to be Care Act compliant – indeed membership goes beyond statutory requirements as pointed out above.

Following the introduction of the Care Act 2014, the Social Care Institute for Excellence (SCIE) produced a SAB checklist and resources against which Boards could test their compliance with the expectations of the Care Act.

The tool aims to test:

- What Boards should do role and duties
- Who should do what membership and tasks
- How Boards should operate structure and substructures.

In April, the LRSAB carried out an initial assessment using this tool. Against the 49 indicators in the SCIE documents, the LRSAB judged itself to fully meet or be on target to meet 40. It judged itself to be amber on four indicators and red on five indicators as follows:

Amber:

- 1. Opportunities for people with care and support needs and carers to contribute to and inform the Board's work
- 2. Links with the wider community to inform it of, and receive feedback on, the work of the SAB
- 3. Arrangements to monitor, evaluate and raise public awareness of adult abuse and neglect and how to respond
- 4. Ensuring that each member agency or organisation, where appropriate, has arrangements in place to identify a Designated Adult Safeguarding Manager (DASM).

Red:

- 1. Evaluate effectiveness and impact of training
- 2. A prevention strategy specifying each agency's responsibilities
- 3. Arrangements for involvement of groups and communities that are not members

- 4. Arrangements for people with care and support needs and carers to be active participants in the SAB's work
- 5. Domestic Abuse forums currently no formal link to the DA Strategy Board for Leicestershire and Rutland.

This assessment is due to be considered by the Board in July and actions will be taken to address those areas that are judged to be amber or red.

In addition, a major revision of Safeguarding Policies and Procedures has been carried out in collaboration with Leicester City Safeguarding Adult Board in order that safeguarding arrangements are Care Act compliant. This was a major undertaking in which all partner agencies were engaged. The work has secured frameworks that apply across the sub-region thus securing consistency for those partner agencies that work across all three Local Authority areas. The most significant changes in respect of the Multi-Agency Policies and Procedures (MAPP), arising from the implementation of the Care Act, are as follows:

- The management of investigations in health care settings: it has been agreed that the existing thresholds guidance will be applied in these cases
- An individual approach to safeguarding based on the Making Safeguarding Personal programme: The Ann Craft Trust is undertaking some research in Leicestershire regarding this which will be the subject of a separate report to the SAB in due course
- No link to eligibility for services
- New sections on financial abuse, domestic violence and abuse, the needs of carers, modern slavery and forced marriage and self-neglect.

The online platform allows for linkage to other relevant local procedures, and content of the MAPP will continue to be overseen by the Procedures Group and updated biannually. Briefing materials for all staff have been prepared by the SAB Business Office and training programmes revised in accordance with the changes arising from the Act.

The new procedures are hosted online and are accessed here: http://www.llradultsafeguarding.co.uk/



Increase in compliance across the SAB Compliance Audit (SAAF)

Our second SAAF process was undertaken in December 2014 with the results reported to LRSAB in April 2014. The headline outcomes were as follows:

AGENCY	DECEMBER 2013	DECEMBER 2014
LEICS ASC	FULL	EFFECTIVE
RUTLAND ASC	FULL	WORKING TOWARDS EFFECTIVENESS
DISTRICTS	PARTIAL	WORKING TOWARDS EFFECTIVENESS
POLICE	FULL	EFFECTIVE
FIRE & RESCUE	PARTIAL	WORKING TOWARDS EFFECTIVENESS
PROBATION	NO RESPONSE*	
NHS DIRECT	FULL	
CCG	FULL	WORKING TOWARDS EFFECTIVENESS
EMAS	PARTIAL	
LPT	FULL	EFFECTIVE
UHL	PARTIAL	WORKING TOWARDS EFFECTIVENESS
NHS ENGLAND	FULL	EFFECTIVE

* Due to the restructuring of the Probation Service into the National Probation Service and the Community Rehabilitation Service, they were not able to provide a response to the Adults Safeguarding audit.

Changes were made to the judgement criteria as will be seen from the table above so direct comparisons in performance must take this into consideration. However, of those agencies participating, four self-assessed themselves as sustaining full compliance, three remained partially compliant and only two recorded reductions in compliance with standards.

It should be noted that in Section 8 (Information sharing), the CCGs felt unable to report full compliance as the Information Sharing Agreement, identified as an issue last year, is not yet signed by all agencies.

All agencies have produced Action Plans to improve performance where they selfassessed themselves not to be fully effective. Progress on these plans will be closely monitored by the Safeguarding Effectiveness Group (SEG).

Ensure that the Board, Executive and Subgroups have appropriate agency representation and high levels of attendance/participation to fulfil the objectives of the Business Plan

Attendance at the Leicestershire & Rutland Safeguarding Adults Board 2014-<u> 15</u>

Independent Chair	100%
Boards Business Office Manager	100%
Derbyshire, Leicestershire, Nottinghamshire and Rutland Community Rehabilitation Company (DLNR CRC)	0%
Designated Nurse Children and Adult – Designated Nurse Children and Adult Safeguarding – CCG hosted Safeguarding Team	75%
Clinical Commissioning Groups (CCGs)	100%
East Midlands Ambulance Service (EMAS)	100%
East Midlands Care Association	50%
Leicestershire County Council	100%
Leicestershire County Council Lead Member	100%
Leicestershire Fire and Rescue Service (LFRS)	100%

Leicestershire Partnership NHS Trust (NHS)	100%
Leicestershire Police	100%
Legal Services for the Safeguarding Boards	When required
National Probation Service (NPS)	0%
NHS England (Area Team)	50%
Rutland County Council	100%
Rutland County Council Lead Member	100%
University Hospitals of Leicester NHS Trust (UHL)	75%
Vista Blind	0%

The % rates above are based on the Board meeting four times in the year. The target attendance rate that we agreed was to secure attendance at 75% or better. The majority of member agencies have achieved this.

It is important to emphasise that the four agencies that are now statutory members of the LRSAB - the two County Councils, Leicestershire Police and the two CCGs secured a 100% attendance rate in 2014/15.

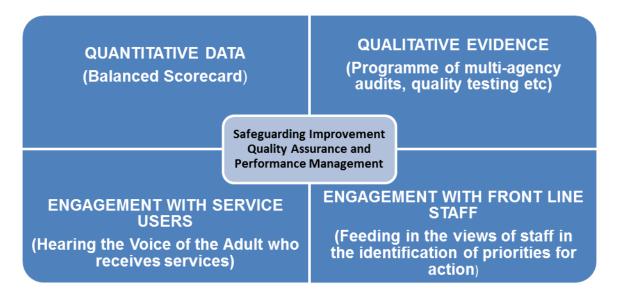
There has been a concern at the attendance level achieved by NHS England who did not attend in the last six months of 2014/15. The Independent Chair has written to the local area team requesting action be taken in this respect. At present NHS England is not guaranteeing attendance at all Safeguarding Adult Boards and the East Midlands Independent Chairs Network is seeking discussions with their leadership to resolve this position.

The National Probation Service and the Community Rehabilitation Company – formerly the Probation Service – have similarly recorded poor attendance levels. Prior to their reorganisation, the Probation Service had secured high levels of attendance. Discussions have taken place with relevant leadership and there is an expectation that attendance levels will be better in 2015/16.

Finally we have not secured regular target attendance levels from either the voluntary sector or the private sector. Private sector representation had reduced in the previous year but discussions with representatives about their role in the LRSAB has resulted in their re-engagement and it is important to stress that their representation was full in the last six months of the year and has remained full in the first half of 2015/16. Voluntary sector representation was affected by the ability of their representative to attend and a new representative is being sought in 2015/16.

Ensure that the Board knows the safeguarding strengths and weaknesses of agencies, both individually and collectively, through challenge, scrutiny and performance management

The new Quality Assurance and Performance Framework developed in 2013/14 were fully implemented in 2014/15. The framework is based on a four quadrant model as follows:



Quarterly reports on this framework have been considered by the Safeguarding Effectiveness Group with exception reporting to both the Executive and Board where action is required to improve performance. Key information from this process is included throughout this report.

In addition, the LRSAB has received reports from constituent partners where they experience inspection or review. Any safeguarding implications from these processes are reported and decisions taken about further action, scrutiny or challenge the LRSAB will wish to undertake to ensure recommendations and areas for improvement are addressed. One such example in 2014/15 was the Peer Review of Rutland County Council, highlights from which are set out below.

Rutland County Council Adult Social Care Peer Review – February 2015

On 9th February 2015 a small team from neighbouring East Midlands authorities visited Rutland County Council to review our arrangements for adult safeguarding.

This was a peer review, not an inspection, and RCC invited the team specifically to look at our provisions for adult safeguarding – they did not choose to examine this area. Below is a brief summary of their observations.

Effectiveness of Partnerships

When examining the effectiveness of partnerships, the peer review team found there was good engagement at a strategic level. They also identified a strong commitment to the Safeguarding Adults Board, Health & Well-being Board and Scrutiny.

The team cited recent improvements at an operational level and underlined the need to continue building on these at pace. More consideration could be given to building reciprocity and raising awareness of the Board's work – both internally and externally.

Raising Awareness

The team found that Senior Leadership at the Council assert a clear message that safeguarding is everyone's business and a priority for the whole organisation.

Recent work to improve community safety was also commended – e.g. working with Police, Community Safety and the retail sector to extend Keep Safe to other customer groups.

Going forward, consideration should be given to further developing the public's understanding of adult safeguarding. Safeguarding and advocacy information could also be given greater prominence on the Council's website.

Effectiveness of frontline

The team commented that staff were knowledgeable, informed and committed, as well as being open and honest. Frontline practice was found to have improved significantly over the past 12 months.

The team cited strong feedback from customers and providers who stated that interventions were person-centred, focused on outcomes, with the right balance of support and challenge. They also found that carers were confident they could and would contact the Council about any concerns.

It was suggested there could be greater clarity and consistency around policy, procedures and guidance.

Support for Safeguarding

As well as establishing a clear message that safeguarding is everyone's business, the Council was found to have strong political oversight, support and challenge at the Safeguarding Adults Board and at Scrutiny.

The Interim Head of Service role has played an important role in raising awareness and effectiveness of safeguarding practice.

Further consideration should be given to the need to minimise the impact of any potential political change on safeguarding adults, along with the need to maximise resource and support from regional networks (safeguarding, personalisation, mental health, CHC, Board).

The Board drives partnerships and partner agencies to own, prioritise, resource, improve and positively impact on safeguarding and receives management information to scrutinise and challenge performance

Following the Safeguarding Summit in December 2013, we secured evidence of partner agencies embedding key adult safeguarding priorities in their organisational Business Plans and we have received Annual Reports from some partner agencies, setting out the impact of these plans on both service performance and impact on service users.

Work with the Health and Well-Being Boards, and more recently the Better Care Together Programme, has also secured impact for example in:

- Developing stronger reference to safeguarding in commissioning and contract management arrangements
- Incorporation of safeguarding priorities in work programmes, such as the inclusion of reviews of mental health services in the Better Care Together Programme
- Alignment of work to secure greater safeguarding impact for example, using the Community Agents in Rutland to promote awareness and understanding of adult protection and the reporting of risk.

To be assured that the "voice" of service users is heard and acted on

Productive discussions were held with HealthWatch organisations in both Leicestershire and Rutland to incorporate safeguarding into core patient consultation and engagement programmes. The outcomes of this work will not be clear until the work is undertaken during 2015/16.

During 2014/15 we established a new Subgroup – the Engagement and Participation Subgroup – specifically to drive forward improvements in this area of work. The Group has developed a new Engagement and Participation Strategy that aims to secure engagement at three different levels:

- Strategic for example, through representative councils
- Community of Interest forums such as older people's councils, disabled adults groups
- Service delivery testing service user's perceptions of safeguarding services at the frontline.

The Subgroup has audited engagement activities that are taking place across Leicestershire and Rutland in order that we can operate through existing. mainstream mechanisms rather than creating additional activity.

This audit is now completed and plans were in place by the end of the year, on which we are reporting, to begin incorporating safeguarding into these activities. However, we had not secured any significant additional service user perspectives beyond the Making Safeguarding Personal agenda by the end of 2014/15.

In addition, a range of models for better engaging service users were tested through projects that were funded from the reserve account. These are covered in more detail in the section below on securing "value for money".

In conclusion, work to further extend the voice of the service user in the work of the Safeguarding Adults Board has not secured the impact intended and user voice has not been as strong as we had hoped. This will be a major priority for improvement in 2015/16.

To ensure partner agency contributions secure 'value for money'

There are no national benchmarks for the funding of Safeguarding Adult Boards, so comparisons with other Local Authority Areas is difficult to achieve.

The budget for the Leicestershire and Rutland Board is £102,610. Specific agency contributions are shown below:

Leicestershire County Council	£52,830
Leicestershire CCGs	£17,630
LPT NHS TRUST	£7,970
UHL NHS Trust	£7,970
Police Authority	£7,970
Rutland County Council	£8,240

The costs of the Independent Chair are shared across the LRSAB and the LRLSCB. In addition the Safeguarding Boards' Business Office (SBBO) is a combined office with the Children's Safeguarding Board. As a result, both Boards share one Board manager, three officers and 1.5 administrators. All of the core functions of the Adult Board are carried out within budget and the budget was fully spent in 2014/15.

The LRSAB does receive the contributions agreed by partner agencies and during 2014/15 better aligned its resources to its Business Plan. In addition, it funded a number of projects, in relation to adult safeguarding, as a means of investing carry forwards from previous financial years in activities that were able to illustrate support for our key Business Plan priorities. These included:

Just Services Ltd.	£7,000

LCC Adults Training	£7,000
Leicestershire Learning Disability Partnership Board	£4,500

The funding was allocated against criteria that required bidders to identify how their project:

- Reflected at least one of the priorities within the Board Business Plan;
- Targeted cross-agency functions, business and/or activity in support of effective safeguarding;
- Would improve quality and effectiveness and improve safeguarding outcomes for vulnerable adults:
- Secure impact across both Leicestershire and Rutland.

The funding could not be allocated to resource mainstream service activity since this is not a responsibility of the Safeguarding Board.

The impact of the investment was reported to the LRSAB in March 2015. Some headline impacts across the funded projects are as follows:

Just Services Ltd

This project focused on strengthening communication and engagement with adults with learning disabilities, with a view to improving the quality and effectiveness of safeguarding outcomes for this group across Leicestershire and Rutland.

The project resulted in the establishment of a Learning Disabilities Reference Group that has reviewed the way in which the LRSAB relates to adults with learning disabilities, how communication and engagement can be improved and has participated in developing future connectivity between the Board and this group of service users to ensure their voice is heard in our planning and that they receive information about how we respond to their views. The Reference Group produced a DVD to share their ideas about the best way to communicate with adults with learning disabilities and this has helped inform the new Communication and Engagement Strategy subsequently adopted by the LRSAB.

LCC Adults Training

This project targeted the development of skills, knowledge and confidence in first-line managers in care settings across Leicestershire and Rutland through a multi-agency training programme administered through the Leicestershire Social Care Development Group (LSCDG).

Key objectives included:

- Building confidence that the quality and impact of adult and child protection practice is effective
- Learning from local review processes (SCRs, SILPs, DHRs, CDOP etc.) is incorporated into the practice of agencies and secures improved outcomes for vulnerable adults and families
- Learning from regional and national review processes is incorporated into the practice of agencies and secures improved outcomes for vulnerable adults and families
- Training is improving outcomes for vulnerable adults through the Training Effectiveness and Workforce Development Strategy
- Building confidence that all partner agencies understand and are compliant with their safeguarding responsibilities.

A one day conference was held on 9th December 2014 that was attended by 60 delegates from care settings across Leicestershire and Rutland. Evaluations of the event were extremely positive including when delegates were contacted three months after the event to test impact in the workplace.

One delegate commented:

"I left the course buzzing with ideas that have improved my organisation. The course content was appropriate in clearly defining my role as a manager in a multi-agency safeguarding team. In a nutshell, it was one large learning event activity and the face to face learning through discussions and service user involvement. It also shed some light on the key area where most organisations who attended shared their struggles: recruiting and retaining of well-trained employees. I learnt of a phrase 'staff do not quit jobs, they quit managers'. As a new organisation, the conference provided good basis for developing our quality and sustainability policies."

Leicestershire Learning Disability Partnership Board

This project supported the commissioning of quality checking reviews within the pilot peer review service for service users and patients with a learning disability. The programme was in line with recommendations from the Winterbourne View and Mid-Staffordshire Hospital reviews in terms of using experts by experience to check service provision and, in line with the LRSAB Business Plan objective, of better engaging with service users.

The project delivered three, two hour training sessions each delivered to six selfadvocates with a view to supporting quality checking in care settings. Each session was delivered by an experienced Quality Checker and a learning and development manager. The sessions covered:

- Keeping safe including lone working, being challenged, health and safety and confidentiality:
- What to look for in a quality check working with service users, staff and what is seen around the home;
- Working with colleagues in compliance.

The project led to the design of a new form to support the Quality Checking process which is now being used more widely. Quality Checkers have started to develop their own one page profiles to enable engagement with people using the service and have reported increased understanding of how services are checked. Three quality checks are now being planned for all in-house services.

What do we need to do in the future?

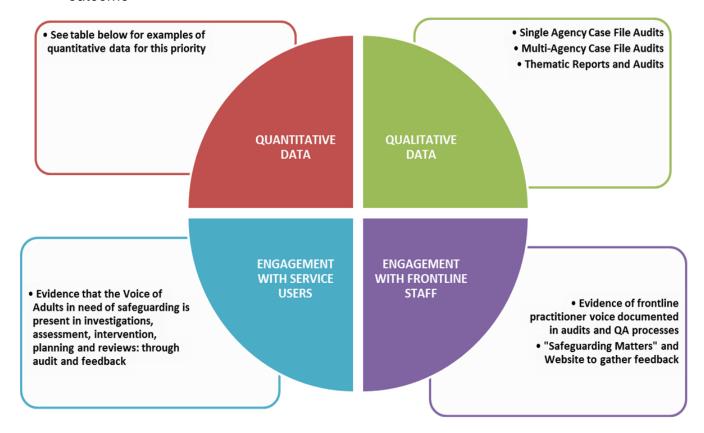
Based on our assessment of performance, and our needs identification process that formed part of our business planning process, the priorities for action in 2015/16 are set out below. More detail is provided in the full version of the Business Plan that is set out at Appendix 1.

Our priorities to ensure that "Safeguarding is Everyone's Business" are to:

- Be assured that the Board and partner agencies are fully compliant with the Care Act
- Be assured that effective Board arrangements remain in place to provide strategic leadership
- Be assured that the Better Care Together programme incorporates, promotes, measures and evaluates on safeguarding outcomes within its improvement plans
- Enable members of the public in Leicestershire and Rutland to be aware/understand what constitutes a safeguarding concern/alert/referral with a view to increasing appropriate reporting
- Enable elected members in Leicestershire and Rutland to be aware/understand what constitutes a safeguarding concern/alert/referral
- Listen and report what members of the public say about their experience of safeguarding, and evidence how these views impact on Board priorities and plans of action. The engagement activity of the Board will also be increased
- All agencies are compliant with safeguarding standards and expectations as monitored through the Safeguarding Adults Assurance Framework.

3.2. Priority 2b: To be assured that adults in need of safeguarding are safe

- To be assured of the quality and impact/effectiveness of services to adults in need of safeguarding
- To be assured that thresholds for safeguarding adults are clear, understood and consistently applied
- To be assured that the impact of universal and Early Help intervention reduces the numbers of adults requiring protection and care.
- To be assured that the quality and impact of single and multi-agency adult protection practice is effective.
- To be assured that adults at high risk/vulnerable are being identified (e.g. mental health, domestic violence) and risks managed to secure a positive outcome



- Number of Referrals to Social Care
- Primary Client Type
- Outcome of referrals
- Repeat Referrals
- Primary Age Group
- Source of Referral
- Type of Abuse
- Offenders discussed at MAPPA that have an assessed learning disability or allocated CPN
- Protection Plans
- Deprivation of Liberty (DoLS) information
- Numbers of vulnerable adult referrals that do not have a crime report attached
- Numbers of adult referrals that do have a crime attached
- Multi-agency investigations in the community
- Total number of referrals processed by the police
- Multi-agency investigations in registered settings

What we did

As set out in the previous section, a new Quality Assurance and Performance Management (QAPM) Framework was introduced in 2014/15 to enable the LRSAB to judge the impact of key strategic priorities in the Business Plan. Part of this Framework focused on providing more holistic evidence of the effectiveness of safeguarding services and their impact on safeguarding service quality and safeguarding outcomes for adults.

Significant work was undertaken to develop new policies and procedures for adult safeguarding to reflect changes introduced by the Care Act. These were referred to in the previous chapter of this Annual Report. This work included reviews of thresholds. In addition, we commissioned the Ann Craft Trust to undertake an analysis of the reasons for the increase in adult safeguarding referrals in 2013/14 to better understand the factors contributing to this increase and to inform our future strategies and priorities in this area. This report has identified a range of ways in which our QAPM framework should be developed in the future.

The new QAPM framework was also designed to provide evidence of impact at both individual and multi-agency levels and the relevant data and other performance information are present in the next section of this report.

What has been the impact of what we did?

To be assured of the quality and impact/effectiveness of services to adults in need of safeguarding / To be assured that thresholds for safeguarding adults are clear, understood and consistently applied

Performance reporting on key indicators set to test these two priorities is set out below.

Leicestershire

Table 1 – Adult Safeguarding referrals Leicestershire County Council 2014/15

Individuals for whom a safeguarding referral has Q1 Q2 Q3 Q4				Q4	Trend	
been made		į	,		,	
N of People		272	283	222	210	
N by Primary Age	18-64	72	76	80	75	
	65-74	23	22	15	10	/
Group	75-84	62	68	36	51	>
огоар	85-94	96	94	80	62	/
	95+	19	23	11	12	/
	Physical Support	39	53	55	60	/
	Sensory Support	0	0	0	1	/
N by Primary Support	Memory & Cognition	4	5	1	3	~
Reason	Learning Disability	12	8	14	21	/
Reason	Mental Health Support	15	24	20	24	~
	Social Support	0	1	2	1	<u></u>
	Not Yet Confirmed	202	192	130	100	/
	Substantiated	29.00%	41.10%	33.70%	37.20%	~
N h. O. taama af	Partially	12.40%	8.20%	13.70%	12.60%	\
N by Outcome of Referrals	Inconclusive	24.50%	15.50%	18.10%	17.60%	\
	Not substantiated	31.40%	33.80%	32.60%	31.70%	<u></u>
	Investigation ceased	2.80%	1.40%	1.90%	1.00%	<u>\</u>
	Physic al	68	58	81	57	>
	Sexual	22	19	14	11	/
	Psychological/ Emotional	29	34	43	28	^
N by Type of Risk	Financial and Material	34	30	56	24	~
	Neglect and Omission	157	113	116	108	/
	Discriminatory	2	0	1	0	_
	Institutional	15	12	11	9	
N by Location of Risk	Care Home	149	143	196	144	~
	Hospital	1	1	0	0	
	Own home	50	46	46	30	
	Community Service	2	4	1	0	\
	Other	91	29	27	26	

Changes to reporting of safeguarding data between 2013/14 and 2014/15 took place both locally and nationally. Therefore, comparisons between the two years should be considered with caution, whilst in some cases it is not possible.

- There were 908 individuals for whom a safeguarding referral was made during 2014/15: a 22% reduction on the previous year. However, this reduction brought the number more in line with the rate reported two years ago.
- Within the year itself the number of individuals for whom a safeguarding referral was made was higher during the first half of the year tailing off in the latter two quarters.
- The location of risk was a care home for almost two-thirds of cases (64%) a proportion similar to the previous year (63%). A person's own home was the location of risk for 17% of the cases. Due to a change in data recording between 2014/15 and the previous year a comparison is not possible.
- Of the 908 individuals, 70% were aged 65 or older with 42% being 85 or older.
- People with physical support needs accounted for over half of the primary support reasons, mental health support a quarter whilst learning disability accounted for 1 in 10 cases.
- The most common type of risk was Neglect and Omission, accounting for 43% of all risk. This was followed by physical abuse (23%), and Financial/ Material (13%).
- Of the investigations during 2014/15, 47% were either substantiated or partly substantiated. During the course of the year this proportion increased to 50% in the final quarter.

Review by the Ann Craft Trust

The pattern of referrals in Leicestershire has changed in each of the past three years. In our Annual Report for 2013/14 we had identified a significant increase in referrals and at the request of the Lead Member for Adults and Communities had commissioned the Ann Craft Trust to undertake a review of performance better to identify the reasons for the increase in referrals.

The review was undertaken during 2014/15 during which time, as reported above. the number of safeguarding referrals reduced to levels similar to those reported in 2012/13. Nevertheless, the review was an important source of analysis from which the LRSAB could consider its future work.

The recommendations emerging from the Ann Craft Trust report were as follows:

- The reduction in referrals and investigations during 2014-15 warrants careful a) consideration, particularly given the context of a simultaneous increase in alerts and decrease in substantiated abuse. Taken together, these figures suggest that (formal or informal) changes in policy and/or practice are resulting in fewer cases of abuse being recognised and responded to.
- b) The way in which adult safeguarding data is currently recorded is less than ideal and a number of changes should be considered:
 - All alerts, referrals and investigations should be recorded in the same database so that it is possible to link directly from alert, through referrals and investigations to outcomes.
 - Alerts should be consistently recorded to enable (amongst other things) the identification of patterns of alerts which do not meet thresholds for referrals, but collectively may indicate cause for concern about a particular individual or a particular service provider.
 - The current categorisations used to record service user groups are not consistent with those used by comparator authorities and may lead to confusion: for example, LCC has high numbers of cases recorded under the "Mental: Mental Health" category, but most of these are people aged 65+ and are likely to be people with dementia; the figures give a false impression of the level of engagement with adult safeguarding by adult (18-64) mental health teams.
 - The terminology against which outcomes of investigations are reported (substantiated; partially substantiated; inconclusive; unsubstantiated) are confusing and evidence from other authorities (Fyson, 2013) shows that these terms are unhelpful in maintaining accurate data. Consideration should be given to changing these terms into more everyday language which is less likely to lead to misunderstandings.
 - In light of the implementation of the Care Act 2014 and the right of adults to refuse adult safeguarding assessments, consideration should be given to whether to follow the lead of Central Bedfordshire in introducing a new outcomes category to record when a referral or investigation is halted at the request of the service user.
 - Consider following the lead of North Somerset and recording referrals in relation to whole services/providers and outcomes which quantify the risk level at the point that the case is concluded.
 - Recording of police involvement and prosecutions needs to become more consistent, including a clear understanding that these are not mutually exclusive categories.
- If new approaches to data collection are agreed, work will need to be c) undertaken to ensure that all staff fully understand the categories which are being used and to ensure that they apply these categories consistently.

- A high proportion of LCC referrals come from residential and nursing homes. d) Whilst this close work with providers of such services is welcome, LCC also needs to work with those providing supported living services and domiciliary care services to ensure that people living in their own homes – and the staff who support them – are equally confident in raising concerns when necessary.
- e) This report has confirmed that the rate of safeguarding referrals within Leicestershire does fluctuate in response to media reporting of abuse and the County Council may wish to consider having measures in place to manage increased referrals at times of intense media coverage of abuse cases. including high profile child abuse cases.
- f) Looking to the future, Leicestershire County Council needs to work with ethnic minority groups to ensure that they understand and report adult safeguarding issues.

The Board is due to consider these recommendations at their meeting in July and will incorporate into the Business Plan any actions that it judges necessary to implement those recommendations agreed.

Rutland

Table 2 – Adult Safeguarding referrals – Rutland County Council 2014/15

Closed Cases	Q1	Q2	Q3	Q4	Total
Primary Client Type					
Phys. Disability / Frailty / Sensory Imp.	7	10	3	8	28
Mental Health	0	0	0	1	1
Learning Disability	1	0	0	5	6
Substance Misuse	0	0	0	0	0
"Not Determined/Inconclusive"	0	0	0	0	0
Primary Age Group					
18-64	1	0	0	4	5
65-74	3	1	0	2	6
75-84	1	5	0	3	9
85+	3	4	3	5	15
Type of Abuse (Cases may include more than o	one category)				
Physical	5	3	0	2	10
Sexual		0	0	2	2
Psychological & Emotional		0	0	4	4
Financial & Material	2	3	0	1	6

Closed Cases	Q1	Q2	Q3	Q4	Total
Neglect & Acts of Omission	1	4	3	5	13
Discriminatory		0	0	0	0
Institutional		0	0	0	0
Not Known				0	0
Source of Referral					
Primary Health Care	0	0	1	1	2
Secondary Health Care	0	0	0	1	1
Adult Mental Health Setting	0	0	0	0	0
Residential	5	2	0	4	11
Day Care	0	0	0	0	0
Social Worker/Care Manager	0	3	0	4	7
Self-Directed Care Staff	0	0	0	0	0
Domiciliary	0	2	0	1	3
Other Care Workers	0	0	0	0	0
Self	0	0	0	2	2
Family Member	3	2	2	1	8
Other Service User	0	0	0	0	0
Friend/Neighbour	0	1	0	0	1
Care Quality Commission	0	0	0	0	0
Housing	0	0	0	0	0
Education	0	0	0	0	0
Police	0	0	0	0	0
Other	0	0	0	0	0
Not Known		0	0	0	0
Protection Plans					
Adult Protection Plans accepted by either the service user or the agencies involved	0	1	0	2	3
Adult Protection Plans not accepted	0	0	0	0	0
Could not consent	0	0	0	0	0
Repeat Referrals					
No of Repeat Referrals	0	2	0	1	3

255 safeguarding alerts were received in 2014/2015. 133 of these were from residential settings.

The number of alerts has been increasing throughout the year. In Quarter 1, 28 alerts were received; Q2 47; Q3 86 and Q4 94.

Looking at the 2013/14 safeguarding reports, the total number of alerts was 193: Q1 -28, Q2 -47, Q3 -86 and Q4 -32. As the numbers were reported slightly differently in 2013/14 in comparison to 2014/15, it is not possible to provide the split between the number of residential and community alerts. The number of alerts that resulted in the implementation of safeguarding alerts procedures was: 62 – residential and 29 - community.

In Q1, the role of the Safeguarding Adults Senior Practitioner was revised to include increased responsibility for maintaining an operational overview. This was achieved by the worker being based in the Adult Duty Team to support with screening and applying the thresholds of the LLR Multi-Agency Policy and Procedures to all safeguarding adults alerts. This reflects the implementation of a single point of contact for all alerts into Rutland County Council in Q2 which has led to a more robust screening process and overview of safeguarding activity and practice.

56 of this number met the thresholds for the implementation of formal safeguarding investigations. All other alerts were processed and safeguards provided via other care pathways. This includes working with providers and other agencies with the Safeguarding Lead scrutinising assurances that were given as a result of action points and recommendations to safeguard adults.

In Q4, the numbers of community alerts were more than the number of alerts from residential locations; this represented a change from the previous quarters where the number of alerts from residential settings was higher. This is an important shift in the profile of alerts.

In Q1, Rutland started to report on the source of alerts which identified the agencies raising concerns in response to the SEG, noting that there that there were no recorded safeguarding referrals from the Police in Rutland. This is an issue that the LRSAB now needs to investigate and, possibly, act on.

Closed Cases in 2014/2015

Safeguarding Adults performance data is obtained when a case is closed at the end of the Safeguarding Adults process. 39 cases were closed in 2014/2015. 15 were substantiated fully; 2 substantiated partially; 11 were not substantiated; 11 not substantiated and 6 were inconclusive.

Older people are consistently the largest service user group represented in safeguarding within Adult Social Care services. In Q4 there were 4 cases closed and the referrals were from 1 learning disability residential provider.

Neglect and Acts of Omission and physical abuse were the prevalent types of abuse in 2014/2015 and there have not been any alerts relating to Discriminatory or Institutional abuse.

In Q4 there was an increase in Adult Protection plans being accepted.

Activity

- A Large Scale Investigation was initiated and concluded in response to a care home provider with high numbers of safeguarding alerts and an inspection by the CQC which found the provider to be non-compliant in 5 out of 6 areas. The Adult Social Care Team Manager and Senior Practitioner were actively involved in this investigation working to oversee the implementation and adherence to an Action and Improvement plan. The Senior Practitioner for Adult Safeguarding also maintained an overview.
- A newly appointed Care Manager for a residential home was supported to address high levels of concerns which had identified compliance and safeguarding issues.
- All Adult Teams have identified a Safequarding Lead to ensure that the Multi-Agency Policy and Procedures are embedded in practice. These leads meet regularly and enable all practitioners to maintain their awareness of safeguarding issues, have a forum to learn from safeguarding investigations and debate issues around adult safeguarding.
- Public awareness of Adult Safeguarding, and who to report concerns with, is being raised by plans for the public to use the internet to raise concerns.
- RCC have delivered safeguarding training for HealthWatch volunteers.
- The head of service ensured that Making Safeguarding Personal was being embedded in the screening of all alerts and was central to decision making around intervention and investigation.
- Care Act and safeguarding training was rolled out for all staff.

To be assured that the impact of universal and Early Help intervention reduces the numbers of adults requiring protection and care

The number of adults over 65 accessing permanent care is currently on track to meet the Better Care Fund (BCF) target.

Leicestershire's Home Care Assessment and Reablement Team (HART) report that overall numbers using the service have fallen between April and December 2014 when compared to the similar period last year; this is partly due to the team holding onto cases for longer as they await transfer to the independent sector which is currently close to capacity. In addition, the adjustment to the service to focus on people with most need has meant referrals to the service of people discharged from hospital now constitutes 62% of activity, a slight increase from 59% last year.

To be assured that the quality and impact of single and multi-agency adult protection practice is effective

First Contact - Health and Well-Being Hub, Leicestershire County Council

Over the last 12 months, the First Contact referral management scheme has continued to grow its capacity (number of referrals and partners, including GP practices) and capability (monitoring of outcomes and service evaluation). The contribution of First Contact to the Leicestershire County Council shift to early intervention and prevention was recognized by the inclusion of the scheme in the Better Care Fund (BCF) plan for health and social care integration. Following the end of national funding for local welfare provision on 31 March 2015, First Contact extended its role to provide signposting to community support for people in financial and material crises. To support the BCF's "unified prevention offer for communities", First Contact transferred from the department of Adults and Communities to Public Health on 1 May 2015. In doing so, First Contact came together with Public Health Preventative Services and Ambitions to develop a lifestyle information and advice hub. The resultant model in development is a fully integrated health and well-being hub that supports frontline identification and brief advice and referral; provides triage assessment, advice and motivational support; and facilitates access to appropriate support, including self-help resources, community services and specialist provision. Further opportunities to integrate with related projects, including Local Area Coordination, Lightbulb and Healthy Housing, are being explored.

For 2014/15, there have been 3446 new referrals made to the scheme, resulting in 8208 referrals to low level preventative services. This represented an increase of 31% on new referrals from 2013/14.

These figures include 260 referrals made across 47 GPs and 295 made from Integrated/Proactive Care Coordinators across East & West CCGs.

First Contact has in the region of 90 partner agencies involved in the referral to and the delivery of services.

Case Study demonstrating good practice

The following case provides an excellent example of multi-agency work between the Police, Adult Social Care and Lutterworth Country House care home resulting in a criminal conviction for the offender and jailed for three and a half years.

The Leicester Mercury reported that the 83-year-old woman, who had dementia, was financially abused by her nephew leaving her in arrears at her care home and was left with no money for clothing, social activities or even a coffee when out in the community.

Simon Tipper (54) abused his position when entrusted with a Power of Attorney over his Aunt Kathleen Brightmore's finances, admitting defrauding her of all her money. including her savings, pension and the proceeds of two house sales, between November 2011 and April 2014.

Social Services were contacted and a Safeguarding Investigation commenced resulting in Tipper's Power of Attorney being revoked and a successful prosecution.

The social worker wrote a victim impact statement on behalf of Kathleen stating: "She never had any money for essential items and was reluctant to partake in social activities. "It was apparent she required new clothes and couldn't even afford a coffee when out."

The Local Authority have taken over responsibility for paying the care home fees and she receives a personal needs allowance to cover basics items.

To be assured that adults at high risk/vulnerable are being identified (e.g. mental health, domestic violence) and risks managed to secure a positive outcome

A key priority in this area during 2014/15 has been our close monitoring, scrutiny and challenge of work in relation to the implementation of the Mental Capacity Act and, in particular, Deprivation of Liberty Safeguards (DoLS).

It is important to note that the DoLS function is undertaken by Leicestershire County Council on behalf of both Leicestershire and Rutland.

There has been regular reporting to the Safeguarding Effectiveness Group, the LRSAB Executive and the Board on MCA and DoLS, particularly focusing on the impact of the Supreme Court judgment in the case of P v. Cheshire West and Chester Council, which has had such a significant impact on the number of DoLS referrals across the country.

Pre Supreme Court Judgment since their introduction in 2009-10 there had been a year-on-year increase in the number of DoLS applications completed. Nationally there were:

- 7,157 applications in 2009-10
- 11,382 applications in 2011-12
- 11,887 applications in 2012-13
- 12,400 applications in 2013-2014

Post Supreme Court Judgment: there has been a substantial increase in applications being received by Supervisory Bodies. In 2014-15, there were approximately 91,000 applications.

Since 2009 Leicestershire and Rutland have taken a proactive approach to DoLS, working hard to foster strong relationships with partners and stakeholders and a commitment to a county wide training plan. There has always been a DoLS lead in place, a commitment to maintaining a core DoLS team of Best Interest Assessors and assurance that Senior Managers were available as Signatories to authorise applications. Comparatively to other Supervisory Bodies, Leicestershire and Rutland were in a relatively strong position to deal with an increase in application rates.

However, since the judgment, all Supervisory Bodies have experienced a more than significant increase in application rates. Due to either a lack of Best Interest Assessors, Mental Health Assessors or Signatories, the vast majority of Supervisory Bodies across the country now have been unable to complete over 71% of applications made to them. Of the 33,000 applications received by 93 Councils in April-June 2015, 23,300 have still yet to be assessed.

Despite additional staff resources, Leicestershire and Rutland are in a similar position and, in order to try to manage the large number of outstanding assessments, the ADASS guidance has been utilised to triage referrals. The service focus at present is to complete assessments with those persons most likely to be at risk, such as a person objecting to their residence, where there is a dispute about capacity, high level of restraint or restriction, safeguarding or Article 8 issues (right to private and family life).

Deprivation of Liberty Safeguards (DoLS)

Referral Rates per Supervisory Body:

Table 1: 2013-14

Supervisory Body	Y5 Q1	Y5 Q2	Y5 Q3	Y5 Q4	Total
Leicestershire County Council	126	144	193	208	671
Rutland County Council	5	7	6	6	24
Total	131	151	199	214	695

Table 2: 2014-15

Supervisory Body	Y6 Q1	Y6 Q2	Y6 Q3	Y6 Q4	Total
Leicestershire County Council	209	315	536	808	1868
Rutland County Council	16	37	70	39	162
Total	225	352	606	847	2030

An increase of 192% overall

Table 3: DoLS Referrals by Organisation

COUNTY	Y6 Q1	Y6 Q2	Y6 Q3	Y6 Q4
Care Home	180	236	444	684
LPT	14	61	66	42
UHL	12	16	19	74
Private Hospital	3	2	7	8
RUTLAND				
Care Home	13	28	65	37
LPT	2	8	3	1
UHL	0	0	1	1
Private Hospital	1	1	1	0

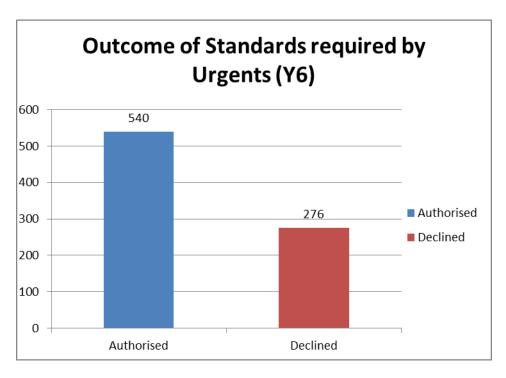


Table 4: Outcome of Standard Authorisations

This figure is skewed by persons leaving a managing Authority or passing away whilst awaiting assessment. It is not a true representation of current trends. Given the broad definition of what constitutes a DoL, the vast majority of non-capacitated individuals assessed in care homes or hospitals would be found to be deprived of their liberty.

The reasons for declining an authorisation have increasingly included those individuals who are objecting to being in care, but that have the capacity to decide where to reside.

Summary

The data illustrates that Leicestershire and Rutland have, like most other areas in the country, experienced a significant increase in DoLS demand following the Cheshire West judgment that has placed considerable pressure on resources, both human and financial. It has also presented a performance challenge in terms of administering applications within timescales. This position led the LRSAB to retain MCA and DoLS as a priority in its Business Plan and QAPM arrangements and to sustain regular reporting from the MCA and DoLS teams to assure the Board that increased demand is being appropriately managed and that adult safeguarding is sustained.

The scrutiny undertaken by the Board and the submissions made by the DoLS team have identified a number of operational and policy issues that have required consideration notably:

- Pressures on staff resources both in terms of volumes of activity but also specifically in relation to best interest assessment;
- Staff awareness, confidence, competency and compliance in relation to MCA and DoLS across the partnership particularly in the care sector:
- Service user experience.

A key opportunity to enhance our response to these and other issues presented itself in the shape of the NHS MCA Improvement Programme that is featured below.

MCA Improvement Programme

A key activity during 2014/15 has been the LRSAB engagement in the NHS England MCA Improvement Programme.

In mid-2014 the local NHS England Area Team invited the Safeguarding Adult Boards in Leicestershire and Rutland, Leicester City and Lincolnshire to partner with them to bid for and manage an MCA Improvement Programme. Given the priority that the LRSAB had given to MCA and DoLS provision, the Board agreed to participate. Investment of £471,110 non-recurrent funding was secured to support the programme across the three Board areas.

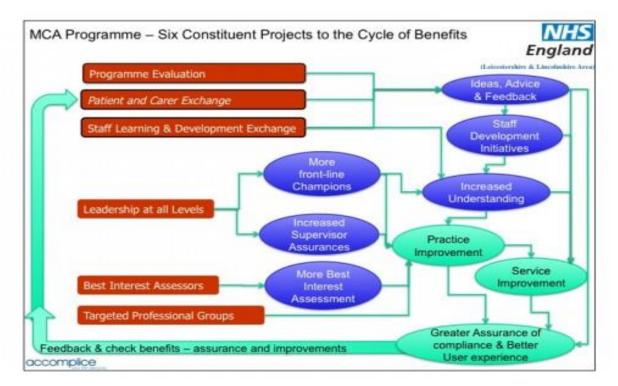
The MCA Improvement Programme aims to increase understanding about, and implementation of, the Mental Capacity Act across Leicestershire, Rutland, Leicester and Lincolnshire by adding value to existing local activity and plans.

The intention is that by combining efforts across geography, organisations and professions we will accelerate the release of key benefits.

The key objectives that NHS England set for the investment were:

- Improved "User" [patient, service user, carer and public] feedback systems
- Improved quality of service and professional practice: staff sharing best practice and shaping their development opportunities, drawing on userfeedback
- Greater compliance across a wider group of professionals: targeting previously "hard to reach" professional groups
- Greater assurance of MCA compliance: creating new, and supporting existing, Best Interest Assessors, Supervisors and frontline "champions".

The programme is made up of six constituent projects that aim collectively to deliver a range of benefits as set out in the diagram below.



The programme was launched in early 2015 and has comprised six specific projects.

Three projects have focused on increasing MCA/DoLS staff awareness and understanding, including:

- The creation of "Staff Exchanges" in Leicestershire & Rutland and Lincolnshire based on a model developed in Leicester City
- Leadership at All Levels "hot house" day events for those managing MCA and DoLS provision, supported by action learning sets to embed learning. A Pocket Guide, to be housed on the web, will be available to inform staff across the sectors
- Targeted professional development packages for primary care, care homes and the police.

All staff, especially those completing programme development initiatives, are invited to join their local Staff Exchange in order to enhance their MCA awareness and ensure learning improves practice.

The three other projects will provide:

- Training for over 30 new Best Interest Assessors across Leicestershire & Rutland and Lincolnshire by July 2016. Leicester City is styling a new BIA initiative to suit its local circumstance.
- A User Exchange coordinator to access user and carer stories and identify practice developments that need to be considered in light of these experiences.
- An Evaluation Project delivered by the University of Lincoln to assess the impact of the programme.

At the time of publishing this Annual Report, the first three projects set out above had just begun and the second tranche of three was due to commence in July 2015. It is not, therefore, possible to evaluate impact at this stage. Engagement with, and scrutiny of, the programme remains a key priority for the LRSAB in 2015/16 and this is included in our Business plan for the coming year as set out below.

What do we need to do in the future?

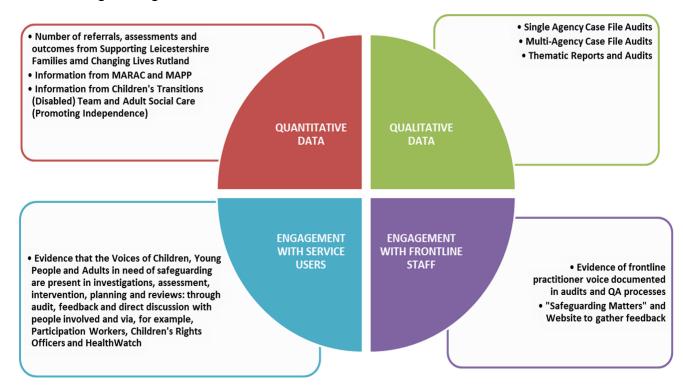
Based on our assessment of performance, and our needs identification process that formed part of our business planning process, the priorities for action in 2015/16 are set out below. More detail is provided in the full version of the Business Plan that is set out at Appendix 1.

- Be assured that thresholds are understood and provide proportionate assistance and risk management to adults in need of safeguarding
- Implementation of the new Care Act compliant safeguarding procedures across Leicestershire and Rutland and assure ourselves that they are effective
- Ensure that the Self-Neglect element of the Care Act compliant procedures are fit for purpose
- Be assured that adults are safe in care, including residential establishments, care homes, domiciliary care and nursing homes
- Be assured that adults are safe in the community
- Be assured that DoLS are effectively managed to ensure safety of adults without capacity
- Be assured that the increasing number of DoLS referrals can be managed across Leicestershire and Rutland
- Participate in the NHS England MCA/DoLS Programme to contribute to improvements in the implementation of MCA and DoLS across Leicestershire, Rutland, Leicester City and Lincolnshire
- Be assured that recommendations from Winterbourne are fully embedded in safeguarding practice.

3.3. Priority 2c: To be assured that services for children, services for adults and services for families are effectively coordinated to ensure children and adults are safe

The actions for the LRLSCB under this priority, together with the indicators of performance used to assess impact, were:

- To be assured that young people who are receiving services from Children's Services successfully transition to Adult Services where necessary
- To be assured that adults who are assessed as posing risk to children, young people and adults in need of safeguarding (such as MAPPA and MARAC) are effectively managed and that risk to others is mitigated
- To be assured that services that work with "whole" families, e.g. Supporting Leicestershire Families and Changing Lives Rutland, are effectively coordinated and secure added value in ensuring and coordinating effective safeguarding



What we did

To be assured that young people who are receiving services from Children's Services successfully transition to Adult Services where necessary

This priority was included in the Business Plan 2014/15 to reflect the alignment of the LRSAB with the LRLSCB, and the wish to secure assurance that services across children and adult services were acting in a cohesive and coordinated way. The key focus for the Boards was expected to be those young people and young adults with safeguarding needs but initially the Boards were seeking to observe the effectiveness of cross-service working.

Leicestershire

The Leicestershire Transitions Service provides community care support for young people who have complex health and social care needs to prepare for their adult lives.

Funding responsibility transfers to Adult Services when young people no longer access formal education services, which could be at age 16+ up to the age of 24.

The team works closely with the Children and Family Services' (C&FS) Disabled Children's Team to identify the young people who are eligible for a transitions service and the appropriate time to transfer responsibilities from C&FS to A&C.

The team approach is to use person-centred planning to establish individual support plans and goals for young people and their family/carers, which will maximise the life opportunities available to each individual to achieve an increased level of independence, health and wellbeing. The team uses a range of communication tools including IT that young people can relate to in order to co-produce their assessments and support plans.

Rutland

In Rutland the services are managed within one Department, the People Directorate, and there is, as a result, a less complex organisational and structural arrangement for services to children and adults.

The transition service in Rutland is provided through the Senior Transitions and Complex Case Social Worker, who works within the Adult Social Care Team. Case responsibility and funding transfers to Adult Services when a young person reaches 18 years of age.

Within the Rutland Transitions Pathway, transition preparation begins in the academic school year 8 (12-13vr) where the Transitions Social Worker identifies young people who have additional needs through those who have an Education, Health and Care Plan (EHC). At this stage, a young person and their parents are informed of the transition process and introduced to Person Centred Plans and approach.

In the Academic school year 9 (13-14) transitions begin; the Transition Social Worker will attend the EHC review to start to prepare for the adulthood plan.

In the Academic school year 11 (15-16) the EHC review is attended by the Children's Disabilities Social Worker, the Transitions Social Worker, Post-16 providers and other appropriate support services. During this review, it is ensured that the "Preparing for Adulthood Plan" is agreed, Post-16 options are discussed as well as transport and the pathways to Independence.

In the Academic year 12 (16-17) at the EHC review, the "Preparing for Adulthood Plan" is updated. Any Mental Capacity Assessment issues and DoLS are also considered.

When a young person turns 17 years old, if they are already open to CYPS Disability services, the Transitions Social Worker and the Children's Disability Social Worker, will jointly work through the year leading up to the young persons' 18th birthday to complete the transitions assessment and agree services needed within Adult Services. This ensures there are no gaps between the services.

If a young person is not already open to CYPS Disability Services, but it is established that the young person is "likely to have needs", a transitions assessment will take place.

Throughout the process a person-centred approach, using tools such as one page profiles, are used to ensure that the young person has every opportunity to have an individual plan to reach their potential through the pathways of independence.

We monitor all our young people from the age of 12-13 years old up to 25 years old who have additional needs through our Transitional Operations Group. The Group consists of a multi-agency membership including Social Care, schools, housing and transport services and meets every six weeks. This forum allows us to track our young people to ensure that we are working together to ensure that young people reach their aspirations and the outcomes that matter to them. It also supports identifying those young people who may not already be open to CPYS Services.

Transitions from Children's Disability Service to Adult Transitions Service 2014/2015:

- 6 young people assessed by the Transitions Service" who were not already open to CYPS but who were "likely to have needs"
- 3 young people transferred from CYPS Disability Service (none on CPP) to the Transitions Service
- 8 young people transferred from Transitions Service to Adult Social Care team (none having Safeguarding plans)

- 1 transition case going to Court of Protection for DoLS due to restrictive nature of care arrangements at school and respite care
- 0 complaints with regards to the Transitions Service or process

That adults who are assessed as posing risk to children, young people and adults in need of safeguarding (such as MAPPA and MARAC) are effectively managed and that risk to others is mitigated

The LRSAB and the LRLSCB have sought collectively to sustain close working relationships with MAPPA and MARAC processes, since the assessment of adults posing a risk to others and their effective management are critical to our goal of securing the safeguarding of children, young people and adults in Leicestershire and Rutland. A number of Board members attend MAPPA and MARAC meetings and this enables cross-communication between the forums to take place. In addition, the Safeguarding Effectiveness Group (SEG) has sustained regular monitoring of MAPPA and MARAC performance to scrutinise them.

To be assured that services that work with "whole" families, e.g. Supporting Leicestershire Families and Changing Lives Rutland, are effectively coordinated and secure added value in ensuring and coordinating effective safeguarding

From the point at which the Government introduced the "Troubled Families" initiative, the LRSAB and LRLSCB recognized the need to scrutinise and challenge the development of local responses, most specifically to ensure that safeguarding featured as a key priority and cross-cutting theme in local delivery programmes. It was understood that achievement of key goals could enhance safeguarding of both adults and children, but it was also critical to ensure that, where targeted families were already known to safeguarding services, interventions were appropriately designed and delivered within agreed safeguarding policy and practice.

Through the joint meetings of the LRSAB and LRLSCB, the Boards received presentations from the Supporting Leicestershire Families and Changing Lives Rutland teams both at the point that the local programmes were being designed and developed and, subsequently, as they have been rolled out. Initial concerns about the approach being taken in Leicestershire led to the appointment of the Independent Chair to the Supporting Leicestershire Families Board.

What has been the impact of what we did?

To be assured that young people who are receiving services from Children's Services successfully transition to Adult Services where necessary

Transition between Children's and Adult's Services

Leicestershire report that in 2014-15:

• 152 cases were open to the Transitions Service in 2014/15

- 50 young people transferred from C&FS to the Adults and Communities (A&C) Transitions Service, of which none were on a CPP
- 2 young people transferred from the Transitions Service with ongoing Adult Social Care support, of which none had a formal safeguarding action plan
- 0 complaints were received where the Transitions Service was involved.

The analysis of data has indicated that, from a safeguarding perspective, there are few if any cases where young people subject to a formal child protection plan, or young adults requiring a safeguarding intervention, are involved in the formal transition processes.

The Board needs now to consider whether this indicator remains a focus in our QAPM framework. It is not the role of the LRSAB to test the quality of transitions more generally – this is the role of strategic commissioning bodies, such as the Health and Well-Being Board.

That adults who are assessed as posing risk to children, young people and adults in need of safeguarding (such as MAPPA and MARAC) are effectively managed and that risk to others is mitigated

MAPPA

The numbers of MAPP Level 2 and 3 offenders in Leicestershire and Rutland are considerably less compared to our neighbouring areas (3 Level 2 offenders, and 2 Level 3 offenders). This is due to the adoption of the "Four Pillars" Process in Leicestershire and Rutland. This will eventually become a national tool for risk management. Once this happens, it is envisaged other areas' numbers will reduce gradually as they become more confident managing their offenders at MAPP Level 1 or outside of the MAPP arrangements.

The "Four Pillars" Process provides a structure to risk management planning which in turn increases agencies' confidence when managing sexual and violent offenders in the community.

Total No. of Referrals to MAPP Level 2 or 3 Management	4
Accepted at MAPP Level 2	2
Accepted at MAPP Level 3	0
Not accepted at MAPP Level 2 or 3	2*
No. of cases heard at a MAPP Level 2 Meeting:	3
No. of cases heard at a MAPP Level 3 Meeting:	2
Total no. of offenders discussed at MAPP Level 2 or 3 where there are concerns for their mental	2
health / there is <i>ongoing</i> mental health treatment:	

Total no. of offenders aged 18 or under being managed at MAPP Level 2 or 3:	1
Of the above number, how many have an assessed learning disability or allocated CPN:	0
No. of offenders being managed at MAPP Level 2 or 3 where there is a child(ren) identified as being at risk of serious harm from the offender:	3
Parents, carers or guardians requesting information re CSODS: applications / disclosures respectively:	4/0

^{*}Reasons for non-acceptance:

- 1. Sufficient mental health involvement and police support given.
- 2. Actions to progress this case agreed at the meeting no further added value for IOM or **MAPPA**

Multi-Agency Risk Assessment Conference (MARAC)

Repeat referrals have stayed static over the last six months at around 26%. Referrals to MARAC continue to be mainly from Police and IDVA services. Some agencies use IDVA as a vehicle to refer to MARAC; therefore, work is underway to look to record the originator of referral to ensure we can understand the impact of single agency and partnership work to promote and embed DASH and MARAC referral procedures.

MARAC data for Leicestershire & Rutland 2014/15 Q4

2014/15 Quarter 4	Number	%
No of MARACs	6	
Number of cases discussed	92	
12 months to 31 March 2015		
Number of referrals	323	
Repeat referrals	86	26.6%
Referrals from Police	172	53.3%
Referrals from IDVA	144	44.6%
Referrals from Children's Social Care	1	0.3%
Referrals from Health Services	5	1.5%
Referrals from Probation	1	0.3%

Leicestershire & Rutland county council figures are below Safe Lives recommendations for most elements (Table 3). Notably cases discussed, based upon cases per 10,000 of the adult female population, LGBT referrals and referrals where the victim has a disability. Leicestershire and Rutland County are generally in line with national averages, except for the number of cases per 10,000 of the adult population. This may be because MARAC thresholds are based upon two of the three Safe Lives criteria: actuarial assessment (DASH visible high risk), and professional judgment, but not escalation (repeat incidents).

Safe Lives MARAC national comparison: Leicestershire & Rutland MARAC Jan-Dec 2014

In	dicator	Leicestershire and Rutland (Counties)	SafeLives' recommendation ³	Leicestershire (Force area)	Most similar force group	National data
	umber of Maracs nding in data	1	-	2	53	285
1.	Number of cases discussed	315	1150	605	13,719	76,336
2.	Cases per 10,000 of the adult female population	11	40	14	30	32
3.	Number of children	440	-	820	18,386	96,523
4.	Referrals from partner agencies	51%	25-40%	44%	34%	38%
5.	Referrals from police	49%	60-75%	56%	66%	62%
6.	Repeat referrals	26%	28-40%	32%	25%	24%
7.	B & ME referrals	9.2%	Marac area B & ME p	opulation = 10.8	%	
8.	LGBT referrals	<1%	5%	<1%	<1%	0.9%
9.	Referrals where the victim has a disability	4.8%	17%	4.0%	5.6%	3.5%
10.	Referrals with a male victim	3.2%	4-10%	2.5%	5.1%	4.4%
11.	Number of cases where victim is aged 16 – 17	7	-	12	260	1335
12.	% of cases where victim is aged 16 – 17	2.2%	-	2.0%	1.9%	1.7%
13.	Number causing harm aged 17 and below	8	-	14	150	733

³ Read a full explanation of <u>SafeLives' recommendations and points to consider</u>

Leicestershire	& Rutland	MARAC &	. Clare's	Law data

Safeguarding Core		Q1			Q2			Q3		Q4			
Data Set FYPC	Apr-	May-	Jun-	Jul-	Aug-	Sep-	Oct-	Nov-	Dec-	Jan-	Feb-	Mar-	
	2014	2014	2014	2014	2014	2014	2014	2014	2014	2015	2015	2015	
MARAC													
County Cases	36	10	30	25	36	20	33	22	17	28	33	30	
Total Cases		76			81			72			91		
Total number of		125			100			99			120		
children													
Under 5		54			42			45			47		
Over 5		71			58			54			73		
Child protection plan		20			7			10			15		
prior to MARAC													
Number pregnant		9			5			4			5		
Clare's Law													
Number of requests		19			21			24			11		
received by Police													
Number receiving		0			3			1		0			
treatment from LPT													
Number received		2			6			13			6		
treatment historically													
from LPT													

To be assured that services that work with "whole" families, e.g. Supporting Leicestershire Families and Changing Lives Rutland, are effectively coordinated and secure added value in ensuring and coordinating effective safeguarding

Changing Lives - Rutland

Changing Lives has now worked with 100% of the targeted families over the course of the original programme. 76% have now made a full turnaround of moving into employment, having increased school attendance and crime and ASB being reduced. The programme now aims to focus on the remaining six families until May 2015 to achieve a full 100% turnaround.

Rutland has been confirmed as joining the second phase of the programme in April 2015. The extended programme will require additional resources and the consideration of a service transformation to meet the target of working with 3.3 times the amount of families in the next phase, approximately 100 families over five years. An income of approximately £440,000 will be received from the Government over the course of the five year programme to allow the whole family approach to continue.

Supporting Leicestershire Families (SLF)

At the end of March 2015, 479 assessments had been undertaken with families referred to Supporting Leicestershire Families. Of these families, 91% were

assessed as "complex" and 10% as "at risk". Performance demonstrates improvements in outcomes across a number of key issues (Anti-Social Behaviour, homelessness, domestic abuse and schooling).

The Troubled Families Unit (TFU) identified that Leicestershire had 810 troubled families and, in August 2014, Leicestershire submitted its final claim having achieved the required results for 810 families. In October 2014, it was announced that Leicestershire was one of six authorities across the Country to have achieved 100% of its Phase One target and has therefore drawn down 100% of the available PBR funding (£2.5million). This means that families have been supported into employment, out of involvement in crime and anti-social behaviour and children's school attendance has increased. Alongside this, the SLF Service has seen significant improvements in outcomes for families around domestic abuse, relationships, housing issues, financial management and child behaviour. Leicestershire entered Phase Two of the Troubled Families Programme as an Early Starter in September 2014. The TFU have identified that the Leicestershire share of the 400,000 families is 2790 over the five years.

What do we need to do in the future?

The outcomes of analysis in this Annual Report, and the related needs identification process that informed our business planning process from 2015/16, have identified the following priorities. Greater detail on each, including the actions and impact planned, are set out in the Business Plan that is attached at Appendix 1.

Female Genital Mutilation (FGM)

 A multi-agency Task and Finish Group has been established to rewrite the FGM Multi-Agency Child Protection Procedures. This group will also have a role in communicating FGM awareness across the Safeguarding Adult Partnership.

Prevent - Channel

- Reduction in number of young people and young adults involved in terrorism
- Increase in identification of young people/adults at risk of becoming involved in terrorism
- Increased community awareness of young people and adults at risk of becoming involved in terrorism.

Transition to Adult Services

- Care leavers and disabled young people are appropriately supported by Children's Services to work towards independence
- Disabled young people successfully transition to be supported in Adult

Services.

Think Family

- Effective joint working between the various interagency professionals and teams involved particularly focusing on relationships within the family and joint oversight of the ongoing work between services for adults and services for children.
- Scrutiny and challenge of Supporting Leicestershire Families and Changing Lives, Rutland.

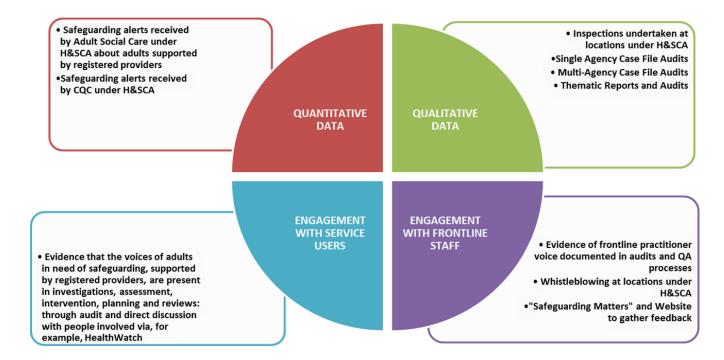
Domestic Abuse

- Multi-Agency Risk Assessment Conference (MARAC)
- Fully coordinated response to people who are at risk of domestic abuse
- Improved attendance and participation by agencies at MARAC
- Teenage Peer Domestic Abuse
- Young people at risk of, or who experience domestic abuse in their peer relationships, are supported and safe
- The single consistent specialist Domestic Abuse and Sexual Violence Support Service will be in place from 1st December 2015
- In Leicestershire we will also be revising services for support for children and young people affected by domestic abuse during 2015/16. Further work is also required to put in place clear pathways for support for these young people and children across all agencies
- Operation Encompass will be implemented.



3.4. Priority 3b: To be assured of the quality of care for any adult supported by registered providers

- To be assured that adults living with or receiving services from registered providers are safe
- To be assured that providers are effective in carrying out their safeguarding responsibilities and that as a result service users are safe
- To be assured that safeguarding roles and responsibilities and outcomes are explicit in commissioning, contracting, monitoring and review of services



What we did

To be assured that adults living with or receiving services from registered providers are safe

The Safeguarding Effectiveness Group (SEG) has monitored the number of safeguarding referrals from Care Homes and Providers on a quarterly basis and input on the Winterbourne Action plan.

In addition CQC has been invited to attend the LRSAB twice each year to contribute to scrutiny and challenge of the quality and effectiveness of safeguarding in registered provision. CQC attended one meeting during 2014/15.

To be assured that providers are effective in carrying out their safeguarding responsibilities and that as a result service users are safe

Rutland

To monitor providers' performance and any potential rising safeguarding concerns, Rutland County Council has established an early warning system that is monitored by the DASM. The Safeguarding Senior Practitioner meets every two weeks with Contract Monitoring Officers to discuss visits from both departments where issues have been identified; these include notifications and complaints for example. CQC reports are also considered and any action plans evaluated across the safeguarding staff base to ensure a joined up approach. Reporting has been extended to include falls and other criteria in order to track trends and respond accordingly'

Leicestershire

Leicestershire County Council Quality Improvement team (QIT) was established in March 2012 and went live on 9 May 2012. The team provides support and interventions to providers of residential care services who are identified as in need and are accepting of the team's interventions. By raising the quality of services provided by residential and nursing care providers, the expectation was that the Adults & Communities Department would see a reduction of instances of institutional safeguarding investigations.

See below for an overview of the work of the Quality Improvement Team.

To be assured that safeguarding roles and responsibilities and outcomes are explicit in commissioning, contracting, monitoring and review of services

The SAB Compliance Audit (SAAF)

Our second SAAF process was undertaken in December 2014 with the results reported to LRSAB in April 2014. The headline outcomes were as follows:

There is a commissioning strategy for Safeguarding Adults

- Full compliance reported across 5 agencies
- Leicestershire Police reported the measure was not applicable to them
- Fire & Rescue reported the measure was not applicable to them
- UHL reported the measure was not applicable to them
- LPT reported the measure was not applicable to them
- Rutland People and Adult Services reported Working Towards Effectiveness.

Systems are in place to set Safeguarding Adults into all contracting and procurement processes.

Full compliance reported across 5 agencies

- Leicestershire Police reported the measure was not applicable to them
- Fire & Rescue reported the measure was not applicable to them
- UHL reported the measure was not applicable to them

- LPT reported the measure was not applicable to them
- Rutland People and Adult Services reported Working Towards Effectiveness.

What has been the impact of what we did?

To be assured that adults living with or receiving services from registered providers are safe and;

To be assured that providers are effective in carrying out their safeguarding responsibilities and that as a result service users are safe

Leicestershire Quality Improvement Team

A comparison of information was taken from the 10 care homes which took into consideration:

- The number of safeguarding incidents, the referral route and the outcome of the safeguarding investigation during a 12 month period previous to QIT involvement
- The number of safeguarding incidents, the referral route and the outcome of the safeguarding investigation for a period of 12 months following the end date of target support by QIT to a provider.

Of the 10 care homes included in the analysis, there are:

- 9 care homes that show a reduction in the number of safeguarding incidents (for the purposes of this report an incident is described as a specific referral relating to an overarching investigation at a home)
- There is 1 care home where the number of safeguarding incidents has increased post QIT involvement
- Overall, there is a 37% reduction in the number of safeguarding incidents in homes that have had QIT involvement
- Overall, there is a 29% reduction in the number of safeguarding incidents in homes that have had QIT involvement that were substantiated
- Overall, there is a 45% reduction in the number of safeguarding incidents in homes that have had QIT involvement that were partly substantiated
- Analysis of data on the whole shows that, whilst incidents reported by care homes remain stable in numbers, the number of referrals from other routes shows a reduction of 24% post QIT input.

Of the 10 care homes, there is 1 care home which shows a higher number of safeguarding incidents after QIT involvement than prior to QIT involvement. Because of this, and concerns around non-compliance and an unstable management team, QIT are again working with this provider. It is noted that 3 of the 5 safeguarding investigations that, to date, are still ongoing involve this provider.

Overall, the comparative data demonstrates the positive impact the team has had on

reducing the number of safeguarding incidents and the number of substantiated incidents reported on care homes which have received intervention from QIT.

It must be noted, however, that the outcomes achieved cannot be fully determined through the analysis of recorded incidents. For example, in certain care homes a positive outcome may be increased understanding of and reporting of safeguarding incidents.

To be assured that safeguarding roles and responsibilities and outcomes are explicit in commissioning, contracting, monitoring and review of services

The SAB Compliance Audit (SAAF)

Rutland People and Adult Services identified their need to work toward effectiveness in two areas: action plans were produced and work completed.

- 1. There is a commissioning strategy for Safeguarding Adults Head of Service Commissioning now in place and has reviewed contractual requirements and adjusted accordingly
- 2. Systems are in place to set Safeguarding Adults into all contracting and procurement processes – A meeting takes place every 2 weeks between the Safeguarding Team Manager and a senior from Contracts Monitoring to share information and update a risk matrix.

What do we need to do in the future?

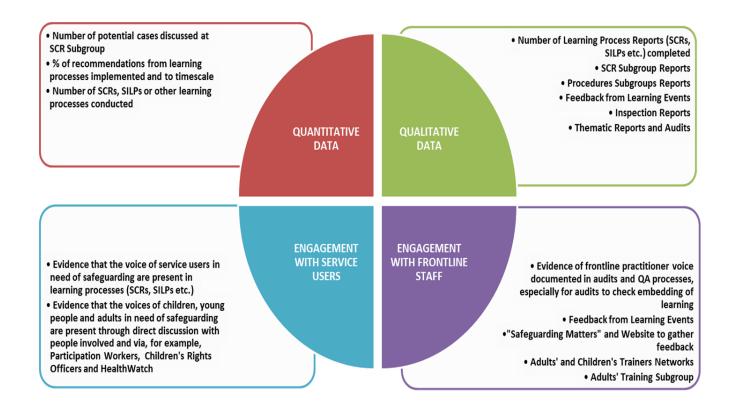
Based on our assessment of performance, and our needs identification process that formed part of our business planning process, the priorities for action in 2015/16 are set out below.

 Assurance that adults are safe in care, including residential establishments, care homes, domiciliary care and nursing homes?

More detail is provided in the full version of the Business Plan that is set out at Appendix 1.

3.5. Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for children, young people and adults

- Apply the Learning & Development Framework and ensure its effectiveness (including national SCRs)
- Ensure learning from national and regional SCRs and other learning processes is incorporated into the practice of partner agencies and the partnership
- Implement the PMF and ensure its effectiveness
- To ensure that policies and procedures are "fit for purpose"



What we did

Apply the Learning & Development Framework and ensure its effectiveness (including national SCRs)

The SCR Subgroup has continued to use the Learning and Development Framework in considering the type of review that may be undertaken to secure learning. The Subgroup has also sought assurance from relevant agencies regarding their own internal review processes.

In April 2014, the SCR Subgroup held a development day looking at how we conduct reviews and considered methods that would provide focused, inclusive and timely learning; this led to the development of a combined IMR/Chronology process and practitioner learning events, that reflected the principles of root cause analysis. The Learning and Development Framework will be updated accordingly.

Ensure learning from national and regional SCRs and other learning processes is incorporated into the practice of partner agencies and the partnership

In 2014/15, we planned to capture learning and recommendations from national SCRs and present the relevant information for Leicestershire and Rutland to the SCR Subgroup. We planned to disseminate key themes and learning points in the following ways:

 SCR learning event February 7th 2014 – highlighted the need to build confidence in practice

- Safeguarding Matters SCR Special Edition April 2014
- Learning incorporated into relevant training sessions and Trainers Networks.



Implement the PMF and ensure its effectiveness

Evidence of performance, linked to recommendations from Learning Reviews and Audits, is scrutinised by the Safeguarding Effectiveness Group (SEG) and reported to the Board.

To ensure that policies and procedures are "fit for purpose"

A major revision of Safeguarding Policies and Procedures has been carried out in collaboration with Leicester City Safeguarding Adult Board in order that safeguarding arrangements are Care Act compliant. This was a major undertaking in which all partner agencies were engaged. The work has secured frameworks that apply across the sub-region thus securing consistency for those partner agencies that work across all three Local Authority areas. The most significant changes in respect of the Multi-Agency Policies and Procedures, arising from the implementation of the Care Act, are as follows:

- The management of investigations in health care settings: it has been agreed that the existing thresholds guidance will be applied in these cases
- An individual approach to safeguarding based on the Making Safeguarding Personal programme – the Ann Craft Trust are undertaking some research in Leicestershire regarding this which will be the subject of a separate report to the SAB in due course
- No link to eligibility for services
- New sections on financial abuse, domestic violence and abuse, the needs of carers, modern slavery and forced marriage and self-neglect.

The online platform allows for linkage to other relevant local procedures, and content of the MAPP will continue to be overseen by the Procedures Group and updated biannually. Briefing materials for all staff have been prepared by the SAB Business Office and training programmes revised in accordance with the changes arising from the Act.

The new procedures are hosted online and are accessed here: http://www.llradultsafeguarding.co.uk/



What has been the impact of what we did?

Apply the Learning & Development Framework and ensure its effectiveness (including national SCRs)

Changes to methodology for reviews and the statutory requirements under the Care Act have yet to be formally evaluated for impact; however, anecdotal evidence from SCR Subgroup members suggests that new processes are welcomed by managers and practitioners.

Ensure learning from national and regional SCRs and other learning processes is incorporated into the practice of partner agencies and the partnership

The April 2014 edition of Safeguarding Matters received nationwide attention, including an article in Community Care. The distribution continues to grow, including approximately 350 providers in the independent and private sector.

Members of the Safeguarding Adults Trainers Network report that they use Safeguarding Matters in their supervision and team/unit meetings, with the content described as being relevant both professionally and personally.

Implement the PMF and ensure its effectiveness

Evidence of performance linked to recommendations from Learning Reviews and Audits is scrutinised by the Safeguarding Effectiveness Group (SEG) and reported to the Board.

To ensure that policies and procedures are "fit for purpose"

The Procedures Development Group is currently undertaking a survey of the accessibility and usefulness of the revised procedure and website; the results of this will inform any changes needed.

What do we need to do in the future?

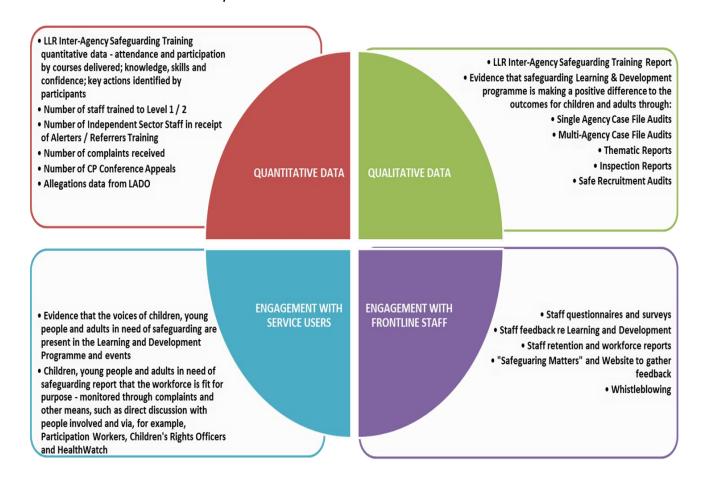
Based on our assessment of performance, and our needs identification process that formed part of our business planning process, the priorities for action in 2015/16 are set out below. Ensure that outcomes for adults are improved through the application of the Learning & Improvement Framework

- Review the Learning and Improvement Framework to ensure it is Working Together and Care Act compliant
- Seek assurance that appropriate settings are receiving and embedding appropriate recommendations from SCRs and other review processes
- Extend our capacity to provide comparative quality assurance and performance data to test performance in Leicestershire and Rutland against national and benchmark authority performance.

More detail is provided in the full version of the Business Plan that is set out at Appendix 1.

3.6. Priority 5: To be assured that the workforce is fit for purpose

- To be assured that the workforce is competent as measured by the Competency Frameworks through quality assurance
- To monitor and evaluate the effectiveness of training and development in terms of the impact on the quality of safeguarding practice and outcomes for service users
- To be assured that the workforce is safely recruited
- To be assured that allegations made against people who work with adults are dealt with effectively
- To hear the voice of practitioners



What we did

To be assured that the workforce is competent as measured by the Competency

Frameworks through quality assurance

From September 2011, the Leicestershire and Rutland SAB strategy changed to one of in-house delivery of Alerter and Referrer training with the support of:

- A Competency Framework, to guide learning, evidence practice and support managers, implemented from April 2014. All documents in relation to the Competency Framework have been disseminated through the Trainers Network and placed on the Board's website's Safeguarding Adults Learning and Development page
- A Best Practice Guide to support the role of Training/Learning Commissioner in commissioning development opportunities that meet the competencies and best standards of delivery implemented
- Evidence Log exemplars to support supervisors and managers
- The development of a Quality Assurance Framework and template to enable reporting into the Board (based on the Fitzpatrick Model consistent with the LSCB)
- Joint Children and Adults Trainers Network.

Commissioned Training from the Ann Craft Trust

During 2014/15, the Board commissioned three "Managing the Process" courses; however, the first was cancelled due to lack of participants and the latter was poorly attended. The Investigators course ran four times with full attendance.

There was a meeting with the Ann Craft Trust and Leicestershire Learning and Development to review the courses commissioned by the SAB and Leicestershire County Council.

The above courses have received consistently high evaluations and were reviewed at a meeting between the Board Office, Ann Craft Trust and Leicestershire County Council Learning and Development. Leicestershire County Council has redesigned their in-house training to reflect the change of emphasis on the Local Authority to lead/oversee the safeguarding process.

It was agreed that the Safeguarding Board focus future learning opportunities on areas in relation to the Business Plan priorities.

The Trainers Network

The Network has met four times this year with attendance between 30 and 40 and a mailing list of 350. The Network provided a forum for introducing the revised Competency Framework, updates and briefings on the Care Act 2014 and revised Multi-Agency Policy and Procedures. It also gives an opportunity to share concerns regarding practice that can be forwarded to the appropriate place.

To monitor and evaluate the effectiveness of training and development in terms of the impact on the quality of safeguarding practice and outcomes for service users

Evaluations of training have been consistently good in terms of immediate postcourse evaluation. However, evaluating longer term impact on service quality and safeguarding outcomes for adults requires a more sophisticated evaluation approach. To this end the LRSAB, alongside the LRLSCB has developed a Competency Framework against which it can better measure the impact of training and other workforce development activity.

The new Competency Framework was introduced in April 2014 and has been operational for one year.

Survey testing of the effectiveness of the changes made to the Competency Framework started in May 2015 and will be reported to the Safeguarding Effectiveness Group (SEG) in September. The outcomes of this work will be reported in our Annual Report 2015/16.

To be assured that the workforce is safely recruited

The SAB Compliance Audit (SAAF) asks the question "Does the agency have robust recruitment processes in place, including procedures under the Safeguarding Vulnerable Groups Act?"

The outcome of the SAAF this year indicates that:

- Full compliance was reported across 7 agencies
- West Leicestershire CCG & East Leicestershire & Rutland CCG reported that the measure was not applicable to them
- NHS England reported the measure was not applicable to them.

Leicestershire County Council held a "Safer Recruitment" workshop that was developed to support managers who recruit to Safeguarding posts. The pilot was attended by 13 staff from A&C, along with 6 staff from HR and 1 from CYPS.

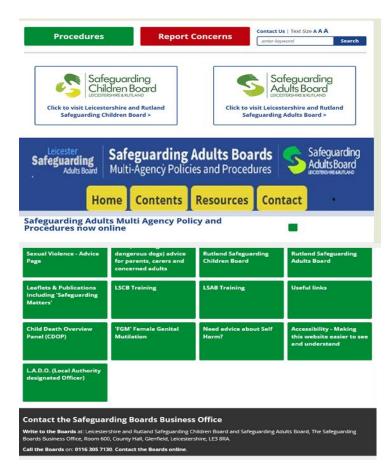
To be assured that allegations made against people who work with children and adults are dealt with effectively

The Care Act 2014 Guidance recommends that each member of the SAB should have a Designated Adult Safeguarding Manager (DASM). The DASM is responsible for the management and oversight of individual complex cases and coordination where allegations are made or concerns raised about a person, whether an employee, volunteer or student, paid or unpaid. DASMs should keep in regular contact with their counterparts in partner organisations. They should also have a role in highlighting the extent to which their own organisation prevents abuse and neglect taking place. The Board engaged in work to consider how such arrangements should be put in place in Leicestershire and Rutland and these will be

implemented during 2015/16.

To hear the voice of practitioners

A key priority for the LRSAB and a critical part of our four-quadrant QAPM model is ensuring that the staff voice is heard and that practitioners are engaged in the work of the Board. Two key platforms on which this area of our work is based have been our website and regular newsletter "Safeguarding Matters".



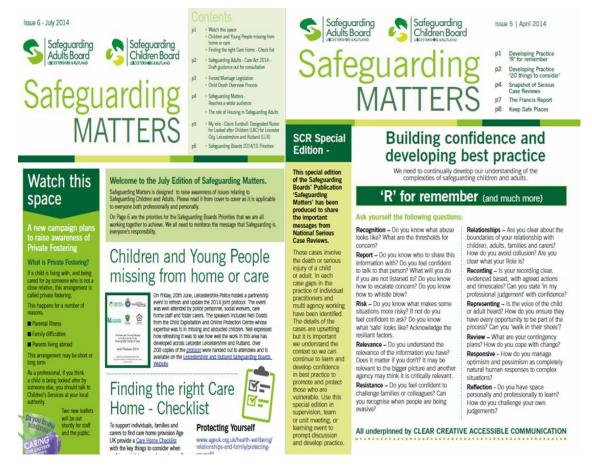
Website and "Safeguarding Matters"

The website has developed well during the year, with it being developed as a joint site with the LRLSCB.

We have used the website and "Safeguarding Matters" to assist in the delivery of every one of the five priorities in the 2014/15 Business Plan.

During the early part of 2014/15, the public-facing Safeguarding Boards Business Office (SBBO) website was reviewed regularly and improved. creating bespoke pages for particular subjects and the work of subgroups, such as CSE, Trafficking & Missing with its "Can you spot the signs" campaign targeting young people, parents,

schools and businesses. We have continued to review and improve the website in order to reach out to more people, whether they are professional or the wider public.



The "Safeguarding Matters" newsletter has continued to be published quarterly, appearing in April, July, September and December. It featured a variety of children's and adults' subjects plus news from the Boards. One edition went viral due to the interest in the April "Serious Case Review Special Edition", which generated much interest nationally with calls from across the UK requesting future publications. "Safeguarding Matters" was used to draw people into the website by sending a web link to the newsletters page, instead of to a pdf, to familiarise people with the whole website to access information and signpost to services.

The "My Role" section at the back provides a useful insight into roles of professionals across the Children's and Adults' world.

What has been the impact of what we did?

To be assured that the workforce is competent as measured by the Competency Frameworks through quality assurance

Leicestershire

All learning and development opportunities are developed in line with the multiagency safeguarding adults Competency Framework. Opportunities are targeted at staff throughout the whole authority, reflecting the fact that safeguarding is everybody's business.

The following learning and development opportunities are offered on a rolling basis throughout the year. Content is updated on an ongoing basis as a result of evaluation, case law, SCRs, local and national media, etc.:

- "Basic Safeguarding Adults & Children e-learning" is mandatory for all new starters in the council, regardless of their department or role. A total of 283 staff completed this in 2014-15.
- "Referrers' training" is for staff in Adult Social Care and Communities and Wellbeing, who are responsible for making referrals if they are concerned that an adult is experiencing abuse or harm. A total of 66 staff completed this in 2014-15.
- "Safeguarding Adults Investigations in Practice" is for staff that receive referrals and are responsible for implementing the multi-agency safeguarding adults procedures to assess and investigate allegations of abuse, and coordinate necessary actions to address any risk. A total of 25 staff attended this in 2014-15.
- "Managing Safeguarding Adults Investigations in Practice" is for managers and seniors in Adult Social Care who are responsible for overseeing the effective implementation of the multi-agency safeguarding adults procedures. A total of 10 staff attended this in 2014-15.
- "Think Whole Family" is for staff in Adult and Children Services who are responsible for supporting families to manage safeguarding concerns to either children, adults or both. A total of 53 staff attended this in 2014-15.
- "Safeguarding Adults in the Community" is for staff in Adult Social Care and Communities and Wellbeing who need to be able to identify people who may be at risk and refer on accordingly. This one day event covers Safeguarding Children, Domestic Abuse, Anti-Social Behaviour, Hate Crimes and Incidents and Workshop to Raise Awareness of Prevent (WRAP). A total of 45 staff attended these events.

These learning and development opportunities were offered on a short-term basis:

- A workshop was facilitated for Team Seniors and Locality Managers that covered topics relating to managing safeguarding adults investigations, and served as an opportunity to gather input regarding the needs of staff in social work teams.
- A "Safer Recruitment" workshop was developed to support managers who recruit to Safeguarding posts. The pilot was attended by 13 staff from A&C, along with 6 staff from HR and 1 from CYPS.

- A bespoke course was developed for Shared Lives carers, working with the Shared Lives service to ensure that content was relevant and delivered the best outcomes. This course evaluated well, and was attended by a total of 86 carers.
- Workshops were facilitated for Team Seniors and Locality Managers to support the implementation of Thresholds Guidance. A total of four workshops took place. Application of the thresholds guidance will be embedded in standard training courses from April 2015.
- Refresher sessions on "Safeguarding Adults and Risk" were run for Customer Service Agents in the Customer Service Centre.

Learning and Development with partners

- Learning & Development Service continues to provide "Referrers" and "Training for Trainers" through the Leicestershire Social Care Development Group (LSCDG). A total of 46 staff attended "Training for Trainers" and 85 attended "Referrers". These courses are for staff within the wider sector in Leicester, Leicestershire and Rutland.
- L&D and the Safeguarding Adults Team Manager delivered 2 x 2 hour sessions to 3rd Year Social Work students at the University of Leicester. These evaluated well and learners stated the information would help them in their placements and when qualified.
- Leicestershire Social Care Development Group coordinated a Care Summit for wider sector providers in Leicester, Leicestershire and Rutland - topics covered include Care Act, Deprivation of Liberty Safeguards, Leadership and Workforce Development. Learning & Development Advisors worked with operational managers in Adult Social Care to run workshops and presentations. A total of 124 delegates attended the event.
- L&D and the L&R Safeguarding Adults Board coordinated a conference titled "Improving Quality in Care" – speakers included QIT Officers, the Independent Chair of the Safeguarding Adults Board, and a supported living resident who is leading Dignity and Engagement work in his home. Workshops covered recruitment, retention, performance management and service user engagement. A total of 61 delegates attended.

Development work

Provision of MCA/DOLS training for the wider sector through the LSCDG was reviewed due to the contract with the current provider reaching an end – a brief was developed alongside operational managers, a tendering process was carried out and a new provider will be in place from April 2016.

- Provision of Safeguarding Adults specialist courses in-house ("Safeguarding in Practice" and "Managing Safeguarding Adults in Practice") was reviewed due to the contract with the current provider reaching an end – a brief was developed alongside operational managers, a tendering process was carried out and a new provider will be in place from April 2016. Materials will be aligned to the Care Act and updated LLR policy and procedures.
- Provision of a new course, "Safeguarding Adults and MCA/DOLS", has been arranged with dates beginning in September 2015. This is an in-depth two day course exploring the complexities of safeguarding adults and issues of capacity. Senior staff have been prioritised for attendance in order to commence embedding best practice in locality and specialist teams.
- From April 2015, "Referrers" training will no longer be run as a separate course in-house: Leicestershire County Council staff will join the multi-agency course run through the LSCDG. This will enhance multi-agency working and develop positive relationships with partners.
- Materials have been developed to support the implementation of the Care Certificate. This supports developing and evidencing the competence of the health and social care workforce and includes specific modules on safeguarding adults and children. Materials will be shared internally and with the wider sector at a series of workshops throughout 2015-16.
- All learning and development materials have been updated in preparation for the implementation of the Care Act 2014 from April 2015. Learning and Development Service have shared relevant materials in multi-agency forums such as the Safeguarding Adults Trainers Network.

Plans for 2015-16

- Learning & Development Service will be delivering DASH (Domestic Abuse, Stalking and Harassment) training to staff from Adult Social Care and Children & Family Services. This will increase the efficacy of multi-agency working and develop relationships throughout the authority.
- The MCA Improvement Project is funding four multi-agency Staff Exchange events a year. These events will offer practitioners a forum to develop best practice and explore the complexities of working with the Mental Capacity Act and Deprivation of Liberty Safeguards on a daily basis.
- The MCA Improvement Project is also funding additional capacity to deliver support to in-house and partner agency staff accessing the BIA Award. This will result in an increase in the number of BIAs locally, and a more rigorous and intensive approach to supporting new and existing BIAs through the development of a new BIA approval panel.

Evidence that the voice of adults in need of safeguarding is present in learning and development programme and events

The voice of adults at risk and their carers are included in learning and development provision by the use of Serious Case Reviews to inform materials for delegates, such as case studies and scenarios. Materials developed in conjunction with service users are also used, such as film clips from the SCIE website. Staff members are also supported to attend external events such as conferences and training courses, where appropriate, that may include guest speakers and experts by experience.

Evidence that the voice of front line practitioners is present by: Staff feedback regarding learning and development

- PDR process
- Evaluation process both initial impact and longer term impact measured following learning & development opportunities
- Relationships between L&D and A&C at both strategic and operational level, leading to development of bespoke provision where necessary – for example. Thresholds Guidance workshops being organised for Locality Managers then extended to Team Seniors following feedback from staff groups.

Rutland

- All Adult Teams have identified a Safeguarding Lead to ensure that the Multi-Agency Policy and Procedures are embedded in practice. These leads meet regularly and enable all practitioners to maintain their awareness of safeguarding issues and having a forum to learn from safeguarding investigations and debate issues around adult safeguarding.
- Public awareness of Adult Safeguarding and who to report concerns with is being raised by plans for the public to use the internet to raise concerns.
- RCC have delivered safeguarding training for HealthWatch volunteers.
- Care Act and safeguarding training was rolled out for all staff.

Work to be progressed

A range of work is in progress to further develop and enhance training and workforce development. This includes:

- LRSAB commissioning more targeted multi-agency training to support Board Priorities and Care Act compliance
- Joint working with the City Board regarding:
 - LLR Safeguarding Adults Learning Effectiveness Group
 - Agreeing Quality Assurance templates

- Programme of Audits (to avoid duplication)
- Review of the Trainers Network
- Publishing a programme of Learning and Development activities (with LSCB/City SAB)
- Clarification of the reporting requirements for the Performance Management Framework in relation to Learning and Development from the statutory sector
- Clarification of the reporting and Quality Assurance requirements of the Independent Sector (link with compliance arrangements)
- Calculating the resources required to implement the strategy.

To monitor and evaluate the effectiveness of training and development in terms of the impact on the quality of safeguarding practice and outcomes for service users

Survey testing the effectiveness of the changes made to the Competency Framework, started in May 2015, and this will be reported to the Safeguarding Effectiveness Group (SEG).

Improving Standards in Care Conference – 9th December 2014

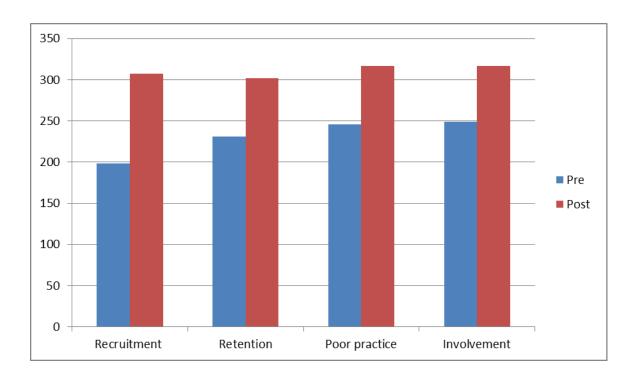
As mentioned earlier in this report, a key event for the LRSAB during 2014/15 was the "Improving Standards in Care Conference" held in December 2014. This was attended by over 60 delegates from care home providers across Leicestershire and Rutland and positively evaluated by those that attended. Some further detail of the evaluation is set out below.

Quantitative evaluation:

We asked participants to rate their skills and knowledge on a scale of 1 - 10 before and after the conference in relation to the following topics:

Safer recruitment, retaining and developing staff, tackling and identifying poor practice and involving service users and carers in running their service

The graphs below show the responses:



Qualitative evaluation:

We also asked participants to give us some qualitative feedback about the event, as detailed below.

Was there anything you found particularly useful abo	ut the conference?
All of the topics	Very interesting
All areas were useful	Exposed to a variety of views and practices
The whole day was very productive	Very stimulating and empowering
Generally useful all round	Being able to discuss
Found everything very good	Free links to websites and tools
All the sessions were informative	Interesting points discussed
It was all very useful and informative	Very interactive, made it enjoyable
The practical workshops, being able to move around	Enjoyed getting ideas from others at the workshops
and share ideas	
It was interesting to recap and get together with	It was useful hearing from other organisations having
other providers to hear similar problem	the same issues and concerns
Service user engagement x2	All really useful sessions –involving service users was
	particularly helpful
Safer recruitment x5	Safer Recruitment was the most useful workshop
Very insightful recruitment tips	Recruitment session – useful resources

Safer Recruitment practices	Recruitment was very useful for me
Safer recruitment – very enlightening	All really useful sessions – value based interviewing
	was particularly helpful
Retention x3	Retaining staff was very useful for me
Types of management styles (leadership)	Session on poor practice was very useful

Was there anything that you would change about the	conference?
A little bit more interactive sessions	I would like them more frequently to keep motivated
Less breaks – run from session to session	Perhaps add in the tension between being service user focused yet not ignoring the personal needs of staff
More information on the actual process of recruitment	Very well organised. Got lots of useful information
Developed advocacy workshop to include people with dementia	Shorter afternoon break/lunch to get an earlier finish

Are there any topics that you would like more L&D op	portunities about in the future?
Personal budgets	Management
It would be good listening to more of safer	Developed advocacy workshop to include people with
recruitment as the facilitator was very knowledgeable	dementia
Recruitment x3	Care Act
This was a general conference with greater bias	Communication with the media – getting good
towards institutions, however a session focused on	practice celebrated locally and nationally
domiciliary care is much needed as they have	
particular issues to be addressed	
Performance management	Staff supervision – how to get the best out of the
	process
Leadership courses for senior staff	Leadership in healthcare
I would like this kind of training to be more often	

The Safeguarding Boards are developing their Business Plan for the next three years. What do you feel are the priority areas for Safeguarding Adults and multi-agency working?				
Thresholds	More monitoring checks			
Better networking	Faster feedback to managers following referrals			
Workshops to look at processes / procedures /	Awareness - multi-agency working and its importance			
thresholds for safeguarding				
Case reviews	Safeguarding training			
Improve communication timescales from	Bringing teams together – MDT and multi-agency =			
Safeguarding teams to providers on action they are	working towards a seamless service			
taking and when cases will be closed				
Service user meetings	Policy audits			
Agencies working together (sharing information)	Clear procedures to report things, who to and what			
	exactly			
Positive role models	Communicating to private sector			
Examples of good practice celebrated	Good communication and information exchange			
Maintain good rapport and communication to private	People in the centre, service users but also staff			
sector				
TRUST – multi-agency working – we are still treated	Privacy, dignity and respect in <u>all</u> services			
with suspicion when alerting				
Developing a service user friendly Safeguarding				
Matters				

To be assured that the workforce is safely recruited

As set out above a key question included in the Safeguarding Adults Assessment Framework (SAAF) is 'Does the agency have robust recruitment processes in place, including procedures under the Safeguarding Vulnerable Groups Act?'

- Full compliance was reported across seven agencies
- West Leicestershire CCG & East Leicestershire & Rutland CCG reported that the measure was not applicable to them
- NHS England reported the measure was not applicable to them.

To hear the voice of practitioners

Website and "Safeguarding Matters"

The front page "banner" of the website is used to highlight current or important issues linking via a click of the mouse directly to the page/subject in question.

Website hits:

- 1st April to 30th June 2014 24,503, with 18 new pages, 157 page approves
- 1st January to 31st March 2015 30,326, with 16 new pages, 159 page approves
- Overall = 102,590 views throughout the 12 month period.

In addition to the SBBO website, a stand-alone Domestic Homicide Review website was created to host any published DHR reports on behalf of the Community Safety Partnership. This received 3,615 views over this period.

"Safeguarding Matters" was published four times during the business year including the Serious Case Review special edition in April 2014. It continues to be well received and the (web link) distribution list is ever increasing.

What do we need to do in the future?

Based on our assessment of performance, and our needs identification process that formed part of our business planning process, the priorities for action in 2015/16 are set out below. More detail is provided in the full version of the Business Plan that is set out at Appendix 1.

Embed the new Training Strategy and develop an Adult Training Subgroup across LLR to

- Be assured that the adult safeguarding training Competency Framework is understood and accessible to all practitioners
- Seek assurance that supervision of workers and cases is good
- Seek assurance that caseloads across the partnership are appropriate and manageable.

Website

We need to ensure that sufficient resources are put into the website and "Safeguarding Matters" to maintain the standard of the content. Although it is a Leicestershire/Rutland publication, it covers many LLR subjects and often covers national issues as with the SCR edition.

Chapter 4: Serious Case Reviews

SAB SCR Subgroup Report

The role of the SAB SCR Subgroup is to receive information from agencies about serious incidents of abuse and to consider a review process to ensure multi -agency learning is captured and implemented. This includes consideration of the need for Safeguarding Adult Reviews (SARs) previously referred to as Serious Case Reviews. However, review processes can extend beyond the SAR arena and include Serious Incident Learning Processes (SILPs) and other forms of review, where there is a view that learning and improvement can be secured from such work.

The Subgroup continues to retain full and appropriate membership from key partners and attendance levels are good.

No SCRs were recommended or undertaken during 2014/15 but a number of single agency reviews have been discussed and multi-agency discussions were held to inform practice. This is felt, by all members, to be a valuable resource provided by the Subgroup as an opportunity for partnership reflection and support together with learning and improvement.

National reports and SCR recommendations are also considered at meetings, most importantly, to consider if there is learning and action to be taken to address key findings in the Leicestershire and Rutland contexts. This year particular focus has included the Winterbourne View and Mid Staffordshire Hospital action plans. Regular reports have been presented to secure assurance that local actions are meeting national requirements and recommendations.

The Terms of Reference (ToR) for the Subgroup have been refreshed and a new multi-agency referral form, for SCR or Learning Review consideration by the Subgroup, has been developed. Readiness for the Care Act has also been reviewed with partner agencies. Multi-agency Policy and Procedures have been refreshed to reflect the expectations of the Care Act ready for implementation in April 2015.

The Joint Children and Adults SCR Subgroup also has oversight of Domestic Homicide Reviews (DHRs), commissioned the Community Safety Partnership. Two DHRs were completed for review by the Home Office in March 2014. Both reviews were judged to be "adequate" (the classification is either "adequate" or "inadequate"). Both reviews were published in 2014.

An Alternative Enquiry Review was also commissioned as a result of a Domestic Violence incident and this enquiry is currently ongoing.

Domestic Homicide Reviews (DHRs)

Domestic Homicide Reviews are a statutory requirement upon Community Safety Partnerships. In Leicestershire & Rutland, this process is managed in conjunction with other safeguarding learning processes through the Safeguarding Boards' Serious Case Review Subgroup.

During 2014/15, two Domestic Homicide Reviews (DHRs) were completed and published in Leicestershire County. The action plans are monitored by the Leicestershire Safer Communities Strategy Board and its Domestic Abuse Partnership on behalf of Community Safety Partnerships. However, the SCR Subgroup aims to incorporate learning from DHRs into its Learning and Improvement Framework to ensure coordinated implementation of action from its SCR and DHR processes as appropriate.

A key purpose of Homicide Reviews is, of course, to improve responses to domestic abuse.

The action plans resulting from the two Domestic Homicide Reviews in Leicestershire contained specific actions for individual agencies and multi-agency actions for the safeguarding boards and domestic abuse partnership.

There were a number of single agency actions relating to reviewing staff awareness, training and policies and procedures with regard to domestic abuse. This has been supported by a multi-agency action to endorse and roll out the use of a single risk assessment approach to domestic abuse and develop multi-agency guidance. The Safeguarding Boards endorsed the use of the Safe Lives (formerly CAADA) Domestic Abuse Stalking & Harassment (DASH) risk indicator checklist and have supported a multi-agency roll-out of it by providing resource to initiate a sustainable training programme, including train-the-trainer sessions.

The Safeguarding Boards had specific actions to incorporate the learning from the DHR into their review processes and ensure all agencies:

- (a) Review information sharing processes
- (b) Review procedures regarding consideration and involvement of specialist agencies with regard to mental health and substance misuse
- (c) Review record keeping and recording with regard to safeguarding.

These have all been completed.

At the end of the year almost all single agency actions were completed, though some updates are still awaited:

(a) Police to confirm all actions relating to "Mary" DHR are complete and that learning from "FN" DHR has been disseminated

- (b) Swanswell to confirm whether all relevant staff have received DASH training
- (c) Leicestershire County Children's Social Care to complete case audit to check compliance with supervision policy with regard to case closure.

At the end of the year, all multi-agency actions for the domestic abuse partnership were completed apart from the following:

Dissemination of a multi-agency practitioner guide to domestic abuse

This has now been finalised and published on the Safeguarding Boards' website.

We are aware that some agencies have used this as a basis for internal practice guidelines.

Domestic abuse is covered within multi-agency case management processes

This has not been carried out due to capacity in the Leicestershire County Community Safety Team. This has now been scoped to be completed this year in line with work on pathway development.

Finalising a framework of pathways for domestic abuse support

Work on this is underway, linked to the commissioning of Leicester, Leicestershire & Rutland joint services for those affected by domestic abuse and sexual violence.

Determining an approach to working with businesses to develop employment policies regarding domestic abuse

This has not been carried out due to capacity in the Leicestershire County Community Safety Team. An approach will be determined by the end of this calendar year.

Chapter 5: Looking Forward to 2015/16

This Annual Report sets out in detail the work that the LRSAB has undertaken during 2014/15, with an analysis of the impact on service performance and safeguarding outcomes for adults in Leicestershire and Rutland.

Much has been achieved across the partnership of agencies that make up the Boards. However, our learning and improvement processes identify what now needs to be done, both to sustain and develop our work and to respond to new challenges that have arisen through national and local change.

The Board has set out its intentions for the next year in its new Strategic Plan and Business Plan published in April 2015. Our priority actions have been identified against a range of drivers. The drivers include:

- National policies strengthening safeguarding arrangements and the roles of SABs, including the Care Act 2014
- Recommendations from inspections that have been undertaken in member agencies
- Peer reviews/challenges undertaken as part of the East Midlands arrangements
- The outcomes of SCRs/SARs and SILPs emerging from both national and local reports
- Evaluations of the impact of previous Business Plans and analysis of need in Leicestershire and Rutland, including the Joint Strategic Needs Assessments (JSNA) carried out in both counties
- Key areas of safeguarding specific to Leicestershire and Rutland as evidenced by quality assurance and performance management data
- Priorities for action emerging from QAPM operated by the board
- Responses to the views of stakeholders, including the outcomes of engagement activities with children and young people
- Best practice reports.

We have continued the business planning model introduced in 2014/15 which aligns the Business Plan with the QAPM, the budget and our risk registers.

We have retained the same key strategic priorities as last year but the specific actions identified under each key strategic priority are set for 2015/16. These are as follows:

Priority 1: To be assured that "Safeguarding is Everyone's Responsibility"

Priority 2b: To be assured that adults in need of safeguarding are safe, including assurance of the quality of care for any adult supported by registered providers

Priority 3: To be assured that services for children, services for adults and services for families are effectively coordinated to ensure children and adults are safe

Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for children, young people and adults

Priority 5: To be assured that the workforce is "fit for purpose".

Priorities that crosscut the LRLSCB and LRSAB

We have also developed a number of objectives which underpin our work across both Safeguarding Boards:

- Safeguarding services are coordinated
- The voices of children and adults are heard
- The voices of staff are heard
- Sub-regional and regional coordination will be maximised
- Effective communication must underpin all Board activity.

A detailed Action Plan has been produced to support the implementation of work against each of these priorities. A full copy of our Business Plan for 2014/15 is attached at appendix 1.

The effective delivery of these strategic objectives will rely, as always, on the leadership of our Board members and on the support of frontline staff across the partnership. I look forward to the continuing commitment of these groups in the next year and beyond, so that we can continue to be confident that safeguarding is everyone's business and that children, young people and adults in Leicestershire and Rutland will be safe.

Paul Burnett

Independent Chair, Leicestershire and Rutland Local Safeguarding Children **Board and Safeguarding Adults Board**

Appendix 1



Leicestershire and Rutland Safeguarding Adults Board Business Plan 2015-16

This Plan is in the process of being updated following feedback from the Board, Scrutiny Groups etc.

For the most recent version please go to:

http://lrsb.org.uk/scbannualreports

Effective from: April 1st 2015

Review dates: Quarterly Review: July, October, January

Introduction

I am pleased to present the LRL SAB Business Plan for 2015/16. The Plan is intended primarily to set out the key outcomes and impact that the Board wishes to achieve across the next year to ensure that adults in Leicestershire and Rutland are safe. It does not show business as usual items unless they are addressing an issue that has been highlighted for specific or remedial work within 2014/15.

Following three integrated LSCB and SAB Business Plans that we have presented since agreement more closely to align the two Safeguarding Boards in 2012, this year we revert to a Plan that seeks to clearly show the work of the two Boards as independent business units. The Plans still maintain a number of priority issues that are common to both Boards. The decision more clearly to distinguish the business of each Board is being driven by the fact that both Boards are now subject to statutory frameworks that are different. The LRLSCB is also subject to review by Ofsted and this has implications for the Quality Assurance Frameworks that each Board works to.

The formulation of this Business Plan has been undertaken with the engagement of members of both Boards and other stakeholders. It aims to articulate the key improvement objectives that will underpin our work in the period 2015/16 and, most importantly, to set out the actions that will be taken to address these priorities. This increased emphasis on specific actions is also intended to ensure that we are more explicit about the outputs, outcomes and impact that the Boards intend to achieve. This, we believe, will further strengthen our ability to quality assure, performance monitor and risk manage the work of the Boards and their impact on safeguarding service delivery and on safeguarding outcomes for children, young people and adults.

The priorities in this Business Plan have been identified against a range of national and local drives including:

- National policy drives to strengthen safeguarding arrangements and the role of SABs
- Recommendations from regulatory inspections
- The outcomes of Serious Case Reviews (SCRs) and Serious Incident Learning Processes (SILPs) and other learning review processes – emerging from both national and local reports
- Evaluations of the impact of previous Business Plans and analysis of need in Leicestershire and Rutland
- Priorities for action emerging from Quality Assurance and Performance Management arrangements operated by both Boards
- Responses to the views of stakeholders including the outcomes of engagement activities

Best practice reports issued by Ofsted, ADCS and ADASS.

Having considered these matters members of the Boards have agreed to reflect the five priorities within our Performance Management Framework within this Plan. These priorities are:

Priority 1: To be assured that "Safeguarding is Everyone's Responsibility"

Priority 2b: To be assured that adults in need of safeguarding are safe, including assurance of the quality of care for any adult supported by registered providers

Priority 3: To be assured that services for children, services for adults and services for families are effectively coordinated to ensure children and adults are safe

Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for children, young people and adults

Priority 5: To be assured that the workforce is fit for purpose.

This Business Plan sets out the key actions proposed to support work in support of these objectives with a view to further enhancing the impact of the two Boards in supporting improved outcomes in safeguarding the children, adults and communities of Leicestershire and Rutland. Safeguarding is everyone's business. Never has it been more critical for LSCBs and SABs to show strong, robust and effective leadership in securing the safeguarding and well-being of our communities. This Business Plan is intended to set a clear framework within which this leadership can be delivered. The collaborative support of all agencies is essential to securing the impact this Business Plan seeks.

I commend the Plan to all partners and look forward to your support in achieving our goals.

Paul Burnett

Independent Chair, Leicestershire and Rutland LSCB and SAB

Priorit	Priority 1: To be assured that "Safeguarding is Everyone's Responsibility" Board member sponsor:						
Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
1.1.1	Be assured that the Board and partner agencies are fully compliant with the Care Act	Delivery of the Care Act Work Plan, including:	Audit partner's implementation of the Care Act SCIE SAB Care Act Checklist: DASM Contact list SAR Process	Executive Group	March 2016		
1.1.2	Be assured that effective Board arrangements remain in place to provide strategic leadership	Review of adults' Business Plan to ensure it is Care Act compliant Review structure of Adults Safeguarding Board Subgroups to ensure priorities discussed at the Board development session can be met	Audit the Board against the SCIE recommendations for the operation of SABs Attendance at SAB	Executive Group	July 2015		

1.1.3	Be assured that the Better Care Together programme incorporates, promotes, measures and evaluates safeguarding outcomes within its improvement plans	Clearly identify the measures and indicators of safeguarding benefits that can be delivered through the Better Care Together Programme and agree with BCT a Quality Assurance and Performance Framework that will enable this to be reported appropriately Ensure a two way flow of information between the SAB to the BCT Board	Reports to the LSCB and SAB twice per year that identify safeguarding outcomes	Board	March 2016
1.2.1	Enable members of the public in Leicestershire and Rutland to be aware/understand what constitutes a safeguarding concern/alert/referral with a view to increasing appropriate reporting	Deliver an awareness raising media campaign through website and other media to enable a better understanding of Safeguarding Adults To gauge the appetite to complete this action on a LLR basis and respond accordingly Monitor the ratio of safeguarding alerts and referrals between statutory and community settings	Public awareness by increased website traffic The number and proportion of alerts and referrals that arise from statutory/regulated services and those from the community	Engagement Group	Media campaign delivered by December 2015
1.2.2	Enable elected members in Leicestershire and Rutland to be aware/understand what constitutes a safeguarding	Deliver an awareness raising session to elected members within Leicestershire and within Rutland	The number of Elected members trained	Executive Group	December 2015

	concern/alert/referral				
1.3	Listen to and report what members of the public say about their experience of safeguarding, and evidence how these views impact on Board priorities and plans of action. The engagement activity of the Board will also be increased	Promote the extension of service user engagement within and across agencies and ensure that the SAB is sighted on the outcomes of this work Better joining together of work around public "listening" in agencies; this to include commissioners and providers in health Run direct engagement events to supplement the information from partner organisations Engage with Healthwatch and other service user bodies to ensure that safeguarding issues are included in their work and the Board is sighted and acts on the findings of this work	The quantity and quality of engagement activity across Leicestershire and Rutland Making Safeguarding Personal (MSP)	Engagement Group	March 2016
1.4	All agencies are compliant with safeguarding standards and expectations as monitored through the Safeguarding Adults	Sustain currently compliant performance and improve levels of compliance where agencies self-assessed themselves and were not fully compliant in the 2015 audit	SAAF audit 2016	Executive Group	March 2016

Assurance Framework			

Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
2b.1	Assurance that thresholds are understood and provide proportionate assistance and risk management to adults in need of safeguarding	Monitor referrals – core data set to be defined to ensure understanding and assure safety Ensure effective system in place to provide feedback to referrers by LA – monitor number of feedback forms through PMF to SEG	The quantity and quality of feedback forms The outcome of a thresholds audit	Executive SEG	December 2015		
2b.2. 1	Implementation of the new Care Act compliant safeguarding procedures across Leicestershire and Rutland and assure ourselves that they are effective	Publish the procedures online via Policy Partners and update the procedures following initial feedback Produce new training resources to support the roll out of the new procedures Deliver multi-agency training	Feedback on the procedures via direct contact forms Number of visits to the procedures website	Procedures Subgroup	October 2015 March 2016		

Priority 2b: To be assure	ed that adults in need of safeguarding are safe, including assurance of the quality of care for any adult supported by
registered providers	Board member sponsor:

	1 224544			14/1 11/1 10	T	I	
Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
2b. 2.2	Ensure that the Self Neglect element of the Care Act Compliant procedures are fit for purpose	Convene an LLR Task and Finish Group to produce the safeguarding procedures	Compare the procedures produced with the developing guidance and procedures nationally, updating where appropriate	Procedures Subgroup	March 2016		
2b. 3	Assurance that Safeguarding adults process is robust within care, including residential establishments, care homes, domiciliary care and nursing homes?	Request quarterly reports as part of the Performance Monitoring Framework	Monitor through CQC data and contract compliance data – report through PMF and SEG Invite Leics and Rutland Contracts and Compliance to SEG to present evidence ("deep dive")	SEG	Quarterly		
2b. 4	Assurance that adults are safe in the community	Scrutinise the performance data from the Local Authorities and the NHS	Monitor referral rates as proportion of all referrals and monitor through PMF and SEG	SEG	Quarterly		

Priority 2b: To be assure	ed that adults in need of safeguarding are safe, including assurance of the quality of care for any adult supported by
registered providers	Board member sponsor:

registe	egistered providers Board member sponsor:						
Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
2b. 5	Assurance that DoLS are effectively managed to ensure safety of adults without capacity	Scrutinise the performance data from the Local Authorities and the NHS	Monitor number and trends and report through PMF to SEG	SEG	Quarterly		
2b. 6	Be assured that the increasing number of DoLS referrals can be managed across Leicestershire and Rutland	Seek assurance from across the partnership that DoLS referrals are being managed effectively and within timescales without increasing risk due to increased workloads	Reported via the Performance Management Report	SEG/Executive	Quarterly		
2b. 7	Participate in the NHS England MCA/DoLS Programme to contribute to improvements in the implementation of MCA and DoLS across Leicestershire, Rutland, Leicester City and Lincolnshire	Receive quarterly reports on the progress and impact of the Programme's 5 work streams	Programme evaluation process	SEG/Executive	Quarterly		
2b. 8	Be assured that recommendations from 'Transforming Care' (Winterbourne)	Request quarterly reports as part of the Performance Monitoring Framework	Monitor repeating of compliance audit with recommendations through PMF to SEG	SEG	Quarterly		March 2016

	Priority 2b: To be assured that adults in need of safeguarding are safe, including assurance of the quality of care for any adult supported by registered providers Board member sponsor:						
Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
	are fully embedded in safeguarding practice		No of Safeguarding referrals ASCOF – Leaning Disability Results of MSP interviews				

Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
3.1	Female Genital Mutilation (FGM): Reduction in number of girls who suffer from FGM Increase in identification of girls at risk of FGM Increased community awareness of risks of FGM in identified communities	Continue to develop pathways and procedures for services to girls at risk of, or who experience, FGM Raise awareness with public about FGM – media campaign Raise awareness amongst agencies about potential vulnerability of these girls Monitor through agreed core data set Work with communities at identified highest risk	Agreed core data set through the SEG Number of referrals for FGM UHL – number of referrals to social care	FGM Task and Finish Group SEG	December 2015		

Priority 3: To be assured that services for children, services for adults and services for families are effectively coordinated to ensure children and adults are safe Board member sponsor: _______

Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
3.2	Prevent – Channel: Reduction in number of young people involved in terrorism Increase in identification of young people at risk of becoming involved in terrorism Increased community awareness of young people at risk of becoming involved in terrorism	Seek assurance from the Anti- Social Behaviour Strategy Group that the Prevent Strategy is being delivered appropriately Monitor through agreed core data set	Agreed core data set through the SEG Number of Channel meetings	Executive Group	July 2015		
3.3	Transition to adult services: Disabled young people successfully transition to be supported in adult services	Monitor the contribution of all agencies to Care leavers and young people transitioning to adult services and ensure that good practice is disseminated, risks identified and mitigated Ensure engagement with young people and adults at risk Ensure engagement to assure of the effectiveness of services	Agreed core data set through the SEG (impact and outcomes) Feedback from young people and adults at risk Feedback from front line practitioners in SEG Q4 meeting	SEG	December 2015		

	Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for children, young beople and adults Board member sponsor:						
Ref.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
4.1.	Ensure that outcomes for children and young people are improved through the application of the Learning and Improvement Framework	Ensure that learning from audit, SCRs and other reviews is shared and embedded Increase methods of delivering and sharing key messages	Test the impact of learning	SCR Subgroup	December 2015		
4.1.	Review the Learning and Improvement Framework to ensure it is Working Together and Care Act compliant	Convene a LLR Task and Finish Group to review the Framework	Review the completed Framework to ensure it is Care Act and Working Together compliant	SCR Subgroup	December 2015		

Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for children, young people and adults Board member sponsor: _____

Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
4.2	Seek assurance that appropriate settings are receiving and embedding appropriate recommendations from SCRs and other review processes	Identify existing communication channels that are used by organisations such as the NHS Colleagues to provide relevant information	Request feedback from a sample of settings	Executive Group	March 2016		
4.3	Extend our capacity to provide comparative quality assurance and performance data to test performance in Leicestershire and Rutland against national and benchmark authority performance	Extend the QA and PM Framework to include appropriate comparator information	Present comparative data and information as part of the quarterly reporting process	SEG	July 2015 onwards		

Prior	Priority 5: To be assured that the workforce is fit for purpose Board member sponsor:						
Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
5.1	Embed the new Training strategy and develop an adult training Subgroup across LLR	Establish a new Subgroup to jointly plan LLR adult safeguarding training	The quality and quantity of training offered	Executive	March 2016		
5.2	Be assured that agencies are compliant with Competency Framework	Ensure all practitioners understand the Framework and test how easily understood and accessible practitioners find the Competency Framework Seek and use feedback on existing Framework and how to improve accessibility, e.g. electronic tool	Audit compliance and understanding across a range of provider agencies through reports	SEG	March 2016		
5.3	Seek assurance that supervision of workers and cases is good	Agencies are required to audit the quality of safeguarding supervision delivered in their agency	Report on the results of the audit	SEG	End Q3		

Prior	riority 5: To be assured that the workforce is fit for purpose Board member sponsor:						
Ref. no.	In 2015/16 we want to achieve:	To achieve this, we will:	To evidence this, we will measure:	Who will lead?	Timescale	Risk	Progress
5.4. 1	Be assured that LA caseloads are appropriate and manageable	Collect and analyse caseload data and compare with statistical neighbours to produce a baseline to measure against	Present the findings to SEG	SEG	December 2015		
5.4.	Seek assurance that caseloads across the rest of the partnership are appropriate and manageable	Collect performance information from across the partnership and analyse	The QA statements from the partner organisations	Executive	March 2016		

APPENDIX 2



ADASS	Association of Directors of Adult Social
	Services
APC	Adult Protection Conference
APP	Adult Protection Plan
BCF	Better Care Fund
BIA	Best Interest Assessor (Mental Capacity Act)
CAMHS	Child and Adolescent Mental Health Services
CareFree Project	Barnardo's Young Carers' Service
CCG	Clinical Commissioning Group (two in area: East Leicestershire and Rutland and West Leicestershire. There is also a CCG for Leicester City)
CFS	Children and Family Service (formerly CYPS)
CHC	Continuing Health Care
CJX	Criminal Justice Extranet
CPC	Child Protection Conference
CPP	Child Protection Plan
CQC	Care Quality Commission
CSE	Child Sexual Exploitation
CSP	Community Safety Partnership
CYPS	Children and Young People Service (for Leicestershire and the Services for People in Rutland)
CYPSC	Children and Young People Social Care
DASH	Domestic Abuse, Stalking and Harassment
DASM	Designated Safeguarding Adults Manager
DCLG	Department of Communities and Local Government
DFE	Department for Education
DHR	Domestic Homicide Review

DoH Department of Health DoLS Deprivation of Liberty Safeguards DV Domestic Violence EMAS East Midlands Ambulance Service EMCARE East Midlands CARE FE Further Education Colleges FGM Female Genital Mutilation Fil Fabricated and Induced Illness FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LCC Leicestershire Fire and Rescue Service LGG Local Government Ombudsman	DLNR CRC	Derbyshire, Leicestershire, Nottinghamshire and Rutland Community Rehabilitation Company
DV Domestic Violence EMAS East Midlands Ambulance Service EMCARE East Midlands CARE FE Further Education Colleges FGM Female Genital Mutilation FII Fabricated and Induced Illness FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HHMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire Fire and Rescue Service	DoH	
EMAS East Midlands Ambulance Service EMCARE East Midlands CARE FE Further Education Colleges FGM Female Genital Mutilation FII Fabricated and Induced Illness FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HHMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire Fire and Rescue Service	DoLS	Deprivation of Liberty Safeguards
EMCARE East Midlands CARE FE Further Education Colleges FGM Female Genital Mutilation FII Fabricated and Induced Illness FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority Local Authority Local Authority Designated Officer LCC Leicestershire Fire and Rescue Service	DV	Domestic Violence
FEM Further Education Colleges FGM Female Genital Mutilation FII Fabricated and Induced Illness FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council	EMAS	East Midlands Ambulance Service
FGM Female Genital Mutilation FII Fabricated and Induced Illness FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council	EMCARE	East Midlands CARE
FII Fabricated and Induced Illness FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LAC Local Authority Designated Officer LCC Leicestershire County Council	FE	Further Education Colleges
FM Forced Marriage FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council	FGM	Female Genital Mutilation
FSR Factual Summary Report FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	FII	Fabricated and Induced Illness
FWI Framework-I (UK Social Services Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	FM	Forced Marriage
Casework Management System/Database) GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LAC Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	FSR	Factual Summary Report
GCSX Government Connect Secure Extranet GSi Government Secure Intranet HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	FWI	Casework Management
HealthWatch HealthWatch has statutory powers to ensure the voice of the consumer is strengthened and heard Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	GCSX	
ensure the voice of the consumer is strengthened and heard HMIC Her Majesty's Inspectorate of Constabulary HMIP Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	GSi	Government Secure Intranet
HMIC Her Majesty's Inspectorate of Constabulary Her Majesty's Inspectorate of Prisons HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS	HealthWatch	ensure the voice of the consumer is
HO Home Office IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	HMIC	Her Majesty's Inspectorate of
IDVA Independent Domestic Violence Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	HMIP	Her Majesty's Inspectorate of Prisons
Advocacy IMR Independent Management Review ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	НО	Home Office
ISA Information Sharing Agreement JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	IDVA	
JSNA Joint Strategic Needs Assessment LA Local Authority LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	IMR	Independent Management Review
LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	ISA	Information Sharing Agreement
LAC Looked After Children LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	JSNA	Joint Strategic Needs Assessment
LADO Local Authority Designated Officer LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	LA	Local Authority
LCC Leicestershire County Council LFRS Leicestershire Fire and Rescue Service	LAC	Looked After Children
LFRS Leicestershire Fire and Rescue Service	LADO	Local Authority Designated Officer
	LCC	Leicestershire County Council
LGO Local Government Ombudsman	LFRS	Leicestershire Fire and Rescue Service
	LGO	Local Government Ombudsman

LLEP	Leicester and Leicestershire Enterprise Partnership
LLR	Leicester, Leicestershire and Rutland
LPT	Leicestershire Partnership NHS Trust
LRLSCB	Leicestershire and Rutland Local Safeguarding Children Board
LRSAB	Leicestershire and Rutland Safeguarding Adults Board
LRSB	Leicestershire and Rutland Safeguarding Boards
LSCB	Local Safeguarding Children Board
LSCDG	Leicestershire Social Care Development Group
MAPPA	Multi-Agency Public Protection Arrangements
MARAC	Multi-Agency Risk Assessment Conference
MASH	Multi-Agency Safeguarding Hub
MCA	Mental Capacity Act
NHS	National Health Service
NPS	National Probation Service
NSPCC	National Society for Prevention of Cruelty to Children
Ofsted	Office for Standards in Education, Children's Services and Skills
PCC	Police and Crime Commissioner
PMR	Performance Management Review
PNN	Police National Network
RCC	Rutland County Council
SAB	Safeguarding Adults Board
SAR	Safeguarding Adult Review
SBBO	Safeguarding Boards Business Office
SCIE	Social Care Institute for Excellence
SCR	Serious Case Review
SEG	Safeguarding Effectiveness Group
SILP	Significant Incident Learning Process
SSOTP	Staffordshire and Stoke-On-Trent Partnership NHS Trust
Swanswell	Alcohol, Drug and Support Services

ToR	Terms of Reference
UHL	University Hospitals of Leicester NHS Trust
VAL	Voluntary Action LeicesterShire
VAR	Voluntary Action Rutland
VARM	Vulnerable Adult Risk Management
VCS	Voluntary and Community Sector
Vista Blind	Voluntary Agency – offer services and support to the blind and visually impaired in Leicestershire and Rutland
YOS	Youth Offending Service

