Safeguarding Adults Task Group - Response

Adult and Community Services responded initially to the report of the task group and has discussed this at the Safeguarding Board. The Board and PCTs have also provided responses to this which compliment the response from Adult Social Care as the lead agency.

This report provides members with an update of actions and activity (see text in italics) previously provided. Extracts from the previous response have been included for ease of reference.

Safeguarding within Hospitals

• The Safeguarding Board has commissioned a piece of work to develop Multi-Agency thresholds guidance which will be used to inform the content of training. The safeguarding coordinator is due to report to the Board at the end of July 2010 with a draft scope for this document and proposals to set up a multi-agency working group which will include PCT and Acute Hospital representatives. The task group report has highlighted the benefit of coordinating this work across local authority boundaries.

The Thresholds work is progressing and has highlighted the need for a common definition. Health organisations tend to take a wider view of safeguarding which incorporates general aspects of patient safety, whereas Adult Social Care's focus is those incidents which concern acts of abuse and gross omission. At its last Board meeting at the beginning of December, it was agreed that the thresholds document would focus on the scope defined by Adult Social Care and would provide a decision-making framework for agencies to signpost how concerns would need to be managed. It was also agreed that partner agencies would then be responsible for providing examples of how abuse may manifest itself in their various agency settings.

For example, in a hospital setting this may be unexplained or frequent injury, evidence of neglect in terms of personal presentation or failures to attend to health care plans.

Calderstones Hospital that supports people with complex learning disability needs has been particularly active and helpful in developing this work.

• With the growth in alerts, Personal Social Care Services are proposing within their restructuring plans to provide greater focus and discreet capacity on screening. This will allow the Directorate and its partners to gather better evidence and intelligence on the source of alerts and the "path" alerts follow. The task group has identified this as an area of concern within hospitals. This will also allow us to feedback to referrers and take corrective action with commissioners of services.

and

The Directorate shares the task group's concerns re safeguarding systems out of hours. There is a major commitment to better agency communication and risk management systems for vulnerable people who are in contact with out-of-hours services. This has been highlighted in the action plan produced from the inspection. Access to client record systems for adults with mental health problems is also being improved for Directorate staff to aid information sharing.

Personal Social Care Services have now agreed their new structure and investment has been made in a screening and intake service that will be operational from 4 January 2011. One of the existing Safeguarding Adults Managers will support the new team in screening safeguarding referrals. Having all the alerts screened in just two teams linked to the Customer Service Centre will improve the recording of the source of alerts. Amendments to the recording system have been made and are to be tested in January 2011.

Work has also started to improve access to Police and health information at this point in the process, which will ensure that fuller information is available to those making decisions as to how to respond to the concern. As the customer service centre starts to extend its operating hours this will be of great benefit to hospitals where safeguarding concerns often present outside of office hours.

 The Board has agreed a set of 16 standards and performance indicators to ensure its priorities are met and numbers and type of hospital alerts are included as a key indicator.

In the absence of any current national performance indicators, the Board has trialled a set of indicators. It is fair to say that having analysed available data, some of these need to be adjusted as the current systems do not give a complete picture.

Enhancements have now been made to the system and are about to be "road-tested" by operational staff. Enhancements provided greater information on source of alert, so it will be easier to specifically identify hospitals within the health category.

 The proposed re-structure within Personal Social Care Services will also facilitate a countywide approach to hospital discharge which should lead to a more consistent pathway for safeguarding alerts and referrals. The systems for "flagging" vulnerable people will form part of the protocols developed with partners in this workstream.

This is in the very early stages as key management personnel have only recently been appointed within Personal Social Care. However, it has been agreed that all safeguarding concerns, once screened will be managed by the Active Intervention and Safeguarding Service.

 Acute Hospitals have active representation within the Board's governance structure at the Area Leadership Group Level. These are organised on a PCT footprint and are chaired at a senior level by the Directorate's Service Managers and are responsible for raising operational standards in safeguarding across the partnership.

Area Leadership Groups are working well and have good representation from local Hospital Trusts, including the Mental Health Trust (at Board level) Trusts have been supported to update their own internal procedures and have been keen to improve practice.

 The Safeguarding Adults Board's multi-agency policy, procedures and guidance have been refreshed and provide greater clarity on "what" and "how to" alert. The process mirrors the integrated approach detailed in appendix A of the report.

Commitment has been given to extend the very successful "learning circle" approach to include partner agencies. This has had a significant impact on practice and confidence within Personal Social Care Services as it allows practitioners to talk through procedures/issues with real cases with support from Advanced Practitioners.

 The guidance contains an information sharing protocol. The Board has agreed to re-visit this at a future date informed by feedback and learning from the Area Leadership Groups.

This work still needs to be progressed. However, developments at the Intake and Screening level will mean that the inter-agency sharing of information will be re-visited quickly. Protocols can be adapted from the work within the Children and Young People screening services at the Customer Service Centre.

Governance

The Board's new sub-structures are working well and the Area Leadership Groups have become robust operational forums for statutory agencies. The Safeguarding Adults Local Networks are extending involvement to wider stakeholder groups.

Inevitably there are significant changes in personnel in all organisations at the current time but responsibility to support the structure is integral to new roles and responsibilities within Personal Social Care.

The Directorate hosted an event for all three Safeguarding Adult's Boards on 3 June 2010 to consider the implications of the Law Commission's review of social care legislation. This event was well attended by senior members from organisations and a detailed joint response to the review was made. This concurred with the task group's view which recommends the provision of a statutory basis for boards. Whilst initial feedback from the review of "No

Secrets" has heralded a statutory footing for Adult Boards, no further detail has been forthcoming.

The Directorate chairs a multi-agency training sub-group to the Board and has devised a strategic approach and standards for all agency training.

An audit of all partner agencies against competencies is nearing completion and an inter-agency e-learning package tailored for Lancashire for basic awareness and reporting has been commissioned. This will allow all partner agencies to access training in the workplace.